

Use the form below to calculate anticipated expenses and help determine how much money to set aside into your FSA. You can also use P&A's online calculator to estimate your annual expenses at hennepin.padmin.com.

Health Care Expense Account (medical, dental & vision expenses)

This account can be used for you, your spouse and eligible dependents. Please refer to the Eligible Dependent Defined sheet for more info or click [here](#). The maximum annual election amount for this account is \$2,750.

Expense Category	Estimated Annual Expense
Health insurance deductible(s)	
Co-insurance and co-pays	
Vision care (contacts, glasses)	
Prescriptions	
Medical appliances (wheelchairs, crutches)	
Dental exams and cleanings	
Braces and retainers, fillings, etc.	
This amount will be calculated as your estimated annual election for this account: \$ _____ ANNUAL ELECTION	

Dependent Care Assistance Account

This account is for a qualified child or elder care expenses only for dependent children under the age of 13 - and children 13 and over, a spouse, parents or other adults who you can claim as a tax dependent, who reside with you and who are physically or mentally incapable of self-care. (Kindergarten is not an eligible expense.) The maximum annual election amount for this account is \$5,000.

Expense Category	Estimated Annual Expense
Babysitters, daycare centers, nursery schools	
After school programs, day camp	
Elder care	
This amount will be calculated as your estimated annual election for this account: \$ _____ ANNUAL ELECTION	

Adoption Assistance Account

Maximum annual election amount for this account is \$12,000.

Expense Category	Estimated Annual Expense
Court costs, attorney's fees	
Travel expenses	
This amount will be calculated as your estimated annual election for this account: \$ _____ ANNUAL ELECTION	

TOTAL OF ALL ANNUAL ELECTIONS: \$ _____ DIVIDED BY # of PAYROLL CYCLES PER YEAR = \$ _____/PER PAYCHECK

