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**A note from the Egyptian Trust****OPEN ENROLLMENT ENDS  
SEPTEMBER 30, 2019**

If you have not made your benefit elections for the new plan year please see your Human Resources representative immediately. Please note it is imperative you provide legible information, along with dependent(s) Social Security numbers for any program for which you enroll. Incorrect or unreadable information will delay your enrollment and ID card production. Open Enrollment ends September 30, 2019. Changes, enrollments, or terminations that are not made by this date will not be accepted.

**Quick Reference Source****Egyptian Trust**

You can view information about the Egyptian Trust, programs offered by the Trust, current Schedule of Benefits, Enrollment Guide, historical newsletters and more at [www.egtrust.org](http://www.egtrust.org)

**Health Claims**

You can securely view your claims history for services prior to March 1, 2019 at [www.healthscopebenefits.com](http://www.healthscopebenefits.com), or you may contact Customer Service at 1-800-397-9598.

**Health Claims - Blue Cross Blue Shield of Illinois (BCBSIL)**

For health care services on or after March 1, 2019 you can get information about your health benefits, anytime, anywhere. Use your computer, phone or tablet to access the Blue Cross and Blue Shield of Illinois (BCBSIL) secure member website, Blue Access for Members (BAMSM). To get started visit <https://www.bcbsil.com/>

With BAM, you can:

- Check the status or history of a claim
- View or print Explanation of Benefits statements
- Locate a doctor or hospital in your plan's network
- Request a new ID card – or print a temporary one

Customer Service: 855-686-8517

**Vision Plan - EyeMed**

Find a network provider, view your protected claims / eligibility and more at [www.eyemed.com](http://www.eyemed.com), or you may contact Member Services at 1-866-804-0982.

**Basic and Optional Life Insurance - Dearborn National** For assistance with claims, travel / beneficiary resources, portability or conversion policies, you may contact Member Services at 1-800-348-4512.

**Optional Dental - Blue Care Dental**

Beginning September 1, 2019 you may access the Dental Wellness Center. Log in to Blue Access for Members (BAMSM) at <https://www.bcbsil.com/> and click on the My Health tab.

Dental Services: 1-800-367-6401

**Prescription Drug Program - Prime Therapeutics**

Beginning March 1, 2019 you can securely view your prescription drug claims history and more on myprime.com which can be accessed through the single sign on feature from Blue Access for Members (BAM). To get started visit <https://www.bcbsil.com/>

# Health Plan Benefit Changes Effective September 1, 2019



## Full Mental Health Parity

All plans will cover medically necessary treatment for mental health conditions and substance use disorders without imposing restrictions or limitations that do not also apply to medical and surgical treatment. This means the existing annual visit limits on outpatient mental health services and the lifetime day limits on inpatient services are removed effective September 1, 2019.

## Standard Fertility Preservation

All plans will comply with the law that requires plans to cover medically necessary expenses for standard fertility preservation services when a necessary medical treatment (such as surgery, radiation, chemotherapy or other treatment affecting reproductive organs or processes) may cause infertility. Standard fertility preservation services include such procedures as freezing eggs or sperm or embryos and certain surgical procedures that meet standards of care established by the American Society for Reproductive Medicine, the American Society of Clinical Oncology, or other national medical associations.

## Drug Treatment of Stage 4 Metastatic Cancer

All plans are not permitted to impose step-therapy requirements for drug treatment of Stage 4 advanced

metastatic cancer. All plans will not limit or exclude coverage for an FDA-approved drug by mandating that the member first be required to fail to successfully respond to a different drug or prove a history of failure of the drug as long as the use of the prescribed drug is consistent with best practices for the treatment of stage 4 advanced metastatic cancer and is supported by peer-reviewed medical literature.

## Hearing Aids for Children to Age 18

For children up to age 18, all plans will provide coverage for one hearing instrument for each ear every 36 months. Repairs are covered when medically necessary. Covered related services include audiological exams and selection, fitting and adjustment of ear molds.

## Chiropractic Treatment/Skeletal Adjustment

All plans will provide the same in and out of network reimbursement percentages for chiropractic treatment/skeletal adjustments rather than the previous 50% in and out of network benefit. The calendar year \$750 maximum will remain. This is a change for all plans, with the exception of the H plans which already covers such services at coinsurance levels of 100% in-network and 70% out of network, up to the \$750 maximum benefit.





