The Communication Toolkit includes several pieces that employers, health plans, community organizations, and others can use to educate health care consumers about the costs of care and steps they can take to better understand and manage those costs while still getting high-quality care. These pieces include:

**Written content**

- *Tackling the High Costs of Your Health Care: What You and ABC Toy Company Can Do About It*
- *You May Not Get What You Pay For: How to Be an Informed Health Care Consumer*
- *Figuring Out What Health Care Will Cost You*

**PowerPoint presentation**

- *Getting High-Quality Care and Managing Your Costs: Stories About Shopping for the Health Care That Is Best for You*

The purpose of these materials is to provide content that can be easily incorporated into employee communications (e.g., newsletters, corporate intranets, benefits materials, presentations) as well as public websites. Each piece can be used alone or in combination with the other pieces. Please note that the repetition of messages across the pieces is deliberate; they are designed to complement and reinforce each other.

You are welcome to use these materials “as is” (with some minor customization) or adapt sections as needed to serve your purposes. For example, you may want to customize the design of the text pages or slides by using your organization’s template or adding a company logo. You may also want to change the content to better suit your organization’s voice and audience’s needs, but please be aware that these materials have been tested extensively to ensure that people can understand and use them.

Please acknowledge the source of the materials by adding the following statement: “These materials were adapted from the Communication Toolkit that was developed by the American Institutes for Research with funding from the California HealthCare Foundation and the Robert Wood Johnson Foundation.”
This document suggests ways to customize each piece. For additional suggestions on how to use these materials, please refer to “Select and customize the communication materials” in the “How to Use the Materials” section of the Communication Toolkit.

**Tackling the High Costs of Your Health Care: What You and ABC Toy Company Can Do About It**

This piece is designed to communicate two key messages to employees:

- Employees and employers share the burden of health care costs and face similar challenges when making difficult trade-offs.
- Both employers and employees can take steps to better manage the costs of care while still ensuring access to high-quality care.

These are important messages to convey to employees, many of whom remain unclear about their employer’s role in paying for health care coverage and managing benefits, and are unsure about what they can do about the costs of care.

**Recommended Customization If You Are (Or Represent) An Employer**

- In the second paragraph:
  - Replace the information about the share of premiums paid by the fictional “ABC Toy Company” with information about your organization’s share of premiums.
  - If appropriate, add text about the organization’s contributions to other employee health care expenses, such as contributions to health savings accounts.
  - Replace the graphic with one that helps to illustrate the organization’s contribution to health care expenses.
  - In the second paragraph under the “What can we do” header, replace the last sentence with a description of something that the organization is doing to maintain or improve the cost and quality of health care services for employees and their families. The purpose of this paragraph is to demonstrate that the employer is taking concrete steps that will benefit employees. Examples might include contracting only with health plans that provide evidence of the high quality of care members receive or identifying local health care providers who will deliver certain health care services for a flat fee.
  - On the second page, in the box, add links to any information on health care quality or costs that the employer or its contracted health plans provide. If possible, also list sources of comparative quality and cost information in your community or state. You can find comparative reports on hospital and physician quality that are available in your state in *Comparing Health Care Quality: A National Directory*: [http://www.rwjf.org/en/research-publications/find-rwjf-research/2013/09/national-directory.html](http://www.rwjf.org/en/research-publications/find-rwjf-research/2013/09/national-directory.html)

**Recommended Customization If You Are NOT An Employer**

- In the title, delete the reference to “ABC Toy Company.”
- Delete the second paragraph and graphics about the employer’s share of premiums.
- In the paragraph below the graphics, delete the last two sentences only.
- Change the first header to say “What can you do about this?”
- In the paragraph below the header, revise the second and third sentences as follows:
  “Many health care expenses are hard to avoid, especially when the need for care is urgent. But some of the choices you make affect what you are paying for health care. So you can make better choices.”
- Delete the second paragraph under the header (starting “ABC Toy Company...”).

2

**You May Not Get What You Pay For: How to Be an Informed Health Care Consumer Scale**

This piece is designed to communicate three key messages:

- Health care prices vary significantly all over the country.
- The price of health care doesn’t tell you anything about the quality of that care.
- Employees can behave like “informed consumers,” just as they are for other major expenditures in their lives.

