

No Surprises Act

What are Surprise Bills?

If you are insured and receive care from an out-of-network provider, your health plan may not cover the entire out-of-network cost. This can leave you with out of pocket costs that more than if you had received care from an in-network provider. "Surprise" medical bills are unexpected costs to a patient from an out-of-network provider.

How are you protected from surprise bills when you have health insurance?

- 1. Surprise bills are banned for emergency services from out-of-network providers.
- 2. For all emergency and some non-emergency care, you cannot be charged more than in-network rates for cost-sharing (coinsurance or copayments) and the payment will count towards your deductible and out-of-pocket limits.
- 3. Out-of-network charges are banned for supplemental care providers (such as radiology or anesthesiology) who work at certain in-network facilities (like a hospital or ambulatory surgery center).
- 4. Health care providers and facilities must provide a notice stating that there are higher costs with out-of-network care and how these costs might be avoided. You do not have to sign this notice or get out-of-network care.
- 5. If you have out-of-network benefits in your insurance plan, you can choose to go to an out-of-network provider at an in-network facility, but cannot be billed more than in-network cost sharing amounts, unless you sign a consent to getting out-of-network care and agree to the additional cost(s).

How are you protected from surprise bills if you do not have health insurance?

- 1. A written "good faith estimate", will be provided upon request, before you get care.
- 2. You may file a dispute if you are charged more than \$400 over your estimate.

What are the exceptions to these protections?

- 1. This does not apply to vision- or dental-only plans.
- 2. This does not apply to ground ambulance services.
- 3. You're already protected against surprise medical billing if you have coverage through Medicare, Medicaid, Indian Health Services, VA or Tricare. These rules do not apply to these insurances.