



Accurate budgeting of out-of-pocket medical expenses not reimbursed or covered by insurance is necessary to gain maximum benefit from the Health Care Spending Account. Only expenses that you know you or your family will incur during the plan year can be included in the program. You should consider your cost of deductibles and coinsurance features of any medical and dental insurance policies as well as those costs not covered by insurance.

This is only a worksheet and just for your use. Visit flexservices.higginbotham.net for more information.

HEALTH CARE SPENDING ACCOUNT WORKSHEET

Planned Medical Expenses

Known annual medical expenses (not covered by insurance that your entire family will incur during the plan year for the following services):

- Deductibles — Coinsurance _____
- Prescriptions and Doctor Visits (Copays) _____
- Over-the-Counter Medications (with RX) _____
- Massage Therapy (RX needed) _____
- LASIK Eye Surgery _____
- Medical Supplies and Equipment _____
- Therapist, Psychologist or Chiropractor Fees _____
- Hearing Aids and Supplies _____
- Laboratory and X-ray Expenses _____

Planned Dental Care

Your portion of these expenses:

- Deductibles _____
- Fillings and Crowns _____
- Extractions, Dentures and Bridgework _____
- Oral Surgery _____
- Orthodontic Expenses _____

Planned Vision Care

- Examination _____
- Glasses/RX Sunglasses _____
- Contact Lenses, Solution and Materials _____

Total \$ _____

Total Expenses/_____ (# of pay periods) = \$ _____