# The diet adjustment you can make to help save your eyes

When you were little, your mother told you to eat your carrots for healthy eyes. And while it's true that carrots are high in vitamin A, which is good for your vision, they're not the only eye-friendly food.

In fact, incorporating more whole grains into your diet can protect your eyes against a whole host of vision conditions. Whole grains contain vitamin E, zinc and niacin, which can all improve eye health by reducing the risk of cataracts and age-related macular degeneration (AMD), a leading cause of vision loss among older people.<sup>1,2</sup>

Replacing refined carbohydrates and high glycemic index foods with whole grains can slow the progression of AMD by as much as 8 percent.<sup>3</sup> Instead of eating high glycemic carbohydrates, like white bread and pasta, choose less refined carbohydrates such as quinoa, brown rice, oats, and whole-wheat breads and pastas.<sup>4</sup>

Whole grains reduce the likelihood of blood sugar spikes that can damage the retina over time.<sup>5</sup> Corn, which is also gluten-free, is high in antioxidants and lutein, an enzyme necessary for sustained eye health.<sup>6</sup> The zinc in whole grains protects eye tissue from light and inflammation.<sup>7</sup> Eating whole grains is a good nutritional practice for both overall health and eye health.

According to the Whole Grains Council, "Whole grains, or foods made from them, contain all the essential parts and naturally occurring nutrients of the entire grain seed."<sup>8</sup>

Examples of whole grains include: Amaranth, Barley, Buckwheat, Corn, Millet, Oats, Quinoa, Rice (brown & colored rice), Rye, Sorghum, Teff, Triticale, Wheat & Wild rice.

So keep following your mom's advice and eat your carrots. But adding whole grains is one more way to make her happy and help your eye health.

1. Bauer, Joy. "Health Benefits of Whole Grains." [www.joybauer.com/food-articles/whole-grains.aspx](http://www.joybauer.com/food-articles/whole-grains.aspx). Accessed September 5, 2012.
2. Delisi, Scott. "Enjoy Whole Grains for Better Vision and Oral Health." Ameritas Insight <http://ameritasinsight.com/2011/09/enjoy-whole-grains-for-better-vision-andoral-health/>. September 6, 2011.
3. Chiu CJ, Milton RC, Klein R, Gensler G, Taylor A. "Dietary carbohydrate and the progression of age-related macular degeneration: a prospective study from the Age-Related Eye Disease Study." *Am J Clin Nutr.* 2007 Oct;86 (4):1210-8.
4. Oz, Mehmet C., MD, and Michael F. Roizen, MD. "7 Foods for Healthy Eyes." *RealAge.com.* <http://www.realage.com/eye-health/food-for-eyes-6#fbIndex6>. Accessed September 5, 2012.
5. Stewart, Helen. "Improve Eye Health 3 Easy Ways." *Natural Medicine @ Suite101.com.* <http://suite101.com/article/improve-eye-health-3-easy-ways-a410887>. April 14, 2012.
6. Verhoff, Elaina. "How to Choose the Healthiest Whole Grains." *SheKnows.com.* [www.sheknows.com/healthand-wellness/articles/850839/how-to-choose-thehealthiest-whole-grains](http://www.sheknows.com/healthand-wellness/articles/850839/how-to-choose-thehealthiest-whole-grains). January 1, 2012.
7. University of California Berkeley, "Eye Supplements (Ocuvite)." *Wellness Letter.* [www.wellnessletter.com/ucberkeley/dietary-supplements/ocuvite/](http://www.wellnessletter.com/ucberkeley/dietary-supplements/ocuvite/). #. August 2008.
8. Whole Grains Council [www.wholegrainscouncil.org/whole-grains-101](http://www.wholegrainscouncil.org/whole-grains-101). Accessed September 5, 2012. – See more at: <http://www.eyesightonwellness.com/lets-look-at-whole-grains/#sthash.0daf36bh.dpuf>



# Back-to-school checklist for the family



One of the biggest challenges about getting ready to go back to school is creating a routine again. We know how rough it can be getting back into the swing of homework, practices and classes!

