In December 2020, Congress passed the No Surprise Act. It was mainly intended to reduce unexpected medical bills for patients (an example: you have surgery that is covered by your insurance and you might get a huge bill from the anesthesiologist, who turns out to be out-of-network for your plan). This law went into effect January 1, 2022. New information about this law and requirements and how they relate to private practice psychotherapists became widely available recently.

The basics of the requirements are already in place for almost all private practice therapists, as our professional associations have strong ethical standards requiring us to:

- o inform our clients of fees before commencing treatment
- o make it clear that, if you have insurance, you have the option to seek a provider within your network at a lower fee, and
- o allow clients who choose to work with someone out-of-network to receive a "superbill" which can be submitted for possible partial reimbursement, depending on the policies of your individual plan (superbills also contain diagnostic codes, which are another requirement of this new bill)

Some requirements of this new legislation are expanded from the above. According to this law, we are directed to provide a diagnosis before commencing treatment (in direct contradiction with the ethical standards of our profession, which would never allow diagnosing someone without seeing them). And we are required to provide a Good Faith Estimate (GFE), to predict total costs in advance of treatment. This would make sense for something like setting a broken bone, but as you undoubtedly realize, psychotherapy does not generally work like that. We might have an idea what the trajectory of treatment for a particular issue will be, based on experiences with other clients, but we cannot know exactly what might lie beneath the tip of iceberg that initially brings someone to see a therapist, or what other concerns might arise during the course of treatment.

Implementation of this new law seems to be a gray area at the moment. There are contradictory interpretations of several aspects of it, and petitions to abolish it. I have created my own GFE form to reflect my own practice. None of this will impact what we are doing in therapy.

As a result of the federal No Surprise Act, all health care providers and health care facilities licensed, certified or approved by the state must provide "good faith estimates" (GFE) of expected charges for services and items offered to uninsured and self-pay patients or those not seeking re-imbursements from their insurance. Those who receive a superbill from me AND WHO USE IT towards reimbursement, do not need the GFE.