

Cost Estimator Provider FAQs

What is Cost Estimator?

Cost Estimator is Priority Health's transparency tool that takes provider and facility pricing information combined with member benefit and deductible balances to calculate anticipated out-of-pocket costs. Cost Estimator has been operational since 2014, making us a leader in the health care price transparency space.

What's changing with Cost Estimator on Jan. 1, 2024?

Effective January 1, 2024, we'll begin providing price and cost-sharing information for **all covered procedures and services**, in accordance with the "Transparency in Coverage" legislative requirements (detailed below).

Cost estimates will be available for commercial members and their providers through our Cost Estimator tool in partnership with Healthcare Bluebook. Cost Estimator will still be known by the same name.

Why are we making this change?

On October 29, 2020, the Departments of Health and Human Services (HHS), Treasury and Labor issued the "[transparency in coverage](#)" final rule. The rule imposes new transparency requirements on most group health plans and health insurers in the individual and group markets. The purpose of the requirements is to enable consumers to make informed health care purchasing decisions.

The final rule requires health plans to disclose prices and cost-sharing information for all covered services, including all encounters, procedures, medical tests, supplies, durable medical equipment and fees (including facility fees).

How does the Cost Estimator tool define "Fair Price"?

Cost Estimator aggregates data from multiple claims and providers to estimate a price range and fair price that accurately reflects the market as a whole. Healthcare Bluebook's Fair Price is calculated from an independent nationwide database of medical payment data and customized to your geographic area. It is intended to be the most accurate representation of a reasonable amount that members should expect to pay for a medical service.

What do the green, yellow and red icons with the dollar signs in them mean?

A green icon with a single dollar sign means the service from the provider is at or below Fair Price. A yellow icon with two dollar signs means it's slightly above Fair Price. A red icon with three dollar signs means it's significantly above Fair Price. The line between yellow and red is at roughly 20% above Fair Price.

For those procedures/services that are rewardable, choices with the green icon will qualify members for the reward.

What is PriorityRewards?

PriorityRewards offers a financial reward to individual and commercial group members who use Cost Estimator to research cost and choose to have select procedures performed at a facility with pricing at or below Fair Price (identified by a green icon). Rewards range from \$50–200 per procedure and are paid out with Visa gift cards.

Will my patient earn a reward if I am using the tool on their behalf?

Yes, if you search Cost Estimator on behalf of your patient for one of the select procedures that is eligible for PriorityRewards and the patient receives the service at a facility that is at or below the fair-market rate, your patient will receive a gift card reward.

What about Cost Estimator for Medicare and Medicaid members?

The requirements under the transparency ruling do not apply to Medicare or Medicaid. Due to less variation in Medicare member out-of-pocket costs and low use of the current Cost Estimator, Medicare members will no longer have access to Cost Estimator.

Medicaid members will continue not to have access to the Cost Estimator tool.

Will the costs be calculated differently than before?

Yes, the methodology for calculating a cost estimate is changing. With the new version of the Cost Estimator tool, an estimate will be produced using allowed amounts from aggregated claims data. This may result in prices being estimated differently than they previously were.

How will this change impact me?

The new version of the Cost Estimator tool helps members avoid billing surprises by seeing costs ahead of time. Fewer billing surprises means fewer unhappy patients and more bills paid on time.

As with all procedures and services having cost estimates, you may also receive questions from patients about costs or experience the effects of patients shopping for lower costs. We believe it's a net positive for everyone involved to have informed, empowered patients who feel comfortable asking questions about the care they're receiving.

Can providers still access Cost Estimator?

Yes, you'll continue to be able to access Cost Estimator via prism, where you'll be able to see what your patients see and view their out-of-pocket costs for services. To access the tool, you'll search in prism's Member Inquiry for your patient who is needing a service or procedure. Searches you run on behalf of a member will be considered an "assisted search" and will allow you to see cost estimates based on the member's network, benefit and accumulator information.

Check out this [provider guide](#) for details on accessing Cost Estimator through prism.

Who in my practice can access the tool?

Anyone with a prism account can access the tool.

Why should I use Cost Estimator?

The way people shop for health care continues to change. Consumers want to know what they are paying for, the same as if they were shopping for a new car or appliance. Talking about costs with your patients, using data from Cost Estimator, can allow you to meet them where they are and help them get the care they need at the right price.

Is Priority Health working in partnership with a vendor for the new version of Cost Estimator?

Yes, Priority Health has partnered with Healthcare Bluebook, a trusted organization in this space committed to accuracy, objectivity and excellent user experience.

Who is Healthcare Bluebook and what do they do?

Founded by Dr. Jeffrey Rice, Healthcare Bluebook's mission is to empower patients through data and transparency. Healthcare Bluebook now owns the largest healthcare quality and cost dataset in the United States, which it uses to inform patients about expected costs and quality of medical services by providers in their area.

What facilities are displayed in the Cost Estimator tool?

This tool displays all in- and out-of-network facility locations in the geographic area where the desired services are available to members, including hospitals, ambulatory surgical centers, free standing clinics and specialty and primary care provider (PCP) offices.

How does Cost Estimator benefit my patients?

Cost Estimator shows Priority Health members what in-network facilities charge for services based on their health plan, which reduces surprises and helps them get high quality care from low-cost options. With Cost Estimator, your patients will know their costs and control their out-of-pocket spending, becoming more engaged consumers.

Why aren't our newly renegotiated rates reflected in the estimates from Cost Estimator?

Since estimates are produced from historical claims data, there will be a lag from when your rate has changed to when the new rate is shown in Cost Estimator.

Is there anything in Cost Estimator that my patient can do that I cannot?

No. What you see in Cost Estimator is exactly what the member sees.

Why can't I find estimates for prescription drugs?

Pharmaceuticals are no longer included in Cost Estimator.

Why are there multiple member ID numbers listed for my patient?

Cost Estimator lists any member ID we've ever had for that member. For example, if a member was covered under a parent's plan and then later was covered by their own employer group plan, they would have two member ID numbers listed.

Could I get a basic introduction to using Cost Estimator?

Healthcare Bluebook has a helpful [two-minute video](#) giving a basic walkthrough of how to use the Cost Estimator tool.