HSA PAYROLL DEDUCTION FORM

Completion of this form authorizes the State of South Dakota to make a payroll deduction and transfer the funds into your Health Savings Account at Discovery Benefits. Your contribution will be sent directly to Discovery Benefits with proof of contribution appearing on your Discovery Benefits statement. Enrollment in the High Deductible Health Plan and Discovery Benefits HSA are required to process the payroll deduction.

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| **AUTHORIZATION FOR PAYROLL DEDUCTION****I AUTHORIZE THE STATE OF SOUTH DAKOTA TO MAKE A PAYROLL DEDUCTION FROM MY PAYCHECK TO MY DISCOVERY BENEFITS HSA.****Employee Information:** |
| (Employee Name - Please Print) |  | (Daytime Phone #) |
| (Street / PO Box) |
| (City) | (State) | (Zip Code +4) |
| (Employee Health Plan ID, Central Government Employee #, or SSN)Pre-Tax Payroll Deduction Amount Per Pay Period: $ * Until further notice ☐ One time only

**Calendar Year Contribution Limit 2020 2021**Single Coverage: $3,550 Single Coverage: $3,600Family Coverage: $7,100 Family Coverage: $7,200I UNDERSTAND THIS ELECTION AMOUNT WILL REMAIN IN FORCE UNTIL I CHANGE OR END IT BY COMPLETING A NEW FORM. I FURTHER UNDERSTAND IT IS MY RESPONSIBILITY TO MONITOR MY HSA AND UNDERSTAND THE CALENDAR YEAR LIMITS SET BY THE IRS. |
| (Employee Signature) (Date)**\*Pre-tax payroll deduction occurs the first payroll cycle after we receive the completed form.** |

**Please Note:** Beginning January 1, 2021, the state will no longer monitor employees' HSA contributions. Refunds will not be disbursed through payroll in the event of an over-contribution and/or mistaken contribution. Contribution limits for the year can vary on a variety of factors, which is why we strongly encourage you to consult with your tax advisor if you are unsure or have questions regarding your HSA contribution limits.

Or

Mail to: Bureau of Human Resources Benefits Program

3800 E Highway 34, Suite 1

Pierre, SD 57501

Please return the form to:

Email: benefitswebsite@state.sd.us