

PARA Price Transparency Tool

BACKGROUND:

Price transparency continues to be an important topic in the healthcare industry. HealthCare professionals are working to understand how price transparency can improve Patient satisfaction and reduce hospital bad debt. The benefits of providing cost estimates prior to schedule services include:

- **Providing price transparency**
- **Provide estimates prior to service, avoiding unexpected financial liability**
- **Reduce Patient dissatisfaction directed at the provider**
- **Increase self-pay collections while decreasing bad debt**

Today's Patients are becoming informed consumers through a variety of channels including media exposés on healthcare costs and the continued progress of the Affordable Care Act. Patients require a clear picture of their financial obligation for services. Informing Patients of the cost of services is in the best interest of the facility.

Although generating a quote for services involves a variety of contractual discounts and health insurance plan information, some information can be readily available to the Patient with minimal employee intervention.

The **PARA Price Transparency Tool** allows the Patient to determine their cost from a provider-based web portal.

Out-Of-Pocket Estimator: Welcome 1

Dear Consumer:

Thank you for taking an interest in your health care costs.

_____ Hospital is providing this service to assist you in determining your out of pocket costs prior to electing to move forward with your procedures.

You can download the complete price list for all services in either Excel ([click this link](#)) or a comma separated value CSV ([click this link](#)).

Additionally, we can assist you in pricing services you require, with a simple decision tree process ([click this link](#)).

You will also have the option to check your insurance coverage (i.e. determine eligibility).

To calculate your out of pocket cost ([click this link](#)).

To connect with our scheduling department, please call (777) 123-4567 or [click this link](#).

If you would like to view our facility's Quality Scores, please [click this link](#).

Additionally, if at any time you are unable to afford required health care procedures our Financial Assistance Staff is available at (999) 123-4567 or [click this link](#).

If you have any questions, please do not hesitate to call upon us at (888) 123-4567 or [click this link](#).

To view the standard charges of procedures for hospitals in California, please [click this link](#) to be directed to the Office of Statewide Health Planning and Development (OSHDP) website.

Thank you.

[CHAT](#) [ASSISTANCE](#)

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PARA Price Transparency Tool

The web-based tool includes detailed language, further information, and comprehensive support to better inform the user with regards to estimates they wish to obtain.

Out-Of-Pocket Estimator: Disclaimer 2

The estimate cannot be relied on as the final, set cost for services you may receive as actual expenses can and will vary from patient to patient depending upon your physician's treatment choices and your particular health care needs.

The estimated patient cost is based on the information entered. If you have requested an estimate for a surgical procedure, **this estimate does not include:**

- Pre-Procedure Office Visits
- Post-Procedure Office Visits
- Diagnostic Testing
- Physician Services

If you have met all or part of your deductible or maximum out-of-pocket expenses, the actual amount you owe may be different. Note: The estimated cost is not a guarantee of insurance coverage. Please check with your insurance company if you need help understanding your benefits for the service chosen.

I HAVE READ AND UNDERSTAND THE ABOVE LIMITATIONS AND I FULLY UNDERSTAND.

THIS IS ONLY AN ESTIMATE. MY ACTUAL CHARGES MAY BE DIFFERENT (HIGHER OR LOWER) THAN THE ESTIMATE.

In compliance with the CMS Price Transparency rules taking effect on 01/01/2019 ([CMS FAQ Price Transparency](#)), please click the link(s) below to view a full list of Hospital charges:

[Download Hospital Charge Description Master/Price Listing - Excel Format](#)
[Download Hospital Charge Description Master/Price Listing - CSV Format](#)

[RETURN TO WELCOME](#) [I UNDERSTAND AND AGREE](#)

[PRINT DISCLAIMER](#)

[CHAT](#) [ASSISTANCE](#)

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The **PARA Price Transparency Tool** is completely customizable with the ability to identically mirror the look of the facility website, personalize informative language, and identify the services to be estimated.

THE PARA SOLUTION:

The **PARA Price Transparency Tool** provides facilities with a system for generating Patient quotes of the top procedures for the facility.

