



# What To Expect On Your Explanation Of Benefits (EOB)

When you visit a doctor or hospital, they work with Blue KC to file a claim on your behalf. These claims are outlined on your EOB. It's your go-to reference for important information like how much of your care was covered and how much you may still need to pay.

Blue KC generates EOBs within approximately 14 days of a claim being processed as opposed to each time a claim is processed. If multiple claims come in within the same window, they are included on the same EOB. This cuts down on the amount of paperwork you receive, while still providing timely and important details on a regular basis.

**1 THIS IS NOT A BILL**  
This is an Explanation of Benefits.  
Keep this document for your records.

**2** Name of Insured: John Q Patient  
Member ID: 1234567890  
Group Number: 0000000000  
**OUT OF NETWORK CLAIM INCLUDED**

**3 TOTAL NUMBER OF CLAIMS: 2**  
Information below is for claims received from: 1/1/19 through 1/15/19

**4 Dear John Q Patient:**  
The following is a summary (commonly referred to as an Explanation of Benefits (EOB)) for your recent medical claim(s) during the time period referenced above. This document will provide details of how your recent claim(s) were processed by Blue Cross and Blue Shield of Kansas City (Blue KC) and may include information about copays, deductibles, coinsurance or non-covered charges you may owe to the healthcare provider(s) listed below. Use this EOB to verify the accuracy of any bill you may receive from your healthcare provider(s).

- Log into [MyBlueKC.com](#) to find helpful information about your plan, customize your communication preferences, search for healthcare providers and more.
- See what we're doing out in the community by visiting [BlueKC.com/wellstocked](#).

**5 SUMMARY**

<b>Total Charges:</b> <b>\$1,500.00</b>	This is the total amount for claims received for the dates of service 1/1/19 through 1/15/19.
<b>Total Amount Paid by Blue KC:</b> <b>\$495.00</b>	This is the amount Blue KC paid for the billed services based on your benefits. Please see the claim detail section that follows for more information.
<b>Amount You May Owe:</b> <b>\$305.00</b>	This is the amount the healthcare provider may bill you because you have a deductible, copay, coinsurance or if perhaps the service was not covered by your insurance plan. A breakdown of your total financial responsibility is shown in the claim detail section that follows.

## HERE'S A LOOK AT YOUR BLUE KC EOB!

- This is Not a Bill:** Your EOB is documentation of how Blue KC has processed your claim. If you do receive a bill from your provider, you can use your EOB to ensure the amount billed is correct based on your Blue KC coverage.
- Member Information:** Information about you and your insurance coverage. If an out of network claim has been filed, it is clearly noted here.
- Total Number of Claims:** Information about your recent claim(s) within the time period outlined.
- Narrative:** A brief overview of how your claim was processed.
- Summary:** A simple overview to show how your claim is paid. Please review the Claim Details section for further details.
- Claim Details:** This area combines critical payment information into one convenient summary. Please review this carefully as it clearly outlines the Blue KC negotiated savings as well as any fees and services for which you are responsible.
- Blue KC Discount Amount:** Blue KC has negotiated these savings with providers on your behalf. This is one of the most valuable aspects of having coverage with Blue KC.



### CLAIM DETAILS

Claim # 8921F32D968  
Name of Insured: John G Patient  
Healthcare Provider Name: Your Doctor, MD  
Network Status: **OUT OF NETWORK**

Date of Service	Type of Service	Total Charges	Non-Covered Net Eligible	Reason Code	Blue KC Discount Amount	Covered by Blue KC	Copay	Coinsurance	Applied to Deductible	Blue KC Payment Amount
1/1/19 1/1/19	OMP	\$1,000.00	\$0.00	CC	\$500.00	\$500.00	\$0.00	\$25.00	\$250.00	\$275.00
<b>Totals</b>		\$1,000.00	\$0.00		\$500.00	\$500.00	\$0.00	\$25.00	\$250.00	\$275.00

**Amount You May Owe: \$275.00**

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Claim # 8921A2MVE72  
Name of Insured: John G Patient  
Healthcare Provider Name: Your Doctor, MD  
Claim Network Status: **In Network**

Date of Service	Type of Service	Total Charges	Non-Covered Net Eligible	Reason Code	Blue KC Discount Amount	Covered by Blue KC	Copay	Coinsurance	Applied to Deductible	Blue KC Payment Amount
1/1/19 1/1/19	OMP	\$300.00	\$0.00		\$200.00	\$300.00	\$0.00	\$30.00	\$0.00	\$270.00
<b>Totals</b>		\$300.00	\$0.00		\$200.00	\$300.00	\$0.00	\$30.00	\$0.00	\$270.00

**Amount You May Owe: \$30.00**

**TYPE OF SERVICE DESCRIPTION**  
OMP - Outpatient/Office Medical Services, Physician

**REASON CODE DESCRIPTION**  
CC - Choice Plus Contractual Allowance

To help protect your privacy, Blue KC does not include additional details beyond the Type of Service Description included on the EOB. Contact the healthcare provider who performed the service for more information.

8. **Covered by Blue KC:** This is the total of the claim after all discounts and other reductions. Deductible and coinsurance amounts are calculated from this figure.
9. **Copay:** The amount a member must pay each time a specific covered service is received, if your policy includes copayments.
10. **Coinsurance:** The percentage of an allowable charge you must pay for a covered service. Generally, the deductible must be met before your coinsurance applies.
11. **Applied to Deductible:** The portion of the claim being applied to your plan deductible. This amount must be paid by you before benefits become payable by Blue KC.
12. **Blue KC Payment Amount:** This is the amount that Blue KC will pay to the provider or member for the claim.
13. **Annual Usage:** This area documents what your deductible status was at the time the claim was processed. Many times, this information will be outdated by the time you receive an EOB. You can get your most recent and up-to-date deductible information in your member portal at MyBlueKC.com under the Claims & Usage section.
14. **Savings Provided by Blue KC:** This is the total amount that you have saved as a Blue KC member on this EOB.

### ANNUAL USAGE

These totals are accurate as of the last claim shown on this document, if you received care more recently, unprocessed claims for that care will not yet be reflected on the totals shown here. You can also log into [MyBlueKC.com](http://MyBlueKC.com) to view your plan usage information, including your current deductible amount (if applicable) and out-of-pocket expenses.

**FAMILY DEDUCTIBLE**

• Deductible is the amount you pay for covered healthcare services before your insurance plan.

2019/20 Total Deductible:  \$2,000.00

2019/20 Aggregate Deductible:  \$2,000.00

2019/20 Remaining on this Deductible:

**FAMILY OUT-OF-POCKET MAX**

• Out-of-pocket max is the maximum amount you pay for covered services.

2019/20 Total Out-of-Pocket Max:  \$5,000.00

2019/20 Aggregate Out-of-Pocket Max:  \$5,000.00

2019/20 Remaining Out-of-Pocket Max:

### SAVINGS PROVIDED BY BLUE KC

As a **Blue KC** member you have saved **\$700** on the services listed on this EOB.

**Your EOBs are always available in your member portal on [MyBlueKC.com](http://MyBlueKC.com)** under the Claims & Usage section. You can also sign up for paperless EOBs in the **Communication Preferences** section.

**Plus download the MyBlueKC mobile app** to access your EOBs and more anytime, wherever you go.

Download on the **App Store**

GET IT ON **Google Play**