RAMSEY COUNTY

Qualified Benefits Summary Plan Description

2025

Flexible Benefits

And

Transit Expense Plan

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Effective January 1, 2024 **Last Updated** June 21, 2024

Introduction

Participation in Flexible Benefits can provide substantial tax savings to eligible employees. Insurance premiums and contributions towards elected expense accounts are deducted from pay before taxes are calculated resulting in lower taxes and possibly greater net income. For example, employees in a 30% tax bracket will pay $300 less in taxes for every $1000 withheld from income before taxes are calculated.

This Summary Plan Description further describes how to access the eligible pre-tax benefits provided to employees in the County Board approved Cafeteria Plan, including:

- Pre-tax Premium Deduction Program
- Expense reimbursement accounts for eligible Dependent Care, Health Care and Transit expenses
- Health Savings Accounts

Authority

Both the Cafeteria Plan and the Summary Plan Description are administered to comply with Internal Revenue Code Section 125 and 132. If there is any conflict or inconsistency between the Cafeteria Plan and the Summary Plan Description, the Cafeteria Plan document will govern. The County Board approves changes to the Cafeteria Plan. Human Resources administers the Cafeteria Plan and updates this Summary Plan description annually.

Tax Implications

Employees should fully understand Internal Revenue Service (IRS) and MN Department of Revenue rules and tax implications before enrolling in any pre-tax benefit program. Human Resources does not provide tax advice. Employees should consult with a tax advisor.

- Pre-tax contributions reduce FICA taxable wage and could impact Social Security benefits at retirement.
- Public Employee Retirement Account (PERA) contributions are calculated based on full, unreduced salary, so participation will not impact PERA distributions at retirement.
- Insurance premiums deducted pre-tax and eligible expenses reimbursed through an employer's pre-tax benefit program cannot be claimed as itemized deductions or qualify for tax credits on a tax return.

Administration

The Ramsey County Human Resources Department administers enrollment and delegates the administrative duties to a Third-Party Administrator (TPA). The Third-Party Administrator for plan years 2024-2026 is WEX Health Inc. The Professional Services Agreement between WEX and Ramsey County including Attachments 2 and 3 are available upon request from Human Resources.

Definitions

Plan year

Means the 12-month period beginning 1/1 (or date of entry) and ending 12/31 of the current calendar year.

Dependent

Any individual who qualifies as a dependent under an Insurance Contract for purposes of coverage under that contract only or under Internal Revenue Code Section 152 (as modified by Code Section 105(b)).

Spouse

Spouse as determined under Federal tax law.

Maximum Contribution Amounts Summary

The IRS determines the maximum amount that can be contributed to eligible accounts annually, usually after Ramsey County's open enrollment period begins in October for the following year. Therefore, the Ramsey County approved maximum for the current benefit year may not match the current IRS approved maximum.

2025 Ramsey County approved maximums

	Min	Max	Carryover to following year
Dependent Care Flex Account	$26/year	$5000/year	$0
Health Care Flex Account	$24/year	$3200/year	$640 max
Transit Flex Account	$12/year	$300/month	Yes – entire balance
Health Savings Account	$0	Single $3430/year Other $6800/year	Yes – entire balance

Qualifying Events

According to IRS rules, mid-year termination of or changes to participation in the Pre-tax Premium Deduction Program and Flexible Spending programs for Health Care or Dependent Care expenses are only allowed within 31 days of a Qualifying Event. Generally, qualifying events must impact eligibility, and changes in coverage must be on account of and consistent with the qualifying event. Unexpected change in medical expenses incurred is not a qualifying event.

	Qualifying Events
1.	Marriage or divorce or legal separation of employee
2.	Birth or adoption
3.	Death of employee, spouse or dependent
4.	Employee Part Time/Full Time status change
5.	Spouse employment change – any
6.	Significant change in health coverage attributable to the spouse's employment
7.	Unpaid Leave of Absence start/stop – employee or spouse
8.	Dependent aging off – 26th birthdate
9.	Court order requiring payment of medical and/or day care expenses of a dependent child
10.	Employee enrollment in any part of Medicare

Upon a qualifying event, employees can make the following changes:

1. Increase or decrease contribution amount.
2. Cancel participation; or
3. Choose to participate.

In addition to the qualifying events above, changes to Dependent Care Reimbursement Accounts can be made for the following events:

- Change in residence (employee, spouse or dependent)
- Significant cost change in day care provider.
- Significant change in your or your spouse's work schedule resulting in changed dependent care needs.

