

HSA/FSA/HRA Comparison Chart

| Overview | HSA | Health FSA | Traditional HRA |
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| What is it? | Tax-exempt account that can be used to pay or reimburse employees for certain medical expenses. | Tax-advantaged employer plan that reimburses employee medical expenses. | Tax-advantaged employer plan that reimburses employee medical expenses. |
| What are some advantages to it? | <ul style="list-style-type: none"> • HSAs make an employer's benefits package more attractive by helping employees pay out-of-pocket medical expenses in a tax-advantaged way. • Employer contributions to employees' HSAs are generally deductible business expenses. • All compliant HSA contributions are tax-exempt for the employee. | <ul style="list-style-type: none"> • No federal income tax or employment tax on contributions. • Tax-free distributions for qualified medical expenses. • Employee can draw on the account for medical expenses before funds are placed in it. | <ul style="list-style-type: none"> • No federal income tax or employment tax on contributions. • Tax-free distributions for qualified medical expenses. • Funds can be carried over from year to year at employer's discretion. |
| What expenses can it be used to pay? | Most medical, dental, vision, and prescription drug expenses, but not most group or individual insurance premiums. | Expenses allowed by the plan that generally qualify for the medical and dental expenses tax deduction, but not traditional health insurance premiums. | Expenses allowed by the plan that generally qualify for the medical and dental expenses tax deduction, but not traditional health insurance premiums. |
| Which employees can have it? | <p>Employees must be covered under a high deductible health plan (HDHP) to contribute to or establish an HSA. For plan years beginning on or after Jan. 1, 2024, an HDHP is a plan with:</p> <ul style="list-style-type: none"> • A minimum deductible of \$1,600 for self-only coverage and \$3,200 for family coverage (\$1,650 and \$3,300, respectively, for plan years beginning in 2025); and • A maximum out-of-pocket expense limit of \$8,050 for self-only coverage and \$16,100 for family coverage (\$8,300 and \$16,600, | Those enrolled in non-FSA group medical coverage and eligible under the rules of the plan, subject to the Section 105(h) and 125 nondiscrimination rules. | Those enrolled in non-HRA group medical coverage and eligible under the rules of the plan, subject to the Section 105(h) nondiscrimination rules. |

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| | <p>respectively, for plan years beginning in 2025).</p> <p>In addition, employees generally must not be:</p> <ul style="list-style-type: none"> • Enrolled in any other plan but the HDHP • Enrolled in Medicare; or • Eligible to be claimed as a tax dependent. | | |
| Who can contribute to it? | Anyone. | Employers and employees. | Only employers. |
| How much can be contributed to it? | For 2024, the limit on all contributions for individuals with self-only HDHP coverage is \$4,150 (\$4,300 for 2025). For individuals with family HDHP coverage, the limit is \$8,300 (\$8,550 for 2025). These limits are \$1,000 higher for individuals age 55 or older at any time during the year. | For plan years beginning in 2024, employees may contribute up to \$3,200 (\$3,050 for plan years beginning in 2023). | Any amount. |
| Can employees carry over funds from year to year? | Yes. | <p>Generally no, but employers may:</p> <ul style="list-style-type: none"> • Allow employees to carry over up to \$640 of unused funds for plan years beginning in 2024 (\$610 for 2023) to use in the following year; or • Provide a “grace period” of 2.5 months after the end of the plan year for employees to use the money in the account. | Yes, if allowed by the employer. |
| Is it portable for the employee? | Yes. | No. | No. |
| What requirements must an employer satisfy? | If contributing to employees' HSAs through a cafeteria plan, the employer must satisfy certain cafeteria plan nondiscrimination rules. All contributions to employees' HSAs outside of a cafeteria plan must be made on a | <ol style="list-style-type: none"> 1. Have an official written plan document. 2. Distribute a Summary Plan Description (SPD) within 90 days of the | <ol style="list-style-type: none"> 1. Have an official written plan document. 2. Distribute a Summary Plan Description (SPD) within 90 days of the |

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| | <p>comparable basis to all comparable participating employees. Comparable contributions must be either:</p> <ul style="list-style-type: none"> • The same amount; or • The same percentage of the annual deductible limit under the HDHP covering the employees. <p>Comparable participating employees:</p> <ul style="list-style-type: none"> • Are covered by an HDHP offered by the employer; • Are eligible to establish an HSA; • Have the same category of coverage (self-only or family coverage); and • Have the same category of employment (generally part-time or full-time). | <p>employee becoming a plan participant.</p> <ol style="list-style-type: none"> 3. Offer the health FSA as part of a cafeteria plan. 4. Offer employees traditional group health coverage. 5. Meet the Section 105(h) and 125 nondiscrimination rules. 6. Comply with the IRS' rules on mid-year election changes. 7. Set the maximum benefit amount for each employee so that it does not exceed: <ul style="list-style-type: none"> 8. <ul style="list-style-type: none"> o Two times the employee's health FSA salary reduction election for the year; or o If greater, \$500 plus the amount of the employee's health FSA salary reduction election for the year 9. Substantiate all reimbursement claims. 10. Annually pay PCORI fees by July 31, if applicable. | <p>employee becoming a plan participant.</p> <ol style="list-style-type: none"> 3. Meet the Section 105(h) nondiscrimination requirements. 4. Offer employees traditional group health coverage. 5. Substantiate all reimbursement claims. 6. Annually pay PCORI fees by July 31, if applicable. |
| <p>Can employers offer or contribute to it without also offering a group health plan?</p> | <p>Yes, as long as those employees are eligible to have a HSA.</p> | <p>No.</p> | <p>Generally, no.</p> |
| <p>Is it subject to COBRA?</p> | <p>No.</p> | <p>Yes, but may be provided on a limited basis.</p> | <p>Yes. If an employee elects COBRA coverage, his or her HRA must:</p> |

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| | | | <ul style="list-style-type: none"> • Continue at the maximum reimbursement amount applicable at the time of the COBRA qualifying event; and • Increase at the same time and by the same increment that HRA reimbursement amounts are increased for similarly situated non-COBRA HRA participants. |
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*For purposes of this chart, the term "Traditional HRA" means an HRA that is properly integrated with a group health plan. It does not include retiree-only HRAs, qualified small employer HRAs (QSEHRAs), individual coverage HRAs (ICHRAs) or excepted benefit HRAs (EBHRAs).