

## **OFFICE POLICY FOR GOOD FAITH ESTIMATE**

As outlined in the No Surprises Act, a Good Faith Estimate for Services will be available for those patients **who are uninsured and elect to self-pay**.

### **DAY 1 FEES**

- When appointments are made in advance, a Good Faith Estimate for Day 1 services will be provided before the first visit orally when the appointment is made.
- When a patient walks in without an appointment, the Good Faith estimate will be provided at the beginning of the visit.

### **GOOD FAITH ESTIMATE FOR TREATMENT PLAN**

- When finances are explained, a staff member will review the Good Faith Estimate orally and in writing.
- A single estimate will be provided for the treatment plan
- This will be an estimate for a set time frame, frequency, and services allowed at the time.
- Frequency and time frames may be different than expected and actual charges will be determined by services used.

### **GOOD FAITH ESTIMATE FOR CONTINUED CARE**

- A Good Faith Estimate will be provided for continued “as needed care”.
- It will be reviewed both orally and in writing
- The estimate will outline the per visit or per service
- Final charges are determined by the number of services used or needed.

**All Good Faith Estimates provided to patients will be signed and dated. Additionally, a copy will be provided to the patient.**

**Good Faith Estimates need to be renewed yearly.**