**Recommended Customization**

- In the box on the first page, replace the graphic with one that illustrates the wide variation in hospital prices in your market. Free and easily accessible data on hospital charges is available from the federal Centers for Medicare & Medicaid Services: *Medicare Provider Charge Data: Inpatient* at [http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Medicare-Provider-Charge-Data/Inpatient.html](http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Medicare-Provider-Charge-Data/Inpatient.html). In addition, local data may be available from government agencies in your state. For example, major joint replacement procedures typically show a wide price variance within a region.

- Under the heading “Recognize that you could pay...,” suggest a few websites that provide information on average or estimated costs in your market. Examples include [www.HealthCareBlueBook.com](http://www.HealthCareBlueBook.com), [http://www.FAIRhealthconsumer.org/](http://www.FAIRhealthconsumer.org/), [http://clearhealthcosts.com](http://clearhealthcosts.com), and [http://www.okcopay.com](http://www.okcopay.com). If you are (or represent) an employer, add links to any information you provide employees (e.g., through a service like Castlight) and indicate whether contracted plans provide cost estimators.


**Figuring Out What Health Care Will Cost You**

This piece is designed to communicate two key messages:

- Many health care consumers are unable to find out from their providers what health care will cost.
- There are ways to get cost information from insurers and online sources to help make informed choices.

**Recommended Customization**

- In the box on the second page, add the names and URLs of local sources of information on health care costs (if available).


**Getting High-Quality Care and Managing Your Costs: Stories About Shopping for the Health Care That Is Best for You (PowerPoint Presentation)**

This presentation consists of two stories that depict the types of choices that many health care consumers face and the steps they can take to make the decisions that are right for them.
The first story is about a fictional man named Joe who injures his back. Because Joe has a high-deductible health plan, he is concerned about the cost of the test he needs to diagnose the problem.

The second story is about a fictional woman named Sylvie who injures her knee. When Sylvie learns that she needs surgery, she tries to figure out how to get the surgical care that’s right for her.

While you could present both stories, one is likely to be sufficient to convey the key points and engage your audience in the fictional character’s experience with health care and how it relates to their own experiences. You are free to place the story into your organization’s template, incorporate the story into a longer presentation about related topics, and amend the story as needed to better suit your audience. Depending on the level of interaction with the audience, each story is likely to take approximate 30 minutes.

Using the Photos

The American Institutes for Research, which developed the Communication Toolkit, purchased a license that allows for the display of the photographs in this presentation without any additional cost to users. However, the photos may not be transferred into other documents or used for other purposes.

Talking Points

The stories are outlined on the slides, but the speaker will need to provide a little context and lead the audience through the story. Because the stories are intended to generate discussion among participants, the speaker also needs to serve as a facilitator of that discussion. Talking points are provided in the notes section of the slides to give you ideas about how to present the stories and encourage participation from your audience. It is not necessary to use all of the prompts; you are free to use whichever prompts work best for you and your audience.

For more than 40 years the Robert Wood Johnson Foundation has worked to improve the health and health care of all Americans. We are striving to build a national culture of health that will enable all Americans to live longer, healthier lives now and for generations to come. For more information, visit www.rwjf.org. Follow the Foundation on Twitter at www.rwjf.org/twitter or on Facebook at www.rwjf.org/facebook.
Health care can be a major expense. In addition to paying your share of insurance premiums, you may have other out-of-pocket costs, such as the co-payments or co-insurance you pay when you or family members visit the doctor or pick up prescription drugs. Or your insurance may have a deductible, which means that you have to pay for everything up to a certain amount before the insurer starts to cover health care services. All those expenses can add up quickly.

ABC Toy Company also pays a lot for your health care. This year, ABC Toy Company is paying 82 percent of the insurance premiums for single coverage. For family coverage, the company pays 72 percent of the premiums.

When you have major health care expenses—such as a hospital stay or care for a serious illness—you may have to make some tough choices about how you spend your money. Having to pay the costs of health care may keep you from things you’d rather be doing—like going on vacation or saving money for retirement or your child’s college fund. The same is true for ABC Toy Company. When the company spends more on health care, there is less money available for other things, like raising salaries or developing new products and services to keep our company competitive.

What Can We Do About This?

Many health care expenses are hard to avoid, especially when the need for care is urgent. But some of the choices we make—both ABC Toy Company as an employer and you as an employee—affect what we’re all paying for health care. So we can both make better choices.

