

# CIGNA Choice Fund®

## Medical Cost Worksheet

This worksheet can help you estimate health services costs for you and your covered dependents for the upcoming plan year. You can then enter these estimates into the Benefits Calculator to find out how much your CIGNA Choice Fund account will cover.

Begin by identifying health care services that you and/or your covered dependents expect to use in the upcoming year.

### Preventive Care Services

	# of episodes for you and all covered dependents	Average cost per episode <sup>1</sup>	Total estimated cost
Periodic wellness exam		\$115	
Preventive medicine (under age 18)		103	
Preventive medicine (ages 18-39)		116	
Preventive medicine (over age 39)		127	
Mammogram		130	
Pap smear		32	
Cholesterol test		16	
Vaccine – hepatitis		39	
<b>Preventive Care Services Subtotal</b>			

*If your Summary of Benefits indicates that preventive care services, such as wellness exams, immunizations and routine screenings, are covered in full, then you do not need to estimate these expenses. You can enter \$0 in the estimated amount for Preventive Care Services on the Benefits Calculator. If preventive care services are not covered in full, then you need to add preventive services to your calculation.*

### Other Health Care Services

	# of episodes for you and all covered dependents	Average cost per episode <sup>1</sup>	Total estimated cost
Allergy shots		\$29	
Chest X-ray		59	
Electrocardiogram – routine		48	
Electrocardiogram – stress test		192	
Glucose test		6	
Office visit – new patient		108	
Office visit – existing patient		66	
Ultrasound – pregnancy		159	
Ultrasound – other		119	
Urinalysis		4	
Vaccine – other (excluding childhood immunizations)		13	
Venipuncture (drawing blood)		6	
<b>Other Health Care Services Subtotal</b>			

<sup>1</sup> Costs are based on CIGNA rates, and not physician charges. Your actual charges may be higher or lower depending on the health care professional or facility and geographic location chosen.



## Health Conditions

	# of episodes for you and all covered dependents	Average cost per episode <sup>2</sup>	Total estimated cost
<b>Acute (Temporary) Illness:</b>			
Bronchitis		\$ 183	
Hemorrhoids – simple		528	
Kidney stone		3,883	
Migraine headache – common		665	
Pregnancy – normal delivery without C-section <sup>3</sup>		5,657	
Pregnancy – normal delivery with C-section <sup>3</sup>		8,769	
Tonsillitis, adenoiditis or pharyngitis without surgery		104	
<b>Recurrent (Repeated) Illness:</b>			
Allergic rhinitis		\$ 286	
Bursitis and tendonitis without surgery		350	
Carpal tunnel syndrome without surgery		462	
Depression – minor		1,539	
Gastritis/Esophagitis		806	
Irritable bowel syndrome		403	
Ulcer – simple		2,656	
<b>Chronic (Long-lasting) Illness:</b>			
Asthma		\$ 664	
Diabetes – Type II		1,334	
Hypertension – without other diagnoses		783	
<b>Health Conditions Subtotal</b>			

<sup>2</sup> The average episode cost is based on CIGNA rates and not physician charges for the above conditions and includes pharmacy costs associated with the condition for one episode. Your actual charges may be higher or lower depending on the health care professional or facility and geographic location chosen.

<sup>3</sup> Normal pregnancy and C-section costs are based on CIGNA HealthCare rates and not physician charges. Your actual charges may be higher or lower depending on the health care professional or facility and geographic location chosen.



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