



Understanding your explanation of benefits



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confidentially:**

- Check the status of a claim
- Sign up for e-mail notification of claims paid
- View or print your EOBs online



**BlueCross BlueShield
of Texas**

Our Updated EOB

An Explanation of Benefits (EOB) statement is a notification form sent to members every time a health care claim is processed by Blue Cross and Blue Shield of Texas. This statement shows the expenses submitted by the provider and how the claim was processed. Items in **blue** are new or have been redesigned.

- 1 Account name (member's company or organization)
- 2 Date the claim was finalized
- 3 Toll-free number to call for additional information
- 4 Member's name and mailing address
- 5 **Web site for Blue Cross and Blue Shield of Texas**
- 6 Member name
- 7 **Employer or group identification number***
- 8 **The member number that appears on the ID card***
- 9 Number assigned to the claim*
- 10 The person who received the indicated services*
- 11 **Summary box, which includes the total billed by the provider for services, the benefits approved and paid, and the remainder you may owe (see also 14, 20, and 21)**
- 12 Provider name (top line) and description of service (below)
- 13 Beginning and ending dates of service
- 14 Amount billed by the provider for each service
- 15 Portion of the billed amount not covered by the plan (a footnote at the bottom explains the reason)
- 16 **Amount covered by the plan***
- 17 Total charges included on this claim
- 18 Deductible and copayment or coinsurance amounts
- 19 Payment approved before benefits are coordinated with other insurers, such as Medicare
- 20 Amount the member may be responsible for paying
- 21 Total benefits approved for the provider

**Provide this information when contacting us about a claim.*

Note: Not all EOBs are the same. The format and content of your statement depends on your benefit plan and the services provided. Deductibles and copayment amounts vary.

Sample EOB



Send inquiries to:
P.O. Box 660944
Dallas, Texas 75266-0044



1 Explanation of Benefits (EOB) . This is not a bill.
2 XYZ CORPORATION
12-02-02

4 JOHN DOE
999 PRINCE DRIVE
DALLAS, TX 76205

3 Customer Service: 1-800-XXX-XXXX

Customer Service Hours
8:00 a.m. 8:00 p.m. C.S.T.

5 Visit our website at www.bcbstx.com



Claim Information

6 Member Name: John Doe
7 Group No.: 0000X
8 Identification No.: XOF123456789
9 Claim No.: 909600000000X
10 Patient Name: John Doe

11 Summary

Total Billed:	\$50.00
Total Benefits Approved:	\$40.00
Amount You May Owe Provider:	\$10.00

The following shows how this claim was processed.

Service Information

12	Service Description	13 Service Date	Amount	Not	16 Covered
			14 Billed	15 Covered	
	DAVID FIRST, M.D. Provider Patient Account No.: 123456				
	Medical Visits	11-04-02	50.00		50.00
17	Totals		\$50.00		\$50.00

Coverage Information

	Totals	\$50.00	\$0.00	\$50.00
18	Deductions			
	Your 20% Coinsurance Amount		10.00	
	Total Deductions			-\$10.00
19	Total Benefits Approved			\$40.00
20	Amount You May Owe Provider			\$10.00
21	Total covered benefits approved for this claim: \$40.00 to DAVID FIRST, M.D. ON 12-02-02.			

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An Important Tool for Tracking Claims

Claim Information

Includes the member and patient name, the member's group and ID numbers and the specific claim number.

Summary

Highlights the major financial information—the amount billed, total benefits approved and the amount you may owe the provider.

Service Information

Identifies the health care facility or physician, dates of services and charges.

Coverage Information

Shows what was paid to whom, what discounts and deductions apply and what part of the total expense was not covered.

The EOB also includes additional information such as:

Information About Amounts Not Covered

Notes what benefit limitations or exclusions that apply when a claim is not paid in full.

Information About Appeals

Explains your rights regarding reviews of denied claims.

Fraud Hotline

Encourages providers, customers and individuals to help us stop fraud and to call the hotline with any questions.

The EOB statement is an important tool to help you track your medical services and benefits coverage. It's a good idea to keep these statements in case questions come up at a later time about a particular claim.

The sample EOB in this brochure is intended only as a general guide. Your statement may differ, depending on your benefit plan and services provided.

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