

Notice of Independent Dispute Resolution (IDR) Initiation – Resubmission Web Form



User Guide

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Notice of IDR Initiation – Resubmission Web Form User Guide

Table of Contents

Introduction	1
1. Before Starting the Web Form.....	3
2. Agreeing to the Security & Privacy Statement.....	3
3. Dispute Reference Number Page	3
4. Qualification Questions	4
5. Contact Information Section.....	5
5.1. Health Care Provider, Health Care Facility, or Provider of Air Ambulance Services Information or Third Party Administrator (TPA).....	6
5.2. Group Health Plan / Health Insurance Issuer / FEHB Carrier Information or TPA	6
6. Assigned Certified IDR Entity, Summary of Qualified Items and/or Services, Additional Supporting Documentation and Signing the Web Form.....	7
6.1. Assigned Certified IDR Entity.....	7
6.2. Summary of Qualified Items and/or Services	8
6.2.1. Reviewing Detailed Line Item and Payment Information	8
6.2.2. Saving a Dispute Line Item and/or Service to Resubmit Later.....	8
6.3. Additional Supporting Documentation.....	9
6.4. Sign the Web Form.....	10
7. Dispute Type.....	11
8. Dispute Item Information and Payment Information.....	12
8.1. Line Item.....	13
8.2. Payment Information.....	13
8.3. Type of Qualified Item(s) or Service(s)	14
9. Web Form Confirmation	16
Abbreviations and Acronyms.....	17

Table of Figures

Figure 1: Security & Privacy Statement.....	3
Figure 2: Dispute Reference Number Field and Continue Button	4
Figure 3: Qualification Questions Page	5

Table of Tables

Table 1: Abbreviations and Acronyms.....	17
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Notice of IDR Initiation – Resubmission Web Form User Guide

Introduction

This user guide provides an overview of the **“Notice of IDR Initiation – Resubmission”** web form and the steps for successfully completing and submitting the web form. This user guide is intended to assist parties who have submitted a dispute through the Federal Independent Dispute Resolution (IDR) process and received an email from Auto-Reply-FederalIDRQuestions@cms.hhs.gov with a link to the **“Notice of IDR Initiation – Resubmission”** web form.

The **“Notice of IDR Initiation – Resubmission”** web form will be sent to the initiating party if the certified IDR entity’s eligibility review of a dispute determines that one or more of the dispute line items must be resubmitted because it was improperly batched or bundled. The initiating party must complete the **“Notice of IDR Initiation – Resubmission”** web form by the deadline specified in the email. The non-initiating party will not need to take any action.

Resubmission Process Overview:

1. During eligibility review, the certified IDR entity will determine if one or more dispute line item(s) and/or service(s) are improperly batched or bundled but otherwise remain eligible for the Federal IDR process.
2. The certified IDR entity will offer the initiating party an opportunity to correctly resubmit the dispute line item(s) and/or services(s) and the initiating party will receive an email from Auto-Reply-FederalIDRQuestions@cms.hhs.gov. This email will contain the following information:
 - A unique link to the **“Notice of IDR Initiation – Resubmission”** web form.
 - The date and time that the **“IDR Initiation – Resubmission”** web form will expire.
 - A .csv file attachment with all of the associated dispute’s line items and the following details: **Claim Number, Item or Service Code, Date of Service, Final Resolution, Resubmission Due Date** and **Resubmission Reason**.
3. The initiating party will have 4 business days to resubmit the dispute line item(s) and/or service(s). Within the 4 business day timeframe, the initiating party will review the section of the web form titled Summary of Qualified Items and/or Services and choose whether to:
 - Resubmit all the listed dispute line item(s) and/or service(s) at once,
 - Resubmit some of the dispute line item(s) and/or service(s) and save others for a separate resubmission, or
 - Choose to not submit the resubmission web form.
4. Any dispute that is resubmitted will be subject to the standard administrative and entity fees for initiating a new dispute.
 - If the initiating party chooses to submit the completed **“Notice of IDR Initiation – Resubmission”** web form, the initiating party will receive a submission confirmation email from Auto-Reply-FederalIDRQuestions@cms.hhs.gov. The non-initiating party and the certified IDR entity will receive an email from Auto-Reply-FederalIDRQuestions@cms.hhs.gov providing next steps.
 - If the initiating party chooses not to submit the **“Notice of IDR Initiation – Resubmission”** web form for some or all of the line item(s) or service(s) within the 4-business-day

Notice of IDR Initiation – Resubmission Web Form User Guide

timeframe, the initiating party will not have another opportunity to resubmit the dispute line item(s) and/or service(s) associated with the web form.