Other qualifying events may be considered depending on individual circumstances upon review and approval by the Human Resources Benefits division. Contact Department Personnel and Benefits Transactions Assistant (PBTA) to initiate review.

Highly Compensated Employees

Federal tax laws state that a plan cannot unfairly favor highly compensated employees. Contributions by employees who qualify as highly compensated may be limited to ensure they don't unfairly benefit from participation. Highly compensated employees will be notified by Human Resources as applicable.

Unpaid Leave of Absence

Participation in flexible benefits is impacted while on an unpaid leave. Employees should contact their department Personnel Benefits and Transactions Assistant with questions.

Pre-tax Premium Deduction Program

Participation allows employees to pay their share of Medical, Dental and Vision premiums with pretax dollars. Employees elect to pay their share of premiums with pretax dollars upon enrollment in a medical, dental or vision plan or during open enrollment. Once employees elect to participate, enrollment will automatically continue each year. Employees can change participation each year during open enrollment or if they experience a qualifying event. Employees must notify their Department PBTA within 31 days the qualifying event and may be asked to provide documentation to substantiate the change.

If an employee's payroll compensation does not support the required contribution towards a benefit, the employee may not be eligible for the benefit. An employee may be billed and pay for coverages on a post-tax basis until their payroll compensation is able to support payroll deduction for elected coverages.

Payroll deduction schedule

Paycheck/Month	Medical	Dental	Vision
1	X		
2	X	X	X
3			

Dependent Care Flexible Spending Account (FSA)

Participation allows use of pre-tax dollars up to an annual IRS determined maximum. Federal and state laws allow income tax credits for dependent care. Tax credits may outweigh the tax advantages of being reimbursed for dependent care expenses tax-free. Employees should consult with a tax preparer before enrolling and/or IRS Publication 503 Child and Dependent Care Expenses.

Eligible expenses

1. Expenses for direct care of a qualified dependent necessary for gainful employment. The qualified dependent cannot be the qualified dependent of any other taxpayer in the taxable year. If married, both the employee and spouse must work or the spouse must be in school full-time.

   A qualified dependent includes either the employee's:
   - Dependent (including adopted) children under the age of 13 who the employee is entitled to a tax deduction on Federal Income Tax Form 2441 "Credit for Child and Dependent Care Expenses", or
   - Spouse and/or dependents who are physically or mentally unable to care for themselves and who regularly spend at least eight hours/day in the employee's household.

   Qualified dependents must also
   - Live with the employee for more than half of the year. The child of a divorced or separated employee who has custody (more than 50% of the time) of the child is treated as a qualifying child of the employee.
   - Be a citizen or resident of the United States or a resident of Canada or Mexico.

   Eligible Care Costs
   - Dependent care can be provided by private individuals, including relatives, in or out of your home. Costs do not qualify for reimbursement when care is provided by someone the employee or spouse can claim as a dependent, or by the employee's child who is under age 19 at the end of the tax year.
   - If services were provided outside the household at a dependent care center which provides care for more than six individuals for a fee, the facility must be licensed.
   - The cost associated with kindergarten is generally not allowable since it is educational.
   - The cost of schooling for first grade or higher is not eligible since it is educational.
   - The cost of care provided before and after school is eligible.
   - Summer programs may be eligible if they are for custodial care. If the institution providing the services documents the service as educational, they are not eligible.
   - Set weekly daycare obligations paid are eligible even if the dependent didn't receive care due to illness or vacation.
   - Expenses for incidental household services performed at least partially for the benefit of the dependent. These are services needed to care for the qualifying person as well as to run the home while you worked or looked for work.

Eligibility
Benefit eligible, permanent, provisional, probationary, or unclassified employees can participate. Intermittent, temporary, or contract workers are not eligible. Per IRS rules, if married, spouse must be working in a job for pay or actively seeking employment, be a full-time student, or be incapacitated. Qualification status is prorated when a dependent is eligible for less than a full year.

Enrollment
New employees must enroll within 31 days of employment or eligibility. For new or mid-year enrollments, the plan year starts the date of enrollment. Employees must re-enroll annually during open enrollment or participation will be terminated/waived.

Annual Election Amount
Participating employees can contribute up to the IRS determined annual maximum for eligible dependent care expenses. There is a $26 minimum annual enrollment to participate.

