SCENARIOS
CONSUMER DRIVEN OPTION



APWU HEALTH PLAN

TOGETHER.
BETTER HEALTH.®

33rd Annual Open Season Seminar

Scenario CDO: Preventive Care

- Member goes for routine colonoscopy
- Member uses in-network providers
- Diagnosis on claim is routine
- Claims include surgery; labs; anesthesiologist

All three claims are paid at 100%

Scenario CDO: Preventive Care

- Member goes for routine colonoscopy
- Member uses in-network providers
- Diagnosis on surgery and anesthesiologist claim is routine
- Diagnosis on in-network lab claim is non-routine (i.e. bleeding)

- Surgery and anesthesia claim are paid at 100%
- Lab claim will pay at 85%; member will be billed for 15% of the Plan allowance unless there are funds available in the PCA to cover the coinsurance costs

Scenario CDO: Anesthesia

- Member uses in-network hospital and surgeon
- Anesthesiologist is out-of-network

- Surgeon, hospital and anesthesia claim are paid in-network at 85%; member pays 15% of plan allowance
- Anesthesia may balance bill because they are not contracted providers
- Most anesthesiologist are out-of-network
- Bill is $1,000; HP allowance is $600; HP pays $510; anesthesiologist can balance bill member for the $400 difference between billed charge and the allowable, plus the $90 (coinsurance) for a total of $490