Medical Mutual is dedicated to providing comprehensive healthcare coverage. To help you get the most from your benefit coverage while keeping costs affordable, it is important that you understand your coverage and use your benefits according to your benefit plan or certificate of coverage. Reviewing your Explanation of Benefits (EOB) will help you better understand your benefits.
Understanding an EOB

An EOB provides a complete picture of the cost for healthcare services you receive. The EOB is not a bill, and if you owe money for services, your provider will send you a bill directly. These pages show an example of what an EOB looks like.

Date statement was produced

Customer Care information
Website, address and phone numbers where you can send inquiries and have specific questions answered.

Policyholder name and address

Your ID number
Your member identification number located on your identification card. Same as contract/certificate number. Important for all claim inquiries.

Your benefits provider

Summary of your claims
The amount paid by your health plan and the amount you owe.

The network status of your healthcare provider

Name of patient
The person who received service(s).

List of service(s) billed and any notes

Explanation of your final responsibility for covered services

Amount billed
The dollar amount billed by your healthcare provider for the service(s) rendered.

Allowed amount
The maximum benefit allowable under your health plan.

Benefits paid
Amounts paid under your health plan to your healthcare provider.

Amount you are responsible for
The amount you owe for the indicated service(s) rendered.

Your ID number

Keep Your Costs Down!
You can minimize your out-of-pocket expenses by going to doctors and hospitals that are part of your health plan network. You can verify whether the doctor you used is in network by checking the Details section below.

To find a list of doctors in your network, please visit our website or call a Customer Service representative at 8000 111-111.

Remember, you can view your plan information and claims statements anytime, day or night, by signing on to My Health Plan on our website.

YOUR EXPLANATION OF BENEFITS

This is not a bill - it's a statement listing the details of your recent health benefit claims. You'll receive a bill from your service provider for any amount you owe. Please check the details below carefully and let us know if you have any questions.

Summary of your claims

Total benefits we paid $1,006.00

Total you are responsible for $244.48

Details of your claim

John Doe
Claim Number: 032381234-000
Services provided by: John M. Jones MD (in network)

<table>
<thead>
<tr>
<th>Type of service</th>
<th>Amount billed($)</th>
<th>Allowed amount($)</th>
<th>Benefits paid($)</th>
<th>Amount you are responsible for($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Services October 31, 2025</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>X-Ray Exam of Neck/Spine - see note E22</td>
<td>151.01</td>
<td>56.74</td>
<td>0.00</td>
<td>56.74</td>
</tr>
<tr>
<td>Office Visit, Med Consult, 25 Min - see note E22</td>
<td>107.00</td>
<td>75.96</td>
<td>0.00</td>
<td>75.96</td>
</tr>
<tr>
<td>Total for this claim</td>
<td>$258.01</td>
<td>$132.70</td>
<td>$0.00</td>
<td>$132.70</td>
</tr>
</tbody>
</table>

A benefit year deductible of $132.70 was applied to this claim.

Note: E22 - Your in-network healthcare professional has agreed to accept the allowed amount for payment plus any deductible and coinsurance as payment in full.

An EOB provides a complete picture of the cost for healthcare services you receive. The EOB is not a bill, and if you owe money for services, your provider will send you a bill directly. These pages show an example of what an EOB looks like.

Keep Your Costs Down!
You can minimize your out-of-pocket expenses by going to doctors and hospitals that are part of your health plan network. You can verify whether the doctor you used is in network by checking the Details section below.

To find a list of doctors in your network, please visit our website or call a Customer Service representative at 8000 111-111.

Remember, you can view your plan information and claims statements anytime, day or night, by signing on to My Health Plan on our website.
Covered charges
Based on the Total amount billed (by the hospital), this section shows the service(s) and amount(s) that are covered under your health plan.

Total amount billed
This section itemizes the service(s) billed by the hospital and provides the dollar amount billed by the hospital for the service(s).

Check number
This line verifies payment was made under your benefits for this service.

Note
Additional information about the benefit administration.

Total for all EOB claims
If there are multiple patients on an EOB, individual patient totals will be included in the statement.

Amount Remaining
The deductible and coinsurance amounts left before you meet your family and/or individual annual maximum.

Information on how to read your graphs

---

**Covered charges**
Based on the Total amount billed (by the hospital), this section shows the service(s) and amount(s) that are covered under your health plan.

**Total amount billed**
This section itemizes the service(s) billed by the hospital and provides the dollar amount billed by the hospital for the service(s).

**Check number**
This line verifies payment was made under your benefits for this service.

**Note**
Additional information about the benefit administration.

**Total for all EOB claims**
If there are multiple patients on an EOB, individual patient totals will be included in the statement.

**Amount Remaining**
The deductible and coinsurance amounts left before you meet your family and/or individual annual maximum.

**Information on how to read your graphs**