

No Surprises Act/Good Faith Estimate

In compliance with the No Surprises Act that went into effect January 1, 2022 under Section 2799B-6 of the Public Health Service Act, all healthcare providers are required to notify patients of their Federal rights and protections against potential “surprise billing.”

This Act currently affects those patients who are uninsured, not covered by a Federal Healthcare Program, or who have insurance, but have elected not to use it. Those patients who wish to submit claims to insurance are not currently required to get this notice at this time. Under the law, health care providers must give eligible patients an estimate called, a “Good Faith Estimate”, explaining how much their medical care will cost.

- Patients have the right to receive a Good Faith Estimate for the total expected cost of any non-emergency items or services. This includes related costs like medical tests, prescription drugs, equipment, hospital fees and psychotherapy.
- Patients must be provided with a Good Faith Estimate both orally and in writing, upon request or at the time of scheduling health care items and services.
- If a patient receives a bill that is at least \$400 more than the Good Faith Estimate, they can dispute the bill by contacting their therapist or Health and Human Services (HHS).
- Patients should make sure to save a copy or picture of Good Faith Estimate. For questions or more information about a patient’s rights to a Good Faith Estimate, visit www.cms.gov/nosurprises or call 800-985-3059.