ABC Toy Company is doing several things to control rising health care costs for employees and their families while making sure that you continue to have access to high-quality care that will help you stay healthy and recover faster when you are sick. For example, we make sure that the health plans we offer meet specific criteria for quality and costs of care.
You can do your part by being an informed consumer of health care services. Many people don’t think of themselves as “consumers” when making decisions about health care. But often you and your family do have choices among specialists, hospitals, treatments, and prescription drugs and can pick the one that best meets your needs. Those needs typically include getting care that is:

- Effective and safe
- Available when you need it
- Centered around your preferences and values
- Affordable for you

By exploring your options and making well-informed choices, you can help to manage your own costs and ensure that you are getting the high-quality care you deserve.

How can you be an informed consumer?

**Do your homework.**

You know the saying “you get what you pay for?” That’s not always true with health care. The cost of a health care service can vary by hundreds—even thousands—of dollars, even in the same community. The total fees for a screening colonoscopy, for example, could be anywhere from less than $1,000 to more than $3,000. And there’s no evidence that the most expensive care is the best.

As with any other choice you make as a consumer, you can gather some information about your health care options—whether you’re making decisions about specialists, hospitals, treatments, or drugs—before you make a decision.

- **Look online for information about the quality of care.** Information to help you compare the quality of care is available across the country. For example, you can find out how well hospitals avoid infections in their patients and how patients rate their experiences at these hospitals. The websites listed in the box will get you started.

- **Look online for information about the costs of care.** If you know the average or estimated costs of care in your area, you can judge what is reasonable—and what is not reasonable.

- **Contact your health plan to find out what you can expect to pay for care.** Your health plan can tell you which providers are in your network, whether the treatment or service will be covered, and what your co-pay or co-insurance amount will be.

Armed with that information, you can then discuss the options with your health care provider to decide together what’s right for you.

**Make sure you’re getting the care you need.**

It’s important to get the care you need—including preventive care like colonoscopies and regular care for chronic conditions like diabetes. This kind of care helps health care providers catch and treat problems early, before they turn into serious health issues that affect your quality of life.
**Avoid the care you don’t actually need.**

It’s also important to say “no” to care that won’t help you, like antibiotics for a run-of-the-mill sore throat or imaging tests at the first sign of back pain. Unnecessary tests can be more harmful than helpful, especially if they lead to “false positives” (that is, if the test indicates that you have a problem when you don’t). Because of a false positive, you may end up getting costly, risky treatments you don’t actually need. You can read about tests and treatments you may want to avoid or minimize on a site maintained by Consumer Reports: [http://consumerhealthchoices.org/patients-and-consumers/#test-and-treatments](http://consumerhealthchoices.org/patients-and-consumers/#test-and-treatments).

Repeating tests you have already had can be a waste of your time and money, so ask your provider to explain why you need to do something you have already done. In addition to the inconvenience and stress, the costs of all this care can add up quickly.
Did you know that the price of a service from one health care provider may be two, three, even four times more than the price for the same service from another provider, even in the same community? It’s true, and it happens all over the country. A 2013 report on hospital charges across the U.S. confirms what many previous studies have found: Health care prices are all over the map.

Many people assume that the more expensive care is, the better it must be. Given a choice—and in the absence of information about quality—they believe they’ll be better off with the more expensive doctor, hospital, or prescription drug. The reality is that costs vary for all sorts of reasons, and you can’t tell anything about the quality of care based on how much it costs. **What are some of the reasons costs vary?**

- One doctor may be more expensive than another because he/she provides more health care services than patients actually need.
- Tests or procedures may be more expensive at one facility than another because the facility is inefficient, wasting the time of its staff and its patients.
- Some hospitals and other providers are expensive because they don’t have much competition—that is, they charge more because they can.

**What Does This Mean For You?**

You may think that there’s nothing any single person can do about the wide variation in health care prices. But you can do something by becoming an informed consumer, just like you are for any other major expenditure for you and your family.

**Recognize that you could pay very different amounts for health care services depending on where you go.**

The price you have to pay depends a lot on the provider you choose. One of the first things you can do when you or a family member needs care is to confirm which health care providers are in your health plan’s network. Insurers negotiate prices with providers in their network that are lower than the provider’s charges.

