

Don't pay more than you should— Shop, compare and save money.



You have choices when it comes to the cost of your health care.

- Shop, compare and estimate your medical costs.
- The quality and price of medical services can vary depending on where you go for office visits, imaging services, and surgery, including inpatient and outpatient care.
- Compare quality and cost before you go, and then decide what's best for your care.
- Cost estimates are based on your plan and where you stand with your deductible.¹ Your costs are lower after your deductible is met—pay only coinsurance or a copay for in-network services.
- You could save hundreds of dollars, or more on your health care services!

You have three easy ways to compare:



Click

bcbsfl.com to log in/register on MyBlueService. Select Estimate Costs for Medical Services.



Call

a Care Consultant at 1-888-476-2227.



Visit

us in-person at a Florida Blue center near you. For locations, go to floridablue.com.



- ✓ Quality
- ✓ Cost
- ✓ Savings

Cost Comparison Example*

IMAGING MRI, Scan or X-ray Select ankle, back, foot & more!	Your cost — before your your deductible is met
Imaging Facility A	\$797
Imaging Facility B	\$689
Imaging Facility C	\$1,569

Cost Comparison Example*

OFFICE VISIT Primary or Specialist Select allergy, cardiology, dermatology & more!	Your cost — before your your deductible is met
Health Care Provider A	\$181
Health Care Provider B	\$326
Health Care Provider C	\$177

Cost Comparison Example*

SURGERY Inpatient or Outpatient Select back, leg, pelvis & more!	Number of Procedures Per Year—based on the surgery you selected	Cost Range—your actual cost can be estimated by a Care Consultant
Health Care Facility A	600	\$21,710 - \$24,423
Health Care Facility B	500	\$17,752 - \$19,970
Health Care Facility C	300	\$13,197 - \$15,395

*On MyBlueService, you'll also see a detailed cost break down, plus the health care provider or facility name, phone number, address, credentials, quality programs, approvals if needed, and patient ratings when available.

¹Since surgery may involve multiple services and health care providers, you'll be able to compare cost ranges and then speak to our Care Consultants for actual cost estimates based on your plan.

Not all medications are alike— Know before you go to the pharmacy.



Find out ...

- **Is my prescription drug covered?** If not, discounts may be available through our BlueSaver program.
- **Is this a generic drug?** Great! You'll pay the lowest amount.
- **Is an authorization required first?** If so, your doctor will need to submit a Prior Authorization form.
- **Is a limited quantity covered per prescription?** If so, your plan will cover up to the 1 month maximum, and you can pay for more.
- **Is this a brand name drug?** Ask your doctor or pharmacist if there's a generic available that's right for you.
- **Is this drug in the Step Therapy program?** If so, ask your doctor about the alternative drugs that must be tried first?
- **Is this an oral or injectible Specialty drug?** Specialty drugs require prior authorization and must be obtained through Caremark Specialty Pharmacy at 1-866-387-2573.
- **Is this a diabetic supply?** Supplies such as blood glucose testing strips and tablets, lancets, glucometers, and acetone test tablets and/or syringes require a prescription that you can fill at your local pharmacy.
- **Is this a drug that you take ongoing?** If your plan has mail order, order up to a 3-month supply and pay less than monthly refills at your local pharmacy.

Find participating pharmacies at bcbsfl.com.

Get Answers ... to your questions AND compare drug costs based on YOUR PLAN.

 Log in at bcbsfl.com from a computer or mobile phone. Select **Compare Drug Prices**:

- Step 1.** Enter the drug name (or search by alphabet).
- Step 2.** Select pharmacies based on zip code.
- Step 3.** Compare prices and lower cost options, when available. Plus, see when Step Therapy, Prior Authorization or other requirements apply.



Cost to you
-based on
your plan

Prices are for: John Doe

Drug Name	Total Estimated Cost	Your Estimated Cost
LIPITOR (30) Tablet - 40MG		Step Therapy required
ZETIA (30) Tablet - 10MG		Step Therapy required
NIASPAN (30) Tablet Extended Release - 500MG	\$79.53	\$30.00
CRESTOR (30) Tablet - 10MG		Step Therapy required
pravastatin sodium (30) Tablet - 40MG	\$7.41	\$7.41
simvastatin (30) Tablet - 40MG	\$5.10	\$5.10
lovastatin (30) Tablet - 40MG	\$5.85	\$5.85

 Brand Drug
  Brand Therapeutic
  Refill mail order prescription on-line
 Generic Drug
  Generic Therapeutic
  Pharmacy mail order form (used to submit prescription by mail) (PDF)

Prefer to talk with someone?



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