

Larkspur Family Health, PLLC

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PATIENT EDUCATION

Document
Understanding your statement
Owner
Office Manager
Version
2.8 · Effective 03/2027
Billing
555-0170, option 4

Understanding Your Statement and Your EOB

Why two different documents arrive, how to compare them, and what to do when they disagree

THE STATEMENT FROM US AND THE EOB FROM YOUR INSURER ARE NOT THE SAME DOCUMENT

The EOB explains how your plan processed a claim and is not a bill. Our statement is the actual request for payment. Always compare the two before you pay.

STATEMENT DATE April 2, 2027	ACCOUNT LFH-00-48213	AMOUNT DUE \$221.25	DUE BY May 2, 2027
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A SPECIMEN STATEMENT						
DATE OF SERVICE	DESCRIPTION	CHARGE	INSURANCE ADJUSTMENT	INSURANCE PAID	YOUR PAYMENT	BALANCE
03/12/2027	Office visit, established patient, level 4	\$318.00	(\$96.40)	\$0.00	(\$30.00)	\$191.60
03/12/2027	Venipuncture	\$29.00	(\$18.75)	\$0.00	\$0.00	\$10.25
03/12/2027	Preventive wellness visit	\$196.00	\$0.00	\$196.00	\$0.00	\$0.00
03/12/2027	Smoking cessation counseling	\$42.00	(\$22.60)	\$0.00	\$0.00	\$19.40
02/04/2027	Form completion fee, non-covered	\$25.00	\$0.00	\$0.00	(\$25.00)	\$0.00
ACCOUNT BALANCE		\$610.00	(\$137.75)	\$196.00	(\$55.00)	\$221.25
A negative number in parentheses reduces what you owe. The adjustment is the amount we are contractually required to write off because we participate with your plan — you never owe it.						

WHAT EACH COLUMN MEANS		COMPARING YOUR STATEMENT WITH YOUR EOB
Charge	Our standard fee before any insurance contract is applied. Almost nobody pays this amount.	- Find the EOB for the same date of service and the same provider. - Match the allowed amount on the EOB to the charge minus the adjustment on our statement. - Match the EOB's "patient responsibility" or "you may owe" to the balance on our statement. - Check that any payment you already made appears in the "your payment" column. - If both documents agree, the balance is correct and you can pay it. - If they disagree, call us before paying at 555-0170 option 4.
Insurance adjustment	The contractual discount we must write off as a participating provider. This is removed permanently and is never billed to you.	
Insurance paid	What your plan actually sent us for that line.	
Your payment	Copays or payments you already made, including at check-in.	
Balance	What remains. This is normally deductible, coinsurance, copay, or a non-covered service.	

WHY A BALANCE APPEARS WHEN YOU THOUGHT YOU WERE COVERED

REASON	WHAT IT MEANS	WHAT YOU CAN DO
Deductible not yet met	Your plan requires you to pay the allowed amount yourself until the deductible is satisfied. Having insurance does not mean the plan pays from the first dollar.	Check the accumulator section on your EOB to see how much remains.
Coinsurance	After the deductible, your plan pays a percentage and you pay the rest.	The percentage is in your plan documents, not set by us.
A preventive visit that also addressed a problem	Your plan processed part of the visit as a problem visit, which carries cost sharing.	Ask us to schedule preventive and problem visits separately in the future.
Non-covered service	Your plan does not include that service as a benefit. Form-completion fees and some counseling services are common examples.	Ask us before the service whether it is typically covered.
Out-of-network laboratory	The specimen was sent to a laboratory that is not in your plan's network.	Tell us which laboratory your plan prefers; we can usually direct it there.
Coverage was not active on the date of service	The plan on file had ended or had not started.	Send us your current card and we will resubmit the claim.

IF YOU DISAGREE WITH THE BALANCE

1. Call us first at 555-0170 option 4. Many balances are a coding or insurance-on-file issue we can correct.
2. If the issue is how your plan processed the claim, contact your plan using the number on your card. We can resubmit with additional information.
3. You can request an internal appeal from your plan, usually within 180 days of the EOB.
4. Ask us for an itemized statement at any time; it is free.
5. Do not ignore the balance while a dispute is open. Call and tell us it is disputed so the account is held.

PAYING, AND GETTING HELP PAYING

- Pay online through the portal, by phone, by mail, or in the office.
- Interest-free payment plans are available. Ask before the balance becomes overdue.
- If you are uninsured or not using insurance, ask for our self-pay rate — it is lower than the standard charge.
- You can request a good-faith estimate before a scheduled service.
- Tell us if you are having financial difficulty. There are almost always options, but only if we know.
- Accounts more than 120 days overdue with no contact may be referred for collection. A phone call prevents this.

FICTIONAL SPECIMEN. Larkspur Family Health, the account number, and all amounts shown here are invented for demonstration only. This is not a real bill, a real EOB, a coverage determination, or financial or insurance advice.