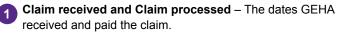


How to read your Explanation of Benefits

This is a replica of the Explanation of Benefits (EOB) you receive from GEHA after a trip to your health care provider. The EOB shows what your provider charged, what portion GEHA will cover and what portion, if any, you are responsible for paying. Your EOB also shows how much has been credited toward your calendar year deductible. An EOB is not a bill. If you have questions after receiving an EOB, call us at (800) 821-6136.



Claim number – Number generated by GEHA. Please refer to this number if you call GEHA Customer Service.

Patient name and ID – The person who received services and their ID number assigned by GEHA.

Provider and ID – Provider or place that provided the patient's services, and their ID number. Might be listed as a corporate name rather than individual doctor's name.

Patient account – The patient's account number assigned by the provider.

Member name and ID – The person who holds the policy with GEHA and their ID number assigned by GEHA.

Generator Employee Health Associates in: Generator Employee In: Generator Employee In: Generator Employee In: Generator In: Generato					Explanation of Benefits WHITE STOCK This is NOT a bill. Retain for your records.)						
					TEST						
Claim received: 08/22/2014 Claim processed: 08/26/2014					CLAIM SUMMARY Amount billed \$151.00						l
Claim number: 00000000000 Patient name: Jane Q Patient Patient ID: 00000000-0			Amount billeved. Claim disallow. Other coverage allowable. Other coverage payment							\$64.00 \$87.00 \$92.82 \$73.96	
Provider: Graham, Archit Provider ID: 000000000 Patient account: 00000000000				GEHA total paid. Member responsibility. GEHA paid memberCheck # 0000000					\$18.86 \$45.60 \$18.86		
Member n Member II		hn Q Membe 000000	r								
Claim de							_				
Se Date(s)	rvice Procedure	Char	ges Amount		Plan pay	ments		Member I	esponsibility	/	
	code*	billed	allowed	Disallow	GEHA	HRA	Сорау	Deductible	Coinsurance	Total	No
08/04/14	SRNO SURO	\$87.00 \$64.00	\$0.00 \$64.00	\$87.00 \$0.00			\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$45.60 \$0.00	1
Total claim		\$151.00	\$64.00	\$87.00			\$0.00	\$0.00	\$0.00	\$45.60	
England											
SUR		SURO	Surgery, Brochure States N/C Outpatient Surgery Outpatient This Service Is Not Covered Under Your Plen; Please Refer To Your Brochure								
Your GE	HA balanc	ces to date									
Individual Deductible I Satisfied			Fa	Family Deductible Satisfied			Family Out of Network Out of Pocket Satisfied				_
Satisfied \$0.00		1		Satisfied \$0.00	S0.00			-			
									ossible after yo al resources.	ou become	леć

2 Claim summary – At-a-glance look at EOB totals.

Amount billed – Amount billed by your provider.

Amount allowed – Amount on which benefit payment is based for procedure or service.

Disallow – Amount of your provider's billed charges that are not eligible for GEHA coverage. This includes services that are not covered by the plan and any amount above the plan allowable that the provider charges.

Other coverage allowable – Amount your other health insurance plan considered for payment.

Other coverage payment – Amount paid by your other plan.

GEHA total paid - Total amount paid by GEHA.

Member responsibility – Total amount of copay, coinsurance and any non-covered charges that can be billed to the patient. *This amount is not payable to GEHA.*

3 Claim detail

Dates - When patient received services.

Procedure code – Code(s) indicate what services patient received from provider. See Explanations box for an explanation of what the codes stand for.

Amount billed – See No. 2 above. Amount allowed – See No. 2 above. Disallow – See No. 2 above.

Plan payments – Total amount paid by GEHA.

Copay – Fixed amount you pay to the provider when you receive certain services.

Deductible – Fixed amount of covered expenses you must incur before GEHA starts paying benefits. Copay and coinsurance amounts do not count toward any deductible.

Coinsurance – Percentage of allowed amount that you must pay, based on either the amount billed or the allowed amount, whichever is less. Coinsurance doesn't begin until you meet your deductible.

Note – Codes correspond to explanations on charges in the Explanations section.

Explanations – Details on the procedure codes and notes in the Claim detail section.

Your GEHA balances to date – Status of deductibles and out-of-pocket limit for the patient and covered family members.