

OUT-OF-NETWORK (OON) COSTS

Estimated reimbursement rates for frequent services

Here are examples of the estimated reimbursement rates for frequently billed OON services based on the NJ OON Consumer Protection, Transparency, Cost Containment and Accountability Act. These examples are for illustration purposes only. Actual costs may vary due to your particular health plan's coverage terms.

You can contact us at the toll-free number on your ID card to get information on the allowed charge/amounts for specific procedures, and any cost share you may be responsible for. To do so, please provide a current procedural terminology (CPT) code.

If you do not have a CPT code, you can still get an estimate of the allowed charges. First, contact one of our Customer Service Advocates and give us information about the procedures you are planning to have. Next, let us know what type of plan you have. We will be able to give you an estimate for the allowed charges.

CPT	DESCRIPTION	ESTIMATED ALLOWABLE
93010	EKG	\$29.16
85025	CBC (Complete Blood Count)	\$25.13
80048	BMP (Basic Metabolic Panel)	\$51.40
81000	Urinalysis	\$13.13
99282	Emergency department visit – low to moderate complexity	\$279.17
99285	Emergency department visit – high complexity	\$956.44
74176	CT Abdomen/Pelvis w/o Contrast	\$833.29
72148	MRI, Lumbar w/o Contrast	\$1,135.17
76705	Ultrasound, Abdominal, Limited	\$291.90
71046	XRAY Chest, 2 views	\$83.84



For more information on how health benefits plans cover out-of-network treatment, [click here](#).

Together, all the way.®



All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company, Connecticut General Life Insurance Company, Cigna Behavioral Health, Inc., and HMO or service company subsidiaries of Cigna Health Corporation. The Cigna name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc.

939439 02/20 © 2020 Cigna. Some content provided under license.