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EXPLANATION OF BENEFITS (EOB) DECODER

An EOB explains how a claim was processed. It is not automatically a bill. Compare it with the provider bill before paying.

Member / patient:

EOB date:

Provider:

Claim number:

Follow the money

Amount billed

Plan allowed / negotiated amount

Amount paid by insurance

Deductible applied

Copay / coinsurance

Amount listed as patient responsibility

Reason codes / notes

Copy any code or explanation you do not understand:

Privacy reminder: This worksheet may contain private health information. Store it securely and share it only as appropriate.

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EOB DECODER - REVIEW STEPS

- ☐ Does the provider name and date of service match care I actually received?
- ☐ Do the services and amounts look familiar?
- ☐ Does the provider bill match the EOB patient-responsibility amount?
- ☐ Is anything marked denied, not covered, duplicate, or out of network?
- ☐ Do I understand each reason code or adjustment?
- ☐ Do I need to call the insurer, provider billing office, or both before paying?

Call log

Date	Organization / person	Reference #

What I learned / next step:

Date	Organization / person	Reference #

What I learned / next step:

Date	Organization / person	Reference #

What I learned / next step: