## **Health Reimbursement Arrangements (HRA)**

Features & Benefits Comparison

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HRA Plan Design	HRA Type	No. of Employees	GHP Rules	Max. Annual Contribution	Employee Eligibility	Eligible Expenses
1-Employee or Spouse	Stand-alone	1	None	No limit	1 employee	All Publication 502-eligible medical expenses.
QSE-HRA	Stand-alone	< 50	Employer must not offer GHP.	\$5,150 for individual coverage; \$10,450 for family coverage. <sup>1</sup>	All employees are eligible to participate but only those with MEC may be reimbursed.	All Publication 502-eligible medical expenses.
Deductible Gap	Integrated	1+	Employer must offer high- deductible GHP.	No limit	All employees covered by GHP may participate.	All Publication 502-eligible medical expenses except for insurance premiums (including Medicare).
Comprehensive	Integrated	1+	Employer must offer GHP.	No limit	All employees covered by GHP may participate.	All Publication 502-eligible medical expenses except for insurance premiums (including Medicare).
Limited	Integrated	1+	Employer must offer GHP.	No limit	All employees covered by GHP may participate.	All Publication 502-eligible medical expenses except for insurance premiums (including Medicare).
Integrated Coverage (ICHRA; available for 2020 plan year)	Integrated	1+	Employer must not offer GHP.	To be determined	All employees are eligible to participate.	Premiums for individual health coverage only plus other Publication 502-eligible medical expenses (excluding GHP premiums).
Excepted Benefit (EBHRA; available for 2020 plan year)	Stand-alone	1+	Employer must offer GHP; employee must decline GHP.	\$1,800 (proposed) <sup>2</sup>	All employees are eligible to participate.	Excepted benefits only, including premiums for dental, vision, stldi, COBRA continuation, and Medi-gap coverage.

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## Notes:

- 1. For January 1, 2019, through December 31, 2019. See, 2019 inflation-adjusted benefit limits.
- 2. Proposed for plan years beginning January 1, 2020, adjusted annually for inflation. See, EBHRA: The New HRA for Excepted Benefits.

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HRA Plan Design	Proof of MEC	Spouse or Parent GHP as MEC	Reimbursement without MEC	Rollover Allowed	ACA Premium Tax Credit	Same-terms rules
1-Employee or Spouse	No	n/a	Yes	Yes	n/a	n/a
QSE-HRA	Yes	Yes	No	Yes	Yes; reduced by amount available via HRA	Yes; exceptions for standard employee classifications, employee age, and individual vs. family plan.
Deductible Gap	n/a (Employer GHP required)	n/a	n/a	Yes	n/a	Yes; exceptions for standard employee classifications.
Comprehensive	n/a (Employer GHP required)	n/a	n/a	Yes	n/a	Yes; exceptions for standard employee classifications.
Limited	n/a (Employer GHP required)	n/a	n/a	Yes	n/a	Yes; exceptions for standard employee classifications.
Integrated Coverage (ICHRA; available for 2020 plan year)	Yes	Yes	No	Yes	No	Yes; exceptions for standard employee classifications, employee age, and individual vs. family plan.
Excepted Benefit (EBHRA; available for 2020 plan year)	No	n/a	n/a	Yes	n/a	Yes; exceptions for standard employee classifications, employee age, and individual vs. family plan.

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