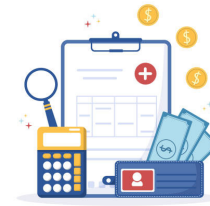




Key Words Related to Surprise Billing Protections



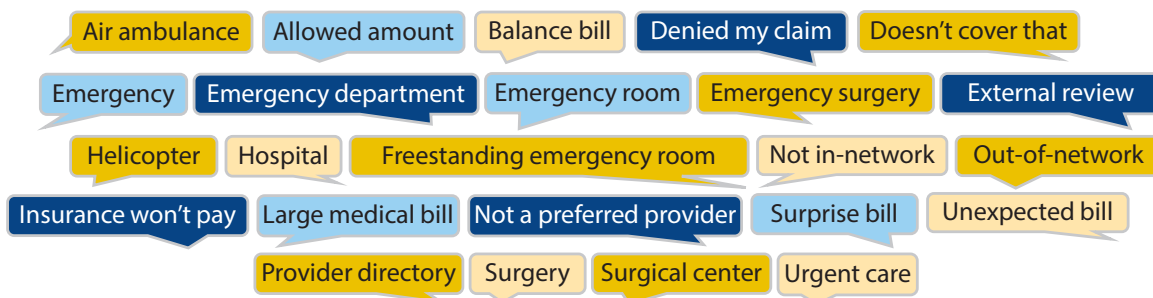
These are key words and phrases that consumer advocates (and others who assist individuals with medical bills) may hear when talking to consumers about unexpected or large medical bills. Listen or watch for these words when speaking with a consumer or reading an email. These words and phrases could signal that surprise billing protections apply or may have been violated under the No Surprises Act.

You can use this list as a standalone reference or together with the [No Surprises Act: Overview of Key Consumer Protections](#) fact sheet. For definitions of key terms related to the No Surprises Act, please refer to the [No Surprises Act Consumer Advocate Toolkit: Glossary](#).

Surprise Billing and External Review Protections

If these words or phrases are used, please consult the [Decision Tree: No Surprises Act Federal Surprise Billing Protections](#) to determine whether surprise billing protections apply in the consumer's situation.

Key Words



Key Phrases

- Had an emergency.
- Went to the emergency room.
- Went to the hospital.
- Went to urgent care for an emergency.
- Went to a surgical center.
- Had surgery.
- Rode in a helicopter or air ambulance.
- Got a large medical bill.
- Got an unexpected medical bill.
- Got a surprise bill.
- Got an Explanation of Benefits that shows my insurance might not cover the hospital bill or an item or service I got at the hospital.
- Got an unexpected medical bill for
 - Anesthesiology (including during pregnancy, labor and delivery).
 - Radiology (x-rays, imaging).
 - Pathology (lab tests such as blood work, biopsy).
 - Neonatology (infant care).
 - Lab services.

This document is intended to provide clarity to the public about requirements related to surprise billing. It does not have the force and effect of law.

Key Words Related to Surprise Billing Protections

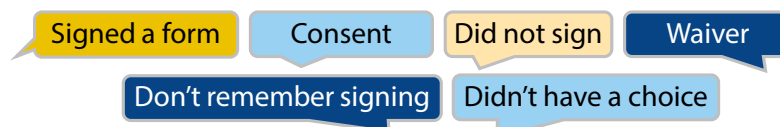
Surprise Billing and External Review Protections (continued)

- My insurance denied my claim because it wasn't medically necessary.
- My insurance denied me coverage/won't cover me because they said it requires prior approval/authorization.
- My insurance says my doctor is out-of-network or not in-network, or is not a preferred provider.
- I thought the hospital/facility or provider was in-network because I was told they were in-network.
- I thought this doctor or facility/hospital was in-network because they were listed in the directory from my health plan.
- I got the same services before, and the cost was much less.
- My insurance says they don't cover the item or service.
- My insurance won't cover my air ambulance transportation.
- I am confused or think my insurance didn't charge me the right co-pay.
- The amount I am being charged by my insurance doesn't seem right.
- Should I appeal my bill?

