

# PATIENT PROTECTIONS FROM SURPRISE MEDICAL BILLS

How the No Surprises Act is helping patients avoid financial devastation

## What is the No Surprises Act?

On January 1, 2022, a new federal consumer protection law known as the **No Surprises Act** (NSA) went into effect. This law protects patients from receiving surprise medical bills for unexpected out-of-network care, and removes them from payment disputes between their healthcare providers, facilities and health plans.

The law applies to patients who get health insurance through their employer, the Health Insurance Marketplace ([Healthcare.gov](https://www.healthcare.gov)), or an individual health insurance plan purchased directly from an insurance company. Patients who have Medicare, Medicaid or other public insurance plans are already protected from surprise billing practices.

The law protects patients from several distressing practices that include:

- Surprise bills for emergency services, even if you get them out-of-network and without approval beforehand (prior authorization).
- Out-of-network cost-sharing (like out-of-network coinsurance or copayments) for all emergency and some non-emergency services. Patients cannot be charged more than their in-network cost-sharing for these services.
- Out-of-network charges and balance bills for supplemental care (like anesthesiology or radiology) by out-of-network providers who work at an in-network facility.

In addition, healthcare providers and facilities are required to give patients a [notice](#) explaining that getting care out-of-network could be more expensive. Patients are not required to sign this notice or get care out-of-network. For more information, visit [CMS.gov/nosurprises](https://www.cms.gov/nosurprises)

## Patient Protections Under the No Surprises Act

Patients will only be responsible for paying their in-network rate if they received:

- Care in an emergency room
- Emergency transportation by air ambulance (NOT ground ambulance)
- Inpatient care following an emergency visit (known as "post-stabilization services")
- Non-emergency care at an in-network facility by out-of-network providers (or ancillary providers, i.e., pathologists, anesthesiologists, radiologists, lab or imaging centers)

Patients have a right to know if their doctors are out-of-network.

If a patient is uninsured or consents to receive care from an out-of-network provider, they have a right to know the estimated costs of care (a good faith estimate) 72 hours before care is provided.

## Despite New Protections, Patients Still Need Additional Support

We applaud the enactment of the NSA as a strong public policy solution that pulls patients out of the middle of billing negotiations between health plans and providers. There is concern, however, that the implementation of the new law may lead to more confusion for patients as they may not fully understand their rights and can still receive surprise medical bills, despite protections. Having access to navigators and educational resources may help patients better understand the new rules, and give them an opportunity to ask questions or seek further clarification about in-network status and estimated costs and its impact on their finances.

**In 2020, 30% of patients contacted Patient Advocate Foundation because of issues with medical bills.**

PAF Annual Impact Report, 2020

### NPAF Advocates For:

1

Clear communication and broad dissemination of information explaining patient rights and protections available under the No Surprises Act to improve patient understanding and prevent unfair out-of-network billing practices.

2

Frequent and up-front cost of care conversations between patients and their care team as a standard of practice to identify affordability concerns and provide referrals to *Needs Navigation* services.

### What You Can Do:

Visit [PatientAdvocate.org](https://PatientAdvocate.org) and check out [Patient Advocate Foundation's latest FAQ](#), outlining the new patient protections under the No Surprises Act. It also details how to recognize and handle a surprise medical should you still receive them.

**#NPAFProTip:** Consider sharing the FAQ with patient and caregiver support groups, your doctor's offices and your broader network to help patients understand their rights.