



## The Average Cost of Care

In order for you to have a better understanding of the costs associated with your health care, we've provided the following cost of care overview. The overview provides some examples of services that are most frequently provided to members and their associated costs. Each dollar amount reflected in this document represents the average cost for services at participating ConnectiCare providers. Actual costs for services will vary by provider and location of service.



As health care costs continue to increase, it's more important than ever that everyone begin to understand what it truly costs so they can become more involved in managing their care.

# Cost of Care

Based on 2008 ConnectiCare Allowed Amount

SERVICES	AVERAGE COST <sup>1</sup>
<b>Office Visits:</b>	
Preventive checkup (includes pediatric & adult)	\$173
Preventive checkup, infant	\$133
Office visit	\$90
Comprehensive office visit	\$176
Routine OB/Gyn visit	\$230
Routine eye exam	\$95
<b>Emergency:</b>	
Emergency room visit	\$437
<b>Inpatient/Hospital:</b>	
Inpatient, newborn nursery stay, per day	\$960
Inpatient admission, per day	\$2,645
Maternity admission, cost per day	\$1,928
Vaginal delivery (excluding maternity admission)	\$2,700
Cesarean delivery (excluding maternity admission)	\$3,000
<b>Laboratory:</b>	
Prostate screening exam (PSA)	\$35
Basic metabolic panel	\$24
General health panel	\$75
Hemoglobin count	\$5
Lipid profile	\$32
Pap smear	\$37
Strep screening (throat culture)	\$23

<sup>1</sup>Average costs based on the in-network provider allowed amount for 2008 ConnectiCare claims data.

Note: These examples are presented as general guidelines for the cost of some common medical services.

## Cost of Care (cont.)

*Based on 2008 ConnectiCare Allowed Amount*

SERVICES	AVERAGE COST <sup>1</sup>
<b>Procedures<sup>2</sup> : (Excludes Facility Charge)</b>	
Arthroscopy knee/shoulder	\$1,027
Breast biopsy	\$494
Cataract repair	\$1,440
Colonoscopy screening	\$1,058
Gall bladder removal	\$1,380
Heart catheterization	\$1,118
Hysterectomy (total)	\$1,204
Inguinal hernia repair	\$1,137
Knee replacement	\$2,245
Tonsillectomy	\$858
<b>Radiology:</b>	
CT Scan (head, brain, neck, or chest)	\$632
CT Scan (spine, pelvis, or abdomen)	\$759
Mammogram screening	\$226
MRI of leg or arm	\$1,119
MRI of head, brain, neck, chest	\$1,387
MRI of spine, pelvis, abdomen	\$1,300
X-Ray chest	\$96
X-Ray extremity	\$67

<sup>1</sup> Average costs based on the in-network provider allowed amount for 2008 claims data.

<sup>2</sup> These amounts represent the average costs of the provider performing the procedure. Additional inpatient/outpatient costs may apply.

Note: These examples are presented as general guidelines for the cost of some common medical services. The following statements apply to the information provided within this document:

1. These examples are based on the average cost for services ConnectiCare members receive from in-plan providers. The cost of services from out-of-area providers may vary.
2. The costs presented are intended as an estimate. Actual costs may vary.
3. The dollar amounts in this document represent the average cost for some specified services. Facility and professional service fees vary from provider to provider.
4. Unusually high or low cost samples are not included.
5. Actual member costs will depend upon the services received, plan benefits, negotiated provider rates and, in some cases, billed charges.
6. This information should not replace the advice or instruction given to you by your health care provider. Be sure to speak to your doctor to explore all treatment options.

This overview is meant only as a general guide to providing an understanding of health care costs. The dollar amounts presented are based on averages and actual costs may vary.

**For more information about your ConnectiCare health plan visit our website at [www.connecticare.com](http://www.connecticare.com), or call Member Services at 1-800-251-7722.**