

# Out-of-network reimbursement examples for group coverage

This summary gives examples of typical costs for out-of-network services under our three most commonly sold health insurance plans in Monroe county that include zip code 12212. If you want details about your coverage and costs, you can get the complete terms in the policy or plan document at [bsneny.com](http://bsneny.com) or by calling 1-800-888-1238.

## Colonoscopy

(Biopsy of large bowel using an endoscope)

CPT code: 45380, Anesthesia CPT code: 00810,  
Pathology CPT code: 88305

### Sample care costs

	UCR*	PPO 8000	Aqua	PPO 822
Hospital services	\$3,422.00	\$1,783.95	\$1,783.95	\$1,783.95
Physician services	\$750.02	\$624.16	\$624.16	\$624.16
Anesthesia	\$454.00	\$225.00	\$225.00	\$225.00
Pathology	\$253.04	\$78.00	\$78.00	\$78.00
<b>Total</b>	<b>\$4,879.06</b>	<b>\$2,711.11</b>	<b>\$2,711.11</b>	<b>\$2,711.11</b>

### Patient pays

Deductibles**	\$0	\$0	\$0
Copays	N/A	N/A	N/A
Coinsurance	50%	20%	50%
Difference between UCR and what the plan pays	\$2,167.95	\$2,167.95	\$2,167.95
<b>Total</b>	<b>\$3,523.51</b>	<b>\$2,710.17</b>	<b>\$3,523.51</b>

## Laminotomy

(Partial removal of bone with release of spinal cord or spinal nerves of one interspace in lower spine)

CPT code: 63030, Anesthesia CPT code: 00630

### Sample care costs

	UCR*	PPO 8000	Aqua	PPO 822
Hospital services	\$13,918.00	\$10,269.44	\$10,269.44	\$10,269.44
Physician services	\$5,658.00	\$1,392.38	\$1,392.38	\$1,392.38
Anesthesia	\$1,449.04	\$360.00	\$360.00	\$360.00
Pathology				
<b>Total</b>	<b>\$21,025.04</b>	<b>\$12,021.82</b>	<b>\$12,021.82</b>	<b>\$12,021.82</b>

### Patient pays

Deductibles**	\$0	\$0	\$0
Copays	N/A	N/A	N/A
Coinsurance	50%	20%	50%
Difference between UCR and what the plan pays	\$9,003.22	\$9,003.22	\$9,003.22
<b>Total</b>	<b>\$15,014.13</b>	<b>\$11,407.58</b>	<b>\$15,014.13</b>

## Breast reduction

(Insertion of tissue expander in breast)

CPT code: 19357, Anesthesia CPT code: 00402

### Sample care costs

	UCR*	PPO 8000	Aqua	PPO 822
Hospital services	\$11,741.00	\$3,400.00	\$3,400.00	\$3,400.00
Physician services	\$3,900.00	\$1,536.15	\$1,536.15	\$1,536.15
Anesthesia	\$1,218.00	\$225.00	\$225.00	\$225.00
Pathology				
<b>Total</b>	<b>\$16,859.00</b>	<b>\$5,161.15</b>	<b>\$5,161.15</b>	<b>\$5,161.15</b>

### Patient pays

Deductibles**	\$0	\$0	\$0
Copays	N/A	N/A	N/A
Coinsurance	50%	20%	50%
Difference between UCR and what the plan pays	\$11,697.85	\$11,697.85	\$11,697.85
<b>Total</b>	<b>\$14,278.43</b>	<b>\$12,730.08</b>	<b>\$14,278.43</b>

#### Note:

Colonoscopy provided out of network is not covered under the Affordable Care Act as a preventative service.

Copayment is shown as \$0 because copayments do not apply to out of network coverage.

These examples do not take into account whether or not the member's coinsurance limit has been met.

Anesthesia rates represent the base rate, additional payment is made for each additional 15 minutes

\* 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 New York county zip code 12212. Your provider may bill more than UCR.

\*\* Assumes deductible has been met.

A division of HealthNow New York Inc., an independent licensee of the BlueCross BlueShield Association.

10058\_5\_15



**BlueShield**  
of Northeastern New York