

Notice of Independent Dispute Resolution (IDR) Initiation Web Form



User Guide

October 2025

Notice of Independent Dispute Resolution (IDR) Initiation Web Form

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Introduction

This user guide contains instructions for completing the **“Notice of IDR Initiation”** web form. This document is applicable to health care providers, health care facilities, providers of air ambulance services, health plans, health insurance issuers, and Federal Employees Health Benefits (FEHB) Program carriers that use the Federal IDR Process to resolve payment disputes.

Important information:

- The initiating party can access the [Notice of IDR Initiation](#) web form to initiate a dispute.
- The initiating party can start the Federal IDR Process within four business days after the end of the 30-business-day open negotiation period if an agreement is not reached between the disputing parties.
- The initiating party can use this web form if it participated in an open negotiation period that has expired without an agreement for an out-of-network total payment amount for the qualified IDR item or service. The initiating party will need to provide information for both parties involved in the dispute.
- The disputing parties can still reach an agreement on a payment amount during the Federal IDR Process, but must reach an agreement before the certified independent dispute resolution entity determines the payment amount.
- The initiating party cannot submit duplicate dispute line items with the same **Claim Number, Date of Service, Service Code**, and if applicable, **Service Code Modifier(s)** as another previously entered dispute line item, except for the following situations:
 - If the previously submitted dispute was subject to the cooling off period and was closed as ineligible due to submission prior to the end of the cooling off period.
 - If the newly submitted dispute received approval for an extension from the Federal IDR team.
- If the initiating party needs to resubmit items or services that were determined improperly batched or bundled it should use the **“Notice of IDR Initiation – Resubmission”** web form to do so. The duplicate dispute check does not apply to the **“Notice of IDR Initiation – Resubmission”** web form.
- For each dispute line item submitted, the date of item or service must be prior to the open negotiation start date.
- For batched disputes, all dispute line items must have dates of service that are within 30 business days of each other, unless the 90-calendar-day cooling off period applies.



Important: Guidance issued by the Departments of the Treasury, Labor, Health and Human Services, and Office of Personnel Management can be found in FAQ documents listed on the CMS.gov No Surprises [“Overview of rules and fact sheets”](#) page.

For guidance on the calculation and use of qualifying payment amounts (QPAs), as well as their related exercise of enforcement discretion and addressing Fifth Circuit’s opinion in TMA III, refer to “FAQs about Consolidated Appropriations Act, 2021, Implementation Part 69” (January 14, 2025) and “FAQs about Consolidated Appropriations Act Implementation, 2021 Part 62” (October 6, 2023).

For guidance on the initiation of batched disputes and disputes involving air ambulance services, refer to “No Surprises Act (NSA) Independent

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Dispute Resolution (IDR) Batching and Air Ambulance Policy FAQs” (November 28, 2023) and “FAQs about Affordable Care Act and Consolidated Appropriations Act, 2021 Implementation Part 63” (November 28, 2023).

For guidance on extending enforcement discretion, refer to “FAQs about Consolidated Appropriations Act, 2021 Implementation Part 67” (May 1, 2024).



Note: Send any questions regarding the IDR Notice of Initiation process and the web form to the Federal IDR Questions mailbox at: FederalIDRQuestions@cms.hhs.gov.

1 Before Starting the Web Form



Important: If the initiating party has initiated an IDR case through this portal in the past, the initiating party should clear its computer's cache or open this web form in a private or incognito window to access the updated “Notice of IDR Initiation” web form.



Note: The initiation date of the Federal IDR Process is the date that the Departments receive the Notice of IDR Initiation.

Before starting the **“Notice of IDR Initiation”** web form:

Make sure that this dispute belongs in the Federal IDR Process. Review the [IDR State](#) list to help determine which states have processes that may apply to payment determinations for the items, services, and parties involved.

Have the following items available to provide along with the web form:

- Documents to confirm the open negotiation period start date (for example, the notice of open negotiation). Additionally, if the initiating party enters an open negotiation start date more than 34 business days earlier than the date on which the form was completed it must also upload at least one of the following to confirm that the claim is still eligible for the Federal IDR Process:
 - Documents to confirm the extension approval received from the [Federal IDR Questions](#) mailbox.
 - Documents to confirm the certified IDR entity's request to re-submit the dispute.
 - The dispute number that triggered the cooling off period and documents to confirm the 90-day cooling off period has expired.
- Information to identify the qualified IDR items or services, including claim number (and whether they are designated as batched or bundled items or services).
- Dates and location of qualified IDR items or services.
- Type of qualified IDR items or services such as emergency services or post-stabilization services.

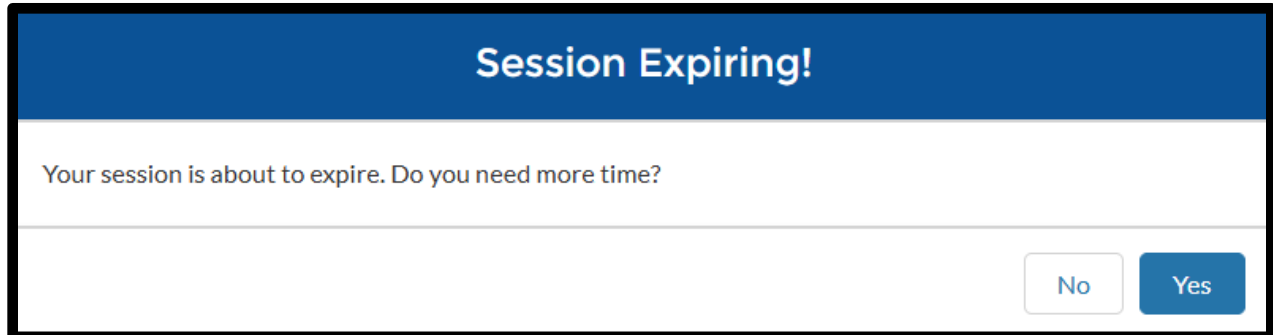
Item and service codes for corresponding services, place of service code, and service code modifier(s).

