

Deductible Credit Form

During the current calendar year, credit will be given for any amounts applied toward the deductible under your prior group health insurance carrier's plan. Deductible credit will be given only when it is evidenced by a copy of the prior carrier's "Explanation of Benefits" (EOB) Statement. To assure that deductible credit is properly applied, please provide the information requested below as soon as possible, **but not prior to your group's effective date.**

To receive deductible credit, please complete the bottom of this form and submit it with a copy of your prior carrier's EOB statement to SignatureEOBs@oswaldcompanies.com :

THIS FORM IS FOR DEDUCTIBLE CREDIT ONLY. To insure accuracy and timely credit, please print clearly.

Group no. _____ Group name Myers Industries, Inc.

Employee name _____ Date of birth _____

Employee identification no. _____ Social security no. _____

DEDUCTIBLE CREDIT INFORMATION IS ATTACHED FOR:

Name	Relationship	Amount
		\$
		\$
		\$
		\$

A COPY OF PRIOR CARRIER'S EXPLANATION OF BENEFITS (EOB) IS NECESSARY FOR DEDUCTIBLE CREDIT.

INSURANCE FRAUD WARNING Any person who, with intent to defraud or knowing that he or she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.