

# What's in your claim recap?

Each time you or a health care provider file a claim with your health plan, Anthem Blue Cross and Blue Shield (Anthem) gives you a claim recap. The recap helps you see how your Anthem Consumer-Driven Health Plan with health savings account (HSA) works for you. It describes the services received, what they cost and how your plan handled the claim.

Anthem BlueCross BlueShield  
 1251 William Howard Taft Rd  
 Cincinnati, OH 45206-4775

JOHN Q. MEMBER  
 2300 AVANT STREET  
 CLEVELAND, OH 44122

**Account Holder:**  
 John Q. Member  
**Health Program ID:**  
 9998817749004  
**Group Name:**  
 HSA Client  
**Claim Number:**  
 199943200001  
**Date Prepared:**  
 05/20/2014

To view your claim recap, log in to [anthem.com](http://anthem.com) and go to the *Claims* section. 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.

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

**How Much was the Expense?**

The total charge was:	\$ 150.00
Amount allowed by your benefit: [Your Other Insurance Covered]	\$ 125.00
	\$ 0.00

**How Much was Paid Under Your Program?**

Amount paid by Traditional Health Coverage:	\$ 0.00
<b>Total paid under your Program:</b>	<b>\$ 0.00</b>

**What is Your Out-of-Pocket Responsibility?<sup>1</sup>**

Other out-of-pocket responsibility:	\$ 125.00
Coinurance responsibility:	\$ 0.00
<b>You are Responsible for This Amount:</b>	<b>\$ 125.00</b>

Your Provider should bill you directly for this amount.

## Claim Highlights

**Date of Service:**  
 05/03/2014  
**Consumer:**  
 Mary Member  
**Provider:**  
 Dr. James J. Smith  
 Vienna Family Medicine  
 123 Maple Avenue  
 Cleveland, OH 44117

**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 [anthem.com](http://anthem.com)  
 or call 1-800-000-0000.

Save trees by opting not to receive paper statements. You can simply check your account online at [anthem.com](http://anthem.com).

## 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

## 2. Status of Your Program (After this Claim)<sup>2</sup>

**Your Traditional Health Coverage**

Begins after spending (on covered services):	\$2,000.00
Amount spent to date:	\$ 125.00

**Your Annual Out-of-Pocket Maximum**

Maximum for Network Providers:	\$3,000.00
Amount accumulated towards Maximum to date:	\$ 125.00
Maximum for Out-of-Network Providers:	\$5,000.00
Amount accumulated towards Maximum to date:	\$ 125.00

## 3 Claim payment details

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

## 3. Claim Payment Details

Health Care Provider Information				Your Program Traditional Health Coverage		Your Responsibility	Explanation**
Date of Service From: 05/03/2014 to 05/03/2014				Amount Paid	Benefit Level	You Are Responsible for	
Service (Units)	Provider Charged	Provider Responsibility	Amount Allowed by Benefit*				
1 Medical Service - 1	\$150.00	\$25.00	\$125.00	\$0.00		\$125.00	OPM
<b>TOTAL</b>	<b>\$150.00</b>	<b>\$25.00</b>	<b>\$125.00</b>	<b>\$0.00</b>		<b>\$125.00</b>	

## How to get your health plan claim recaps online\*

1. Log in to [anthem.com](http://anthem.com) (if you haven't registered yet, you'll need to register to log in).
2. Pick **Profile**.
3. Choose **Email Preferences**.
4. Select **Primary Email Address**.
5. Choose **Save/Update**.

\* 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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