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- QPA and cost-sharing amount.¹
- Documents to confirm the claim and QPA information (i.e., the notices associated with the initial payment or notice of denial of payment).
- Open negotiation period start date.
- The preferred certified IDR entity.

Complete and submit the web form in a single session.

- For security reasons and protection of personal data, the session will time out after 60 minutes of inactivity and the following message will display.

A dialog box with a blue header bar containing the text "Session Expiring!". Below the header, the text "Your session is about to expire. Do you need more time?" is displayed. At the bottom right, there are two buttons: "No" and "Yes".

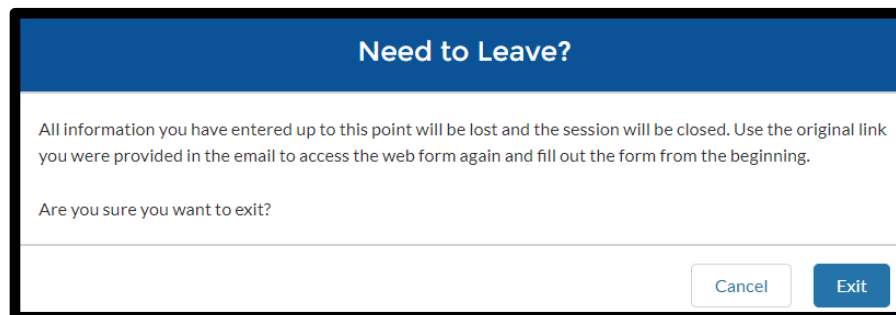
Session Expiring!

Your session is about to expire. Do you need more time?

No Yes

Figure 1: Session Expiring

- If there is no response within 60 seconds, the system will end the session and return to the [No Surprises Act](#) web page. Select **Continue** to restart the 60 minute timer for inactivity.
- If the initiating party exits the web form prior to completing all information and submitting it, the information entered is not saved. When the party selects **Exit**, the following dialogue box will appear.

A dialog box with a blue header bar containing the text "Need to Leave?". Below the header, the text "All information you have entered up to this point will be lost and the session will be closed. Use the original link you were provided in the email to access the web form again and fill out the form from the beginning." is displayed. Below this, the text "Are you sure you want to exit?" is displayed. At the bottom right, there are two buttons: "Cancel" and "Exit".

Need to Leave?

All information you have entered up to this point will be lost and the session will be closed. Use the original link you were provided in the email to access the web form again and fill out the form from the beginning.

Are you sure you want to exit?

Cancel Exit

Figure 2: Exit Warning

2 Notice of Initiation Web Form — Welcome Page and Qualification Questions

This web form must include, among other information, the QPA supplied with the initial payment or notice of denial of payment, the initiating party's preferred certified IDR entity, and the qualified IDR items or services at issue. The initiation date of the Federal IDR Process is the date that the

¹ Refer to "[FAQs about Consolidated Appropriations Act, 2021 Implementation Part 69](#)" (January 14, 2025).

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Departments receive the Notice of IDR Initiation. The initiating party's information will display first on the web form.



Note: To learn more about the QPA, please navigate to [“FAQs About Consolidated Appropriations Act, 2021 Implementation Part 69.”](#)

2.1 Welcome Page

The first page of the **“Notice of IDR Initiation”** web form is the “Welcome” page.

1. Review the instructions before proceeding.
2. Select the check box next to the statement: ****I hereby agree to the terms and conditions expressed in the security and privacy agreement*** at the bottom of the “Welcome” page. Failure to do so will prevent the initiating party from moving forward in the web form and the following warning message will display:

☐ I hereby agree to the terms and conditions expressed in the security and privacy agreement.

You must agree to the security statement to proceed.

Continue

Figure 3: Security Statement Check Box Warning

3. Select the **Continue** button to proceed to the “Qualification Questions” page.

2.2 Qualification Questions

The following screens contain a series of questions to confirm eligibility for the payment dispute process. The initiating party is only allowed to proceed, and a dispute created, if the dispute meets basic eligibility criteria. Any fields marked with an asterisk (*) are required fields on the web form. If the initiating party is a third-party administrator (TPA) or third-party representative, it should indicate which party it is working on behalf of. Access a glossary of terms referenced in this document by selecting the link contained within the “Need help with terms?” section.

Need help with terms? See a [glossary of insurance terms and definitions](#) that are commonly used in this form.

Figure 4: Need help with terms?

2.2.1 Page 1

Complete the following questions:

1. ****Was the service in question provided prior to 1/1/2022?***
 - a. Select the radio button next to “Yes” or “No.”
 - b. The following alert displays if the “Yes” radio button is selected:

This dispute is not eligible for the federal IDR process because the date of service you provided is before 1/1/2022.

Figure 5: Date of Service Error Message

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Important: If the plan renewal date for plan year 2022 is after the date of service, the dispute will not be eligible for the Federal IDR Process.

2. ****I am (or I am acting on behalf of) a: (select one)***

Select the radio button identifying the organization type.

- a. "Group Health Plan"
- b. "Individual health insurance issuer"
- c. "Federal Employees Health Benefits (FEHB) carrier"
- d. "Health care provider"
- e. "Health care facility"
- f. "Provider of air ambulance services"



Important: If a member is only enrolled in coverage other than through a group health plan, an individual health insurance issuer, or a FEHB carrier such as Medicare, Medicaid, Children's Health Insurance Plan (CHIP), or TRICARE plan coverage, the dispute is not eligible for the Federal IDR Process.

