CareFirst. 🕸 💱

CONSUMER TRANSPARENCY

Treatment Cost Estimator

SEPTEMBER 20, 2022

Proprietary and Confidential

CareFirst BlueCross BlueShield is the shared business name of CareFirst of Maryland, Inc. and Group Hospitalization and Medical Services, Inc. which are independent licensees of the Blue Cross and Blue Shield Association. @ Registered trademark of the Blue Cross and Blue Shield Association.

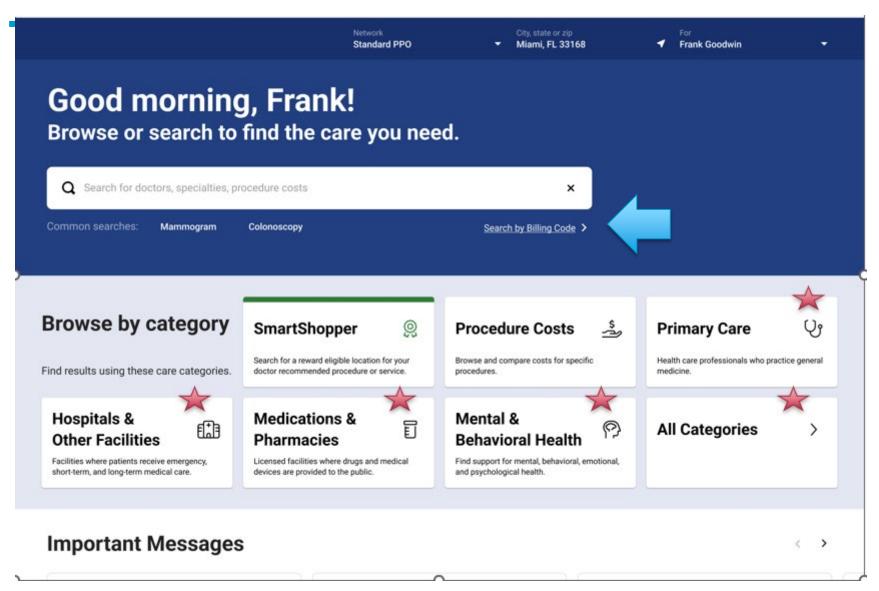
Consumer Transparency Enhancements



- Extend the existing Cost Estimator Tools cost data for 500 shoppable items and services defined by regulation.
- Ability to provide estimates by CPT/HCPCS codes.
- Ability to search by
 - billing code
 - Procedure Description,
 - In-Network provider or all In-Network providers
 - Other factors (e.g., location of service, facility name, dosage).
- Provide costs for Out-of-Network providers in our service area
- Incorporate a member's current accumulator and specific provider/location costs
- Enhance functionality to allow users to sort by geographic proximity or estimated out-ofpocket (OOP) costs
- Accessible to all current enrollees in paper or by phone, upon request

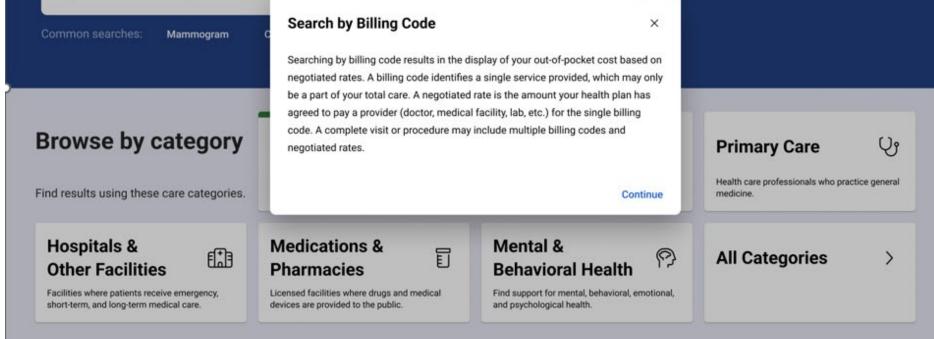
Landing Page – Updated Treatment Cost Estimator





Good morning, Frank! Browse or search to find the care you need.

