



**BlueCross BlueShield of Illinois**  
 A Division of Health Care Service Corporation, a Mutual Legal Reserve Company,  
 an Independent Licensee of the Blue Cross and Blue Shield Association

Remittance Address  
 Blue Cross and Blue Shield of Illinois  
 P O Box 650615  
 Dallas, TX 75265-0615

For All Billing Inquiries Call:  
 800-414-7147

Account:	METRO EAST SANITARY DISTRICT	0007
Profile:	ALL SUBSCRIBERS	
Bill Date:	01-03-2023	Payment Due Date: 01-01-2023
Bill Period:	01-01-2023 to 02-01-2023	Page 4

**SUBSCRIBER FEES**

SUBSCRIBER	NAME	CAT	PRODUCT	TIER	CHANGE REASON	RETRO FEE ADJUST	CURRENT CHARGES	TOTAL CHARGES
BRINZA, CHARLES		0000	0001-BLUECP	SUB	Subscriber Add 01/01/2023		847.84	847.84
DARWIN, VICTOR C.		0000	0001-BLUECP	SUB	Subscriber Add 01/01/2023		847.84	847.84
DIXON, CHARLOTTE		0000	0001-BLUECP	SPS	Subscriber Add 01/01/2023		847.84	847.84
JACKSON, MARIUS		0000	0001-BLUECP	SPS+	Subscriber Add 01/01/2023		847.84	847.84
KING, KIM		0000	0001-BLUECP	SPS	Subscriber Add 01/01/2023		1,895.68	1,895.68
ONEY, SCOTT J.		0000	0001-BLUECP	SPS+	Subscriber Add 01/01/2023		847.84	847.84
<b>TOTAL FEES</b>							14,158.92	14,158.92

Do not submit membership changes (cancellations forms, new employee applications) with your bill payment. Documents relating to membership updates should be mailed to: BlueCross and BlueShield of Illinois, P.O. Box 805107, Chicago IL 60680-4112.

M = Medicare  
 P = Split Medicare  
 (\*) = Subscriber or dependent's nearing age 65. Based on employee group size and actively-at-work status. Medicare primary premium rates and claim status may be applicable.

Please contact us for more information.



Employer Edge™ Contributions Submitted Report for  
TEAMSTERS & EMPLOYERS WELFARE TRUST OF ILLINOIS

Employer Name: METRO EAST SANITARY DST MGMT

Work Date: 12/31/20

Employer No: 1001324

Submitted Date: 12/1

Alternate Id:

AgID: 01324

*\$ 385.00 a week*

Run Date: 12/19/202

Name	SSN	WEEKS	Rate Code
BRINZA, CHARLES		11111	A
DARWIN, VICTOR		11111	A
DIXON, CHARLOTTE		11111	A
JACKSON, MARIUS		11111	A
KING, KIM		11111	A
ONEY, SCOTT		11111	A

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\* New Members are displayed in Blue, Termined Members are displayed in Red and Retiree Members in Purple.

Fund	Rates Calculation	Amount
WELFARE	[A] 385.0000	\$11,550.00
Grand Total		