UNDERSTANDING YOUR EXPLANATION OF BENEFITS (EOB)

WHAT IS AN EOB?

An EOB is a statement from your health insurance plan detailing the costs towards a medical procedure or service you received. An EOB is not a bill.

The purpose of an EOB is to clearly state the cost of care received, costs covered by the insurance plan, and member cost share.

HOW DO I RECEIVE MY EOBS?

Members are automatically enrolled to receive their EOBs via their secured, online member account.

To access your EOBs:

- Visit www.primetimechoices.com and log into your account.
- Select My Claims.
- Use the filters to find a specific claim or scroll to the bottom of the page to view your claims. Select a claim number to review the EOB.

If you would like to receive paper EOBs via mail, please contact PrimeTime Choices.



ITEMS OF INTEREST

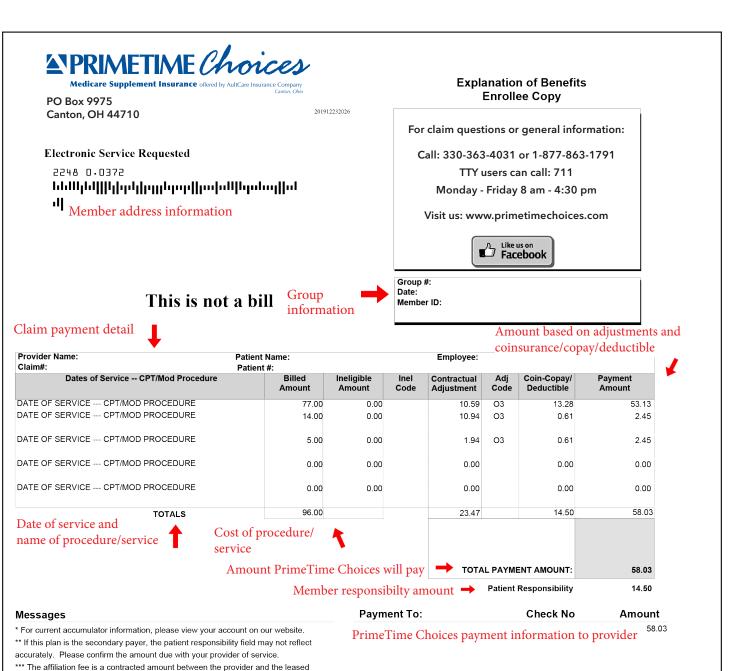
When reviewing your EOB, these areas are clearly denoted. On the reverse side of this flyer, there is an example of an EOB.

- Claim payment details
 - » Provider name
 - » Claim number
- Date of service and name of procedure/service
- Cost of procedure/service
- Any applicable discounts and provider adjustments
- Payment amount paid by PrimeTime Choices based on your plan's deductible, copayment, and insurance
- Amount the member is responsible to pay



CONTACT US

EXAMPLE: EXPLANATION OF BENEFITS (EOB)



network. The patient is not responsible for this amount.

FEE ADJUSTMENT/PROVIDER DISCOUNT, PATIENT NOT REQUIRED TO PAY.

Reason Code Description