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**No Surprises Act – Balance Billing and
Availability of Good Faith Estimate for Uninsured and Self-Pay Patients**
January 1, 2022

Background – Effective January 1, 2022 the federal government enacted the “No Surprises Act,” which requires health care facilities and provider offices to comply with updated balance billing requirements as well as to provide a Good Faith Estimate (GFE) to an uninsured or self-pay patient upon request or upon scheduling with at least 3 days in advance of appointment.

Part 1- Requirements related to balance billing –

Applies to emergency and ancillary services
Patient notice and consent needed for out of network providers
Created independent federal dispute resolution process for out of network care payment amount

Part 2 – Good Faith Estimate (GFE) – Uninsured and Self-Pay Patients

All providers, regardless of setting, must provide uninsured or self-pay patients with a GFE for services upon requestor upon scheduling care at least 3 days in advance. The uninsured or self-pay GFE is a separate requirement from the balance billing patient protections and applies to any clinician that is providing patient care under their license, including physician office visits.

The practice has a GFE Health Care Services Template for Uninsured and Self-Pay Patients

Uninsured and Self-Pay Patients may make a request for a Good Faith Estimate for kidney care services.

A verbal response will be issued to the patient within three business days, and a written response will be mailed to the patient’s address thereafter.