

Date: 10/06/2009

EGYPTIAN AREA SCHOOLS

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Time: 11:20:11 AM

ARRA Payroll Premium Reduction Report by Branch

Report: RR

Reporting Period From: 09/01/2009 Through: 09/30/2009

SAMPLE MONTHLY REPORT/BILL

Employer: EGYPTIAN AREA SCHOOLS

Branch: 2FB [REDACTED]

Sponsor/Carrier: 2FB [REDACTED]

Benefit Plan: M PLAT MEDICAL PLATINUM PLAN

PQB Name	SSN	Event Date	# of Dependents	Payment	Premium	Admin Fee	Subsidy	Stimulus
[REDACTED]	[REDACTED]	08/31/2009	0	\$173.79	\$496.54	\$0.00	\$0.00	\$322.75
Plan Total:				\$173.79	\$496.54	\$0.00	\$0.00	\$322.75

→ Due by Cobra Beneficiary
 → Total Premium
 Due by Employer Group ←

Note: A PAGE WILL PRINT FOR EACH COVERAGE CHOSEN. FOR EXAMPLE, IF A PERSON HAS THE HEALTH PLAN AND THE DENTAL PLAN - TWO PAGES WILL PRINT.

Date: 10/01/2009

EGYPTIAN AREA SCHOOLS

Page: [REDACTED]

Time: 2:25:19 PM

ARRA Payroll Premium Reduction Report by Branch

Report: RR

Reporting Period From: 07/01/2009 Through: 09/30/2009

SAMPLE QUARTERLY REPORT

Employer: EGYPTIAN AREA SCHOOLS

Branch: 2FB [REDACTED]

Sponsor/Carrier: 2FB [REDACTED]

Benefit Plan: M PLAT MEDICAL PLATINUM PLAN

PQB Name	SSN	Event Date	# of Dependents	Payment	Premium	Admin Fee	Subsidy	Stimulus
[REDACTED]	[REDACTED]	08/31/2009	0	\$173.79	\$496.54	\$0.00	\$0.00	\$322.75
Plan Total:				\$173.79	\$496.54	\$0.00	\$0.00	\$322.75

↙ Dual Paid by Cobra Beneficiary - this quarter
↙ Total Premium - this quarter
↓ Dual Paid by Employer Group - this quarter

NOTE: A PAGE WILL PRINT FOR EACH COVERAGE CHOSEN. FOR EXAMPLE. IF A PERSON CHOSE THE HEALTH PLAN AND THE DENTAL PLAN - TWO PAGES WILL PRINT.