Important Information about the “Notice of IDR Initiation – Resubmission” Web Form:

- The “**Notice of IDR Initiation – Resubmission**” web form is only accessible through a unique web link. The unique web link is associated with the original dispute and contains dispute line item(s) and/or service(s) that the certified IDR entity has determined are eligible for resubmission.
- The “**Notice of IDR Initiation – Resubmission**” web form is an abbreviated version of the “**Notice of IDR Initiation**” web form. Some fields on the web form will be prepopulated and are unable to be changed. The information in these fields will be based on information provided by the initiating party on the “**Notice of IDR Initiation**” web form submitted with the original dispute. If any of the information on this page is incorrect and the field is not editable, contact FederalIDRQuestions@cms.hhs.gov.
- Certified IDR entities may send all dispute line items eligible for resubmission back to the initiating party for resubmission in one group, or they may send eligible dispute line item(s) and/or service(s) back to the initiating party in multiple groups. If the certified IDR entity sends the line item(s) and/or service(s) back in multiple groups, the initiating party will receive multiple emails informing them the dispute line item(s) and/or service(s) need to be resubmitted. Each email will contain a unique link to a “**Notice of IDR Initiation – Resubmission**” web form.
- The initiating party should not assume that all dispute line items sent in a single grouping should be resubmitted together. It is the initiating party’s responsibility to ensure that all items submitted together in a single “**Notice of IDR Initiation – Resubmission**” web form are compliant with Federal IDR requirements for batching and/or bundling and address the underlying reason they certified IDR entity requested resubmission. The initiating party will only have one opportunity to resubmit a particular dispute line item.
- The initiating party may remove some of the dispute line items from the “**Notice of IDR Initiation – Resubmission**” web form, for example if the line items are not eligible to be resubmitted in a single batch, but they may not add dispute line items to the web form.
- If the initiating party chooses to remove any of the dispute line item(s) and/or service(s) from the “**Notice of IDR Initiation – Resubmission**” web form by utilizing the **Save for Later** button, the initiating party will have the opportunity to save those dispute line item(s) and/or service(s) for a later dispute resubmission. Any dispute line items from the “**Notice of IDR Initiation – Resubmission**” web form that have been saved for later must be resubmitted within 4 business days of the date of the email notifying the initiating party of the opportunity to resubmit these line items. For more information on how to save line item(s) and/or service(s) for a separate resubmission refer to [Section 6.2](#).
- The “**Notice of IDR Initiation – Resubmission**” web form link will have an expiration date specified in the email from Auto-Reply-FederalIDRQuestions@cms.hhs.gov with the subject line “**Notice of IDR Initiation – Resubmission form due**”.



Important: Send questions regarding the resubmission process and the “Notice of IDR Initiation – Resubmission” web form to: FederalIDRQuestions@cms.hhs.gov.

1. Before Starting the Web Form

Before starting the “*Notice of IDR Initiation – Resubmission*” web form, the initiating party should have the following items available:

- The original dispute reference number.
 - The dispute reference number is provided in the email with the unique link to the web form. In this email, the dispute number is referred to as the IDR reference number.
 - The initiating party must enter the original dispute reference number to access the “*Notice of IDR Initiation – Resubmission*” web form.
- The Notice of IDR Initiation for the original dispute.
 - The initiating party will have the opportunity to verify information they had provided when completing the original dispute’s “*Notice of IDR Initiation*” web form.

2. Agreeing to the Security & Privacy Statement

After selecting the unique link provided via email from Auto-Reply-FederalIDRQuestions@cms.hhs.gov, the initiating party will land on the welcome page. On the welcome page the initiating party will:

1. Review all information provided.
2. Select the **checkbox** at the bottom of the page to agree to the security and privacy agreement.
3. Select **Continue** to navigate to the next page.

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

Continue

Figure 1: Security & Privacy Statement

3. Dispute Reference Number Page

On the Dispute Reference Number page the initiating party will:

1. Enter the **Dispute Reference Number** for the original dispute, using the following format: “DISP-XXXXXXX.” The original dispute reference number will be provided in the same email containing the link to the “*Notice of IDR Initiation – Resubmission*” web form.

