

# Healthcare Flexible Spending Account Worksheet

Start by reviewing prior years' receipts for medical expenses (healthcare, dental, and vision) that you paid for out-of-pocket. This may be helpful in determining your annual Flexible Spending Account election for next year.

Budget only for expenses that are eligible for reimbursement through a medical Flexible Spending Account and that will be incurred during the next plan year.

**(Be sure to include expenses for you, your spouse, and other eligible dependents.)**

Review list of eligible expenses for more information on whether a specific expense may be reimbursed.

Type of Service	Number of Visits per Year	Cost per Visit	Mileage Cost per Visit <small>= Average miles per Visit* X Mileage Rate (\$0.17/mile)</small>	Annual Cost <small>= Number of Visits X (Cost per Visit + Mileage Cost per Visit)</small>
Office Visits (including Specialists)	<i>Example: 10 visits</i>	<i>Example: \$25 copayment</i>	<i>Example: 20 miles X \$0.17/mile = \$3.40</i>	<i>Example: 10 X (\$25 + \$3.40) = <b>\$284.00</b></i>
Chiropractor Visits				
Hospitalization or Surgery				
Emergency Room Visits (\$60 copayment**)				
Speech, Physical, or Occupational Therapy				
Counseling or Therapy Sessions				
<b>TOTAL ANNUAL MEDICAL SERVICE COST</b>				

Type of Product	Monthly Cost	Annual Cost <small>= Monthly Cost X 12</small>
Prescriptions		
Over-the-counter supplies and equipment (contact lens supplies, diabetic supplies, etc.)		
<b>TOTAL ANNUAL MEDICAL PRODUCT COST</b>		

Other Medical Expenses	Annual Cost
Other anticipated medical expenses (Dental expenses, Vision expenses, One-time services, One-time prescriptions, etc.)	
<b>TOTAL ANNUAL OTHER MEDICAL EXPENSES COST</b>	

<b>TOTAL ANNUAL MEDICAL FLEXIBLE SPENDING ACCOUNT ELECTION</b>	
<small>= Total Annual Medical Service Cost + Total Annual Medical Product Cost + Total Annual Other Medical Expenses Cost</small>	

\* Average Miles per visit is defined as the average number of miles to and from a medical provider for one visit. This mileage is an eligible expense for reimbursement through a medical Flexible Spending Account.

\*\* Waived if admitted as an inpatient directly from the emergency room or for observation for 24 hours or longer.