But even when you are choosing among in-network providers, the price of care from those providers can vary. If you have a high deductible or pay co-insurance (a percentage of the price), those differences come out of your wallet. Simply being aware that you could be paying less for the same service is the first step toward becoming an informed consumer.

**Don’t make the mistake of assuming that a high cost translates into high quality.**

<table>
<thead>
<tr>
<th>In the Dallas-Fort Worth area, the average charge for major joint replacement or reattachment is four times greater in one hospital than it is in another.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital A</td>
</tr>
<tr>
<td>$40,000</td>
</tr>
</tbody>
</table>

Sometimes people want to replace their old medicine with a new, expensive medicine because they assume it must be better. But in many cases, the new medicine isn’t actually better; it’s just newer. Or they want to get a test or procedure done at a hospital when it could be done just as well—or even better—at a more convenient and less expensive outpatient facility.

Whether you’re considering health care providers, treatments, or medicines, be sure to think of the cost as simply that—the cost—and not a stand-in for other factors that matter to you. The care that’s best for you may turn out to be more expensive than other options, but you’ll know you picked it for the right reasons.

**Shop around when you can.**

Sometimes health care is an immediate need and there is no time to research alternatives. But when there is no urgency to get the care—for example, when you’re selecting among prescription drugs or choosing a hospital to give birth or replace a knee—it is worth the effort to shop around and explore your options. This step is especially critical if you have a high-deductible health plan, where you have to pay most or all of the costs of care yourself until you reach the deductible and your insurance kicks in.

Most importantly, seek out information on the quality of care as well as the out-of-pocket costs you can expect. If you need surgery, for example, visit [www.medicare.gov/HospitalCompare/](http://www.medicare.gov/HospitalCompare/) or state or local reports that compare hospital quality. You can see for yourself which local hospitals are best at delivering care that is proven to work, keeping you safe, and avoiding complications that may land you back in the hospital. Then find out from your insurer what you would have to pay for the providers that seem best to you. With that information in hand, you’ll be better prepared to work with your provider to make the choice that’s right for you.

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It’s pretty easy to find out what you’ll have to pay for most of the things you and your family need. Prices for most products and services are easily available, whether in stores or online. But what about when you need health care? How do you find out what you’ll have to pay?

**Why Is Getting Cost Information So Hard?**

Getting information about the cost of health care can feel like an impossible quest. Many of us have had the experience of calling a doctor’s office or asking a doctor or nurse directly about the cost of a test, drug, or treatment—only to be told that they don’t have the information to give you. In fact, you typically don’t know the cost until you have already received the care.

One reason for this problem is that the clinical staff in a health care provider’s office often don’t know how much their office charges for the services they deliver. And they certainly don’t know what other health care providers charge for their services. Without this kind of cost information, it can be very hard for you and your health care providers to make fully informed decisions.

Another reason why the staff in the provider’s office can’t say what you personally will have to pay is that your cost depends on the kind of insurance coverage you have.

- You may be paying a set amount of money (known as a “co-payment”) for each visit to a health care provider. If you have co-insurance, you may be paying for a portion of the cost. For example, you may have to pay 30 percent of the cost of a treatment while your insurance plan pays the remaining 70 percent.

- If you have a high deductible, you may be paying the entire cost out of your own pocket until you reach the deductible.

- If the provider is not in your health plan’s network, you may have to pay a higher co-payment, a higher level of co-insurance, or the full cost.

- If you have prescription coverage, you may pay less for generic medications than the same medicine with a brand name.

So even if the staff knows the cost of a given service or drug, they don’t know what the cost will be to you.

**What Can You Do?**

Little by little, health care cost information is becoming available through a variety of sources.

- **Contact your health plan.** Your first stop should be your health plan, which can confirm which providers are in your network and what your co-pay or co-insurance would be for a given service from the providers available to you. Many health plans also offer online tools called cost calculators that show you the costs of specific services, such as procedures or tests, from providers in your area. Whether or not you’ll be paying the full cost yourself, use the plan’s cost calculator to check out your options before deciding where to go for care.
• **Look for information online.** Several websites offer free information on the average costs or the estimated out-of-pocket cost of health care services. Information on health care costs and quality may also be available from community- or state-based nonprofit organizations in your area. While this information may not be customized to your insurance coverage, it can help you fill in other pieces of the puzzle by letting you compare the quality of care and other characteristics of local providers that may be important to you, such as location and office hours.

Then, once you have all the pieces in place—not just cost, but also quality, safety, and convenience—you can work with your health care provider to choose the care that is right for you.

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**Where to Find Useful Information on Health Care Costs**


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For more than 40 years the **Robert Wood Johnson Foundation** has worked to improve the health and health care of all Americans. We are striving to build a national culture of health that will enable all Americans to live longer, healthier lives now and for generations to come. For more information, visit [www.rwjf.org](http://www.rwjf.org). Follow the Foundation on Twitter at [www.rwjf.org/twitter](http://www.rwjf.org/twitter) or on Facebook at [www.rwjf.org/facebook](http://www.rwjf.org/facebook).
Getting High-Quality Care & Managing Your Costs:

Stories About Shopping for the Health Care That Is Best for You
One morning, Joe woke up with terrible back pain. He had spent the previous day helping a friend move to a new apartment.
Joe was still in pain after two weeks. His friend said to go to the doctor and ask for an MRI.

(What’s an MRI? Magnetic resonance imaging)
So Joe went to his doctor and asked for an MRI. Dr. Vu examined him carefully and said:

“Joe, you don’t need any imaging tests, at least not yet. I’d like to suggest a few things you can do to feel more comfortable while your back recovers.”
“Don’t lie in bed all day. You’ll feel better if you can stay active.”

“Use hot packs or a heating pad to relieve the pain.”

“Go ahead and take non-prescription pain relievers.”

“Most of the time, low back pain goes away by itself. But if you’re not feeling better in about 4 weeks, give us a call. That’s when we’ll take a closer look.”
A month later, Joe returned. It had been a long 4 weeks. “Doc, please, can you help me?” This time, his doctor said:

“I’m sorry to hear you’re still in pain. We’d better get an MRI to see what’s going on.”
"Thanks," said Joe. "So where do I go?"

"You can get an MRI at a few radiology facilities around here that all do a good job. Ask my staff for a suggestion on your way out…"

The nurse said:

"Here’s the number for the radiology department at Local Hospital, which is right around the corner. There’s also an imaging center on State Street."
Joe now knows about two options, and thinks there may be another imaging center nearby. He also knows that he has a high deductible, so he’s worried about paying the full cost of the MRI himself.

What could Joe do?

A. Get the MRI at the hospital.
B. Call the radiology facilities to find out they charge for an MRI.
C. Call his health plan to find out what he’d have to pay at each facility.
D. Do some research on the Web to find out the average cost of an MRI in his area.
E. Hide under the covers.
If Joe…

A: Gets the MRI at the Hospital

- After getting the MRI at the hospital, Joe gets a bill for $1,600. This price includes a facility fee of $400.
- Under Joe’s health plan, he has a deductible of $2,500, so he has to pay the entire $1,600.
- Joe has no idea whether he really had to pay so much for the MRI.
If Joe...

B: Calls the radiology facilities to find out what they charge for an MRI

- Joe finds out that there are three imaging centers in his area in addition to the hospital.
- After multiple phone calls, Joe learns that each facility has a different price for the MRI he needs.
- Joe now knows that the imaging centers would be less expensive than the hospital.
- But none of these facilities are able to tell Joe what his out-of-pocket cost would be under his health plan.
If Joe…

C: Calls his health plan to find out what he’d have to pay at each facility

- Joe finds out that his cost for the MRI would be less than the prices he was given by the facilities – except for one of the imaging centers because it isn’t in his health plan’s network.
- More good news: The two centers in the plan’s network are more convenient to Joe than the hospital would be.
- But Joe’s worried: Is the least expensive option a good choice?
If Joe…

D: Does some research on the Web to find out the cost of an MRI in his area

- Joe learns that a “fair price” for a spine MRI in his area is $815. That’s the amount that providers in Joe’s area typically accept as payment from insurance companies.
- Joe would have to contact his health plan (Choice C) to find out that he could go to an imaging center with a price that’s about the same as the Healthcare Blue Book’s “fair price.”
- Joe’s relieved to have information to judge whether the costs are reasonable.
If Joe…
E: Hides under the covers
Joe’s right back where he started.
What will you do next time you have a choice to make?
What Joe Would Tell You

✔ Make sure you know all your options.
✔ Find out which health care facilities are in your health plan’s network.
✔ Contact your plan to find out what costs you can expect to pay out of your own pocket.
✔ Look online for information on reasonable costs—especially if there’s a wide range of possibilities.
Sylvie Injures Her Knee
Sylvie has always been athletic. But after a weekend softball tournament, her left knee was throbbing with pain.
Sylvie scheduled a visit with her primary care provider, Dr. Zi, who examined her and scheduled a test.

