

## 1. I understand we are moving to a new provider (WEX) for the Health Savings Account. What happens with my current account (Health Equity)?

### **Health Equity HSA Options Effective January 1, 2023**

UCP is transitioning administration of its Health Savings Account (HSA) administration from Health Equity to WEX effective January 1, 2023. Because HSAs are individually owned bank accounts, UCP is not permitted to manage these funds on your behalf. HSA account owners will need to decide what to do with their existing Health Equity HSA.

**Your options are:**

#### **Option 1**

Close the account and transfer the account balance to your new WEX HSA. There is an account closure fee that will be deducted from your Health Equity HSA. UCP will provide a credit of \$25 in your new WEX HSA to offset the Health Equity account closure fee.

Complete the WEX HSA transfer form and submit it to Health Equity at [transfer@healthequity.com](mailto:transfer@healthequity.com) to transfer the funds to your new WEX HSA. There is a box to check on the WEX transfer form to indicate that you wish to close your Health Equity HSA.

#### **Option 2**

Keep your Health Equity HSA open. You can continue to use the funds for qualified expenses. Please note that if you elect to keep the Health Equity account open after December 31, 2022, you will incur the monthly administrative fee of \$2.95 per month that UCP had been paying on your behalf.

## 2. My HRA benefits continue to get denied, how can I get assistance?

Contact the HR Helpdesk at [HRHelpdesk@ucpcentralpa.org](mailto:HRHelpdesk@ucpcentralpa.org) for assistance.

## 2. Is there an anticipated fix date for the issue of the screen constantly closing when working in certain apps? It happens to several us and has been going on now for months. It is very frustrating.

We do have the fix for this in process. We do not have an ETA when it will be resolved, but it is something that is a priority and will hopefully be resolved in the coming weeks.

### 3. What can we do to help with recruiting?

#### **OPPORTUNITY #1**

If you have connections with any of the following and would be willing to share how UCP could get in touch with these groups to share about the job opportunities that we have available, please let us know! You can simply email us at [jobs@ucpcentralpa.org](mailto:jobs@ucpcentralpa.org).

- Parent Support Groups (e.g., play groups, FB parent resource groups, parent-teacher associations, etc.)
- Churches
- Community Organizations (e.g., American Legion, Kiwanis, Lions Club, Rotary, etc.)
- Community Bulletin Boards (traditional or online boards)

#### **OPPORTUNITY #2**

Paint your community with flyers and/or yard signs advertising that UCP is hiring. If you know of places in the community where a flyer can be hung, or if you would be willing to put a sign in your yard (or know of neighbors or friends or businesses who would be willing to do the same), let us know at [jobs@ucpcentralpa.org](mailto:jobs@ucpcentralpa.org). We will gladly send you as many flyers and/or yard signs as you want!

#### **OPPORTUNITY #3**

Don't forget that if you successfully refer someone for employment, you will be eligible for up to \$1,000 per referral! Additionally, through December 31, new hires in select 20+, 30+ and FT positions (Residential and CPS DSPs, Supervisors and Managers; CPS Coordinators, Habilitation Specialists and Employment Specialists) are eligible for a sign-on bonus of up to \$500! Up to a \$1,000 sign-on bonus is available for new hires filling 2<sup>nd</sup> shift Residential positions, any shift positions at the Harrisburg/Royal residential home, and all positions at Middletown CPS. Both you and your referral could end up with some extra money in your pocket.

#### **OPPORTUNITY #4**

Easily share a job from our website with your network of contacts by clicking on a job title at <https://careers-ucpcentralpa.icims.com/jobs/search?ss=1&hashed=-435590743below> and then using the buttons on the job posting to email a friend or share on social media .



Hello,

We are excited to announce that we will be partnering with United Cerebral Palsy of Central Pennsylvania to serve as your new Health Savings Account (HSA) administrator. You will soon receive, or may have already received, your new WEX debit card in a separate mailing.

Our experience and focus on excellent customer service, along with great technology, help to bring you these benefits:

- Access to your HSA anytime and anywhere via your online account and mobile app.
- Choice of multiple recognized mutual funds in several investment categories.
- Automatic transfers between cash and investment accounts so your funds are always available when you need them.
- Easy access to your funds with our debit card and direct deposit online distributions.

#### **TRANSFER FUNDS**

In order to move your existing HSA funds to your new WEX HSA, you will need to submit a HSA transfer form to Health Equity. Once the funds have been distributed from your Health Equity HSA, the transfer amount will be sent to WEX to be processed and applied to your account. You'll be able to utilize any contributions that have been posted to your account with WEX during this time.

#### **GET THE MOST OUT OF YOUR ACCOUNT**

- Log in to your online account at <https://www.wexinc.com/>
- Sign up for text alerts and/or email notifications
- Set up direct deposit

We are excited to help you realize the benefits of your HSA.

**WEX**





# Health Savings Account (HSA) Transfer Request Form

Complete this form if you are intending to transfer funds to a WEX Health, Inc. HSA. Submit the completed form to the HSA Trustee/Custodian/Administrator that currently holds your HSA funds. They will then initiate a direct transfer of your funds to your HSA with WEX. Please note: WEX is unable to process this form and initiate the funds transfer. If you are attempting to close your WEX HSA, please use the HSA Distribution Request/Account Closure Form.

