



2026 CDHP Health Savings Plan (HSA) Flyer

Ventura Unified School District employees who choose to enroll in either the Anthem Blue Cross CDHP PPO 90 or Kaiser Permanente CDHP DHMO 90 health plans are eligible to establish and contribute to a Health Savings Account (HSA) to help cover qualifying medical, dental, and vision care expenses.

VUSD employees who are enrolled in a CDHP plan will have the option to contribute to their HSA pre-tax through voluntary deductions, or post-tax on their own through direct deposit transfers their Health Savings Account. While voluntary employee contribution to your HSA is not required, employees may want to contribute in order to increase their overall HSA account.

To contribute to your HSA, you will need to complete the 2026 [VUSD HSA Deduction Form](#) and return to Risk Management/Insurance no later than the 5th of the month in order for the deduction to be processed for the following pay period.

Voluntary employee HSA contributions can be changed at any time, but employees must submit changes by the 5th of the month for those changes to be reflected on the next paycheck. For example, in order for a voluntary HSA deduction to come out of your January 2026 paycheck, we will need your HSA deduction form no later than January 5th, 2026.

Total HSA total yearly contributions cannot exceed IRS guidelines. Total yearly HSA contributions include:

- Employer Contributions to employee's HSA-please note there are no negotiated District contributions to employee health savings accounts for 2026.
- Employee voluntary contributions to an HSA
- Any spouse/domestic partner contributions to their own HSA if you and your spouse/domestic partner dual-insure each other's HSA-qualifying health plans.

It is up to the employee to ensure that their total HSA contributions do not exceed the guidelines set by the IRS.

The total yearly HSA contribution is set forth by the IRS each year. [The total yearly IRS HSA contribution for 2026 is:](#)

Tier	Under Age 55	Over Age 55
Individual	\$4,400	\$5,400
Family (2 or more covered)	\$8,750	\$9,750

Employee HSA Payroll Deduction Form

Return completed forms to:
ESC- Risk Management/Insurance
 Ventura Unified School District
 Attn: **Jodie Argueta**
jodie.argueta@venturausd.org
 805.641-.5000 x1242



HSA Contribution Limits and Contribution Calculator					
2026 Annual Maximum HSA Contributions					
Age Band	Coverage Type	Total Annual Contribution*			
Total Annual Employee HSA Contribution	-	Employer Contribution	=	Total Eligible Employee Amount	
\$	MINUS	\$		\$	
Total Eligible Employee Amount	/	Remaining number of pay periods:	=	Per-Pay Period Max Withholding	
\$	DIVIDED			\$	

Eligibility and contribution limits to your health savings account (HSA) are determined by the effective date of your high-deductible health plan (HDHP). If you're covered as of December 1, you're considered an eligible individual for the entire year and you're not required to pro-rate your contributions and can deposit the full IRS maximum for that calendar year. If you cease to be an eligible individual during the next calendar year, any funding over the prorated amount is considered an excess contribution and subject to a penalty and income tax. For further information or to review eligibility, please contact your Benefits Department.

Employee Information and Authorization	
Employee Name	Last 4 of SSN or Employee ID
Please withhold: \$ _____ from my monthly payroll and apply the funds to my HSA.	
Payroll Cycle:	Year: ☐ 2026
☐ January ☐ February ☐ March ☐ April ☐ May ☐ June ☒ July ☒ August ☐ September ☐ October ☐ November ☐ December	
Signature	Date