A Guide to Understanding the IDR Process in 2025

How Zotec's ZiNG Solution Streamlines Independent Dispute Resolution (IDR) and Protects Your Revenue

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The Evolving Landscape of IDR Compliance and Reimbursement

Since the introduction of the No Surprises Act (NSA), Independent Dispute Resolution (IDR) has become a critical tool for Zotec to ensure that our clients get fair reimbursement from payers—particularly in out-of-network scenarios. While the NSA was designed to protect patients from unexpected medical bills, it also introduced a complex and evolving regulatory process for providers and payers alike.

As of 2025, the Centers for Medicare & Medicaid Services (CMS), alongside the Departments of Health and Human Services (HHS), Labor, and Treasury, continue to refine IDR guidance and protocols. Delays, backlogs, and ongoing legal challenges have created a volatile environment. It is more important than ever for **Zotec to educate our clients while giving them** the technical infrastructure and strategic expertise to navigate IDR successfully.

Key IDR Updates and Legislative Considerations in 2025

Backlog Management: CMS continues to work through a significant backlog of IDR cases. In recent rulings, the agencies have emphasized streamlining submissions and penalizing repeat errors.

Increased Scrutiny on Batching: The final rules have tightened restrictions on how claims can be batched—by service code, provider group, and date range. Errors in batching can now delay or invalidate an entire submission.

Transparency in Payment Determination: Recent policy enhancements now require IDR entities to clearly explain the rationale for their decision, citing the qualifying payment amount (QPA) and other submitted data.

Stronger Compliance Enforcement: IDR decisions must be paid in a "timely manner," though federal definitions remain somewhat vague. However, enforcement actions are increasing for delays.

Zotec's Strategy: Zotec leverages insights from state and federal outcomes to build stronger in- and out-of-network negotiation strategies. By combining contracting expertise with legal IDR trends, Zotec supports fair, data-driven reimbursement regardless of network status.

What This Means

The bottom line? IDR is no longer just about disputes—it's a compliance issue and a revenue strategy. Without the right systems, our clients risk:

- Losing eligible payments due to submission errors.
- Increasing administrative overhead.
- Failing to meet compliance timelines.

Zotec's End-to-End IDR Process with ZiNG

Zotec’s ZiNG (Zotec Intelligent Negotiation Guide) is a proprietary platform and service that simplifies and strengthens the IDR process. More than just a filing service, ZiNG combines analytics, automation, and industry-leading expertise to ensure your organization is prepared at every step.

Zotec’s approach includes:

1. Data Analysis to Target Payers

Identifying where underpayments exist using market benchmarking, historical reimbursement trends, and rate comparisons.

2. Identifying Target Rates

Strategically aligning reimbursement expectations using local and national median data, including inflation-adjusted 2019 baselines

3. 30-Day Open Negotiation

Before initiating arbitration, ZiNG supports your team with clean, data-backed negotiation packages.

4. Batch Management

Properly grouping up to 500 claims per submission, following CMS batching rules

5. Entity Selection

Ensuring the right certified IDR entity is chosen to review your submission.

6. Decision Monitoring

Tracking timelines, success rates, and decision logic with complete transparency.

7. Fee Management and Payout Tracking

Ensuring payer compliance with required timelines and minimizing delays in reimbursement.

Working with Trusted Third-Party Experts: Radix and HaloMD

To provide clients with additional flexibility and in-depth IDR support, Zotec has forged strategic partnerships with trusted vendors Radix and HaloMD:

- Radix: Offers Zotec clients preferred pricing and a proven track record in supporting out-of-network IDR cases. Their expertise enhances recovery potential and supports accurate, defensible submissions.
- HaloMD: Provides an alternative IDR partner with a similar commitment to streamlined processes, API integration, and proactive payer communication.

These partnerships allow Zotec clients to select the best-fit path for each IDR case—whether managed entirely through ZiNG, coordinated through Radix or Halo, or blended for maximum impact.

