

Account Services

Monthly Statement

ALEXIUS SOLUTIONS 250 FILLMORE ST SUITE 150 DENVER, CO 80206 Invoice Number: ALE2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022

Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1501OPENAXE	Employee Only	1	\$588.43	\$588.43
1501OPENAXE	Family	1	\$1,480.09	\$1,480.09
ADD	Employee Only	1	\$21.00**	\$21.00
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Family	1	\$100.74	\$100.74
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$2,261.35

^{**} Prices vary in PRISM. Individual prices shown in census.



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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ELSON, ANDREW ELSON, ANDREW ELSON, ANDREW	2022-01-01 2022-01-01 2022-01-01	1501OPENAXE GUARDLOW VSP	FAM FAM ES	\$1480.09 \$100.74 \$14.73
TYRA, KENNETH TYRA, KENNETH TYRA, KENNETH TYRA, KENNETH	2022-01-01 2022-01-01 2022-01-01 2022-01-01	1501OPENAXE ADD GUARDHIGH VSP	EE EE EE	\$588.43 \$21.00 \$47.61 \$8.75

MEDICAL PLAN COUNTS

THE PROPERTY OF COLUMN	
Employee Only	1
Employee & Spouse	0
Employee & Children	0
Family	1