SMALL GROUP BILLING GUIDE

An Overview of Your Invoice and Billing Package

WYOMING

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Note: The examples in this guide are hypothetical and are used for illustration only. Your invoices and reports may have a slightly different appearance than those shown in this guide.

INTRODUCTION

Introducing Your Invoice and Standard Reports

On the following pages, you will find information about each section of your invoice. Included is a sample of each report with detailed descriptions of the information on the report.

Definitions for terminology related to your invoice may be found in the Glossary at the end of this guide.

Please keep this guide in a convenient location for all those involved in processing invoices.

Important Payment Instructions

Please send your payment and the invoice remittance stub from the bottom of the invoice each time you make a payment.

If you use the window envelope included with the invoice, the correct address will show through from the invoice remittance stub.

If your company prints its own envelopes, be sure to make note of the Remit To address from the remittance stub.

Sending your payments to any other address will delay processing.

Electronic Billing is Available

Instead of receiving paper bills, you can view your billing information and pay your health care coverage premium online.

AN OVERVIEW OF
Your Billing Package

Your Billing Package includes an Invoice Summary plus four standard reports.

Invoice Summary
Represents the total premium charges due for the current billing period, as well as any outstanding balances from previous billing periods for all products billed.

Premium Summary Report
Shows a summary of current enrollees (by contract type and product) that are active at the start of the coverage period.

Member Activity Report
Shows all additions, terminations, and changes for the current, prior, and future coverage periods.

Retroactive Rate Change Summary Report
Provides detail on any rate change by product.

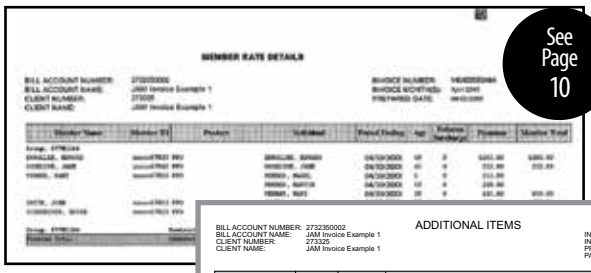
Additional Items Report
Reflects any miscellaneous charges.

One optional report is also available:

Member Rate Details
Summarizes members and premiums for enrollees that are active at the end of the coverage period. This report is included in your initial bill package. If you no longer want to receive this report, contact your Billing Specialist.

These are examples of reports generated about your health care coverage. These reports may be included with your invoice. Please use the descriptions and explanations in the pages that follow as a guide to understanding and interpreting the data.

(OPTIONAL)



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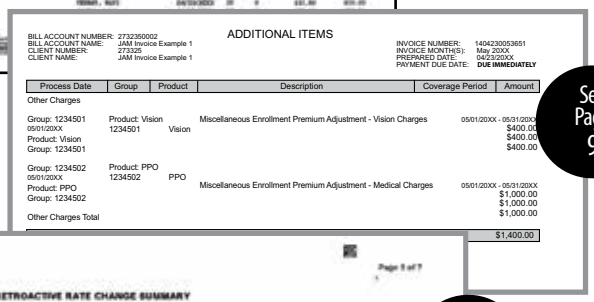

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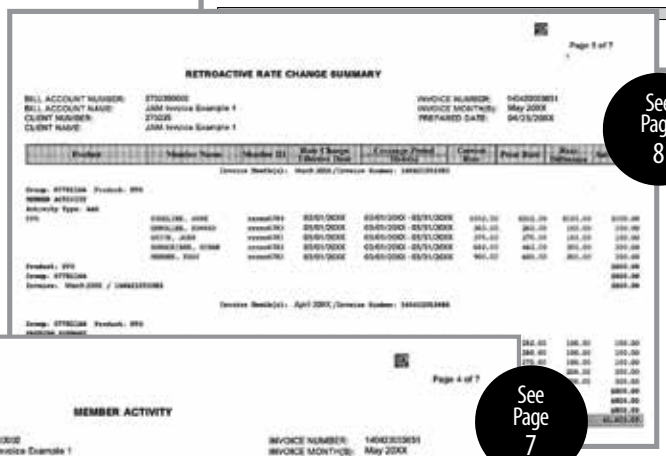
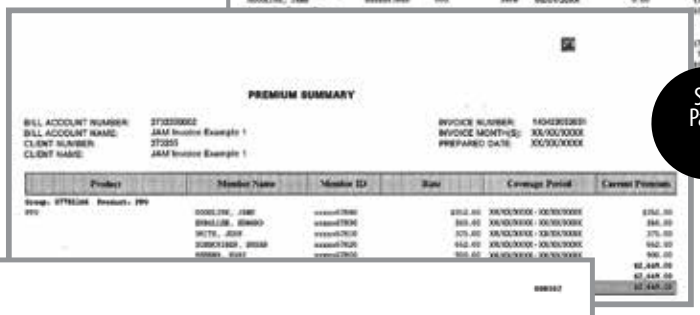


