

<b>Eligibility</b>	<b>HSA</b>	<b>FSA</b>	<b>HRA</b>
<b>Small Employers</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>
<b>Large Employers</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>
<b>Self-Employed</b>	<b>Yes</b>	<b>No</b>	<b>No</b>
<b>Plan Document</b>	<b>No</b>	<b>Yes</b>	<b>Yes</b>
<b>High-Ded Insurance Reqrd</b>	<b>Yes</b>	<b>No</b>	<b>No</b>
<b>Annual IRS 5500</b>	<b>No</b>	<b>Yes</b>	<b>Yes</b>
<b>COBRA Applies</b>	<b>No</b>	<b>Yes</b>	<b>Yes</b>
<b>HIPAA Certification</b>	<b>No</b>	<b>No, generally</b>	<b>Yes</b>
<b>EE Retains Account</b>	<b>Yes</b>	<b>No</b>	<b>No*</b>
<b>Employer Contributions</b>	<b>Optional</b>	<b>Optional</b>	<b>Required</b>
<b>Employee Contributions</b>	<b>Optional</b>	<b>Optional</b>	<b>No</b>
<b>Employee Tax</b>	<b>Deductible "above the line" on IRS Form 1040</b>	<b>Contributions are Tax- Free</b>	<b>Reimbursements are Tax-Free</b>
<b>Employer Pre-funds Acct</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
<b>Roll Over</b>	<b>Yes</b>	<b>No**</b>	<b>Yes</b>
<b>Medical Expenses Reimbursed</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>
<b>Long-Term Care Premiums Paid from Account</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>
<b>Convert to Taxable Income</b>	<b>Yes</b>	<b>No</b>	<b>No</b>