



Account Services

Monthly Statement

UNITED PREMIUM FOODS
1 AMBOY AVE
WOODBIDGE, NJ 07095

Invoice Number: UNI2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022
Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1581OPENAXE	Employee Only	3	\$467.36	\$1,402.08
1581OPENAXE	Employee & Spouse Only	1	\$986.92	\$986.92
1581OPENAXE	Family	2	\$1,480.09	\$2,960.18
1581OPENAXE	Employee Only	1	\$633.81	\$633.81
1581OPENAXE	Employee & Spouse Only	1	\$1,307.62	\$1,307.62
1581OPENAXE	Family	2	\$1,961.43	\$3,922.86
1581OPENAXE	Employee Only	1	\$0.00	\$0.00
ADD	Employee Only	2	\$2.10**	\$23.10
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	1	\$29.44	\$29.44
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
GUARDLOW	Family	2	\$100.74	\$201.48
VSP	Employee Only	3	\$8.75	\$26.25
VSP	Employee & Spouse Only	2	\$14.73	\$29.46
VSP	Family	3	\$23.76	\$71.28
			GRAND TOTAL	\$11,995.23

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

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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ANDREWS, MICHAEL	2022-01-01	1581OPENAXE	FAM	\$1480.09
ANDREWS, MICHAEL	2022-01-01	VSP	ES	\$14.73
COX, MICHAEL	2021-02-01	1581OPENAXE	FAM	\$1961.43
COX, MICHAEL	2021-02-01	GUARDLOW	FAM	\$100.74
COX, MICHAEL	2021-02-01	VSP	FAM	\$23.76
ENGROFF, HENRY	2022-01-01	1581OPENAXE	ES	\$986.92
ENGROFF, HENRY	2022-01-01	ADD		\$2.10
ENGROFF, HENRY	2022-01-01	GUARDHIGH	ES	\$89.81
LISTON, BRIAN	2021-02-01	1581OPENAXE	FAM	\$1961.43
LISTON, BRIAN	2021-02-01	GUARDLOW	FAM	\$100.74
LISTON, BRIAN	2021-02-01	VSP	FAM	\$23.76
MARTIN, ROBERT	2022-01-01	1581OPENAXE	EE	\$467.36
MARTIN, ROBERT	2022-01-01	GUARDLOW	EE	\$29.44
MARTIN, ROBERT	2022-01-01	VSP	EE	\$8.75
MAYER, KENNETH	2021-02-01	1581OPENAXE	ES	\$1307.62
MAYER, KENNETH	2021-02-01	GUARDLOW	ES	\$55.54
MAYER, KENNETH	2021-02-01	VSP	ES	\$14.73
NORRIS, EBONEE	2022-01-01	1581OPENAXE		\$
NORRIS, EBONEE	2022-04-01	1581OPENAXE	EE	\$633.81
NORRIS, EBONEE	2022-01-01	1581OPENAXE		\$
NORRIS, EBONEE	2022-04-01	GUARDHIGH	EE	\$47.61
NORRIS, EBONEE	2022-04-01	VSP	EE	\$8.75
POON, SINDY	2022-01-01	ADD		\$21.00
POON, SINDY	2022-01-01	GUARDHIGH	EE	\$47.61
POULSON, ALLYSON	2021-09-01	1581OPENAXE	FAM	\$1480.09
POULSON, ALLYSON	2021-09-01	GUARDHIGH	FAM	\$160.18
POULSON, ALLYSON	2021-09-01	VSP	FAM	\$23.76

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CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
RIVERA, CARLOS	2022-01-01	1581OPENAXE	EE	\$467.36
RIVERA, CARLOS	2022-01-01	VSP	EE	\$8.75

MEDICAL PLAN COUNTS

Employee Only	3
Employee & Spouse	2
Employee & Children	0
Family	4