To help you and your family make a seamless transition this back-to-school season, we've created a handy checklist with important items you won't want to miss:

- ☐ Post a family calendar on the fridge filled with everyone's activities
- ☐ Begin readjusting sleep and food schedules one week before classes start
- ☐ Book sitters for school parent nights or to help with extracurricular programs
- ☐ Before you go back-to-school clothes shopping, having your kids try on clothes that haven't been worn since last year; donate what no longer fits
- ☐ Contact your child's school to discuss any necessary health precautions like food allergies or medications
- ☐ Make quality bonding time a daily priority for the family, either by playing a game, taking a walk or having dinner together<sup>1</sup>
- ☐ Create a homework station where you can find what your child needs and help them focus on tasks
- ☐ Take your family grocery shopping to find healthy snacks and items for school lunches

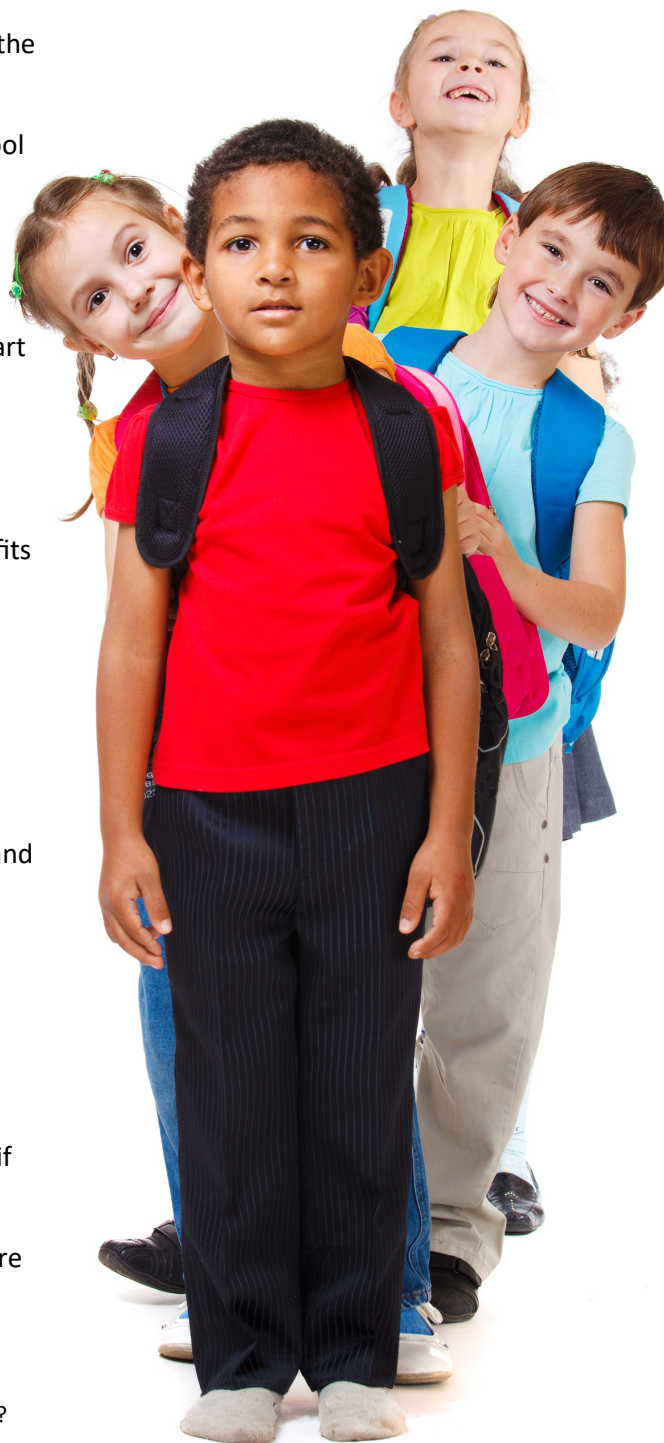
By taking a moment to update your child's health history now in your Teladoc account, you can make back-to-school easier for both of you.

With an updated health history on file, you'll be prepared ahead of time if your child gets sick, freeing you up to focus on their care quickly.

