



Account Services

Monthly Statement

CARING TRANSITIONS OF CARLSBAD-LA JOLLA
5651 PALMER WAY
CARLSBAD, CA 92010

Invoice Number: CAR2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022
Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$21.00**	\$21.00
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$59.19

** Prices vary in PRISM.
Individual prices shown in census.

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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LESICKO, DAWN	2019-01-01	ADD		\$21.00
LESICKO, DAWN	2018-03-01	GUARDLOW	EE	\$29.44
LESICKO, DAWN	2018-12-01	VSP	EE	\$8.75

MEDICAL PLAN COUNTS

Employee Only	0
Employee & Spouse	0
Employee & Children	0
Family	0