

AVAILABILITY OF GOOD FAITH ESTIMATE BY TLC HEALING ARTS:

In accordance with the No Surprises Act (see notice below), all prospective clients who are choosing to self-pay for therapeutic services and who are not obtaining reimbursement or authorization through their insurance companies are entitled to a “Good Faith Estimate” prior to starting treatment. This estimate of number of sessions and total cost will be sent electronically via Simple Practice, an Electronic Health Record (EHR) software, that is HIPAA compliant. Please note that this is only an estimate, and due to the nature of therapy, fewer or more sessions may be required than initially anticipated. However, you will be informed if this is the case, and you will not be charged for more than what has been estimated unless and until you agree to further treatment.

NOTICE ABOUT GOOD FAITH ESTIMATES:

Under the **No Surprises Act** (For use by health care providers no later than January 1, 2022) Instructions Under Section 2799B-6 of the Public Health Service Act, health care providers and health care facilities are required to provide a good faith estimate of expected charges for items and services to individuals who are not enrolled in a plan or coverage or a Federal health care program, or not seeking to file a claim with their plan or coverage **both orally and in writing**, upon request or at the time of scheduling health care items and services. This form may be used by the health care providers to inform individuals who are not enrolled in a plan or coverage or a Federal health care program (uninsured individuals), or individuals who are enrolled but not seeking to file a claim with their plan or coverage (self-pay individuals) of the expected charges they may be billed for receiving certain health care items and services.

A good faith estimate must be provided within 3 business days upon request.

Information regarding scheduled items and services must be furnished within 1 business day of scheduling an item or service to be provided in 3 business days; and within 3 business days of scheduling an item or service to be provided in at least 10 business days. To use this model notice, the provider or facility must fill in the blanks with the appropriate information. HHS considers use of the model notice to be good faith compliance with the good faith estimate requirements to inform an individual of expected charges. Use of this model notice is not required and is provided as a means of facilitating compliance with the applicable notice requirements. However, some form of notice, including the provision of certain required information, is necessary to begin the patient-provider dispute resolution process.

American Psychiatric Association. 2022.