See Page 8

See Page 7



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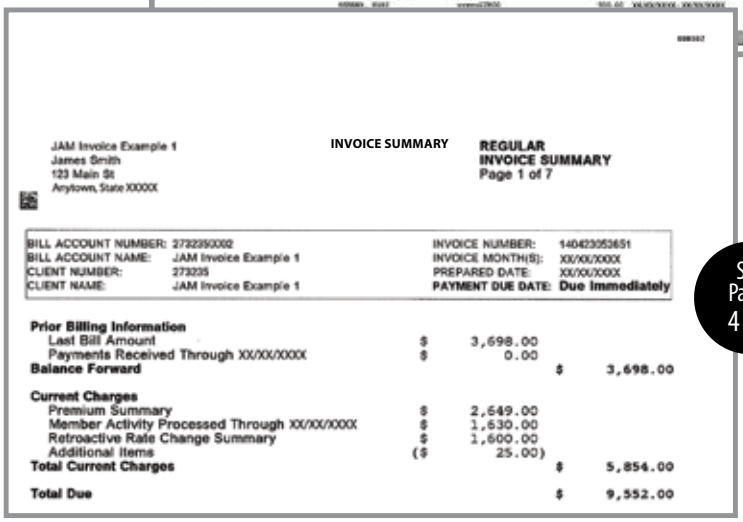


JAM Invoice Example 1
James Smith
123 Main St
Anytown, State XXXXX

INVOICE SUMMARY

REGULAR INVOICE SUMMARY
Page 1 of 7

BILL ACCOUNT NUMBER:	2732350002	INVOICE NUMBER:	140423053651
BILL ACCOUNT NAME:	JAM Invoice Example 1	INVOICE MONTH(S):	XX/XX/XXXX
CLIENT NUMBER:	273235	PREPARED DATE:	XX/XX/XXXX
CLIENT NAME:	JAM Invoice Example 1	**PAYMENT DUE DATE:**	**Due Immediately**

Prior Billing Information			
Last Bill Amount	$ 3,698.00		
Payments Received Through XX/XX/XXXX	$ 0.00		
Balance Forward		$	3,698.00
Current Charges			
Premium Summary	$ 2,649.00		
Member Activity Processed Through XX/XX/XXXX	$ 1,630.00		
Retroactive Rate Change Summary	$ 1,600.00		
Additional Items	($ 25.00)		
Total Current Charges		$	5,854.00
Total Due		$	9,552.00

See Pages 4 & 5

Your Invoice

The Regular Invoice Summary represents the total charges due for the current period as well as any outstanding balances from previous billing periods.

1. This area contains information regarding your organization (client), invoice number, and date information.

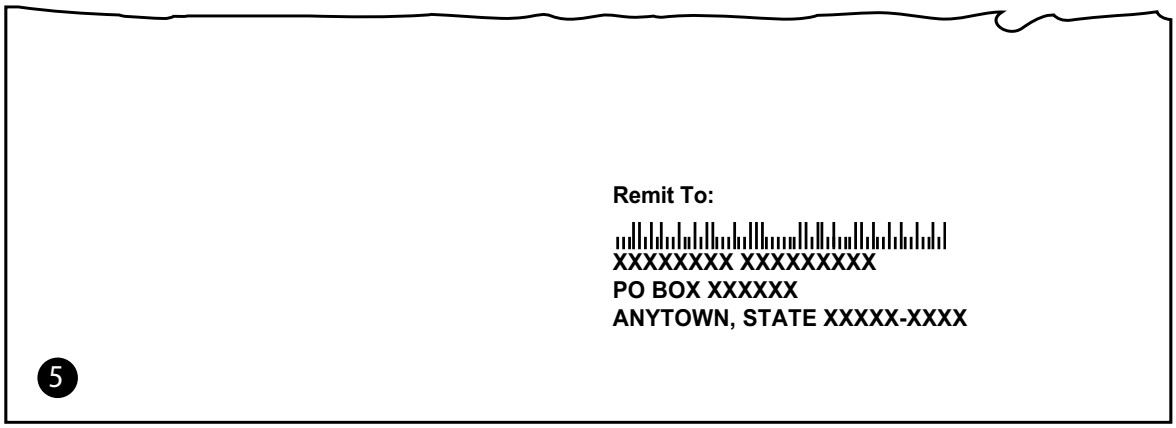
2. In addition to stating the last bill amount and payments received, this section reflects your Balance Forward.

3. This section lists a summary of all charges or credits associated with the current billing period.

4. Remittance stub (front).
   Important Information: Submitting Payments
   Please submit your payment and the original remittance stub in the return envelope provided.