Details of this project including purpose, method, timeline, and deliverables are as follows. If you would like more information, please contact your Account Executive.

PURPOSE:

The purpose of the **PARA Price Transparency Tool** is to create a web-based system that allows the Patient to determine their share of cost for healthcare services.

METHOD:

PARA will review your current website design structure to create a Patient cost estimator tool mirroring the look and structure of your current website. The **PARA Price Transparency Tool** provides the Patient an easy to use decision tree to select the required services.

PARA Price Transparency Tool

PARA will provide your facility a suggested list of services based on trends of the most recent Medicare Data available including:

- **All Inpatient Medicare DRG Data**
- **Top 25 ICD-10 Diagnoses for ED Level Charges**
- **New and Established Patient Level Samples**
- **Mammography Charges**
- **Top 50 EKG/Stress Test Charges**
- **Top 25 Laboratory Procedures**
- **Top 25 Radiology Procedures**
- **Other Service Lines (as requested by client)**

PARA will construct custom procedure categories and subcategories based on the facility-approved list of services and will develop and provide the implementation instructions for facility and designated Employers for immediate deployment. Initial and ongoing training and support for the duration of the agreement for Employers and facility are provided.

Out-Of-Pocket Estimator: Obtain an estimate on our most common services 3

Choose Your Service Category

Outpatient Services:

- ☐ Ambulatory Surgical
- ☐ Cardiac Rehab
- ☐ Cardiology Echocardiography
- ☐ Clinic by Diagnosis
- ☐ Clinic by Service Level
- ☐ Clinic/Outpatient
- ☐ Clinic/Outpatient Misc Diagnostic/Therapeutic
- ☐ Computed Tomography
- ☐ Diabetes & Medical Nutrition
- ☐ Emergency
- ☐ IV / Chemo Therapy
- ☐ Laboratory

Inpatient Services:

- ☐ Inpatient
- ☐ Magnetic Resonance Imaging
- ☐ Nuclear Medicine
- ☐ Occupational Therapy
- ☐ Pathology
- ☐ Physical Therapy
- ☐ Preventive Medicine
- ☐ Pulmonary Function/Respiratory Therapy
- ☐ Sleep
- ☐ Speech Therapy
- ☐ Ultrasound
- ☐ Womens Services

Review Your Selected Services

No Services Selected

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PARA Price Transparency Tool

DELIVERABLES:

PARA will provide your facility a web-based control panel to allow updates and changes to the estimator on an ongoing basis (i.e. update prices, change benefit plans, add services, etc.)

PARA will provide an optional insurance and benefit plan allowing any Patient to enter their own benefit information to calculate their cost.

PARA will provide Medicare and Medicaid terms (where applicable) allowing Patients to calculate their cost, and will incorporate the Hospital's self-pay discount to allow self-pay Patients to calculate their cost.

PARA will provide an option for the price estimate to be printed and will provide links and referrals to financial counseling, charity care policies, quality ratings, Patient satisfaction scores, and other information deemed pertinent by the Hospital.

PARA will provide an internal web-based tool to the Provider to review all estimates created by Patients. The **PARA Price Transparency Tool** statistics are tracked in the **PARA Data Editor (PDE)** according to general use, visits by date, top estimates by service, estimates by insurance, and file downloads.

Select

Charge Quote

Charge Process

Claim/RA

Contracts

Pricing Data

Pricing

Rx/Supplies

Filters

CDM

Calculator

Advisor

Admin

CMS

Tasks

PARA

My Profile

Add User

Access

Workflow

Passwords

QAP Quotes

QAP Admin

Contacts

Hospital

Rx/Supply

Pricing

Projects

Docs

Widget Admin

Dept Map

FTL

Widget Traffic/Usage Stats

Service Selection Admin

Please find your available Widget Traffic and Usage statistics and related metrics below.

Export All Stats To Excel

Select alternate widget for review...

