## Green Bay Area Public School District

Flexible Spending Account (FSA) & Health Reimbursement Arrangement (HRA) FAO Sheet



# Can I participate in the FSA if I am enrolled in the HRA plan?

Yes. You can participate in either the Health Care FSA or the Limited Purpose FSA while enrolled in the HRA plan.

## Can I contribute to a Health Savings Account (HSA) while I am enrolled in the District's HRA?

No. If you are enrolled in the District's \$1,500 High Deductible Employer Sponsored Group Health Plan, you are not able to contribute to an HSA. The reason for this is that the IRS sets minimum deductible amounts (\$1,500 Single coverage and \$3,000 Family coverage for 2023) that the employee must be responsible for before the HRA starts reimbursing. The current HRA plan setup has reimbursements starting after you have met \$500 of your deductible, therefore you are not able to make contributions to an HSA account.

# Do I get to carryover any HRA dollars from year to year?

Yes. Employees/retirees may rollover up to \$1,000 for single coverage and \$2,000 for family coverage of current year unused HRA funding into the Rollover Bucket. The accumulation maximum for the Rollover Bucket for 2022/2023 is \$3,000 for single coverage and \$6,000 for family coverage.

#### Do I use my FSA or HRA monies first?

FSA monies must be used first. Once FSA monies have been depleted, HRA incentive or rollover monies can be used to pay for any deductible amounts that the employee is responsibility for.

#### How does the HRA work?

- Your employer implements changes to your Group Health Insurance Plan.
- You and/or your family members utilize your health plan as you normally would. The insurance company will process your claim and send an Explanation of Benefits form (EOB) to you. The EOB form shows the date of service, service provided, cost of the service, amount insurance paid on the claim, and the portion of the claim you are responsible for paying.
- You submit a claim to DBS along with a photo or copy of your EOB form. The claim can be submitted online, via mobile phone app, by fax (262-367-5938) or by mail. If submitting by fax or mail you will need to complete a HRA claim form to submit with a copy of your FOB.
- > DBS staff reviews the claim. Eligible expenses are reimbursed directly to you based on the schedule below.
- If you provide your email address to DBS, all notifications including claims received, reimbursements issued and requests for additional information will be sent to you via email.
- Any reimbursements due for claims received by Friday (9:00 a.m. CST) will be issued the following Friday.

HRA Deductible In-Network Levels			
	Total Deductible	Maximum Employee Responsibility	Maximum HRA Reimbursement
Single	\$1,500	\$500	\$1,000
Family	\$3,000	\$1,000	\$2,000
Reimbursement Schedule			
First patient			
First \$500 of in-network deductible		Employee responsibility (must use FSA funds first, once depleted, HRA incentive or rollover monies can be used)	
Next \$1,000 of in-network deductible		Reimbursed by the HRA	
Next 2 or more patie	nts		
First \$500 of in-network deductible		Employee responsibility (must use FSA funds first, once depleted, HRA incentive or rollover monies can be used)	
Next \$1,000 of in-network deductible		Reimbursed by the HRA	