

MEDICAL WORKSHEET

2021

DO YOU ITEMIZE? Yes/ No

MUST BE OVER 7.5% OF AGI: _____ (For all ages on 2021 taxes)

DO YOU THINK YOUR MEDICAL EXPENSES ARE MORE THAN THIS AMOUNT? Yes/ No

(IF YES TO THESE QUESTIONS, LET'S MOVE ON)

* IF YOU HAVE A HEALTH SAVINGS ACCOUNT OR MEDICAL SAVINGS ACCOUNT, YOU CANNOT USE COSTS THAT WERE PAID WITH THESE FUNDS, YOU ALREADY RECEIVED A TAX BREAK*

a.) INSURANCE PREMIUMS: Medicare supplements, Out of Pocket Health insurance, Dental or Vision insurance

*note if you have insurance at work, the premiums you pay may be pre-tax and cannot be used as a deduction

* do not add Medicare PART B here, this is entered separately

b.) MEDICATIONS: Prescription out of pocket cost \$ _____

d.) VISION: office visits, glasses, contacts cost out of pocket \$ _____

e.) DENTAL: office visits, procedures, dentures, implants, braces \$ _____

f.) MILEAGE: to and from appointments, picking up prescriptions _____ Miles

g.) SUPPLIES: Cost to modify home, grab bars, ramps, etc. /crutches /walker /wheelchair /modify car /wigs

h.) OUT OF POCKET: Co-pays/deductibles/not covered \$ _____

i.) Long-Term Care Insurance premiums you paid \$ _____

j.) NURSING HOME/IN HOME CARE \$ _____

TAXPAYER SIGNATURE: _____ PREPARER SIGNATURE: _____

DATE: ____/____/2020