General Usage

Description	Visits
Total Visits	25907
Total Unique Visits	10235
Total Estimates Generated	4219
Total Visits With Estimates Generated	2129
Total Visits Without Estimates Generated	23778

Visits by Dates

Description	Visits
Total Visits This Week (to date)	21
Total Visits For (to date): August - 2019	319
Total Visits For (to date): July - 2019	62
Total Visits For (to date): June - 2019	117
Total Visits For (to date): May - 2019	87
Total Visits For (to date): April - 2019	54
Total Visits For (to date): March - 2019	141
Total Visits For (to date): February - 2019	113
Total Visits For (to date): January - 2019	86
Total Visits For (to date): December - 2018	694
Total Visits For (to date): November - 2018	813
Total Visits For (to date): October - 2018	1190
Total Visits For (to date): September - 2018	222
Total Visits For (to date): August - 2018	706
Total Visits For (to date): July - 2018	824
Total Visits For (to date): June - 2018	710

Top 10 Estimates By Service

Description	Selections
Adenoidectomy	32
Arthroplasty Knee	17
Arthroplasty Hip	16
Acute Upper Respiratory Infection	13
Allergy patch tests	13
Appendectomy	13
Abdominal Pain	8
Avg, Level 1 Diagnostic and Screening Ultrasound	4
Acute Pharyngitis (Throat infection)	3
Arthroscopy Ankle	3

Estimates - Insurance Selections

Description	Selections
All other insurance	1917
No Insurance	1832
Medicare	256
Traditional Medicare	214

File Downloads

File	File Type	Selections
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Refresh Page

PARA Price Transparency Tool

WALKTHROUGH:

The user is welcomed with the options to download the complete price list, to connect with the facility, or to calculate their out-of-pocket cost by selecting the associated links.

Out-Of-Pocket Estimator: Welcome1

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You will also have the option to check your insurance coverage (i.e. determine eligibility).

To calculate your out of pocket cost ([click this link](#)).

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If you would like to view our facility's Quality Scores, please [click this link](#).

Additionally, if at any time you are unable to afford required health care procedures our Financial Assistance Staff is available at (999) 123-4567 or [click this link](#).

If you have any questions, please do not hesitate to call upon us at (888) 123-4567 or [click this link](#).

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Thank you.

[CHAT](#) [ASSISTANCE](#)

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Upon navigating to the decision tree process, the user can download the complete price list for all services, print the disclaimer for their records, and navigate back to the Welcome page.

Out-Of-Pocket Estimator: Disclaimer2

The estimate cannot be relied on as the final, set cost for services you may receive as actual expenses can and will vary from patient to patient depending upon your physician's treatment choices and your particular health care needs.

The estimated patient cost is based on the information entered. If you have requested an estimate for a surgical procedure, **this estimate does not include:**

- Pre-Procedure Office Visits
- Post-Procedure Office Visits
- Diagnostic Testing
- Physician Services

If you have met all or part of your deductible or maximum out-of-pocket expenses, the actual amount you owe may be different. **Note:** The estimated cost is not a guarantee of insurance coverage. Please check with your insurance company if you need help understanding your benefits for the service chosen.

I HAVE READ AND UNDERSTAND THE ABOVE LIMITATIONS AND I FULLY UNDERSTAND.

THIS IS ONLY AN ESTIMATE. MY ACTUAL CHARGES MAY BE DIFFERENT (HIGHER OR LOWER) THAN THE ESTIMATE.

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PARA Price Transparency Tool

Once the user has agreed to the preliminary **PARA Price Transparency Tool** Disclaimer, the user continues to choose an initial selection of services by navigating the customized decision tree.

Selecting an individual service is accomplished by (1) identifying the associated “Service Category” and then (2) clicking on the service to be added.