- The 2025 family maximum contribution amount is: $5000.

The amount elected annually during open enrollment can only be changed mid-year for a qualifying event. Special rules apply to children of divorced or separated parents and to married parents who file separate income tax returns. Consult with a tax advisor or IRS Form 2441 for additional information.

Payroll Deduction
The total amount elected by the employee at enrollment will be divided by the number of pay periods remaining in the year at enrollment (26 for January 1st enrollees) and that amount will be deducted equally every pay period. For employees new to the plan mid-year, deductions will begin the first paycheck following enrollment.

Paychecks/ month	Dependent Care Deduction (annual amount/paychecks remaining in year at enrollment)
1	X
2	X
3	X

Unpaid Leave of Absence
Participation in the plan will stop and debit cards will be deactivated upon an unpaid leave of absence. Annual election amount may be changed upon return to work. Notify Human Resources of intent to reenroll upon return from leave to restart participation.

Eligible expense payment or reimbursement
As eligible expenses are incurred employees can use either the TPA issued debit card to pay for eligible expenses or submit a claim to the TPA for reimbursement. Employees should keep all receipts for eligible expenses for an income tax audit or to substantiate debit card transactions or claims for reimbursement.

Debit card
Upon enrollment, the contracted TPA will mail a debit card or cards to the employee's home address on file with Human Resources. The debit card can be used to pay for eligible expenses if sufficient funds are available in the account from payroll deductions.

Expense Reimbursement
Claims for reimbursement of an eligible expense can be submitted to the TPA for reimbursement. Expenses must have been incurred during the eligible Plan Year. An expense is incurred when the service is provided, not billed or paid for. For mid-year participants, expenses must be incurred on or after the eligibility date through the end of the plan year. Claims for expenses incurred during the Plan Year must be submitted no later than March 31st of the following year. Claims for reimbursement will be processed when funds are available in the account from payroll deductions.

A reimbursement check will be mailed to the employee's home or reimbursement will be deposited directly to the employee's bank account if designated by the employee to the TPA.

Useful Links

- How to Set up an Online Account
- How to Set up the WEX Mobile App
- How to file a claim

Carryover and forfeiture
There is no carryover. Unused amounts not reimbursed by March 31st of the following year for expenses incurred during the plan year will be forfeited.

Separation from Employment
Debit cards are deactivated at separation. Account balances are forfeited.

Health Care Flexible Spending Account (FSA) – Limited or Regular Account

Participation allows use of pre-tax dollars to pay for certain out-of-pocket eligible expenses incurred by the employee, spouse, or dependents with pre-tax dollars up to an annual maximum determined by the IRS.

Limited Account (for those enrolled in the High Deductible Health Plan with a Health Saving Account only)
Employees who enroll in the High Deductible Health Plan with a Health Saving Account (HSA) can only enroll in a Limited Health Care Flexible Spending Account per IRS rules. Eligible expenses include dental and vision expenses incurred by the employee, spouse, and any eligible dependents up to age 26 during the Plan Year of participation. Medical expenses cannot be reimbursed with a limited account but can be reimbursed from the employee's Health Savings Account (HSA).

Regular Account (for those not enrolled in a High Deductible Health Plan)
Funds deposited into the account can only be used for eligible expenses determined by the IRS. IRS determined eligible expenses generally include out-of-pocket medical, dental and vision expenses incurred by the employee, spouse, and any eligible dependents up to age 26 during the Plan Year of participation.

Some examples include:

- Out-of-pocket expenses for over-the-counter medications and supplies
- vision expenses including eyeglasses and contacts.
- orthodontia
- deductibles, co-pays, and co-insurance

Refer to Eligible Expenses for Benefit Plans for a complete list of eligible expenses. Monthly insurance premiums are not eligible. Some expenses are potentially eligible but require a Letter of Medical Necessity from your health care provider. Cash withdrawals are not allowed.

Eligibility
Permanent, provisional, probationary, or unclassified employees who are benefit eligible may enroll after six months of County employment. Intermittent, temporary, or contract workers are not eligible to participate. If employment is terminated during the plan year, the period of coverage ends on the termination date. Only expense incurred up to the termination date can be submitted for reimbursement. Expenses incurred after the termination date will not be reimbursed unless COBRA continuation is elected.

