

# The Surprise Billing Consumer Protection Act

The Surprise Billing Consumer Protection Act, which took effect in January 2021, protects an estimated **2.5 million Georgians** from **high out-of-network bills** incurred when they unknowingly see an out-of-network provider at an in-network facility. The law also requires patients to give **consent** before receiving out-of-network services and creates a **resolution process** between providers and insurers that removes consumers from the billing dispute.

Over half of debt collection actions contain medical debt and can lead consumers to bankruptcy. Surprise billing legislation is in an important step to protect consumers from medical debt.

(GHF 2020).

## Supporting Federal Legislation

The federal No Surprises Act, that went into effect in 2022, offers similar protections and implemented a **good faith estimate** requirement which provides patients with a list of expected charges for the costs associated with medical items/services.

Compared to the federal law, the Georgia law covers additional health facilities such as imaging and birthing centers and offers a unique grievance process.

**The Surprise Billing Consumer Protection Act prevents surprise billing for various medical services.**

If patients receive a surprise bill at the locations listed below, they can only be billed for the **in-network cost-sharing amount** (i.e. copays, coinsurance, deductibles):



**EMERGENCY SERVICES**

**SERVICES AT BIRTHING AND IMAGING CENTERS**



**SERVICES AT HOSPITALS / AMBULATORY SURGICAL CENTERS\***

\*out-of-network services can't be billed without prior consent from the patient

## HOSPITAL SURPRISE BILLING RATING

Insurers are required to provide online and print access to hospital surprise billing ratings which tell consumers how many specialties are in-network vs. out-of-network at any given hospital.

(Emory Healthcare 2022).