3. If the initiating party is (or is acting on behalf of) a "health care provider," "health care facility" or "provider of air ambulance services" the following additional fields will display. The initiating party must complete at least one of the two fields:

- a. ***Tax ID.*** The Taxpayer Identification Number (TIN) must be nine digits.
- b. ***National Provider Identifier (NPI).*** The NPI number must be ten digits.

4. Indicate the ****Health Plan Type*** by selecting the appropriate dropdown option:

- a. "Individual health insurance issuer"
- b. "Fully-insured ERISA group health plan"
- c. "Federal Employees Health Benefits (FEHB) carrier"
- d. "Either partially or fully self-insured ERISA group health plan"
- e. "Church plan"
- f. "Non-federal governmental plan (e.g. state or local government plan)"
- g. "No Plan/Issuer Response"
- i. This option only displays if the initiating party is a provider. This option does not display if the initiating party is a plan or issuer.

5. If the initiating party selects "Federal Employees Health Benefits (FEHB) carrier" it must provide the three digit ****Enrollment Code***.

6. If the initiating party identifies as a plan or issuer and selects "Either partially or fully self-insured ERISA group health plan," it must also answer the following question:

- a. ****Has the self-insured plan opted into any specified state laws that would apply to the items and services in this dispute?*** Select the radio button next to "Yes" or "No."

7. If the initiating party identifies as a plan or issuer and selects "Church Plan" or "Non-federal governmental plan (e.g., state or local government plan)" it must answer the following question:

- a. ****Is the health plan fully or self-insured?*** Select the radio button to indicate whether the plan is "Fully-insured" or "Self-insured."
- b. If the initiating party selects "Self-insured" it must also answer the following question:

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- i. ***Has the self-insured plan opted into any specified state laws that would apply to the items and services in this dispute.** Select the radio button next to “Yes” or “No.”
8. Select **Continue**.



Important: Failure to answer the specified state law question, if prompted, will result in an error message: “Self-insured plans must attest to whether or not they have opted into a specified state law that applies to the items and services in a dispute.”

2.2.2 Page 2

Complete the following questions:

1. *** When did the open negotiation period start?** The initiating party must upload evidence of the open negotiation period start date. An example of evidence is a copy of the notice or notices of open negotiation for the claim or claims in this dispute that was sent to the non-initiating party.



Note: To upload evidence, select the Upload Files button or drag and drop documents into the appropriate space on the web form, which will appear after selecting the extension reason, or drag and drop documents into the “Or drop files” area of the web form. The file limitation for the entire dispute is 500MB. Be sure the file(s) meets this limitation. The initiating party must upload at least one file. The file name is displayed when the information is loaded.



Important: If the parties can’t agree on an out-of-network rate, the 30-business-day open negotiation period must elapse before starting the Federal IDR Process.

- a. If the initiating party enters a date that is **less** than 31 business days prior to the current date, it will receive the error message displayed below.

Figure 6: Open Negotiation Must Elapse Error Message

- b. If the initiating party enters a date that is more than 34 business days prior to the current date, extension justification reasons will display as pictured below.

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* The federal IDR process must be initiated within four business days of the open negotiation period ending. Please provide a reason why this dispute is eligible for an extension to this requirement.

- ☐ I received an extension approval from the federal IDR mailbox, and will upload evidence of this extension in the Supporting Documentation section of this webform.
- ☐ The item(s) or service(s) under dispute was subject to the 90-day cooling off period.

Figure 7: Extension Justification Reasons

- c. If the extension justification reasons are displayed, select an appropriate reason why this dispute is eligible for an extension and upload evidence of the extension reason.
- i. "I received an extension approval from the federal IDR mailbox and will upload evidence of this extension in the "Supporting Documentation" section of this web form." If the initiating party selects this extension reason:
1. A ***Upload Files** button will display, and the initiating party will be required to upload a copy of the extension approval received from the Federal IDR mailbox.
- ii. "The item(s) or service(s) under dispute was subject to the 90-day cooling off period." If the initiating party selects this extension reason:
1. A "Dispute Reference Number" field will display. Using the "DISP-XXXXXX" format, enter the dispute number that triggered the cooling off period.
 - a. If the 90-day cooling off period has not elapsed for the dispute, the following error message will display: "The 90 calendar day cooling off period must elapse before starting the Federal IDR process."
 - b. If no dispute number is entered, the following error message will display: "Enter the dispute reference number."
 - c. If the dispute number is not entered in a valid format or the dispute is not found, an error message stating the dispute number is not valid will display.
 2. A ***Upload Files** button will display, and the initiating party will be required to upload a copy of the payment determination(s) that initiated the 90-day cooling off period.



Important: To upload evidence of the extension reason, select the Upload Files button, which will appear after selecting the extension reason, or drag and drop documents into the "Or drop files" area of the web form. The file limitation for the entire dispute is 500MB. Be sure the file(s) meets this limitation. The file name is displayed when the information is loaded.

2. ****Did the health care provider or health care facility get consent from the participant, beneficiary, or enrollee to waive surprise billing protections for these items or services?***
- a. Select the radio button next to "Yes" or "No."

This dispute is not eligible for the federal IDR process. Based on your selection, the surprise billing protections were waived, and the items and services do not qualify for the dispute process.

Figure 8: Surprise Billing Protections

- i. If the surprise billing protections were waived, the message above will display after

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selecting the radio button next to “Yes.”