5. Remittance stub (reverse side).

6. Identifies your contact information. Send your enrollment activity changes to this address.



REMITTANCE STUB REVERSE SIDE

000002

6 Suite XXXX, Team XXXX
P.O. Box XXXXXX
Anytown, State XXX-XXXX
Phone:(XXX) XXX-XXXX

JAM Invoice Example 1
James Smith
123 Main St
Anytown, State XXXXX

REGULAR
INVOICE SUMMARY
Page 1 of 7

1

BILL ACCOUNT NUMBER:	2732350002	INVOICE NUMBER:	140423053651
BILL ACCOUNT NAME:	JAM Invoice Example 1	INVOICE MONTH(S):	May 20XX
CLIENT NUMBER:	273235	PREPARED DATE:	04/23/20XX
CLIENT NAME:	JAM Invoice Example 1	**PAYMENT DUE DATE:**	**Due Immediately**

2

Prior Billing Information			
Last Bill Amount	$ 3,698.00		
Payments Received Through 04/22/20XX	$ 0.00		
Balance Forward		$	3,698.00
Current Charges			
Premium Summary	$ 2,649.00		
Member Activity Processed Through 11/12/20XX	$ 1,630.00		
Retroactive Rate Change Summary	$ 1,600.00		
Additional Items	($ 25.00)		
Total Current Charges		$	5,854.00
Total Due		$	9,552.00

3

DETACH AND RETURN THIS PORTION WITH PAYMENT

4

MAKE CHECK PAYABLE TO XXXXXXX XXXXXXXXXX
See page 2 for remittance address

INVOICE NUMBER: 140423053651
BILL ACCOUNT NUMBER: 2732350002

AMOUNT PAID $

JAM Invoice Example 1
James Smith
123 Main St
Anytown, State XXXXX

INVOICE MONTH(S): **May 20XX**
PAYMENT DUE DATE: **Due Immediately**
TOTAL AMOUNT DUE: **$ 9,552.00**

DO NOT WRITE BELOW THIS LINE

REMITTANCE STUB FRONT SIDE

STANDARD REPORTS
Premium Summary Report

The Premium Summary Report is a summary of current enrollees that are active at the start of the coverage period. A grand total is included at the end of the report to show the total current premium for all members.

If your company has more than one group number, data is reported separately for each group.

This area shows the member name and member ID.

PREMIUM SUMMARY

P.O. Box XXXXXX
Anytown, State XXXXX
Phone:(XXX) XXX-XXXX

BILL ACCOUNT NUMBER: 2732350002
BILL ACCOUNT NAME: JAM Invoice Example 1
CLIENT NUMBER: 273235
CLIENT NAME: JAM Invoice Example 1

INVOICE NUMBER: 140423053651
INVOICE MONTH(S): May 20XX
PREPARED DATE: 04/23/20XX

Product	Member Name	Member ID	Rate	Coverage Period	Current Premium
Group: 07781166 Product: PPO					
PPO	GOODLINE, JANE	xxxxx67840	$352.00	05/01/20XX - 05/31/20XX	$352.00
	ENROLLEE, EDWARD	xxxxx67830	360.00	05/01/20XX - 05/31/20XX	360.00
	SMITH, JOHN	xxxxx67810	375.00	05/01/20XX - 05/31/20XX	375.00
	SUBSCRIBER, SUSAN	xxxxx67820	662.00	05/01/20XX - 05/31/20XX	662.00
	MEMBER, MARY	xxxxx67800	900.00	05/01/20XX - 05/31/20XX	900.00
Product: PPO		5			$2,649.00
Group: 07781166	Actual Member Count:	5			$2,649.00
Premium Total:					$2,649.00

Lists the total contract count and corresponding premium for each group, broken down by product.

Note: Information on the Premium Summary Report is organized by Group Number, then by Product. Additional sort options may be available. Contact your Billing Specialist for more information.

STANDARD REPORTS (Continued)
Member Activity Report

The Member Activity Report shows all additions, terminations, and changes for the current, prior, and future coverage periods. A grand total is included at the end of the report to show the total premium for retroactive and current activity changes.

Future enrollment that is submitted will be reflected on the report.

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MEMBER ACTIVITY

BILL ACCOUNT NUMBER: 2732350002
BILL ACCOUNT NAME: JAM Invoice Example 1
CLIENT NUMBER: 273235
CLIENT NAME: JAM Invoice Example 1

