# HSA / FSA / HRA

Comparison of Key Features for 2018

Health Savings Account (HSA),
Health Flexible Spending Arrangement (FSA),
Health Reimbursement Arrangement (HRA)



OVERVIEW	HSA	Health FSA	HRA
Account Description	Tax-exempt trust or custodial account established by an eligible individual to pay for qualified medical expenses.	Employer-established benefit plan that allows eligible employees to be reimbursed for qualified medical expenses.	Employer-established benefit plan that reimburses eligible employees for qualified medical expenses.
Important Reminders for 2018	New annual limits on contributions apply.	New annual limits on contributions apply. In addition, a health FSA must qualify as excepted benefits* and be offered through a Section 125 cafeteria plan, or the arrangement will violate certain requirements under Health Care Reform.	New annual limits on contributions apply to qualified small employer HRAs** (QSEHRAs), which can be used by eligible employers to reimburse employees for qualifying medical expenses, including individual health insurance premiums. Otherwise, an HRA must be "integrated"*** with other group health plan coverage in order to meet certain requirements under Health Care Reform (this does not include retiree-only HRAs and HRAs consisting solely of excepted benefits).
Potential Tax Benefits for Employees	<ul> <li>Employee contributions are tax-deductible (or pre-tax, if made by salary reduction).</li> <li>Earnings on amounts in an HSA are not included in gross income while held in the HSA.</li> <li>Employer contributions are excluded from gross income and are generally not subject to employment taxes.</li> <li>Tax-free distributions to pay for qualified medical expenses.</li> </ul>	Contributions (by both employee and employer) are generally excluded from gross income and not subject to employment taxes.      Reimbursements used to pay qualified medical expenses are not taxed.	Employer contributions are excluded from gross income and are not subject to employment taxes.      Reimbursements used to pay qualified medical expenses are not taxed.

EMPLOYEE ELIGIBILITY	HSA	Health FSA	HRA
High Deductible Health Plan (HDHP) Coverage Required?  Note: A health plan will still qualify as an HDHP even though it provides certain preventive health services without a deductible, as required by Health Care Reform.	Yes. For 2018, the minimum annual deductible is \$1,350 for self-only coverage or \$2,700 for family coverage. The maximum deductible and other out-of-pocket expenses (excluding premiums) is \$6,650 for self-only coverage or \$13,300 for family coverage.+	No; however, a health FSA will be considered to provide excepted benefits* (and therefore permitted under Health Care Reform) only if the employer also makes available other group health plan coverage that is not limited to excepted benefits (and the health FSA is structured to meet certain other requirements).	No; however, in order to be "integrated"*** with other group health plan coverage, among other requirements, an HRA can be made available only to employees who are enrolled in non-HRA group coverage.  However, employers wishing to establish a QSEHRA** cannot offer a group health plan to any of their employees, among other eligibility requirements.
Who May Participate?  Note: Self-employed persons are not eligible for an FSA or HRA.	An individual is eligible to establish an HSA if he or she:  Is covered under a high deductible health plan (HDHP);  Is not covered by any other health plan that is not an HDHP (including coverage in a general purpose health FSA solely as a result of unused carryover amounts from the prior year), except for certain limited types of coverage;  Is not enrolled in Medicare; and  May not be claimed as a dependent on another person's income tax return.	Employer sets rules for eligibility.  Health FSAs may not discriminate in favor of highly compensated individuals as to eligibility to participate or benefits offered (IRC Section 105(h)). Employers also must comply with nondiscrimination rules for cafeteria plans under Section 125 regarding eligibility, contributions, and benefits for highly compensated and key employees.	To be "integrated"*** with other group health plan coverage, among other requirements, an HRA can be made available only to employees who are enrolled in non-HRA group coverage.  QSEHRAs** must be provided on the same terms to all eligible employees (defined as any employee of an eligible employer). Employers may generally exclude employees who: have not completed 90 days of service; have not attained age 25; or are part-time or seasonal.  HRAs may not discriminate in favor of highly compensated individuals as to eligibility to participate or benefits offered (IRC Section 105(h)).