3. Select **Continue**.

2.2.3 Page 3

1. Select the appropriate radio button in response to the question: ***What are you disputing today?**

- a. “A single dispute. I’m disputing either (a) one service code that represents one item or service, or (b) one service code that represents multiple items or services (a bundled payment arrangement).”



Important: If the initiating party has indicated the provider of the item or service as “Provider of air ambulance services,” it will receive a pop-up window upon selecting “single dispute.” The pop-up window will inform that “As a result of TMA III², multiple codes under a single air transport may be submitted as a batched dispute. Are you sure you want to proceed with submitting a single dispute?” Selecting “Yes” will navigate the initiating party to the next page of the form. Selecting “No” will return the initiating party to the previous page where it can change the response to the “What are you disputing today?” question.

- i. If the initiating party selects the single dispute radio button, indicate “Yes” or “No” to the following question: **Are you disputing a bundled payment arrangement (multiple items or services billed or reimbursed under one service code)?**
- b. “A batched dispute. I’m disputing multiple items or services related to the treatment of a similar condition.”
 - i. If the initiating party selects this option, a pop-up will appear under the heading: **Do your disputes qualify for the batching process?** Review the list of questions in the pop-up and select the **No** or **Yes** button. Selecting **No** returns the initiating party to the select a single dispute option. Selecting **Yes** takes the initiating party to the next screen.

2. Select **Continue**.

3 Notice of IDR Initiation — Contact Information Section

In this section of the form, the initiating party provides contact information for themselves and the non-initiating party. The contact information of the initiating party displays first. For example, if the initiating party is a health care provider, health care facility, or provider of air ambulance services, fields for their information will display first and the group health plan, health insurance issuer, FEHB carrier, or third-party administrators (TPAs) will be displayed second. If the health insurance issuer is the initiating party, then the fields associated with the health care issuer will display first. If the initiating party enters a name in the Primary or Secondary point-of-contact fields, it is then required to enter the full contact information, including the mailing address.

² *Texas Medical Association et al. v. U.S. Department of Health and Human Services et al. Case No. 6:22-cv-450-JDK (TMA III) order.*

3.1 Initiating Party Contact Information

Enter the information in the following text fields:

1. **Name and Address Information** (This is where the initiating party enters their contact information):
 - a. ***Health care provider name**
 - b. ***Hospital, health care facility or group name**
 - c. ***Mailing Address**
 - d. ***City**
 - e. ***State**
 - f. ***Zip Code**
 - g. ***Email**
 - h. ***Phone**
2. **Primary point-of-contact if different from above** (if there is a TPA, this is where the TPA enters their contact information):
 - a. **Name**
 - b. **Mailing Address**
 - c. **City**
 - d. **State**
 - e. **Zip Code**
 - f. **Email**
 - g. **Phone**
3. **Secondary point-of-contact:** (optional)
 - a. **Name**
 - b. **Mailing Address**
 - c. **City**
 - d. **State**
 - e. **Zip Code**
 - f. **Email**
 - g. **Phone**

3.2 Non-Initiating Party Contact Information

Enter the information in the following text fields. Required fields are marked by a red asterisk (*) on the web form.

1. **Name and Address Information:**
 - a. ***Health Insurance Plan or Company**
 - b. ***Mailing Address**
 - c. ***City**
 - d. ***State**
 - e. ***Zip Code**
 - f. ***Email**
 - g. ***Phone**
2. **Primary point-of-contact if different from above:**
 - a. **Name**
 - b. **Mailing Address**

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- c. **City**
 - d. **State**
 - e. **Zip Code**
 - f. **Email**
 - g. **Phone**
3. **Secondary point-of-contact:** (optional)
- a. **Name**
 - b. **Mailing Address**
 - c. **City**
 - d. **State**
 - e. **Zip Code**
 - f. **Email**
 - g. **Phone**

3.3 Third-Party Administrators and Other Representatives

TPAs for health plans should provide their contact information in the “Primary point-of-contact” section. Third-party representatives (such as revenue cycle management companies) for providers should provide their contact information in the “Primary point-of-contact” section. Any fields marked with a red asterisk (*) are required fields on the web form.

3.4 Use of Special Characters

This subsection outlines which special characters may be used in name and address fields.

3.4.1 Name Fields

The system will display the error message below if a special character is used in a name field that is **not** in the list of valid special characters: comma (,), hyphens/dash (-), apostrophe (’), period (.), accent mark (à), ampersand (&), and tilde (~). The error message will be displayed in the following fields when clicking anywhere outside of the field, hovering out of the field, selecting the tab button on the keyboard, or selecting the **Continue** button.

- 1. ***Health Care Provider Name**
- 2. ***Hospital, Health Care Facility or group name**
- 3. **Primary point-of-contact if different from above: (Initiating Party)**
- 4. **Secondary point of contact (optional) (Initiating Party)**
- 5. **Health Insurance Plan or Company**
- 6. **Primary point-of-contact if different from above: (Non-Initiating Party)**
- 7. **Secondary point of contact (optional) (Non-Initiating Party)**
- 8. **Initiating Party Signature**


A screenshot of a web form error message. It shows a text input field with the placeholder text "Dr%". Above the field, the label "* Health care provider name:" is displayed. Below the field, a red-bordered box contains the error message: "Enter the health care provider name using only the following characters, -, ' , à ~ &." The entire error message box is highlighted with a black border.