INVOICE NUMBER: 140423053651
INVOICE MONTH(S): May 20XX
PREPARED DATE: 04/23/20XX

Member Name	Member ID	Product	Activity Type	Effective Date	Retroactive Premium	Current Premium	Amount Due	Member Total
Group: 07781166 Activity Type: Add								
BENEFITS, BEN	xxxxx67870	PPO	Add	06/01/20XX	$0.00	$0.00	$0.00	$0.00
CARDHOLDER, CHARLIE	xxxxx67860	PPO	Add	05/01/20XX	0.00	768.00	768.00	768.00
PERSON, PAULA	xxxxx67850	PPO	Add	04/01/20XX	429.00	429.00	858.00	858.00
Activity Type: Add					$429.00	$1,197.00	$1,626.00	
Group: 07781166 Activity Type: Term								
GOODLINE, JANE	[illegible]	PPO	Term	05/01/20XX	0.00	(352.00)	(352.00)	(352.00)
Activity Type: Term					$0.00	($352.00)	($352.00)	
Group: 07781166 Activity Type: Change								
ENROLLEE, EDWARD	xxxxx67830	PPO	Ch Term	05/01/20XX	0.00	(360.00)	(360.00)	
		PPO	Ch Add	05/01/20XX	0.00	716.00	716.00	356.00
Activity Type: Change					$0.00	$356.00	$356.00	
Group: 07781166					$429.00	$1,201.00	$1,630.00	
Member Activity Total:					$429.00	$1,201.00	$1,630.00	

Member Activity is sorted by Product within Group and Activity Type.

Premium charge or credit by member (depending on Activity Type) for any previous period(s).

The net result to premium from an activity change on a member.

Note: Information on the Member Activity Report is organized by Group Number, Activity Type, and Member Name. Additional sort options may be available. Contact your Billing Specialist for more information.

STANDARD REPORTS (Continued)
Retroactive Rate Change Summary Report

The Retroactive Rate Change Summary Report provides detail on any rate change by product. A grand total of the difference between current rates and prior rates is shown at the end of the report.

Reflects the original invoice month and invoice number to which the retroactive rate change applies.

Calculated by subtracting the Prior Rate from the Current Rate.

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RETROACTIVE RATE CHANGE SUMMARY

BILL ACCOUNT NUMBER: 273235000X
BILL ACCOUNT NAME: JAM Invoice Example 1
CLIENT NUMBER: 273235
CLIENT NAME: JAM Invoice Example 1

INVOICE NUMBER: 140423053651
INVOICE MONTH(S): May 20XX
PREPARED DATE: 04/23/20XX

Product	Member Name	Member ID	Rate Change Effective Date	Coverage Period Date(s)	Current Rate	Prior Rate	Rate Difference	Amount Due
Invoice Month(s): March 20XX /Invoice Number: 140421053383								
Group: 07781166 Product: PPO								
MEMBER ACTIVITY								
Activity Type: Add								
PPO	GOODLINE, JANE	xxxxx6784	03/01/20XX	03/01/20XX - 03/31/20XX	$352.00	$252.00	$100.00	$100.00
	ENROLLEE, EDWARD	xxxxx6783	03/01/20XX	03/01/20XX - 03/31/20XX	360.00	260.00	100.00	100.00
	SMITH, JOHN	xxxxx6781	03/01/20XX	03/01/20XX - 03/31/20XX	375.00	275.00	100.00	100.00
	SUBSCRIBER, SUSAN	xxxxx6782	03/01/20XX	03/01/20XX - 03/31/20XX	662.00	462.00	200.00	200.00
	MEMBER, MARY	xxxxx6780	03/01/20XX	03/01/20XX - 03/31/20XX	900.00	600.00	300.00	300.00
Product: PPO								$800.00
Group: 07781166								$800.00
Invoice: March 20XX / 140421053383								$800.00
Invoice Month(s): April 20XX /Invoice Number: 140422053484								
Group: 07781166 Product: PPO								
PREMIUM SUMMARY								
PPO	GOODLINE, JANE	xxxxx6784	03/01/20XX	04/01/20XX - 04/30/20XX	352.00	252.00	100.00	100.00
	ENROLLEE, EDWARD	xxxxx6783	03/01/20XX	04/01/20XX - 04/30/20XX	360.00	260.00	100.00	100.00
	SMITH, JOHN	xxxxx6781	03/01/20XX	04/01/20XX - 04/30/20XX	375.00	275.00	100.00	100.00
	SUBSCRIBER, SUSAN	xxxxx6782	03/01/20XX	04/01/20XX - 04/30/20XX	662.00	462.00	200.00	200.00
	MEMBER, MARY	xxxxx6780	03/01/20XX	04/01/20XX - 04/30/20XX	900.00	600.00	300.00	300.00
Product: PPO								$800.00
Group: 07781166								$800.00
Invoice: April 20XX / 140422053484								$800.00
Retroactive Rate Change Summary Total:								$1,600.00

Reflects the report from the original invoice on which the charge detail appeared.

Lists the total amount due for the specified invoice based on the difference in the current and prior rates.

Note: Information on the Retroactive Rate Change Summary Report is organized by Invoice Month/Invoice Number, Group Number, and Product.

STANDARD REPORTS (Continued)

Additional Items Report

The Additional Items Report reflects miscellaneous charges and fees, as applicable.