<sup>&</sup>lt;sup>+</sup> Non-grandfathered HDHPs <u>must also apply</u> the self-only cost-sharing limit for coverage of essential health benefits provided in-network (**\$7,350** for 2018) to **each individual** covered under the plan, even if this amount is below the family deductible limit.

CONTRIBUTIONS	HSA	Health FSA	HRA
Who May Contribute?	The employee, the employer, or both may contribute (family members or any other person may also contribute).	The employee, the employer, or both may contribute.	Only the employer may contribute.
Limit on Contributions?	Yes. For 2018, the maximum contribution is \$3,450 for self-only coverage, or \$6,900 for family coverage. The limit is increased by \$1,000 for eligible individuals age 55 or older at the end of the tax year.	Yes. For 2018, salary reduction contributions to a health FSA are limited to \$2,650.  A health FSA will be considered to provide excepted benefits* (and therefore permitted under Health Care Reform) only if the arrangement is structured so the maximum benefit payable to any participant cannot exceed two times the participant's salary reduction election for the health FSA for the year (or, if greater, cannot exceed \$500 plus the amount of the salary reduction election other requirements are met.	No limit on the amount of money an employer may contribute to an employee's HRA if the HRA is "integrated"*** with a group health plan that itself has no annual limits.  For QSEHRAS,** annual payments and reimbursements must generally be limited to \$5,050 per employee or \$10,250 per family.
Pre-Tax Employee Contribution Allowed?	Yes, contributions can be made through employee salary reductions under a cafeteria plan.	Yes, typically funded through salary reduction agreements in which employees elect an amount to be voluntarily withheld from wages.  (A health FSA <b>must</b> be offered through a Section 125 cafeteria plan in order to be exempt from the annual dollar limit prohibition under Health Care Reform.)	No, funded solely through employer contributions.

CONTRIBUTIONS	HSA	Health FSA	HRA
Employer Participation	Employer contributions made through a cafeteria plan are subject to the Section 125 nondiscrimination requirements. All other employer contributions are subject to the "comparability rules," meaning that the employer must make comparable contributions to all comparable participating employees' HSAs.	Any contributions made by the employer must comply with the nondiscrimination requirements under IRC Sections 105(h) and 125.	Employer contributions must not discriminate in favor of highly compensated individuals as provided by IRC Section 105(h).
DISTRIBUTIONS	HSA	Health FSA	HRA
Distributions Allowed?	Distributions used exclusively to pay for qualified medical expenses of the employee and his or her spouse and dependents are tax-free.  Any distribution amount not used exclusively to pay for qualified medical expenses is included in the employee's gross income and may be subject to an additional 20% tax.  Note: Employees who cover dependents to age 26 under an HDHP may not use HSA funds for reimbursement on a tax-free basis for an adult child's medical expenses, unless the adult child qualifies as a tax dependent of the employee.	A health FSA may only reimburse qualified medical expenses incurred by an employee and his or her spouse and dependents, as well as the employee's adult child under age 27 as of the end of the taxable year (regardless of whether the adult child qualifies as a tax dependent of the employee).	Reimbursements under an HRA can only be made on a tax-free basis for qualified medical expenses to:  Current and former employees (and their spouses and dependents); Spouses and dependents of deceased employees; and The employee's adult children under age 27 as of the end of the taxable year (regardless of whether the adult children qualify as tax dependents of the employee).

