The Costs of the Independent Dispute Resolution Process

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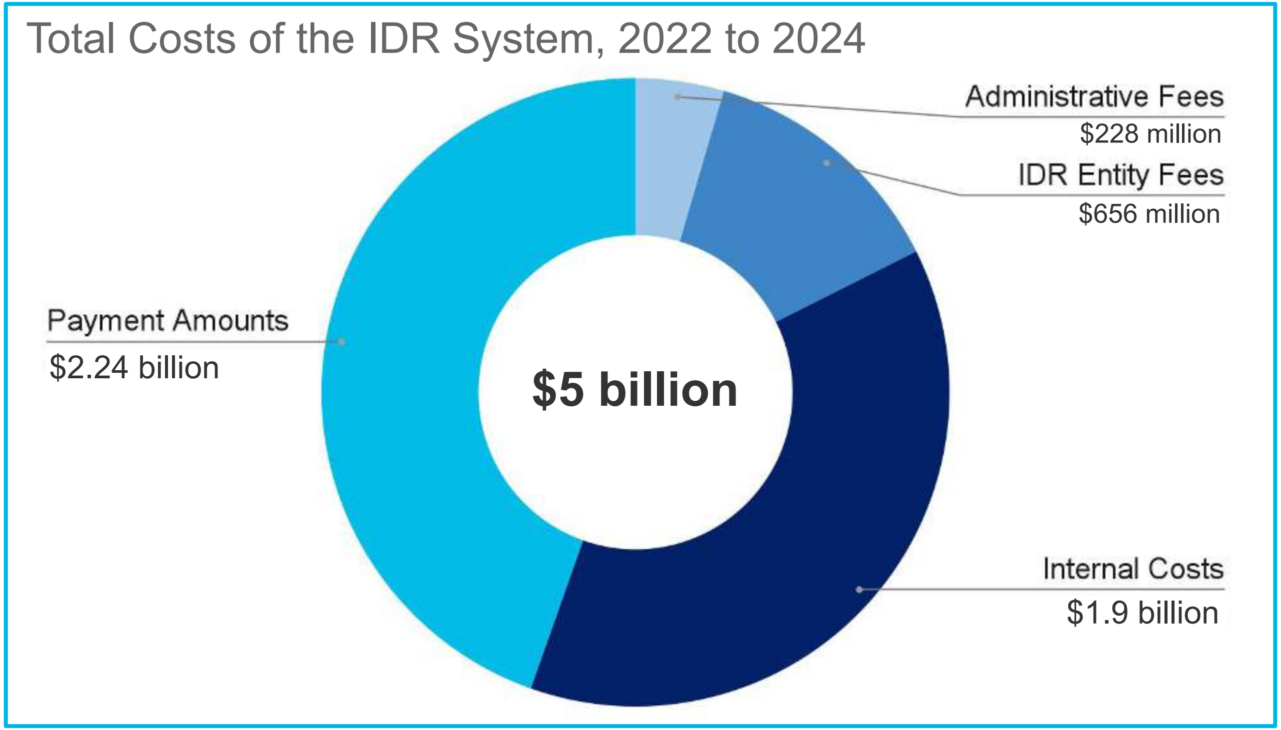
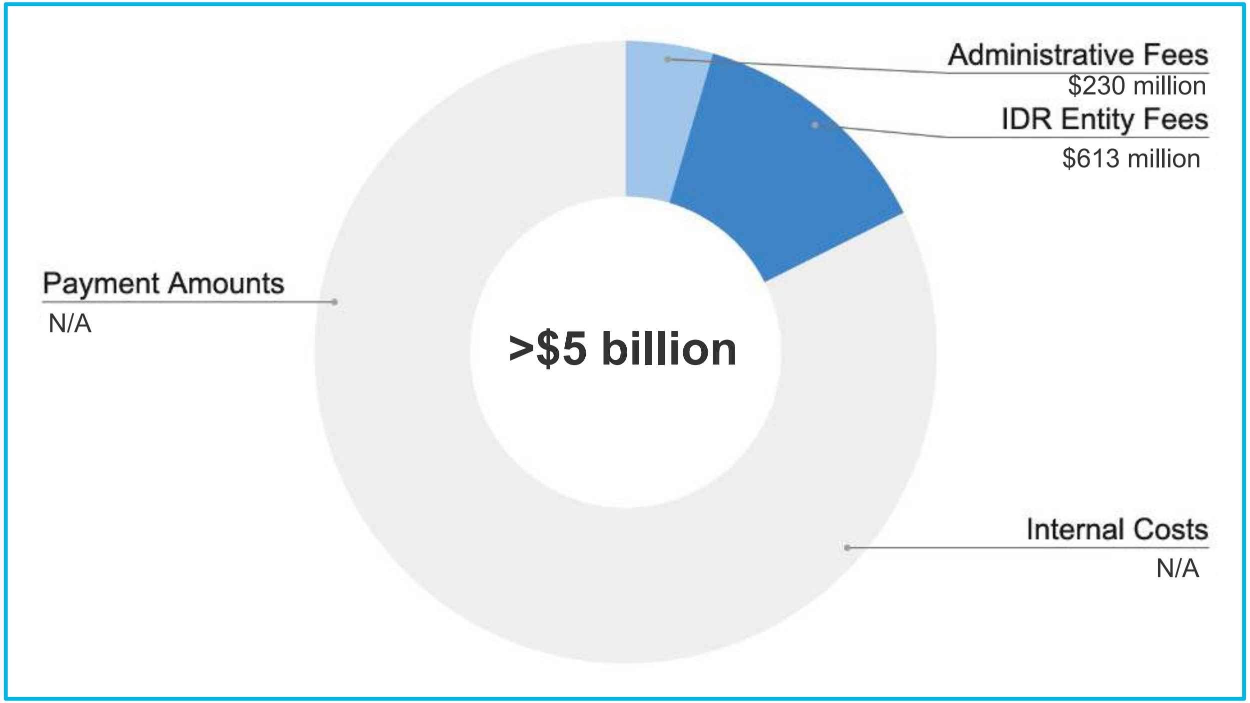
The No Surprises Act Successfully Protects Patients

