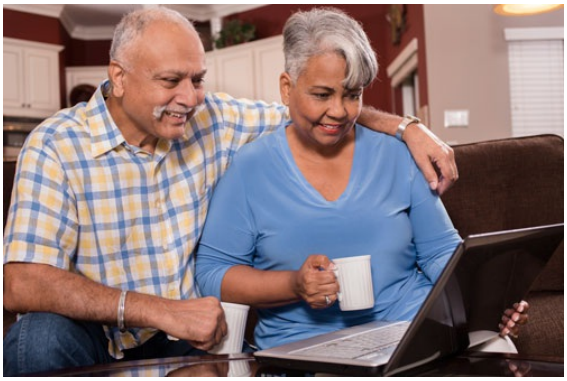
Medical Imaging Costs

The Cost of Your Imaging Study



Diagnostic imaging tests – such as an ultrasound, x-ray, MRI, or CT scan – are requested by your doctor to help explain your symptoms or abnormal lab work.

How much you will pay for an imaging study depends on several factors, including:

- The type of imaging exam you need
- Where you get your imaging
- Your health insurance

The Medical Imaging Provider

Medical imaging providers perform imaging studies in a hospital, a hospital-affiliated facility (separate from the hospital), or free-standing imaging centers. Prices are set by these providers to cover costs for:

- Facility and imaging equipment
- Technical and support staff
- Physician (often a radiologist) time and expertise to:
  - Plan and interpret the studies
  - Prepare a permanent written report
  - Share the study results with your referring physician/provider.

Providers often charge different prices for the same imaging study. However, depending upon your insurance coverage, the amount that you will pay for an imaging exam may have little relationship to the price set by the provider. The amount charged to you, the patient, for an imaging exam depends on your insurance company and coverage. You may be charged a fixed fee, negotiated by the company and provider, or your insurance plan may require you to pay a percentage of charges over and above your premium, co-pay, and any deductible.

The various possibilities are complex and different for everyone. Contact your insurance provider to understand how your charges will be determined or, if you do not have insurance, to discuss it with the facility where you will be having your imaging done.

When deciding where to have your imaging, we recommend you consider the overall value of the exam. This reflects both cost and the quality of the imaging study, interpretation by a physician/radiologist, and the service provided to you. The lowest price might not necessarily bring you the most value; you should consider your priorities for convenience, quality and overall cost.

Estimating Your Costs

If you do not have insurance, you should speak with imaging providers in advance to inquire about:

- Discounts
- Payment plans

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- Assistance programs

If you have health insurance, the type of insurance and your plan's requirements will affect how much you will pay toward the cost of your medical imaging study.

Provider Choice and Network Coverage

Your plan may require you to choose from a specific, or preferred, network of imaging centers for coverage. If your insurance plan has a preferred provider network, you will be required to choose an imaging center within that network to have your imaging study covered by insurance. If you choose a provider outside the network, you may pay a larger portion or the entire cost of the imaging study. Even among the preferred providers in your insurance plan's network, the cost of the imaging exam may vary for the exact same test. You can use your insurer's list of preferred providers to compare the costs of having your imaging study performed at different centers.

Your Plan's Requirements

The requirements of your insurance plan may also affect your cost for a medical imaging study. These include:

- **Your premium.** This is typically paid monthly. When supported through an employer, the premium is typically split between the employee and the employer and deducted from the employee's paycheck.
- **Your deductible.** If you have an annual deductible that you have not already met, you will be responsible for the total cost of your imaging study (up to the deductible amount for your insurance plan).
- **Co-pays or co-insurance fees.** In addition to a deductible, your plan may also have co-pays or co-insurance fees associated with imaging tests.
- **Pre-authorization.** Some insurance plans require pre-authorization before you get more complex imaging studies like PET scans, CT or MRI. To ensure you receive coverage, you should determine whether you need pre-authorization. Typically, your doctor's office or the imaging center will obtain pre-authorization for you from the insurance company.

To estimate your costs for a specific medical imaging study, you should ask your insurance provider if:

- Pre-authorization is required and if your medical imaging study is covered.
- What your out of pocket cost of the study will be taking into account your co-pay and any deductible you have.
- If you have options for the imaging center you use and what the costs will be for those various options.

Your Bill

Depending on the healthcare provider, you may receive separate bills for:

- The technical/facility charge, including the costs associated with the medical imaging equipment, facility and the radiologic technologists who operate the imaging equipment.
- The professional charge, including the costs to the radiologist or interpreting doctor who will plan, interpret and generate a report for the imaging exam.

Hospital-owned imaging services issue separate bills for technical and professional charges, which may require two co-payments.

Freestanding imaging centers not owned by hospitals typically issue a single bill that lists both technical and professional services and requires just one co-pay.

Medicare

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Medicare Part B covers diagnostic medical imaging tests when ordered by your doctor or healthcare provider. Medicare also covers some medical imaging screening tests, such as:

- Abdominal aortic aneurysm screening
- Bone density measurements
- Lung cancer screening
- Screening mammography

Once you have paid your Part B deductible, you will pay 20 percent of the Medicare-approved amount for covered diagnostic imaging tests performed in a doctor's office or non-hospital imaging facility. For medical imaging tests performed in a hospital setting, you will be responsible for a co-payment.

Medicare has specific guidelines for the types of diagnostic medical imaging studies it covers. It is important to ask questions to understand in advance whether a test ordered by your physician will be covered.

To determine the cost of a specific medical imaging study, talk to your doctor or healthcare provider. The cost to you will depend on:

- Any other insurance you have in addition to Medicare.
- How much your doctor charges for the test.
- Whether your doctor accepts Medicare.
- Where the imaging exam is performed.

Medicare patients can find more cost information on the Medicare website at:
https://www.medicare.gov/ (https://www.medicare.gov/) .

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