Notice of IDR Initiation – Resubmission Web Form User Guide

2. Select **Continue**.

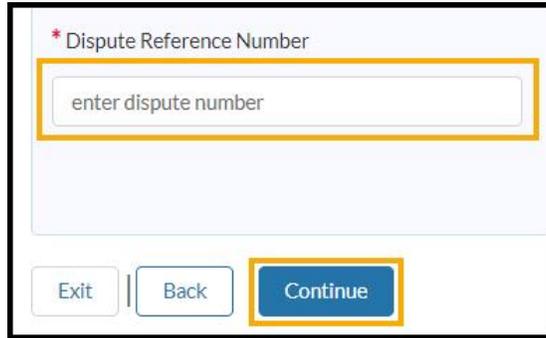
A screenshot of a web form interface. At the top, there is a label '* Dispute Reference Number' with a red asterisk. Below it is a text input field containing the placeholder text 'enter dispute number'. The input field is highlighted with a yellow border. Below the input field, there are three buttons: 'Exit', 'Back', and 'Continue'. The 'Continue' button is highlighted with a yellow border.

Figure 2: Dispute Reference Number Field and Continue Button

4. Qualification Questions

The Qualification Questions page contains a series of questions to confirm eligibility for the Federal IDR process. The answers to the questions will be prepopulated with information the initiating party provided on the **“Notice of IDR Initiation”** web form for the original dispute. The initiating party will review the information on this page. If any of the information is incorrect and cannot be edited the initiating party should contact FederalIDRQuestions@cms.hhs.gov.

1. **I am (or I am acting on behalf of) a:** (This field is not editable)
 - 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”
2. 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 initiating party must provide at least one of the following: (These fields are editable)
 - a. **Tax ID.** The tax identification number (TIN) must be 9 digits.
 - b. **National Provider Identifier (NPI).** The NPI number must be 10 digits.
3. **Health Plan Type:** (This field is editable)
 - a. “Individual health insurance issuer”
 - b. “Fully insured private group health plan”
 - c. “Either partially or fully self-insured private (employment-based) group health plan”
 - d. “Federal Employees Health Benefits (FEHB) carrier”
 - e. “Church plan”
 - f. “Nonfederal government plan (or state or local government plan)”
 - g. “No Plan/Issuer Response”

Notice of IDR Initiation – Resubmission Web Form User Guide

4. If the initiating party selected “either partially or fully self-insured private (employment-based) group health plan,” they must also confirm the answer the following question: ***Is the ERISA*** (Employee Retirement Income Security Act) ***plan self-insured?*** (This field is editable)
 - a. “Yes”
 - b. “No”
5. If the initiating party selected “Federal Employees Health Benefits (FEHB) carrier” they must confirm the **3 digit Enrollment Code**.
6. Select **Continue** to proceed to the contact information section.

* Indicates a required field

* I am (or I am acting on behalf of) a:

- Group health plan
- Individual health insurance issuer
- Federal Employees Health Benefits (FEHB) Carrier
- Health care provider
- Health care facility
- Provider of air ambulance services

Note: 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, CHIP, or TRICARE plan coverage), the dispute is not eligible for the IDR process.

Tax ID:

National Provider Identifier (NPI):

* Health Plan Type:

Exit | Back | Continue

Figure 3: Qualification Questions Page

5. Contact Information Section

On the “Contact Information” page the initiating party will review the provider’s and issuer’s contact information, which will be prepopulated with information the initiating party provided on the “**Notice of IDR Initiation**” web form. If any of the prepopulated information is incorrect and cannot be edited the initiating party should contact FederalIDRQuestions@cms.hhs.gov.

