

Federal Independent Dispute Resolution (IDR) Notice of Offer Web Form



User Guide

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IDR Notice of Offer Web Form User Guide

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Introduction

This user guide contains an overview of the IDR **“Notice of Offer”** web form and tips for successfully completing and submitting the web form. This document is applicable to health care providers, health care facilities, providers of air ambulance services, group health plans, health insurance issuers, and Federal Employees Health Benefits (FEHB) Program carriers, subject to the Federal IDR Process,¹ to resolve payment disputes. As referred to in this document, a health care provider, facility, or provider of air ambulance services, and a plan, issuer, or FEHB carrier are the “parties” or “disputing parties” to the Federal IDR Process.

The **“Notice of Offer”** web form is used during the **submission of offers and payment of fees phase** of the Federal IDR Process. This phase of the Federal IDR Process comes immediately after the certified IDR entity assigned to the parties’ dispute has attested that the certified IDR entity does not have a conflict of interest and has indicated that the dispute is eligible for the Federal IDR Process. During the submission of offers and payment of certified IDR entity fees phase, **certified IDR entities will ask disputing parties to submit their final payment offers** for the item(s) or service(s) being disputed. **Effective November 2022, all disputing parties must submit their offers through the “Notice of Offer” web form.**

There are five main steps that disputing parties need to complete during the submission of offers and payment of certified IDR entity fee phase of the Federal IDR Process, one of which is completing the **“Notice of Offer”** web form.

Submission of Offers and Payment of Certified IDR Entity Fee Phase Overview:

The disputing party will:

1. **Receive an email from the certified IDR entity** requesting payment of the administrative fee and certified IDR entity fee.
2. **Receive an email from the Federal IDR Questions inbox** at FederalIDRQuestions@cms.hhs.gov with a unique link to the **“Notice of Offer”** web form for the related dispute.
3. **Submit** both the **administrative fee** and certified **IDR entity fee** directly to the certified IDR entity.
4. Complete and **submit** the **“Notice of Offer” web form, including** supporting documentation.
5. **Receive an acknowledgement email** once the web form is submitted and communications from the certified IDR entity if more information is needed related to the offer.

Important Information about the “Notice of Offer” Web Form:

- The disputing parties must submit the **“Notice of Offer”** web form and pay the administrative and IDR entity fees **no later than 10 business days** after the email with the **“Notice of Offer”** web form link is sent.

¹ Requirements Related to Surprise Billing; Part II, 86 FR 55980-55994 (October 7, 2021), <https://www.federalregister.gov/d/2021-21441>.



Important: *The day the email with the “Notice of Offer” web form link is sent is day zero of the ten-business-day period that the parties must submit their offer and pay their administrative and certified IDR entity fees. The disputing parties may open and review the web form link any number of times before submission.*

- Some of the prepopulated fields on the “**Notice of Offer**” web form are not editable. If the disputing party thinks that any of the non-editable prepopulated fields have incorrect information, it must **contact the certified IDR entity** to identify what information is incorrect and why. The disputing party may need to provide evidence to support this assertion.
- **Submit the “Notice of Offer” web form only once.** If a correction is needed to the “**Notice of Offer**” web form after submitting the web form, contact the certified IDR entity.
- The disputing party may exit the web form without submitting it by selecting the **Exit** button at the bottom of the page. Doing so will **clear all of the information entered on the web form**. The disputing party can access the link again but must re-enter any information previously entered.



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 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 Offer process and the web form to the [Federal IDR Questions](#) inbox.*

1 Before the Notice of Offer Web Form – Required Information

Before starting the “**Notice of Offer**” web form, the disputing party should have the following items available to submit along with the web form:

- A final offer of an out-of-network rate expressed as a dollar amount

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- Any information requested by the certified IDR entity relating to the offer
- Information regarding the circumstances included in Table 1 or Table 2 below relating to the offer
- Any additional information relating to the offer that the disputing party would like the certified IDR entity to consider that does not include information on prohibited factors. For more information on the prohibited factors, refer to the relevant IDR Process for Disputing Parties Guidance available on the [CMS Overview of rules & fact sheets](#) page.



Important: For information about the Qualifying Payment Amount (QPA) in light of the 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, please refer to “FAQs About Consolidated Appropriations Act Implementation, 2021 Part 62” (October 6, 2023).

Table 1: Circumstances/Factors Considered for Qualified Non-Air Ambulance Items and Services

Circumstances/Factors for Qualified Non-Air Ambulance Items and Services	
1.	<i>The level of training, experience, and quality and outcomes measurements</i> of the provider or facility that furnished the qualified IDR item or service (such as those endorsed by the consensus-based entity authorized in Section 1890 of the Social Security Act).
2.	<i>The market share</i> held by the provider or facility or that of the plan in the geographic region in which the qualified IDR item or service was provided.
3.	<i>The acuity of the participant, beneficiary, or enrollee</i> receiving the qualified IDR item or service, <i>or the complexity of furnishing</i> the qualified IDR item or service to the participant, beneficiary, or enrollee.
4.	<i>The teaching status, case mix, and scope of services</i> of the facility that furnished the qualified IDR item or service, if applicable.
5.	<i>Demonstrations of good faith efforts (or lack thereof) made by the provider or facility or the plan to enter into network</i> agreements with each other, and, if applicable, <i>contracted rates</i> between the provider or facility, as applicable, and the plan during the previous four plan years.
6.	<i>Additional information submitted by a party</i> that relates to the offer for the payment amount for the qualified IDR item or service that is the subject of the payment determination and that does not include information on prohibited factors.
7.	<i>The QPA submitted.</i> Certified IDR entities may request, and disputing parties may provide, additional information relevant to the submitted QPA. Certified IDR entities can consider such information when determining the appropriate payment amount for an item or service, to the extent such information does not include the prohibited factors identified in 26 CFR 54.9816-8T(c)(4)(v), 29 CFR 2590.716-8(c)(4)(v), and 45 CFR 149.510(c)(4)(v).

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Table 2: Circumstances/Factors Considered for Qualified Air Ambulance Items and Services

Circumstances/Factors for Qualified Air Ambulance Items and Services	
1.	The quality and outcomes measurements of the provider of air ambulance services that furnished the services.
2.	The acuity of the condition of the participant, beneficiary, or enrollee receiving the services, or the complexity of providing services to the participant, beneficiary, or enrollee.
3.	The level of training, experience, and quality of medical personnel that furnished the air ambulance services.
4.	The air ambulance vehicle type, including the clinical capability level of such vehicle.
5.	The population density of the point of pick-up for the air ambulance (such as urban, suburban, rural, or frontier).
6.	Demonstrations of good faith efforts (or lack thereof) made by the provider of air ambulance services or the plan to enter into network agreements, as well as contracted rates between the provider and the plan during the previous four plan years.
7.	Additional information submitted by a party related to the offer for the payment amount for the qualified IDR item or service that is the subject of the payment determination and that does not include information on prohibited factors.
8.	The QPA submitted. Certified IDR entities may request, and disputing parties may provide additional information relevant to the submitted QPA. Certified IDR entities can consider such information when determining the appropriate payment amount for an item or service, to the extent such information does not include the prohibited factors identified in 26 CFR 54.9816-8T(c)(4)(v), 29 CFR 2590.716-8(c)(4)(v), and 45 CFR 149.510(c)(4)(v).

Applicable to providers and facilities only:

- Number of employees employed by the provider practice or facility
- Practice specialty or type

Applicable to providers of air ambulance services only:

- Air ambulance vehicle type, including the clinical capacity level of such vehicle
- Air ambulance point of pick-up (i.e., zip code)

Applicable to plans and issuers and FEHB carriers only:

- Coverage area of the plan, issuer, or FEHB carrier (i.e., the zip code where the item or service was furnished)
- Geographic area used to calculate the QPA
- Health plan type (e.g., fully-insured, self-insured, partially self-insured, FEHB carrier)

2 Complete the Notice of Offer Web Form

The initiating and non-initiating party will receive an email from the [Federal IDR Questions](#) inbox with information and instructions on how to complete the “**Notice of Offer**” web form and a unique link for the disputing party to complete the “**Notice of Offer**” web form.

