How to read your EOB

A quick guide to your explanation of benefits (EOB)

Have you ever received a bill from your doctor or another health care provider and wondered if the amount you're being charged is correct? That's where an EOB comes in. An EOB can help you figure out how much, if anything, you owe and what your Anthem Blue Cross (Anthem) health plan benefits paid for the care.

The EOB — it's not a bill

It's a summary that shows you exactly how your benefits work for every doctor visit and service, how much we pay, and if you owe anything. An EOB also tells you how much you've paid toward your deductible for the year.

Anthem sends you an EOB when a doctor or health care provider files a claim for a visit or service. If you have multiple visits with the same doctor in one day, we'll send just one EOB. However, you may not get an EOB for every visit. For example, if you only paid a copay at the doctor's office, we won't mail you an EOB.

Always compare your EOB to your doctor's bill

When you get a bill from a doctor, hospital, lab or other health care facility for care or a service, it's a good idea to check it against your EOB. By doing so, you can make sure you're being billed for the correct service and that you're paying the doctor the right amount based on how we processed and paid the claim.

Save paper and time by getting your EOBs online

Instead of getting your EOBs in the mail, you can see your EOBs, 24/7, on our website. Signing up is easy and takes just a few minutes:

1. Log in at **anthem.com/ca**. If you haven't registered yet, choose **Register Now** on the right side of the page.

2. Select **Profile > Email Preferences > Primary Email Address**.

3. Under *Explanation of Benefits (EOBs)*, choose **Primary Email Address** for how you want to receive EOBs.

4. Pick **Save/Update**.

It's all here

The EOB shows how much we paid for your care and if you owe anything

To help you understand an EOB, here's a sample that explains all the information you'll see on one:

1. **Issue Date:** The date we created your EOB. Check out **Service Date(s)** to find the date you saw the provider.

2. **Provider of Services:** Your doctor or other health care provider and the place where you got care.

3. **Amount Paid:** What we paid for care.

4. **It is not your responsibility to pay:** The amount you saved by going to a provider in the network.

5. **It is your responsibility to pay:** How much you owe the provider based on your coverage.

6. **Claim summary:** Shows when you got care, the type of service you had, what the provider billed, how much you saved, what was paid toward your deductible, your coinsurance or copay, and other information.

7. **Member Deductible to Date** and **Family Deductible to Date:** The amount you and/or your family have paid toward your deductible.

8. **Customer Service information:** How to reach us if you have questions about your EOB.

Anthem BlueCross

BOB SMITH
12345 MAIN STREET
ANYTOWN, USA 23456

Issue Date **1**   Page

Sequence Number:
Subscriber's Name:
Identification Number:
Group Number
Group Name:
Product:
Claim Number:
Claim Processed Date:

Patient's Name:
Service Date:
Total Billed:

Provider of Services: **2**
Place of Service:
Patient Acct. Number:

Amount Paid: **3**
It is your responsibility to pay: **5**

To:
It is not your responsibility to pay: **4**

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Service Date(s)	Type of Service	Total Billed	Patient Savings/Msg	Applied to Deductible	Coinsurance Copayment Amount	Other Amount/Msg

DETAIL MESSAGE:

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Member Deduct to Date: Family Deduct to Date:

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FOR INFORMATION CALL: CUSTOMER SERVICE DEPARTMENT AT:
XXX-XXX-XXXX

MAIL ALL INQUIRIES OR CLAIMS TO: ANTHEM BLUE CROSS
P.O. BOX 54159
LOS ANGELES, CA 90054-0159

WE SUGGEST THAT YOU RETAIN THIS COPY FOR YOUR INCOME TAX RECORDS

Tip: Instead of keeping hard copies of your EOBs, you can access EOBs and claims information at anthem.com/ca.