5.1. Health Care Provider, Health Care Facility, or Provider of Air Ambulance Services Information or Third Party Administrator (TPA)

In the Health Care Provider, Health Care Facility, or Provider of Air Ambulance Services Information or Third Party Administrator section of the Contact Information page, the initiating party will confirm the following information:

1. ***I'm a(n):*** (This field is not editable)
 - a. "Health care provider"
 - b. "Health care facility"
 - c. "Provider of air ambulance services"
2. ***Hospital, health care facility or group name*** (This field is not editable)
3. ***Mailing Address*** (This field is editable)
4. ***Mailing Address Line 2*** (This field is editable)
5. ***City*** (This field is editable)
6. ***State*** (This field is editable)
7. ***Zip Code*** (This field is editable)
8. ***Email*** (This field is editable)
9. ***Phone*** (This field is editable)
10. ***Fax*** (This field is editable)
11. The following primary and secondary points of contact fields, all of which are editable (If there is a TPA, this is where the TPA enters their contact information):
 - a. ***Name***
 - b. ***Mailing Address***
 - c. ***Mailing Address Line 2***
 - d. ***City***
 - e. ***State***
 - f. ***Zip Code***
 - g. ***Email***
 - h. ***Phone***

5.2. Group Health Plan / Health Insurance Issuer / FEHB Carrier Information or TPA

In the Group Health Plan / Health Insurance Issuer / FEHB Carrier Information or TPA section, the initiating party will confirm the following information:

1. ***Select one of the insurance provider types below:*** (This field is not editable from the contact information page)
 - a. "Group health plan"
 - b. "Individual health insurance issuer"
 - c. "Federal Employees Health Benefits (FEHB) Carrier"

Notice of IDR Initiation – Resubmission Web Form User Guide

2. **Health Insurance Plan or Company** (This field is not editable)
3. **Mailing Address** (This field is editable)
4. **Mailing Address Line 2** (This field is editable)
5. **City** (This field is editable)
6. **State** (This field is editable)
7. **Zip Code** (This field is editable)
8. **Email** (This field is editable)
9. **Phone** (This field is editable)
10. **Fax** (This field is editable)
11. The following primary and secondary points of contact fields, all of which are editable (If there is a TPA, this is where the TPA enters their contact information):
 - a. **Name**
 - b. **Mailing Address**
 - c. **Mailing Address Line 2**
 - d. **City**
 - e. **State**
 - f. **Zip Code**
 - g. **Email**
 - h. **Phone**

Select **Continue** to proceed to the next page.

6. Assigned Certified IDR Entity, Summary of Qualified Items and/or Services, Additional Supporting Documentation and Signing the Web Form

This page of the form:

- Lists the name of the certified IDR entity assigned to the dispute.
- Provides a summary table of the items and/or services sent back for resubmission.
- Contains sections for the initiating party to:
 - Upload additional information to support the dispute.
 - Sign the dispute.

6.1. Assigned Certified IDR Entity

In the Assigned Certified IDR Entity section of the page, the initiating party will review the name of the assigned certified IDR entity listed in the **Certified IDR entity** field. This field will be prepopulated with the name of the certified IDR entity assigned to the original dispute and cannot be changed. All resubmitted disputes must be assigned to the same certified IDR entity selected for the original dispute.

6.2. Summary of Qualified Items and/or Services

In the Summary of Qualified Items and/or Services section of the page, the initiating party will review the table of dispute line items and/or services. All dispute line items and/or services listed in the summary table will be sent for resubmission.



Important: The initiating party will receive an error message if they attempt to remove all line items and/or services from the summary table. If the initiating party does not wish to resubmit any of the dispute line items on the summary table, then the web form should not be submitted.

Search by Description of item(s) or service(s) <input type="text"/>								Save for Later
Description of item(s) or service(s)	Claim Number	Line item type ↑	Date of item or service	Qualifying Payment Amount (QPA)	Location of service (include state)	Service Code	Place of service code(s)	
<input type="checkbox"/> Test Item or Service 1	12345		2023-12-05	1000	MA	12345	23	
<input type="checkbox"/> Test Item or Service 2	12345-2		2023-12-05	1001	MA	12345	23	
<input type="checkbox"/> Test Item or Service 3	12345-3		2023-12-05	1002	MA	12345	23	

Figure 4: Summary of Qualified Items and/or Services Table

6.2.1. Reviewing Detailed Line Item and Payment Information

To review detailed line item and payment information about a line item or service select the hyperlinked description of the item or service. For information on the information provided in the detailed line item and payment information page refer to [Section 8](#).

Description of item(s) or service(s)	Claim Number	Line item type
<input type="checkbox"/> Test Item or Service 1	12345	

Figure 5: Hyperlinked Description of Item(s) or Service(s)

To navigate back to the Summary of Qualified Items and/or Services section from the Dispute Item and Payment Information page, select **Save & Continue**.

