

Account Services

Monthly Statement

ANDREW NICHOLLS PHARMACEUTICAL CONSULTING

Invoice Number: AND2022-04

Invoice Month: Billing Date:

APRIL 03/15/2022

Payment Due Date:

03/31/2022

PLAN COVERAGE QTY

PRICE

TOTAL

GRAND TOTAL

\$0.00

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



Account Services

ANDREW NICHOLLS PHARMACEUTICAL CONSULTING

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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
NICHOLLS, ANDREW	07/01/2021	VBP1	EE	\$

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