

DECEMBER 2021

SURPRISE BILLING POLICIES EFFECTIVE JAN. 1, 2022

The following No Surprises Act (NSA) provisions go into effect on Jan. 1, 2022.

Patient Balance Billing Protections: Providers may not balance bill patients for certain out-ofnetwork services including emergency care, post-stabilization services, and certain scheduled services, when the provider is out-of-network but the facility is in-network.

Notice and Consent Process: In some cases, providers may request patient consent to waive surprise billing protections and balance bill the patient. Providers must follow specific requirements outlined in the NSA and implementing regulations, including the use of standardized notice and consent forms available here: CMS-10780.

Federal Independent Dispute Resolution (IDR) Process: The NSA established an IDR process for providers/facilities and plans/issuers that cannot reach an agreement on out-of-network reimbursement for items or services subject to NSA protections and delivered on or after Jan. 1, 2022. There is a federal IDR portal, available <u>here</u>, where stakeholders can find more information, and initiate and complete the IDR process.

Uninsured/Self-Pay Good Faith Estimates (GFE): Providers must furnish GFEs of expected charges to uninsured/self-pay patients scheduling services three or more days out, or upon request. The GFE must include all items and services expected during the period of care, be calculated using self-pay rates, and reflect any discounts available to the patient (e.g., financial assistance). Each provider is responsible for generating their own GFE. The provider responsible for scheduling the primary service (convening provider) is responsible for coordinating estimates from providers billing separately from the convening provider (co-provider) into a single, comprehensive GFE by Jan. 1, 2023.

Patient-Provider Dispute Resolution Process: Uninsured/self-pay patients who receive a bill from a provider/facility for charges of \$400 or more than the provider/facility's GFE may initiate a dispute resolution process to assess the appropriateness of the increase.

Public Disclosure of Patient Rights: Providers/facilities must notify patients, both in writing and verbally, of their balance billing rights and the uninsured/self-pay GFEs. Providers/facilities also must post a disclosure of patients' rights on their websites and in their offices or facilities. The federal government provided a model disclosure form here: <u>CMS-10780</u>. Illinois providers/facilities must modify this disclosure by including information related to patient protections under the State's surprise billing law, <u>PA 096-1523</u>.

Resources: IHA resources to assist with NSA implementation are on IHA's <u>Price Transparency</u> and <u>Education</u> websites. These include a <u>webinar</u> describing hospital requirements under the NSA (password: dVvhPxw6), a regularly updated FAQ <u>document</u>, and summaries of NSA implementing regulations. The American Hospital Association also has a Surprise Billing <u>website</u> to assist AHA members with NSA implementation.