

## Notice of Right to Receive a Good Faith Estimate of Expected Charges Under the No Surprises Act

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

Under the law, health care providers need to give clients who don't have insurance or who selfpay for their services an estimate of the bill for health care items and other services.

You have the right to receive a Good Faith Estimate for the total expected cost of any nonemergency items or services, including therapy services.

Ensure your health care provider gives you a Good Faith Estimate in writing at least one business day before your services begin. 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 or call the U.S. Department of Health and Human Services (HHS) at 1-800-985-3059.