

No Surprises Act

Under Section 2799B-6 of the Public Health Service Act (January 1, 2022), health care providers are now required to give patients who do not have insurance, or who are not using insurance, an estimate of the bill for medical items and services. This law, known as the No Surprises Act (NSA) is designed to protect patients against unexpected (or surprise) bills. A surprise bill is one sent to the patient with insurance who does not know they received medical services from one or more healthcare providers who are out of network or who do not participate in the patient's insurance.

What does this mean? Providers are required to tell patients about the No Surprises Act and provide a Good Faith Estimate to patients who are uninsured or elect not to use their insurance (i.e., self-pay). A "Good Faith Estimate" explains how much your medical care here will cost based on the services we have discussed.

- You have the right to receive a Good Faith Estimate for the total expected cost of any non-emergency items or services you will receive. This includes related costs like medical tests, prescription drugs, equipment, and hospital fees. (As a licensed clinical psychologist, I am providing you with a Good Faith Estimate for the costs of our expected psychotherapy sessions).
- I am now required to give you a Good Faith Estimate in writing at least 1 business day before your service. You can also ask me, and any other provider you choose, for a Good Faith Estimate before you schedule a service.
- If you receive a bill that is at least \$400 more than your Good Faith Estimate, you can dispute the bill.
- You will receive a personalized Good Faith Estimate from me if we begin treatment together. Make sure to save a copy or picture of your Good Faith Estimate. For questions or more information about your right to a Good Faith Estimate, visit www.cms.gov/nosurprises or call 1-800-985-3059 to reach the "No Surprises Help Desk".