ADDITIONAL ITEMS

BILL ACCOUNT NUMBER: 2732350002
BILL ACCOUNT NAME: JAM Invoice Example 1
CLIENT NUMBER: 273325
CLIENT NAME: JAM Invoice Example 1

INVOICE NUMBER: 1404230053651
INVOICE MONTH(S): May 20XX
PREPARED DATE: 04/23/20XX
PAYMENT DUE DATE: **DUE IMMEDIATELY**

Process Date	Group	Product	Description	Coverage Period	Amount
Other Charges					
Group: 1234501	Product: Vision		Miscellaneous Enrollment Premium Adjustment - Vision Charges	05/01/20XX - 05/31/20XX	
05/01/20XX	1234501	Vision			$400.00
Product: Vision					$400.00
Group: 1234501					$400.00
Group: 1234502	Product: PPO				
05/01/20XX	1234502	PPO			
Product: PPO			Miscellaneous Enrollment Premium Adjustment - Medical Charges	05/01/20XX - 05/31/20XX	
Group: 1234502					$1,000.00
					$1,000.00
Other Charges Total					$1,000.00
Additional Items Total:					$1,400.00

OPTIONAL REPORT
Member Rate Details

The Member Rate Details Report shows the members who are active at the end of the billing period. Members who were added during the period will be reflected on the report. Members who were terminated during the period will not be on the report. The total charges reported are a monthly estimate.

Note: The Member Rate Details Report will automatically be included in your initial bill package. If you no longer want to receive this report, contact your Billing Specialist.

MEMBER RATE DETAILS

BILL ACCOUNT NUMBER: 2732350002
BILL ACCOUNT NAME: JAM Invoice Example 1
CLIENT NUMBER: 273235
CLIENT NAME: JAM Invoice Example 1

INVOICE NUMBER: 140422053484
INVOICE MONTH(S): April 20XX
PREPARED DATE: 04/22/20XX

Member Name	Member ID	Product	Individual	Period Ending	Age	Tobacco Surcharge	Premium	Member Total
Group: 07781166								
ENROLLEE, EDWARD	xxxxx67830	PPO	ENROLLEE, EDWARD	04/30/20XX	49	N	$260.00	$260.00
GOODLINE, JANE	xxxxx67840	PPO	GOODLINE, JANE	04/30/20XX	45	N	252.00	252.00
MEMBER, MARY	xxxxx67800	PPO	MEMBER, MABEL	04/30/20XX	6	N	112.00	
			MEMBER, MARTIN	04/30/20XX	43	N	248.00	
			MEMBER, MARY	04/30/20XX	39	N	240.00	600.00
SMITH, JOHN	xxxxx67810	PPO	SMITH, JOHN	04/30/20XX	57	N	275.00	275.00
SUBSCRIBER, SUSAN	xxxxx67820	PPO	SUBSCRIBER, SAMUEL	04/30/20XX	34	N	230.00	
			SUBSCRIBER, SUSAN	04/30/20XX	35	N	232.00	462.00
Group: 07781166		Contract: 5					$1,849.00	
Premium Total:		Contract Total: 5					$1,849.00	

Reconciling Your Invoice Summary

PRIOR BILLING INFORMATION

1. The LAST BILL AMOUNT found on the current **Invoice Summary** equals the TOTAL DUE found on the previous **Invoice Summary**.
   (See the Previous Invoice Summary on the next page.)
2. The PAYMENTS RECEIVED THROUGH MM/DD/CCYY found on the current **Invoice Summary** is the total amount of payments received since the last invoice.
3. The BALANCE FORWARD is the difference between the LAST BILL AMOUNT and PAYMENTS RECEIVED THROUGH MM/DD/CCYY on the current **Invoice Summary.**

P.O. Box XXXXXX
Anytown, State XXXXX
Phone:(XXX) XXX-XXXX

JAM Invoice Example 1
James Smith
123 Main St
Anytown, State XXXXX

CURRENT INVOICE SUMMARY

REGULAR INVOICE SUMMARY
Page 1 of 7

BILL ACCOUNT NUMBER:	2732350002	INVOICE NUMBER:	140423053651
BILL ACCOUNT NAME:	JAM Invoice Example 1	INVOICE MONTH(S):	May 20XX
CLIENT NUMBER:	273235	PREPARED DATE:	04/23/20XX
CLIENT NAME:	JAM Invoice Example 1	**PAYMENT DUE DATE:**	**Due Immediately**

Prior Billing Information				
Last Bill Amount	$	3,698.00		1
Payments Received Through 04/22/20XX	$	0.00		2
Balance Forward			$	3,698.00
Current Charges				3
Premium Summary	$	2,649.00		
Member Activity Processed Through 11/12/20XX	$	1,630.00		
Retroactive Rate Change Summary	$	1,600.00		
Additional Items	($	25.00)		
Total Current Charges			$	5,854.00
Total Due			$	9,552.00

