

Allowances for Preventive Services and MRIs

If you are enrolled in a Mohawk Industries Health plan, you will have an allowance for preventive mammograms, colonoscopies, CT Scans and all MRIs.

So, what does this mean?

When your doctor recommends a preventive mammogram, colonoscopy, CT Scan or a general MRI, check to make sure the cost is under the allowance so that you don't have more out-of-pocket expenses.

- Call the **Referral Coordinator** at 855-566-4295
- Call the **Healthy Life Team** at 855-733-4295, option 4
- Cigna at 855-566-4295 or mycigna.com
- **You can also ask your doctor about the cost.**

If you elect to have a MAMMOGRAM or COLONOSCOPY that is more than the allowance, you will be responsible for covering the remaining cost. This cost will not be applied to your annual deductible or out-of-pocket maximum.

For MRIs and CT Scans, once you have met your deductible, Cigna will pay 80% per procedure up to the allowed amount, you will be responsible for any remaining cost.

*ALLOWANCE:

Preventive Mammogram: \$225

Preventive 3D Mammogram: \$285

*ALLOWANCE:

Preventive Colonoscopy: \$2,250

*ALLOWANCE:

All MRIs: \$2,300 (after deductible is met)

CT Scans: \$2,000 (after deductible is met)

**Allowances are based on national average costs for these diagnostic services*

Let's do the Math

MAMMOGRAM EXAMPLE

| | |
|--------|-------------------------|
| \$300 | Example Diagnostic Cost |
| -\$225 | Allowance |
| <hr/> | |
| \$ 75 | Employee Owes |

Make sure the diagnostic center is coding your procedure correctly. If not, you may have to pay out-of-pocket. See codes below.

PROCEDURE CODES

Mammogram codes:

Cigna: 77065, 77066, G0202, 7763, 77067

Colonoscopy codes:

Cigna: 45378, G0105, G0121