Visit [www.teladoc.com](http://www.teladoc.com) to update your family's health history today before the back-to-school rush!

Have a safe and happy school year!

1. <http://abcnews.go.com/GMA/Parenting/back-school-complete-checklist-parents/story?id=11407354>







## BlueCare Optional Dental Plans

Beginning September 1, 2019 Blue Cross Blue Shield of Illinois (BCBSIL) will become the administrator of the fully insured voluntary dental program. If you are currently enrolled in one of the Ameritas voluntary dental plans your enrollment information will be transferred to BCBSIL. However, you are allowed to change the type of coverage and move from the high to the low plan and vice versa during open enrollment.

Dental services provided by your dentist that are billed with a date of service on or after September 1, 2019 are eligible for consideration under the new BCBSIL Plan.

- Members will receive credit for the 2019 deductible, annual maximum, and orthodontia lifetime maximum benefits paid under the Dental Plan previously administered by Ameritas.
- Members will receive credit with BCBSIL for Ameritas rewards accumulated up until the BCBSIL Plan begins on September 1, 2019. Ameritas rewards will expire on December 31, 2020 if not used for services before that date.

Members will be eligible to receive their remaining benefit period maximum and/or orthodontia lifetime maximum, which is the difference between what Ameritas previously paid and the applicable maximums under the BCBSIL dental plans.

Below is information on how your orthodontia benefits will be administered under the BCBSIL Plan, if your orthodontia treatment started prior to September 1, 2019.

- BCBSIL will prorate the remaining active treatment balance (at 50%), for services received on/after September 1, 2019
- BCBSIL will need a complete treatment plan, which includes: total case fee, down payment amount, number of months in treatment, and banding date.

You and/or your orthodontist will need to submit a claim to be reimbursed for your monthly treatments.

If you have any questions about the transition from Ameritas to Blue Cross Blue Shield of Illinois (BCBSIL) call Customer Service at 800-367-6401 between 8 a.m. and 6 p.m. (CT) Monday through Friday.



## Independent Lab Benefit

LabCard is no longer part of the Trust Health Plans effective March 1, 2019. Beginning March 1, 2019, the independent lab benefit has been enhanced to include **all NETWORK INDEPENDENT LAB providers**. Members enrolled in a PPO Plan who use a NETWORK INDEPENDENT LAB for their blood draws/specimens will receive the 100% benefit. Members enrolled in a HDHP (High Deductible Health Plan) who use a NETWORK INDEPENDENT LAB will continue to be required to meet the deductible before benefits are reimbursed at 100% (except for covered preventive blood draw/specimens). Please discontinue using the name LabCard when speaking to your providers, customer service, and lab facilities. It tends to add more confusion and frustration as this is no longer a valid program for Trust members.

Members may search for a **NETWORK INDEPENDENT LAB** through the Blue Cross Blue Shield (BCBS) website at [www.bcbsil.com](http://www.bcbsil.com). Remember this benefit is NOT limited to using Quest for your blood draws. Any **NETWORK INDEPENDENT LAB** provider will receive the enhanced benefit. However, if you are specifically searching for a Quest site and are unsuccessful in finding a site in your area on the BCBS site, it could simply be the BCBS provider search is not yet updated. In that case, you can find a Quest provider by visiting [www.questdiagnostics.com](http://www.questdiagnostics.com). You only need to click on Appointments/Locations and on the right side of the page under "Find a Quest location near you" enter your zip code, city, or address. Members may also contact the Blue Cross Blue Shield Benefits Value Advisor (BVA) Customer Service at 855-686-8517 weekdays from 8 a.m. to 6 p.m. CST for assistance in finding a network independent lab. It is also possible for members to access the 100% lab benefit by having specimens taken or blood drawn during a physician office visit or other clinical setting by asking the physician to send the sample to Quest or another **network independent lab**.



BlueCross BlueShield  
of Illinois



## BlueCare Dental PPO<sup>SM</sup>

BlueCare Dental PPO offers you and your family access to one of the largest national dental PPO networks<sup>1</sup>. This network includes general and specialty dentists in Illinois as well as across the country. As a BlueCare Dental PPO plan member, you can go to any dentist. However, you'll save money and get more from your benefits when you use an in-network dentist. These in-network dentists have agreed to:

- Accept set fees for covered services
- Not bill you for costs over the negotiated fees (except copayments, coinsurance and deductibles)

You can choose an out-of-network dentist, but he or she may have higher fees and charge you for amounts not covered by your insurance.

