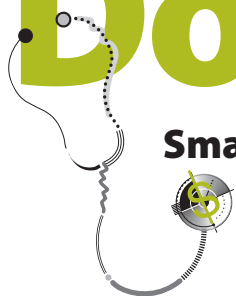


Dollars & Sense

Smart ways to decrease your out-of-pocket health care expenses.



1. Save on medications

Generic drugs

Generic drugs have the identical active chemical ingredients as the brand-name drugs – but can be much less expensive. Ask your doctor if there are generics available for any of the medicines you take. If there is not a generic equivalent for the medication your doctor is prescribing, ask if there are other drugs in the same class that could treat your condition and have a generic available.

Home delivery pharmacy

For medications you take regularly, you can usually save money by using your health plan's home delivery pharmacy. Home delivery prescriptions are also much more convenient since you can typically get a three month's supply mailed directly to your home.

To make switching to home delivery easy, call your doctor's office and request that they fax or mail a new prescription directly to your home delivery pharmacy. This can save you time and hassle in making the switch.

Drug list

A drug list is a list of medications covered under your benefit plan. You usually pay less if your doctor prescribes a medication that is on your plan's drug list.

Before visiting your doctor, call your plan and ask them if you pay less for medications on the drug list. If so, bring a copy of your drug list to your next doctor visit (most plans show their drug list on their website).

Over-the-counter drugs (*non-prescription drugs*)

Many medications that were once available only by prescription are now available without a prescription. Not only are over-the-counter medications convenient (because you don't need a prescription from your doctor) – they can also save you money. For example, the heartburn drug Prilosec costs about \$116 a month when purchased by prescription. The cost of a similar amount of the over-the-counter version is about \$25. (Be sure to ask your doctor if this could work for you.)

Keep in mind that most health plans do not reimburse for over-the-counter medications, though you may be able to use money from your Flexible Spending Account to cover the expense (see tip #6).

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Before you change your treatment, be sure to check with your doctor.

2. Talk to your doctor about your coverage

The care decisions you make with your doctor can make a big difference in your costs. For prescription drugs, your doctor often has more than one drug to choose from to treat your condition or illness. Though similar in effect, these drugs can vary greatly in terms of how much you will pay. By sharing your specific coverage, your doctor can determine whether there are any alternatives that can get you the care you need while protecting your wallet.

3. Antibiotics – be careful what you ask for

According to the Centers for Disease Control and Prevention, roughly 50 million unneeded prescriptions for antibiotics are dispensed each year. That costs us, both as a society and as individuals. These prescriptions are largely for colds, sore throats, sinusitis and bronchitis – conditions that, most of the time, are due to viruses. Treating viruses with antibiotics doesn't make you get better any faster and the side effects can actually make you feel worse. Additionally, overuse of antibiotics can lead to the development of drug resistant bacteria – a threat to everyone.

So if your doctor says you don't need an antibiotic, listen to what he or she is saying. It could help your health and your pocketbook.

4. Use in-network doctors, hospitals and facilities

Health plans negotiate rates with certain doctors, hospitals and facilities (such as radiology centers). When you use these “in-network” health care professionals, you can save a lot. When you don't, you often have to pay a higher amount. Additionally, you may have to pay any difference between your health plan's maximum reimbursement amount and your doctor's charges.

It's important to know that the “in-network” concept doesn't just apply to doctors. So if your doctor recommends that you visit a specialist, or sends you for a test or a hospital visit, you'll want to make sure that the facility or hospital you go to is in your health plan's network. You can find out which doctors and facilities are in-network by calling your health plan or checking their website.

5. Grab the phone before you grab your car keys

There may be times when you can avoid the hassle and expense of an in-person office visit with your doctor, while still getting the support you need.

Medication adjustments

If you are taking prescription medications and want to switch to home delivery or generic, often your doctor will write and fax new prescriptions directly to your local pharmacy and/or home delivery pharmacy without requiring you to spend the time, energy and money associated with a scheduled office visit.

Lab follow-ups

Doctors are often willing to discuss results of common lab tests such as a cholesterol screening over the phone. If the results are good, you may save yourself the time and money of an office visit. If the results require further treatment, you can then schedule an appointment as needed.

6. Use a Flexible Spending Account (FSA) to budget and save on your tax bill

Not only are flexible spending accounts a great way to help you budget for health-related costs and shave down your tax bill, but you can also use this kind of account to reimburse yourself for many expenses not covered by your health plan.

