



7201 West 78th Street, Suite 100
Bloomington, MN 55439



THIS IS NOT A BILL. DO NOT PAY.

Statement Summary

Member ID Numberxxxxx0604

Statement Date July 1, 2020

New Transactions for this Period

Paid by your health plan \$

Paid by your HealthEZPay accounts \$

You owe providers \$

Paid by Your Health Plan YTD:

Medical \$0.00

Dental \$0.00

LAURA ANDREW
1910 1ST AVE S
APT 26
MINNEAPOLIS MN 55403

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S 2167



Information & Resources

Your Resources for Help

Benefit Questions:

GranicusBenefits.com

HealthEZpay Account Summaries

Flexible Spending Account (FSA)

Claims Paid This Period NA

Available Amount NA

Health Savings Account (HSA)

Claims Paid This Period NA

Current Balance NA

Health Reimbursement Account (HRA)

Claims Paid This Period NA

Current Balance NA

Credit/Debit Card Accounts

Claims Paid This Period NA

Your Year-to-Date Summaries

Medical In-Network Deductible

Met Year-to-Date \$30.52

Medical In-Network Out-of-Pocket

Met Year-to-Date \$30.52

Dental Benefit

Used Year-to-Date \$0.00

*Information current as of statement date. For detailed and up-to-date information, go to **GranicusBenefits.com**.*

Transactions for the Current Period

PHARMACY

Service Date	Patient	Pharmacy	Drug Name	Retail Amount	You Paid
06/18/2020	LAURA	CVS PHARMACY 07172	FLUOXETINE CAP 40MG	\$15.26	\$15.26

For a copy of your detailed Explanation of Benefits (EOB), log in at GranicusBenefits.com and click on "Statements" in the left sidebar.