- The NSA aimed to eliminate balance bills and contain costs
- Protects consumers from surprise medical bills from:
  1. Emergency services received OON
  2. Services from an OON provider at an in-network facility
  3. Air ambulance services
- Protections have been extremely successful:
  - Low complaint volumes
  - More than 10 million surprise medical bills prevented
  - Providers “turned off” balance billing systems
  - Reductions in out-of-pocket spending
- Cost containment objective has been less successful

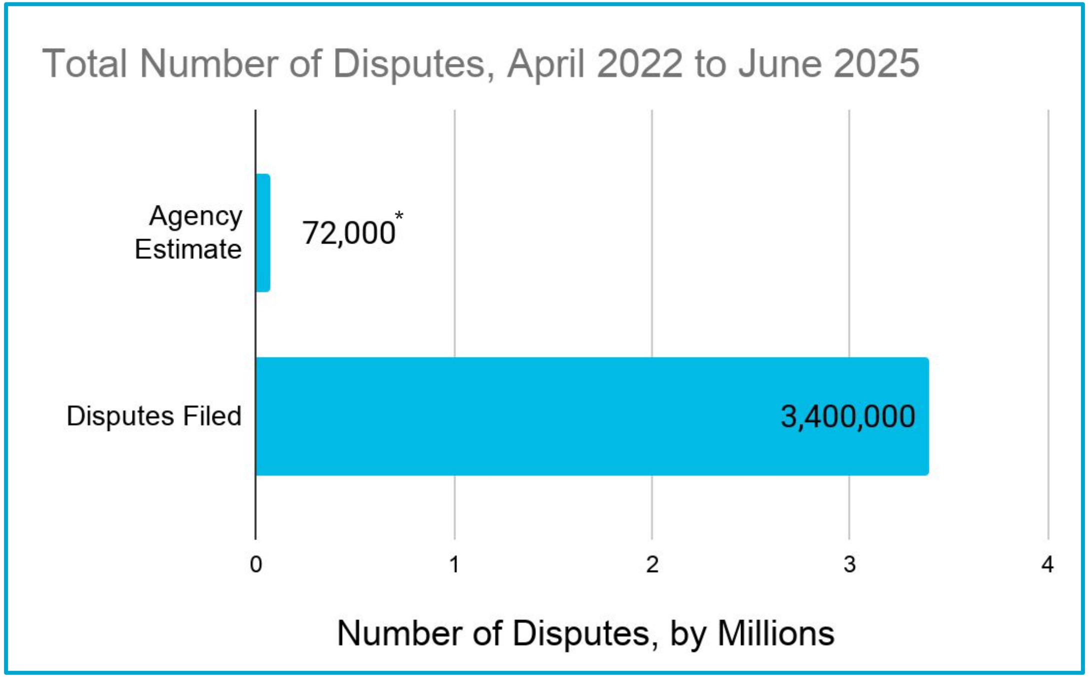
From 2022 to 2024, the IDR Process has Incurred an Estimated $5 Billion in Total Costs



