

Congress enacted the No Surprises Act (the Act) to protect patients from costly, unexpected medical bills. The regulation applies to health care providers, including audiology and speech-language pathologists.

However, the provision only applies to patients without insurance or self-paying where the provider is considered out-of-network.

Impact on Audiology and Speech-Language Therapy Services

Beginning January 1, 2022, audiologists and speech-language pathologists (SLP) are required by the Act to provide a Good Faith Estimate to every new and established patient who is either seeking care as a self-pay patient or is considered out-of-network with their insurance. The Faith Estimate is the best judgment of the cost of care and is intended to be a good faith estimate to the patient across the episode of care.

To protect patients, the law also requires that the provider's Good Faith Estimate must be within \$400 of the actual charge(s) for the service(s) the provider completes.

The threshold for "substantially in excess" means that the actual charges exceeded the expected charges by at least \$400 of which the provider was not in the Good Faith Estimate. If this occurs, a patient who is not using insurance has the right to challenge the bill through the dispute resolution process.

The "substantially in excess" provision applies to the per-episode of care cost, not opposed to the total plan of care cost.

If you believe you've been wrongly billed, you may contact your state or the

Federal: Call the No Surprises Help Desk at 1-800-985-5347, file a complaint online at www.cms.gov/nosurprises/consumers/medical-bill-disagreements-if-you-are-self-pay or start a dispute online at www.cms.gov/nosurprises/consumers/medical-bill-disagreements-if-you-are-self-pay.

Visit www.cms.gov/nosurprises/consumers for more information about your rights under federal law.