Enrollment
Employees must re-enroll annually during open enrollment or participation will be terminated/waived. New employees must enroll prior to their six-month anniversary. Eligible expenses incurred effective on the six-month anniversary date may be reimbursed. Employees who become insurance eligible mid-year must enroll within 31 days of becoming eligible. Eligible expenses start the date of enrollment. Employees do not need to be enrolled in the current year to qualify for the carryover from the previous year.

Annual Election Amount
Participating employees can contribute up to IRS determined annual maximum for eligible health care expenses. There is a $24 minimum annual enrollment to participate. Carryover amounts from the previous year do not affect a participant's ability to elect the maximum annual amount during open enrollment. Unused amounts above the carryover are forfeited. The amount elected annually during open enrollment can only be changed mid-year for a qualifying event as defined by the Internal Revenue Service (IRS). Employees should carefully

consider the out-of-pocket eligible expenses for themselves and their eligible dependents during the plan year when determining their annual election.

Payroll Deduction

The total amount elected by the employee at enrollment will be divided by the number of pay periods remaining in the year at enrollment (26 for January 1st enrollees) and that amount will be deducted equally every pay period. For employees new to the plan mid-year, deductions will begin the first paycheck following enrollment. For employees new to the plan mid-year, deductions will begin the first paycheck following the six-month anniversary of employment, or the first pay period following receipt of the enrollment form, whichever is later.

Paycheck/ month	Health Care Flex Spending Deduction (annual amount/paychecks remaining in year at enrollment)
1	X
2	X
3	X

If an employee's payroll compensation does not support the required contribution towards a benefit, the employee may not be eligible for the benefit. In some instance, an employee may be billed and pay for coverages on a post-tax basis until their payroll compensation is able to support payroll deduction for elected coverages.

Eligible expense payment or reimbursement

As eligible expenses are incurred during the Plan Year for employees, spouses and qualified dependents, employees can use either the TPA issued debit card to pay for eligible expenses or submit a claim to the TPA for reimbursement. Employees should keep all receipts for eligible expenses for an income tax audit or to substantiate debit card transactions or claims for reimbursement.

Debit card

Upon enrollment, the contracted TPA will mail a debit card or cards to the employee's home address on file with Human Resources. The debit card can be used to pay for eligible expenses at the point of sale so that employees don't have to pay out-of-pocket and wait for reimbursement. Refer to Eligible Expenses for Benefit Plans for a complete list of eligible expenses. Debit cards can be used for expenses up to the total annual amount designated at enrollment even if the total annual amount hasn't been deducted from pay yet. Contact the TPA for additional or replacement cards.

In most cases, debit card transactions are auto substantiated by the TPA, and additional documentation will not be required. If the expense isn't auto substantiated, the employee may have to provide additional documentation to the TPA Employees should keep all detailed receipts for debit card transactions in case of an income tax audit, or in case the TPA requests additional documentation. Acceptable documentation is an itemized receipt or Explanation of Benefits (EOB) that reflects the actual date of service, description of service, and patient portion of the charges.

Expense Reimbursement
Claims for out-of-pocket payments for an eligible expense can be submitted to the TPA for reimbursement. Expenses must have been incurred during the eligible Plan Year. For mid-year participants, expenses must be incurred on or after the eligibility date through the end of the plan year. Claims for expenses incurred during the Plan Year must be submitted no later than March 31st of the following year, the runout period.

Claims will be paid if the total amount claimed does not exceed the total annual amount designated at enrollment, even if the total annual amount hasn't been deducted from pay yet. A reimbursement check will be mailed to the employee's home or reimbursement will be deposited directly to the employee's bank account if designated by the employee.

Carryover and Forfeitures
The Ramsey County Cafeteria Plan allows for an annual carryover of unused account funds from one plan year to the next plan year up to the current IRS maximum, if any. Unused amounts greater than the allowed carryover are forfeited per IRS rules. IRS rules allow forfeited funds to be used by the employer to offset the expense of administering the plan.

- For 2025, the county approved maximum carryover to 2026 is $640. The county approved carryover amount may not match the IRS approved amount.

Carryover amounts will be processed after March 31st of the following year. Participants who terminate employment during the Plan Year are not eligible for the carryover. Employees should estimate plan year expenses carefully to avoid forfeitures. Online FSA stores may be useful towards year end purchases of eligible items to avoid forfeiture. Even if money is forfeited, tax savings may exceed the forfeited amount.

For example, a $1000 account deposit, saves an employee in a 30 percent tax bracket $300 in taxes. If $100 is forfeited, the employee is $200 ahead.

