

## Summary of Medical Expenses

Head of Household:

Certification/Reexamination Period: From \_\_\_\_\_ To: \_\_\_\_\_

### 1. Required Office Visits for Medical Treatments

Family Member    Cost Less Insurance Payment    x    Number of Projected Treatments = Projected Cost

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### 2. Medical Insurance

Family Member              Premium cost x Frequency Per Year              =Projected Costs

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### 3. Cost of Prescriptions Medicines

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### 4. Miscellaneous Medical Expenses

Family member              Medical Expense Description              Projected Cost

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|  |  |  |

### 5. Grand Total

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