



Health Reimbursement Arrangement (HRA) Comparison Chart

"Traditional" HRA	Limited Purpose HRA	Retiree Only HRA	Qualified Small Employer HRA (QSEHRA)	Individual Coverage HRA (ICHRA)	Excepted Benefit HRA (EBHRA)	Medicare HRA
Employer Eligibility						
Any size employer	Any size employer	Any size employer	Employers with fewer than 50 full-time / full-time equivalents that do not offer a group health plan.	Any size employer	Any size employer	Employers with fewer than 20 full-time / full-time equivalents and offer a group health plan that provides minimum value and does not consist solely of excepted benefits.
Employee Eligibility						
Any employee who is covered by a group medical plan sponsored by the employer (or if the employer chooses, by the spouse's employer).	Eligibility terms are defined by employer.	Retired employees are eligible (a retiree-only plan does not have to meet the medical coverage requirement that a "traditional" HRA must meet).	Employees of employers with fewer than 50 full-time employees (under ACA counting methods) who do not offer group health plans. To be eligible, the employee must show proof of coverage. Reimbursements are tax-free to the employee if the employee has minimum essential coverage for the month in which the expense is incurred.	An employee who has individual coverage (including Marketplace coverage, student health insurance coverage, catastrophic plans, individual health insurance coverage sold through a private exchange model, and grand-mothered individual health insurance coverage). To integrate an ICHRA with Medicare, certain conditions must be satisfied.	Employee must be eligible for the group health plan (but does not need to be enrolled in the group health plan).	Employee must be enrolled in Medicare Parts A and B.



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Additional Eligibility Requirements						
Yes, the employer may design the plan to cover whom it wishes as long as it meets the non-discrimination requirements.	Yes, the employer may design the plan to cover whom it wishes as long as it meets the non-discrimination requirements.	Set by employer, but subject to various laws, including state and local laws (to the extent they aren't preempted by ERISA), Medicare Secondary Payer rules, and contracts governing the employer's obligations, including collective bargaining agreements. In most cases, retiree only plans are exempt from the ACA's market reforms and patient protections.	Employers must offer the QSEHRA to all similarly situated employees. It is acceptable to provide different reimbursement amounts to different employees within the reimbursement limits, if the variance is due to differences in insurance policy prices in which the employees are enrolled. It is not acceptable to provide different reimbursement amounts to employees based on seniority, employee classifications, job performance, wellness program incentives, or any other type of incentive/reward program.	Employers (who do not offer an ICHRA to all employees) may only offer the ICHRA on different terms to different groups of employees if the groups are one or more of the 11 specifically listed classes of employees listed in the regulations. The regulations also provide minimum class sizes for some of the classes.	Employers must make the EBHRA available under the same terms to all similarly situated individuals (as defined by HIPAA's Non-discrimination regulations) regardless of any health factor.	Yes, the employer may design the plan to cover whom it wishes as long as it meets the non-discrimination requirements.



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Employer Contribution Limits						
Set by employer	Set by employer	Set by employer	2026: \$6,350 (single coverage) \$12,850 (family coverage); indexed annually for inflation	Set by employer	2026: \$2,200 (indexed annually for inflation)	Set by employer
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Eligible Expenses						
Section 213(d) medical care expenses	Vision and dental expenses; or limited to spousal or retiree only	Section 213(d) medical care expenses	Section 213(d) medical care expenses and individual coverage	• Section 213(d) medical care expenses. • Individual coverage (including Market-place coverage) • Student health insurance coverage • Catastrophic plans • Individual health insurance coverage sold through a private exchange model • Grand mothered individual health insurance coverage. • If integrated with Medicare, may reimburse premiums for Medicare Part	• Section 213(d) medical care expenses • Excepted benefits' premiums • COBRA • Short-term limited duration insurance	Reimbursement under the arrangement is limited to Medicare Part B or Part D premiums and premiums for excepted benefits, including, but not limited to, Medicare supplement policy coverage



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				A, B, C, or D, Medigap policies, and other Section 213(d) medical care expenses		
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Section 125 Cafeteria Plan						
No	No	No	No	Employees' premiums for individual coverage off Marketplace can be run through a cafeteria plan (NESP)	No	No
FSA Compatible						
Yes	Yes	Yes	No (because employer cannot sponsor other group health plan)	Yes, if limited purpose FSA. Cannot offer employee a traditional HRA as it is considered a Group Health Plan and employee cannot be offered another group health plan.	Yes	Yes
HSA Compatible						
Yes, if restricted to post-deductible or limited purpose	Yes, if restricted to post-deductible or limited purpose	Yes, if restricted to post-deductible or limited purpose	Yes, if restricted to individual coverage and post-deductible	Yes, if restricted to individual coverage and post-deductible	Yes, if EBHRA is limited to vision and dental expenses	No, Once enrolled in Medicare an individual cannot contribute to an HSA
COBRA						
Yes	Yes	No, unless it's the COBRA qualifying event of	No	Applies to ICHRA, but not to the individual coverage	Yes	No, plan is for employers with less than 20 Employees



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		employer bankruptcy				
ERISA						
Yes	Yes	Yes	No	Yes	Yes	Yes
Carryover Allowed						
Yes	Yes	Yes	Yes	Yes	Yes	Yes
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Section 105(h) Nondiscrimination Rules						
Yes	Yes	Yes	Yes	Yes, but subject to ICHRA rules on class categories, minimum class size, and limits on reimbursement amount differences.	Yes	Yes
Minimum Essential Coverage						
Yes	No	No	No	Yes	No	Yes
Affordable for ACA Reporting						
No	No	No	No	Yes	No	No
HIPAA Privacy Rules						
Yes	Yes	Yes	Yes	Yes	Yes	Yes
MSP Reporting						
Yes	No	No	No	Yes	No	Yes