6.2.2. Saving a Dispute Line Item and/or Service to Resubmit Later

To remove a dispute line item and/or service from the summary table and save it for a later resubmission:

1. Select the **checkbox** next to the dispute line item(s) and/or service(s).
2. Select **Save for Later**.

Notice of IDR Initiation – Resubmission Web Form User Guide

Search by Description of item(s) or service(s) <input type="text"/>									<input type="button" value="Save for Later"/>
	Description of item(s) or service(s)	Claim Number	Line item type ↑	Date of item or service	Qualifying Payment Amount (QPA)	Location of service (include state)	Service Code	Place of service code(s)	
<input checked="" type="checkbox"/>	Test Item or Service 1	12345		2023-12-05	1000	MA	12345	23	
<input type="checkbox"/>	Test Item or Service 2	12345-2		2023-12-05	1001	MA	12345	23	

Figure 6: Line Item or Service Checkbox and Save for Later Button

3. Select **Yes** from the “Save Selected Items and/or Services for Later?” popup window.
4. At the end of this section of the web form, the initiating party will have the opportunity to review all dispute items and/or services saved for later to resubmit separately. The initiating party may also come back to the Notice of IDR Initiation - Resubmission form at any point within 4 business days from when they received the resubmission notification email from Auto-Reply-FederalIDRQuestions@cms.hhs.gov, by selecting the unique link to the “**Notice of IDR Initiation – Resubmission**” web form, and resubmit any line items or services they have saved for later.

Save Selected Items and/or Services for Later?

The selected items and/or services will no longer appear on the Summary of Qualified Items and/or Services table.

Important: After saving items or services for later they will no longer appear on the Summary of Qualified Items and/or Services table. At the end of this form, you will have the opportunity to review all items and/or services you saved for later and submit them as separate single, batched, or bundled dispute(s), or choose not to submit them at all. Additionally, you may come back to this form at any time before the submission due date and submit any items or services you saved for later. If you remove an item or service in error, refresh your browser and enter the form again to view all items and/or services.

Are you sure you want to save these items and/or services for later?

Figure 7: Save Selected Items and/or Services for Later? Popup



Important: If you remove an item or service in error, refresh your browser and enter the form again to view all items and/or services.

6.3. Additional Supporting Documentation

In this section of the page the initiating party can upload additional supporting documentation that is relevant to the dispute. Additional supporting documentation may prevent delays in processing the dispute and expedite the process. To upload additional supporting documentation, select the **Upload Files** button or drag and drop documents into the **Or drop files** area. The file limitation for the entire dispute is 500MB. The file(s) must meet this limitation.

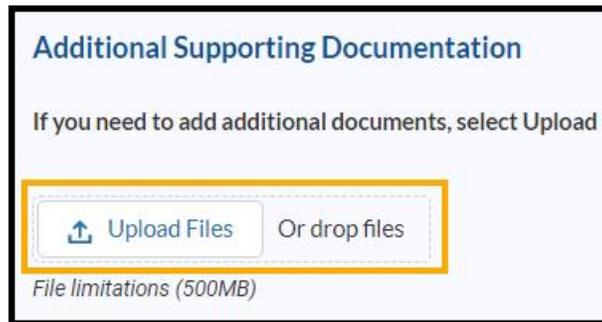


Figure 8: Additional Supporting Documentation Section



Important: Submitting additional supporting documentation relevant to the resubmitted dispute may prevent delays in processing the dispute and expedite the process. Only provide information relevant to the resubmitted dispute.

6.4. Sign the Web Form

In this section of the page the initiating party will sign the “**Notice of IDR Initiation – Resubmission**” web form by:

1. Selecting the **checkbox** next to the following statement: “I agree to:
 - Pay the administrative fee.
 - Pay the IDR entity fee if my dispute is found eligible for the IDR process.
 - Pay the outstanding amount (if any) of the out-of-network rate that is my responsibility as determined by the certified IDR entity.
2. I also understand that the final payment determination made by a certified IDR entity is binding upon the parties and not subject to judicial review except under certain limited circumstances.”
3. Typing in the name of the initiating party in the **Initiating party** text box.
4. Confirming the date. The date will automatically populate with today’s date and cannot be edited.
5. Selecting **Continue**.

