

As a patient, you have the right to receive a “Good Faith Estimate” explaining how much it may cost you for NeoGenomics’ laboratory testing ordered by your health care provider.

## Right to receive a Good Faith Estimate

Under the law, health care providers need to 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 cost of any NeoGenomics laboratory test ordered by your provider.

Make sure your health care provider gives you a Good Faith Estimate in writing at least one (1) business day before your medical appointment and prior to your health care provider ordering testing through NeoGenomics.

You can also ask your health care provider, and any other provider you choose, for a Good Faith Estimate before testing is ordered.

If you are uninsured and you receive a bill that is at least \$400 more than your Good Faith Estimate, you can dispute the bill.

Though Good Faith Estimates are the primary responsibility of your health care provider, we will do our best to help you with this process.

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) or call **1.800.985.3059**. NeoGenomics’ patient advocate team is here to help. Should you have questions or need more information, you may reach us at **866.776.5907, option 9**.

## Your rights and protections against surprise billing; also known as “Balance Billing”

When you see a physician or other health care provider, you may owe certain out-of-pocket costs, such as a copayment, coinsurance, and/or a deductible. You may have other costs or have to pay the entire bill if you see a provider or visit a health care facility that isn’t in your health plan’s network.

“Out-of-network” describes providers and facilities that haven’t signed a contract with your health plan. Out-of-network providers may be permitted to bill you for the difference between what your plan agreed to pay and the full amount charged for a service. This is called “balance billing.” This amount is likely more than in-network costs for the same service and might not count toward your annual out-of-pocket limit.

“Surprise billing” is an unexpected balance bill. This can happen when you can’t control who is involved in your care—like when you have an emergency or when you schedule a visit at an in-network facility but are unexpectedly treated by an out-of-network provider.

You are never required to give up your protections from balance billing. You also aren’t required to get care out-of-network. You can choose a provider or facility in your plan’s network.

NeoGenomics will continue its current practice of only billing our patients in-network cost-share amounts even in instances where our services are out-of-network.

If you believe you have been wrongly billed, you may visit [www.cms.gov/nosurprises](http://www.cms.gov/nosurprises) for more information about your rights under federal law.