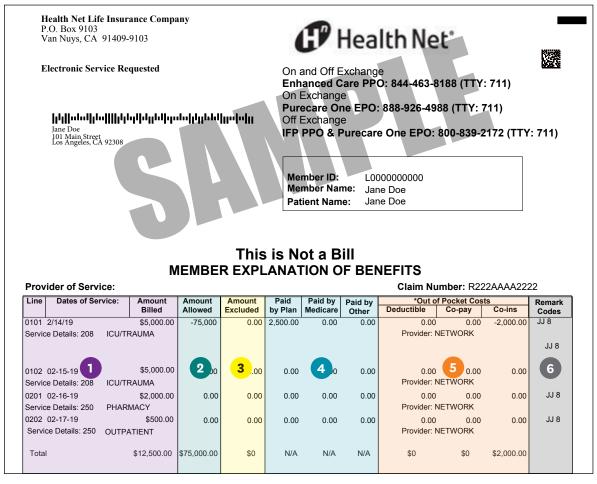


Understanding Your Explanation of Benefits

You may receive an Explanation of Benefits (EOB) from Health Net of California, Inc. or Health Net Life Insurance Company (Health Net) after you use your health plan benefits. **An EOB is not a bill.** It is a brief description of the benefits applicable to the services you received.

The EOB shows the amount your health care provider billed Health Net, the amount Health Net paid, and the portion of the cost of services that may be your responsibility. A sample EOB is shown below with the most common sections described. Depending on the services you receive and your plan type, your EOB may have data in the same or different areas.



Line item, date, type of service and the amount your provider billed to Health Net.

Rate that Health Net and the provider have

- agreed to for the service. If the service was received from an out-of-network provider, this amount is equal to the allowable amount that Health Net pays for the service combined with any applicable deductible, coinsurance or copays you may owe.
- Difference between the Allowed Amount and the Amount Billed that is not eligible for payment by Health Net.
- Amount previously paid toward the billed service(s) by either another carrier or Health Net.
- Amounts that are your responsibility to pay, per your plan agreement.
- Codes refer to the reason for any non-allowed amount, and are further described at the bottom of the form.

Questions?

If you have questions about an EOB you received, please call our Customer Contact Center. You'll find the number on the front of your EOB near your mailing address.

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