Notice and Consent to Waive Balance Billing Protections

If these words or phrases are used, consult the [Decision Tree: Notice and Consent](#) to determine whether notice and consent was provided appropriately in the consumer's situation.

Key Words



Key Phrases

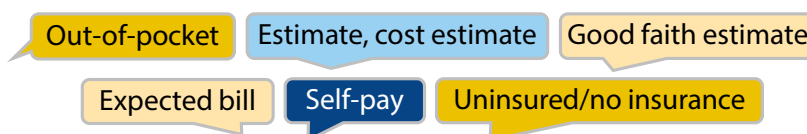
- My doctor or hospital (or my insurance) says I signed a consent form waiving my balance billing protections, but I don't remember signing that form or I did not sign.
- My doctor or hospital (or my insurance) says I signed a consent form waiving my balance billing protections, but I was given a bunch of paperwork to sign. I don't know what was in all the forms.
- I was given a consent form and told I had to sign.
- I wasn't given enough time/didn't have enough time to review a consent form before signing.
- I didn't have a choice whether to sign a consent form.
- I signed an electronic pad or tablet.
- No one asked me to sign anything.
- I revoked/took back my consent.
- My provider told me to sign a consent form before they treated me for my emergency.

Key Words Related to Surprise Billing Protections

Good Faith Estimates for Uninsured (or Self-Pay) Individuals and Patient-Provider Dispute Resolution

If these words or phrases are used, consult the [Decision Tree: Requirements for Good Faith Estimates for Uninsured \(or Self-Pay\) Individuals](#) and [Decision Tree: Patient-Provider Dispute Resolution Process](#) to navigate the good faith estimate and Patient-Provider Dispute Resolution protections.

Key Words



Key Phrases

For uninsured and self-pay consumers:

- The bill I got from the hospital or my doctor is really high.
- The bill I got from the hospital or my doctor is more than I expected.
- The bill I got from the hospital or my doctor is different from the cost estimate I received.
- The bill I got from the hospital or my doctor has charges from multiple doctors or facilities I didn't expect.
- I don't remember even seeing that person/ caregiver.
- Can I challenge a medical bill I got from my doctor or hospital?
- I was supposed to get a cost estimate, but never got it.
- I got the good faith estimate/cost estimate late or I didn't have enough time to review the estimate before my scheduled appointment.
- I got my cost estimate after I had the actual procedure.
- I used the government website to challenge the bill online but I don't agree with the decision. Can I appeal the decision? ("online" refers to the portal for the Patient-Provider Dispute Resolution process.)
- I filed a dispute online.

Other Protections: Consumer Financial Protection Board (CFPB) and Credit Reports

If these words or phrases are used, refer the consumer to the [Consumer Financial Protection Bureau](#) (see Next Steps).

- I don't think I should pay a medical bill, but my doctor sent the bill to collections.
- My medical debt is showing up on my credit report.
- I am disputing my medical bill (or I am using the dispute resolution process) and bill collectors are calling me.

Key Words Related to Surprise Billing Protections

Next Steps:

- For questions about the No Surprises Act or to report a possible violation of consumer protections, the consumer can contact the No Surprises Help Desk at 1-800-985-3059 or submit a complaint online at <https://www.cms.gov/medical-bill-rights/help/submit-a-complaint>.
- [Check for a consumer assistance program](#) (CAP) in your state¹.
- Consumers may also contact consumer help lines at the offices of either the Attorney General or Department of Insurance in their state.
- Consumers experiencing aggressive debt collection, coercive credit reporting, or other problems with a consumer financial product or service related to medical billing and collections can submit a complaint to the [Consumer Financial Protection Bureau](#) at consumerfinance.gov/complaint. For more information on Consumer Financial Protection Bureau protections, see this [bulletin](#).

¹ CAPs are not operating in every state. Please refer to the [CMS CAP page](#) to see if your state offers a CAP. If your state doesn't have a CAP, the map will direct you to other possible resources – such as the State Department of Insurance and the U.S. Department of Labor – including phone numbers, email addresses, direct mailing addresses, and websites.