Reconciling *(Continued)*

000001

P.O. Box XXXXXX
Anytown, State XXXXX
Phone:(XXX) XXX-XXXX

PREVIOUS INVOICE SUMMARY

JAM Invoice Example 1
James Smith
123 Main St
Anytown, State XXXXX

REGULAR INVOICE SUMMARY
Page 1 of 4

BILL ACCOUNT NUMBER:	2732350002	INVOICE NUMBER:	140422053484
BILL ACCOUNT NAME:	JAM Invoice Example 1	INVOICE MONTH(S):	April 20XX
CLIENT NUMBER:	273235	PREPARED DATE:	04/22/20XX
CLIENT NAME:	JAM Invoice Example 1	**PAYMENT DUE DATE:**	**Due Immediately**

Prior Billing Information				
Last Bill Amount	$	1,849.00		
Payments Received Through 04/21/20XX	$	0.00		
Balance Forward			$	1,849.00
Current Charges				
Premium Summary	$	1,849.00		
Total Current Charges			$	1,849.00
Total Due			$	3,698.00

Reconciling *(Continued)*

CURRENT CHARGES

4. The PREMIUM SUMMARY line is the total premium charges at the start of the current coverage period, based on the number of members for each product type. This is the *Premium Total* found on the **Premium Summary Report**.

5. The MEMBER ACTIVITY line is the total premium charges reflecting activity changes processed since the last invoice. This is the *Member Activity Total* on the **Member Activity Report**.

   Example: Last bill cutoff was 04/04/20XX. Member activity processed between 04/05/20XX and 05/04/20XX will be reflected in the June 20XX invoice.

6. The RETROACTIVE RATE CHANGE SUMMARY is the total amount of charges or credits due to a rate change that impacts prior premium charges. This total is the *Retroactive Rate Change Summary Total* found on the **Retroactive Rate Change Summary Report**.

7. ADDITIONAL ITEMS is the total amount of charges found on the **Additional Items Report**.

8. The TOTAL CURRENT CHARGES is a subtotal of the listed CURRENT CHARGES. (See current **Invoice Summary** below and equation on the next page.)

9. The TOTAL DUE is the sum of the BALANCE FORWARD and Total Current Charges on the **Invoice Summary**.
   (See current **Invoice Summary** below.)

P.O. Box XXXXXX
Anytown, State XXXXX
Phone:(XXX) XXX-XXXX

JAM Invoice Example 1
James Smith
123 Main St
Anytown, State XXXXX

CURRENT INVOICE SUMMARY

REGULAR INVOICE SUMMARY
Page 1 of 7

BILL ACCOUNT NUMBER:	2732350002	INVOICE NUMBER:	140423053651
BILL ACCOUNT NAME:	JAM Invoice Example 1	INVOICE MONTH(S):	May 20XX
CLIENT NUMBER:	273235	PREPARED DATE:	04/23/20XX
CLIENT NAME:	JAM Invoice Example 1	**PAYMENT DUE DATE:**	**Due Immediately**

Prior Billing Information				
Last Bill Amount	$	3,698.00		
Payments Received Through 04/22/20XX	$	0.00		
Balance Forward			$	3,698.00
Current Charges				
Premium Summary	$	2,649.00		
Member Activity Processed Through 11/12/20XX	$	1,630.00		
Retroactive Rate Change Summary	$	1,600.00		
Additional Items	($	25.00)		
Total Current Charges			$	5,854.00
Total Due			$	9,552.00

Reconciling *(Continued)*

TOTAL CURRENT CHARGES EQUATION

This total can also be obtained by using the report totals and the following equation:

- Premium Summary (beginning figure on previous page) 4
- ± Member Activity 5
- ± Retroactive Rate Change Summary 6
- ± Additional Items 7

- Total Current Charges 8
- ± Balance Forward

- Total Due 9

PREMIUM SUMMARY 4

P.O. Box XXXXXX
Anytown, State XXXXX
Phone:(XXX) XXX-XXXX

BILL ACCOUNT NUMBER: 2732350002
BILL ACCOUNT NAME: JAM Invoice Example 1
CLIENT NUMBER: 273235
CLIENT NAME: JAM Invoice Example 1

INVOICE NUMBER: 1404230053651
INVOICE MONTH(S): May 20XX
PREPARED DATE: 04/23/20XX

Product	Member Name	Member ID	Rate	Coverage Period	Current Premium
Group: 07781166 Product: PPO					
PPO	GOODLINE, JANE	xxxxx67840	$352.00	05/01/20XX - 05/31/20XX	$352.00
	ENROLLEE, EDWARD	xxxxx67830	360.00	05/01/20XX - 05/31/20XX	360.00
	SMITH, JOHN	xxxxx67810	375.00	05/01/20XX - 05/31/20XX	375.00
	SUBSCRIBER, SUSAN	xxxxx67820	662.00	05/01/20XX - 05/31/20XX	662.00
	MEMBER, MARY	xxxxx67800	900.00	05/01/20XX - 05/31/20XX	900.00
Product: PPO			$		$2,649.00
					649.00
					649.00

