

# CAROLINA FAMILY HEALTH CENTERS, INC. POLICY

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**TITLE:** FIN-139 No Surprise Act

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**EFFECTIVE DATE:** 1/25/2022

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**SECTION:** Finance

**REFERENCE PROCEDURE:**

FIN-139.01 Surprise Medical Bills and Good Faith Estimates

FIN-139.02 Patient Provider Dispute Resolution

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**RESPONSIBLE CHIEF OF STAFF:** Chief Finance Officer

**RESPONSIBLE COMMITTEE:** Finance CIT

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**REVIEWED:** 11/25/2025

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## I. PURPOSE

The purpose of this policy is to establish how Carolina Family Health Centers, Inc. (CFHC, Inc.) ensures that its patients are not subject to “surprise medical bills” and how Good Faith Estimates (GFE) are provided to uninsured or self-pay patients per the No Surprises Act Part E of title XXVII of the Public Health Service sections 2799B-6.

## II. POLICY

CFHC, Inc. protects its patients from surprise medical bills for services and items provided by CFHC, Inc. through a combination of:

- compliance with requirements established under Section 330 of the Public Health Service Act and
- provision of GFE as outlined in Section 27966B-6 of the Federal No Surprises Act.

### **Section 330 requirements that protect against surprise bills**

As a health center funded under the Federal Health Center program, CFHC, Inc. is subject to the requirements established in Section 330 of the Public Health Service Act, and detailed in the Bureau of Primary Health Care Compliance manual. These requirements contain several provisions that protect patients from surprise medical bills.

As outlined in the BPHC Compliance Manual:

- a. For patients whose incomes are below 200% of the Federal Poverty Level, CFHC, Inc. reduces its fees to ensure that they are affordable and that cost does not create a barrier to accessing care. To do this, CFHC, Inc. has established:
  - i. a schedule of fees for all services, and
  - ii. a corresponding schedule of discounts which are provided to all uninsured and underinsured patients with incomes at or below 200% of the Federal Poverty Level (FPL). Refer to *FIN-116 Sliding Fee Discount Program*.
- b. CFHC, Inc. informs patients of the availability of sliding fee discounts and their eligibility for such discounts, in language(s) and literacy levels appropriate for the patient population.
- c. CFHC, Inc. ensures that no patient is denied care due to an inability to pay. In the event that a patient cannot afford the fees they are charged, CFHC, Inc. reduces or waives those charges

to ensure that the patient can afford them. Refer to *FIN-117 Billing and Collecting*.

Federal law does not require CFHC, Inc. to offer sliding fee discounts on items such as dentures, eyeglasses, and prescription drugs. Nonetheless, CFHC, Inc. strives to protect patients from surprise medical bills for such items by informing patients of their out-of-pocket costs prior to the time of service. CFHC, Inc. strives to make these items affordable for uninsured and self-pay patients. The schedule of fees is consistent with locally prevailing rates and/or charges and is established by analyzing volume, current pricing, fees reimbursed from Medicare, Medicaid, private insurance, and a customized fee analyzer of locally prevailing rates. Refer to FIN-136 Schedule of Fees.

### **Provision of Good Faith Estimates**

**When CFHC, Inc. provides GFEs to uninsured and self-pay patients:** CFHC, Inc. further protects patients from receiving surprise bills for CFHC, Inc. services/ items by providing GFE of expected out-of-pocket costs whenever an uninsured or self-pay patient schedules an appointment at least three business days in advance or inquiries about out-of-pocket costs for a service/item, without scheduling an appointment for that service/item.

**Informing patients of their right to a GFE:** CFHC, Inc. ensures that uninsured and self-pay patients are informed of their right to receive a GFE.

**Services and items addressed in GFEs:** This policy applies to all healthcare-related services and items provided by CFHC, Inc., including medical, dental, behavioral health, vision, pharmaceuticals, and medical equipment.

**Good Faith Efforts:** When preparing a GFE, CFHC, Inc. staff are expected to make a good faith effort to estimate the patient's out-of-pocket charges, based on the information available when the GFE is requested. However, it is recognized that:

- a. CFHC, Inc. staff may lack adequate or appropriate information about the patient's needs when preparing the GFE.
- b. The need for some services/ items cannot be determined until the patient meets with a clinician.
- c. The price of some items -- particularly prescription drugs -- can change significantly in a short time period.

Therefore, despite CFHC, Inc.'s good faith efforts, patients' actual charges may differ from what is listed on the GFE. Refer to *FIN-139.01 Surprise Medical Bills and Good Faith Estimates*.

### **Patient-Provider Dispute Resolution (PPDR)**

The No Surprises Act gives uninsured (or self-pay) individuals the right to a patient-provider dispute resolution (PPDR) process if their billed charges, after receiving an item or service, are substantially in excess of the expected charges listed in the GFE furnished by the provider or facility. Patients with charges equal to or greater than \$400.00 or their GFE are eligible to dispute the charge under the PPDR process. Refer to *FIN-139.01 Patient Provider Dispute Resolution*.

## **III. ATTACHMENT**

- *Good Faith Estimate Standard Notice (English/Spanish)*