Q Search for doctors, specialties, procedure costs



Important Messages

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Trequentity Asked Questions

What is a billing code?	×.
How can I find the billing code for my procedure?	Ŷ
How are the results from this search bar different from the home page search bar?	×
Can I search all billing codes	

Search Help Glossary Provider Finderth Disclaimer PRS Terms of Use

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Evolvder data last updated: May 20, 2021

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What is a billing code?

A billing code is a code used by health care providers to identify health care items or services for purposes of billing, processing, and paying claims for a covered item or service, including the Current Procedural Terminology (CPT) code, Healthcare Common Procedure Coding System (HCPCS) code, Diagnosis-Belated Group (IR6); code, National Drug Code (NDC), or other common payer identifiers.

Frequently Asked Questions

How can I find the billing code for my procedure?

All health care providers use standard billing code sets in U.S. health care settings. Providers document diagnoses and services provided in your medical record at the time of your care. Billing codes are assigned for those services provided, based on the provider's documentation in your medical record. The billing codes are submitted to your health plan when the provider seeks payment for the services provided. You may contact your health care provider's office or billing personnel and ask them to help your match billing codes and services.

How are the results from this search bar different from the home page search bar?

When using this search bat, you will be able to search by specific billing codes. Your estimated cost of care will be shown using the negotisted rates that your health plan has agreed to pay a provider (doctor, medical facility, lab, etc.) for the billing code that you have searched. A billing code is used to identify a single service provided, which may be only part of your total care. A complete visit or procedure may include multiple billing codes and negotiated rates. When using the search bar on the homepage, you will be able to search for procedures by name (rather than by billing code). Your estimated cost of care will be shown using historical claims information from actual claims paid by your health plan.

Can I search all billing codes

The Transparency in Coverage Final Rules require health plans to make price comparison information available through an on-line self-service tool. This information must be available beginning on January 1, 2023, for Sol 'shoppable' services that were identified by the regulation. You will only be able to search for billing codes related to those 500 'shoppable' services. Beginning on January 1, 2024, you will be able to search for billing codes related to all items and services. See the 500 shoppable procedures

Frequently Asked Questions

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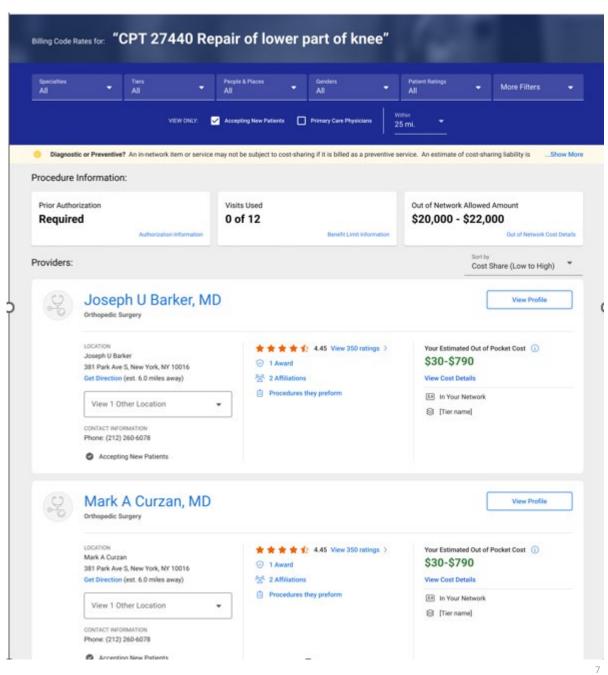
Frequently Asked Questions

