

How to Guard Against the *Hidden Costs of Surgery*

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Surgery is stressful enough without worrying about the cost, which can be a complicated and frustrating process to understand — particularly in today’s health care environment, with health savings accounts and increasingly higher co-pays. Fortunately, surgical patients have more options than ever before to save money. Read these tips for ways to make your health care dollar stretch the furthest without sacrificing quality or convenience.

How Outpatient Surgery Centers Save Patients Money

Review your health care benefits structure. Many HMO and PPO insurance carriers offer lower copayments and percent share of cost if surgery is done in a free-standing outpatient center versus a hospital (inpatient) or a hospital outpatient department (HOPD). Typically, surgery done in the inpatient or HOPD setting costs the insurance carrier more money. If there are no extenuating reasons why your surgery cannot be done in a free-standing outpatient surgery center, you can save hundreds to thousands of dollars by choosing the more cost-effective facility type.

Check If Your Surgery Will Take Place in an “In-Network” Facility

Whether you are having surgery done in a free-standing outpatient surgery center or at the hospital, find out whether the facility has a contract with your plan. If the facility is uncontracted, inquire how they will handle your billing and how much you will be responsible to pay for the amount your plan will not cover. Facility bills will likely be the biggest expense related to your surgical experience. If the facility is not contracted, and you do not have a choice to choose another facility that is contracted, negotiate a rate with the facility in advance of your procedure. Remember, everything is negotiable. Also ask about payment plans.

Inquire About the “In-Network” Status of Your Surgeon and Anesthesia Providers

Although you will most likely know whether your surgeon is an in-network provider, you need to also determine whether the anesthesia provider scheduled to do your case is in-network as well. Frequently, patients do not have a choice of anesthesia providers. It’s frustrating getting stuck with a big anesthesia bill because of their contractual status with your health plan. Like the facility, it is important to check with the anesthesia group to determine whether you will be billed for amounts not paid by your insurance. If so, try to negotiate a discount or a payment plan to lessen the financial burden. You can also pressure your health plan to pay for anesthesia based on the fact that you had no control over who was assigned to provide anesthesia services for your case.