

ACR Initial Summary
Federal Independent Dispute Resolution (IDR) Operations Final Rule
May 28, 2026

The United States Department of the Treasury, Department of Labor, and Department of Health and Human Services (the Departments) released a [final rule](#) outlining rules related to the Federal independent dispute resolution (IDR) process initiated by the No Surprises Act (NSA) on May 28, 2026. The effective date for most provisions of the final rule is 60 days after the date of publication in the federal register (to be determined).

The American College of Radiology (ACR) is pleased that the Departments have recognized and finalized policy changes to address concerns raised with regard to imaging providers' access to the IDR process. Specifically, the final rule provides a reduced administrative fee, regulations to require insurers to provide necessary information with initial payments, and expanded bundling regulations.

Administrative Fee

The Departments updated claim volume and expenditures estimated to be made by the Departments in administering the Federal IDR process and recalculated the administrative fee amount. As a result, the Departments finalized a new administrative fee of \$15 per party per dispute, effective for disputes initiated on or after five business days after the publication of the final rule.

Use of Claim Adjustment Reason Codes (CARC) and Remittance Advice Remark Codes (RARCs)

The Departments recognized communication gaps between plans and providers that have contributed to inefficiencies in the IDR process. Therefore, the Departments finalized the proposal to require plans and issuers to use claim adjustment reason codes (CARCs) and remittance advice remark codes (RARCs) to communicate information on whether the claim is eligible for the federal IDR process. The ACR supported this proposal and believes the inclusion of this information with payment remittance or notice of denial will give providers a better understanding of what claims are eligible for IDR and will reduce the volume of ineligible claim submissions.

In response to ACR comments requesting enforcement penalties for insurers that fail to provide CARC and RARC codes as required, the Departments stated that they will not impose consequences in these final rules, but “will continue to assess the need for Federal IDR process changes and propose any such changes in future rulemaking”.

Batching Guidelines

The Departments received many stakeholder comments on batching rules in order to ensure that all providers have access to the IDR process. The Departments specifically recognize that some radiologists assert that the current batching rules prohibited them from batching radiology items

and services provided to a single patient because these items and services are billed under different service codes. The Departments acknowledge the concern that absent the ability to batch, radiologists are effectively denied access to the Federal IDR process because the reimbursements for most individual radiology codes are low-dollar and therefore are not cost-effective to dispute individually.

The Departments modified the proposal to limit batched determinations to 25-line items in a single dispute and increased the limit to 50-line items, consistent with ACR comments requesting this increase.

The Departments finalized proposals to expand opportunities for batching by allowing batching services provided to a single patient during the same patient encounter and billed on the same claim form. In addition, the Departments finalized ranges of Current Procedural Terminology® (CPT) codes that may be batched in order to promote efficiency in the IDR process. The rule includes 27 CPT code ranges for radiology.

The Departments acknowledged ACR comments regarding a proposal to allow batching of services for single patients. The College recommended that the requirement for these services to be “on consecutive days” and “on the same claim form” be removed since a patient may receive many imaging services within a 30-day period that are related to the same condition and may or may not be on consecutive days or on the same claim form. The final rule states, “The Departments understand that batching by single patient encounter may not be efficient for radiology services in some cases. However, the Departments also proposed batching requirements that would allow radiology claims belonging to the same range of Category I CPT codes as defined by the Departments in guidance to be batched together, even if furnished to different patients...Therefore, the Departments believe that removing the requirement that a single patient encounter occur on one or more non-consecutive days is not necessary to address the commenter’s concerns.”

The ACR supported the proposal to allow batching by CPT code groups to be specified and updated regularly in guidance. With regards to the 27 groups of radiology-related CPT codes, the College felt that batching by 27 sub-categories of the radiology division would add complexity for providers and IDR entities in identifying claim eligibility and appropriateness of batching. Further, the ACR commented that the sub-categories do not align with standard clinical practice since all diagnostic exams may be used in reference to one another. The ACR suggested a compromise approach, simplifying the process by allowing batching in 4 categories of CPT codes, diagnostic radiology, interventional radiology, nuclear medicine and radiation oncology. The Departments responded that these suggested categories are “overly broad” and would not be related to the treatment of a similar condition because they would likely represent a wider range of dissimilar conditions. The Departments finalized the 27 groups of radiology CPT codes with minor changes.

The Departments intend to release clarifying guidance regarding the batching provisions, as finalized, and their implementation.

The Departments finalized the proposal to use statutory waiver authority to shorten the 90-day cooling off time period with respect to qualified IDR items and services for which a certified IDR entity makes a payment determination as part of a batched dispute to 30 days. The ACR appreciated this proposal to reduce the length of the cooling off period to encourage efficiency and continue to allow access to the IDR process. The ACR requested that the cooling off period be lowered to one business day as lengthy cooling off periods provide incentive for payers to underpay. In response, the Departments stated that further shortening or eliminating the cooling off period for all claims would undermine the intended effect of the cooling off period to encourage the early resolution of disputes through open negotiation and reduce the number of disputes that are initiated in the Federal IDR process.

ACR staff will continue to review the IDR operations final rule and will provide a detailed summary in the coming days.

For questions about the final rule, contact [Katie Keysor](#), ACR Senior Director of Economic Policy.