
STANDARD NOTICE

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“Right to Receive a Good Faith Estimate of Expected Charges” **Under the No Surprises Act**

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 services.

- You have the right to receive a Good Faith Estimate for the total expected cost of any services. This includes additional costs besides cost of sessions.
- Make sure your health care provider gives you a Good Faith Estimate in writing at least one business day before your 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.

For questions or more information about your right to a Good Faith Estimate, visit www.cms.gov/nosurprises or call [Vickie George M.Ed., MS, LMFT, LPC, CST](tel:770-813-8181)

[770-813-818](tel:770-813-8181)