Notice of IDR Initiation – Resubmission Web Form User Guide

Sign & Submit

I agree to:

- Pay the administrative fee.
- Pay the IDR entity fee if my dispute is found eligible for the IDR process.
- Pay the outstanding amount (if any) of the out-of-network rate that is my responsibility as determined by the certified IDR entity.
- I also understand that the final payment determination made by a certified IDR entity is binding upon the parties and not subject to judicial review except under certain limited circumstances.

* Initiating party: Date:

Figure 9: Signing the Web Form

7. Dispute Type

On this page, the initiating party will indicate whether they are submitting a single, batched, or bundled dispute by selecting the appropriate radio button in response to the question: ***What are you disputing today?*** The options are:

- ***“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 and/or services (a bundled payment arrangement).”*** If this option is selected the following additional question will display:
 - ***Are you disputing a bundled payment arrangement (multiple items or services billed or reimbursed under one service code)?***
 - “Yes”
 - “No”
- ***“A batched dispute. I’m disputing multiple items or services related to the treatment of a similar condition.”*** This option will display only if there are multiple line items being resubmitted.



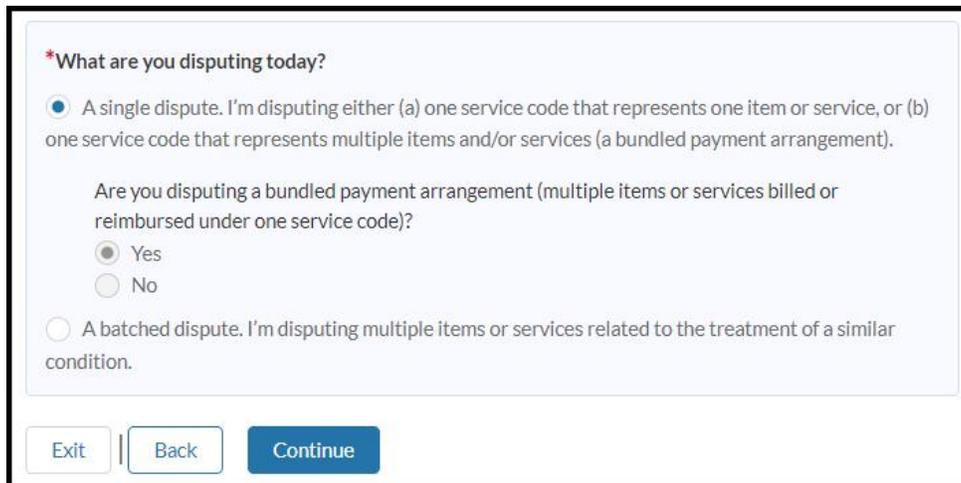
Important: The answer to the question “Are you disputing a bundled payment arrangement (multiple items or services billed or reimbursed under one service code)?” will be automatically populated, based on the amount of line items and or services in the dispute, and will not be editable.

Important: If only one line item or service is being resubmitted the batched dispute type option will not display.

After indicating the type of dispute being submitted, either a ***Continue*** or a ***Submit*** button will display.

Notice of IDR Initiation – Resubmission Web Form User Guide

- A **Continue** button will display if the initiating party needs to progress to the Dispute Item and Payment Information page ([Section 8](#)) to provide additional information for any of the dispute line items.



*What are you disputing today?

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 and/or services (a bundled payment arrangement).

Are you disputing a bundled payment arrangement (multiple items or services billed or reimbursed under one service code)?

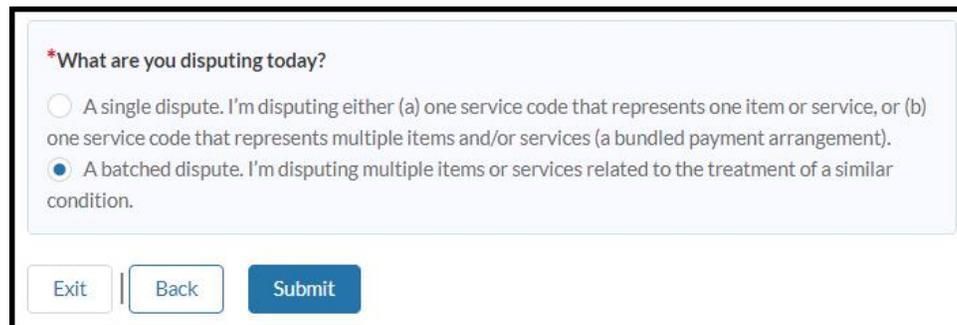
Yes
 No

A batched dispute. I'm disputing multiple items or services related to the treatment of a similar condition.

