

For Immediate Release
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National Emergency Physician, Anesthesiologist, and Radiologist Groups Express Growing Concern Over HHS' Extended Closure of Arbitration Process

WASHINGTON, DC - As the *No Surprises Act's* Independent Dispute Resolution (IDR) portal surpasses the 8-week mark since its halt of full operations for the filing of new IDRs, the American College of Emergency Physicians, American College of Radiology, American Society for Anesthesiology, the Emergency Department Practice Management Association, and Radiology Business Management Association together urged the U.S. Department of Health and Human Services to reopen the national portal.

“The already substantial backlog of arbitration cases grows worse each passing day. Clinicians face considerable cash-flow challenges that are being compounded by their lack of recourse in resolving payment disputes. While we appreciate that IDR entities were recently instructed to start processing claims submitted prior to August 3, this only pertains to single disputes and continues to prevent batching, further straining the IDR system.

The Departments also need to reform overly restrictive batching rules and guidance to reflect the real-world billing practices of emergency physicians, anesthesiologists and radiologists and the original intent of the *No Surprises Act*. Without a change to these rules, the IDR system will remain overwhelmed by single, inefficient claims that add administrative burdens to the health care system as a whole and detract resources from patient care.

These kinds of barriers and delays in dispute resolution undermine the well-crafted and interconnected policies of the *No Surprises Act* that serve to protect patients from surprise medical bills. The law cannot function as intended while its most crucial functions remain inaccessible.

These limitations on the dispute resolution portal are unnecessary. The Eastern District Court of Texas's ruling last month in favor of the Texas Medical Association made clear that dispute resolution could continue uninterrupted inside a framework of good-faith compliance with the court's ruling while simultaneously crafting permanent policies through the proper rulemaking process.”

We urge an immediate and full opening of the *No Surprises Act's* IDR process to prevent further adverse impacts on physician practices.

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