

What's in your claim recap?

Each time you or a health care provider file a claim with your health plan, Anthem sends you a claim recap. The recap helps you see how your JP Morgan Chase Health Savings Account (HSA) health plan works for you. It describes the services received, what they cost and how your plan handled the claim. It also shows your HSA balance.

To view your claim recap, log in to anthem.com, go to the **Benefits** section and click on the **Medical** tab. We'll also send a copy in the mail if you owe any money toward the claim. If you don't want to get a copy in the mail, see below for a quick how-to on going paperless.

Here are the key things to look for on your claim recap:

Anthem
P.O. Box 37110
Louisville, KY 40233-7110

John Q. Lumenos
2300 Avant Street
Cleveland OH 44122

Your HSA Claim Recap 1 of 3

Account Holder:
John Q. Lumenos

Health Program ID:
AN01234567

Group Name:
Lumenos Client

Claim Number:
12345678912

Date Prepared:
2/17/2010

Claim Highlights

Date of Service: 2/1/2010
Consumer: John Q. Lumenos
Provider: Thomas L. Costill
Erwin Medical Services
COLUMBUS, OH 43260-1234

1. Summary of this Claim (See next page for details)

How Much was the Expense?	
The total charge was:	\$ 2,000.00
Amount Allowed by Your Benefit:	\$ 1,000.00
How Much was Paid Under Your Program?	
Amount Paid by Traditional Health Coverage:	\$ 0.00
Total Paid under your Program:	\$ 0.00
What is Your Out-of-Pocket Responsibility? ¹	
Other Out-of-Pocket Responsibility:	\$ 1,000.00
Coinsurance responsibility:	\$ 0.00
You Are Responsible for This Amount:	\$ 1,000.00

Your Provider should bill you directly for this amount.

2. Status of Your Program (As of the Date Prepared)²

Your Traditional Health Coverage	
Begins after spending (on covered services):	\$ 2,500.00
Amount spent to date:	\$ 1,000.00

Thank you for choosing a provider participating in our network – helping you get the most for your health care dollar.

Have a question?
Go online to www.anthem.com or call 1-800-999-9999.

3. Claim Payment Details

Your Annual Out-of-Pocket Maximum			
Maximum for Network Providers:	\$ 3,500.00		
Amount Accumulated Towards Maximum to Date:	\$ 1,000.00		
Maximum for Non Network Providers:	\$ 4,000.00		
Amount Accumulated Towards Maximum to Date:	\$ 1,848.21		

¹ Your responsibility may vary based on your plan. ² The information above is accurate as of the prepared date for this claim and the benefit year in which the claim occurred. The balance information and progress may include other claims that are not included in this statement. It may not reflect your most recent account balance and claims activity. Your actual balance depends upon claims that are in process and on services you have received that are not yet processed.

Health Care Provider Information				Your Program Traditional Health Coverage		Your Responsibility	Explanation**	
Date of Service from: 2/01/2010 to 2/01/2010				Amount Allowed by Benefit*	Amount Paid	You Are Responsible For		
Service	Units	Provider Charged	Provider Responsibility	Amount Allowed by Benefit*	Benefit Level	You Are Responsible For		
SURGERY	0001.0	\$2,000.00	\$1,000.00	\$1,000.00	\$0.00	0%	\$1,000.00	A
TOTAL				\$2,000.00	\$1,000.00	\$1,000.00	\$0.00	\$1,000.00

* The 'Amount Allowed by Benefit' is the amount of the provider's charge covered by your benefits, minus the provider's discount; the sum of the amounts paid from your Account, your Traditional Health Coverage and Your Responsibility will equal this amount.

1 Summary of this claim

- Amount of the claim
- Amount you'll need to pay out of pocket, if any
- Amount that applies toward reaching the traditional health coverage portion of the plan – when you and the plan each pay a percent of the cost for covered services

2 Status of your program

Amount you've spent on covered services during the plan year – a good way to see how much is left before your traditional health coverage kicks in or you reach your annual out-of-pocket maximum

3 Claim payment details

A breakdown of the claim, including the amounts paid through traditional health coverage

How to get your health plan claim recaps online*

1. Log in to anthem.com (if you haven't registered yet, you'll need to register to log in)
2. Click on **Profile**
3. Scroll down to choose how you'd like to get your medical EOBs/claim recaps
4. Select **Go Paperless**

*Only the primary person on the plan (the subscriber) can pick this option.

For more information, call the Member Services number on your member ID card.

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