Covered expenses include:

- Medical expenses not covered by your health plan
- Prescription copays
- Dental care including basic check-ups as well as orthodontics, crowns and dentures
- Vision care including contact lenses and LASIK surgery
- Over-the-counter medications

For a complete listing of eligible expenses under your flexible spending account, check with your employer or account administrator, or visit www.irs.gov.

7. Go to the most appropriate place for your situation

Urgent Care vs. Same-Day Appointment

Your costs for Urgent Care visits are usually higher than your costs for a standard office visit. And while many people assume that the fastest way to get in to see a doctor is to head straight to an Urgent Care center, many doctors now hold open space for same day appointments to make sure that they are available to see their patients who need same-day attention. So, call your doctor's office first to see if you can schedule a same-day appointment. Not only can this save you money, but it can often mean getting in just as quickly, and avoiding long lines and overcrowded waiting rooms.

Retail Clinics

Retail clinics can offer convenient, quick and affordable access to care for common medical conditions such as strep throat, ear infections and minor burns. They are often located within department, drug or grocery stores. Most are open nights and weekends. Your health insurance may cover these visits, or offer them at discounted rates. Check your coverage documents for information.

Should I go to the Emergency Room (ER)?

Unfortunately this is a question that many people face at some point in their lives. The ER serves an important role in providing immediate care to people with serious, often life-threatening issues. However, many people go to the ER for issues that are much less serious. Not only can this slow down the Emergency Room's ability to help people with more serious illnesses or injuries, but it can also mean unnecessary costs for you.

If you're not sure whether you need to go to the ER, or whether Urgent Care or an office visit would be better alternatives, call your health plan's nurse line or your doctor's office. You can talk with clinically trained professionals about your symptoms and concerns, and they can help you understand whether a visit to the ER is necessary, or whether there are other alternatives to better address your situation.

Some common symptoms seen in ERs that may be better addressed during office visits or at an Urgent Care center include:

- Sore throat or cough
- Stuffy nose, sinuses
- Low back pain
- Child or infant fever

8. Read your medical bills

Whether it's an Explanation of Benefits, a bill from your health plan or a bill from the hospital, you'll be surprised how much you can save by checking your statements.

According to the Consumer Reports article entitled "Decoding your Hospital Bills" (12/2003), of "11,000 respondents who had reviewed their itemized hospital bills, 5 percent said they found major errors.

Respondents with out-of-pocket expenses of \$2,000 or more were twice as likely to have found billing errors.”

Though rarely a pleasurable task, reviewing your bills can deliver great financial rewards.

9. Heading to the hospital? If it's not an emergency, check with your health plan first

If you need to stay at a hospital, and your situation is not an emergency, call your health plan to ensure that the hospital you've chosen is in-network. Keep in mind that simply because your in-network doctor works at or has admitting privileges with that hospital, this does NOT mean that the hospital itself is in-network. So check the details with your health plan.

Additionally, your plan may be able to help you estimate what your expenses will be, based on the type of coverage that you have.

10. Where to go for an MRI or CT Scan

If you need to have an MRI or CT scan, planning ahead can help you save. Cost can vary greatly between different facilities, such as hospitals and outpatient centers. You probably have more choices than you think. But wherever you go, make sure that the facility is in your health plan's network.

11. An ounce of prevention

If you're living an active, healthy lifestyle and taking good care of yourself, you may think that a trip to the doctor is the last thing you need. Well, doctor's visits are for healthy people, too. It's important to think about preventive health – catching problems before they start. Proper immunizations, on schedule, can help prevent serious diseases for children and adults. Regular screenings for high blood pressure and cholesterol, diabetes, and other conditions can catch a problem before it becomes worse. For a list of recommended immunizations and screenings, and to find out how your plan may cover them, contact your benefits provider.

12. Get the most from what your health plan offers

Staying healthy doesn't have to break the bank if you use the no-charge or low-cost programs that are available through your health plan. For example, your health plan might offer a smoking cessation program with free nicotine replacement medication, or a program for weight management. Your plan also might offer discounts for health and wellness products and services, such as fitness club memberships, weight management programs, chiropractic care, massage therapy and more. You might even be able to hire a health coach for free! Some health plans offer free coaching services by telephone, from nurses, nutritionists, exercise experts, or professional counselors, and some also offer self-paced online coaching programs. Check to see what your health plan offers that can save you money while helping you stay healthy.

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