

Confirmation of payment

KNOX COUNTY UTILITY COMMISSION

Your ACH Confirmation Number: 112072770

Your ACH Payment Date is: 06/11/2024

You have paid the bills listed. We are debiting your bank account Operating Fund by: USD 13,023.38

The system has saved your payment under transaction number 1739789172.

To access the open bills, click on [Back to Bill List](#).

Bill Description	Due On	Billed Amount	Open	Payment Amount
Health Premiums	Jun 30, 2024	USD 12,959.38	USD 0.00	USD 12,959.38
Admin Fees	Jun 30, 2024	USD 64.00	USD 0.00	USD 64.00
Grand Total				USD 13,023.38
Credits				USD 0.00
Total Net Payment Amount				USD 13,023.38

**APPROVED**

*m.s.*

**PAID**  
*Online 6-11-24*

[Back to Bill List](#)

[Print Screen](#)

**Questions or Comments?**

**\*ATTENTION BILLING LIAISONS: DEI WILL BE REQUIRING ACH PAYMENTS EFFECTIVE 7/1/18**

Health/FSA/Life Billing Questions: Contact the Premium Billing Branch at (502) 564-9097.  
Business Hours are 7:30 am to 4:30 pm EST, Monday through Friday.

Life Insurance Questions: Contact the Life Insurance Branch at (502) 564-4774.  
Business Hours are 7:30 am to 4:30 pm EST, Monday through Friday.

Enrollment Questions: Contact the Enrollment Information Branch at (502) 564-1205.  
Business Hours are 7:30 am to 4:30 pm, EST Monday through Friday.

The Member Services Branch can be reached, toll free, at 888-581-8834.  
Business hours are 8:00 am to 4:30 pm, EST, Monday through Friday.

Description	Produc Text	Proposed Amount	Bill Period
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[REDACTED]	10	LivingWellPPO Single(EE)	89.14 06/01/2024
[REDACTED]	11	LivingWellPPO Single(ER)	859.90 06/01/2024
[REDACTED]	70	Admin Provider Fee	8.00 06/01/2024
[REDACTED]	10	LivingWellPPO Single(EE)	89.14 06/01/2024
[REDACTED]	11	LivingWellPPO Single(ER)	859.90 06/01/2024
[REDACTED]	70	Admin Provider Fee	8.00 06/01/2024
[REDACTED]	10	LivingWellPPO Couple(EE)	571.76 06/01/2024
[REDACTED]	11	LivingWellPPO Couple(ER)	1,409.86 06/01/2024
[REDACTED]	70	Admin Provider Fee	8.00 06/01/2024
[REDACTED]	10	LivingWellPPO Couple(EE)	571.76 06/01/2024
[REDACTED]	11	LivingWellPPO Couple(ER)	1,409.86 06/01/2024
[REDACTED]	70	Admin Provider Fee	8.00 06/01/2024
[REDACTED]	10	LivingWellPPO Single(EE)	89.14 06/01/2024
[REDACTED]	11	LivingWellPPO Single(ER)	859.90 06/01/2024
[REDACTED]	70	Admin Provider Fee	8.00 06/01/2024
[REDACTED]	10	LivingWellPPO Couple(EE)	571.76 06/01/2024
[REDACTED]	11	LivingWellPPO Couple(ER)	1,409.86 06/01/2024
[REDACTED]	70	Admin Provider Fee	8.00 06/01/2024
[REDACTED]	10	LivingWellPPO Couple(EE)	571.76 06/01/2024
[REDACTED]	11	LivingWellPPO Couple(ER)	1,409.86 06/01/2024
[REDACTED]	70	Admin Provider Fee	8.00 06/01/2024
[REDACTED]	10	LivingWellPPO Family(EE)	716.64 06/01/2024
[REDACTED]	11	LivingWellPPO Family(ER)	1,469.14 06/01/2024
[REDACTED]	70	Admin Provider Fee	8.00 06/01/2024