Exit | Back | **Continue**

Figure 10: What Are You Disputing Today? - Example Where the Continue Button Displays

- A **Submit** button will display if no additional information is needed and the dispute can be submitted. Upon selecting **Submit** the dispute will be submitted and the initiating party will be directed to the confirmation page. Refer to [Section 9](#) for information on the Confirmation page and information on how to resubmit any dispute line item(s) and/or service(s) saved for a later submission.



*What are you disputing today?

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 and/or services (a bundled payment arrangement).

A batched dispute. I'm disputing multiple items or services related to the treatment of a similar condition.

Exit | Back | **Submit**

Figure 11: What Are You Disputing Today? - Example Where the Submit Button Displays

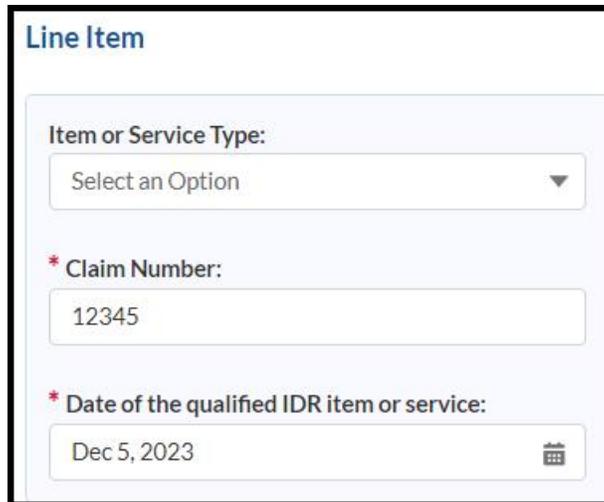
8. Dispute Item Information and Payment Information

On this page the initiating party will review the dispute line item or service being resubmitted. All information on this page will be prepopulated based on information the initiating party provided on the “**Notice of IDR Initiation**” web form and may be updated if necessary.

8.1. Line Item

In the Line Item section of the page, the initiating party will confirm the **Item or Service Type** (if submitting a bundled dispute), the **Claim Number** and the **Date of the qualified IDR item or service**:

1. If the initiating party is submitting a bundled dispute, the **Item or Service Type** field will be required. To indicate the item or service type, select the dropdown caret and select the appropriate option:
 - a. “Bundled Item or Service”
 - b. “Component Item or Service”
2. Confirm the claim number provided in the **Claim Number** field.
3. Confirm the date provided in the **Date of the qualified IDR item or service** field.



The screenshot shows a form titled "Line Item" with the following fields:

- Item or Service Type:** A dropdown menu with the text "Select an Option" and a downward arrow.
- * Claim Number:** A text input field containing the value "12345".
- * Date of the qualified IDR item or service:** A date picker field showing "Dec 5, 2023" and a calendar icon.

Figure 12: Line Item Section

8.2. Payment Information

On the Payment Information section of the page the initiating party will:

- Confirm the **description of the item or service** and the **Qualifying Payment Amount (QPA)**.
- Upload supporting documentation for the QPA, if the QPA was updated.
- Confirm the **Cost sharing amount allowed** and the **Initial payment amount for the item(s) and/or service(s) (if applicable)**.



Important: *If the line item or service was not originally submitted as a bundled item or service and is being resubmitted as a bundled item or service the initiating party will need to provide the QPA for the line item or service.*

Payment Information

Multiple qualified claims may be considered as part of a single IDR determination (batching). In the case of qualified IDR items or services that are billed by a provider, facility, or provider of air ambulance services as part of a bundled payment arrangement, those qualified items or services may be submitted and considered as part of one payment determination by a certified IDR entity.

* Enter the description of the item or service.

* Qualifying Payment Amount(QPA):

* Upload 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, explanation of payments.

