



AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS

Health Savings Account (HSA)

Instructions:

Use this form to adjust your payroll deduction amount for contributions to your HSA account. Changes may be made at **any time** during the **benefit year (July 1 – June 30)** or **calendar year (January 1 – December 31)**. **Please read the notes below carefully before completing the form.**

Employee Name: _____

Employee ID #: _____

Current HSA Contributions for the calendar year: \$ _____

(You can check your contribution balance by accessing your online Optum Financial Account or through your Premera Account.)

I authorize Walla Walla University to deduct pre-tax contributions from my paycheck and deposit them into my HSA account as indicated below. This authorization will remain in effect unless I submit a new form to HR.

Bank Name	Annual Contribution Amount
Optum Financial	\$ _____

Select one:

- New Authorization
- Change to Current Authorization

Signature: _____

Date: _____

MM/DD/YEAR

Notes:

- **IRS 2025 Limits:** Individual \$4,300 | Family \$8,550 | Age 55+ may add \$1,000.
- **IRS 2026 Limits:** Individual \$4,400 | Family \$8,750 | Age 55+ may add \$1,000.
- **WWU Contribution:** Individual \$650 | Family \$1,300 (pro-rated if hired after July 1).
- **HSA contribution limits are based on the calendar year (Jan–Dec) and include both WWU and employee amounts.** Ensure your elected amount does not exceed the IRS annual limit.
- If you enroll mid-year, your maximum contribution is **prorated** based on the number of months enrolled in the HDHP.
- If you become ineligible for the HSA, notify HR immediately.