Out-Of-Pocket Estimator: Obtain an estimate on our most common services 3

Choose Your Service Category

Outpatient Services:

- ☐ Ambulatory Surgical ← 1
- ☐ Cardiac Rehab
- ☐ Cardiology Echocardiography
- ☐ Clinic by Diagnosis
- ☐ Clinic by Service Level
- ☐ Clinic/Outpatient
- ☐ Clinic/Outpatient Misc Diagnostic/Therapeutic
- ☐ Computed Tomography
- ☐ Diabetes & Medical Nutrition
- ☐ Emergency
- ☐ IV / Chemo Therapy
- ☐ Laboratory

Inpatient Services:

- ☐ Inpatient
- ☐ Magnetic Resonance Imaging
- ☐ Nuclear Medicine
- ☐ Occupational Therapy
- ☐ Pathology
- ☐ Physical Therapy
- ☐ Preventive Medicine
- ☐ Pulmonary Function/Respiratory Therapy
- ☐ Sleep
- ☐ Speech Therapy
- ☐ Ultrasound
- ☐ Womens Services

Review Your Selected Services

No Services Selected

[VIEW SELECTED SERVICE\(S\)](#)

[CHAT](#) [ASSISTANCE](#)

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Out-Of-Pocket Estimator: Obtain an estimate on our most common services 3

Choose Your Service Category

Outpatient Services:

- ☐ Ambulatory
- ☐ Cardiac Rehab
- ☐ Cardiology
- ☐ Clinic by Diagnosis
- ☐ Clinic by Service Level
- ☐ Clinic/Outpatient
- ☐ Clinic/Outpatient Misc Diagnostic/Therapeutic
- ☐ Computed Tomography
- ☐ Diabetes & Medical Nutrition
- ☐ Emergency
- ☐ IV / Chemo Therapy
- ☐ Laboratory

Inpatient Services:

- ☐ Inpatient

Choose a Specific Service

Choose a Specific Service

- » COLONOSCOPY, FLEXIBLE; DIAGNOSTIC, INCLUDING COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING, WHEN PERFORMED (SEPARATE PROCEDURE) ← 2
- » COLONOSCOPY, FLEXIBLE; WITH BIOPSY, SINGLE OR MULTIPLE
- » CONJUNCTIVOPLASTY; WITH BUCCAL MUCOUS MEMBRANE GRAFT (INCLUDES OBTAINING GRAFT)
- » CYSTOURETHROSCOPY, WITH INSERTION OF INDWELLING URETERAL STENT (EG, GIBBONS OR DOUBLE-J TYPE)
- » DIAGNOSTIC BONE MARROW; BIOPSY(IES)
- » DIAGNOSTIC BONE MARROW; BIOPSY(IES) AND ASPIRATION(S)
- » ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; DIAGNOSTIC, INCLUDING COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING, WHEN PERFORMED (SEPARATE PROCEDURE)
- » ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH BIOPSY, SINGLE OR MULTIPLE
- » EXCISION OF INFECTED GRAFT; EXTREMITY

[VIEW SELECTED SERVICE\(S\)](#)

[CHAT](#) [ASSISTANCE](#)

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PARA Price Transparency Tool

Out-Of-Pocket Estimator: Obtain an estimate on our most common services 3

Choose Your Service Category

Outpatient Services:

- ☐ Ambulatory Surgical
- ☐ Cardiac Rehab
- ☐ Cardiology Echocardiography
- ☐ Clinic by Diagnosis
- ☐ Clinic by Service Level
- ☐ Clinic/Outpatient
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- ☐ Emergency
- ☐ IV / Chemo Therapy
- ☐ Laboratory

Inpatient Services:

- ☐ Inpatient

Outpatient Services:

- ☐ Magnetic Resonance Imaging
- ☐ Nuclear Medicine
- ☐ Occupational Therapy
- ☐ Pathology
- ☐ Physical Therapy
- ☐ Preventive Medicine
- ☐ Pulmonary Function/Respiratory Therapy
- ☐ Sleep
- ☐ Speech Therapy
- ☐ Ultrasound
- ☐ Womens Services

Review Your Selected Services

COLONOSCOPY, FLEXIBLE; DIAGNOSTIC, INCLUDING COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING, WHEN PERFORMED (SEPARATE PROCEDURE)

[VIEW SELECTED SERVICE\(S\)](#) [CHAT](#) [ASSISTANCE](#)

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View selected services here

Continue to view gross charges for initial estimate

Selected services are added to the “Review Your Selected Services” window where they can be removed from the estimate at this time and whenever the user returns to edit the selections.