“Let’s start with an x-ray. Then we can talk about what treatment would be best for you.”
Based on the test results, Dr. Zi recommended that Sylvie visit a surgeon called an orthopedist.

Sylvie had a lot of questions for Dr. Zi:

- Will I be able to play sports again?
- Do I really need surgery?
- Do I have other options?
- How do I pick a surgeon?
Your knee may improve with physical therapy. And we can get you some medication to deal with the pain. But we need a specialist to take a look at your test results to help you decide whether surgery would be best for you. I recommend an orthopedist named Dr. Veach.”
Sylvie went to see Dr. Veach, who reviewed the x-ray. Dr. Veach confirmed the tear in Sylvie’s knee.

“Sorry, Sylvie. I know this isn’t what you wanted to hear. But you’ll need arthroscopic surgery to repair the tear. My office can schedule the surgery at Local Hospital or University Hospital, which I’d prefer.”
Sylvie is eager to get back on the softball field. But she wants to make sure she’s making the decision that’s best for her in the long term. Sylvie also understands that surgery is costly, so she wants to be prepared for all of the expenses she’ll have to pay.

**What could Sylvie do?**

A. Follow Dr. Veach’s recommendation to get the surgery done at University Hospital.

B. Get a second opinion from another orthopedist.

C. Contact her health plan to find out what her out-of-pocket costs will be.

D. Do some research on the Web to compare the quality of surgical care from local providers.

E. Quit playing softball.
If Sylvie…

A: Follows Dr. Veach’s recommendation to get the surgery done at University Hospital

• While recovering from the surgery at home, Sylvie gets the bills for her share of the hospital and surgeon fees:
  • She learns that Dr. Veach is not included in her health plan’s network, so she has to pay 60% of the doctor’s charges.
  • University Hospital is in the network, but Sylvia still has to pay co-insurance equal to 20% of the charges.

• Altogether, Sylvie will have to pay more than $6,000 out of her own pocket.

• While Sylvie does her rehab exercises, she wonders whether she made the right decision. Then she cancels her vacation plans.
If Sylvie…

B: Gets a second opinion from another orthopedist

- Sylvie’s friend tells her to consult with Dr. Boven, who reviews the results of Sylvie’s imaging tests.
- He recommends getting the arthroscopic surgery done as an outpatient at a local surgical center rather than at one of the two hospitals.
- But Sylvie still doesn’t know which facility is best for her or what her costs will be.
If Sylvie...

C: Contacts her health plan to find out what costs she can expect

- Sylvie learns that the provider network includes Dr. Boven, but not Dr. Veach. Having Dr. Veach do the surgery would be expensive for Sylvie.
- Both the hospitals and the surgical center are “in-network.” But the surgical center would cost Sylvie less than either hospital.
- The plan refers to Local Hospital as a “Center of Excellence.” If Sylvie gets the surgery there, her co-insurance will be 10% rather than 20%.
- Sylvie has a better understanding of the costs now, but still wonders which facility will do the best job for her.
If Sylvie…

D. Does some research on the Web to compare the quality of surgical care from local providers

- Sylvie searches the Web for information on quality for surgical care. She finds a report that compares hospitals on how well they keep their patients safe from harm.
- Sylvie sees that Local Hospital does a better job than University Hospital of preventing infections and other complications in surgical patients.
- She can’t find any quality information about the surgical center.
If Sylvie…

E: Quits Playing Softball

Sylvie is not happy. And her knee still hurts.
What will you do next time you have a choice to make?
Get a second opinion so that you know your options.

Find out from your health plan which health care facilities are in the network AND what your out-of-pocket costs would be.

Look online for information on the quality of care so that you can be confident that the care will be effective, safe, and a good experience.

Take the time and make the effort to figure out what’s best for you.
Thank You
Learn more at www.forces4quality.org