# The No Surprises Act

## Independent Dispute Resolution (IDR) Process

The No Surprises Act (NSA, P.L. 116-260 Div. BB, Title I) established certain federal consumer protections related to *surprise billing*—that is, circumstances in which individuals receive large, unexpected medical bills when they are unknowingly, and potentially unavoidably, treated by out-of-network (OON) providers. In those situations, the law generally (1) limits the amount consumers pay to what they would have paid had the care been provided by an in-network provider and (2) establishes a federal IDR process (before a private arbitrator (IDR entity)) that may be used to determine how much insurers must pay OON providers for the care. This Infographic summarizes the federal IDR process, incorporating a June 2026 final rule (91 *Fed. Reg.* 33900) aimed at improving the IDR process functionality.

### What are the surprise billing circumstances to which NSA's protections apply?

- **OON emergency services**
- **OON nonemergency services** Provided at an in-network facility
- **OON air ambulance services**

### What happens after an OON provider furnishes care in these circumstances?

**OON provider bills patient's insurer** (Day 1*) → **Insurer pays or denies claim** (Day 30*) → **Open negotiation** (Day 71*) *If provider is unsatisfied with payment amount or denial*

- **Agreement reached** Payment made
- **No agreement** Proceed to IDR process (Day 110*)

### IDR Process

**IDR initiated** (Day 116*)
When either party (typically the OON provider) submits notice to the other party and the IDR portal maintained by the Centers for Medicare & Medicaid Services (CMS)

→ **Non-initiating party responds** (Day 121*)

→ **Preliminary joint selection or random assignment of IDR entity** (Day 124*)

→ **IDR entity attests to no conflict of interest** (Day 129*)

→ **Final IDR entity selection and parties pay administrative fee to CMS** (Day 130*)

→ **IDR entity determines dispute eligibility** (Day 137*)

→ **If eligible, each party submits a payment offer** (Day 144*)
Each party also pays the IDR entity fee

→ **IDR entity selects between offers** (Day 172*)
Selection must be based on (1) QPA** and (2) other specified factors, and is generally not judicially reviewable

→ **Payment or reimbursement** (Day 202*)
Relevant party must pay or reimburse amounts per determination

→ **Refund of IDR entity fee** (Day 214*)
IDR entity refunds IDR entity fee to the prevailing party

### From 2023 through 2025

**4.7 M+** disputes were initiated.

**99.9%** of disputes were initiated by OON providers and facilities.

**85.7%** of disputes resulted in the OON provider or facility as the prevailing party.

*Number of days are estimated using CMS guidance on IDR Timeline for Claims. The estimate also assumes an initial bill occurs on a Monday, does not account for holidays, and assumes, where applicable, the maximum duration for each step.

**QPA, or qualifying payment amount, is generally an insurer's 2019 median in-network rate for the item or service, indexed for inflation. 42 U.S.C. §300gg-111(a)(3)(E).

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