



Out-of-Network Reimbursement Examples for Small Group Coverage

This summary gives examples of typical costs for out-of-network services under our three most commonly sold health insurance plans in Saratoga County that includes ZIP code 12065. If you want details about your coverage and costs, you can get the complete terms in the policy or plan document at www.cdphp.com, or by calling 1-800-777-2273.

Colonoscopy (Biopsy of Large Bowel Using an Endoscope) CPT Code: 45380 Anesthesia CPT Code: 00810 Pathology CPT Code: 88305					Laminotomy (Partial Removal of Bone with Release of Spinal Cord or Spinal Nerves of 1 Interspace in Lower Spine) CPT Code: 63030 Anesthesia CPT Code: 00630					Breast Reconstruction (Insertion of Tissue Expander in Breast) CPT Code: 19357 Anesthesia CPT Code: 00402				
Sample care costs:					Sample care costs:					Sample care costs:				
	UCR	Plan EPO \$30	Plan HDEPO	Plan Embrace Health		UCR	Plan EPO \$30	Plan HDEPO	Plan Embrace Health		UCR	Plan EPO \$30	Plan HDEPO	Plan Embrace Health
Hospital Services	N/A	N/A	N/A	N/A	Hospital Services	N/A	N/A	N/A	N/A	Hospital Services	N/A	N/A	N/A	N/A
Physician Services	\$600	\$0	\$0	\$0	Physician Services	\$3,795	\$0	\$0	\$0	Physician Services	\$4,155	\$0	\$0	\$0
Anesthesia	\$735	\$0	\$0	\$0	Anesthesia	\$1,400	\$0	\$0	\$0	Anesthesia	\$506	\$0	\$0	\$0
Pathology	\$200	\$0	\$0	\$0						Anesthesia	\$506	\$0	\$0	\$0
Total	\$1,535	\$0	\$0	\$0	Total	\$5,195	\$0	\$0	\$0	Total	\$4,661	\$0	\$0	\$0
Patient pays:					Patient pays:					Patient pays:				
Deductibles	N/A	N/A	N/A	N/A	Deductibles	N/A	N/A	N/A	N/A	Deductibles	N/A	N/A	N/A	N/A
Copays	N/A	N/A	N/A	N/A	Copays	N/A	N/A	N/A	N/A	Copays	N/A	N/A	N/A	N/A
Coinsurance	N/A	N/A	N/A	N/A	Coinsurance	N/A	N/A	N/A	N/A	Coinsurance	N/A	N/A	N/A	N/A
Difference between UCR and what the plan pays	\$1,535	\$1,535	\$1,535	\$1,535	Difference between UCR and what the plan pays	\$5,195	\$5,195	\$5,195	\$5,195	Difference between UCR and what the plan pays	\$4,661	\$4,661	\$4,661	\$4,661
Total	\$1,535	\$1,535	\$1,535	\$1,535	Total	\$5,195	\$5,195	\$5,195	\$5,195	Total	\$4,661	\$4,661	\$4,661	\$4,661

UCR (usual and customary cost) is the amount providers typically charge for a service. This chart uses UCR based on FAIR Health at the 80th percentile for ZIP code 12065. Your provider may bill more than UCR.

Patient pays represents sample cost-sharing. Your cost-sharing may vary.