



# Enhancements to your ASEBP health claim Explanation of Benefits (EOB) form

ASEBP has recently implemented a number of enhancements to your Extended Health Care and Vision Care EOB forms. Here is how your statement has changed.

**New!** Health claim summary

- total amount claimed on this plan member's coverage
- total amount paid for entire statement


**New!** Each family member's claims grouped together for easy reference

- no longer listed according to date of service

If Jane Member is the member under two plans, the assessment under both plans would be shown on this statement.

**New!** Understanding this statement

- provides additional helpful information



Sub: 700 Weber Centre,  
3555 Calgary Trail, Edmonton, AB T6H 5P9  
Edmonton and area: 780-431-4786; Toll free: 1-877-431-4786  
E-mail: asebp@asebp.ab.ca; Web site: www.asebp.ab.ca

**EXPLANATION OF BENEFITS**

Direct deposit payment date: Sept. 23, 2009  
Health statement number: 444555666  
PAYMENT MADE BY DIRECT DEPOSIT: 234567

SAMPLE

JANE MEMBER  
5555 CALGARY TR  
EDMONTON AB T6H 5P9

Covered member: Jane Member  
ASEBP ID: 1234567

**Health claim summary**

Total amount claimed	\$824.00
Amount not paid	\$554.00
Total amount paid	\$270.00

**Details**

Each claim you submit is assessed according to the rules of your benefit plan. Please refer to the explanations near the end of this claim statement for descriptions of terms, and to your benefit handbook for plan details.

Patient name: Jane Member ASEBP ID: 1234567  
Coverage through: Jane Member ASEBP ID: 1234567 Section: 56 Reference: 200918112232

Service date YYYY/MM/DD	Product or service	Amount claimed	Eligible amount	Percent covered	Other plan paid	ASEBP pays	Explanation number*
2009/08/20	Prescription glasses	799.00	250.00	100%	0.00	250.00	307A
2009/08/20	Chiropractor user fee	25.00	20.00	100%	0.00	20.00	307B
<b>Totals for Jane</b>		<b>\$824.00</b>	<b>\$270.00</b>		<b>\$0.00</b>	<b>\$270.00</b>	

**\*Explanations**

See the numbered explanation(s) below for details of how your claims were assessed. Consult your benefit handbook for coverage specifics.

307A Your plan covers a maximum of \$250 every 24 months for this benefit. The unpaid amount is not eligible for reimbursement by this plan.

307B Your plan covers a maximum of \$20 per visit/treatment to a maximum of \$400 per benefit year. The unpaid amount is not eligible for reimbursement by this plan.

**Understanding this statement – Terms and explanations**

<p><b>Eligible amount:</b> The portion of the Amount claimed that is considered for reimbursement by your plan. ASEBP has a maximum amount it will pay for a product/service or group of products/services (for example: physiotherapy, chiropractic, acupuncture combined annual maximum).</p> <p><b>Percent covered:</b> The percent covered relates to the maximum coverage allowed for a product or procedure as outlined in the ASEBP benefit handbook. It does not relate to the amount you claimed.</p>	<p><b>Other plan paid:</b> The amount paid by another benefit carrier.</p> <p><b>Coordination of benefits:</b> When there is more than one benefits plan involved, there are set guidelines about which plan pays first.</p>
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If you have questions or concerns about this statement, please contact an ASEBP Benefit Specialist by phone at 1-877-431-4786, or e-mail at benefits@asebp.ab.ca.

**New!** Key contact and reference information in one place

- statement/ payment date and numbers
- clear notification of payment by direct deposit
- member name and identification number

**Other statement details**

- **Product or service** refers to the assessed health product or service. The description on your EOB may differ from what you submitted.
- **Other plan paid** refers to amount paid by any other known coverage, such as the member's spouse's plan. If 100% of the service was covered by the other plan, it would not be listed on this statement.

**If you have any questions, comments, or concerns, please contact an ASEBP Benefit Specialist toll-free at 1-877-431-4786 (or at 780-431-4786 in the Edmonton area). You may also send an email to benefits@asebp.ab.ca, or stop by the ASEBP office Monday to Friday between 8:00 a.m. and 4:30 p.m.**