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INDIANAPOLIS

HSA and 403(b) Withholdings Form

Employee name: _____

Social Security Number: _____ Date of Birth: _____

Health Savings Account Employee Contribution

In 2021 participants in a qualifying high deductible health plan, including the Cigna Open Access Plus CDHP 15 and CDHP 20 plans, may make combine employer and employee contributions to a health savings account (HSA) of \$3,600 for single coverage, or \$7,200 for family coverage, pro-rated for the proportion of the year the participant was covered by a qualifying plan. Employees over age 55 may make an additional \$1,000 per year catch-up contribution. In 2021, the Diocese of Indianapolis will make contributions of \$1,400 or \$2,800 for participants with single or family coverage, respectively, paid quarterly, and pro-rated for the start date of the employee's coverage.

Employee HSA contribution: \$_____ per pay period OR _____% of salary

403(b) Contribution

In 2021, employees are permitted to contribute up to \$19,500 to their 403(b) retirement account. Employees over age 50 may contribute an additional \$6,500 per year.

Employee 403(b) contribution: \$_____ per pay period OR _____% of salary

By signing, employee certifies authorization of the withholding amounts specified above, and acknowledges that mid-year changes to the withholding amounts must be made in writing, and will become effective the subsequent calendar month.

Signature: _____ Date: _____