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## Colorado Medical Price Compare Overview and Frequently Asked Questions

Colorado Medical Price Compare ([www.comedprice.org](http://www.comedprice.org)) is a publicly available website that displays comparative price and quality information for health care services in Colorado. The website is intended to provide objective information that can be used by consumers as a tool to inform their health care purchasing decisions and for providers and facilities to benchmark their performance.

Price information on CO Medical Price Compare is derived from the Colorado All Payer Claims Database (CO APCD), a legislatively mandated database that collects claims information from commercial health insurance companies and public payers including Health First Colorado (Colorado's Medicaid Program). CO Medical Price Compare provides more robust data from more payers than any other database or public resource in the state.

The website shows the median price insurance companies and patients pay for specific services at specific facilities; provides a cost calculator to help patients estimate their own potential out-of-pocket share; and includes information on the quality of the services and facilities depicted. Actual prices may differ substantially depending on a patient's specific health insurance benefit package, current health status, and any complications or confounding health factors.

The initial launch of the website displays price and quality information for a limited number of hospital-based services:

- Total Knee Replacement
- Total Hip Replacement
- Uncomplicated Vaginal Birth
- Cesarean Birth

Ambulatory surgery centers and additional outpatient services like knee arthroscopy and colonoscopies as well as approximately 30 procedures including imaging services (MRI, CT scans, etc.) across a variety of facility types will be released in future updates. In addition, prices at the provider group level will eventually be incorporated allowing consumers to evaluate commonly used office based services such as annual check-ups and other preventive care services.



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## Frequently Asked Questions

Additional [Frequently Asked Questions](#) regarding CO APCD history, administration, privacy and security protections, data release processes and more can be found on [civhc.org](http://civhc.org). For additional questions, please contact [ColoradoAPCD@civhc.org](mailto:ColoradoAPCD@civhc.org).

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### Where does the price information come from?

The CO APCD, a legislatively mandated statewide claims database, is the source of the information available on the CO Medical Price Compare website.

Data displayed on CO Medical Price Compare reflect claims collected in the CO APCD for commercial plans (fully insured large group and individual plans) and Health First Colorado. To learn more about the CO APCD, [click here](#).

### What do you mean by “price”? How are the prices calculated?

Prices displayed represent the median total amount paid (by the insurance plan and the patient) for specific procedures performed at a particular facility. Price information displayed on the website is based on actual amounts paid for health care services and include facility, professional and any other payments made. The prices displayed on the website reflect both payer (private insurance or Medicaid) and patient paid (copay, coinsurance, deductible) amounts and total charged amounts for uninsured. (See below for more information on uninsured.)

### What can I expect to actually pay?

Actual prices for services may differ substantially depending on your specific health insurance benefit package, whether the provider/hospital is in your health insurance network, your current health status, and any complications or confounding health factors you may have. To assist you with determining your costs, a cost calculator (click on “My Price”) is available on the website that helps factor in your co-pays and deductibles. For more specific information on the price you might expect to pay, contact your health insurance company.

### Do the prices reflect payments made just to the hospital?

In general, the prices displayed on the site represent payments made to the hospital, professional payments to physicians and other health care providers, and payments for any “ancillary” services such as lab tests, transportation, etc. that are billed in addition to facility and professional fees for health care services. Patients have told us that they find this combined pricing information to be more helpful than separate prices for each component.

### Do the prices reflect all patients who got these procedures at these hospitals?

No. Currently, the CO APCD claims data that feeds CO Medical Price Compare includes Health First Colorado claims, claims from fully-insured, large-group insurers, and some self-funded claims from major commercial payers in Colorado. Although the CO APCD does contain claims for patients covered by Medicare Advantage plans, comprehensive Medicare claims data is not yet available and is anticipated to be included in future releases. Accordingly, the price information on the CO Medical Price Compare website does NOT reflect payments made for patients:

- Covered under the Medicare program or any commercially insured or Medicaid insured patients 65 or older.



- Covered under a small-group insurance plan (less than 50 employees) – NOTE: Payers have now begun to submit this claims to the CO APCD and they will be reflected in a subsequent update of the website.
- Covered under a self-insured business exempted from submission (for more information regarding self-insured submissions, [click here](#)).
- Non-Colorado residents

In addition, the some claims data for services provided may have been eliminated due to missing or incomplete information submitted by a particular health plan and is not included in the price calculations.

Finally, “outlier” payments (e.g., \$0 amounts and unusually high or low dollar amounts) have been eliminated to reduce the risk that exceptional cases will skew the price calculations. See below for more information on treatment of outliers.

### Where do the uninsured prices come from?

Claims are submitted to the CO APCD with both paid as well as charged amounts. Uninsured prices displayed represent median charged amounts, and do not reflect any discounts that are available to self-pay patients under Colorado law. Uninsured patients can use charged amounts as a starting point for discussions with providers.

### If I don't have insurance, will I have to pay the full price listed on the website?

The price listed on the website represents charged amounts and do not reflect any discounts hospitals and providers may provide patients without insurance. The charge amount is provided as a starting point for uninsured patients to identify variation between hospitals and to use to discuss prices with a hospital or provider.

### Why are some facilities listed as “Under Review?”

Facilities that are listed as under review are currently working with CIVHC to ensure the data reflected for their facility is as accurate as possible based on current claims in the CO APCD. Prices for facilities under review are likely to become available when the review process is completed.

