Privacy and Security

Q: Is my health plan going to know if I provide this information to you? Are they tracking what I do on this site?
A: Your health plan does not have access to your individually identifiable personal health information on the Treatment Cost Calculator. This site conforms to all privacy and confidentiality standards, and maintains appropriate physical, electronic, and administrative security procedures to safeguard your data.

Q: Is it safe to enter my personal information on this site? Is it secure?
A: Your health plan does not have access to your personal health information on the Treatment Cost Calculator. This information is strictly confidential. This site conforms to all privacy and confidentiality standards, and maintains appropriate physical, electronic, and administrative security procedures to safeguard your data.

Q: How long does Treatment Cost Calculator remain signed in if I'm not active?
A: The Treatment Cost Calculator remains open for 10 minutes after no activity, before logging out for user privacy and security.

Cost Estimates and Benefits

Q: How are these estimates calculated?
A: The estimates provided by the Treatment Cost Calculator are based on regional historical claims experience. The Treatment Cost Calculator provides estimates for approximately 360 procedures and eight chronic conditions.

The Treatment Cost Calculator follows a two-step approach to providing accurate, real-time estimates of patient liability.

• The Estimator uses actual claims history data to return cost estimates for each service. The statistical models used in the estimator predict the likely allowed amount as well as a range of costs for estimated services.

• The tool applies member information to the estimated service cost in order to calculate the member’s liability.

Q: I thought this service was preventive but it isn’t coming up that way?
A: There may be additional requirements guiding whether a service is considered preventive for you. You can find out more about these requirements by checking the tips within the Treatment Cost Calculator or by calling the number for your health plan customer service number on your ID card.

Q: I got a bill for this service but your site shows a different price. Why?
A: The information provided by this site is only an estimate. While every effort has been made to provide you with the most accurate information, in some instances the actual charges from your provider may be different than the historical averages reported by the Treatment Cost Calculator.

Q: I was with health plan last year but am now with a different health plan for this year, why can’t I see the prices from my prior coverage?
A: In order to reduce potential confusion, the Treatment Cost Calculator contains only your most current health plan information. You may consult your explanation of benefits or claims reports from prior years for your previous administrator’s cost information.

Q: How are the out-of-pocket estimates for patient liability created?
A: The Treatment Cost Calculator follows a two-step approach to providing accurate, real-time estimates
The Treatment Cost Calculator uses actual claims history data to model individual provider-payer contracts with payers. The statistical models used in the tool estimate the expected cost range for specific services. Then the tool applies member information to the estimated service cost in order to calculate the member’s liability.

Q: What is the source of estimates – claims data or contract data?
A: The Treatment Cost Calculator uses claims payment history data to model individual provider-payer contracts to create accurate estimates for the services. Claims data is more reliable because it more accurately emulates actual payment – the contracts plus the claims payment system rules.

Q: How does the tool obtain member benefit information when creating out-of-pocket estimates?
A: The Treatment Cost Calculator has been loaded with health plan benefits information. Members can modify their year to date out-of-pocket maximum.

Q: For how many services and conditions are the estimates available?
A: The Treatment Cost Calculator provides estimates for approximately 360 services and eight chronic conditions. These services and conditions have been identified as the most common services performed. We continue to refine both lists based on user feedback collected through the Treatment Cost Calculator interface.

Q: What are the various categories of services for which the estimates are available?
A: The Treatment Cost Calculator provides estimates for Office Visits, Immunizations, Lab Tests, X-ray and Radiology Services, Diagnostic Tests, Outpatient Procedures, Inpatient Procedures and Chronic Conditions. The methodology used for estimating each of these categories of service is different and has been developed after intensive analysis.

To see a full list of available services log into the tool and under the New Estimate search box choose “A-Z list of everything.” You will see an alphabetized list of all 360+ procedures & conditions.

Q: Are Condition estimates included in the Treatment Cost Calculator?
A: Yes, to support healthcare financial planning, the Treatment Cost Calculator provides a summary of the annual healthcare expenses and the consumer’s anticipated out-of-pocket costs to treat and maintain the condition. Treatment Cost Calculator also provides the set of recommended care services, based on nationally endorsed evidence-based guidelines, which consumers should follow in order to treat or maintain their condition. Further, consumers can view the set of complications that could develop in case the condition is not properly treated or maintained.

