



Account Services

Monthly Statement

SKY LLC
67 TOWER RD
WHITE PLAINS, NY 10604

Invoice Number: SKY2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022
Payment Due Date: 03/31/2022

| PLAN | COVERAGE | QTY | PRICE | TOTAL |
|-------------|------------------------|-----|-------------|------------|
| 1585OPENAXE | Employee & Spouse Only | 1 | \$1,307.62 | \$1,307.62 |
| 1585OPENAXE | Employee & Children | 1 | \$1,307.62 | \$1,307.62 |
| 1585OPENAXE | Family | 1 | \$1,961.43 | \$1,961.43 |
| GUARDHIGH | Employee & Spouse Only | 1 | \$89.81 | \$89.81 |
| GUARDHIGH | Employee & Children | 1 | \$89.81 | \$89.81 |
| GUARDHIGH | Family | 1 | \$160.18 | \$160.18 |
| VSP | Employee & Spouse Only | 1 | \$14.73 | \$14.73 |
| VSP | Employee & Children | 1 | \$15.02 | \$15.02 |
| VSP | Family | 1 | \$23.76 | \$23.76 |
| | | | GRAND TOTAL | \$4,969.98 |

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

SKY LLC
67 TOWER RD
WHITE PLAINS, NY 10604

CURRENT MONTH ENROLLMENT

| MEMBER NAME | EFF DATE | PLAN | COVERAGE | PRICE |
|--------------------|------------|-------------|----------|-----------|
| DIMITROVA, MARINA | 2021-01-01 | 1585OPENAXE | FAM | \$1961.43 |
| DIMITROVA, MARINA | 2021-01-01 | GUARDHIGH | FAM | \$160.18 |
| DIMITROVA, MARINA | 2021-01-01 | VSP | FAM | \$23.76 |
| MACKONOCHE, JOANNE | 2021-01-01 | 1585OPENAXE | ES | \$1307.62 |
| MACKONOCHE, JOANNE | 2021-01-01 | GUARDHIGH | ES | \$89.81 |
| MACKONOCHE, JOANNE | 2021-01-01 | VSP | ES | \$14.73 |
| MENENDEZ, YULISSA | 2021-10-13 | 1585OPENAXE | EC | \$1307.62 |
| MENENDEZ, YULISSA | 2021-10-13 | GUARDHIGH | EC | \$89.81 |
| MENENDEZ, YULISSA | 2021-10-13 | VSP | EC | \$15.02 |

MEDICAL PLAN COUNTS

| | |
|---------------------|---|
| Employee Only | 0 |
| Employee & Spouse | 1 |
| Employee & Children | 1 |
| Family | 1 |