2.1 Agree to the Security Statement

After selecting the unique link provided from the [Federal IDR Questions](#) inbox via email, the disputing party will land on the “Notice of Offer” welcome page. Review all information provided and select the check box at the bottom of the web page to agree to the security and privacy agreement. Select **Continue**.

2.2 Enter the Dispute Reference Number

On the next page of the web form, enter the * **Dispute Reference Number** (referred to as “IDR Reference Number” on the email containing the unique link to the “**Notice of Offer**” web form) and select **Continue**. A warning message will appear letting the disputing party know that once the “**Notice of Offer**” web form is submitted, it can no longer make any changes to its information. Select **Continue**.

2.3 Update Point-of-Contact Email Addresses (if necessary)

Next, if necessary, the disputing party may update the email address(es) provided for the organization by navigating to the appropriate email field and typing in the correct email address.

2.4 Complete the Additional Information Section

The information displayed in the “Additional Information” section will vary based on whether the party completing the “**Notice of Offer**” web form is the initiating party or the non-initiating party and whether it is a health care provider, health care facility, provider of air ambulance services, plan, issuer, or FEHB carrier.

2.4.1 * I Am A

If the initiating party is completing the web form, the * **I am a** field will display in the “Additional Information” section and is not editable. This field is prepopulated with information the initiating party submitted in the “**Notice of IDR Initiation**” web form.

If the non-initiating party is completing the web form, the * **I am a** field will display in the “Additional Information” section and is prepopulated with information the initiating party submitted in the “**Notice of IDR Initiation**” web form. Confirm the information provided in the * **I am a** field is correct and update it if necessary.

2.4.2 * Health Plan Type

The **Health Plan Type** field will only display on the “**Notice of Offer**” web form in the “Additional Information” section if the disputing party completing the web form is a health plan, issuer, or FEHB carrier.



Note: *If the disputing party is a health care facility, health care provider, or provider of air ambulance services, the Health Plan Type field will not display.*

- When the **initiating party** is a health plan, individual health insurance issuer, or FEHB carrier:
 - The **Health Plan Type** field is pre-populated with the value the initiating party selected on the “**Notice of IDR Initiation**” web form and is not editable.
- When the **non-initiating party** is a health plan, individual health insurance issuer, or FEHB carrier:
 - If the non-initiating party **completed the “IDR Entity Selection Response Form,”** the field is pre-populated with the value the non-initiating party either attested to or selected on the “**IDR Entity Selection Response Form**” and is not editable.
 - If the non-initiating party **did NOT complete the “IDR Entity Selection Response Form,”** it must review and either attest to or update the ***Health Plan Type** provided by the initiating party.



Important: *For detailed steps on how to attest to or update the Health Plan Type, refer to the IDR Entity Selection Response Web Form User Guide found on the [CMS No Surprises Act: Overview of rules & fact sheets web page](#).*

2.4.3 * Practice or Facility Size

If the disputing party completing the web form is a health care facility or a health care provider, the *** Practice or facility size** field will display in the “Additional Information” section. Select the dropdown next to the *** Practice or facility size** field to select the size of the practice or facility. This field is required for health care facilities and health care providers.

2.4.4 Additional Information Section

The disputing party may upload additional files relevant to the offer by selecting the **Upload Files** button or dragging and dropping files in the “Or drop files” area of the “Additional Information” section.

Before uploading documentation, clearly label the document so the certified IDR entity will know which line item or service the document is supporting.

2.5 Complete the Payment Information Section

In the first part of the “Payment Information” section the disputing party may review previously submitted attestations about whether the disputed items or services are batched qualified item(s) or services and whether the items or services are bundled qualified item(s) or service(s).

The next part of the “Payment Information” section is a payment information summary table.



Important: *The information displayed in the payment information summary table will vary by disputing party based on if it is a provider, facility, provider of air ambulance services, plan, issuer, or FEHB carrier, and whether the dispute is a single, bundled, or batched dispute.*

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The following pre-populated fields will display for all parties. These fields are prepopulated with information the initiating party submitted in the **“Notice of IDR Initiation”** web form and **are not editable**.