Figure 9: Special Character Error Message for Name Fields

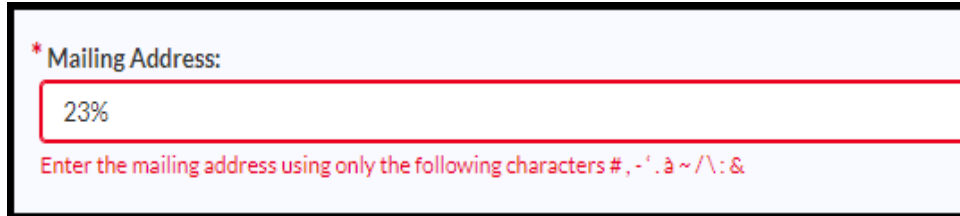
3.4.2 Address Fields

The system will display the error message below if a special character is entered in an address field that is **not** in the list of valid special characters: number sign (#), comma (,), hyphen/dash (-), apostrophe (’), period (.), accent mark (à), ampersand (&), tilde (~), forward-slash (/),

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backward-slash (\), and colon (:). The error message will be displayed in the following fields when clicking anywhere outside of the field, hovering out of the field, selecting the tab button on the keyboard, or selecting the **Continue** button.

1. ***Mailing Address (initiating party)**
2. ***City (initiating party)**
3. ***Mailing Address (non-initiating party)**
4. ***City (non-initiating party)**



* Mailing Address:

23%

Enter the mailing address using only the following characters #, -, ' . â ~ /\: &

Figure 10: Special Character Error Message for Address Fields

4 Notice of IDR Initiation — Dispute Item and Payment Section

This section of the form must include, among other information, the QPA for each item or service that was provided with the initial payment or denial of payment, the initiating party's preferred certified IDR entity, and the qualified IDR items or services at issue.



Important: *If this dispute involves a Federal Employees Health Benefits (FEHB) Carrier that has a contract with the Office of Personnel Management (OPM) that includes terms to adopt a state process for making out-of-network payment determinations, the initiating party will need to inquire with the state on how to handle the dispute. Similarly, if this dispute involves an Employee Retirement Income Security Act (ERISA) plan that has opted into the state process for determining an out-of-network payment rate, the initiating party will need to inquire with the state on how to handle this dispute.*

4.1 Line Item Information

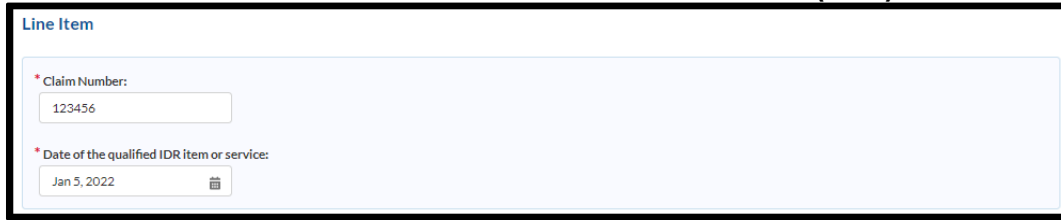
The fields populated in this section reflect the information provided under the “Qualification Question” section of the web form, specifically in response to the question: ***What are you disputing today?*** Possible choices include “Single Line Item – Not Bundled,” “Single Line Item – Bundled,” or “Batched Items or Services.”

4.1.1 Single Line Item — Not Bundled

If the dispute involves a single line item with no bundling, the “Line Item Information” section will display the ***Claim Number** field and the ***Date of the qualified item or service** calendar field.

1. Add the claim number for the dispute line item entered. The **Claim Number** field accepts up to 40 characters and is alphanumeric.
2. Use the **calendar** icon to select the date of the item or service.

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Line Item

* Claim Number:
123456

* Date of the qualified IDR item or service:
Jan 5, 2022

Figure 11: Notice of Initiation — “Line Item” Section

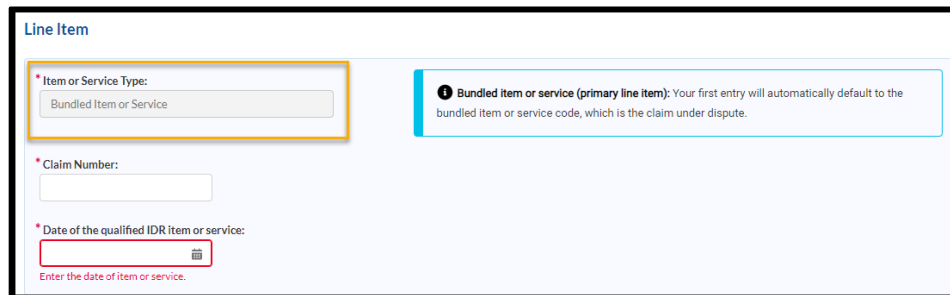


Important: The web form will verify that the Date of the qualified IDR item or service entered for each dispute line item is prior to the open negotiation start date provided by the initiating party on a previous page of the web form. This validation applies to the date of any item or service entered on a single, bundled, or batched dispute.

4.1.2 Single Line Item — Bundled

If the dispute involves a single line item bundled, the “Line Item Information” section will display the ***Item or Service Type** field, the ***Claim Number** field, and the ***Date of the qualified item or service** field.

1. First Item Entry:
 - a. The **Item or Service Type** field is grayed out and indicates “Bundled Item or Service.” The bundled item or service code is the service code under dispute.



Line Item

* Item or Service Type:
Bundled Item or Service

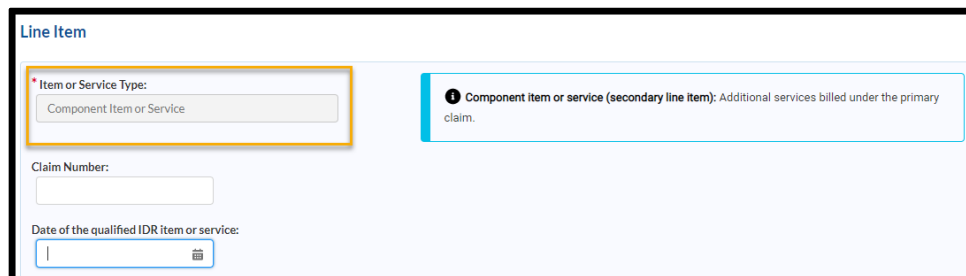
* Claim Number:

* Date of the qualified IDR item or service:
Enter the date of item or service.

