


Explanation Of Payment (EOP) Form Compliance with the Thomas Settlement

The Thomas Settlement requires certain information to be provided on the Explanation of Payment (EOP) form. Blue Cross and Blue Shield of North Carolina (BCBSNC) already provided most of this information on the EOB, but recently added or changed a few components for Blue Advantage®, Blue OptionsSM, Blue Care®, Classic Blue®, and NC SmartChoice PPO members. This sample EOP highlights items related to the Thomas Settlement. **Blue** squares indicate Thomas requirements BCBSNC already provided on the EOP and include patient's full name, patient's BCBSNC identification number, dates of service, amount paid, and procedure code.

Information added to comply with Thomas is indicated by **red** squares with explanations in yellow bubbles.



**BlueCross BlueShield
of North Carolina**
An Independent Licensee of the
Blue Cross and Blue Shield Association

EXPLANATION OF PAYMENT

Vendor Name:
Vendor ID Number:

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Patient's Name	ID Number	Dates of Service	Patient Number	Medical Rec Number	Place					
Type of Service	<div style="border: 1px solid red; padding: 2px;">Sub. Unit(s)</div>	<div style="border: 1px solid red; padding: 2px;">Paid Unit(s)</div>	<div style="border: 1px solid red; padding: 2px;">Billed Charges</div>	Contracted Charges	Disallowed Amount	Deductible Amount	Copay/Coins Amount	Remaining Mbr Expense	Remark Code	<div style="border: 1px solid blue; padding: 2px;">Amount Paid</div>

A MOUNT BASED ON TIME PROCESSING GUIDELINES AS SPECIFIED BY THOMAS SETTLEMENT

INTEREST: NUMBER OF DAYS

CLAIM #: EFT BATCH#:

11/29/2007 MBS123789

155.00 15.00 0.00 25.00 25.00 100.00

E16 OUR RECORDS SHOW MEMBER HAS PRIMARY INSURANCE WITH ANOTHER CARRIER. RESUBMIT CLAIM WITH EOB FROM PRIMARY CARRIER. DISREGARD THIS NOTICE IF MEMBER CERTIFICATE IS NOT ACTIVE WITH US. CLAIM WILL BE REOPENED UPON RECEIPT OF REQUESTED INFORMATION WITHIN ONE YEAR OF DENIAL.

E32 CLAIM HAS BEEN ADJUSTED.

Billed Charges: This field is not new but has been enhanced to now display the line level charges for Medicare Crossover claims.

Interest required to be paid as a result of the Thomas Settlement displays here, if applicable.

Sub. Unit(s) (Submitted Units), and **Paid Unit(s)**: "Sub. Unit(s)" contains the number of procedures performed under a single claim line. "Paid Unit(s)" contains the number of units paid. For out of state members, the submitted and paid units will always be set to zero. In this case, the remarks page will include the following message: ***"If both the submitted and paid units fields are equal to zero, the units are not available."***

If the claim was adjusted, a generic description of the adjustment will display in the Remarks section on the **back** of the EOP.