### Finding an In-Network Dentist is Easy

For a list of in-network general and specialty dentists, go to [bcbsil.com](http://bcbsil.com) and use the Provider Finder<sup>®</sup> tool. You can search for a dentist near your home, school or office and easily download a map with driving directions.

### BlueCare Dental Connection<sup>SM</sup>

As an enhanced service, Blue Cross and Blue Shield of Illinois (BCBSIL) offers BlueCare Dental Connection. This service provides educational information and other resources to help you make choices about your dental care — at no extra cost.

To help you learn about good oral health, BlueCare Dental Connection offers:

- Educational mailings
- 24-hour online access to the Dental Wellness Center,<sup>\*</sup> which offers educational articles and special tools

The Dental Wellness Center allows you to:

- Ask dental-related questions through [Ask a Dentist<sup>\\*</sup>](#)
- Find an in-network dentist using [Provider Finder](#)
- Research dental fees in your area with the [Dental Cost Advisor<sup>\\*</sup>](#)
- Search the [Dental Dictionary<sup>\\*</sup>](#) of common clinical terms
- View animations on different dental topics in the [Treatment and Procedure<sup>\\*</sup>](#) tool

To access the Dental Wellness Center, log in to Blue Access for Members<sup>SM</sup> at [bcbsil.com](http://bcbsil.com) and click on the [My Health](#) tab.

### Dedicated to Customer Service

After signing up, you will get more detailed information about your dental plan. Look at your plan materials for complete details. Customer Service can answer questions about eligibility, claims, benefits and providers. Just call **800-367-6401** between 8 a.m. and 6 p.m. (CT), Monday through Friday. In addition, you can find general benefit information at [bcbsil.com](http://bcbsil.com).

<sup>1</sup> Dental Network of America, LLC. (DNoA), a separate company and the network manager providing access to the national network. Source: Netminder, February 2015

<sup>\*</sup> The Dental Wellness Center, Dental Cost Advisor, Ask a Dentist, Dental Dictionary and Treatment and Procedure are provided by DNoA, a separate company that acts as the administrator of Blue Cross and Blue Shield of Illinois dental programs. DNoA is solely responsible for the products or services it offers. BCBSIL assumes no liability or responsibility for damage or injury to persons or property arising from the use of any product, information, idea or instruction mentioned in DNoA's content.

## Get all the advantages your health plan offers



Get information about your health benefits, anytime, anywhere. Use your computer, phone or tablet to access the Blue Cross and Blue Shield of Illinois (BCBSIL) secure member website, Blue Access for Members (BAM<sup>SM</sup>).

### With BAM, you can:

- Check the status or history of a claim
- View or print Explanation of Benefits statements
- Locate a doctor or hospital in your plan's network
- Find Spanish-speaking providers
- Request a new ID card – or print a temporary one

## It's easy to get started

- 1 Go to [bcbsil.com/member](https://bcbsil.com/member)
- 2 Click Register Now
- 3 Use the information on your BCBSIL ID card to complete the registration process.



Text\* BCBSILAPP to 33633 to get the BCBSIL App that lets you use BAM while you're on the go.

\*Message and data rates may apply



BlueCross BlueShield of Illinois



# Find what you need with Blue Access for Members

NATHAN SMITH Settings 9 Language Assistance En Español Log Out

BlueCross BlueShield of Illinois

CURRENTLY VIEWING MY PLAN  
8 PPO  
View My Plans

1 Home 2 My Coverage 3 Claims Center 4 My Health 5 Doctors & Hospitals 6 Forms & Documents

Welcome NATHAN SMITH!

