



CENTER FOR IMPROVING
VALUE IN HEALTH CARE

CPT4 MARKET RATE ANALYSIS

Colorado All Payer Claims Database

Curious how **payments for health care procedures (CPTs) vary by market** and how those payments compare to Medicare reimbursements? Ever wonder how much those **payments vary depending on the health insurance payer** and by region in CO?

The Colorado All Payer Claims Database (CO APCD) **CPT4 MARKET RATE ANALYSIS** can help you understand **average and median payments for the top CPTs** being billed in the state by payer, region, and **compared to Medicare fee schedules**, giving you access to a business intelligence tool you can use to make strategic operational decisions.

Specialties available:

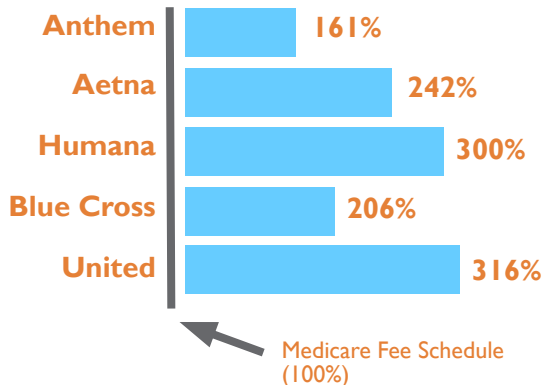
- Dermatology
- Family Medicine
- Emergency Medicine
- General Practice
- Internal Medicine
- Obstetrics & Gynecology
- Pediatrics
- Radiology
- and many more!

Determine market-specific (county or zip) average and median paid amounts across Commercial, Medicaid and Medicare Advantage for top CPT codes by specialty

(% of Medicare)

Office visit	\$165	(161%)
X-ray - wrist	\$220	(257%)
Glucose test	\$80	(220%)
Lipid panel	\$70	(178%)
CAT Scan	\$560	(215%)

Compare median and average paid amounts as a percentage of Medicare fee schedule (2012-2016 selections available)



Drill down to understand how payments vary by Commercial payers in Colorado as a percent of Medicare fee schedule

Physician groups and payers are using this information to benchmark paid amounts for specific counties and zip codes of interest. This data can help reduce variation in health care costs by enabling stakeholders to understand median and average payments for procedures in their market and evaluate how they compare.

Contact us to schedule a demo today! • coloradoapcd@civhc.org • 720-583-2095