Bundled item or service (primary line item): Your first entry will automatically default to the bundled item or service code, which is the claim under dispute.

Figure 12: “Line Item” Section — First Bundled Item or Service

2. Subsequent Item Entries:
 - a. The **Item or Service Type** field is grayed out and indicates “Component Item or Service.” A component item or service (secondary line item) is an additional service billed under the primary service code. If there are no component items or services, proceed through the form. Component entries are optional.



Line Item

* Item or Service Type:
Component Item or Service

Claim Number:

Date of the qualified IDR item or service:

Component item or service (secondary line item): Additional services billed under the primary claim.

Figure 13: “Line Item” Section — Subsequent Item or Service

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4.1.3 Batched Items and Services

A batched dispute must contain items and services related to the treatment of a similar condition. The fields in this section are **Claim Number** and **Date of the qualified IDR item or service**. To enter an additional claim for the dispute, select **Save & Add Another** at the bottom of the page.

As a result of the TMA III order, air ambulance services for a single air ambulance transport, including air ambulance mileage code and base rate code, may be submitted as a batched dispute, so long as all other provisions of the batching regulations are satisfied, in accordance with guidance.³



Important: The web form will also verify the Date of the qualified IDR item or service entered for each item or service is within 30 business days of all items and services in a batched dispute, unless the 90-calendar-day cooling off period applies.

4.2 Payment Information

1. Enter the description of the item or service.
2. Enter the qualifying payment amount in the ***QPA** field.
3. Upload any relevant documentation of the claim and QPA. Examples of acceptable documentation include the initial payment or notice of denial of payment, remittance form and explanation of benefits, and explanation of payments.



Important: To upload relevant documentation, select the **Upload Files** button or drag and drop documents into the appropriate space on the web form or drag and drop documents into the “Or drop files” area of the web form. The file limitation for the entire dispute is 500MB. Be sure the file(s) meets this limitation. The initiating party must upload at least one file. The file name is displayed when the information is loaded.

4. Enter the cost sharing amount in the ***Cost sharing amount allowed** field.
5. Enter the initial payment in the **Initial payment amount for the item(s) and/or service(s) (if applicable)** field.

Figure 14: Notice of Initiation — “Payment Information” Section

³ Refer to [FAQs about Affordable Care Act and Consolidated Appropriations Act, 2021 Implementation Part 63](#) (November 28, 2023).

4.3 Type of Qualified Item(s) or Service(s)

1. Select the item(s) or service(s) under dispute by selecting the check box next to the service. The initiating party may choose more than one service category.
 - a. "Emergency item(s)/service(s)"
 - b. "Post-stabilization service(s)"
 - c. "Professional service(s)"
 - d. "Hospital-based service(s)"
 - e. "Item(s)/service(s) furnished by a nonparticipating provider at a participating health care facility"
 - f. "Out-of-network air ambulance service(s)"
 - g. "Other: Provide description" (Put description in text box provided)
2. Provide the service codes in identified fields below.
 - a. ***Service Code** (five-character code)
 - b. ***Place of Service Code** (two-digits)
 - c. **Service Code Modifier(s)** (Service code modifiers must be two alpha-numeric characters. Up to four separate service code modifiers can be entered. When more than one service code modifier is entered, the modifiers will be automatically separated by a semicolon.)
 - d. ***Location of Service** (state)
 - e. If the initiating party enters a state from the Complex State list, further screening for dispute eligibility is required. The initiating party is required to attest to the following statement: ****I have reviewed the state-specific eligibility criteria regarding the IDR processes for this item or service, and attest that this item or service is eligible for the Federal IDR process.***

* Service Code: ① 96541 Service Code Modifier(s): 25;37;AI;GC * Place of Service Code: 11 * Location of Service: AK

* ☐ I have reviewed the state-specific eligibility criteria regarding the IDR processes for this item or service, and attest that this item or service is eligible for the Federal IDR process.

Figure 15: Complex State Attestation Statement

4.4 Save the Dispute Line Item or Service

The initiating party will follow the steps below to save the dispute line item or service:

4.4.1 Single Line Item – Not Bundled

- Select **Save** to save the dispute.
- Select **Exit** to exit the form without saving and submitting the dispute line item.
- The **Cancel Dispute Line Items** button does not appear for single line item disputes that are not bundled.

4.4.2 Single Line Item – Bundled

- Select **Save & Add Another** to add component line items or services to the dispute. Component services are optional. The criterion for a bundled dispute is listed under the service code information.

Notice of Independent Dispute Resolution (IDR) Initiation Web Form

- When all desired line items or services have been entered, select **Save** to save the dispute line item and progress to the next page of the web form.
- When the “Finished?” dialogue box appears, select **Continue** to submit the form. Select **Back** to add additional items or services, if necessary.
- Select **Cancel Dispute Line Items** to delete a dispute line item, if necessary. A confirmation modal will pop up confirming the deletion. Select **Yes** to delete the line item. Select **No** to continue without deleting the line item. The initiating party will also have an opportunity to delete dispute line items on the “Summary of Qualified Items and/or Services” section.