BILL ACCOUNT NAME: JAM Invoice Example 1
CLIENT NUMBER: 273235
CLIENT NAME: JAM Invoice Example 1

INVOICE MONTH(S): May 20XX
PREPARED DATE: 04/23/20XX

MEMBER ACTIVITY REPORT 5

Member Name	Member ID	Product	Activity Type	Effective Date	Retroactive Premium	Current Premium	Amount Due	Member Total
Group: 07781166 Activity Type: Add								
DEREFITS, DEN	xxxxx67870	PPO	Add	06/01/20XX	$0.00	$0.00	$0.00	$0.00
CARDHOLDER, CHARLIE	xxxxx67860	PPO	Add	05/01/20XX	0.00	768.00	768.00	768.00
PERSON, PAULA	xxxxx67850	PPO	Add	04/01/20XX	429.00	429.00	858.00	858.00
Activity Type: Add					$429.00	$1,197.00	$1,626.00	
Group: 07781166 Activity Type: Term								
GOODLINE, JANE	xxxxx67840	PPO	Term	05/01/20XX	0.00	(352.00)	(352.00)	(352.00)
Activity Type: Term					$0.00	($352.00)	($352.00)	
Group: 07781166 Activity Type: Change								
ENROLLEE, EDWARD	xxxxx67830	PPO	Ch Term	05/01/20XX	0.00	(360.00)	(360.00)	
		PPO	Ch Add	05/01/20XX	0.00	716.00	716.00	356.00
Activity Type: Change					$0.00	$356.00	$356.00	
Group: 07781166					$429.00	$1,201.00	$1,630.00	
Member Activity Total:					$429.00	$1,201.00	$1,630.00	

RETROACTIVE RATE CHANGE SUMMARY REPORT 6

Invoice Month(s): April 20XX /Invoice Number: 1404220053684

Group: 07781166 Product: PPO								
MEMBER ACTIVITY								
Activity Type: Add								
PPO	GOODLINE, JANE	xxxxx6784	03/01/20XX	03/01/20XX - 03/31/20XX	$352.00	$252.00	$100.00	$100.00
	ENROLLEE, EDWARD	xxxxx6783	03/01/20XX	03/01/20XX - 03/31/20XX	360.00	260.00	100.00	100.00
	SMITH, JOHN	xxxxx6781	03/01/20XX	03/01/20XX - 03/31/20XX	375.00	275.00	100.00	100.00
	SUBSCRIBER, SUSAN	xxxxx6782	03/01/20XX	03/01/20XX - 03/31/20XX	662.00	462.00	200.00	200.00
	MEMBER, MARY	xxxxx6780	03/01/20XX	03/01/20XX - 03/31/20XX	900.00	600.00	300.00	300.00
Product: PPO								$800.00
Group: 07781166								$800.00
Invoice: March 20XX / 1404221053383								$800.00
Group: 07781166 Product: PPO								
PREMIUM SUMMARY								
PPO	GOODLINE, JANE	xxxxx6784	03/01/20XX	04/01/20XX - 04/30/20XX	352.00	252.00	100.00	100.00
	ENROLLEE, EDWARD	xxxxx6783	03/01/20XX	04/01/20XX - 04/30/20XX	360.00	260.00	100.00	100.00
	SMITH, JOHN	xxxxx6781	03/01/20XX	04/01/20XX - 04/30/20XX	375.00	275.00	100.00	100.00
	SUBSCRIBER, SUSAN	xxxxx6782	03/01/20XX	04/01/20XX - 04/30/20XX	662.00	462.00	200.00	200.00
	MEMBER, MARY	xxxxx6780	03/01/20XX	04/01/20XX - 04/30/20XX	900.00	600.00	300.00	300.00
Product: PPO								$800.00
Group: 07781166								$800.00
Invoice: April 20XX / 1404221053684								$800.00
								$1,600.00

ADDITIONAL ITEMS 7

BILL ACCOUNT NUMBER: 2732350002
BILL ACCOUNT NAME: JAM Invoice Example 1
CLIENT NUMBER: 273325
CLIENT NAME: JAM Invoice Example 1

INVOICE NUMBER: 1404230053651
INVOICE MONTH(S): May 20XX
PREPARED DATE: 04/23/20XX
PAYMENT DUE DATE: **DUE IMMEDIATELY**

Process Date	Group	Product	Description	Coverage Period	Amount
Other Charges					
Group: 1234501 05/01/20XX Product: Vision Group: 1234501	Product: Vision 1234501	Vision	Miscellaneous Enrollment Premium Adjustment - Vision Charges	05/01/20XX - 05/31/20XX	$400.00 $400.00 $400.00
Group: 1234502 05/01/20XX Product: PPO Group: 1234502	Product: PPO 1234502	PPO	Miscellaneous Enrollment Premium Adjustment - Medical Charges	05/01/20XX - 05/31/20XX	$1,000.00 $1,000.00 $1,000.00
Other Charges Total					
Additional Items Total:					$1,400.00

SMALL GROUP ADMINISRATIVE GUIDE
Glossary

Activity Type
References member activity, such as additions, terminations, and changes.

Additional Items Report
Standard report in the bill package that shows miscellaneous charges or adjustments.

Adjustments
Used to adjust the customer's account to reflect debits/credits.

Balance Forward
Remaining balance from the previous billing period(s), including any refunds and/or adjustments.

Base 5 Group Number
The first five digits of the group number, which is the main number that defines a group assigned to a specific client. Used in reporting to identify groups with a common base number.

Bill Account
An account established for billing purposes that contains groups and products that share certain billing characteristics. At least one bill account is created for each client that is to receive a bill.

Bill Account Number
Billing system number used to identify a client's specific bill account.

Client
An account which has purchased coverage.

Client Number
Unique 6-digit identification number assigned to your account.

Contract Count
Number of members covered under each Contract Type.

Contract Type
References different coverage types available, such as individual, parent and children, and family.

Conversion Balance Forward
The outstanding balance or overpayment on an account that is transferred from the prior billing system.

Coverage Period
Coverage reflected on the current bill.

Coverage Period Count
The sum of each contract holder multiplied by the number of coverage periods each contract holder was effective during the coverage periods impacted by the retroactive rate change.

Current Premium
Premium due for the current billing period.

Current Rate
Rate to be applied to the current coverage period.

Effective Date
Date that coverage or changes are effective.

Group
Segment within a client, identified by group number.

Group Activity Total
Net total for Retroactive Premiums, Current Premiums and Amount Due for each change type within each group shown on the Member Activity Report.

Group Number
Unique 7-digit identification number assigned to segments within a client. Consists of a 5-digit main number, also called the Base 5 Group number, and a 2-digit sub-group number. Used in reporting to sort to the lowest group level.

Group Product Total
Current Premium total for each group shown on the Premium Summary report.

Invoice Month
First month of the coverage period the invoice reflects.

Invoice Number
A unique number which is assigned per client, Bill Account, and invoice month. Invoice number is located on the Invoice Summary and supporting reports.

Invoice Summary
This is a standard report which identifies the total charges due for the current billing period, as well as any outstanding balances from previous billing period(s).

Last Bill Amount
Total Amount Due from the last billing period.

Member Activity Report
Standard report located in the bill package that lists all member activity for the current, prior, and future coverage periods.

Member Activity Total
Net total for all membership activity.

Member Change Form
Standard Highmark form used to capture changes for specific member information.

Member ID
Agreement Number plus a succeeding zero used as the unique identifier for members.

Member Name
Individual subscriber's name.

Member Rate Details
Optional report that summarizes members and premiums associated with the current ending coverage month.

Payment Due Date
Date payment is due.

Payments Received Through (MM/DD/CCYY)
Total of all payments received through the date indicated on the Invoice Summary.

Premium
All premium charges for each product line for the current billing period.

Premium Summary Report
Standard report located in the bill package that shows a breakdown of current billed premiums for members who are active prior to the start of the coverage period.

Premium Total
Grand total of current premiums for all groups and products.

Prepared Date
Date the current invoice was produced.

Prior Rate
Previous rate that was used to calculate premium totals for prior billing periods.

Product
Purchased coverage. This is also a report sort option.

Product Line Description
Identifies the products purchased.

Product Subtotals
Total of the contract count and current premium, by individual product line.

Rate
Contracted rate for each type of coverage.

Remittance Address
Remit all payments to this address. Do not remit membership activity to this address.

Remittance Stub
Bottom portion of the Invoice Summary to be submitted with the payment that reflects invoice information, and a space to enter amount paid.

Retroactive Premium
Adjusted premium (additional charge or credit depending on the change) for any previous coverage period(s).

Retroactive Rate Change Summary Report
Standard report located in the bill package that provides detail on any retroactive rate changes by product.

Retroactive Rate Change Summary Total
Grand total included at the end of the Retroactive Rate Change Summary Report reflecting the total difference between current rates and prior rates, multiplied by the coverage period count.

Standard Reports
Set of reports that make up the bill package. The reports include: Invoice Summary, Premium Summary, Member Activity, Retroactive Rate Change Summary, and Additional Items.

Sort Options
Categories used to organize report information.

Total Current Charges
Total amount of charges for the current billing period.

Total Due
Total amount due by the payment due date, including any balance forward from previous billing periods.