

## **OHIO SURPRISE BILLING LAW**

Ohioans who get health insurance through plans regulated by the Ohio Department of Insurance are protected from receiving surprise medical bills under Ohio law. Ohio law provides the following protections when you receive unanticipated out-of-network care:

- No balance billing for emergency services, including emergency services provided by an ambulance, even if they're provided out-of-network.
- No balance billing by out-of-network providers at an in-network facility when you're unable to choose an in-network provider.
- Your cost-sharing amounts, such as copayments, coinsurance, and deductibles, are limited to the amount you would pay for in-network services.

Health plans regulated by the state of Ohio should have the letters "ODI" clearly denoted on your insurance identification card. Self-funded health plans are federally regulated under ERISA and are not subject to the Ohio law.