

# Lapeer Community Schools

## Employee Health Savings Account (H.S.A.) Contribution Authorization Change Form

Your MESSA ABC plan allows for you to add, change or stop your Health Savings Account (H.S.A) contribution on a per pay basis each calendar year. If you are interested in making a change to your Health Savings Account (H.S.A.) in the next allowable pay period, please complete this form and forward it to **BENEFITS DEPARTMENT ATTN: KRISTEN JEANS IN AN INNER OFFICE ENVELOPE MARKED CONFIDENTIAL OR HAND DELIVER TO ASC.**

Please indicate your H.S.A. employee contributions change on a per pay basis for the pay period listed below:

Amount   New  Change  Cancellation  Effective Pay Date

I authorize Lapeer Community Schools to deposit my contribution amount automatically to my designated H.S.A. account each pay period beginning with the date indicated above. I understand that this H.S.A. contribution change is irrevocable and cannot be stopped or adjusted until I request another change.

\_\_\_\_\_  
*Employee Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Employee # / H.S.A. Account #*

\_\_\_\_\_  
*Please Print Employee Name and Daytime telephone Number*

**Please note:**

Maximum Contribution for H.S.A. for 2023 calendar year is \$4,150/Single or \$8,300/Family  
Catch up Contribution: For those age 55 or older a contribution up to an additional \$1,000 is allowable

All questions and/or changes regarding H.S.A. contributions should be forwarded to the Benefits Departments: Attention Kristen Jeans