

Good Faith Estimates for Uninsured (Self Pay) Quick Reference Guide

R1 Advisory & Assurance, Regulatory Group

Background. The No Surprises Act provides federal protections against surprise billing under many of the circumstances in which surprise bills arise most frequently. Surprise billing occurs when an individual receives an unexpected medical bill from a health care provider or facility after receiving medical services. The No Surprises Act amended the Public Health Service Act to require providers and facilities to furnish a good faith estimate ("GFE") of expected charges, upon request or upon scheduling an item or service, to an uninsured or self-pay patient. On October 7, 2021 the relevant agencies promulgated regulations to assist providers and facilities in understanding their compliance obligations related to GFEs. The R1 Advisory & Assurance, Regulatory Group has created this document to assist our customers in understanding these new rules.

	Convening Provider	Co-Provider	Convening Facility	Co-Facility
Scope	Physician or other health care provider	Physician or other health care provider	An institution (e.g., hospital, laboratory)	An institution (e.g., hospital, laboratory)
Definition	Responsible for providing the GFE to an uninsured (or self-pay) individual per the following:	Provider that furnishes items or services that are customarily provided in conjunction with primary items or services and:	Responsible for providing the GFE to an uninsured (or self-pay) individual per the following:	Facility that furnishes items or services that are customarily provided in conjunction with primary items or services and:
	✓ Requests Prior to Scheduling: When the Provider receives the initial request for a good faith estimate (GFE).	✓ Requests Prior to Scheduling: Did not receive initial request from patient for GFE.	✓ Requests Prior to Scheduling: When the Facility receives the initial request for a good faith estimate (GFE).	✓ Requests Prior to Scheduling: Did not receive initial request from patient for GFE.
	✓ Requests when Scheduling: When the Provider is responsible for scheduling the primary item or service.	✓ <u>Scheduled Services</u> : Is not responsible for scheduling the primary item or service.	✓ <u>Requests when Scheduling</u> : When the Facility is responsible for scheduling the primary item or service.	✓ <u>Scheduled Services</u> : Is not responsible for scheduling the primary item or service.
		*If an individual separately schedules or requests a GFE from a co-provider, that provider is now a convening provider.		*If an individual separately schedules or requests a GFE from a co-facility, that facility is now a convening facility.
Patient Coverage	✓ Must inquire if an individual is enrolled in a health benefits plan.	N/A	✓ Must inquire if an individual is enrolled in a health benefits plan.	N/A
	✓ If yes, provider must ask if individual is seeking to have a claim submitted to their plan for the primary item or service.		✓ If yes, facility must ask if individual is seeking to have a claim submitted to their plan for the primary item or service.	
Notice	Provider must inform all uninsured individuals of the availability of a GFE for expected charges upon scheduling an item or service OR upon request.	N/A	Facility must inform all uninsured individuals of the availability of a GFE for expected charges upon scheduling an item or service OR upon request.	N/A
	*Any discussion about the potential costs of items or services under consideration should be considered a request for a GFE	is current as of October 27, 2021. Not intended to be ι	*Any discussion about the potential costs of items or services under consideration should be considered a request for a GFE	



