

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
200 Independence Avenue, SW  
Washington, DC 20201



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**DATE:** October 25, 2021

**TO:** Group Health Plans, Issuers of Group or Individual Health Insurance Coverage, Health Care Providers, and Health Care Facilities

**FROM:** Ellen Montz, Deputy Administrator and Director, Center for Consumer Information and Insurance Oversight

**SUBJECT:** Required Federal Agency Contact Information and Website to List on Certain Documents Related to the No Surprises Act

### **Background**

Under section 2799B-2(d) of the Public Health Service Act (PHS Act), enacted as part of the No Surprises Act, and its implementing regulations, participants, beneficiaries, enrollees, or covered individuals in group health plans, or group or individual health insurance coverage, as well as covered individuals in Federal Employees Health Benefits (FEHB) plans, may waive balance billing protections in limited circumstances if a nonparticipating health care provider (or a participating health care facility on behalf of a nonparticipating provider) or nonparticipating emergency facility has furnished the individual with notice and consent documents that the individual signs. The notice and consent forms must be furnished in accordance with the requirements in 45 CFR 149.410 and 149.420, which includes using a standard notice document specified by HHS in guidance.

Section 2799B-3 of the PHS Act, also enacted as part of the No Surprises Act, and its implementing regulations require certain health care providers and facilities to make publicly available, post on a public website of the provider or facility (if applicable), and provide to any individual who is a participant, beneficiary, or enrollee of a group health plan or group or individual health insurance coverage offered by a health insurance issuer and to whom the provider or facility furnishes items or services, a one-page notice that includes information in clear and understandable language on: (1) the restrictions on providers and facilities regarding balance billing in certain circumstances, (2) any applicable state law protections against balance billing, and (3) information on contacting appropriate state and federal agencies in the case that an individual believes that a provider or facility has violated the restrictions against balance billing.

Internal Revenue Code (Code) section 9820(c), Employee Retirement Income Security Act (ERISA) section 720(c), and PHS Act section 2799A-5(c), enacted as part of the No Surprises Act, require group health plans and issuers of group or individual health insurance coverage to make publicly available, post on a public website of the plan or issuer, and include on each explanation of benefits for an item or service with respect to which certain statutory provisions related to limitations on balance billing apply, information in plain language on (1) the restrictions on balance billing in certain circumstances, (2) any applicable state law protections against balance billing, (3) the requirements under Code section 9816, ERISA section 716, and PHS Act section 2799A-1, and (4) information on contacting appropriate state and federal agencies in the case that an individual believes that a provider or facility has violated the restrictions against balance billing. The Departments of Health and Human Services, Labor, and the Treasury (the Departments) issued a model disclosure notice that health care providers, facilities, group health plans, and health insurance issuers may, but are not required to, use to satisfy the disclosure requirements regarding the balance billing protections. The Departments will consider use of the model notice in accordance with the accompanying instructions to be good faith compliance with the disclosure requirements of section 9820(c) of the Code, section 720(c) of ERISA, and section 2799A-5(c) of the PHS Act, if all other applicable requirements are met.

Providers and facilities must furnish the notice and consent documents, and the disclosure notice, as of January 1, 2022, while group health plans, issuers of group or individual health insurance coverage must furnish the disclosure notice for plan or policy years beginning on or after January 1, 2022.

### **Information Requested by Regulated Entities**

The model notice and consent documents, and the disclosure notice include fields that regulated entities must complete by entering the URL for a website describing the federal balance billing protections, and contact information for the applicable federal and state agencies. Regulated entities have requested this information be available before January 1, 2022.

The Department of Health and Human Services (HHS), in coordination with the Department of the Treasury, Department of Labor and the Office of Personnel Management, launched a website focused primarily on providing general information about No Surprises Act provisions. This website currently includes standard notice and consent documents, and a model disclosure form. HHS intends to post additional information to this website over the next several months.

Website: <https://www.cms.gov/nosurprises/consumers>. Note, consumer and provider functionality for complaints inquiry and triage will not be operational until January 2022.

Beginning January 1, 2022, HHS, in coordination with the Department of the Treasury, Department of Labor and the Office of Personnel Management, will operate a telephone line with functionality for individuals to submit complaints regarding potential violations of the No Surprises Act. HHS will route complaints to the appropriate federal agency. If individuals call before January 1, 2022 they will hear: “Thank you for calling the No Surprises Helpdesk. We will begin accepting calls on January 1st, 2022. Please visit [www.cms.gov/nosurprises](http://www.cms.gov/nosurprises) for more

information on the No Surprises Act and payment disputes. Thank you and have a wonderful day.”

Phone number for information and complaints: 1-800-985-3059.

We ask regulated entities not to include the above phone number in any plan documents for any plan or policy years that begin before January 1, 2022.

Disclaimer Language

*The contents of this document do not have the force and effect of law and are not meant to bind the public in any way, unless specifically incorporated into a contract. This document is intended only to provide clarity to the public regarding existing requirements under the law.*