

The Explanation of Benefits (EOB) is provided to assist you in understanding how your claim was processed.

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## EXPLANATION OF EOB

Kansas City Life Group Benefits / 3520 Broadway / PO Box 219325 / Kansas City, MO 64121-9425

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### Patient Responsibility:

Amount Not Covered:	Amount(s) non-covered by benefit plan and patient's responsibility.
Deductible(s):	Amount patient must pay before benefits can be considered or paid.
Co-Pay Amount:	Amount patient must pay at time of each visit or occurrence.
Coinsurance:	Amount patient owes after the plan benefits have been paid.
Patient's Total Responsibility:	Amount the patient is responsible to pay provider.
Other Insurance Payments:	Amount paid by the patient's primary insurance carrier.

### Explanation of Benefits for Services Provided by:

Date of Service:	Date(s) of service provided.
Service Code:	Explanation code for procedure or service performed. See Service Code box below for complete description.
Charge Amount:	Total charge(s) submitted per date of service.
Not Covered:	Amount(s) non-covered by benefit plan and patient's responsibility.
Remark Code:	Explanation code for amount not covered. See Explanation of Remark box below for complete description.
Discount:	Amount saved by using Network Provider. Patient is not responsible for amounts listed.
Allowable Amt:	Amount at which the benefits will be considered or paid.
Deductible Amt:	Amount patient must pay per defined plan maximum before benefits can be considered (or paid).
Co-pay Amt:	Amount patient must pay at the time of each visit or occurrence.
Balance Remaining:	Amount remaining to consider or pay after not covered, discounts, deductibles and co-payments are taken.
% Plan Pays:	Percentage payable according to plan's schedule of benefits.
Plan Payment:	Amount paid to claimant or provider.

These guidelines are intended to help you understand the information contained on this EOB. They are not intended to replace or supplement the summary plan description contained in your plan booklet. Refer to your plan booklet for specific details. If you need further information or clarification, please contact the claims office at the address shown on your EOB.