Unpaid Leave of Absence
Employees on an unpaid leave can continue participating in the health care flex spending account and will be billed for contribution amounts on a post-tax basis until they return to work and payroll deduction can again support pre-tax payroll deduction of elected contribution amounts. Debit cards are suspended when an employee is placed on an unpaid Leave of Absence as payroll deductions towards the annual elected contribution amount stop. Employees are offered the opportunity to continue funding their health care flex spending account on a post-tax basis while on an unpaid Leave of Absence.

Separation from Employment
Participants who separate during the Plan Year with a positive account balance, can continue submitting claims for any eligible expenses incurred through the last day of the current Plan Year only by qualifying for and electing COBRA continuous coverage. Employees will be notified if they are eligible for COBRA coverage by Human Resources. The notification from Human Resources will explain the terms and conditions of continued coverage. If COBRA coverage isn't elected, the spending account and debit card are deactivated. Expenses incurred prior to the termination date remain eligible for reimbursement.

Useful Links

- How to Set up an Online Account
- How to Set up the WEX Mobile App
- How to file a claim
- Eligible Expenses for Benefit Plans
- FSA Store
- HSA Store

Worksheet - Health Care Flexible Spending Account Contribution

Estimate out-of-pocket (not covered by insurance) annual eligible expenses carefully to avoid forfeiture. Remember to consider any anticipated carryover from the previous year as well as any forfeiture. Expenses can be for yourself and any eligible dependents. Refer to Eligible Expenses for Benefit Plans for a complete list of eligible expenses.

Limited Health Flexible Spending Account

Employees enrolled in the High Deductible Health Plan are only eligible to participate in a Limited Health Care Flexible Spending Account and should only consider out-of-pocket dental and vision expenses when estimating how much to contribute.

	Out-of-pocket (not covered by insurance) expense types	Current Year Total	Projected Next Year
Carryover from prior year			
Medical	Deductible		
	Co-payments		
	Co-insurance		
	Prescription co-pays		
	Over the counter		
	Transportation		
	Charges in excess of usual & customary fees		
	Other		
Dental	Deductible		
	Co-payments		
	Co-insurance		
	Orthodontia		
	Charges in excess of usual & customary fees		
	Other		
Vision	Deductible		
	Co-payment		
	Annual exam (if not covered)		
	Contact lens fitting fee		
	Contact lens solution		
	Laser eye surgery		
	Eyeglasses		

TOTAL $________ $________

Transit Expense Plan

Internal Revenue Code 132 offers tax-saving opportunities to individuals who use public transit and/or carpool to and from work. Qualified work-related, out-of-pocket transportation expenses up to the monthly amount allowed by Ramsey County, which cannot exceed the IRS maximum allowed, are deducted or reimbursed pre-tax.

Eligibility
Benefit eligible permanent, probationary, provisional, and unclassified employees can participate.

Contribution amount

- Maximum $300/month combined for payroll deduction and transit expense accounts.
- Minimum $1.00/month.

Options include.

1. Payroll deduction pre-tax monthly
    - Contract parking, Metro Mobility, Park and Shuttle

      The amount elected by the employee at enrollment will be deducted the first paycheck of every month. For employees new to the plan mid-year, deductions will begin the first paycheck of the month after enrollment.

Paycheck/ month	Work related transportation.
1	X
2	
3	

      If an employee's payroll compensation does not support the required contribution towards a benefit, the employee may not be eligible for the benefit.

2. Reimbursement of transportation expenses from contracted TPA.

   Eligible Expenses. To be eligible for reimbursement, parking and transit expenses are only for commuting costs to and from work. Eligible expenses must meet the following definitions:

   <u>Qualified parking expenses</u> include the following parking expenses, unless such expenses are incurred for any parking on or near property used by the employee for residential purposes:

   <u>Expenses you pay to park your car for your commute to work</u>:
    - by mass-transit facilities, whether it is publicly owned or not;
    - by an individual driver or transportation company you hire, if such transportation is provided in a "commuter highway vehicle," as defined below in this SPD; or
    - by "commuter highway vehicle," as defined below in this SPD.

Commuter Highway Vehicle (Van Pool) expenses include the cost for transportation in a commuter highway vehicle. To be eligible, the vehicle must take you from your home, to your workplace and back.

Commuter Highway Vehicles include any highway vehicle which seats at least six adults (not including the driver). Also, at least 80 percent of the vehicle's mileage is expected to be for transporting employees between their home and workplace where on average, with at least half the vehicle seats being occupied (not including the driver).

