Instructions	This worksheet is for estimating annual healthcare expenses only. To enroll, please complete a Flexible Spending Account Election Form. 1. Enter your annual cost for each healthcare option you use 2. Add up the total annual healthcare expense 3. Determine your yearly number of pay periods 4. Divide the total annual expense by the number of pay periods to calculate the amount needed to be withheld every pay period. Note: Annual election amount must not exceed $2,500/year as per IRS regulations.	
Medical Care	Insurance Deductibles	$_______________
	Co-pays	$_______________
	Routine Exams	$_______________
	Prescriptions	$_______________
	Lab Expenses	$_______________
	Medical Equipment	$_______________
	Chiropractor Visits	$_______________
	Physical Therapy	$_______________
	Other	$_______________
	Total Annual Medical Care Expense	$_______________
Vision Care	Eye Exam	$_______________
	Glasses	$_______________
	Prescription Sun Glasses	$_______________
	Contacts	$_______________
	Contact Lens Solutions	$_______________
	Insurance Deductibles/Co-pay	$_______________
	Total Annual Vision Care Expense	$_______________
Dental Care	Cleanings	$_______________
	X-Rays	$_______________
	Crowns	$_______________
	Other	$_______________
	Total Annual Dental Care Expense	$_______________
Orthodontia Care	Orthodontia	$_______________
	Retainers	$_______________
	Total Annual Orthodontia Care	$_______________
TOTALS	Total Annual Healthcare Expense ÷ Number of Pay Periods =	Total Pay Period Deduction $

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