

PLAN PAYS	YOU PAY
5907.00	5100.00
50.00	3907.00
5260.00	425.00
350.00	395.00
5000.00	2146.00
Totals	

Reason code explanations:

3 Service and payment details

This section includes information about who received the medical service, the name of the provider and what types of care they received. It gives you a breakdown of how the claim was processed, including:

- How much your provider billed
- Your network discount
- The amount paid by your employer-sponsored plan
- The amount you may owe, including co-pays, deductibles and out-of-pocket amounts

Go paperless
on umr.com