



## Election Form

**Employee Name:** \_\_\_\_\_

	DPRD Contribution	DPRD to match Employee Contribution	<b>Employee Election</b>	Employee Maximum Contribution
Family	\$1,400.00	\$1,000.00		\$5,900.00
Couple	\$1,200.00	\$1,000.00		\$6,100.00
Parent + Child/ren	\$1,100.00	\$1,000.00		\$6,200.00
Single	\$500.00	\$500.00		\$3,150.00

2024 Health Savings Account (HSA) Maximum Contribution  
 Single \$4,150/yr.      Family \$8,300/yr.

	Maximum Employee Contribution		<b>Employee Election</b>
Limited Flex Spending Account	\$3,200/ year	Can only be used for Dental and Vision expenses.	

\*Use or loss, \$610 carry over for 3 months

**If you are NOT participating in the High Deductible Health Plan, you can participate in traditional flex spending account.**

	Maximum Employee Contribution	<b>Employee Election</b>
Flex Spending Account	\$3,200/ year	

**\*Use or loss, \$610 carry over for 3 months**

**\*\*HSA, LFSA and FSA Contributions are pre-tax.**

**\*\*Please return to Patty by Tuesday, December 6, 2024**