Upon reviewing this preliminary estimate of billed charges, additional language is included to inform how the estimate was obtained with further support information and the ability to print this estimate.

Out-Of-Pocket Estimator: Obtain an estimate of your selected services 4

Review Your Estimate

Charge(s): COLONOSCOPY, FLEXIBLE; DIAGNOSTIC, INCLUDING COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING, WHEN PERFORMED (SEPARATE PROCEDURE) **\$3,584.75**

Estimate of billed charges: \$3,584.75

This estimate is based on average charges for this procedure without complications. Your charges may vary based on your situation, the amount of time the procedure/surgery takes and the care your doctor orders for you based on your medical needs.

You also may receive bills from other medical specialty services that you may use during your visit with us, including physician charges, anesthesiology charges, radiologist reading fees and pathologist fees. Charges from these medical specialists will be billed separately to you.

The estimate above is not a quote nor a guarantee of the charges for a service or the amount that you will owe. If you have insurance, your insurance policy coverage (including deductibles, co-pay, co-insurance and out-of-pocket maximums) will determine the amount you owe.

[ADD/REVIEW SELECTED SERVICE\(S\)](#) [SELECT INSURANCE](#) [PRINT ESTIMATE](#) [CHAT](#) [ASSISTANCE](#)

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Include insurance plan details

PARA Price Transparency Tool

At this point, the consumer has the option to continue and further refine the estimate by including their specific insurance plan details to obtain a final estimate.

Out-Of-Pocket Estimator: Obtain an estimate on our most common services 5

Select Your Insurance

☐ Medicare **1**

☐ Self-Pay **2**

☐ All Other Insurance **3**

Select your insurance

ADD/REVIEW SELECTED SERVICE(S)

CHAT

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Medicare – 1

The user is asked to input their Medicare yearly deductible information.

Out-Of-Pocket Estimator: Enter your insurance information 6

Enter Your Insurance Information – Medicare

Enter yearly deductible amount already paid (\$):

125.00

(Enter 0 if none)

ADD/REVIEW SELECTED SERVICE(S)

SELECT INSURANCE

VIEW FINAL ESTIMATE

CHAT

ASSISTANCE

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View final estimate with Medicare plan information

The **PARA Price Transparency Tool** presents the final estimate as a total of Medicare terms of the selected services with the remaining annual deductible.

PARA Price Transparency Tool

Out-Of-Pocket Estimator: Review your final estimate10

Review Your Estimate

Charge(s): COLONOSCOPY, FLEXIBLE; DIAGNOSTIC, INCLUDING COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING, WHEN PERFORMED (SEPARATE PROCEDURE)\$3,584.75

Insurance: Medicare

Deductible (Part B): \$198.00

Deductible Paid: \$125.00

Plan Information

Estimate of Medicare Co-Insurance Plus Any Remainder of Your Annual Deductible: \$73.00

This estimate is based on average charges for this procedure without complications. Your charges may vary based on your situation, the amount of time the procedure/surgery takes and the care your doctor orders for you based on your medical needs.

You also may receive bills from other medical specialty services that you may use during your visit with us, including physician charges, anesthesiology charges, radiologist reading fees and pathologist fees. Charges from these medical specialists will be billed separately to you.

The estimate above is not a quote nor a guarantee of the charges for a service or the amount that you will owe. If you have insurance, your insurance policy coverage (including deductibles, co-pay, co-insurance and out-of-pocket maximums) will determine the amount you owe.

[ADD/REVIEW SELECTED SERVICE\(S\)](#) [SELECT INSURANCE](#)

[SAVE/VIEW FINAL](#) [PRINT FINAL](#)

[CHAT](#) [ASSISTANCE](#)

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Self-Pay – 2

The PARA Price Transparency Tool presents the final estimate as a total of the Hospital's self-pay discount applied to the selected services' individual prices.

Out-Of-Pocket Estimator: Review your final estimate10

Review Your Estimate

Charge(s): COLONOSCOPY, FLEXIBLE; DIAGNOSTIC, INCLUDING COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING, WHEN PERFORMED (SEPARATE PROCEDURE)\$3,584.75

Insurance: Self-Pay

Estimate of billed charges (Charge - 40% Self-Pay Discount): \$2,150.85

This estimate is based on average charges for this procedure without complications. Your charges may vary based on your situation, the amount of time the procedure/surgery takes and the care your doctor orders for you based on your medical needs.