### Why don't prices for some facilities include professional fees paid?

Kaiser Permanente is the health insurance payer for a large portion of patients undergoing hospital- based procedures at those particular hospitals. Because Kaiser does not operate on a fee for service basis, the CO APCD does not have claims for professional services (e.g., physicians) provided in the hospital setting. We continue to work with Kaiser Permanente to identify a solution that will allow comprehensive reporting of prices paid for services reimbursed by Kaiser Permanente.

### Why isn't pricing information available for all facilities?

In order to be displayed, facilities have to meet a minimum threshold of 11 or more claims for



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each procedure by payer type (e.g., Medicaid or commercial insurance payer) after we have excluded “outlier” payments (i.e., \$0 amounts and unusually high or low dollar amounts). This threshold is consistent with Centers for Medicare & Medicaid Services (CMS) guidelines regarding minimum cell size suppression. As more data is incorporated into the database (including Medicare and self-funded plan data), more facilities will satisfy this threshold and be appropriate for and included in public reporting.

### **Why aren't prices available for facilities that do a large number of services?**

As explained above, in order to be displayed, facilities have to meet a minimum threshold of 11 or more claims for each procedure by payer type (e.g., Health First Colorado or Commercial). Sometimes a facility may have many more than 11 claims for a procedure submitted to the CO APCD but because of the way the claim was originally submitted it does not get properly attributed to that facility. CIVHC continually works with payers and providers to improve the quality of the claims data submitted and identify discrepancies. Over time, more facilities will be reflected in the public reports.

### **Do outlier payments skew the underlying data and the price calculations?**

#### **What happens with “special” cases where payments may be abnormally low, or extremely high due to the type of case, or when an incorrect payment was made?**

Outlier payments (\$0 and unusually high and low dollar amounts) are excluded from the calculations to minimize the potential to skew the information. More specifically, \$0 amounts and the highest two percent and lowest two percent of payments are removed before calculating the median and most likely range of prices. Two percent was chosen as the threshold for removing outliers based on statistical analysis of the data and a desire to retain as much information as possible to support the price calculations.

### **Don't some facilities serve sicker patients which makes their payments and prices higher than other hospitals?**

Payments and prices can be higher or lower depending on the relative health status of patients receiving care. The *Patient Complexity Rating* or average illness burden score (e.g., above average, average, below average) available on the website provides comparative information about the health status of patients receiving a service at a specific facility.

It is important to note that the price information on the website is **not** adjusted based on the complexity of the patients seen at each facility. The prices reflect actual payments made regardless of the health status of the patients. The *Patient Complexity Rating* included on the website provides consumers with additional information regarding relative health status of patients when evaluating differences in prices across hospitals.

For more details on patient complexity, please see CIVHC's [Risk Adjustment Definitions and Methodology](#).

### Isn't the quality of care important too?

#### Price is just one factor to consider when selecting a health care provider.

Yes. Price isn't the only factor consumers should consider when selecting a health care provider. To identify a high-value provider, both the price and the quality of the service provided should be considered. A table of quality indicators by facility is available on the website to allow consumers to make more informed value-based decisions. It includes information from the Colorado Hospital Report Card and the Colorado Department of Public Health and Environment, as well as patient experience information from the Medicare Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey.

### How can I find out how many of these procedures a hospital does?

The website contains a link providing the number of procedures hospitals displayed on the website do for each service listed. The volume information is self-reported and comes from the Colorado Hospital Association's discharge data set. It includes both the total volume for each service (including patients with all insurance types, including Medicare) and the volume for private/commercially insured patients only.

Also included with the volumes is a Data Completeness Score which is an indicator of the proportion of a hospital's total commercial/private insurance volume of each particular event that is currently in the CO APCD data reported on this website. Quartile categories are used to describe this completeness with scores ranging from C1 to C4 with C4 being the most complete. Lower scores indicate that a greater degree of caution should be used in data interpretation.

#### Data Completeness Score key:

- C0 = 0% of Total Volume for this Facility - Prices will not be displayed on this website
- C1 = 25% or less of Total Volume for this Facility is included in the data on this website
- C2 = 26-50% of Total Volume for this Facility is included in the data on this website
- C3 = 51-75% of Total Volume for this Facility is included in the data on this website
- C4 = greater than 75% Total Volume for this Facility is included in the data on this website

Data Completeness Scores will move towards C4 levels for commercial payers in the future.

### Do facilities have a chance to validate their information before it is posted on the website?

Yes. CIVHC provides facilities an opportunity to validate their information 30 days prior to publication on the website. In addition, we hold informational calls and speak to facilities one on one to answer questions and address concerns.

### What's different about the information on this website from what I can learn on my insurer's own site?

If you currently have health insurance, your insurance company's website may provide you with more detailed prices based on your particular benefit package. The CO Medical Price Compare site displays median prices across all commercial plans and Medicaid, and provides more specific



pricing for individual commercial health plans when available (see “Cost Calculator” after clicking on a hospital name).



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### **Don't other websites display price information for Colorado hospitals?**

Some websites show hospital charges which are not the same as prices for services. Many of these sites use Medicare charges which are publicly available or use self-reported data from hospitals. Hospitals negotiate rates with health insurance companies based on charges, so the charged amount is very rarely the same as the amount that actually gets paid by a health plan. The prices on CO Medical Price Compare represent the amounts that were paid by both the insurance company and any contribution made by the patient. No other website contains paid amounts across all payer types in Colorado.

