Understanding your EOB, as easy as 1, 2, 3

UMR ℠
A UnitedHealthcare Company

An explanation of benefits (EOB) is not a bill. It simply tells you everything you might want to know about how your recent medical service was covered by your benefits plan. You'll receive a bill from your provider for any amount you may owe.

1 Cost summary

The first page of your EOB is a summary of how much your provider billed, how much was covered by your plan and the total you may owe to your provider.

2 Benefits update

On the next page, you'll find a breakdown of how much you and/or your family have applied toward your annual deductibles and out-of-pocket amounts.

Deductible: The amount you have to pay before your plan pays for specific services. Deductibles are usually an annual set amount.

Out-of-pocket: The most you could pay during a coverage period (usually 1 year) for your share of the costs of covered services. After you reach your "to go" amount, the plan will usually pay 100% of the allowed amount.

Learn more about other common health insurance terms at **justplainclear.com**.

3 Service and payment details

This section includes information about who received the medical service, the name of the provider and what types of care they received. It gives you a breakdown of how the claim was processed, including:

- How much your provider billed
- Your network discount
- The amount paid by your employer-sponsored plan
- The amount you may owe, including copays, deductibles and out-of-pocket amounts

Here's a summary for you.
Detailed claim and benefit information is located on the following page(s).

Amount billed:	$60.00	The total amount that your provider billed for the services that were provided to you.
Your discount:	$44.70	Your plan negotiates discounts with providers and facilities to help save you money.
Your plan paid:	$0.00	The portion of the amount billed that was paid by your employer-sponsored benefits plan.
You saved:	$44.70	75% of your service was covered by your plan discounts, your employer-sponsored benefits plan, or other amounts for which you are not responsible.
TOTAL YOU MAY OWE:	$15.30	The portion of the amount billed that you may owe to the provider. This amount includes your deductible, copay, coinsurance and non-covered charges. Not allowed amounts and any amount you paid when you received care may not be reflected in this amount.

(Fictionalized data)

In-network

INDIVIDUAL CAL YR DEDUCTIBLE	**$484.70** to go
$15.30 out of $500.00	
FAMILY CAL YR DEDUCTIBLE	**$984.70** to go
$15.30 out of $1,000.00	
INDIVIDUAL OUT-OF-POCKET	**$1,944.70** to go
$55.30 out of $2,000.00	
FAMILY OUT-OF-POCKET	**$3,944.70** to go
$55.30 out of $4,000.00	

(Fictionalized data)

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Page 1
Dist Code: MD

Employee	CADE BLANK
Employee Address	1234 SUNSHINE BLVD BEST CITY, USA 12345-1112
Employer Number	7670-00-123456
Member ID	1234567890
Employer Name	ABC Companies, Inc.
Notice Date	02-01-24

Patient: ELIZABETH BLANK	Claim Number: 99999999999	Provider Name: XYZ PROVIDER, INC.	Patient Account: 1234567890

								PLAN PAYS		YOU PAY			
Service(s) you received	Reason code	Service date(s)	Amount billed by provider −	Your discount −	Not allowed	Amount due to provider*	%	Plan Paid −	Copay +	Applied to deductible +	Coinsurance +	Not covered +	Total you may owe**
DIAGNOSTIC LAB	908	01/12/24	$60.00	$44.70	$0.00	$0.00		$0.00	$0.00	$15.30	$0.00	$0.00	$15.30
Totals			$60.00	$44.70	$0.00	$0.00		$0.00	$0.00	$15.30	$0.00	$0.00	$15.30

*This amount does not include any copay or deductible you may owe.
**This total may not reflect any payments/copays you made at the time of service. Please wait for a provider bill before making a payment.
(+) Indicates any amount you may owe. (-) Indicates any discount or plan payment that will reduce what you owe.

Reason code explanations:
908   Provider negotiated discount. You are not responsible for this amount.
Your Claim was processed at the In-Network Level of Benefits.

(Fictionalized data)

Go paperless on umr.com. Receive email reminders for every new EOB, more details about your claim, and the next steps to take.