Examples of *eligible* expenses include:

- parking at facilities within one mile of work
- parking at commuter bus, railroad, or carpool stations/stops
- securing a commuter bicycle. For example, in a locker
- mass transit travel including Light-rail
- Commuter van fares

Examples of expenses that are *not eligible* include:

- Parking at or near your home address
- Highway or bridge tolls
- Taxicab fares
- Bicycling expenses

Eligible expense payment or reimbursement
As eligible expenses are incurred during the Plan Year, employees can use either a debit card to pay for eligible expenses or submit a claim for reimbursement to the contracted TPA. If employment is terminated during the plan year, the period of coverage ends on the termination date. Only expense incurred up to the termination date can be submitted for reimbursement up to 180 days after termination.

Debit Card
Upon enrollment, the contracted TPA will mail a debit card or cards to the employee's home address on file with Human Resources. The debit card can be used to pay for eligible expenses at the point of sale so that employees don't have to pay out-of-pocket and wait for reimbursement.

Expense Reimbursement
Expenses must be submitted for reimbursement within 180 days of the date incurred. Reimbursement is through the procedures established by the contracted TPA.

Enrollment
Eligible employees may enroll, change elections or stop participating by submitting the Enrollment and change form (PDF) to their department PBTA. Forms received by the 15th of the month will be effective the first of the following month. Minimum enrollment amount, $1.00/month ($12 annually).

Carryover and forfeiture
Funds left in the plan at the end of the year will be carried forward to the next year. If an employee leaves employment or stops participating in the plan, they have 180 days to submit expenses for reimbursement incurred up to termination. Funds remaining in the account after 180 days will be forfeited.

Useful Links

- How to Set up an Online Account
- How to Set up the WEX Mobile App
- How to file a claim

Resources

The County's Commuting Policy provides a fully funded Metro Pass to eligible employees. MetroPass enrollment form on RamseyNet. Also review the commuting resources and commuting FAQ on RamseyNet.

For more information on transportation expense reimbursement accounts, see Pre-tax Benefits or contact your department Personnel Benefits and Transactions Assistant.

Frequently Asked Questions

If I receive a parking stipend, can I still use a transit expense reimbursement account for my work-related parking expenses?
Yes

If the County reimburses me for work related parking expenses on days I don't work in the office, can I also use my transit expense reimbursement account?
Yes

If both spouses work for the County, can both participate?
Yes. Each spouse is limited to the current monthly maximum.

What happens to the account balance upon separation from employment?
Contributions to the account will stop at separation. Expenses incurred prior to separation can be reimbursed up to 180 days from the date of separation.

Health Savings Account (HSA) Contributions

Employees who elect to enroll in the High-Deductible Health Plan (HDHP) will receive a monthly contribution from the County to a HSA tax free and can also elect to contribute additional amounts to their HSA to IRS limits, pre-tax. Combined maximum annual contribution amounts (County + employee) are determined by the IRS annually. HSA are owned by the employee and upon termination of employment remain with the employee.

Eligibility
Employee must be enrolled in the High-Deductible Health Plan.

Employees are not eligible if:

- they are claimed as a dependent on someone else's tax return.
- they are covered by another plan that conflicts with the HDHP, such as Medicare, certain flexible spending accounts (FSAs), or select health reimbursement arrangements (HRAs).
- they or their spouse contribute to a medical flexible spending account (medical FSA).

USA PATRIOT Act
All HSA participant's information will be cross-referenced to a government database to ensure they pass identity verification in accordance with the USA PATRIOT Act. Participants can verify their information by mail, fax, or by uploading documentation through their online account or mobile app. The following video links may be helpful.

- How to upload documents through the Benefits online account
- How to upload documents through the Benefits mobile app

If the participant is unable to provide proper identification to verify their identity, the HSA account will be closed by the TPA within 60-90 days. Any contributions made will be returned to the County to tax and provide back to the participant. For more information on the USA PATRIOT Act, click here.

Enrollment
Employees automatically receive the monthly County contribution to an HSA upon enrollment in the High Deducible Health Plan during annual open enrollment or within 31 days of becoming eligible for insurance eligibility. Employees who decide to contribute an additional amount to their HSA must re-designate that amount annually. Once enrolled, employees manage their account following the procedures established by the County's TPA.

