## **Notice: Your Right to a Good Faith Estimate**

## **Self-Pay and Uninsured Patients**

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

Under the law, health care providers need to give **patients who don't have insurance or who are not using insurance** an estimate of the bill for medical items and services.

- You have the right to receive a Good Faith Estimate for the total expected cost of any non-emergency items or services. This includes related costs like medical tests, prescription drugs, equipment, and hospital fees.
- Make sure your health care provider gives you a Good Faith Estimate
  in writing at least 1 business day before your medical service or item.
  You can also ask your health care provider, and any other provider you
  choose, for a Good Faith Estimate before you schedule an item or
  service.
- If you receive a bill that is at least \$400 more than your Good Faith Estimate, you can dispute the bill.
- Make sure to save a copy or picture of your Good Faith Estimate.

If you would like to receive a Good Faith Estimate, please contact our Financial Counselors at 860-545-8086, Monday to Friday: 8:00am – 4:30pm.

For questions or more information about your right to a Good Faith Estimate, visit www.cms.gov/nosurprises or call 1-800-985-3059.

