HEALTH SAVINGS ACCOUNT
CERTIFICATION OF HSA ELIGIBILITY

EMPLOYEE NAME:____
(Last) (First) (Middle)

ADDRESS:____
(Street) (City) (State) (Zip)

SOCIAL SECURITY NUMBER:__________________________ EMPLOYEE NUMBER:_________________________

EMPLOYER: ____ PLAN YEAR BEGINNING:______________________

I understand to be eligible to contribute or have contributions made on my behalf to a health savings account I must meet all the following conditions:

1. **I have ___ individual coverage or ____ family coverage, either under the group health plan sponsored by my employer, if any, or under an arrangement with an independent insurance provider, which I understand qualifies as a high deductible health plan ("HDHP") under section 223 of the Internal Revenue Code.**
2. **If I have coverage other than my coverage under the group health plan sponsored by my employer or through an independent insurance provider, that coverage is either (a) HDHP coverage; or (b) permitted non-HDHP coverage or insurance.** ***Caution:*** *General-Health Flexible Spending Accounts (FSA) and General-Health Reimbursement Arrangements (HRA) through your employer or a spouse's employer are group health plans that may provide first dollar coverage that will disqualify you from HSA eligibility. Please refer to your Summary Plan Description for more details.*
3. **If I am married, my spouse does not have family coverage other than (a) HDHP coverage; or (b) permitted non-HDHP coverage or insurance.** ***Caution:*** *General-Health Flexible Spending Accounts (FSA) and General-Health Reimbursement Arrangements (HRA) through your employer or a spouse's employer are group health plans that may provide first dollar coverage that will disqualify you from HSA eligibility. Please refer to your Summary Plan Description for more details.*
4. **I cannot be claimed as the tax dependent of another person**.
5. **I am not entitled to (enrolled in) Medicare benefits** (Part A, Part B, Part C or Part D).
6. **I am responsible for determining the tax effect of contributions to my HSA by me or on my account and for determining the tax effect of distributions from my HSA.**

By signing and submitting this form to my Employer, I certify that all of the above statements are true. I understand that I am not eligible for HSA contributions during any month in which I do not meet all of the HSA eligibility conditions. I also understand that my Employer will forward contributions to my HSA on my behalf on the basis of this certification and I will notify my Employer immediately in writing if I cease to meet any of the above conditions. I understand that all contributions to my HSA are subject to certain aggregate limits under federal tax law.

Date: __________________________ ____
Employee's signature

HSA Terms and Related Information

What is a Health Savings Accounts (HSA)

A Health Savings Account (HSA) is an account that you can put money into to save for future medical expenses. The HSA account must be established with a HSA custodial trustee (usually a bank). There are certain advantages to putting money into these accounts, including favorable tax treatment. HSAs were signed into law by President Bush on December 8, 2003.

Who Can Have an HSA

Any adult can contribute to an HSA if they:

- Have coverage under an HSA-qualified "high deductible health plan" (HDHP)
- Have no other first-dollar medical coverage, including self insured health plans like general health flexible spending accounts (FSA) and general health reimbursement arrangements (HRA). Other types of insurance like specific injury insurance or accident, disability, dental care, vision care, or long-term care insurance are permitted.
- Are not entitled (not enrolled) in Medicare (Part A, Part B, Part C or Part D).
- Cannot be claimed as a dependent on someone else's tax return.

Contributions to your HSA can be made by you, your employer, or both. However, the total contributions are limited annually. If you make a contribution, you can deduct the contributions (even if you do not itemize deductions) when completing your federal income tax return.

Contributions to the account must stop once you are enrolled in Medicare. However, you can keep the money in your account and use it pay for medical expenses tax-free.

High Deductible Health Plans (HDHPs)

You must have coverage under an HSA-qualified "high deductible health plan" (HDHP) to open and contribute to an HSA. Generally, this is health insurance that does not cover first dollar medical expenses. Federal law requires that the health insurance deductible meet the minimum threshold each year and the annual out-of-pocket expenses under the plan (including deductibles, co-pays, and co-insurance) cannot exceed the maximum thresholds each year. Annual limits and minimum deductibles and maximum out-of-pockets are made available by the IRS on or before June 1st of each year for the next year. In general, the deductible must apply to all medical expenses (including prescriptions) covered by the plan. However, plans can pay for "preventive care" services on a first-dollar basis (with or without a co-pay). "Preventive care" can include routine pre-natal and well-child care, child and adult immunizations, annual physicals, mammograms, pap smears, etc.

2012 Annual HSA Contribution Limit

Self-only: $3,100 Family: $6,250

HDHP Limits:

Minimum Deductible: Self-only: $1,200 Family: $2,400

Maximum Out-of-pocket: Self-only: $6,050 Family: $12,100

Catch Up Contribution: $1,000 (Individual over the age of 55)

- **Annual Contribution Rules.** Individuals who are HSA eligible individuals on the first day of the last month of the taxable year (December for most taxpayers) are allowed the full annual contribution (plus catch up contribution, if 55 or older by year end), regardless of the number of months the individual was an eligible individual in the year, **so long as they remain HSA eligible for the following 12 months after the tax year ends.** For individuals who are no longer eligible individuals on the first day of the last month of the taxable year or do not remain HSA eligible for the entire 12 months following the tax year, both the HSA contribution and catch up contribution apply pro rata based on the number of months of the year a taxpayer is an eligible individual.