


## Location Still Impacts How Much You Pay for Imaging Services

Your day-to-day healthcare decisions have a significant impact on both the cost to you and the cost to the plan. This is especially true in terms of where you choose to go for X-Rays and CT Scans in the Fresno Area.

According to the most recent JHMB data from the 2018-2019 plan year:

*X-Ray and CT Scan services at “free-standing” radiology centers or physician offices were generally 4-5 times less expensive than those at hospitals and medical centers.*

**Check Out the Updated Data**  
Flip to the back for more details on actual member costs at local facilities in the recent plan year, as well as tips to advocate for your wallet before your next imaging procedure.



**2019 Update: Know Before You Go**  
*Where you go for X-Rays and CT Scans affects how much you pay. And we have the updated data to prove it!*

## Tips to Advocate for Your Wallet



There are many reasons why prices vary for similar imaging services at local healthcare facilities - including number of views taken and complexity of the service provided. Yet, it's important to know that where you choose to go for services has a **BIG** impact on the price you are charged. Before your next imaging procedure, consider these factors below:

### 1. Is it Necessary?

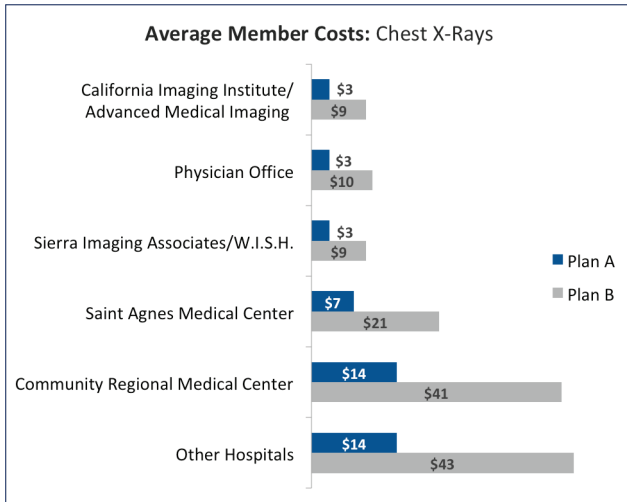
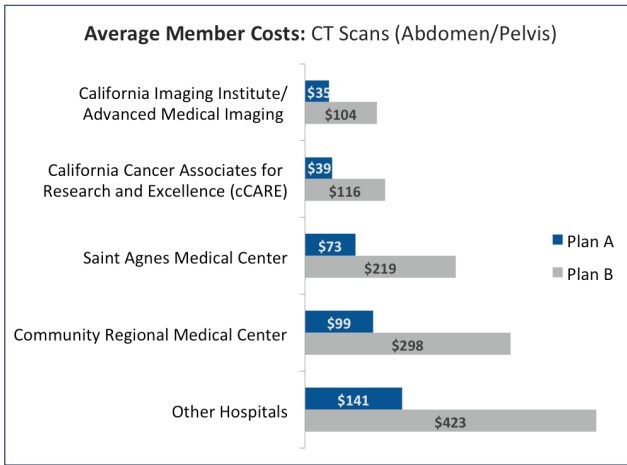
Before agreeing to your next imaging procedure, it's important to discuss with your doctor if the tests are even necessary. As Consumer Reports noted in their Choosing Wisely™ series, chest x-rays may not help unless you have symptoms of heart or lung disease. Also, CT scans/MRIs usually don't help when diagnosing headaches and lower back pain.

Both x-rays and CT scans have risks of radiation exposure and therefore should only be taken when deemed absolutely necessary. In addition, the results of both imaging procedures may be unclear and/or show false alarms that may require additional tests - adding to your anxiety, radiation exposure, and increasing your medical costs. So push to make sure that it's necessary and not simply a "check the box" procedure.

### 2. Choose the Best Facility for Your Wallet and Your Schedule

If you decide that your imaging procedure is necessary, share the cost data shown in the charts on the left with your doctor's office. Oftentimes, they may not be aware of the costs of the services they recommend for you. However, now that you are aware of the cost differences, you can request a referral to a local facility that best fits your wallet and your schedule.

**NOTE:** The costs shown in the charts on the left are average member costs and will not necessarily be the exact cost you pay for service. This data has been provided to show the difference in costs across various local facilities and help you understand that you may be able to lower your costs based on where you choose to receive services.



Plan A: Based on 90/10 in-network cost share; does not consider deductible.  
 Plan B: Based on 70/30 in-network cost share; does not consider deductible.  
 Data provided in the charts above is relative to the JHMB's 2018-2019 benefit plan year.