No Surprises: Health care notice & consent form — What to know before you sign

Out-of-network health care providers or facilities (including emergency facilities) may ask you to sign certain **notice and consent forms** before providing specific services. If you sign these forms, you agree to give up your federal consumer protections against unexpected medical bills in certain situations, and you may pay more for out-of-network care. A provider or facility may ask you to sign these forms if one of these situations apply to you:

- If you schedule certain non-emergency services at an in-network hospital, or ambulatory surgical center, but your provider is out-of-network
- If you need care after an emergency (called post-stabilization care) and your provider or facility is out of network

Notice and consent forms in the situations above:

- Only apply to people with private health insurance (which includes insurance from a state or federal Health Insurance Marketplace® or an employer) who are getting out-of-network care for certain non-emergency or post-stabilization services
- Inform you that you're getting care that's out of your plan's network, and that you can contact your health plan to find an in-network provider or facility
- Describe your protections from unexpected medical bills, including out-of-network costs, and explain that by signing the consent form, you're giving up these protections
- Explain that signing the form means that you agree to get your care from the out-of-network provider or facility, which may cost more
- Explain your estimated out-of-network costs if you agree to give up (waive) your protections by signing the consent form
- Provide a list of in-network providers at the facility that are able to furnish the items or services for post-stabilization services only

Learn more about these forms and review a sample notice and consent form at CMS.gov/nosurprises/consumers/notices-you-may-get-whether-you-should-sign-them.

Do I have to sign the notice and consent forms?

No – signing is your choice. If you decide to sign these forms, you agree to give up (waive) your payment protections and will likely have to pay more than if you got care in your health plan's network. You may choose to sign the forms and waive your protections because, for example, you want to get care from a certain out-of-network specialist, even if you know it might cost more. Be sure to read the forms carefully so you understand what rights and protections you would be giving up and what your care may cost.

If you don't sign the consent forms, a provider or facility may refuse to provide non-emergency or post-stabilization care and you may have to reschedule care with a provider or facility in your health plan's network. If you don't sign and the provider or facility agrees to provide care, protections from unexpected medical bills apply if you have private insurance.

What's the difference between in-network and out-of-network care?

- **In-network** providers or facilities have a contract with your health plan. Generally, if you get care with an in-network provider or facility, it will cost you less than if you get care with an out-of-network provider or facility.
- **Out-of-network** providers or facilities don't have a contract with your health plan. Generally, if you get care with an out-of-network provider or facility, it will cost you more and your insurance may not cover some or all of your costs.

What if I need emergency care?

If you need emergency care and are treated in the emergency department of a hospital or in an independent freestanding emergency department, the provider or facility can't bill you for more than your plan's in-network cost sharing amount and shouldn't ask you to sign these forms or refuse to treat you unless you sign the forms.

If you believe you were asked to sign the notice and consent forms during an emergency, you can file a complaint. Visit CMS.gov/nosurprises/consumers/complaints-about-medical-billing to learn more about complaints.

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