You also may receive bills from other medical specialty services that you may use during your visit with us, including physician charges, anesthesiology charges, radiologist reading fees and pathologist fees. Charges from these medical specialists will be billed separately to you.

The estimate above is not a quote nor a guarantee of the charges for a service or the amount that you will owe. If you have insurance, your insurance policy coverage (including deductibles, co-pay, co-insurance and out-of-pocket maximums) will determine the amount you owe.

Non-insured patients may be eligible to receive a 40% discount on services if the bill is paid in full within X days of the first statement. Only services that are not covered by a third party are eligible. For more information, contact our Financial Counselor at (000) 123-4567.

[ADD/REVIEW SELECTED SERVICE\(S\)](#) [SELECT INSURANCE](#)

[SAVE/VIEW FINAL](#) [PRINT FINAL](#)

[CHAT](#) [ASSISTANCE](#)

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PARA Price Transparency Tool

All Other Insurance – 3

The ability to calculate Patient estimates on the facility website will be provided upon the consumer's ability to input their specific plan details.

PARA has integrated contracts to the **PARA Price Transparency Tool**, making it a more accurate tool for providing price estimates. However, with this functionality, competitors and other malicious users may attempt to take advantage of the tool to shop prices.

PARA has further developed the ability to protect your facility from such attacks by folding in user eligibility checking and saving to ensure proper usage.

If the user has selected "All Other Insurance," the Patient must complete an Eligibility Form.

The screenshot shows the 'Out-Of-Pocket Estimator' interface. At the top, a blue header bar contains the title 'Out-Of-Pocket Estimator: Obtain an estimate on our most common services' and the page number '10'. Below the header is a section titled 'Check Your Eligibility'. This section contains several input fields: 'First Name: *', 'Last Name: *', 'Date Of Birth: *' (with a calendar icon), 'Payer: *' (a dropdown menu showing 'Select...'), 'Member ID: *', 'Plan Code: *', 'Date Of Service: *' (with a calendar icon), and 'Group/Bin No: *'. Below these fields is a button labeled 'Check/View Eligibility'. A blue callout bubble points to this button with the text 'Obtain eligibility results and continue'. To the right of the 'Check/View Eligibility' button are two buttons: 'ADD/REVIEW SELECTED SERVICE(S)' and 'SELECT INSURANCE'. Below these are two buttons: 'SAVE ENTRIES' and 'PRINT ENTRIES'. At the bottom of the form are two buttons: 'CHAT' and 'ASSISTANCE'. The footer of the form says 'Powered By PARA HealthCare Analytics'.

PARA communicates via an Electronic Data Interchange linkage to the Patient's insurance plan to confirm coverable, copays, and deductibles.

A successful verification response reported along with the user's complete plan information ensures a further level of protection to avoid data mining from outside parties and full transparency.

PARA Price Transparency Tool

Out-Of-Pocket Estimator: Obtain an estimate on our most common services 11

Check Your Eligibility – Result

```
{
  \"created_at\": \"2019-08-27T17:19:24-04\",
  \"eligible_id\": \"[REDACTED]\",
  \"demographics\": {
    \"subscriber\": {
      \"last_name\": \"[REDACTED]\",
      \"first_name\": \"[REDACTED]\",
      \"middle_name\": \"[REDACTED]\",
      \"member_id\": \"[REDACTED]\",
      \"group_id\": \"[REDACTED]\",
      \"group_name\": \"[REDACTED]\",
      \"dob\": \"[REDACTED]\",
      \"gender\": \"[REDACTED]\",
      \"address\": \"[REDACTED]\"
    }
  }
}
```

View all eligibility/insurance result information

ADD/REVIEW SELECTED SERVICE(S) SELECT INSURANCE ENTER INSURANCE OPTIONS

SAVE RESULT PRINT RESULT

CHAT ASSISTANCE

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Continue to input insurance plan details

Only when **PARA** hears back that the check has been successful will the user be able to proceed to enter their insurance plan information.