4.4.3 Batched Disputes

- After completing the service code information for the first dispute line item or service, the initiating party must select **Save & Add Another**.
- The initiating party may not submit the dispute without adding more than one item. If the initiating party tries to save after entering only one item, it will receive the warning: **Batched items or services require two or more line items**.
 - The “**Notice of IDR Initiation**” web form will verify that the **Date of the qualified IDR item or service** entered for each item or service is prior to the open negotiation start date entered by the initiating party earlier in the web form.
 - The web form will also verify that the **Date of the qualified IDR item or service** entered for each item or service is within 30 business days of all items and services in a batched dispute, unless the 90-calendar-day cooling off period applies.
 - If the 90-calendar-day cooling off period applies, the items and services in the batched dispute are not subject to the 30 business day date of service requirement.
- After entering multiple line items or services, select **Save** to save and progress to the next page of the web form.
- When the “Finished?” dialogue box appears, select **Continue** to submit the form. Select **Back** to add additional items or services.
- Select **Cancel Dispute Line Items** to delete a dispute line item, if necessary. A confirmation modal will pop up confirming the deletion. Select **Yes** to delete the line item. Select **No** to continue without deleting the line item. The initiating party will also have an opportunity to delete dispute line items on the “Summary of Qualified Items and/or Services” section.

5 Notice of Initiation Form — Summary of Qualified Items and/or Services

This section of the form contains a summary table of the items and services added to the form. On this section of the form the initiating party may upload additional information to support the dispute and delete any line items it does not wish to submit.

5.1 Summary of Qualified Items and/or Services Table

- After selecting **Continue**, review the **Summary of Qualified Items and/or Services** table displayed on the next page.
- Select the link displayed in the table if changes to an item or service are needed.
- Select the trash icon to delete a line item or service.

Notice of Independent Dispute Resolution (IDR) Initiation Web Form

- Select the **Add Another Item** button to add an item or service.



Note: If the initiating party is submitting a single dispute the Add Another Item button will not display.

- The column headings in the table reflect the type of dispute the initiating party is initiating: Single Line Item – Not Bundled, Single Line Item – Bundled, or Batched Items or Services.

5.1.1 Single Line Item — Not Bundled

The single line item – not bundled table displays the following columns:

1. **Description of Item or Service**
2. **Claim Number**
3. **Date of Item or Service**
4. **Qualifying Payment Amount (QPA)**
5. **Location of Service (include state)**
6. **Service Code**
7. **Service Code Modifier(s)**
8. **Place of Service Code(s)**

Summary of Qualified Items and/or Services

This is a summary of the dispute items or services entered. Be sure **NOT** to include personal identifying information (PII) or protected health information (PHI) in the description of items or services.

	Description of item(s) or service(s)	Claim Number	Date of item or service	Qualifying Payment Amount (QPA)	Location of service (include state)	Service Code	Service Code Modifier(s)	Place of service code(s)
1	X-Ray of the Right Femur	12345	05/04/2025	\$500.00	AK	96541	25;37;AI;GC	11

Figure 16: Notice of Initiation — Summary of Qualified Items and/or Services Table Single Line Item — Not Bundled

5.1.2 Single Line Item — Bundled

The single line item – bundled table displays the following columns:

1. **Description of Item(s) or Service(s)**
2. **Claim Number**
3. **Line Item Type**
4. **Date of Item or Service**
5. **Qualifying Payment Amount (QPA)**
6. **Location of Service (include state)**
7. **Service Code**
8. **Service Code Modifier(s)**
9. **Place of Service Code(s)**

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Summary of Qualified Items and/or Services					
	Description of item(s) or service(s)	Claim Number	Line item type	Date of item or service	Qualifying Payment Amount(QPA)
1	x-ray of the right femur	12345	Bundled Item or Service	04/22/2022	600
2	professional services	12345	Component Item or Service	04/14/2022	600

Figure 17: Notice of Initiation — Summary of Qualified Items and/or Services Table
Single Line Item — Bundled

5.1.3 Batched Items or Services

The batched items or services table displays the following columns:

1. **Description of Item(s) or Service(s)**
2. **Claim Number**
3. **Date of Item or Service**
4. **Qualified Payment Amount (QPA)**
5. **Location of Service (including state)**
6. **Service Code**
7. **Service Code Modifier(s)**
8. **Place of Service Code(s)**

5.2 Additional Supporting Documentation

1. Upload any additional supporting documentation that is relevant to the dispute. Additional supporting documentation may prevent delays in processing the dispute and expedite the process.



Important: To upload additional supporting documentation, select the **Upload Files** button or drag and drop documents into the appropriate space on the web form or drag and drop documents into the “Or drop files” area of the web form. The file limitation for the entire dispute is 500MB. Be sure the file(s) meets this limitation. The file name is displayed when the information is loaded.

2. After reviewing the inputs on the table, if the initiating party does not have any other items to add, select the **Sign & Submit** button on the bottom left of the page.



Important: If the initiating party tries to upload a file greater than 500MB, this message will appear: “The file you are attempting to upload exceeds the 500MB file size limit for the entire dispute and cannot be uploaded. Reduce the file size and try attaching the document again.”

Notice of Independent Dispute Resolution (IDR) Initiation Web Form

Figure 18: Notice of Initiation — “Additional Supporting Documentation” Section

6 Notice of Initiation Form — Submit IDR Notice of Initiation Web Form

The final steps in completing the “**Notice of IDR Initiation**” web form include selecting a preferred certified IDR entity and attesting that no conflict of interest (COI) exists between the initiating party and the selected certified IDR entity.

6.1 Preferred Certified IDR Entity

Select the dropdown arrow in the ***IDRE legal business name** field and select the certified IDR entity preferred to handle the dispute.

