

FSA Worksheet

The example at right shows the savings you could enjoy by using a Flexible Spending Account (FSA).

Use the worksheets below to figure how much to put into your FSA. Add up the amount you think you'll spend during the plan year for allowed, out-of-pocket healthcare and/or dependent care costs. The amount can't be more than the IRS and plan limits.

See a list of IRS-approved expenses at www.irs.gov.

- ▶ Medical and Dental Expenses: Publication #502
- ▶ Child and Dependent Care Expenses: Publication #503

Be careful not to put too much into your FSA. By law, money left in your account at the end of the plan year can't be returned to you or carried forward to the next year unless your employer offers an annual grace period. Check with your HR department for any rules your employer may have in place.

Sample Savings

	With an FSA	Without an FSA
Annual Salary Before Taxes	\$30,000	\$30,000
FSA Contribution	-1,500	0
Taxable Income	28,500	30,000
Less Taxes		
• Federal Income Tax* (estimate 15%)		
• FICA 7.65%	-6,455	-6,797
Less Healthcare Expenses	0	-1,500
Take-Home Pay	22,045	21,705
TAX SAVINGS	\$340	\$0

* If your federal income tax rate is higher than 15% or if you pay state or local income taxes, you can save even more!

Healthcare Expense FSA Worksheet

Estimate your allowed out-of-pocket healthcare expenses for the plan year.

Uninsured Healthcare Expenses	
Health insurance deductibles	\$
Coinsurance or copayments	\$
Vision care	\$
Dental care	\$
Prescription drugs	\$
Travel costs for medical care	\$
Other eligible expenses	\$
TOTAL	\$
Divide by the number of paychecks you will have during the plan year (i.e., 12, 24, 26).**	\$
This is the amount you will put in each pay period.	\$

** If you are a new employee enrolling after the plan year begins, divide by the number of pay periods remaining in the plan year.

Dependent Care FSA Worksheet

Estimate your allowed dependent care expenses for the plan year.

Child Care Expenses	
Daycare services	\$
In-home care	\$
Nursery and preschool	\$
After school care	\$
Summer day camps	\$
Elder Care Expenses	
Daycare center	\$
In-home care	\$
TOTAL	\$
Divide by the number of paychecks you will have during the plan year (i.e., 12, 24, 26).**	\$
This is the amount you will put in each pay period.	\$

** If you are a new employee enrolling after the plan year begins, divide by the number of pay periods remaining in the plan year. Remember, your total amount can't be more than the IRS limits for the plan year and calendar year.

QualChoice offers help for members with limited English proficiency (LEP). The following statement is printed in the top languages used in Arkansas, as required by the Federal government:

ATTENTION: Language assistance services, free of charge, are available to you. Call 1-800-235-7111 (TTY: 711).

Spanish

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-235-7111 (TTY: 711).

Vietnamese

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-235-7111 (TTY: 711).

Marshallese

LALÉ: Ñe kwōj kōnono Kajin Majōl, kwomaroñ bōk jerbal in jipañ ilo kajin ñe am ejjelōk wōñāān. Kaalōk 1-800-235-7111 (TTY: 711).

Chinese

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-235-7111 (TTY: 711)。

Lao

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ 1-800-235-7111 (TTY: 711).

Tagalog

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-235-7111 (TTY: 711).

Arabic

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-800-235-7111 (رقم هاتف الصم والبكم: 711).

German

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-235-7111 (TTY: 711).

French

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-235-7111 (ATS: 711).

Hmong

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-800-235-7111 (TTY: 711).

Korean

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-235-7111 (TTY: 711) 번으로 전화해 주십시오.

Portuguese

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-800-235-7111 (TTY: 711).

Japanese

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-800-235-7111 (TTY: 711) まで、お電話にてご連絡ください。

Hindi

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-800-235-7111 (TTY: 711) पर कॉल करें।

Gujarati

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિઃશુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-800-235-7111 (TTY: 711).