

HEALTH SAVINGS ACCOUNT (HSA)



800 S. BUFFALO ST. WARSAW, IN 46580 / 574-269-1552 / WWW.WILDMANBG.COM

THIS FORM IS TO ADD, CHANGE, OR CANCEL HSA DEPOSIT. Must be turned in to the Human Resources Department by Thursday, 12:00 pm, of the end of the pay period. All changes **must** be in writing.

How to Open Your Account

1. Go to theHSAauthority.com. Click **Open an HSA**.
2. The internet browser notice will appear.
Click **Proceed to Application**.
3. Select the option **If you have been instructed by your employer...** When prompted, enter your six-digit employer code (**138061**). If you are not with an employer group, select **All others click here**.
4. Click **Continue** and complete enrollment. Submit the application and you'll receive a confirmation number.
5. A welcome letter will arrive in the mail within 10 business days of your application and should be retained for your records.
6. If you requested a debit card, it will be mailed separately. If checks are requested, the order is held and processed after your balance reaches \$25.00.

Please check the appropriate box:

☐ New Account

☐ Change Amount

☐ Cancel

Name(s) on bank account

Bank Name

Bank Router Number

Bank Account Number

\$

New HSA Deposit Amount

I only have one direct deposit account currently setup in payroll, by initialing here I am stating that I want this account canceled.

Current Account in Payroll: Cancel _____

Authorization:

Employee Name (Print)

Employee Signature

Date

OFFICE ONLY

Rev. Date:

Entry Date: