

Suspension Election Information

A. Reason for Suspension

You must suspend HCSP reimbursements if **both** of the following conditions are met:

1. You are eligible to receive reimbursement of health care expenses from your HCSP because you retired or terminated employment with your Minnesota public employer; **and**
2. During this calendar year, you or your employer contributed to an HSA on your behalf, or your spouse or your spouse's employer contributed to an HSA.

The IRS considers having **access** to a plan like HCSP and also **contributing** to an HSA “conflicting coverage”; therefore, you must suspend your ability to request reimbursements for medical expenses from the HCSP. You may continue to request reimbursements for dental and vision expenses for you, your spouse, legal tax dependents, and adult children up to the child's 26th birthday.

You can not modify or revoke this suspension during the plan year indicated on this form. Plan year is a calendar year running from January 1 to December 31.

B. Electing the Suspension

Use this chart to determine who the suspension applies to.

Who contributed to the HSA this calendar year?	What type of HSA?	The suspension applies to reimbursement for:
Participant or employer	Individual	Participant only OK to request for spouse/dependent expenses
	Family	Participant/spouse/dependents
Spouse or their employer	Individual	Spouse only OK to request for participant/dependent expenses
	Family	Participant/spouse/dependents

Reimbursement of eligible vision and dental expenses are always allowable.

C. Removing the Suspension

You can not modify or revoke a suspension during the current plan year (which is a calendar year).

Completing this form will suspend your ability to request reimbursement for the current plan year. At the end of the plan year, MSRS will send you a new suspension form.

- If you or your spouse will contribute to an HSA in the next calendar year, you must complete a new suspension form.
- If you or your spouse will no longer contribute to the HSA for the next calendar year, you do not have to complete the suspension form. You are eligible to receive reimbursements of all health care expenses incurred during the new plan year.

D. Questions

Still not sure you need to suspend your HCSP this calendar year or have questions regarding the compatibility of the HCSP and HSA?

Contact MSRS at the number below. Or visit www.msrs.state.mn.us where you can find more about this topic under Health Care (HCSP) in the “Frequently Asked Questions” section.

Contact your benefit provider if you have questions about your HSA.



60 Empire Drive | Suite 300 | St. Paul, MN 55103-3000
Telephone: 651-296-2761 | Toll-free: 1-800-657-5757 | Fax: 651-297-5238
www.msrs.state.mn.us

Teletypewriter users and telecommunications-device-for-the-deaf (TDD) users call the Minnesota Relay Service at 1-800-627-3529 and ask to be connected to MSRS at 651-296-2761.