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Costs of many preventive medical exams vary as much as 700%

By Kelly Kennedy, USA TODAY

Updated 7h 57m ago

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WASHINGTON – A new report shows costs vary as much as 700% for some preventive examinations, and as the federal health care law increases demand for those procedures, it can mean an increase in premiums if employees don't pay attention to those costs.

Over the past year, health plans and self-insured employers began paying for wellness exams — diabetes screening, mammographies, Pap smears and colonoscopies — as required by the law, without charging consumers a deductible or co-payment. But in looking at 15,000 consumers, a research group has found cost differences of hundreds of dollars charged for the same tests. Colonoscopy costs, for example, ranged from \$786 to \$1,819.

By Dan MacMedan, USA TODAY

Roxanne Gross, a mammography technologist, performs a mammogram at the David Geffen School of Medicine at UCLA.

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"I wasn't surprised that there was variability, but the degree of variability surprised me," says Doug Ghertner, president of Change Healthcare, which works with businesses to determine costs of health care procedures. "The absolute dollars for colonoscopies were pretty big."

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The U.S. Department of Health and Human Services predicted a 1.5% increase in premiums because of the new exam requirements. Doug Ghertner, Change Healthcare president, says consumers will see a direct correlation between premium increases and their choice of health provider. The "consumer is typically isolated from the cost," he says. "People think they have zero financial responsibility."

Several factors affect prices: whether a provider is in a rural or urban area; whether the service is performed at a hospital, a doctor's office or an ambulatory clinic; and whether a clinic specializes in a certain procedure, such as a colonoscopy.

Patient's role in price

As demand increases, prices may continue to rise, Ghertner says. "Companies are saying, 'How am I going to deal with these increases?'" he says.

They need to make the cost information available and provide an incentive for employees

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to seek less-costly care for equal- or better-quality services, he says.

Francois de Brantes, executive director for the Health Care Incentives Improvement Institute, says there's no question that there's variance in costs, but adds that sometimes it's also the patient's decision. For example, many patients choose general anesthesia during colonoscopies, which can affect the cost significantly. This also can mean that a doctor goes ahead with a second procedure, such as an endoscopy or removing a polyp, while the patient is under.

In Colorado, that has meant that the cost of colonoscopies far outweighs the total amount the state spends for all diabetes care, according to a recent study from the institute, he says. His organization supports bundled payments, rather than fee-for-service, as a way to cut costs.

Health care providers need to look at alternatives to costly procedures that affect a minority of patients, he says. Until recently, mammographies were urged yearly for all women after age 40. After several studies, the age was raised to 50 because many women were getting unnecessary biopsies.

"It's a very difficult policy decision," de Brantes says. "At some point, policymakers need to come to terms with the fact that what's good for a minority might not be good for a majority."

Incentive to shop around

Insurance providers have looked at the issue. Rachelle Cunningham, Regence Blueshield spokeswoman, says the health care company has provided a tool for customers to compare costs.

The variations in cost did not surprise Andy Webber, president and CEO of the National Business Coalition on Health, a non-profit that works for health care reform. "The problem is not whether or not these services are needed. They're very important."

He says researchers are seeing more variation, and that it's greatest in for-profit care. Often, he says, consumers don't even ask about price because they're getting the service for "free," but also because doctor's offices don't list prices. Employers should be asking their health plans and making sure that information gets to their employees.

And they should make sure employees understand why there's a direct correlation to their own costs, he says. Safeway grocery chain employees have a certain amount to spend on a procedure. If they go to a place that charges more, the patient has to pay the difference. The company also provides cost-comparison information.

That could mean lower prices across the board in the future, Webber says. "I think free markets do work. ... Incentives and transparency and competitive markets can drive prices down."

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Theodosius Mandelbrot · Top Commenter · Works at All continents but Antarctica.

Noobody likes the 700% cost differential, which makes no sense, but it is universally agreed that preventive medicine is the best medicine.

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Michael Edwards · Top Commenter

Screening isn't PREVENTION, they only detect diseases that are already there! True prevention involves awareness and education-as directed by a Certified Health Educator. When are insurance companies going to include these services in their deductions or allow Health Educators to direct bill patients when they PREVENT diseases, like other healthcare providers do when they "treat" them??

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Nancy Geren Carter · Works at Elida Local Schools

Over the past year, health plans and self-insured employers began paying for wellness exams — diabetes screening, mammographies, Pap smears and colonoscopies — as required by the law, without charging consumers a deductible or co-payment." However, I have found that costs are broken down to many bills- the facility, the meds, multiple med. personnel, labs, etc. - each with their own bill.

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Theodosius Mandelbrot · Top Commenter · Works at All continents but Antarctica.

True, but my insurance has paid all of those bills, as it has in the past, and will continue to do in the future, for my family.

[Reply](#) · [3](#) · [Like](#) · 11 hours ago



Walt Palka · Top Commenter · President at Self employed

Theodosius Mandelbrot Yes and we blame insurance companies for the ills in the medical field costs when the bad guys are the physicians, labs, pharmacy industry and hospitals over billing which leads to increased costs of our medical insurance premiums. Until consumers start to question their doctors as to why they are ordering unnesesary tests and drugs, all of our premiums will just keep going up and up. Obamacare hasn't addressed the rising cost of medical care and therefore won't pass the test and deserves to be defeated after the next election if not in the courts.

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Ted Wilke · Top Commenter · Eaton Corporation

Theodosius Mandelbrot Good thing you don't pay for health insurance. Because as all those costs that are "covered" rise, you pay more.

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John Bengel · Top Commenter · Retired Pharmacist at Retired Pharmacist

Screening costs especially imaging and unnecessary blood work is killing medicare. Way overdone.

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Ambrose Korn · Top Commenter · Butler, Pennsylvania

By controlling Congress and the white house for the first two years Obama had a chance as no other President had for a long time to do something worthwhile regarding healthcare. Obamacare does not place limit on punitive jury awards which would decrease the cost of insurance doctors pay. Many unnecessary tests are ordered by doctors to cover their butts otherwise trial lawyers come at them like vultures. Also allow health care companies to sell insurance across state lines as people can buy car and life insurances from any state in the country. Hospitals are non profits so the government can monitor their costs unlike private companies and finally, Obamacare should have stayed with the essentials. By including birth control, abortion attempts, viagra, and any other personal more than medical procedures they threw gasoline on the cozy idea of a fireplace which we could all warm up to and ignited a fire storm.

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John Gratian

Something seems pretty fishy. The article states that because more people are receiving the service prices are going up. This isn't really something that has a limited supply. If demand is higher than supply then more testing facilities need to open. And if the existing healthcare businesses aren't willing to open more than we need to enlighten them. If they aren't going to provide the additional services provide a tax break for new start-up businesses that are not owned by the existing health network to start-up new testing facilities. There are plenty of empty buildings. There are plenty of people needing a job. Seems like a solution to several problems. ** I do also agree that consumers need to understand that choices they make affect their care.

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Dustin Bell · Top Commenter

You are going off the assumption that what you learned about supply and demand is true. It isn't.

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Georgiana Hall · Top Commenter

Reminds me of the old O'Jays song " Money, Money Money..." That's what it's all about. The more procedures, the more money, period. Don't believe that everything is done for your health...

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