



NOTICE

**You have the right to receive a “GOOD FAITH ESTIMATE”
explaining how much your medical care will cost**

Under the No Surprises Act, Serenity Health is required to give **patients who don't have insurance or who are not using insurance** an estimate of the cost for services provided by Serenity Health providers.

- You have the right to receive a **Good Faith Estimate** for the total expected cost of Serenity Health services. This includes related costs like office visits, injections, medication management and psychotherapy services.
- Serenity Health must give you a Good Faith Estimate in writing at least 1 business day before your scheduled service. You can also request a Good Faith Estimate before you schedule service(s) that will initially be provided verbally.
- 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 or call 314-590-3721.