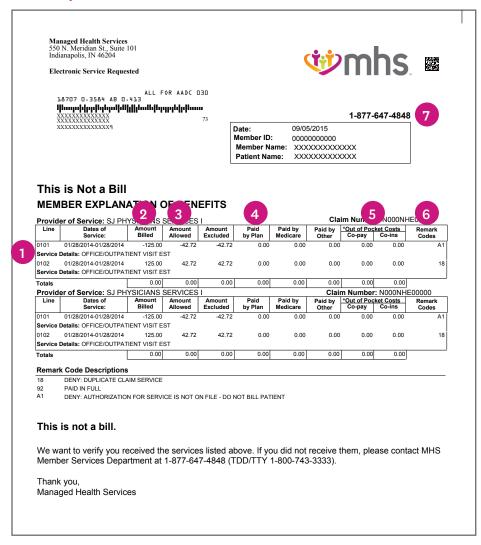


What is an Explanation of Benefits (EOB)?

After you visit your provider, you may receive an Explanation of Benefits (EOB) from MHS. This is an overview of the total charges for your visit and how much you and MHS will have to pay. **An EOB is NOT A BILL.** It helps to make sure that only you and your family are using your coverage.

Here's an example of an Explanation of Benefits:



- Service Detail: A description of the healthcare services you received, like a medical visit, lab tests or screenings.
- Amount Billed: The amount your provider bills for your visit.
- Amount Allowed: The amount your provider will be reimbursed. This may not be the same as the Amount Billed.
- Paid by Plan: The amount MHS will pay to your provider.

- Out of Pocket Costs: The amount the patient or insurance plan member may owe. This includes a co-pay, if you have one. You may have already paid this amount.
- Remark Code: A note from MHS that explains more about the costs, charges, and paid amounts for your visit.
- 7 MHS Member Services: Phone number to call with questions about your EOB.

Remember, an EOB is not a bill!