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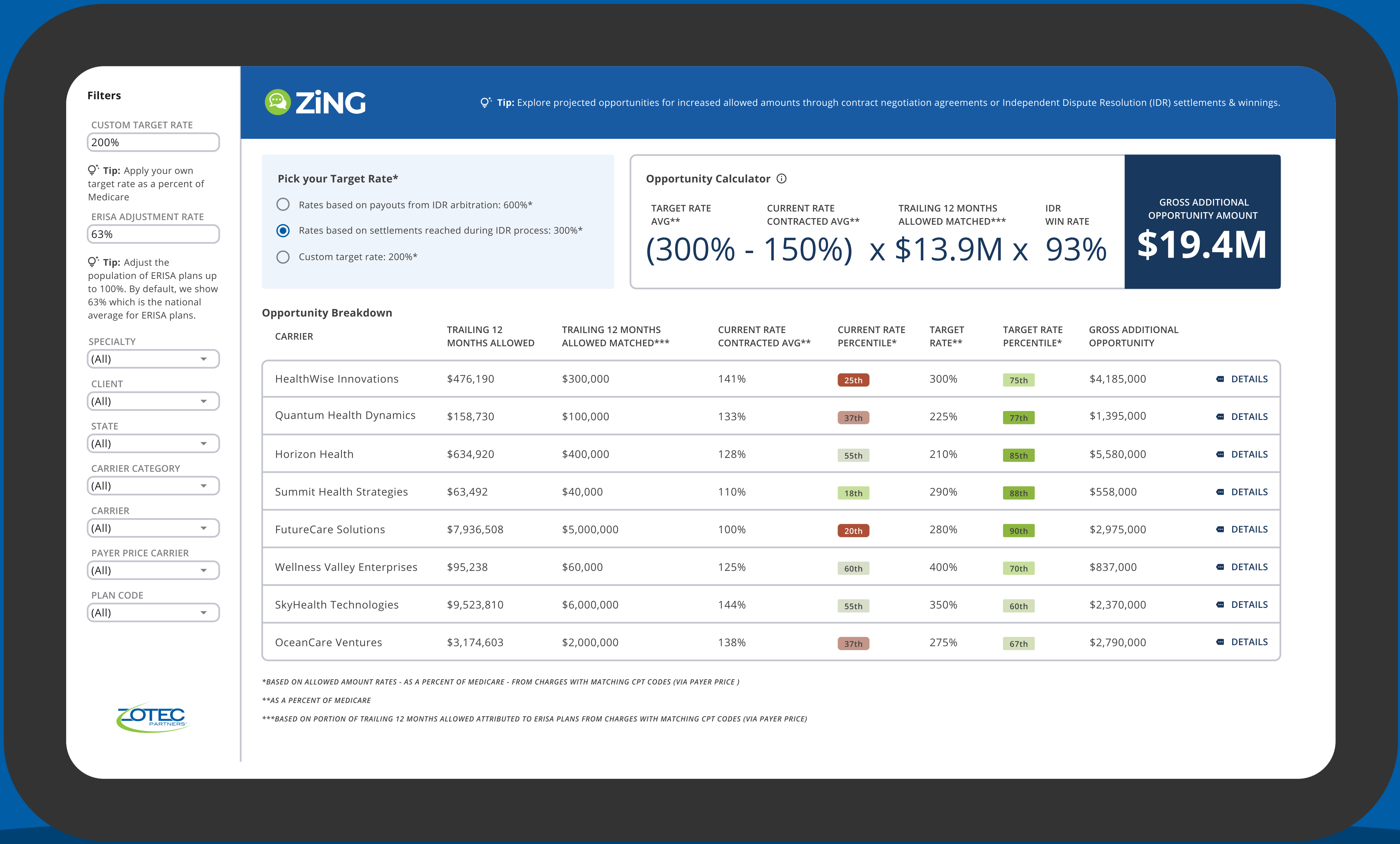
Zotec Intelligent Negotiation Guide



Filters

CUSTOM TARGET RATE
200%

Tip: Apply your own target rate as a percent of Medicare

ERISA ADJUSTMENT RATE
63%

Tip: Adjust the population of ERISA plans up to 100%. By default, we show 63% which is the national average for ERISA plans.

SPECIALTY (All)
CLIENT (All)
STATE (All)
CARRIER CATEGORY (All)
CARRIER (All)
PAYER PRICE CARRIER (All)
PLAN CODE (All)

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Tip: Explore projected opportunities for increased allowed amounts through contract negotiation agreements or Independent Dispute Resolution (IDR) settlements & winnings.