Or drop files

File limitations (500MB)

ProofofQPA_Blue Sky Hospital_DISP-211221_DLI - 779676_4/1/2024:Test File 2.docx

* Cost sharing amount allowed:

Initial payment amount for the item(s) and/or service(s) (if applicable):

Figure 13: Payment Information Section



Important: *The initiating party will be able to view the file name of any file attached to the dispute line item via the “Notice of IDR Initiation” web form, but they will not be able to open or view the file.*

8.3. Type of Qualified Item(s) or Service(s)

On the Type of Qualified Item(s) or Service(s) section of the page the initiating party will confirm the:

- **Item(s) or service(s) under dispute.** The options are:

Notice of IDR Initiation – Resubmission Web Form User Guide

- “Emergency item(s)/service(s)”
- “Post-stabilization service(s)”
- “Professional service(s)”
- “Hospital-based service(s)”
- “Item(s)/service(s) furnished by a nonparticipating provided at a participating health care facility”
- “Out-of-network air ambulance service(s)”
- “Other: Provide description”
- **Service code**
- **Place of service code**
- **Location of service code**
 - If the initiating party updates the **Location of service code** and the new location of service is a state from the Complex State list the initiating party will need to select a **checkbox** to attest to the following statement: **“I have reviewed the state-specific eligibility criteria regarding the IDR process for this item or service, and attest that this item or service is eligible for the Federal IDR process.”**

Select **Save & Continue** to progress through this page for each line item being resubmitted.

Type of Qualified Item(s) or Service(s)
* Select the item(s) or service(s) under dispute and provide the service code.

- Emergency item(s)/service(s)
- Post-stabilization service(s)
- Professional service(s)
- Hospital-based service(s)
- Item(s)/service(s) furnished by a nonparticipating provider at a participating health care facility
- Out-of-network air ambulance service(s)
- Other: Provide description

* Service Code: * Place of Service Code: * Location of Service:

Figure 14: Save & Continue

After all required information has been provided for each dispute line item the initiating party will complete the form by:

1. Reviewing the Summary of Qualified Items and/or Services table ([Section 6.2](#)) and selecting **Continue**.
2. Reconfirming the payment dispute type ([Section 7](#)) and selecting **Submit**.

9. Web Form Confirmation

On the Confirmation page the initiating party will download and print a PDF of the Notice of IDR Initiation – Resubmission form for their records and review the next steps.

Next steps:

1. Select **Print PDF** to download and print this document for your records.
2. Send a copy of the PDF to the non-initiating party.
3. You'll receive an email from Auto-Reply-FederalIDRQuestions@cms.hhs.gov confirming the initiation date of the dispute.
4. The non-initiating party will be notified that the “**Notice of IDR Initiation – Resubmission**” form has been submitted.
5. You will be provided with information regarding the next steps, including how to submit offers to the certified IDR entity and how to submit the administrative and certified IDR entity fees.
6. If you saved any items or services for later, select the **Continue Submitting** button to return to the “Summary of Qualified IDR Items and/or Services” page ([Section 6.2](#)). Or you can come back to this form at any point within the resubmission timeframe to resubmit any line items or services saved for later.
7. To exit the web form, select **Exit**.



*If dispute line item(s) and/or service(s) have been saved for later, select **Print PDF** to download and print a PDF of the dispute that was just resubmitted before selecting **Continue Submitting**.*

You have submitted the Notice of IDR Initiation – Resubmission form to the Department. This notice must also be furnished to the non-initiating party on 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 requirement for initiating the Federal IDR process.

Next steps:

- As the initiating party, it is your responsibility to provide the non-initiating party with a copy of the Notice of IDR initiation - Resubmission form on the same day you submitted this form.
- Select **Print PDF** to print this document for your records.
- You'll receive an email from Auto-Reply-FederalIDRQuestions@cms.hhs.gov confirming the initiation date of the dispute.
- The non-initiating party will be notified that the Notice of IDR Initiation - Resubmission form has been submitted.
- You will be provided with information regarding the next steps, including how to submit offers to the certified IDR entity and how to submit the administrative and IDR entity fees.
- If you saved any items or services for later, select the **Continue Submitting** button at the bottom of the form to review the items and/or services and submit them as a separate single, batched, or bundled dispute, or choose not to submit them at all.
- To exit the web form, select **Exit**.

Print PDF

Continue Submitting

Exit

Figure 15: Confirmation Page - Example with Continue Submitting Button

10. Abbreviations and Acronyms

Table 1: Abbreviations and Acronyms

Abbreviation	Definition
IDR	Independent Dispute Resolution
ERISA	Employee Retirement Income Security Act
FEHB	Federal Employee Health Benefits
NPI	National Provider Identifier
PDF	Portable Document Format
QPA	Qualifying Payment Amount
TIN	Tax Identification Number
TPA	Third Party Administrator