



2024 HEALTH SAVINGS ACCOUNT Payroll Deduction Form

- → If you want to make contributions to your HSA in 2024, you MUST turn in a Payroll Deduction Form.
- → Return this form to Human Resources 1923 Moore Street

1. Your Name (please type or print):
2. Your Qualified High Deductible Plan Coverage level: Single Family
3. 2024 Health Savings Account Contribution: \$ per paycheck

Annual contribution limits in 2024:

- An individual can contribute up to \$4,150 in 2024.
- An individual with family coverage can contribute up to \$8,300.
- You can contribute an additional \$1,000 if you are 55 or over.
- Contribution limits include employer and employee contributions. The 2024 Juniata contribution (\$700 single/\$1,400 family) counts towards your maximum HSA contribution.

There may be tax consequences if HSA contributions exceed the applicable annual limit.

4. Authorization

By signing this application, I represent that:

- 1) I am covered under a high deductible health plan (HDHP) in 2024;
- 2) I am not covered by any other health plan that is not an HDHP;
- 3) I am not enrolled in Medicare;
- 4) I cannot be claimed as a dependent on another person's tax return. I understand that if my spouse is enrolled in a general-purpose Flexible Spending Account, I am not eligible to contribute to an HSA.
- 5) I understand that my HSA cannot be effective prior to my HDHP coverage date.
- 6) I authorize my employer to deduct the elected amount from my pay on each pay date, beginning in January 2024. I hereby represent that all personal information and selections made are correct.

YOUR SIGNATURE:	DATE SIGNED: