

Cost Estimator

View your patient's estimated out-of-pocket costs.

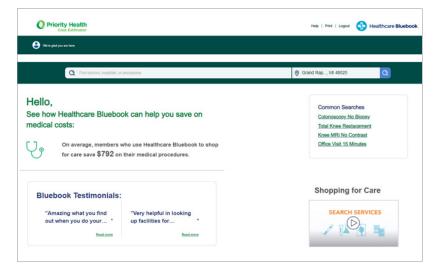
Your patients use Cost Estimator to predict out-of-pocket costs for all covered procedures and services. You can use Cost Estimator on behalf of your patients on prism.

- ✓ The tool combines provider and facility pricing with a member's benefit and deductible balance to calculate their anticipated out-of-pocket costs.
- Estimated out-of-pocket costs are calculated using allowed amounts from aggregated claims data.
- ✓ Only commercial (group and individual) members have access to Cost Estimator.
- Cost Estimator 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.

Have your rates changed lately? 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.

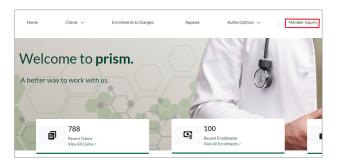
As a valued provider, you can help.

Encourage your patients to research the costs of their care and have your staff use Cost Estimator when they're helping a patient with a referral for tests and procedures.

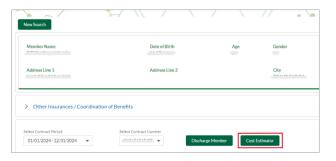


Using Cost Estimator

1 Log into prism and click Member Inquiry in the main menu. From there, search for your patient by contract number or name and birthday.



2 Click the green Cost Estimator button.



3 Search by billing/CPT code or procedure/service name.



The "Fair Price" for the procedure will display, which tells you the reasonable amount your patient should expect to pay for the service. It's calculated from an independent nationwide database of medical payment data and customized to your geographic area.



5 Choose a facility or doctor that offers the service. Providers whose price is at or below the Fair Price will have a green icon with a single dollar sign in it.



6 You'll see the estimated out-of-pocket cost for the procedure or service based on your patient's plan and where they're at in their deductible for the year.

