

No Surprises Act

Starting on January 1, 2022, the No Surprises Act (NSA) protects uninsured (or self-pay) individuals from many unexpectedly 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 the item or service.

If the uninsured (or self-pay) individual is billed for an amount at least \$400 above the estimate, the individual may be eligible to start a Patient-Provider Dispute Resolution (PPDR) process by submitting a request to the Department of Health and Human Services (there is a small administrative fee for this) This company will decide if the estimated amount, or billed amount, or another amount in between the estimated amount and the billed amount should be paid.

Here is the website for Good Faith Estimate (read in its entirety for the whole process):

https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Good-Faith-Estimate-Patient-Provider-Dispute-Resolution-Process-for-Uninsured-or-Self-Pay-Individuals.pdf

Good Faith Estimates for Uninsured (or Self-Pay) Individuals and Out of Network Insurances

You are generally considered an uninsured or self-pay individual if you do not have health insurance, or do not plan to use your insurance to pay for a medical item or service. If you are an uninsured or self-pay individual, a provider or facility must give you a "good faith estimate" detailing what you may be charged **before** you receive the item or service.

Here at Living Well, we guarantee we will provide you a Good Faith Estimate Form before your first appointment, to ensure you have enough time to ask any questions you have.

For questions on fee's, please see the Front Desk.

For more detailed information on the No Surprises Act:

https://www.cms.gov/nosurprises/policies-and-resources/overview-of-rules-fact-sheets