

# Learn about your new explanation of benefits (EOB)



Member: JOHN Q. SMITH  
Claim #: 21643287157

Provider: JANE R. TAYLOR, MD  
Network: MEDICARE ADVANTAGE

Paid 8/2/19

TYPE OF SERVICE – Procedure code Service date	Amount billed	Provider discount/ amount not covered	Amount covered	Medical plan paid	Reason code(s)	Member responsibility		
						Not covered	Copay	Coinsurance
OFFICE VISIT – 9921325 07/23/2019	\$155.00	\$79.21	\$76.83	\$50.79	PDC	\$0.00	\$25.00	\$0.00
INJECTION – 96372 07/23/2019	\$65.00	\$48.07	\$17.28	\$16.93	PDC	\$0.00	\$0.00	\$0.00
<b>Totals</b>	<b>\$220.00</b>	<b>\$127.28</b>	<b>\$94.11</b>	<b>\$67.72</b>		<b>\$0.00</b>	<b>\$25.00</b>	<b>\$0.00</b>
<b>Medical plan paid to provider: \$67.72</b>						<b>Amount you owe:</b>		<b>\$25.00</b>

Reason code	Description
PDC	Provider discount has been applied.

An EOB shows how your plan has processed a claim for your recent care. It lists healthcare claims, what your plan paid and other important information.

Here's what you need to know:

- **Amount billed:** What your provider charged for a service
- **Provider discount and amount not covered:** This includes negotiated discounts and amounts not covered

by your plan. Providers who are not in your plan's network may charge you.

- **Amount covered:** The amount that is left after provider discounts and non-covered charges have been accounted for. Benefits are applied to this amount.
- **Medical plan paid:** How much Summit Health paid for this service
- **Reason code(s):** More information about costs that may not be covered and how your claim was processed

- **Member responsibility:** This is how much you may need to pay your provider
- **Not covered:** How much you may owe your provider for non-covered charges
- **Copay:** The fixed amount you pay for a covered service
- **Coinsurance:** A percentage you pay of the amount for covered services

## **Questions?**

For questions, call Customer Service at 1-844-827-2355. TTY users, please dial 711. We are available for phone calls 7 a.m. to 8 p.m., Pacific Time, seven days a week from October 1 through March 31, with the exception of Christmas Day and Thanksgiving Day. After March 31, your call will be handled by our automated phone system Saturdays, Sundays and holidays. Calls to these numbers are free.

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ATENCIÓN: Si habla español, hay disponibles servicios de ayuda con el idioma sin costo alguno para usted. Llame al 1-877-605-3229 (TTY: 711).

CHÚ Ý: Nếu bạn nói tiếng Việt, có dịch vụ hỗ trợ ngôn ngữ miễn phí cho bạn. Gọi 1-877-605-3229 (TTY:711)

PAUNAWA: Kung nagsasalita ka ng Tagalog, ang mga serbisyong tulong sa wika, ay walang bayad, at magagamit mo. Tumawag sa numerong 1-877-605-3229 (TTY: 711)