



YOU HAVE THE RIGHT TO RECEIVE A

# “GOOD FAITH ESTIMATE”

EXPLAINING HOW MUCH YOUR  
MEDICAL CARE WILL COST.

**Healthcare providers must give patients who don't have insurance, or who are not using insurance, an estimate of the bill for medical items and services.**

- You have the right to receive a Good Faith Estimate for the total expected costs of any non-emergency items or services. This includes related costs like medical tests, prescription drugs, equipment, and hospital fees.
- You have the right to receive a Good Faith Estimate in writing at least one business day before your medical service or item. You can also ask your healthcare provider, and any other provider you choose, for a Good Faith Estimate before you schedule an item or service.
- If you receive a bill that is at least \$400 more than your Good Faith Estimate, you can dispute the bill.
- Make sure to save a copy or picture of your Good Faith Estimate.

For questions or more information about your right to a Good Faith Estimate, visit [www.cms.gov/nosurprises](http://www.cms.gov/nosurprises).

**Mayfair Location**

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F: (414) 257.1772

**Glendale Location**

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Glendale, WI 53212

P: (414) 961.0304  
F: (414) 961.2061

**Cedarburg Location** - Creekside Center Building  
N54W6135 Mill Street, Suite 200  
Cedarburg, WI 53012

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