The Treatment Cost Calculator includes estimates for the eight chronic conditions listed below:
- Allergic Rhinitis
- Asthma
- Chronic Obstructive Pulmonary Disease (COPD)
- Coronary Artery Disease (CAD)
- Diabetes Type 1
- Diabetes Type 2
- Hypertension
- Rheumatoid Arthritis

We continue to refine this list based on user feedback collected through the Treatment Cost Calculator interface.

Q: How can a consumer search for an estimate for a specific condition or service?
A: Consumers can search for services or conditions in multiple ways – search by Health topic, search by Treatments and Services or search alphabetically. Consumers can also search by typing a keyword or the CPT code. This is similar to Google type search.

Q: How does the key word search functionality work?
A: The Treatment Cost Calculator leverages the fuzzy search capability supported by many database software. This allows the tool to return relevant search results even when the user mistyped the search.
terms such as “ankel x-ray” for “ankle x-ray.” Another capability that the Treatment Cost Calculator supports is searching based on alternate terms.

**Q: Why are some services broken out into different components?**
A: The Treatment Cost Calculator user interface displays the 'components' of the estimates. The meaningful components vary based on the type of service being searched. For example, for outpatient surgical estimates, the tool displays the costs for the Facility, the Professional procedure, and other related costs (lab, anesthesia). For MRIs, the tool displays the costs of the facility (technical components) and professional (interpreting the test).

**Q: Why do I sometimes see $0 for the professional component of the cost estimate for procedures such as CT scans and MRIs?**
A: The technical and professional components of a cost estimate are based on provider practice and billing patterns seen in the data. Both the technical and professional components of the cost estimate are created for the following billing patterns: the physician’s office owns the imaging equipment and bills for the use of this equipment separately or if the service is performed in a hospital (technical component) and the reading of the results for an x-ray or image is performed by a radiologist (professional component).

In the more common scenario, a radiology clinic or provider group performs both the test and the reading of the test results. The service is billed as one line on the claim without the use of procedure modifier codes and is attributed entirely to the technical component of the estimate; therefore the professional component is billed at $0.

**Q: How does the Treatment Cost Calculator use the consumer's (e.g., user) zip code?**
A: This question is best answered by using an example. Let’s suppose that Mary Johnson’s zip code is 48103 (Detroit, MI) and she clicks open the Treatment Cost Calculator (TCC). The TCC uses Mary’s zip code to produce a regionally appropriate cost estimate based on the Detroit, MI market area.

**Q: Do you provide in-network and out-of-network estimates? How does the methodology differ for the two types of estimates?**
A: Yes, the tool provides both in-network and out-of-network estimates for most procedures and conditions at the general estimate level. In-network estimates use the allowed amount from the claims data to calculate the estimates.

Out-of-network estimates use a combination of the billed charge and the allowed amount to derive the member’s potential out-of-pocket costs. Our goal is to convey to the consumer the additional monetary responsibility (balance bill) he/she may be responsible for by going to an out-of-network provider.

**Q: In the estimates, why do I see a line for the “Additional Out-of-Network Responsibility”?**
A: A goal of the Treatment Cost Calculator is to educate the consumers about any potential out-of-pocket costs they may incur and ensure that all cost factors are presented to the consumers in order to better aid them in their decision making. Research has indicated that many consumers are not aware that if they seek care from an out-of-network provider, they may potentially be responsible for the difference between what the provider bills and what the health plan will allow for the service. In this case, the “Additional Out-of-Network Responsibility” has been added to help the users understand this potential liability.

**Q: Does the Treatment Cost Calculator address coordination of benefits?**
A: No. The Treatment Cost Calculator only supports out-of-pocket calculation for when the health plan is the primary payer for the user.

**Q: Why is my address showing incorrectly?**
A: The Treatment Cost Calculator uses Google Maps technology to display the closest address identifiable.