\*=Required Fields

## Step 1: Account Information

\*Employer Name (Do not abbreviate) \_\_\_\_\_ \*Accountholder Name (First, MI, Last) \_\_\_\_\_

\*Social Security Number \_\_\_\_\_ \*Accountholder Telephone \_\_\_\_\_

\*Accountholder Address \_\_\_\_\_ \*City \_\_\_\_\_ \*State \_\_\_\_\_ \*Zip \_\_\_\_\_

## Step 2: Existing HSA/IRA Trustee or Custodian Information

\*Existing HSA/IRA Trustee or Custodian Name \_\_\_\_\_ \*Existing HSA/IRA Account Number \_\_\_\_\_

\*Custodian Address \_\_\_\_\_ \*City \_\_\_\_\_ \*State \_\_\_\_\_ \*Zip \_\_\_\_\_

\*Custodian Telephone \_\_\_\_\_

## Step 3: Former Spouse Information

This section should be completed in full if the former spouse is receiving the HSA through a divorce settlement. Please include a copy of the divorce decree.

HSA Account Name of Former Spouse (First, MI, Last) \_\_\_\_\_

Spouse Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth (mm/dd/yyyy) \_\_\_\_\_ Spouse Telephone \_\_\_\_\_

## Step 4a: Transfer Instructions

This section must be completed in full. Please provide the name of the HSA Accountholder/Beneficiary that will receive the funds from the transfer.

Directly transfer \_\_\_\_\_ or \_\_\_\_\_ of the HSA or IRA identified above. The amount of the partial transfer is: \$ \_\_\_\_\_  
all part

Please make checks payable to:  HSA Accountholder/Beneficiary's Name

This transfer \_\_\_\_\_ or \_\_\_\_\_ close the HSA/IRA.  
will will not

Transfer check should be sent to WEX Health, Inc. at PO Box 2926, Fargo, ND 58108-2926.

# Health Savings Account (HSA) Transfer Request Form, continued

## Step 4b: Asset Liquidation Instructions

Unless otherwise directed in writing below, I direct the current trustee or custodian of my transferring account to liquidate all assets immediately. I am aware of and acknowledge any applicable penalty for early withdrawal upon certificates of deposits or annuities (or other investment vehicle, as applicable) currently held in the account. If there are other specific liquidation instructions, include for each asset the description, quantity in HSA or IRA, quantity to be transferred and whether to liquidate immediately or at maturity. Specify other liquidation instructions as necessary.

## Step 5: Transfer Signature of HSA Accountholder or Former Spouse

I hereby acknowledge that, due to the important tax consequences relating to transferring funds to an HSA, I have been advised to see a tax professional. State tax laws may vary, and I agree that WEX makes no representation as to the tax effect of this transfer under state law. I also acknowledge that my decision to transfer funds to my WEX HSA is completely voluntary. I assume the responsibility for any consequences that my beneficiaries or I may experience relating to this transfer and I agree that WEX shall in no way be responsible for those consequences. I authorize the transfer of the HSA assets in the manner described above and I certify all information provided by me is true and correct and may be relied upon by the transferring trustee or custodian, WEX Health, Inc.

\*Transfer Signature of HSA Accountholder or Former Spouse

\*Date

This Health Savings Account (HSA) is a custody account with WEX Health, Inc., serving as the custodian. Terms and conditions of the HSA are included in your HSA Agreement.

## Important HSA Transfer Information

<b>Eligibility for HSA Transfer</b>	You may only transfer funds into a WEX HSA from an HSA, Archer MSA or IRA. You may only transfer funds if you are the accountholder of the transferring HSA, Archer MSA or IRA, the surviving spouse of a deceased accountholder or the former spouse of the accountholder who is receiving an interest in the HSA, Archer MSA or IRA pursuant to a divorce or separation agreement.
<b>One-Time Transfer from a Roth or Traditional IRA to an HSA</b>	IRA transfers count toward and are limited to your maximum HSA contribution for the year. The amount of your IRA transfer is not allowed as a deduction. Your funds will be returned in the event that the deposit amount, when added to your total cumulative year-to-date contribution, exceeds the maximum annual contribution threshold as determined by the IRS. Generally, only one transfer may be made during the lifetime of an individual. Penalties may apply if High Deductible Health Plan (HDHP) coverage does not continue for 12 months. This transfer option does not apply to SEP or SIMPLE IRAs.
<b>Excess Contributions</b>	You are not permitted to transfer excess contributions from an HSA, Archer MSA or IRA to a WEX HSA. All transfer funds will be coded as a transfer contribution. If excess contributions are transferred to the WEX HSA it is your responsibility to notify WEX and request a withdrawal of the excess amount. There may be additional IRS tax penalties when excess contributions are transferred to the new HSA.
<b>Investments</b>	Your HSA will be invested as provided under your HSA arrangement with WEX.
<b>Additional Information about HSAs</b>	See IRS Publication 969 Health Savings Accounts and other Tax Favored Health Plans for additional information about HSAs. This publication is available free from the Internal Revenue Service website: <a href="http://www.irs.gov">www.irs.gov</a> .