Figure 19: Notice of Initiation — “Preferred Certified IDR Entity” Section

6.2 Complete COI Attestation

1. Select the “Yes” or “No” radio button next to the following statement: ****Is the undersigned individual below a third-party administrator or other service provider initiating on behalf of the plan, issuer, carrier, or Health Care Provider/Health Care Facility/Provider of Air Ambulance Services?***
2. Select the checkbox next to the following statement: ****I (We), the undersigned initiating party (or representative of the initiating party), attest that to the best of my knowledge the preferred certified IDR entity does not have a disqualifying conflict of interest and that the item(s) and/or service(s) at issue are qualified IDR item(s) and/or service(s) within the scope of the Federal IDR process.***
3. Enter a name in the ***Initiating party** field.
4. The ***Date** field will automatically populate with today’s date and cannot be changed.
5. Select **Submit**.

Notice of Independent Dispute Resolution (IDR) Initiation Web Form



Important: Applicability for the Federal IDR Process includes meeting the 90-day cooling off period for like items and services to the same plan/issuer.

The screenshot shows the 'Conflict of Interest attestation' section. It includes a blue callout box at the top stating: 'Applicability for the Federal IDR process includes meeting the 90-day cooling off period for like items and services to the same plan/issuer.' Below this, the text reads: 'Conflict of Interest attestation' and '*As the initiator, you will need to attest the following: 1'. A question follows: 'Is the undersigned individual below a third party administrator or other service provider initiating on behalf of the plan, issuer, carrier, or Health Care Provider/Health Care Facility/Provider of Air Ambulance Services?'. There are two radio buttons: 'Yes' and 'No'. Below this is a checkbox with the text: 'I, the undersigned initiating party (or representative of the initiating party), attest that to the best of my knowledge the preferred certified IDR entity does not have a disqualifying conflict of interest and that the item(s) and/or service(s) at issue are qualified item(s) and/or service(s) within the scope of the Federal IDR process.' At the bottom, there are two fields: '*Initiating party (or representative of the initiating party):' with a 'Print Name' input field, and '*Date:' with a date picker showing 'Nov 9, 2022'.

Figure 20: Notice of Initiation — Conflict of Interest Attestation

7 Notice of IDR Initiation Web Form Confirmation

Once the initiating party submits the web form, it will receive a confirmation email that the form has been received and a set of next steps.

The screenshot shows the 'Confirmation' page. It starts with the heading 'Confirmation'. Below it is a paragraph: 'You have submitted the IDR initiation notice to the Departments. This notice must also be furnished to the non-initiating party the same day the notice is furnished to the Departments. We advise you print, save, and send a copy of this notice to the non-initiating party to fulfill the requirements for initiating the federal IDR process.' Below this is a blue box with a single step: '1 You must provide the non-initiating party with a copy of the Notice of the IDR Initiation.' Underneath is a section titled 'Next steps:' followed by a bulleted list: 'As the initiating party, it is your responsibility to provide the non-initiating party with a copy of the Notice of IDR initiation on the same day you submitted this form.', 'Select Print PDF to print this document for your records.', 'You'll receive an email from FederalIDRQuestions@cms.hhs.gov confirming the initiation date of the dispute.', 'The non-initiating party will be notified that an IDR notice has been submitted and they will be asked to review the preferred IDR entity.', 'You'll receive a selection notice via email confirming the selection of the certified IDR entity or notifying you that the non-initiating party has selected an alternative certified IDR entity. If an alternative IDR entity has been selected, you will be given the opportunity to accept or deny the alternate selection.', 'After a final certified IDR entity has been selected you will be notified of the selection and will be provided with information regarding the next steps, including how to submit your offers to the certified IDR entity and how to submit the administrative and IDR entity fees.', 'To exit the web form, select Exit.' At the bottom left are two buttons: 'Print PDF' and 'Exit'.

Figure 21: Confirmation Page Next Steps



Important: As the initiating party, it is a requirement to provide the non-initiating party with a copy of the Notice of IDR initiation on the same day the initiating party submitted this web form. Selecting the Notice of IDR Initiation link, located in the banner on the Confirmation page, provides additional information regarding the requirement to provide the non-initiating party with a copy of this notice.

Select **Print PDF** to print this document for record keeping.

The initiating party will receive an email from the [Federal IDR Questions mailbox](mailto:FederalIDRQuestions@cms.hhs.gov) confirming the initiation date of the dispute.

Notice of Independent Dispute Resolution (IDR) Initiation Web Form

The non-initiating party will be notified by the Federal IDR Portal that an IDR notice has been submitted and will be asked to review the preferred certified IDR entity.

The initiating party will receive a selection notice via email confirming the selection of the certified IDR entity or a notification that the non-initiating party has selected an alternative certified IDR entity. If an alternative certified IDR entity has been selected, the initiating party will be given the opportunity to accept or deny the alternate selection.

After a final certified IDR entity has been selected, the initiating party will be notified of the selection and will be provided with information regarding next steps, including how to submit offers to the certified IDR entity and how to submit the administrative and IDR entity fees.

To exit the web form, select ***Exit***.

8 Frequently Used Acronyms

Table 1: Acronyms Table

Acronym	Definition
CHIP	Children's Health Insurance Plan
CMS	Centers for Medicare & Medicaid Services
COI	Conflict of Interest
ERISA	Employee Retirement Income Security Act of 1974
FEHB	Federal Employees Health Benefits
IDR	Independent Dispute Resolution
NPI	National Provider Identifier
NSA	No Surprises Act
OPM	Office of Personnel Management
QPA	Qualifying Payment Amount
TIN	Taxpayer Identification Number
TMA III	Texas Medical Association et al. v. U.S. Department of Health and Human Services et al. Case No. 6:22-cv-450-JDK (TMA III) order.
TPA	Third Party Administrator