

## Healthcare claims process

- 1. You visit your provider** and show them your ID card.
- 2. You pay the copay** at the time of service (this varies depending on your plan, i.e PPO or HDHP).
- 3. Your provider sends the claim** to the appropriate location specified on the back of your ID card.
- 4. The claim is processed** by Automated Benefit Services (ABS), our third party administrator for medical claims.
- 5. ABS reviews the claim** for accuracy and completeness, then determines which services will be covered by SmartHealth.
- 6. SmartHealth pays or denies the claim** - this could be the entire bill or just a portion of the services, depending on your plan.
- 7. ABS sends you an explanation of benefits (EOB).**
- 8. You then receive a bill from your provider** with your remaining balance. (If SmartHealth covered the bill at 100%, it will show \$0 patient responsibility.)
- 9. Verify that your EOB and bill match** for that date of service and for the services provided.
- 10. You pay the remaining balance** to your provider.

**Download the [SmartHealth app](#) to access your EOBs, deductibles, ID cards and more.**

To review your plan description, schedule of benefits or summary of benefits and coverage:

- Visit [mysmarthealth.org](https://mysmarthealth.org)
- Make sure you have "member" selected
- Navigate to "Information Center"