6 Message Center  
You have no messages  
View all messages

7 Quick Links  
Stop receiving paper statements  
Connect  
Member Discount Program  
Manage preferences  
Verification of Coverage

MY COVERAGE

Plan Type: PPO Group Number: 098765  
ID Number: ABC123456789

MEDICAL BENEFITS

Preferred Network

Individual Deductible	N/A
Family Deductible	N/A
Family Out of Pocket Maximum	\$8,500.00
Coinurance	N/A

My Care Profile

Blue Button  
Learn how to get your health care profile electronically  
Get Started »

10 Important Information | Non-Discrimination Notice | Help | Contact Us 11

- 1 My Coverage:** Review benefit details for you and family members covered under your plan.
- 2 Claims Center:** View and organize details such as payments, dates of service, provider names, claims status and more.
- 3 My Health:** Make more informed health care decisions by reading about health and wellness topics and researching specific conditions.
- 4 Doctors & Hospitals:** Use Provider Finder® to locate a network doctor, hospital or other health care provider, and get driving directions.
- 5 Forms & Documents:** Use the form finder to get medical, dental, pharmacy and other forms quickly and easily.
- 6 Message Center:** Communicate with a Customer Service Advocate here. You can also learn about updates to your benefit plan and receive promotional information via secure messaging.
- 7 Quick Links:** Go directly to some of the most popular pages, such as medical coverage, replacement ID cards, manage preferences and more.
- 8 View My Plan:** See the details of your current health plan, as well as other plans you've had in the past.
- 9 Settings:** Set up notifications and alerts to receive updates via text and email, review your member information and change your secure password at anytime.
- 10 Help:** Look up definitions of health insurance terms, get answers to frequently asked questions and find Health Care School articles and videos.
- 11 Contact Us:** Here you can find contact information to reach a Customer Service Advocate with any questions you may have about your plan.





# Understanding Your Explanation of Benefits

**An Explanation of Benefits (EOB) is a notification provided to members when a health care benefits claim is processed by Blue Cross and Blue Shield of Illinois (BCBSIL). The EOB shows how the claim was processed. The EOB is not a bill. Your provider may bill you separately.**



## THE EOB HAS THREE MAJOR SECTIONS:

**Subscriber Information and Total of Claim(s)** includes the member's name, address, member ID number and group name and number. The Total of Claims table shows you the amount billed, any applied discounts, reductions and payments and the amount you may owe the provider.

**Service Detail** for each claim includes:

- Patient and provider information
- Claim number and when it was processed
- Service dates and descriptions
- The amount billed
- The discounts or other reductions subtracted from amount billed
- Total amount covered
- The amount you may owe (your responsibility)

**Summary** - Shows you what the plan covers for each claim and your responsibility including:

### **Plan Provisions**

- The amount covered
- Less any amounts you may owe, like deductible, copay and coinsurance

### **Your Responsibility**

- Deductible and copay amount
- Your share of coinsurance
- Amount not covered, if any
- Amount you may owe the provider. You may have paid some of this amount, like your copay, at the time you received the service.

## THE EOB MAY INCLUDE ADDITIONAL INFORMATION:

**Amounts Not Covered** will show what benefit limitations or exclusions apply.

**Out-of-Pocket Expenses** will show an amount when a claim applies toward your deductible or counts toward your out-of-pocket expenses.

**Fraud Hotline** is a toll-free number to call if you think you are being charged for services you did not receive or if you suspect any fraudulent activity.

**An explanation** of your right to appeal if your health plan doesn't cover a health care claim.

Available in English and Spanish

## **Your EOBs Are Available Online!**

Sign up for Blue Access for Members<sup>SM</sup> (BAM<sup>SM</sup>) at **bcbsil.com** for convenient and confidential access to your claim information and history.

Choose to opt out of receiving EOBs by mail to save time and resources.

Go to BAM and click on **Settings/Preferences** to change your preferences.

# Sample EOB



BlueCross BlueShield of Illinois

P.O. Box 660044  
Dallas, TX 75266-0044

**1** Jon Smith  
1234 Cedar Road  
APT #2  
Chicago, IL 60601

Sample

## EXPLANATION OF BENEFITS

An EOB is a statement showing how claims were processed. **This is not a bill.** Your provider(s) may bill you directly for any amount you may owe. **KEEP FOR YOUR RECORDS.**



Log in to Blue Access for Members<sup>SM</sup> at [bcbsil.com](http://bcbsil.com) to see plan and claim details or to contact us through our secure Message Center.



