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No Surprises Act and Good Faith Estimate Notice

Under the Section 2799B-6 of the Public Health Service Act, health care providers need to give patients who don't 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 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.
- Patients can receive surprise medical bills for emergency or non-emergency services. In an emergency, people usually seek care at the nearest emergency department. But, if they go to an in-network hospital, there is a chance they could get care from an out of network provider. The NSA protects patients who go to non-participating emergency departments.
- For non-emergency care, people might choose an in-network provider, not knowing that another provider involved in their care (i.e., radiologist or anesthesiologist) is out of network.
- Balance billing is the difference between charges that are allowed, such as discounted charges negotiated between providers and insurance companies, and the provider's full charge.
- The NSA prevents non-participating or out of network providers and healthcare facilities from balance billing patients under specific circumstances without letting them know and getting their consent.

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).

You have the right to receive a "Good Faith Estimate" explaining how much your medical care will cost.

- You 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, and hospital fees.
 - A Good Faith Estimate is not binding or a contract, it is just that, an estimate of potential costs.
 - If you are eligible for a Good Faith Estimate, make sure your health care provider gives you a Good Faith Estimate in writing at least 1 business day before your medical service or item, unless it is scheduled less than three days in advance. You can also ask your health care provider, and any other provider you choose, for a Good Faith Estimate before you schedule an item or service.
 - If you receive a bill that is at least \$400 more than your Good Faith Estimate, you can dispute the bill.
 - 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**

Please contact our office if you have any questions about the Good Faith Estimate, our fees, or our billing procedures.