

Flexible Spending Account (FSA)
New Enrollee Worksheet for Health Care / Medical Expenses

This worksheet will help you estimate your annual medical costs which may not be reimbursed by a health plan. This list is not intended to be comprehensive, but it contains some of the more common medical expenses. Please review the attached list for additional qualifying medical care expenses.

List all costs that are not reimbursed by other coverage incurred by you:

QUALIFYING EXPENSE	ESTIMATED ANNUAL EXPENSE
Medical doctors' fees	\$ _____
Annual physical examinations	_____
Dental examinations	_____
Eye examinations	_____
Eyeglasses	_____
Contact lenses	_____
Drugs	_____
X-rays	_____
Lab fees	_____
Hospital services	_____
Chiropractors	_____
Hearing aids	_____
Surgery	_____
Ambulance service	_____
False teeth	_____
Psychiatrists	_____
Psychologists	_____
Acupuncturists	_____
Orthodontists	_____
_____	_____
_____	_____
_____	_____
TOTAL ESTIMATED ANNUAL EXPENSES	\$ _____

(To determine the amount of reduction per pay period, divide the Total Estimated Annual Expenses amount above by the total number of pay periods in the Plan Year.)



(continued)

QUALIFYING HEALTH CARE / MEDICAL EXPENSES

Under the Plan, you will be reimbursed only for medical expenses incurred by you, your spouse or qualified dependents. They include, for example, expenses incurred for:

1. Medicine, drugs, birth control pills and vaccines.
2. Medical doctors, dentists, eye doctors, chiropractors, osteopaths, podiatrists, psychiatrists, psychologists, physical therapists, acupuncturists and psychoanalysts (medical care only).
3. Medical examination, X-ray and laboratory service, insulin treatment and whirlpool baths the doctor prescribed.
4. Nursing help. If you pay someone to do both nursing and housework, you can be reimbursed only for the cost of the nursing help.
5. Hospital care (including meals and lodging), clinic costs and lab fees.
6. Medical treatment at a center for substance abuse.
7. Medical aids such as hearing aids (and batteries), false teeth, eyeglasses, contact lenses, braces, orthopedic shoes, crutches, wheelchairs, guide dogs and the cost of maintaining them.
8. Ambulance service and other travel costs to get medical care. If you used your own car, you can claim what you spent for gas and oil to go to and from the place you received the care; or you can claim 22 cents a mile. Add parking and tolls to the amount you claim under either method.

You cannot obtain reimbursement for:

1. The basic cost of Medicare insurance (Medicare A).
2. Life insurance or income protection policies.
3. Accident or health insurance for you or members of your family.
4. The hospital insurance benefits tax withheld from your pay as part of the Social Security tax or paid as part of Social Security self-employment tax.
5. Nursing care for a healthy baby.
6. Illegal operations or drugs.
7. Travel your doctor told you to take for rest or change.
8. Cosmetic Surgery.
9. Long-term care expenses.

Qualifying medical expenses include only those expenses incurred for:

1. Yourself.
2. Your spouse.
3. All dependents you list on your federal tax return.

IRS Publication 502, Medical and Dental Expenses, has a checklist of most of the medical expenses that can be deducted and are therefore reimbursed under this Plan. Some other medical expenses are also reimbursable. However, regardless of any statements in Publication 502 to the contrary, expenses under this Plan are treated as being "incurred" when you are provided with the care that gives rise to the expenses, not when you are formally billed or charged, or you pay for the medical care. Also, no reimbursement will be allowed for any privately held insurance policies or long-term care expenses. (To obtain a copy of IRS Publication 502, visit www.irs.gov and search for "Publication 502".)



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