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Publicizing the Availability of GFEs to Patients	✓ GFE information must be clear and understandable, prominently displayed (easily searchable via public search engine) on the provider's website, in the office, and on-site where scheduling or questions about costs occur; AND ✓ Orally provided when scheduling an item or service or when questions about the cost of items or services arise; AND ✓ Available in accessible formats and language(s) spoken by the individual(s)	N/A	✓ GFE information must be clear and understandable, prominently displayed (easily searchable via public search engine) on the facility's website, in the office, and on-site where scheduling or questions about costs occur; AND ✓ Orally provided when scheduling an item or service or when questions about the cost of items or services arise; AND ✓ Available in accessible formats and language(s) spoken by the individual(s)	N/A
Coordinating GFE	The Convening Provider must: 1. Contact, no later than 1 business day, all co-providers and co-facilities who are reasonably expected to provide items or services in conjunction with the primary item or service; AND 2. Request that the co-providers or co-facilities submit GFE to the convening provider; AND 3. Request must include the date that GFE information must be received.	Must submit GFE information upon the request of the convening provider or convening facility.	The Convening Facility must: 1. Contact, no later than 1 business day, all co-providers and co-facilities who are reasonably expected to provide items or services in conjunction with the primary item or service; AND 2. Request that the co-providers or co-facilities submit GFE to the convening provider; AND 3. Request must include the date that GFE information must be received.	Must submit GFE information upon the request of the convening provider or convening facility.
Timeframe for Providing the GFE	GFE must be provided to the patient: ✓Not later than 1 business day after the date of scheduling when a primary item or service is scheduled at least 3 business days in advance; OR ✓Not later than 3 business days after the date of scheduling when a primary item or service is scheduled at least 10 business days in advance; OR ✓Not later than 3 business days after the date of the request when a GFE is requested by an uninsured individual.	Must provide, and the convening provider or facility must receive, the GFE information no later than 1 business day after the co-provider or co-facility receives the request from the convening provider or facility.	GFE must be provided to the patient: ✓Not later than 1 business day after the date of scheduling when a primary item or service is scheduled at least 3 business days in advance; OR ✓ Not later than 3 business days after the date of scheduling when a primary item or service is scheduled at least 10 business days in advance; OR ✓ Not later than 3 business days after the date of the request when a GFE is requested by an uninsured individual.	Must provide, and the convening provider or facility must receive, the GFE information no later than 1 business day after the co-provider or cofacility receives the request from the convening provider or facility.

Disclaimer: This document is for educational purposes only, and is current as of October 27, 2021. Not intended to be used as, or constitute, legal or medical advice.



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Changes in Treatment (e.g., items and services) for Scheduled Services	✓ Must provide a new GFE if a convening provider, convening facility, coprovider, or co-facility anticipates or is notified of any changes to the scope of a GFE (e.g., expected charges, items, services, frequency, recurrences, duration, providers, or facilities). ✓ A new GFE must be issued no later than 1 business day before the items or services are scheduled to be furnished.	If any changes in the expected co- providers or co-facilities represented in a GFE occur less than 1 business day before the item or service is scheduled to be furnished, the replacement co- provider or co-facility must accept as its GFE of expected charges the original GFE that was provided by the replaced provider or facility.	✓ Must provide a new GFE if a convening provider, convening facility, co-provider, or co-facility <u>anticipates</u> or is <u>notified</u> of any changes to the scope of a GFE (e.g., expected charges, items, services, frequency, recurrences, duration, providers, or facilities) ✓ A new GFE must be issued no later than 1 business day before the items or services are scheduled to be furnished.	If any changes in the expected co- providers or co-facilities represented in a GFE occur less than 1 business day before the item or service is scheduled to be furnished, the replacement co- provider or co-facility must accept as its GFE of expected charges the original GFE that was provided by the replaced provider or facility.
Change in Providers and Facilities	If any changes in expected providers or facilities in a GFE occurs less than 1 business day before the item or service is scheduled to be furnished, the replacement provider or facility must accept as the expected charges in the original GFE.	If any changes in expected providers or facilities in a GFE occurs less than 1 business day before the item or service is scheduled to be furnished, the replacement provider or facility must accept as the expected charges in the original GFE.	If any changes in expected providers or facilities in a GFE occurs less than 1 business day before the item or service is scheduled to be furnished, the replacement provider or facility must accept as the expected charges in the original GFE.	If any changes in expected providers or facilities in a GFE occurs less than 1 business day before the item or service is scheduled to be furnished, the replacement provider or facility must accept as the expected charges in the original GFE.
Recurring Services	May issue a single GFE for recurring primary items or services if: 1. The GFE includes, in a clear and understandable manner, the expected scope of the recurring primary items or services (such as timeframes, frequency, and total number of recurring items or services); AND 2. The scope does not exceed 12 months. If additional recurrences are expected beyond 12 months, a convening provider must provide a new GFE, and communicate such changes upon delivery of the new GFE to help patients understand what has changed between the initial GFE and the new GFE.	Must submit GFE information upon the request of the convening provider or convening facility.	May issue a single GFE for recurring primary items or services if: 1. The GFE for recurring items or services must include, in a clear and understandable manner, the expected scope of the recurring primary items or services (such as timeframes, frequency, and total number of recurring items or services); AND 2. The scope does not exceed 12 months. If additional recurrences are expected beyond 12 months, a convening facility must provide a new GFE, and communicate such changes upon delivery of the new GFE to help patients understand what has changed between the initial GFE and the new GFE.	Must submit GFE information upon the request of the convening provider or convening facility.