



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, you are protected from surprise billing or 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, and/or a deductible. You may have other 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” describes providers and facilities that haven't signed a contract with your health plan. Out-of-network providers may be permitted to bill you for the difference between what your plan agreed to pay 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 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.

YOU ARE 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 the provider or facility may bill you is your plan's in-network cost-sharing amount (such as copayments and coinsurance). 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.



You may also be eligible for the following dispute resolution program concerning surprise bills for emergency services in New York. You may file a dispute through the New York independent dispute resolution (IDR) process if you receive a bill for emergency services in New York that you believe is excessive. You will have to pay the fee for the IDR if your provider's bill is upheld unless your household income is below 250% of the Federal Poverty Level. To apply for the New York IDR process: Complete an [IDR Patient Application](#) and send it to NYS Department of Financial Services, Consumer Assistance Unit/IDR Process, One Commerce Plaza, Albany, NY 12257.

Please note that the New York IDR program may be superseded by the alternative dispute program in the federal No Surprises Act, and would, therefore, not be available to you.

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 may 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.

You may also be able to file a dispute through the New York independent dispute resolution (IDR) process if you receive a surprise bill from a doctor for treatment at a hospital or ambulatory surgical center in New York and the doctor did not give you the required information about your care. You will have to pay the fee for the IDR if your doctor's bill is upheld unless your household income is below 250% of the Federal Poverty Level. You have to review "Information Your Doctor And Other Health Care Providers Must Give You" and "Information Your Hospital Must Give You" for the information that must be provided to you. This information is in the Surprise Medical Bills section on the New York State Department of Financial Services website. To apply for the New York IDR process: Complete an IDR Patient Application and send it to NYS Department of Financial Services, Consumer Assistance Unit/IDR Process, One Commerce Plaza, Albany, NY 12257. [IDR Patient Application](#) (PDF).



Please note that the New York IDR program may be superseded by the alternative dispute program in the federal No Surprises Act, and would, therefore, not be available to you.

WHEN BALANCE BILLING ISN'T ALLOWED, YOU ALSO HAVE THE FOLLOWING 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 generally must:
 - Cover emergency services without requiring you to get approval for services in advance (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 believe you've been wrongly billed, the federal website for general information about No Surprises Act provisions is: <https://www.cms.gov/nosurprises/consumers>. Note, this website will not be functional for consumers until January 2022. Beginning January 1, 2022, the federal Department of Health and Human Services will operate a telephone line for information and complaints at: 1-800-985-3059. If you have questions about the New York IDR process or need help completing an application call (800) 342-3736 or email Surprisemedicalbills@dfs.ny.gov.

Visit <https://www.cms.gov/nosurprises/consumers> for more information about your rights under federal law. Visit the Surprise Medical Bills Section on the New York State Department of Financial Services website for more information about your rights under New York law.