DISTRIBUTIONS	HSA	Health FSA	HRA
Timing of Distributions	An eligible employee may receive distributions from an HSA at any time for qualified medical expenses that are not reimbursed by the HDHP; however, expenses incurred before an HSA is established are not qualified medical expenses.	Expenses are incurred when services are provided. Expenses incurred before or after the period of coverage may not be reimbursed.  Employees are entitled to receive the maximum reimbursement at any time during the coverage period, regardless of the amount that has been contributed (reduced by any prior reimbursements).	An HRA may not reimburse expenses for medical care incurred before the date the HRA is in existence or before the date an employee first becomes enrolled under the HRA.
Qualified Medical Expenses	Generally, qualified medical expenses are those expenses paid for "medical care" as defined in IRC Section 213(d).  Health insurance premiums are generally not considered qualified medical expenses for HSA purposes, unless the premiums are for:	Qualified medical expenses are those specified in the plan that generally would qualify as expenses for "medical care" as defined in IRC <u>Section 213(d)</u> .  A health FSA may be limited to a subset of permitted Section 213(d) medical expenses.	Qualified medical expenses are those that generally would qualify as expenses for "medical care" as defined in IRC Section 213(d).  For purposes of HRA reimbursement, qualified medical expenses include:  • Amounts paid for longterm care coverage.
	<ul> <li>Qualified long-term care insurance (premiums are subject to limits based on age and are adjusted annually).</li> <li>Health care continuation coverage required by federal law (e.g., COBRA).</li> <li>Health care coverage while an individual is receiving unemployment.</li> <li>Medicare and other health care coverage if the employee is 65 or older (other than premiums for a Medicare supplemental policy, such as Medigap).</li> </ul>	FSA distributions are not permitted for the following expenses:  • Amounts paid for health insurance premiums.  • Amounts paid for long-term care coverage or expenses.  • Amounts covered under another health plan.  Note: Under Health Care Reform, group health plans are required to cover certain preventive services without cost-sharing. A health FSA that does not qualify as excepted benefits* fails to meet the preventive services requirements.	Amounts not covered under another health plan.  Note: In general, HRAs used for employees' individual insurance policy premiums violate both the annual dollar limit prohibition and preventive services requirements under Health Care Reform. However, an exception exists for QSEHRAs.**

OTHER ISSUES	HSA	Health FSA	HRA
Balance and Carryover	Amounts remaining in an HSA at the end of the year are generally carried over to the next year.	Amounts of up to \$500 remaining in a health FSA at the end of the plan year may be carried over to the immediately following plan year or, alternatively, a plan may provide for a grace period of up to 2 ½ months after the end of the plan year in which the employee may use amounts remaining from the previous year.	Amounts remaining in the HRA at the end of the year can generally be carried over to the next year. The employer is not permitted to refund any part of the balance to the employee.
		Note: An individual who is covered by a general purpose health FSA is not eligible to make HSA contributions during the entire plan year of the health FSA, even if the individual has coverage solely as a result of unused carryover amounts from the prior year.	
Account Subject to COBRA?	No.	Yes, but FSAs that meet certain conditions may provide COBRA continuation coverage on a more limited basis.	Generally, yes.
Portable to the Employee?	Yes, the employee is the owner of the account.	No.	No, the employer is the owner of the account.

<sup>\*</sup>Benefits provided under a health FSA are excepted for a class of participants only if they satisfy two requirements:

- 1. Other group health coverage, not limited to excepted benefits, is made available for the year to the class of participants by reason of their employment; and
- 2. The arrangement is structured so that the maximum benefit payable to any participant in the class for a year cannot exceed two times the participant's salary reduction election under the health FSA for the year (or, if greater, cannot exceed \$500 plus the amount of the participant's salary reduction election). **Note:** Unused carryover amounts remaining at the end of a plan year that satisfy the modified "use-or-lose" rule are not taken into account when determining if this requirement is satisfied.

<sup>\*\*</sup> The 21st Century Cures Act allows eligible small employers—generally those with fewer than 50 full-time employees who do not offer a group health plan—to offer "qualified small employer HRAs" to reimburse employees for qualified medical expenses, including individual health insurance premiums.

<sup>\*\*\*</sup>An HRA will be integrated with a group health plan if it meets the requirements under either of two integration methods described in <u>agency guidance</u>, as clarified by <u>ACA FAQs</u>.

#### **For More Information**

Please review IRS <u>Publication 969</u> for a detailed explanation of HSAs, FSAs, and HRAs, as well as IRS <u>Publication 15-B</u> for additional information regarding the tax treatment of these types of arrangements.

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