

CAFETERIA PLAN ADMINISTRATION



- Flexible Spending Account (FSA)
- ✓ Dependent Care Account (DCA)
 - Premium Only Plan (POP)









HOW TO GET A PAY RAISE!

WITHOUT AN F	SA		
Monthly Gross Earnings	\$3500		
Taxable Income	\$3500		
Payroll Taxes @ 25%	-\$875		
Net Income	\$2625		
Medical Expenses	-\$100		
Presciptions Expenses	-\$200		
Day Care Expenses	-\$400		
Take Home Pay	\$1925		

WITH AN FSA			
Medical Gross Earnings	\$3500		
Medical Expenses	-\$100		
Presciptions Expenses	-\$200		
Day Care Expenses	-\$400		
Taxable Income	\$2800		
Payroll Taxes @ 25%	-\$700		
Take Home Pay	\$2100		

This example represents \$175 of monthly additional take home pay or \$2,100 per year for expenses that you already pay for!

Cafeteria Plans (including FSA, DCA, TRN and POP) are a tax-advantaged way for you to pay for expenses with "Pre-Tax" dollars.

This means you may elect a reducton from your paychecks to pay for eligible expenses that are either medical in nature (including prescripton) or related to dependent care. The pre-tax benefit creates a savings around 20-40% (based on your tax bracket) and to take advantage of this opportunity all you would need to do is create an electon for the items that you already pay for out of your pocket.





Benefit Analysis Worksheet

Section A: Anticipated Medical Costs Per Year for You and Your Family						
▼						
Health insurance deductibles, co-pays, etc	\$					
Vision care (eye exams, contacts, eye glasses, etc)	\$					
OTC or Prescription drugs (including birth control)	\$					
Dental expenses (exams, orthodontia, etc)	\$					
ANNUAL ELECTION	\$					

Section B: Expected Dependent Care Expenses

ANN	\$						
How	much	do	you	pay	for	eldercare?	\$
How	much	do	you	pay	for	childcare?	\$

If the amounts you have identified here is what you wish to be your Annual Election amounts, please add them to the Enrollment Form on the next page.

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EXAMPLE OF ELIGIBLE EXPENSES

- Abdominal supports
- Acupuncture
- Alcoholism treatment
- Ambulance
- Anesthetst
- Arch supports
- Artficial limbs
- · Birth Control (by prescripton)
- · Blood tests
- Blood transfusions
- Braces
- Cardiographs
- Chiropractor
- Contact Lenses
- Convalescent home (for medical treatment only)
- Crutches
- Dental Treatment
- Dental X-rays
- Dentures

- Dermatologist
- Diagnostc fees
- · Drug addicton therapy
- Drugs (prescripton)Eyeglasses
- Gynecologist
- Healing servicesHearing aids and bateries
- Hospital bills
- Insulin treatment
- Lab tests
- Metabolism tests
- Neurologist
- Nursing (+ board and meals)
- Obstetrician
- Operating room costs
- Ophthalmologist
- Optometrist
- Oral surgery Orthopedist

- Osteopath
- · Oxygen and oxygen equipment
- Pediatrician
- Physician
- Physiotherapist
- Podiatrist
- Postnatal treatments
- · Practcal nurse for medical
- services
- Prenatal care
- Prescripton medicines
- Psychologist
- Radium Therapy
- Registered nurse
- Surgeon
- Therapy equipment
- Transportation expenses
- (relative to health care)
- · Ultra-violet ray treatment