Pick your Target Rate*

- Rates based on payouts from IDR arbitration: 600%*
- Rates based on settlements reached during IDR process: 300%*
- Custom target rate: 200%*

Opportunity Calculator

TARGET RATE AVG**	CURRENT RATE CONTRACTED AVG**	TRAILING 12 MONTHS ALLOWED MATCHED***	IDR WIN RATE	GROSS ADDITIONAL OPPORTUNITY AMOUNT
(300% -	150%) x	$13.9M x	93%	$19.4M

Opportunity Breakdown

CARRIER	TRAILING 12 MONTHS ALLOWED	TRAILING 12 MONTHS ALLOWED MATCHED***	CURRENT RATE CONTRACTED AVG**	CURRENT RATE PERCENTILE*	TARGET RATE**	TARGET RATE PERCENTILE*	GROSS ADDITIONAL OPPORTUNITY	
HealthWise Innovations	$476,190	$300,000	141%	25th	300%	75th	$4,185,000	DETAILS
Quantum Health Dynamics	$158,730	$100,000	133%	37th	225%	77th	$1,395,000	DETAILS
Horizon Health	$634,920	$400,000	128%	55th	210%	85th	$5,580,000	DETAILS
Summit Health Strategies	$63,492	$40,000	110%	18th	290%	88th	$558,000	DETAILS
FutureCare Solutions	$7,936,508	$5,000,000	100%	20th	280%	90th	$2,975,000	DETAILS
Wellness Valley Enterprises	$95,238	$60,000	125%	60th	400%	70th	$837,000	DETAILS
SkyHealth Technologies	$9,523,810	$6,000,000	144%	55th	350%	60th	$2,370,000	DETAILS
OceanCare Ventures	$3,174,603	$2,000,000	138%	37th	275%	67th	$2,790,000	DETAILS

*BASED ON ALLOWED AMOUNT RATES - AS A PERCENT OF MEDICARE - FROM CHARGES WITH MATCHING CPT CODES (VIA PAYER PRICE)

**AS A PERCENT OF MEDICARE

***BASED ON PORTION OF TRAILING 12 MONTHS ALLOWED ATTRIBUTED TO ERISA PLANS FROM CHARGES WITH MATCHING CPT CODES (VIA PAYER PRICE)

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(ZiNG) provides healthcare organizations with unmatched visibility into payer performance and reimbursement opportunities. The dashboard benchmarks current contracted rates against arbitration and settlement outcomes, quantifies gross additional opportunity by carrier, and highlights underpayments at scale. With customizable filters and detailed analytics, ZiNG equips providers across specialties to negotiate stronger contracts, maximize revenue recovery, and ensure fair compensation for the care they deliver.

