

No Surprises Act

DEPARTMENT OF HEALTH AND HUMAN SERVICES, Centers for Medicare & Medicaid Services: Center for Consumer Information and Insurance Oversight located at 200 Independence Avenue, SW, Washington, DC 20201

Starting on January 1, 2022 the No Surprise Act (NSA) protects uninsured or self-pay individuals from many unexpected high medical bills. The Act requires that health care providers and facilities give uninsured or self-pay individuals an estimate for the cost of their health care before the individual agrees to get service.

No Surprises: What is a good faith estimate? If you don't have health insurance or you plan to pay for health care bills yourself, generally, health care providers and facilities must give you an estimate of expected charges when you schedule an appointment for a health care item or service, or if you ask for an estimate. This is called a "good faith estimate."

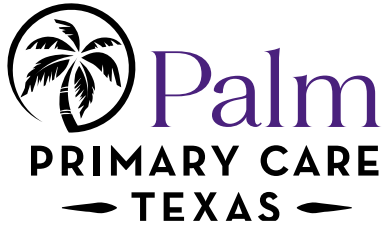
A good faith estimate isn't a bill - The good faith estimate shows the list of expected charges for items or services from your provider or facility. Because the good faith estimate is based on information known at the time your provider or facility creates the estimate, it won't include any unknown or unexpected costs that may be added during your treatment. Generally, the good faith estimate must include expected charges for:

- The primary item or service
- Any other items or services you are reasonably expected to get as part of the primary item or service for that period of care.

The estimate might not include every item or service you get from another provider or facility, even if some items or services may seem connected to the same service

Your right to a good faith estimate - Providers and facilities must give you the good faith estimate:

- After you schedule a health care item or service. If you schedule an item or service at least 3 business days before the date you'll get the item or service, the provider must give you a good faith estimate no later than 1 business day after scheduling. If you schedule the item or service OR ask for cost information about it at least 10 business days before the date you get the item or service, the provider or facility must give you a good faith estimate no later than 3 business days after you schedule or ask for the estimate.
- That includes a list of each item or service (with the provider or facility), and specific details, like the health care service code.
- In a way that's accessible to you, like in large print, Braille, audio files, or other forms of communication.



Providers and facilities must also explain the good faith estimate to you over the phone or in person if you ask, then follow up with a written (paper or electronic) estimate, per your preferred form of communication.

Keep the estimate in a safe place so you can compare it to any bills you get later. After you get a bill for the items or services, if the billed amount is \$400 or more above the good faith estimate, you may be eligible to dispute the bill.

Have questions? Visit [CMS.gov/nosurprises](https://www.cms.gov/nosurprises), or call the Help Desk at 1-800-985-3059 for more information. TTY users can call 1-800-985-3059.

Resources: https://www.cms.gov/ccio/resources/regulations-and-guidance#Good_Faith_Estimates

No Surprises Act – Good Faith Estimates 1/1/2022