



Good Faith Estimates

If you do not have health insurance or if you plan to pay for health care bills yourself you have the right to receive a Good Faith Estimate for the total expected cost of any non-emergency items or services. This includes related costs like medical tests, prescription drugs, equipment, and hospital fees.

A good faith estimate is not a bill. The estimate shows the list of expected charges for our office items and services from our providers only. It is based on information known at the time the estimate is created and will not include any unknown or unexpected costs that may be added during your treatment. It will also not include any costs from other institutions or providers.

If you wish to obtain a good faith estimate please provide our office 3 days notice and we will provide you the estimate at least 1 business day before your medical 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 any 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 our Good Faith Estimate.

For questions or more information about your right to a Good Faith Estimate, visit www.cms.gov/nosurprises

or call 877-564-7323 (toll-free in Nebraska) or 402-471-0888

Fax: 402-471-4610

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