If the disputing party thinks any of the non-editable prepopulated fields have incorrect information, it must contact the certified IDR entity to identify what information is incorrect and why.

- Description of Item or Service
- Claim Number
- Location of Service
- Date of Service
- Service Code
- QPA for Applicable Year

The * **Final Payment Offer** field will display for all parties and **all parties are required to complete the field**. The * **Final Payment Offer** field is a numeric field that supports decimals. **Use this field to provide a final payment offer for the dispute line item.**

The Percentage of QPA (qualifying payment amount) column will display for all parties and **is automatically populated** based on the final payment offer the disputing party enters, and the value in the QPA for Applicable Year column that the initiating party provided when it completed the **“Notice of IDR Initiation”** web form. The Percentage of QPA column is not editable.

The following additional fields will display **only if the disputing party is a provider of air ambulance services**. These fields are required:

- * **Air Ambulance Vehicle Type**
- * **Clinical Capacity Level of such Vehicle**
- * **Air ambulance point of pick up zip code** (i.e., the location of the patient at the time they were placed on the air ambulance).

The following additional field **will display only if the disputing party is a health care provider or health care facility**. This field is required:

- * **Provider or Facility practice specialty**

The following additional fields will display **only if the disputing party is a group health plan, individual health insurance issuer, or FEHB carrier**. These fields are required:

- * **Coverage Area Zip Code** (i.e., the zip code where the item or service was furnished)
- * **Geographic Region**

The * **Coverage Area Zip Code** field is used to provide the zip code where the item or service was furnished.

The * **Geographic Region** field is used to add the relevant geographic area (i.e., the nearest metropolitan area) where the items or services were rendered for the purposes of calculating the QPA. This is a dynamic field. When the disputing party enters the first three letters of the * **Geographic Region**, options will begin to populate. Select the applicable * **Geographic Region** when it appears.

Parties may upload files relevant to the dispute line items or services via the **Upload Files** button at the bottom of the “Payment Information” section. Before uploading documentation, clearly label

the document so the certified IDR entity will know which line item or service the document is supporting.



Note: When completing a “Notice of Offer” web form for a bundled dispute, an additional Line Item Type column will display on the offer summary table. This column will indicate whether the dispute line item was submitted as the bundled item or service or a component item or service. It is not required to submit component items or services.

If component items or services were submitted, the disputing party may notice that some of the field values that were provided for the bundled item or service were not provided for the component items or services.

2.6 Sign & Submit the Notice of Offer Web Form

To sign and submit the “**Notice of Offer**” web form:

1. Select the check box next to the following statement: ***I agree to:***
 - a. ***Pay the administrative fee.***
 - b. ***Pay the IDR entity fee if my dispute is found eligible for the IDR process.***
 - c. ***Pay the outstanding amount (if any) of the out-of-network rate that is my responsibility as determined by the certified IDR entity.***
 - d. ***I also understand that the final payment determination made by the certified IDR entity is binding upon the parties and not subject to judicial review except under certain limited circumstances.***
2. Enter a name in the * **Signature** text box. The date field is not editable.
3. Select **Submit & Continue**.
4. From the pop-up window select **Submit**.

3 Notice of Offer Web Form Confirmation

Once the disputing party submits the web form, an email is sent to confirm the web form has been received along with a set of next steps.

Next steps:

1. ***Make sure to pay the certified IDR entity fee and administrative fee*** directly to the certified IDR entity.
2. The certified IDR entity will contact the disputing party if it needs additional information.
3. The certified IDR entity will select one of the offers submitted by the disputing parties.
4. The disputing party will receive an email from the certified IDR entity with a determination within 30 business days after the date the certified IDR entity was selected.
5. Select **Print PDF** to print this document for the disputing party’s records.



Important: Print or save the PDF for reference. After exiting the web form, there is not another chance to access the information that was submitted.

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

4 Frequently Used Acronyms

Table 3: Acronyms Table

Acronym	Definition
CMS	Centers for Medicare & Medicaid Services
FEHB	Federal Employees Health Benefits
IDR	Independent Dispute Resolution
NSA	No Surprises Act
QPA	Qualifying Payment Amount
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