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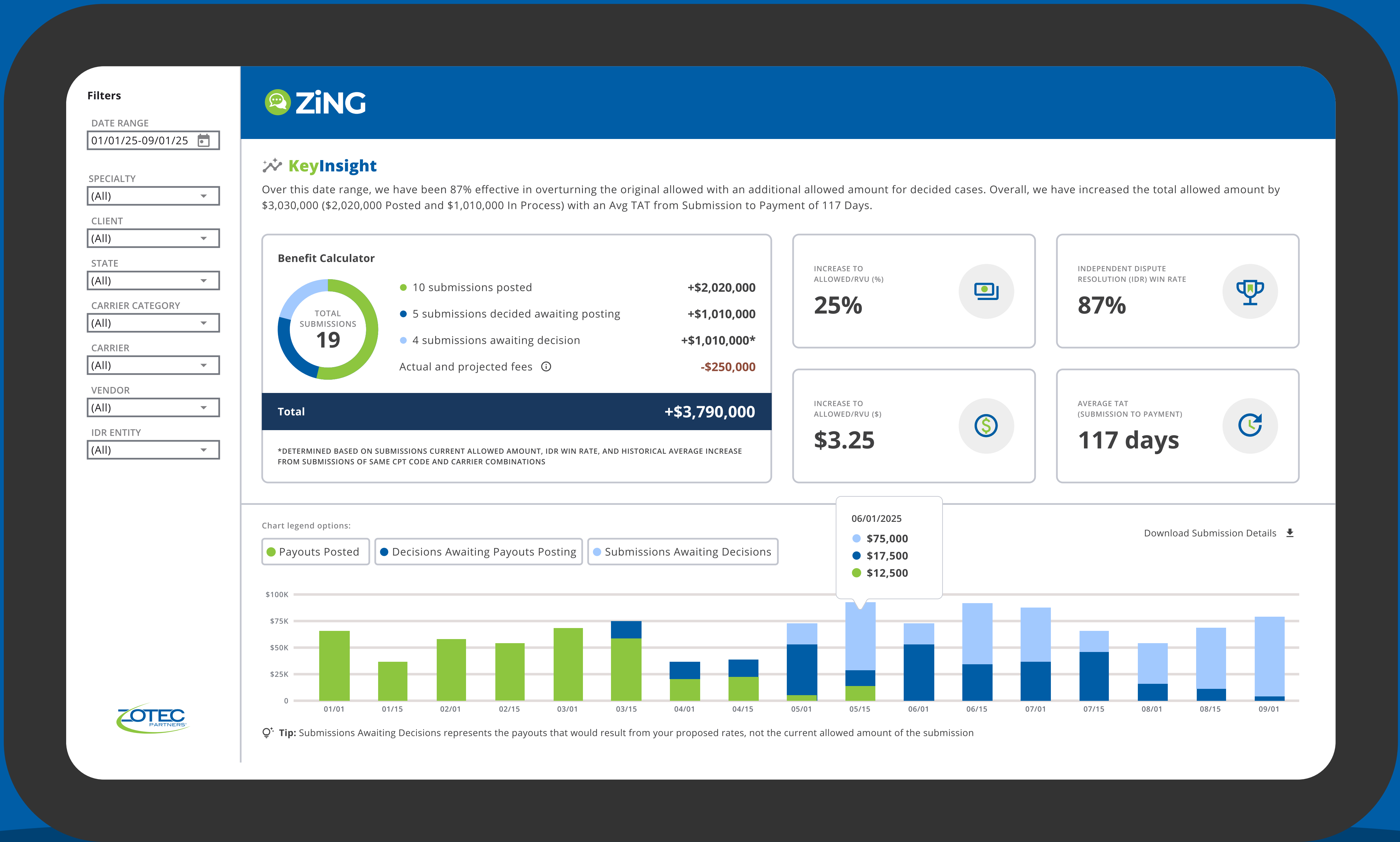

By tracking submission outcomes, win rates, turnaround times, and financial lift, ZiNG provides providers with a transparent view of both actual and projected reimbursement gains. With an intuitive benefit calculator and visual payout tracking, organizations can quickly quantify success, demonstrate ROI, and make data-driven decisions that strengthen payer negotiations and ensure fair reimbursement.

Glossary

- **Trailing 12 Months Allowed**: Total allowed amount from the prior 12 months where the given carrier was the primary insurance filed
- **Trailing 12 Months Allowed Matched**: Trailing 12 Months Allowed multiplied by the ERISA adjustment rate. Then, it's reduced further to only the CPT codes within that carrier that had peer data within Payer Price. For example, if there were 10 CPT codes attributed to Carrier A, but only 8 of those had peer data within Payer Price, we would only report on our portion of the allowed amount allowed that matched those 8 CPT codes.
- **Current Rates**: The current allowed/RVU as a percent of Medicare that we're seeing for given carriers
- **Current Rate Contracted (within Details screen)**: The current allowed/RVU as a percent of Medicare that is listed in carrier contract
- **Current Rate Realized (within Details screen)**: The net current allowed/RVU as a percent of Medicare after Denials and Bad Debt
- **Current Rate Percentile**: The percentile bucket that the Current Rate is in compared to Payer Price peer rates. Peer rates are negotiated rates that are found in the Payer Price data set that match the carrier, CPT, and locality of the given current rate. For example, if a given allowed amount of CPT 123 was filed to Carrier A in Georgia, peer rates are considered only negotiated rates within Payer Price that match those criteria.
- **Target Rate**: Selected by the user; used to determine the Gross Additional Opportunity
- **Target Rate Percentile**: Same as Current Rate Percentile but instead comparing the Target Rate against those previously-defined peer rates.
- **Gross Additional Opportunity**: Additional allowed amount that would be realized if the Trailing 12 Months Allowed Matched was paid at the Target Rate

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Zotec is Your Trusted Partner and Resource

Zotec is committed to being your trusted partner through the complexities of the IDR process. Our expertise, data-driven insights, and end-to-end support help ensure you stay compliant, maximize reimbursements, and reduce administrative burden. We're here to advocate for your success — every step of the way.

Visit www.zotecpartners.com to learn more, or email us at sales@zotecpartners.com to schedule your complimentary demo.