

FSA Expense & Tax Savings Estimate Worksheet

Medical FSA Estimate: Estimate out-of-pocket medical services for you, your spouse, and your eligible dependents.

General Expenses

\$ _____ Office visits / doctor's fees
(actual cost if deductible applies or total co-payments)

\$ _____ Immunizations / Vaccines

\$ _____ Laboratory fees / X-rays

\$ _____ Over-the-counter medical supplies

\$ _____ Prescription Drugs

\$ _____ SUBTOTAL

Hospitalization & Specialist Expenses

\$ _____ Emergency Room / Hospital Bills

\$ _____ Hearing Aids

\$ _____ Specialists or alternative medicine
(Acupuncture, chiropractor, physical therapy, specialists fees, etc.)

\$ _____ Surgery

\$ _____ OTHER MEDICAL EXPENSES NOT SPECIFIED

\$ _____ SUBTOTAL

Dental

\$ _____ Cleanings / Exams / Fillings / Procedures

\$ _____ Orthodontia

\$ _____ X-rays

\$ _____ SUBTOTAL

Vision

\$ _____ Corrective eye surgery & eye wear

\$ _____ Eye exams

\$ _____ Prescription glasses / contact lenses

\$ _____ SUBTOTAL

\$ _____ **TOTAL MEDICAL FSA ESTIMATE**

Dependent Care FSA Estimate: Estimate out-of-pocket expenses related to non-medical care for your dependents.

Dependent Care Expenses

\$ _____ Adult Day Care

\$ _____ Child Day Care / In-home Dependent Care

\$ _____ Nursery School

\$ _____ **TOTAL DEPENDENT CARE FSA ESTIMATE**

Tax Savings Estimate: Estimate your total annual tax savings.

| | Amounts |
|--|----------|
| A. ENTER TOTAL MEDICAL FSA ESTIMATE (See Plan Highlights for the maximum limits that may apply.) | \$ _____ |
| B. ENTER TOTAL DEPENDENT CARE FSA ESTIMATE (See Plan Highlights for the maximum limits that may apply.) | \$ _____ |
| C. TOTAL EXPENSES (Line A + Line B) | \$ _____ |
| D. TAX RATE (Enter percentage of your gross salary that you pay in Federal, State and Local Taxes. (If uncertain, use 30%.)) | _____ % |
| E. FICA (includes Social Security and Medicare) | _____ % |
| F. TOTAL TAX RATE (Line D + Line E) | _____ % |
| G. ESTIMATED ANNUAL TAX SAVINGS (Line C x Line F) | \$ _____ |

Use the free **FSA Calculator** online to estimate your expenses:
<https://www.BenefitResource.com/estimate>