Estimating the Cost of a Procedure with Health Coverage
Texas Department of Insurance

These questions help you estimate a procedure's cost. Even with planning, you could still find yourself with a surprise bill. This is called balance billing. In some cases, you can seek mediation for balance billing. Read "Handling Surprise Bills" (texashealthoptions.com/cp/handlesurpbills.html) for more information.

Questions to Ask Your Doctor
What is the name of the procedure you're recommending?
Procedure name:
Do I need a referral?
☐ **No** ☐ **Yes**
Who do you recommend for the procedure? Do you recommend anyone else in case he or she isn't in my network?
Recommended providers:
Where do you recommend I get the procedure? Do you recommend anywhere else in case it's not in my network?
Recommended locations:
Will I have other providers before, during, or after the procedure, such as a radiologist, pathologist, anesthesiologist, or physical therapist? What are the names of all the providers that will take part in my care? Do you recommend anyone else in case they're not in my network?
Other providers:
Will I need other services such as lab tests, X-rays, or CT scans?
Other services:
Will I need prescription drugs before or after the procedure? Do I need brand name drugs or can I get generics?
☐ **Brand name** ☐ **Generic | Names of drugs:**
Are there common complications with this procedure? What kinds of providers and services would I need then? How much do they cost?
Possible complications and their costs:
What are the medical billing codes for the services I will receive?
Billing codes:
Are there less expensive alternatives? What are the pros and cons?
Cost notes:

Questions to Ask Your Health Plan
Do I need a referral for this procedure or any other services I need?
☐ **No** ☐ **Yes**
If any of the providers my doctor recommended are not in my network, are there any in-network providers to perform the services I need?
Names of out-of-network providers and in-network alternatives:
Is the facility my doctor recommended in my network? If not, can you help me find a high quality in-network facility that will work for my doctor?
Names of out-of-network facilities and in-network alternatives:
Will an out-of-network provider, such as an anesthesiologist, provide me services at this facility? Are there any in-network providers at the facility that can perform the services I need?
Out-of-network providers at the facility, type of specialty and in-network alternatives:
How much will the plan pay for services provided by an out-of-network provider or facility? How does the plan determine the amount it will pay a provider that isn't in the network?
Out-of-network cost:
Does my plan cover **all** the services I need? Which services aren't covered? Will my plan cover the services I would need if I experience complications?
Services and complications not covered by the plan:
Have I reached or am I close to reaching any annual limits?
Limits and exclusions:
Does my plan cover the drugs I need? Which drugs aren't covered? How much will I pay out of pocket for the drugs I will need?
Out-of-pocket cost for needed drugs:
How close am I to reaching my deductible? How much will this procedure cost me out of pocket? Are there any ways to lower my cost? How far am I from reaching my out-of-pocket maximum?
Out-of-pocket cost:

Questions to Ask Out-of-Network Providers Who Will Be Involved in Your Care
(Preferred Provider Organization Only) Will my insurance company's payment and my coinsurance cover this out-of-network visit or service, or am I likely to be balance billed for more? Are you willing to accept this as full payment for the services? If not, what would I need to pay out of pocket? Are there any ways to lower these costs?
Cost:
Can I negotiate a lower price for services not covered by my plan? Would you be willing to lower my out-of-pocket costs if I paid a certain amount up front or paid in full? Do you reduce your charges for those with less ability to pay?
Notes: