

# Rollover Request Form



Email, fax, or mail completed forms

Email: hsaoperations@motivhealth.com

Fax: 844-533-1289

Mail: MotivHealth, Attention: HSA Operations  
PO Box 709718  
Sandy, UT 84070-9718

Use the rollover request form to roll over funds into your MotivHealth HSA that have already been distributed to you from another custodian.

Primary Account Holder Information					*Required fields
Last Name:	First Name:	M.I.:	Gender: Male: Female:	Date of Birth:	
Street Address:	City:	State:	ZIP:		
Email Address:	Daytime Phone:	SSN or MotivHealth ID number (6 or 7 digits):*			
Employer Name:	Health Insurance Company:	Coverage Level: Single Family	Deductible Amount:		

## Rollover Information:

Please specify dollar amount to rollover\* \$ \_\_\_\_\_

## Banking Information\* (If no option is selected, form is void.)

**Option 1** — Use verified EFT account already on file associated to my HSA. Please provide last 4 of account number \_\_\_\_\_ . \*  
Note: Account must be verified for contributions in order for MotivHealth to pull the funds via EFT.

**Option 2** — One-time electronic funds transfer (EFT). (Form must be accompanied by a copy of a voided or an actual check)

**Option 3** — Mail in a check.

## Authorization

I authorize MotivHealth to open a Health Savings Account in my behalf, and I accept the terms of the MotivHealth HSA Custodial Agreement available at <http://MotivHealth.com/hsa-form>. I understand that in compliance with the USA Patriot Act, MotivHealth must verify the identity of all individuals who seek to open an HSA. I understand that as part of this identity verification process, I may be asked to provide additional information and/or documentation before my account can be established.

Account Holder Signature (required):

Date:

## Rollovers

A rollover is a way to move money or property from a medical savings account (MSA) or existing health savings account (HSA) to a MotivHealth HSA. The Internal Revenue Code (IRC) limits how many rollovers may be taken, how quickly rollovers must be completed, and how the custodian must report the transaction.

### 1. Timelines

The funds you receive from an MSA or HSA must be deposited into an HSA within 60 days of receiving them. When counting the 60 days, include weekends and holidays. Receipt generally means the day you actually have the funds in hand. For example, the 60 days would begin on the day you pick up the check from the Custodian or you receive the check in the mail. The 60 day rule is set by the IRS and cannot be changed by MotivHealth.

### 2. Twelve-month restriction

You are entitled to one distribution per year per HSA, which may be rolled over to another HSA. Twelve (12) months must pass after receipt of one rollover before you may make another distribution from the same HSA to rollover.

**Note:** Incomplete forms will not be processed. In such cases, we will attempt to contact you via email or phone to advise that the form was missing information.

