

## **Account Services**

## **Monthly Statement**

BIONAP USA INC. 420 COLUMBUS AVE STE 304 VALHALLA, NY 10595 Invoice Number: BIO2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022
Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1732OPENAXE	Employee Only	1	\$653.81	\$653.81
1732OPENAXE	Employee & Spouse Only	1	\$1,307.62	\$1,307.62
1732OPENAXE	Employee Only	1	\$0.00	\$0.00
1732OPENAXE	Employee Only	1	\$548.18	\$548.18
ADD	Employee Only	1	\$2.10**	\$2.10
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Family	1	\$23.76	\$23.76
			CD AND TOTAL	Φ2.020.20

GRAND TOTAL \$2,838.38

<sup>\*\*</sup> Prices vary in PRISM. Individual prices shown in census.



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BIONAP USA INC. 420 COLUMBUS AVE STE 304 VALHALLA, NY 10595

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BLACKWOOD, JODI-ANN BLACKWOOD, JODI-ANN BLACKWOOD, JODI-ANN BLACKWOOD, JODI-ANN	2021-12-01 2021-12-01 2021-12-01 2021-12-01	GUARDHIGH 1732OPENAXE 1732OPENAXE VSP	FAM EE FAM	\$160.18 \$ \$548.18 \$23.76
RIS, TYLER RIS, TYLER RIS, TYLER	2022-01-01 2022-01-01 2022-01-01	GUARDHIGH 1732OPENAXE VSP	ES ES ES	\$89.81 \$1307.62 \$14.73
STRAGAPEDE, MARINO STRAGAPEDE, MARINO STRAGAPEDE, MARINO STRAGAPEDE, MARINO	2021-09-01 2021-09-01 2021-08-01 2021-09-01	ADD GUARDLOW 1732OPENAXE VSP	EE EE EE	\$2.10 \$29.44 \$653.81 \$8.75

MEDICAL PLAN COU	NTS
Employee Only	2
Employee & Spouse	1
Employee & Children	0
Family	0