Have questions about this EOB? Customer Advocates are here to help! **800-409-9462**

### SUBSCRIBER INFORMATION GROUP NAME HERE

**2** Member ID#: BCS888999777V Group #: 000012345

We reviewed the claim for this patient based on the additional information received regarding other group health care coverage involvement. Blue Cross and Blue Shield has negotiated discounts with this provider. The following show how this claim was adjusted.

### **4** SERVICE DETAIL - CLAIM (1)

**5** PATIENT: JON SMITH  
SERVICE DATE: 04/04/2016

**6** PROVIDER: Ralph Johnston M.D.

**7** CLAIM # 012345687  
Processed: 06/20/2016

<b>8</b>	<b>9</b>	<b>10</b> PLAN PROVISIONS		<b>11</b> YOUR RESPONSIBILITY		
		Amount billed	Discounts and reductions	Amount covered (allowed)	Deductible and copay amount	Coinsurance
Surgical Charges	4,000.00	(1) 1,800.00	2,200.00	1,000.00	240.00	
Recovery Room	900.00	(1) 410.00	490.00		98.00	
Med/Surg Supplies	300.00	(1) 140.00	160.00		32.00	
Med/Surg Supplies	100.00					(2) 100.00
Laboratory Services	1,200.00	(1) 820.00	380.00		76.00	
Laboratory Services	200.00	(1) 160.00	40.00		8.00	
MRI Outpatient	850.00	(1) 440.00	410.00		82.00	
Drugs	200.00	(1) 110.00	90.00	50.00		
Muscle Manipulation	100.00	(1) 50.00	50.00	15.00		
<b>CLAIM TOTALS</b>	<b>\$7,850.00</b>	<b>\$3,930.00</b>	<b>\$3,820.00</b>	<b>\$1,065.00</b>	<b>\$536.00</b>	<b>\$100.00</b>

\* Amount covered (allowed) reflects the savings we've negotiated with your provider for this service. Your deductible, coinsurance and copay are based on the allowed amount. Your share of coinsurance is a percentage of the allowed amount after the deductible is met.

<sup>1</sup> The amount billed is greater than the amount allowed for this service. Based on our agreement with this provider, you will not be billed the difference.

<sup>2</sup> Your Health Care Plan does not provide benefits for surgical assistant services when billed by the same physician who performed the surgery or administered the anesthesia. No payment can be made.

Total covered benefits approved for this claim: \$2,219.00 to Ralph Johnston M.D. on 06-20-16.

### **12** SUMMARY - CLAIM (1)

PLAN PROVISIONS		YOUR RESPONSIBILITY	
Amount covered (allowed)*	\$3,820.00	Deductible and copay amount	+ \$1,065.00
Deductible and copay amount	- \$1,065.00	Coinsurance	+ \$536.00
Coinsurance	- \$536.00	Amount not covered	+ \$100.00
<b>Total</b>	<b>\$2,219.00</b>	<b>You may have to pay your provider</b>	<b>\$1,701.00</b>

**14** Health Care Fraud Hotline: 800-543-0867

Health care fraud affects health care costs for all of us. If you suspect any person or company of defrauding or attempting to defraud Blue Cross and Blue Shield of Illinois, please call our toll-free hotline. All calls are confidential and may be made anonymously. For more information about health care fraud, please go to [bcbsil.com](http://bcbsil.com)

**13** Benefit Period: 01-01-16 Through 12-31-16 To date this patient has met \$1,000.00 of her/his \$1,000.00 Health Care Plan Deductible.

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

- Member's name and mailing address
- Member ID and group number
- Summary box for all claims including total billed by the provider, and discounts, reductions or payments made, and the amount you may owe
- Detailed claim information for each claim
- Patient name and service date
- Provider information
- Claim number and date the claim was processed
- Service description
- Amount billed for each service
- The amount covered (allowed) for each service and the discounts or reductions subtracted from the amount your provider billed
- Your share of the costs
- Claim summary with amount covered less your responsibility
- Deductible and/or out-of-pocket expense information
- Health Care Fraud Hotline

\* Please provide this information when contacting us about a claim.

Not all EOBs are the same. The format and content of your EOB depends on your benefit plan and the services provided. Deductible and copayment amounts vary.