You deserve an explanation

An explanation of benefits (EOB) is not a bill. It simply tells you everything you might want to know about your claims.

Among the more important things included on your EOB are:

- The service you received
- How much the service cost
- How much you may owe, if anything
- A notes section that explains the meaning of any special codes

- A section that shows how close you are to meeting any plan maximums

There is a second page that includes contact numbers if you have questions. It also tells you how to file an appeal if you want a claim decision reviewed.

UMR

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CUSTOMER LOGO

Page 1

Employee	Joe Patient
Employee Address	1234 W SUNSHINE BLVD
	STE 100A
	BEST CITY US 12345-9876
Member ID	999999999
Patient	Joe Patient
Notice Date	02-15-15
Employer Name	Customer Inc.
Group Number	76-999999

EXPLANATION OF BENEFITS NOTICE – THIS IS NOT A BILL

Provider: Physician,Joe,MD   **Patient Account:** 1234567890   **Claim Control Number:** 99999999999

Service Description	Dates of Service From:	To:	Amount Billed	Amount Not Payable	See Note Section	Less Deductible	Co-Pay Amount	Allowable Amount	%	Plan Benefit Amount	Amount Paid	Provider May Bill You
Emergency Care	02-01-15	02-01-15	$500.00	$100.00	908	$50.00	$25.00	$325.00	80	$260.00	$260.00	$140.00
		Totals	$500.00			$50.00	$25.00	$325.00		$260.00	$260.00	$140.00

Note Section

908   Provider negotiated discount. You are not responsible for this amount.

Payment To: XYZ Clinic   **Payment Date:** 02-15-15   **Payment Amount:** $260.00

Benefit	Benefit Level	Applied To Date
01 -01-15	$200 Out Net Ind Cal Yr Deductible	$200.00Met
01 -01-15	$400 Out Net Fam Cal Yr Deductible	$300.00
01 -01-15	$400 In Net Ind Cal Yr Deductible	$205.00
01 -01-15	$800 In Net Fam Cal Yr Deductible	$305.00

Callout labels:
- The type of service you received
- How much the service cost
- How much your benefits plan paid
- How much you may owe (if anything)
- Your code definition
- Your plan maximums and how close you are to meeting them

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