

FAQS:

Provider search and cost transparency



A UnitedHealthcare Company

UMR is adding our online cost transparency capabilities to the UnitedHealth Network provider directories available to members on **umr.com**.

This enhancement to members' online experience will go live Friday, Dec. 21. At that time, our current UnitedHealth Network cost transparency tool, myHealthcare Cost Estimator (myHCE), will be turned off and we will move forward with a single, unified provider search and cost transparency tool.

Here are answers to frequently asked questions about this change:

How will this change affect members' online experience?

Moving forward, members will have a single, integrated tool in which they can search for a UnitedHealth Network provider and find cost and quality information.

Adding cost transparency functionality to the searchable UHC provider database on **umr.com** allows users to simultaneously compare quality and cost when choosing a provider or facility.

The enhanced search capabilities also allow users to view patient experience ratings provided by Healthgrades® and UnitedHealth Premium® quality information about health care providers, with ratings drawing on national industry, evidence-based and medical society standards.

How will users access cost transparency information?

Following the Dec. 21 change over, member users can access cost transparency information in two ways.

1. They can log into their member account on **umr.com** and select "Find a provider" from the myMenu to access their UnitedHealth network directory as they have previously and see the cost transparency enhancements within the provider search.
2. They can log into their member account on **umr.com** and select the "Health Cost Estimator" tile with the blue shopping cart icon. This alternate path will direct them to the same combined provider search and cost transparency tool.

What are the benefits of integrating provider search and transparency?

Combining these two resources will generate greater member engagement and cost savings to patients and their plans, as users are more likely to compare cost data and make more cost-conscious decisions when selecting a provider or researching treatments and services.

Is myHealthcare Cost Estimator going away?

The standalone myHealthcare Cost Estimator (myHCE) will be discontinued, effective Dec. 21.

The “Health cost estimator” shortcut tile will remain on **umr.com** moving forward and will direct users to the combined provider search and cost transparency tool as an optional path.

Are Premium designated providers displayed in the combined tool?

Yes. Premium designations will be displayed using the two blue hearts identifying those providers that have met both quality and cost criteria. These quality ratings draw from national industry, evidence-based and medical society standards. For customers with Premium Designation tiered plans, users will see a Tier 1 blue dot identifying Tier 1 physicians.

What are the Healthgrades® patient experience ratings?

Healthgrades is an independent company that allows patients to rate and provide feedback about their satisfaction with health care providers after their appointment and makes this data available to the public as a rating of 1 to 5 stars.

How is cost information displayed in the combined provider search and transparency tool?

The online UnitedHealth Network provider listings show geographic averages and provider cost banding (below, meets, or above average cost) within the provider search results. Additional provider cost information is available by selecting “View All Services & Costs” from the search results. This includes the providers’ contracted rates for services, along with out-of-pocket cost

estimates based on the user’s benefit plan and paid to date amounts (accumulators).

Members can also find estimates for the cost of a wide variety of procedures and treatments by typing the procedure or treatment name or keywords they’d like to estimate. Or they can choose treatments and procedures from a list generated based on their search selections.

How is the cost estimate determined?

Estimates for both physician and facility costs are determined using actual fee schedules/contracted rates for each provider. Provider rates are updated quarterly. The final member out-of-pocket is personalized to show what individual users would pay based on their benefit plan and how much they may have remaining toward their deductible and/or out-of-pocket maximum amounts. The user’s benefit plan details and paid/remaining amounts are integrated in the tool on a weekly basis, resulting in near-real time estimation.

How do users compare cost estimates to the geographic average?

The combined provider search and transparency tool uses color-coded dollar amounts to indicate how a particular provider or facility’s cost compares to the local average:

- Green: “below average cost” means the provider’s estimate is in the lowest 25 percent
- Gray: “meets average cost” means the provider’s estimate is in the middle 50 percent
- Red: “above average cost” means the provider’s estimate is in the highest 25 percent