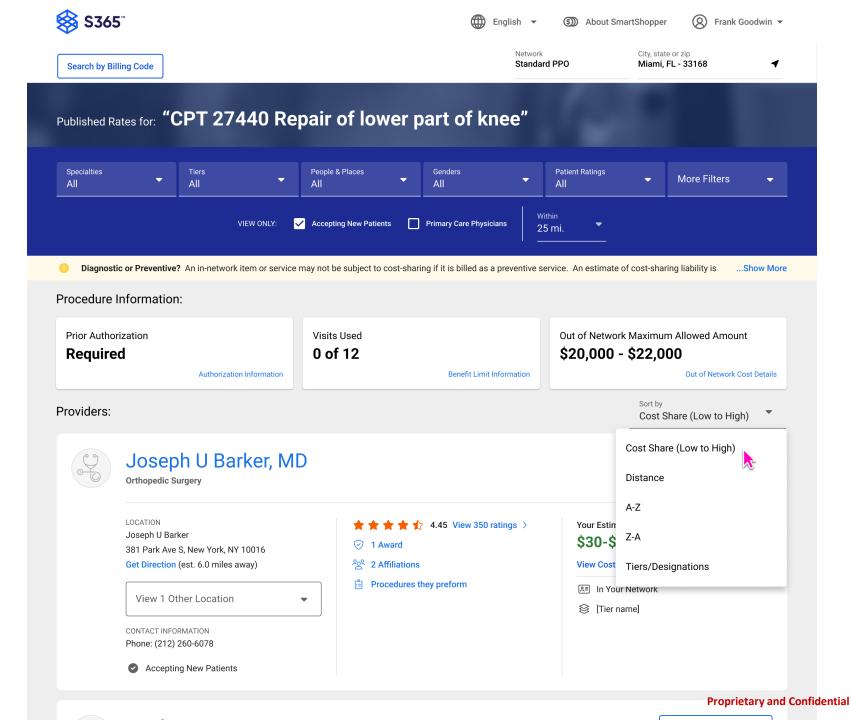
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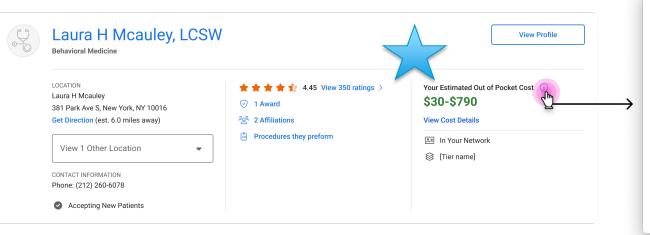
14

Information on the procedure: Authorization requirements, Limitations, Out of Network costs

> List of Providers able to provide the service in the area specified







Out of Pocket Cost

The estimated amount you must pay. This may include deductibles, coinsurance and copayments for covered services.

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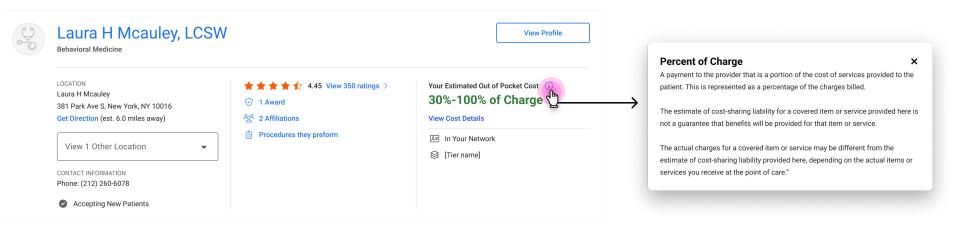
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The actual charges for a covered item or service may be different from the estimate of cost-sharing liability provided here, depending on the actual items or services you receive at the point of care.

Your health plan may apply copayment assistance or third-party payments to the calculation of your deductible and out-of-pocket maximum. Please check your benefits to confirm if such payments apply and if they impact your deductible and out-of-pocket maximum.

-OR-

Your health plan does not count copayment assistance or other third-party payments in the calculation of your deductible and out-of-pocket maximum.



Proprietary and Confidential

Out of Pocket Cost

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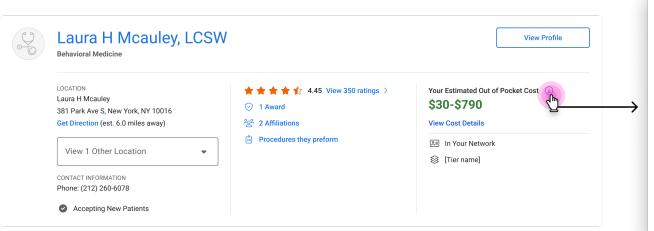
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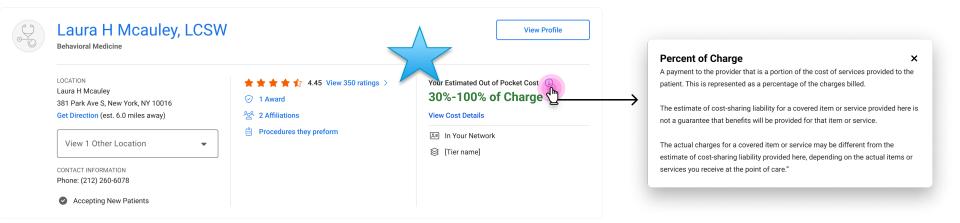
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Percent of Charge

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A payment to the provider that is a portion of the cost of services provided to the patient. This is represented as a percentage of the charges billed.

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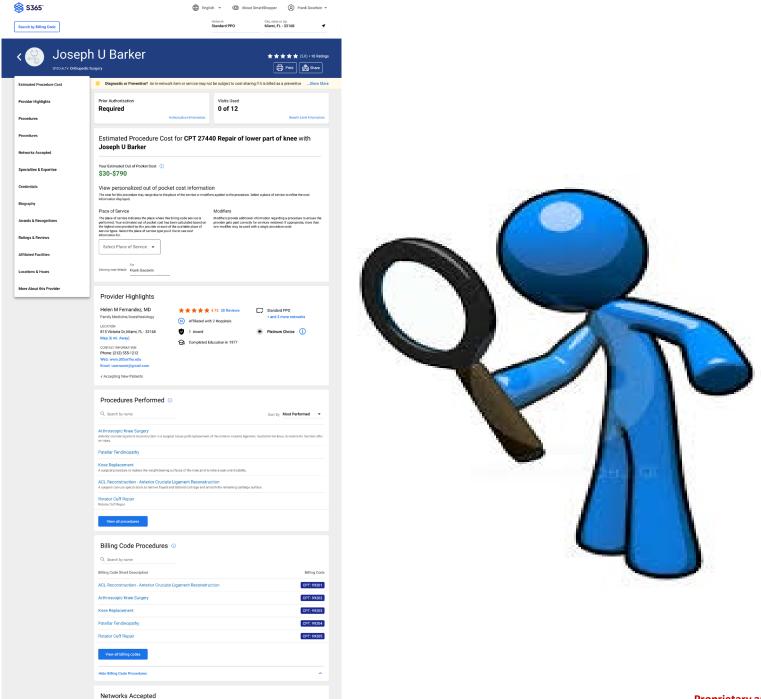
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BlueCard PPO

BlueCard Traditional

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Estimated Procedure Cost **Provider Highlights Procedures Networks Accepted** Specialties & Expertise Credentials **Biography** Awards and Recognition **Ratings and Reviews Affiliated Facilities** Locations and Hours More About this Provider

	n U Barker ^{Surgery}	★ ★ ★ ★ (5.0) • 10 Ratings
Estimated Procedure Cost	Diagnostic or Preventive? An in-network item or service may needed.	ot be subject to cost-sharing if it is billed as a preventiveShow More
Provider Highlights	Prior Authorization Required	Visits Used 0 of 12
Procedures	Authorization Information	Benefit Limit Information
Procedures	Estimated Procedure Cost for CPT 274	40 Repair of lower part of knee with
Networks Accepted	Joseph U Barker	
Specialties & Expertise	Your Estimated Out of Pocket Cost (i)	
Credentials	View personalized out of pocket cost information	on
Biography	The cost for this procedure may range due to the place of the service or modifi information displayed.	
Awards & Recognitions	Place of Service The place of service indicates the place where this billing code service is performed. Your estimated out of pocket cost has been calculated based on the highest rate provided by this provider at each of the available place of service types. Select the place of service type you'd like to see cost	Modifiers Modifiers provide additional information regarding a procedure to ensure the provider gets paid correctly for services rendered. If appropriate, more than one modifier may be used with a single procedure code
Ratings & Reviews	information for.	
Affiliated Facilities	Select Place of Service 💌	
Locations & Hours	For Viewing cost details Frank Goodwin	
More About this Provider	Drovider Highlighte	

Your Estimated Out of Pocket Cost (i)

\$790

View personalized out of pocket cost information

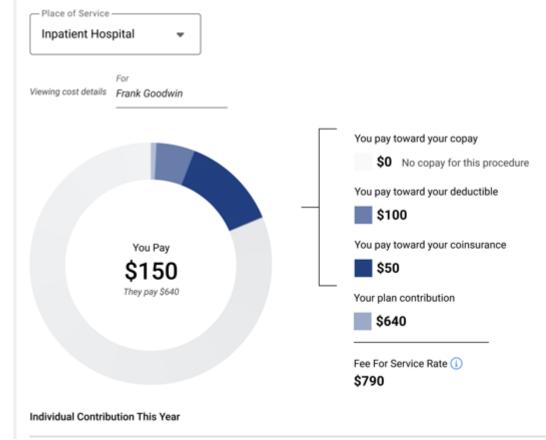
The cost for this procedure may range due to the place of the service or modifiers applied to the procedure. Select a place of service to refine the cost information displayed.

Modifiers

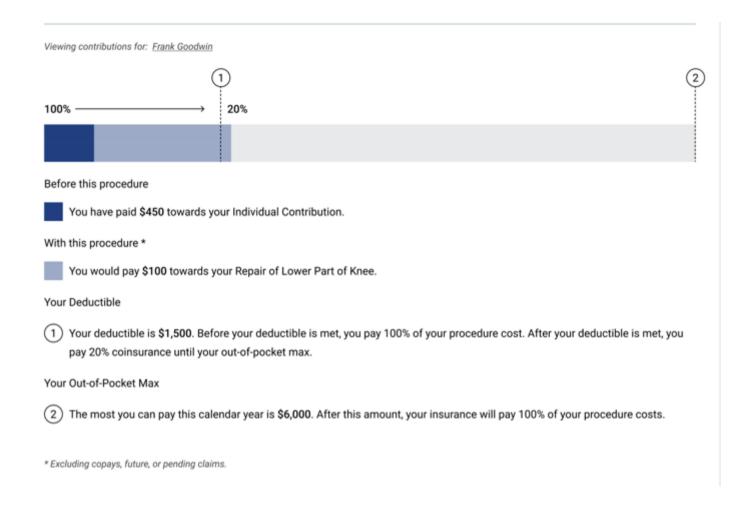
Place of Service

The place of service indicates the place where this billing code service is performed. Your estimated out of pocket cost has been calculated based on the highest rate provided by this provider at each of the available place of service types. Select the place of service type you'd like to see cost information for. Modifiers provide additional information regarding a procedure to ensure the provider gets paid correctly for services rendered. If appropriate, more than one modifier may be used with a single procedure code

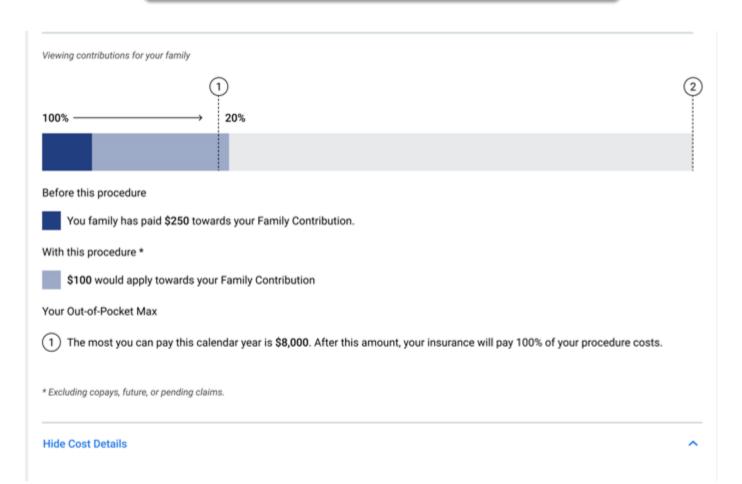
Selecting Inpatient Hospital as Place of Service



Individual Accumulators



Family Accumulators



Estimated Procedure Cost for CPT 27440 Repair of lower part of knee with Joseph U Barker

Your Estimated Out of Pocket Cost (1)

80% of Charge

This provider and your health plan have an agreement to determine your out of pocket cost based on a percentage of what this provider will charge for this billing code. The charge for this billing code has not been provided, therefore your out of pocket cost is not available.

View personalized out of pocket cost information

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For Viewing cost details Frank Goodwin

Modifiers

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19

Coinsurance plan No charge available for the procedure

Individual Contribution This Year Viewing contributions for: Frank Goodwin (2) 1 100% 20% Before this procedure You have paid \$450 towards your Individual Contribution. Your Deductible (1) Your deductible is \$1,500. Before your deductible is met, you pay 100% of your procedure cost. After your deductible is met, you pay 20% coinsurance until your out-of-pocket max. Your Out-of-Pocket Max (2) The most you can pay this calendar year is \$6,000. After this amount, your insurance will pay 100% of your procedure costs. * Excluding copays, future, or pending claims. Family Contribution This Year Viewing contributions for your family (2) 1 100% 20% Before this procedure You family has paid \$250 towards your Family Contribution. Your Out-of-Pocket Max (1) The most you can pay this calendar year is \$8,000. After this amount, your insurance will pay 100% of your procedure costs.

Accumulators Information (no charge example)

Selected Provider

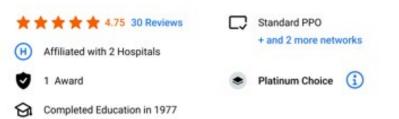
Provider Highlights

Helen M Fernandez, MD

Family Medicine/Anesthesiology

LOCATION 815 Victoria Dr, Miami, FL - 33168 Map (6 mi. Away)

CONTACT INFORMATION Phone: (212) 555-1212 Web: www.305ortho.edu Email: username@gmail.com



✓ Accepting New Patients

Procedures Performed ()

Q Search by name

Sort By Most Performed

Arthroscopic Knee Surgery

Anterior cruciate ligament reconstruction is a surgical tissue graft replacement of the anterior cruciate ligament, located in the knee, to restore its function after an injury.

Patellar Tendinopathy

Knee Replacement

A surgical procedure to replace the weight-bearing surfaces of the knee joint to relieve pain and disability.

ACL Reconstruction - Anterior Cruciate Ligament Reconstruction

A surgeon can use special tools to remove frayed and tattered cartilage and smooth the remaining cartilage surface.

Rotator Cuff Repair

Rotator Cuff Repair

View all procedures

Related Procedures

Disclaimers and Definitions

X

X

Fee For Service

A payment to the provider for each individual service provided to the patient.

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Bundled Rate

A single payment for all the services performed to treat a patient undergoing a specific episode of care. An "episode of care" is the care delivery process for a certain condition or care delivered within a defined period of time.

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Per Diem

A flat rates paid per day. Occasionally, the first few days may be paid at a higher rate than the subsequent days. The full cost of your services will depend on the total number of days you receive care.

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Benefit Rate

The rate that is used to determine your cost share liability by your health plan. This rate may be different than the negotiated rate.

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X

X

Preventive Procedure: Preventive care includes immunizations, lab tests, screenings and other services intended to prevent illness or detect problems before you notice any symptoms. Item or service may not be subject to cost-sharing if it is billed as a preventive service. An estimate of cost-sharing is provided if your plan cannot determine whether the request is for a preventive or non-preventive item or service.

More	Preventive procedure. Preventive care includes immunizations, lab tests, screenings and other services intended to prevent illness or detect problems before you notic Show Mo
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Non-Covered Benefit

Back To Main Search					
	S	earch by Billing Co	ode		
	97813				
Billing Co	ode Not Covered "CP	T 97813 Acupunc	ture with elec	trical stimula	ation
	ode Not Covered "CP minutes"	T 97813 Acupunc	ture with elec	ctrical stimula	ation
initial 15				ctrical stimula	ation,
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initial 15	minutes" s not covered by your health plan. Please r Frec	review your benefits for more inform	lation.		ation

	Search by Billing Code		Network Standard PPO	City, state or zip Miami, FL - 33168	
	No Results for "CPT 97813 Acupuncture with electrical stimulation, initial 15 minutes" There are no results for this billing code in < network name> network in < zipcode> zip code at this time. Please try searching for another billing code (see list of available codes here).				
,		Frequently Asked Questi	ons		
		What is a billing code?		~	
		How can I find the billing code for my procedure?		~	
		How are the results from this search bar different from the home page s	earch bar?	~	
		Can I search all billing codes		~	

Billing Code Not Found

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THANK YOU

For more information, contact

TERRI DICKSON • TERRI.DICKSON@CAREFIRST.COM • 410.998.7390