

User Instruction Manual For mycostestimates.com



Member Validation

You can access the Price Comparison Tool by clicking the link below or by entering the URL into your web browser to begin the registration process.

www.mycostestimates.com/users/register

Please enter the information located on your insurance ID card exactly as on the card, into the corresponding fields. Once all fields are filled out, click the "Validate" button.

		GREE	N LIGHT		
	ME	MBER V	ALIDATI	ON	
To start your regist your Member ID	ration, we n health insu	eed to verify you rance ID card to	ur identity. Pleas begin the regis	e refer to the i tration process	nformation o
Member ID					
Date of Birth		_			
Month	~ /	Day	~ /	Year	~
Zip Code					
Zip Code					••••
First Name					
First Name					
		Valio	late		

If the information matches the information provided by your health plan, you will be prompted to continue the registration process. In the event the information you've entered is unable to be validated, please confirm that the information you've entered is exactly as it is listed on your insurance ID card. If you continue to encounter issues with the validation process, please contact your health plan for further assistance.

Creating a Login

Please enter your email address and create a password (meeting the minimum passowrd requirements outlined below, check the box to agree to the Terms of Service, and click the "Register" button.

IGREEN LIGHT	
MEMBER REGISTRATION	
Success! Welcome, Joel!	
Email	
Email	••••
Password	
Password	
Confirm Password	
Confirm Password	
Your password must include the following: • Be at least 12 characters long • Include at least one lower case letter (a-z) • Include at least one upper case letter (A-Z) • Include at least one number or special character (0-9, @#\$%&!)	
By clicking the checkbox, I agree to the Terms of Service	
Register	
Member Validation Log in Forgot your password?	

Once successfully registered, you will receive an email to confirm your registration. The confirmation email contains a unique link to confirm your registration. Please click the link in the email to finalize your registration.

Logging Into mycostestimates.com

At the login screen, located at mycostestimates.com, please enter the email address you registered with and the password you created at registration. Check the box to agree to the Terms of Service and click the "Log in" button.

SIGN IN TO YO	
Email	
Email	••••]
Password	
Password	••••]
By clicking the checkbox, I	l agree to the Terms of Service

Performing a Search

After logging into the Tool, you can perform searches for cost estimates for any healthcare item or service by entering a few pieces of information.

First, select the Member, or Dependent, who needs to obtain a cost estimate.

Next, select the Distance you are willing to travel (this is measured from the zip code of your home address but can be changed to any location, by selecting the "Change" button in the Search Location box, located at the top right of the screen).

Search Location:

Sandy, UT 84070

Change

In the Service Type drop down, select an option for how you would like to perform a search:

- Search by Code: Search by a specific medical billing code (CPT, HCPCS, or DRG)
- Search by Description: Search for a specific medical procedure by keyword

	Search
Select	~
Service Type:	
How far are you willing to travel?	~
Distance	
PROVIDER SEARCH	

The following is an example of a populated Provider Search. When keywords are entered into the Search Service field, you are presented with several options. Select a service you'd like to receive an estimate on to proceed and click "Search".

PROVIDER SEARCH	
Distance:	
20 miles	~
Service Type:	
Search by description	~
Search Service:	
tonsillectomy	×
42820 - TONSILLECTOMY AND ADENOIDECTOMY; YOUNGER THAI	N AGE 12
42821 - TONSILLECTOMY AND ADENOIDECTOMY; AGE 12 OR OVER	2
- 42825 - TONSILLECTOMY, PRIMARY OR SECONDARY; YOUNGER TH	HAN AGE 12

42826 - TONSILLECTOMY, PRIMARY OR SECONDARY; AGE 12 OR OVER

Transparency in Coverage Disclosure Notice

Once you initiate a search, a Transparency in Coverage Disclosure Notice will be displayed to provide you with important information about your cost estimate. After you have read and understand this information, click the "I Understand" button at the bottom of the Notice to proceed to your provider results and cost estimates.

Obtaining your Cost Estimate

Upon acknowledgement of the Transparency in Coverage Disclosure Notice, the system will display "tiles", representing the different provider options and estimated costs for the healthcare service you have searched. By default, the in-network results will be presented for both Physician and Facility services:



To view your cost estimate for a specific provider, click on the magnifying glass icon beside "Your Estimated Responsibility."

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Your Estimated Responsibility 🙍 <---- $497.00
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Example:

	Individual Accumulated Amount			Family Accumulated Amount			
Required Cost Sharing	Required	Met	Remaining	Required	Met	Remaining	
In-Network Deductible	\$1,000.00	\$547.00	\$453.00	\$2,000.00	\$1,422.57	\$577.43	
Out-of-Network Deductible	\$3,000.00	\$1,175.58	\$1,824.42	\$6,000.00	\$5,178.16	\$821.84	
In-Network Out-of-Pocket Maximum	\$2,000.00	\$1,503.00	\$497.00	\$4,000.00	\$3,102.41	\$897.59	
Out-of-Network Out-of-Pocket Maximum	\$6,000.00	\$2,175.56	\$3,824.44	\$12,000.00	\$8,274.56	\$3,725.44	

Your Estimated Respon	Amount	
Contractual Allowance		\$7,277.13
Your Copay		\$50.00
Your In-Network Deductible	\$447.00	
Amount Eligible for Benefits	\$6,774.13	
Your Coinsurance	10%	\$0.00
Your Health Plan Pays	90%	\$6,774.13
Your Estimated Responsibility		\$497.00

Printing your Cost Estimate

To print your cost estimate, click the Print icon at the upper right corner of the selected tile (this will generate a PDF version of your cost estimate, which can be printed or downloaded:

Physician Facility Showing 1 to 11 of 1	l results			Sort By: Mileage	× × 1
Cannor, Richard B., MD Otolaryngology • IHC Otolaryngology ©		Colaryngology - South Jordan Orlandi, Richard R. MD Otolaryngology @	0	Ctolaryngology - South Jordan Error, Marc E. MD Otolaryngology 🚳	0
5121 S Cottonwood St Murray, UT 84107 (801) 581-7514		5126 W Daybreak Pkwy South Jordan, UT 84065 (801) 581-7514		5126 W Daybreak Pkwy South Jordan, UT 84065 (801) 581-7514	
5.9 miles 🗭 🛄		5.9 miles 💬 🕅		5.9 miles 🗭 🕅	
Utah State Provider Network		Utah State Provider Network		Utah State Provider Network	
Contractual Allowance	\$5,163.48	Contractual Allowance	\$7,277.13	Contractual Allowance	\$7,277.13
Your Estimated Responsibility 🤌	\$963.05	Your Estimated Responsibility 🥥	\$497.00	Your Estimated Responsibility 📀	\$497.00

To perform another cost estimate, select "New Search" in the top right bar of your screen.