



Account Services

Monthly Statement

BEACON OF HOPE HOSPICE OF MISSOURI, INC.
1201 C SOUTH BROADWAY
OAK GROVE, MO 64075

Invoice Number: BEA2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022
Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0435OPENACC	Employee Only	1	\$450.74	\$450.74
ADD	Employee Only	6	\$3.36**	\$52.08
GUARDHIGH	Employee Only	4	\$47.61	\$190.44
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDHIGH	Employee & Children	1	\$89.81	\$89.81
GUARDLOW	Employee Only	2	\$29.44	\$58.88
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
GUARDLOW	Family	2	\$100.74	\$201.48
VSP	Employee Only	6	\$8.75	\$52.50
VSP	Employee & Spouse Only	5	\$14.73	\$73.65
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$1,329.95

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

BEACON OF HOPE HOSPICE OF MISSOURI, INC.
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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ANDERSON, CHANDRA	2022-01-01	ADD		\$4.20
ANDERSON, CHANDRA	2022-01-01	GUARDHIGH	EC	\$89.81
ANDERSON, CHANDRA	2022-01-01	VSP	EC	\$15.02
BOYD, TRACY	2022-03-01	GUARDLOW	EE	\$29.44
BOYD, TRACY	2022-03-01	VSP	EE	\$8.75
CHRISTENSEN, MONICA	2022-01-01	ADD		\$4.20
CHRISTENSEN, MONICA	2022-01-01	GUARDHIGH	ES	\$89.81
CHRISTENSEN, MONICA	2022-01-01	VSP	ES	\$14.73
CLARK, MARY	2022-02-01	GUARDHIGH	EE	\$47.61
CLARK, MARY	2022-02-01	VSP	EE	\$8.75
DAVENPORT, JULIE	2022-01-01	GUARDLOW	ES	\$55.54
DAVENPORT, JULIE	2022-01-01	VSP	ES	\$14.73
KLING, LINDA	2022-01-01	GUARDHIGH	EE	\$47.61
KLING, LINDA	2022-01-01	VSP	EE	\$8.75
LAWRENCE, NANCY	2022-03-01	ADD		\$13.02
LAWRENCE, NANCY	2022-03-01	GUARDLOW	FAM	\$100.74
LAWRENCE, NANCY	2022-03-01	VSP	ES	\$14.73
LEWIS, RHONDA	2022-01-01	ADD		\$21.00
LEWIS, RHONDA	2022-01-01	GUARDHIGH	EE	\$47.61
LEWIS, RHONDA	2022-01-01	VSP	EE	\$8.75
MOWERS, MARCELLA	2022-03-01	ADD		\$3.36
MOWERS, MARCELLA	2022-03-01	GUARDLOW	EE	\$29.44
MOWERS, MARCELLA	2022-03-01	VSP	EE	\$8.75
PETERSON, JOSHUA	2022-03-01	GUARDHIGH	EE	\$47.61
PETERSON, JOSHUA	2022-03-01	VSP	EE	\$8.75
PLUMBERG, JENNIFER	2022-01-01	VSP	ES	\$14.73

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CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PLUMBERG, JENNIFER	2022-01-01	ADD		\$6.30
TIEMAN, RASCHEL	2022-01-01	GUARDLOW	FAM	\$100.74
TIEMAN, RASCHEL	2022-01-01	VSP	ES	\$14.73
TIEMAN, RASCHEL	2020-01-01	0435OPENACC		\$

MEDICAL PLAN COUNTS

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