

Your Rights and Protections Against Surprise Medical Bills

When you get emergency care or get treated by an out-of-network provider at an in-network hospital or ambulatory surgical center, or from an out-of-network air ambulance service, you are protected from balance billing.

What is “balance billing” (sometimes called “surprise billing”)?

When you see a doctor or other health care provider, you may owe certain out-of-pocket costs, such as a copayment, coinsurance, or a deductible. You may have additional costs or have to pay the entire bill if you see a provider or visit a health care facility that isn't in your health plan's network.

“Out-of-network” means providers and facilities that haven't signed a contract with your health plan to provide services. Out-of-network providers may be permitted to bill you for the difference between what your plan pays and the full amount charged for a service. This is called “**balance billing**.” This amount is likely more than in-network costs for the same service and might not count toward your plan's deductible or annual out-of-pocket limit.

“Surprise billing” is an unexpected balance bill. This can happen when you can't control who is involved in your care—like when you have an emergency or when you schedule a visit at an in-network facility but are unexpectedly treated by an out-of-network provider. Surprise medical bills could cost thousands of dollars depending on the procedure or service.

You're protected from balance billing for:

Emergency services

If you have an emergency medical condition and get emergency services from an out-of-network provider or facility, the most they can bill you is your plan's in-network cost-sharing amount (such as copayments, coinsurance, and deductibles). You **can't** be balance billed for these emergency services. This includes services you may get after you're in stable condition, unless you give written consent and give up your protections not to be balance billed for these post-stabilization services.

For information about *state*-enacted balance billing protections that might be applicable to you, see the last page of this notice.

Certain services at an in-network hospital or ambulatory surgical center

When you get services from an in-network hospital or ambulatory surgical center, certain providers there may be out-of-network. In these cases, the most those providers can bill you is your plan's in-network cost-sharing amount. This applies to emergency medicine, anesthesia, pathology, radiology, laboratory, neonatology, assistant surgeon, hospitalist, or intensivist services. These providers **can't** balance bill you and may **not** ask you to give up your protections not to be balance billed.

If you get other services at these in-network facilities, out-of-network providers **can't** balance bill you, unless you give written consent and give up your protections.

You're never required to give up your protections from balance billing. You also aren't required to get care out-of-network. You can choose a provider or facility in your plan's network.

For information about *state*-enacted balance billing protections that might be applicable to you, see the last page of this notice.

When balance billing isn't allowed, you also have these protections:

- You are only responsible for paying your share of the cost (like the copayments, coinsurance, and deductibles that you would pay if the provider or facility was in-network). Your health plan will pay out-of-network providers and facilities directly.
- Your health plan must:
 - Cover emergency services without requiring you to get approval for services in advance (also known as prior authorization).
 - Cover emergency services by out-of-network providers.
 - Base what you owe the provider or facility (cost-sharing) on what it would pay an in-network provider or facility and show that amount in your explanation of benefits.
 - Count any amount you pay for emergency services or out-of-network services toward your deductible and out-of-pocket limit.

If you think you've been wrongly billed, contact the U.S. Department of Labor's Employee Benefit Security Administration at 1-866-444-3272 or the Health and Human Services Administration at: 1-800-985-3059.

Visit [here](#) for more information about your rights under federal law.

State-enacted balance billing protections that might be applicable to you:

For information about additional, state-enacted surprise billing protections that might be applicable to you, see one or more of the following links for the state in which you live or work. Please note that whether you have protections under state law will depend on whether the state has enacted such protections and the scope of those protections and may also depend on whether your group health insurance benefits are provided under an insured plan, a self-insured plan, or a self-insured plan that has opted into relevant state-enacted protections.

Some of the links below are to a state's general department of insurance website because the state did not have a webpage devoted to surprise billing information at the time this notice was prepared:

Arizona:

See [here](#) and [here](#) for information about potential surprise billing and other protections under Arizona law, or contact the Arizona Department of Insurance and Financial Institutions at (602) 364-3100. .

California:

See [here](#) for information about potential surprise billing and other protections under California law. In California, if you do not agree with your health plan's response or they take more than 30 days to fix the problem, you can file a complaint with the Department of Managed Health Care, the state regulator of health plans. You can file a complaint by visiting www.HealthHelp.ca.gov or by calling 1-888-466-2219.

Colorado:

See [here](#) for information about potential surprise billing and other protections under Colorado law. In Colorado, if you believe you've been wrongly billed you may also call the Colorado Assistance Program at 1-303-839-1261 or visit the Colorado Consumer Health Initiative website at www.cohealthinitiative.org.

Florida:

See [here](#) for information about potential surprise billing protections under Florida law. In Florida, if you believe you've been wrongly billed you may contact the Office of Insurance Regulation.

Georgia:

See [here](#) for information about potential surprise billing protections under Georgia law. In Georgia, if you believe you've been wrongly billed you may also contact the Office of Commissioner of Insurance at (800) 656-2298 or file a complaint [here](#).

Illinois:

See [here](#) for information about potential surprise billing protections under Illinois law. In Illinois, if you believe you have been wrongly billed you may also contact the Illinois Department of Insurance at 866-445-5364.

Indiana:

See [here](#) for information about potential surprise billing protections under Indiana law. In Indiana, you may also contact the Indiana Department of Insurance [here](#).

Iowa:

See [here](#) for information about potential surprise billing protections under Iowa law, and [here](#) for information from Iowa regarding federal protections. You may also contact the Iowa Division of Insurance at 515-654-6600.

Minnesota:

See [here](#) for information about potential surprise billing and other protections under Minnesota law. You may also contact the Minnesota Department of Health at 1-800-657-3916.

Mississippi:

See [here](#) and [here](#) for information about potential surprise billing and other protections under Mississippi law. You may also call the Mississippi Insurance Department at 1-800-562-2957.

Missouri:

See [here](#) for information about potential surprise billing and other protections under Missouri law. You may also contact the Missouri Department of Commerce and Insurance at 573-751-4126.

Michigan:

See [here](#) for information about potential surprise billing and other protections under Michigan law. You may also contact the Michigan Office of Insurance and Financial Services by calling the Office Monday through Friday 8 a.m. to 5 p.m. at 877-999-6442.

Nebraska:

See [here](#) for information about potential surprise billing and other protections under Nebraska law. You may also contact the Nebraska Department of Insurance at 1-877-564-7323. Additional information is available [here](#).

Nevada:

See [here](#) for information about potential surprise billing and other protections under Nevada law. You may also contact the Nevada Division of Insurance at (888)-872-3234.

New Mexico:

See [here](#) for information about potential surprise billing and other protections under New Mexico law. You may also contact the New Mexico Superintendent of Insurance by calling 855-427-5674 or filing a complaint [here](#).

North Carolina:

See [here](#) for general information regarding health insurance protections. You may also contact the North Carolina Department of Insurance at (855)-408-1212.

Ohio:

See [here](#) for information about potential surprise billing and other protections under Ohio law. In Ohio, if you have surprise billing questions or concerns, you may also contact the Department of Insurance at 1-800-686-1526, or [here](#).

Texas:

See [here](#) for information about potential surprise billing and other protections under Texas law. You may also contact the Texas Department of Insurance at this [site](#) or by calling 800-252-3439.

Virginia:

See [here](#) for information about potential surprise billing and other protections under Virginia law. Consumers covered under (i) a fully-insured policy issued in Virginia, (ii) the Virginia state employee health benefit plan, or (iii) a self-funded group that opted-in to the Virginia protections are also protected from balance billing under Virginia law. You may also contact the Virginia State Corporation Commission Bureau of Insurance [here](#) or by calling 1-877-310-6560.