

December 2023

10/17/2023

10/17/2023

52Z060760B

52Z060760C

10/15/2023

10/15/2023

PREMIERCHOICE SPECIFIED DISEASE/ SICKNESS

PREMIERCHOICE ACCIDENT

SWATI ROY			Statement	Page 1 of 2
6900 THOMAS STON	IE UNIT 347		Statement Date	January 22, 2024
ELKRIDGE	MD 2	21075	ID#	52Z060760B

Plan/Member # & Effective Date: 52Z060760B - 08/15/2023 | 52Z060760C - 08/15/2023 | 52Z060760D - 08/15/2023 | 52Z060760G - 08/15/2023 |

52Z060760H - 08/15/2023 |

For questions about your payment history, please contact our Customer Care Team at 800-387-9027. Thank you for being our Customer. We appreciate you!

Transaction Date	Payment Applied	Plan/Member Number	Plan Name	Association Membership	Reversal Date	Reason	Payment Amount	Payment Method	Paid To Date
12/15/2023	12/15/2023	52Z060760B	PREMIERCHOICE SPECIFIED DISEASE/ SICKNESS				\$174.07		1/15/2024
12/15/2023	12/15/2023	52Z060760C	PREMIERCHOICE ACCIDENT				\$23.50		1/15/2024
12/15/2023	12/15/2023	52Z060760D	PREMIERCHOICE HEALTH AND WELLNESS				\$48.65		1/15/2024
12/15/2023	12/15/2023	52Z060760G	MEDGUARD- 5 Year Term to age 70 with ADB				\$77.50		1/15/2024
12/15/2023	12/15/2023	52Z060760H	ACCIDENT PROTECTOR				\$53.96		1/15/2024
		_					\$377.68	TOTAL	
November 2023									
Transaction Date	Payment Applied	Plan/Member Number	Plan Name	Association Membership	Reversal Date	Reason	Payment Amount	Payment Method	Paid To Date
11/15/2023	11/15/2023	52Z060760B	PREMIERCHOICE SPECIFIED DISEASE/ SICKNESS				\$174.07		12/15/2023
11/15/2023	11/15/2023	52Z060760C	PREMIERCHOICE ACCIDENT				\$23.50		12/15/2023
11/15/2023	11/15/2023	52Z060760D	PREMIERCHOICE HEALTH AND WELLNESS				\$48.65		12/15/2023
11/15/2023	11/15/2023	52Z060760G	MEDGUARD- 5 Year Term to age 70 with ADB				\$77.50		12/15/2023
11/15/2023	11/15/2023	52Z060760H	ACCIDENT PROTECTOR				\$53.96		12/15/2023
						-	\$377.68	TOTAL	
October 2023									
Transaction Date	Payment Applied	Plan/Member Number	Plan Name	Association Membership	Reversal Date	Reason	Payment Amount	Payment Method	Paid To Date

\$174.07

\$23.50

11/15/2023

11/15/2023

PREMIERCHOICE SPECIFIED DISEASE/SICKNESS, PREMIERCHOICE ACCIDENT, PREMIERCHOICE HEALTH AND WELLNESS, MEDGUARD- 5 Year Term to age 70 with ADB, ACCIDENT PROTECTOR are considered "excepted benefit plans" under the ACA and are not considered "minimum essential coverage" plans under the ACA.

<sup>\*</sup> The Affordable Care Act ("ACA") generally requires individuals to maintain "minimum essential coverage" or be subject to the payment of the annual shared responsibility payment with the payment of their taxes to the federal government from 2014 - 2018. Congress eliminated the shared responsibility payment in 2019 and beyond for individuals who do not maintain ACA "minimum essential coverage" during 2019 or any year thereafter.



SWATI ROY		Statement	Page 2 of 2
6900 THOMAS STON	IE UNIT 347	Statement Date	January 22, 2024
ELKRIDGE	MD 2107	5 ID#	52Z060760B

Plan/Member # & Effective Date:

 $52Z060760B - 08/15/2023 \mid 52Z060760C - 08/15/2023 \mid 52Z060760D - 08/15/2023 \mid 52Z060760G - 08/15/2023 \mid 52Z060760G - 08/15/2023 \mid 52Z060760G - 08/15/2023 \mid 52Z060760G - 08/15/2023 \mid 52Z060760D - 08/15/20200D - 08/15/2000D - 08/15/200D -$ 

fective Date: 52Z060760H - 08/15/2023 |

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10/17/2023	10/15/2023	52Z060760D	PREMIERCHOICE HEALTH AND WELLNESS			\$48.65		11/15/2023
10/17/2023	10/15/2023	52Z060760G	MEDGUARD- 5 Year Term to age 70 with ADB			\$77.50		11/15/2023
10/17/2023	10/15/2023	52Z060760H	ACCIDENT PROTECTOR			\$53.96		11/15/2023
					\$377.68	TOTAL		

## September 2023

Transaction Date	Payment Applied	Plan/Member Number	Plan Name	Association Membership	Reversal Date	Reason	Payment Amount	Payment Method	Paid To Date
9/15/2023	9/15/2023	52Z060760B	PREMIERCHOICE SPECIFIED DISEASE/ SICKNESS				\$174.07		10/15/2023
9/15/2023	9/15/2023	52Z060760C	PREMIERCHOICE ACCIDENT				\$23.50		10/15/2023
9/15/2023	9/15/2023	52Z060760D	PREMIERCHOICE HEALTH AND WELLNESS				\$48.65		10/15/2023
9/15/2023	9/15/2023	52Z060760G	MEDGUARD- 5 Year Term to age 70 with ADB				\$77.50		10/15/2023
9/15/2023	9/15/2023	52Z060760H	ACCIDENT PROTECTOR				\$53.96		10/15/2023
						\$377.68	TOTAL		

## August 2023

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Transaction Date	Payment Applied	Plan/Member Number	Plan Name	Association Membership	Reversal Date	Reason	Payment Amount	Payment Method	Paid To Date
8/22/2023	8/15/2023	52Z060760B	PREMIERCHOICE SPECIFIED DISEASE/ SICKNESS				\$174.07		9/15/2023
8/22/2023	8/15/2023	52Z060760C	PREMIERCHOICE ACCIDENT				\$23.50		9/15/2023
8/22/2023	8/15/2023	52Z060760D	PREMIERCHOICE HEALTH AND WELLNESS				\$48.65		9/15/2023
8/22/2023	8/15/2023	52Z060760G	MEDGUARD- 5 Year Term to age 70 with ADB				\$77.50		9/15/2023
8/22/2023	8/15/2023	52Z060760H	ACCIDENT PROTECTOR				\$53.96		9/15/2023
						\$377.68	TOTAL		

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