

FH[®] Total Treatment Cost

If you have an ongoing, or chronic, illness, such as type 2 diabetes, or a complicated procedure, such as knee replacement, your treatment will usually require many different medical services. For instance, if you have your knee replaced, you'll need anesthesia, lab tests, imaging and other services.

The total costs of all the services you receive for long-term conditions or complicated procedures are estimated on this site as the FH Total Treatment Cost. For complicated procedures, the period for the total costs runs from the time your symptoms start until all your treatments end. For chronic conditions, the total costs are those of the typical services for the condition over the course of one year.

The costs of the various services you need can add up, so it's a good idea to get a total cost estimate for all the services.

Estimating Total Treatment Costs

You can use the [FAIR Health Medical Cost Lookup Tool](#) to find out how much you might pay for your total treatment costs in your zip code. If you have a chronic condition, you'll find out how much a year's worth of common services for that condition might run.

First, enter your insurance status and location in the tool, then click "FH[®] Total Treatment Cost." You can then enter a procedure code or keyword, or you can select one of the following procedures and conditions:

- ADHD and hyperkinetic syndrome;
- Asthma;
- Cataract surgery;
- Colonoscopy;
- C-section;
- Hip replacement;
- Hip revision;
- Hyperlipidemia;
- Hypertensive diseases;
- Knee arthroscopy;
- Knee replacement;
- Knee revision;
- Lumbar fusion;
- Lumbar lumbosacral laminectomy;
- Rheumatoid arthritis;
- Type 1 diabetes;
- Type 2 diabetes; and
- Vaginal delivery.

Out-of-Network/Uninsured and In-Network Costs

The results page for the procedure or condition you choose will show you two main results: out-of-network/uninsured and in-network prices.

The **out-of-network/uninsured price** is an estimate of how much you'll have to pay if you don't have health insurance. It's also what you may have to pay—or a portion of what you may have to pay—if you have insurance but the doctors, hospitals or other providers caring for you don't take your insurance. Some plans will pay something for such care, which is called "out-of-network," but others don't. Check your plan documents or call your member services representative for the out-of-network benefits, if any, associated with your plan.

Out-of-network providers don't have a contracted rate with your health plan. So, you'll probably pay more if you go to them. There might be times, though, when you prefer to go to an out-of-network provider. If you or a loved one is facing a serious illness, you may want more choices than you can get in your network. See [When Out-of-Network Care Can Be Covered in Network](#). You could even go out of network by accident. That can happen if you get care from an out-of-network provider at an in-network facility. See [Out-of-Network Docs at In-Network Facilities](#).

The **in-network price** is an estimate of what the total treatment costs will be if you have health insurance. That includes both your insurer's share of the cost and your share. In-network providers are doctors, hospitals and other providers who have agreed to accept your insurance plan's contracted rate for their services.

Your share of the cost is determined by your health plan's terms and conditions. It may be in the form of a copay, coinsurance or deductible. Copays are a set amount for a service, like \$20 for a doctor's visit. Coinsurance is a percentage of the cost, such as 15 percent of the in-network price. A deductible is a set amount you have to pay each year before your plan starts paying for your care.

What Services Are Included in FH Total Treatment Cost?

The results page for each condition or procedure will also show you the services that make up your FH Total Treatment Cost. These services are separated into categories, such as anesthesia, doctor's visits, lab tests and surgery.

How Can I Use My FH Total Treatment Cost Estimate?

If you have health insurance, getting a total treatment cost estimate will help you to budget and plan for the costs. It's especially important to get an estimate if you have a high-deductible health plan. That's a plan that won't pay for your care until you've already paid a high amount. Even if you're using in-network doctors, you'll want to know the in-network costs, because you'll have to pay the costs in full until you pay off the deductible.

If you are considering using out-of-network services, an estimate will help you understand the difference between your in-network and out-of-network share of costs. If you decide to go out of network, the estimate will help you to negotiate a price with the out-of-network providers. If you're uninsured, having an estimate will help you to negotiate a price with any healthcare providers for their services and also allow you to understand the potential benefits of coverage.

Why the Estimate Might Be Different from the Amount Billed

Keep in mind that the actual amount you may be asked to pay might be different from the estimate you obtained with the Cost Lookup Tool. This can happen for a number of reasons. We base our estimates on care for patients who don't have any complications or additional risk factors. If you have any underlying conditions or other risk factors, or if complications appear during your course of treatment, you may have to pay more than the estimate.

There can be other reasons for differences, too. For instance, different providers may choose to treat your condition in different ways. Individual charges for the services and procedures that they perform can vary as well.

Your Action Plan: Estimating Total Treatment Costs

- Chronic conditions, such as type 2 diabetes, and complicated procedures, like knee replacement, require multiple services. Together, these services can end up costing you a lot of money.
- Use the [FAIR Health Medical Cost Lookup Tool](#) to get an estimate of these costs.
- If you have health insurance, you can use the estimate to budget for expenses. It's especially important to get an estimate if you have a high-deductible health plan, because you'll have to pay the full costs of care until you meet the deductible.
- If you're uninsured or plan to use out-of-network providers, you can use the estimate to help you negotiate fees with your providers.