

## **Good Faith Estimate**

**You have the right to receive a “Good Faith Estimate” explaining how much your health care will cost.**

Under the law, health care providers need to give patients who don't have insurance or who do not want to use their insurance an estimate of their bill for medical items and services before those items or services are provided.

- You have the right to receive a Good Faith Estimate for the total expected cost of any non-emergency medical items or services upon request or when scheduling such items or services. This includes related costs like medical tests, prescription drugs, equipment and hospital fees.
- When you schedule an appointment at least three business days in advance, we will provide you with a Good Faith Estimate in writing within one business day after scheduling. If you schedule an appointment at least 10 business days in advance, we will provide you a Good Faith Estimate in writing within three business days after scheduling. You can also ask any hospital or physician's office for a Good Faith Estimate before you schedule your appointment. If you do, make sure the hospital or physician's office gives you a Good Faith Estimate in writing within three business days after you ask.
- If you think you may not be able to afford to pay for your medical item or service, you may qualify for financial assistance. Please call **(616) 394-3626** or visit our Financial Assistance section on our website at <https://www.hollandhospital.org> for further information. We offer payment plans and assistance for applying for Medicaid as well.
- If you receive a bill that is at least \$400 more than any one provider's or facility's Good Faith Estimate you can dispute the bill.
- Make sure to save a copy or picture of your Good Faith Estimate and the bill.

For questions or more information about your right to a Good Faith Estimate, please contact our Patient Financial Advocates at **(616) 394-3626** or visit [www.cms.gov/nosurprises/consumers](http://www.cms.gov/nosurprises/consumers) or email [FederalIPPDRQuestions@cmshhs.gov](mailto:FederalIPPDRQuestions@cmshhs.gov)