

Good Faith Estimate Notice

The “Good Faith Estimate” must be prominently displayed on the website and in the office where scheduling or questions about the cost of services occur.

You have the right to receive a “Good Faith Estimate” explaining how much your health care will cost.

Under the law, Health care providers need 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 is called a Good Faith Estimate.

- You have the right to receive a Good Faith Estimate for total expected cost of any health care items or services. The Good Faith Estimate shows the total expected cost of any non-emergency items or services and equipment.
- You may request a Good Faith Estimate in advance of an already scheduled health care service or item, or before scheduling 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 or the dispute process, visit www.cms.gov/nosurprises or call 1.800.985.3059.