Administrative Costs from Q1 & Q2 2025 Are Nearly Equivalent to the Costs from 2022 to 2024

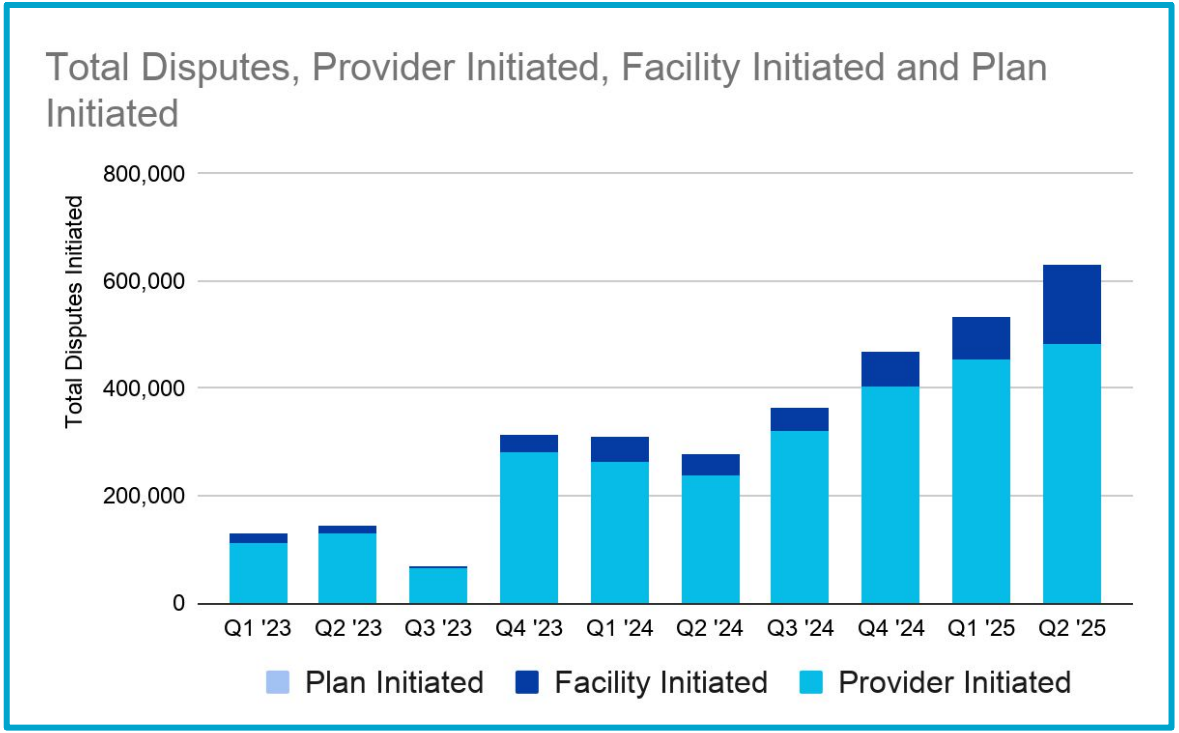


Volume of Disputes Continues to Surpass Agency Estimates by Millions of Cases

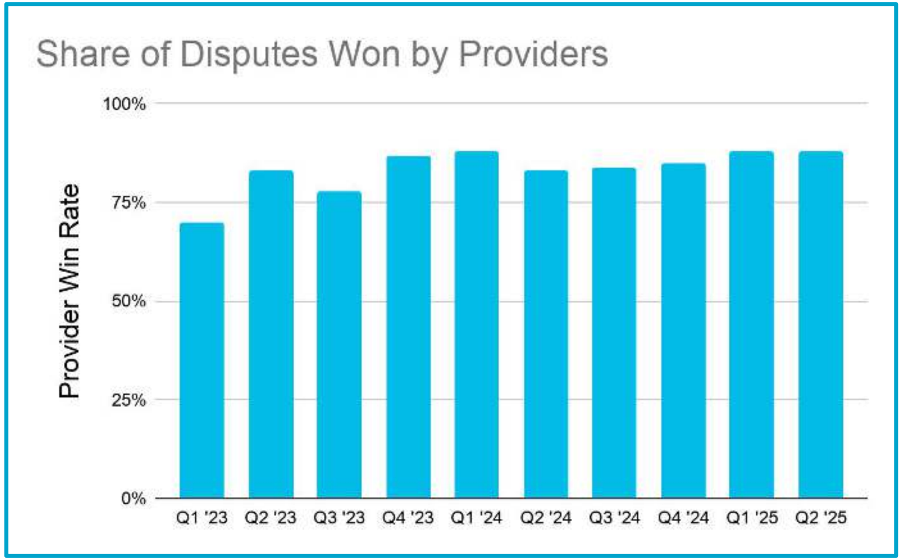


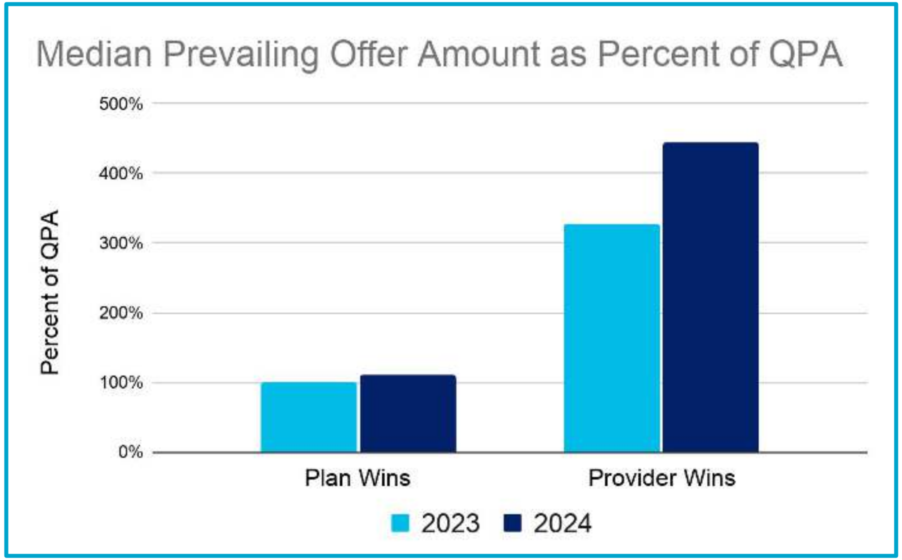
**Includes air ambulance disputes. The agencies estimated that the IDR process would annually resolve 17,333 disputes, with an additional 4,899 disputes from air ambulance providers.*

Nearly Every Quarter Has Shown Steady Growth in Volume of Disputes, Initiated Primarily by Providers



