



AMERICAN BENEFITS GROUP

CLIENT INFORMATION FORM - HEALTH SAVINGS ACCOUNT

Company Profile

Legal Name of Organization: _____ Broker of Record: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Executive Officer (signer): _____ Title: _____

Email Address: _____ Telephone: _____

Website URL: _____ Employer Fed Tax ID#: _____

of Years in Business: _____ Date Established: _____

State of Incorporation: _____ # of Years at Location _____

Affiliated Employers (list): _____ None

Organization Type (please check): Privately Owned Publicly Owned

Ownership Structure (please check): Principal Ownership Under 25% Principal Ownership Over 25%

Type of Incorporation (please check): Non-Profit Organization Government Agency
 Partnership* Sole Proprietorship* LLC (Limited Liability Company)*
 Sub-chapter "C" Corporation Sub-chapter "S" Corporation* Other _____

* **Note:** Subchapter S Corporation shareholders above the 2% level **may not** participate, but they may sponsor a plan for their employees. In addition, family members and close relatives of these shareholders **may not** participate. LLC, LLP and Sole Proprietors **may not** participate, but may sponsor a plan for their employees. However, if the spouse is a bona fide employee of the firm, he or she may participate and use the benefit for the entire family.

Type of Business (please check): Business to Business Business to Consumer
 N/A Government Agency N/A Non-Profit International Presence Yes



Health Savings Account

Administrative

Effective Date of The Plan: Date you would like us to begin administration of this plan: _____

HR / Administrator Contacts

* ABG can provide access to our WealthCare Administration system for Employer Plan Administrators. Those being provided with access should either have been designated as a privacy officer, or have been cleared for access to Protected Health Information (PHI) per HIPAA requirements.

** Scheduled Reports include information about individual bank accounts and funding.

Scheduled reports in the system do not contain PHI or Personal Information (PI).

		Authorized for access to the HR administration system?*	Receive Scheduled Reports? **
Primary HR:	Title:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Email:	Tel:		
Payroll:	Title:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Email:	Tel:		
Billing/Finance:	Title:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Email:	Tel:		
Broker Contact:	Title:	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No
Email:	Tel:		

HSA Enrollment

Enrollment Options

- ABG Online Enrollment:** During your yearly open enrollment period, employees apply for their HSA bank account using ABG's WealthCare Portal. Using this method they will complete their application by signing all the necessary bank disclosures during enrollment. Please note upon renewal, employees do not need to apply/enroll in the HSA. ABG will only need to be alerted to those who no longer qualify to contribute to their HSA, or have terminated employer with your company.

(no census file is needed for this method, enrollees create their own demographic records in the system)

- Your Own Enrollment Method:** Collect enrollments using your own method. Once employees are entered into our system they will receive notifications from Avidia bank prompting them to complete their HSA Bank Account Application.

You may submit your enrollment data either by:

- Using ABGs [HSA Submission Spreadsheet](#)
- or*
- Ongoing eligibility file feed via your HRIS vendor.

HRIS / Enrollment System : _____

HSA Payroll Funding

Employee Contributions

Employee Payroll Frequency: Monthly (12) Semi-Monthly (24) Bi-Weekly (26) Weekly (52)

First payroll date in the plan year: _____

Will The Employer Make Contributions? Yes No

Frequency: Yearly (1) Monthly (12) Semi-Monthly (24) Bi-Weekly (26) Weekly (52)

First employer contribution date in the plan year: _____

HSA Funding Methods

Direct Deposit (preferred method):

- This method allows your payroll department/company to deposit contributions directly to employee's HSA bank accounts.
- Once employees' Avidia HSA bank accounts are open, ABG will send your Funding Contact a file listing each participant's new HSA bank account and routing number.
- Your payroll company should be provided with these HSA account numbers, which should be set-up in their system to allow all elected HSA contributions to be deposited directly to the participant's Avidia HSA bank account.
- The funds will be available on the participants ABG Benefits Card within 2 days.

Secure File

- A File can be used both for Employer and/or Employee funding: You may submit funds by completing this funding template http://amben.com/demos/HSA/ABG_HSA_FundingTemplate.xls securely email to processing@amben.com.
- Please make the Effective date equal to the payroll date. If you submit funding on this file, please submit three days prior to payroll date to assure funds will be in employees accounts on their payroll date.

HSA IRS Limits	Single	Family
2017 Maximum Contribution	\$3,400	\$6,750
2018 Maximum Contribution	\$3,450	\$6,900
Catch-up Contribution (age 55+)	\$1,000	\$1,000

Please ensure that the HSA funding you request us to process conforms to these maximums.

Terminated Employees

If one of your employees, who was enrolled, in an HSA, should terminate employment with you, you must notify ABG of the termination by emailing processing@amben.com. ABG will process the termination of the employee's HSA under the employer's benefit options and will re-associate the employee's HSA to our alternate **ABG HSA**. This will allow the employee to maintain access to their HSA balances.

1. Terminated employees with HSA balances will be provided with a new ABG Benefits card (**myHSAver** will be embossed on the front of this card), which they should use going forward, to access their HSA funds.
2. If an employee has checks associated with their HSA, these checks are still valid for their new account.
3. The employee will need to re-register their HSA account in the WealthCare Portal under the ABG HSA, to continue to manage their HSA on line. ABG will send terminated employees a notification once they have been located under the ABG HSA.
4. Going forward, a monthly fee in the amount of \$4.00 will be levied against the employees HSA account, as long as the employee has funds remaining in the account.

Active Employees who cease to qualify for the HSA

As an employer, you have two options for handling the administration of the HSAs of your employees who cease to qualify for the HSA (because they are no longer covered under the HDHP). Please check the option you would like.

- Let the employee's HSA account remain active under the employer's benefit options, but cease processing contributions to the HSA. In this case:
- You, the employer will continue to pay the monthly PEPM fee for the administration of this HSA and this will be reflected in the monthly invoice from ABG.
 - The employee will be able to continue to access balances in their HSA using the same ABG Benefits Card that they use for any other benefit options ABG is administering for this employee.
 - Your employee will be able to login to view their HSA accounts using the same login that they are using to access any other active benefit options ABG is administering for the employer.

Or,

- Notify ABG that the participant is no longer covered under the HDHP and that the HSA benefit offered by the employer should be terminated for this employee (this is for cases where the employee continues to be your active employee). You will no longer be billed for this employee's HSA. In this case, ABG will:
- Re-associate the employee's HSA to our alternate **ABG HSA**.
 - ABG will issue a new ABG Benefits Card (**myHSAver** will be embossed on the front of this card), going forward, this card is the only card that can be used to access funds in the HSA.
 - The employee will be notified that they will need to create a separate login to manage their HSA (they will continue to access all other active accounts under their employer login using the card that was issue under their employer).
 - The employee will have a monthly fee of \$4.00 assessed against balances in their HSA.