Maximum Contribution Amount
Combined maximum annual contribution amounts (County + employee) are determined by the IRS annually.

For 2025, the combined annual HSA contribution (County + employee) max for single coverage is $4300 and max for all other coverages is $8550. The County contributes/month:

- Single coverage: $60/month * 12 mos = $720
- Other coverages: $125/month * 12 mos = $1500

Subtract the County's total contribution amount from the max allowed to determine employee max annual contribution amount.

- Single coverage: $4300 - $ 720 = $3580
- Other coverages: $8550 - $1500 = $7050

Catch-up Contributions
Account holders ages 55 and older may contribute an additional $1000/year until they are enrolled in Medicare.

For marriage and family changes:

- For High Deductible plan enrollment changes from single to family coverage, enrollees may increase their total annual contribution on a prospective basis.
- For High Deductible plan enrollment changes from family to single coverage, enrollees should reduce their total annual contribution on a prorated basis to ensure they do not contribute more than allowed.
- In the case of a divorce or separation agreement, transfers to a spouse or former spouse is not taxable as long as the funds remain in an HSA.

Account Management - Terms & Conditions
Once participants register their account with the County's TPA they will be prompted to read and accept the terms and conditions of their HSA in order to access their funds. This can be done through their online account or mobile app.

After HSA contribution funds are withdrawn via ACH, they will be applied to the participant's HSA balance within two business days of either the contribution date listed on the file or the file import date; whichever is later. Below is an example of this timing:

Business Day 0 – Contribution file is imported.
Business Day 1 – ACH transaction is initiated, and contributions are listed as "pending" in the participant's HSA.
Business Day 2 – ACH is completed, and contributions are available in the participant's HSA.

Flexible Benefits Comparison

A summary of the main features of each type of account.

	Health Savings Account (HSA)	Regular Health Care Flexible Spending Account (FSA)	Limited Purpose Flexible Spending Account (FSA)	Dependent Care Flexible Spending Account (FSA)
Description	A tax-free savings account for out-of-pocket medical expenses provided to employees enrolled in the High-Deductible Health Plan (HDHP).	Allows use of pre-tax dollars for IRS determined eligible medical, dental and vision expenses.	Allows use of pre-tax dollars for IRS determined eligible dental and vision expenses to employees enrolled in the High-Deductible Health Plan.	Allows use of pre-tax dollars for reimbursement of qualified dependent care expenses as determined by the IRS
Who owns the account?	Employee. Balance transfers with employee upon separation.	Employer. Expenses through separation can be reimbursed. COBRA rights apply.	Employer. Expenses through separation can be reimbursed. COBRA rights apply.	Employer. At separation, balance is forfeited.
Type of health plan required	A qualified High Deductible Health Plan (HDHP)	None. Cannot be enrolled in HDHP.	Qualified High Deductible Health Plan (HDHP)	None
Who contributes	Employer and Employee	Employee	Employee	Employee
Annual IRS max contribution	Current IRS limits here.	Current IRS limits here. County limit may be lower.	Current IRS limits here. County limit may be lower.	Current IRS limits here. County limit may be lower.
When are funds available for use?	As contributions are deposited	The full contribution amount is available on the first day of coverage in the Plan Year.	The full contribution amount is available on the first day of coverage in the Plan year.	As contributions are deposited
Do unused funds carry over to the next year?	Yes. Funds follow the employee until used even upon separation.	Yes. Up to the allowed max. Amts over the max are forfeited.	Yes. Up to the allowed max. Amts over the max are forfeited.	No. Unused funds are forfeited.
Is investing allowed? Does interest accrue?	Yes, if the account balance exceeds $1,000. Yes. Account earns interest tax-free. *	No	No	No
Subject to COBRA Continuation?	No	COBRA rights apply	COBRA rights apply	No
Tax advantages *	Triple tax advantage: 1. Pre-tax contributions. 2. Tax-free interest 3. Tax-free withdrawals for qualified medical expenses.	Contributions to the account via payroll deduction are tax free.	Contributions to the account via payroll deduction are tax free	Contributions to the account via payroll deduction are tax free.

Resources

- Ramsey County cafeteria plan (PDF)
- Pre-tax Benefits – RamseyNet Page
- MetroPass enrollment form on RamseyNet
- Commuting Policy FAQ's
- commuting resources – RamseyNet Page
- PBTA Contacts by Department
- EmployeeInsuranceQuestions@ramseycounty.us