

Get Patient Claims and Benefits Information Fast with MedBen BeneFax!

MedBen BeneFax is the easiest and fastest way to get patient claims and benefits information. There's no need to secure information from patients or call a customer service representative.

To use MedBen BeneFax, all you need is the following information:

- Your area code and fax number;
- Your 9-digit tax ID number, and;
- The insured's personal identification (PID) number.

Using MedBen BeneFax is as simple as 1-2-3!

- 1) Call MedBen BeneFax at **(800) 455-9528** or (740) 522-1593.
- Enter your area code, fax number and
 9-digit tax ID number, and the insured's PID number.

Option 1

Medical Information

Option 2

Dental Information

Option 3

VisionPlus Claim Form

Option 4

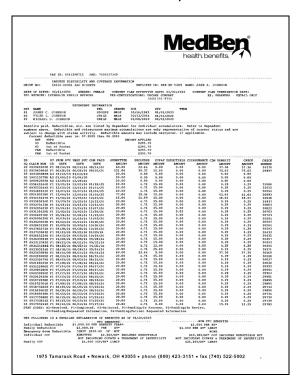
Claim Status

Option 5

EOB Fax



3) Choose one of the options (see box above) to request the information you need.



Included in the available options is an **explanation of benefits** for a processed claim. Just press "5" and follow the prompts, and the EOB will be faxed to you immediately!

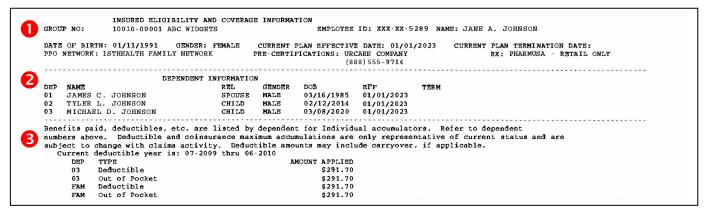
Within minutes, a patient information sheet will be faxed to you, containing the status of any claims submitted under your tax ID number, the patient's current PPO and Rx networks, deductibles, and a summary of benefits. (See the next page for a breakdown of BeneFax components.) It's that easy!

Should you still have questions after receiving your MedBen BeneFax information, or need assistance using the system, please call MedBen Customer Service at **(800) 686-8425**. Representatives are available Monday through Friday, 8:00 a.m. to 6:30 p.m. EST. You also can e-mail Customer Service at **medben@medben.com**.

Thanks for being a MedBen provider!

ISO 9001 CERTIFIED

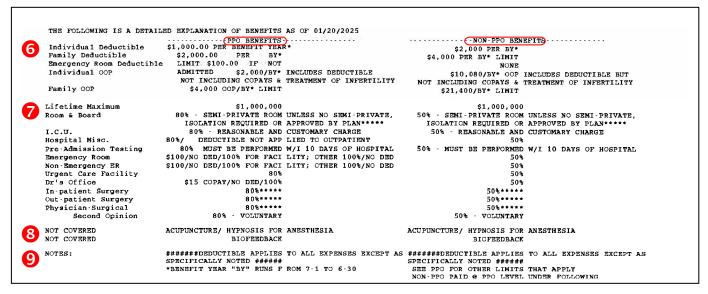
Reading Your MedBen BeneFax



The top portion of your MedBen BeneFax contains information about the covered person and that person's employer/health plan (1), including PPO and Rx networks. Below this is listed the covered person's dependent information (2), if applicable, followed by deductible accumulators (3) for each covered member and the family in total.

Λ					CLM PAID	SUBMITTED	EXCLUDED			COINSURANCE (CHECK	CHECK
v			ATE	DATE	DATE	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	NUMBER
_	02 092363100E	F1 08/	14/24	08/14/24	08/14/24	60.00	22.64	0.00	0.00	0.00	37.36	37.36	30170
	02 091963064E	F1 06/	26/24	06/26/24	08/10/24	121.00	30.37	15.00	0.00	0.00	75.63	75.63	29897
	03 100183080E	A2 01,	12/10	01/12/10		20.00	0.00	0.00	0.00	0.00	0.00	0.00	
	03 100113179E	A2 01/	04/10	01/04/10		20.00	0.00	0.00	0.00	0.00	0.00	0.00	
	03 100062035E	A2 12/	29/24	12/29/24		20.00	0.00	0.00	0.00	0.00	0.00	0.00	
_	03 093643244E	F1 12/	21/24	12/21/24	01/18/25	20.00	4.71	15.00	0.00	0.00	0.29	0.29	31086
a	STAT CODES: A2	=Rece	ved,	F1=Comple	ted, F2=Rej	ected, P1=Pe	nding/In Pr	cocess,	P2=Pending/	In Review,			
U	P3	=Pendi	na/Re	quested T	nformation.	P4=Pending/	Patient Rec	mested	Information				

Next, you will find a list of all claims submitted under your tax ID number (4). Each claim listed includes the patient treated and the claim number, followed by a claims status code (a code key (5) is located beneath the claims list). After this is listed the patient's treatment date(s), the claim payment date, the submitted amount, and any exclusions, copays, deductibles and coinsurance. The benefit amount, check amount and check number are also found here. If a claim has been received but not yet processed, the Claim Paid Date and Check Number columns will be blank.



The bottom portion of your MedBen BeneFax contains a detailed explanation of benefits (shown above in an abbreviated version) **for PPO and non-PPO providers**. Included are deductible and out-of-pocket amounts (6), followed by benefit levels for office visits and many common treatments (7). After this are listed any non-covered treatments (8) and lastly, notes (9) regarding specific benefits as well as Rx plan details.