

## Good Faith Estimate

**You have the right to receive a "Good Faith Estimate" explaining how much your Health care will cost**

**- this estimate is for private pay clients only**

Under the law, healthcare providers need to give **patients who don't have certain types of healthcare coverage or who are not using certain types of healthcare coverage** an estimate of their bill for healthcare items and services before items or services are provided.

You have the right to receive a good faith estimate for the total expected cost of any healthcare items or services upon request or when scheduling such items or services this includes related costs like medical test, prescription drugs, equipment and hospital fees.

**- At Child's Play Therapy, this includes the private pay cost for therapy and evaluations.**

If you schedule a health care item or service at least three business days in advance, make sure your healthcare provider or facility gives you a good faith estimate in writing within one business day after scheduling. You can also ask any healthcare provider or facility for a good faith estimate before you schedule an item or service. If you do, make sure the healthcare provider or facility gives you a good faith estimate in writing within three business days after you ask.

If you receive a bill that is at least \$400 more for any provider or facility than you are good faith estimate from that provider or facility, you can dispute the bill.

Make sure to save a copy or picture of your good faith estimate and the bill.

For questions or more information about your right to a good faith estimate, visit [www.cms.gov/no-surprises/consumers](http://www.cms.gov/no-surprises/consumers), email [FederalPPDRQuestions@cms.hhs.gov](mailto:FederalPPDRQuestions@cms.hhs.gov), or call 1-800-985-3059.