

2027 HSA Enrollment & Contribution Election

Administrative Professional (AP) and Educational Support Professional (ESP)

INSTRUCTIONS

Complete Sections 1-3 and sign Section 4. Payroll completes Section 5. Use your AP or ESP HSA Contribution & Match Schedule to identify the applicable university amounts. Enter dollar amounts, not percentages. You may elect less than the maximum match.

1 Employee and Coverage Information

Employee name: _____ Employee ID: _____

Employee group: ☐ AP ☐ ESP Enrollment: ☐ Open Enrollment ☐ New Hire

Health plan: ☐ HD 1750 ☐ HD 3000 ☐ HD 6350 Coverage: ☐ Single ☐ 2 Person/Family

2 Front-Loaded HSA Contributions

Refer to the AP or ESP schedule. The elected employee match may range from \$0 to the maximum.

A. University base contribution (no employee contribution required) \$ _____

B. Maximum university matching contribution available \$ _____

C. Employee matching contribution elected (up to line B) \$ _____

D. University matching contribution (equal to line C) \$ _____

3 Employee Deduction Worksheet

Line C is front-loaded and repaid through remaining 2027 pays (maximum 24). Additional voluntary amounts are deducted each pay and deposited the following week.

E. Remaining pay periods in 2027 (maximum 24) _____

F. Matching deduction per pay (line C divided by line E) \$ _____

G. Additional voluntary contribution per pay \$ _____

H. TOTAL EMPLOYEE DEDUCTION PER PAY (F + G) \$ _____

4 Employee Authorization

I authorize LSSU to deduct the amount on line H each pay period for the remaining 2027 pays. I understand that my employee matching contribution is front-loaded and repaid through payroll, while additional voluntary contributions are deposited after each pay period. If my employment ends before my employee matching contribution is fully repaid, I authorize LSSU to deduct the unpaid balance from my final paycheck, to the extent permitted by applicable law.

Employee signature: _____ Date: _____

5 Payroll Verification / Processing

Verified remaining pays: _____ Per-pay deduction entered: \$ _____

Effective pay date: _____ Processed by / date: _____