

Understanding Surprise Billing and the Law to Stop It

What is surprise billing?

Imagine this: You go to the hospital for an emergency or a procedure, and later you get a bill in the mail that you were not expecting. This is called a **surprise bill**. Surprise billing happens when you get care from a doctor or a hospital that is not in your health insurance’s “network.”

Your health insurance network is a group of doctors, hospitals, and clinics that have agreed to lower costs for patients in that plan. Sometimes, you might not know if a doctor or hospital is not in your network—especially if it is an emergency or you are not the one picking the doctor

Here are some common ways surprise bills can happen:

- **Emergency situations:** If you’re in an accident and go to the nearest hospital, that hospital might not be in your network. You might also see doctors who aren’t in your network while you’re there.
- **Planned surgeries:** Even if you choose an in-network hospital and surgeon, there might be other providers (like anesthesiologists or radiologists) who are not in your network.

When this happens, your insurance might not cover as much of the cost, and you end up with a surprise bill.

The law to stop surprise billing

To protect people from these unexpected costs, the government passed a law called the “No Surprises Act.” This law started in January 2022 and helps prevent surprise billing in many situations. Here is how it works:

- **Emergency care protection:** If you have an emergency and go to a hospital that is not in your network, you cannot be charged extra just because the hospital isn’t in your network. You will pay the same as if you went to a hospital that is in your network.
- **Non-emergency situations:** If you go to an in-network hospital or facility for planned care, you should not get a surprise bill from any of the providers who treat you there—even if they are out-of-network.
- **No balance billing:** Balance billing is when a provider charges you the difference between what they want to be paid and what your insurance is willing to pay. The new law says providers cannot do this in most situations where surprise billing might happen.
- **Advance notice:** If you are going to get care from an out-of-network provider, the provider must tell you beforehand and give you an estimate of what it might cost. You can choose to agree to it or find another provider if you do not want to pay extra.

Why this law matters

Surprise billing has caused big problems for people who get huge, unexpected medical bills. Many families have faced thousands of dollars in bills for which they did not plan. The “No Surprises Act” makes healthcare costs fairer by giving people more protection in emergencies and more information before getting non-emergency care.

Key points to remember

- **Surprise billing** is when you get a bill from a provider outside your insurance network without knowing it.
- **The No Surprises Act** stops most surprise bills for emergency care and some non-emergency situations.

Providers must give you **“advance notice”** if they are out of network and tell you the estimated costs.

Now, thanks to this law, you are better protected from surprise bills! This can help families avoid unexpected costs and plan better for healthcare expenses. For more information visit [No Surprises Act](#).