Out-Of-Pocket Estimator: Obtain an estimate on our most common services 12

Enter Your Insurance Information – All Other Insurance

Please Select Your HealthCare Payer:
UNITED HEALTH CARE (194218)

Enter your yearly deductible amount:
\$1,000.00

Enter yearly deductible amount already paid amount (\$):
1000.00

Enter your copay amount:
\$0.00

Select the coinsurance amount (%) you are responsible for:
20%

Enter your out-of-pocket maximum (\$) per calendar year:
2500.00

View final estimate with Insurance plan information

ADD/REVIEW SELECTED SERVICE(S) SELECT INSURANCE VIEW FINAL ESTIMATE

CHAT ASSISTANCE

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PARA Price Transparency Tool presents the final estimate as a total of the selected services' allowed amounts based on contract further netted down using plan details.

PARA Price Transparency Tool

Out-Of-Pocket Estimator: Review your final estimate10

Review Your Estimate

Charge(s): COLONOSCOPY, FLEXIBLE; DIAGNOSTIC, INCLUDING COLLECTION OF SPECIMEN(S) BY BRUSHING OR WASHING, WHEN PERFORMED (SEPARATE PROCEDURE)\$3,584.75

Insurance: All Other Insurance

Contract: UNITED HEALTH CARE (194218)

Deductible: \$1,000.00

Deductible Paid: \$1,000.00

Copay: \$0.00

Co-Insurance: 20%

Maximum Payment: \$2,500.00

Plan Information

Estimate of your total out-of-pocket cost: \$184.09

Estimate of billed charges (Charge - 40% Self-Pay Discount): \$2,150.85

Your out of pocket costs for these services are based on several factors, including your: insurance plan deductible, co-payment and co-insurance amounts, and how much of your out of pocket maximum and deductible have been met to date this year. This amount may vary slightly, depending on actual services you receive.

The expectation is that if at all possible these details should be handled at the time of service. We accept cash, check, Visa, Mastercard or Discover.

You may also receive bills from other medical specialty services that you may use during your visit with us, including Physician charges, Radiology reading fees, and Pathology fees. Charges from these medical specialists will be billed separately to you and your insurance carrier.

The estimate above is not a quote nor a guarantee of the charges for a service or the amount that you will owe. If you have insurance, your insurance policy coverage (including deductibles, co-pay, co-insurance and out-of-pocket maximums) will determine the amount you owe.

[ADD/REVIEW SELECTED SERVICE\(S\)](#)[SELECT INSURANCE](#)

[SAVE/VIEW FINAL](#)[PRINT FINAL](#)

[CHAT](#)[ASSISTANCE](#)

Powered By PARA HealthCare Analytics

PARA has developed the abilities to save and print estimates and Eligibility entries and results for the user to review on a later date. Saving is accomplished by asking the Patient for their email address and sending a secure link via email to reopen the results. Printing produces a replica of the current page in PDF format.

SAMPLES OF PRICE TRANSPARENCY WITH PARA PRICE TRANSPARENCY TOOL DECISION TREE:

Price Transparency Link and Cost Estimations for Medicare and No Insurance:

[Example 1](#)

Price Transparency Link and Patient Estimates using PARA's standard Decision Tree for Insurance, Medicare and Self-Pay:

[Example 2](#)

[Example 3](#)

Price Transparency Link built into PARA's custom landing page for Hospital Defined Services and providing Patient Estimates with PARA's standard Decision Tree for Insurance, Medicare and Self-Pay:

[Example 4](#)

PARA Price Transparency Tool

Price Transparency Link built into PARA's custom landing page for direct Cost Estimations regardless of payor:

[Example 5](#)

Price Transparency Link broken out by location with direct Cost Estimations also dependent on location:

[Example 6](#)

INVESTMENT:

Contact your Account Executive to discuss initial set-up cost and quarterly maintenance fees and/or additional custom programming services depending on PROVIDER's deployment needs.