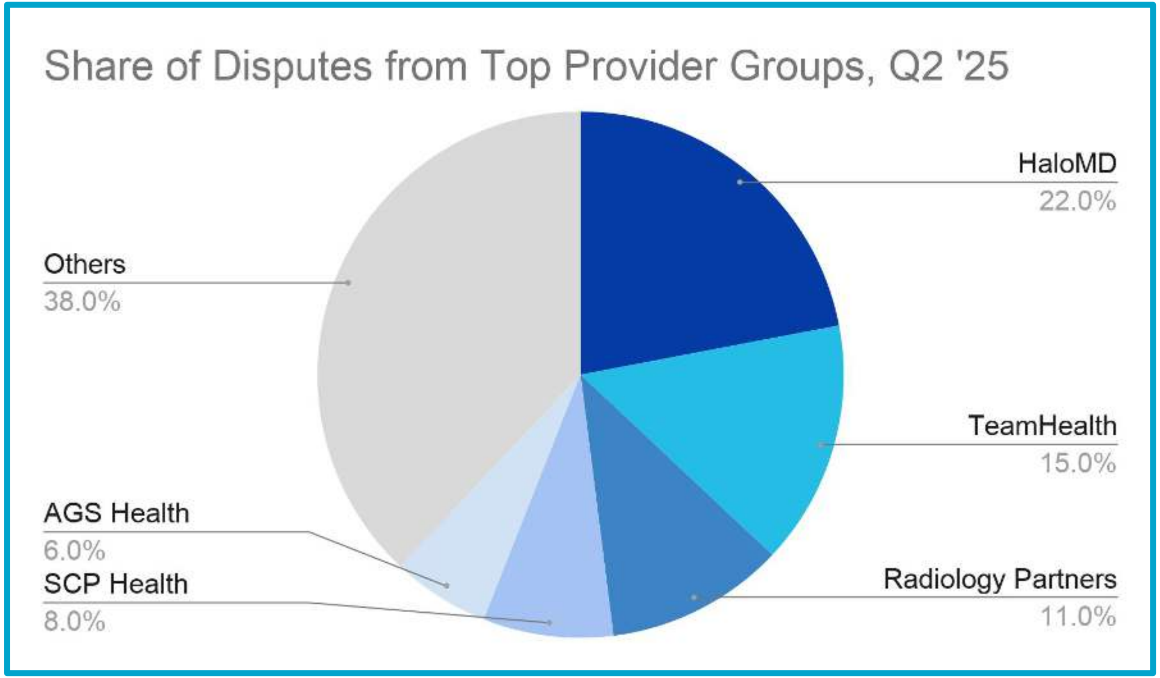
Providers Win the Majority of Cases, and Win Upwards of 500% of the Qualifying Payment Amount



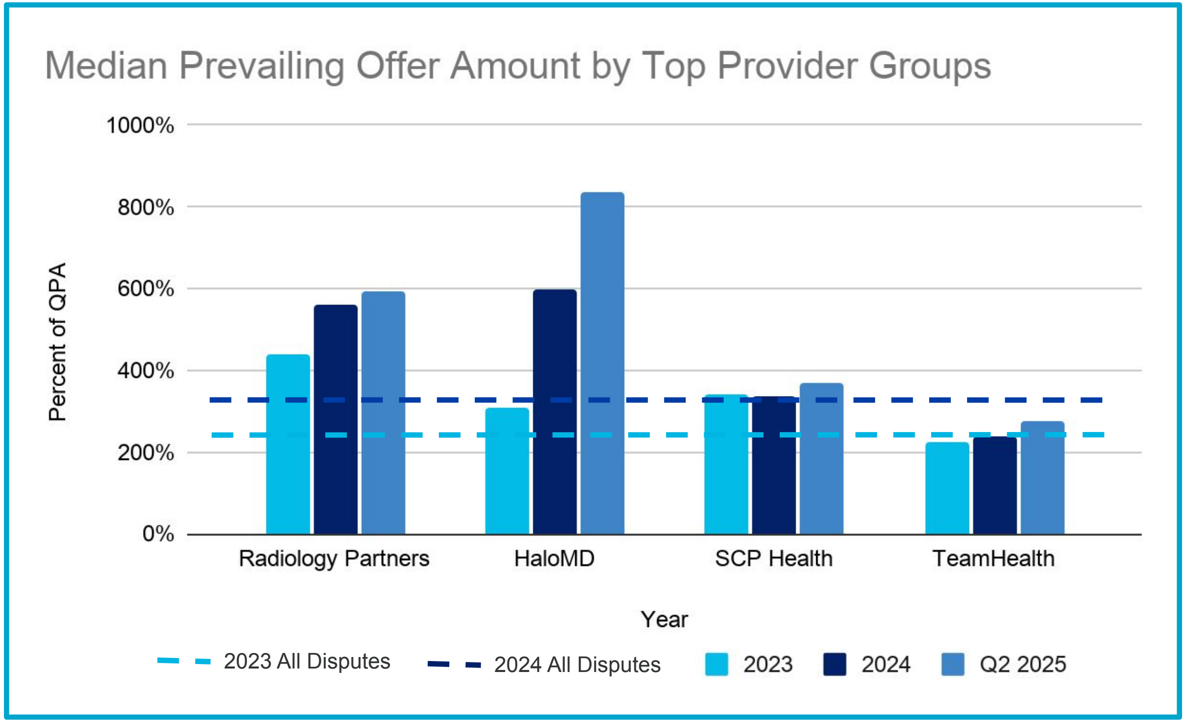


**Qualifying payment amount (QPA): The median contracted rate for a specific provider and service type in a specific geographic area and insurance market, calculated separately for the individual, small, and large group markets. The calculation is based on 2019 contracted rates and is annually adjusted for inflation. The QPA is used to determine patient cost sharing for out-of-network care and a permitted factor in the arbitration process.*

Private Equity Backed Providers and Third-Party Entities Are Especially Active and Successful



Top Providers Win More Often and Win Higher Award Amounts



The NSA successfully protects consumers[...] But without action to improve the IDR process, the high costs will add to overall health system costs and will ultimately be paid by consumers.

Some State IDR Systems Have Less Inflationary Outcomes

State	Volume of Disputes*	Provider Win Rate
California	163	67%
Colorado	570	51%
New Jersey	1,681	67%
Virginia	252	45%
Washington	208	61%

**The reporting period varies across states, and we report the most recent data. For example, California's data is as recent as Q2 2025, whereas Washington's data is from 2022.*

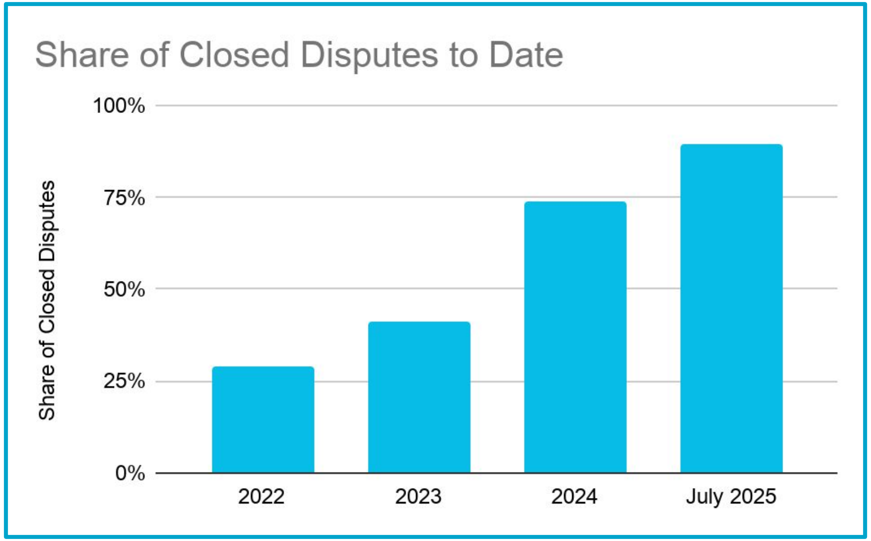
Thank you!

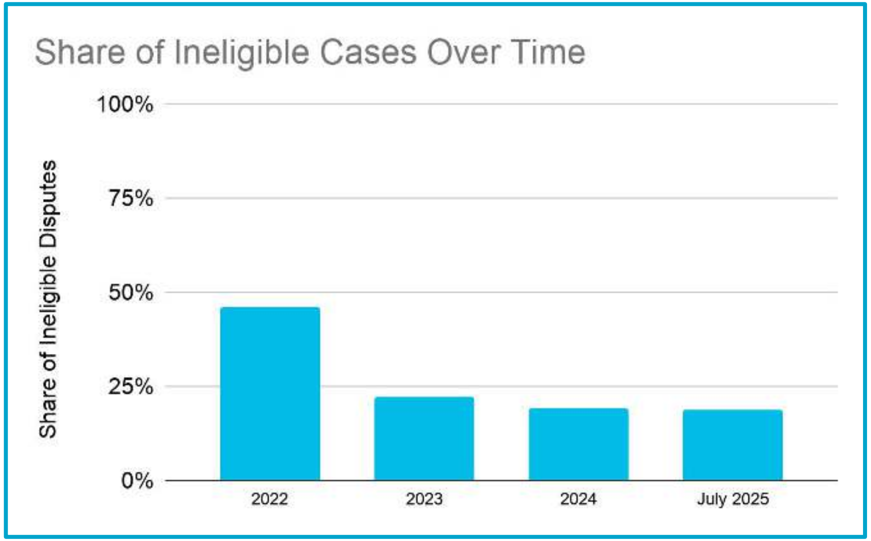
Scan the QR code to read more

The IDR Process is Characterized by High Volume and High Award Amounts

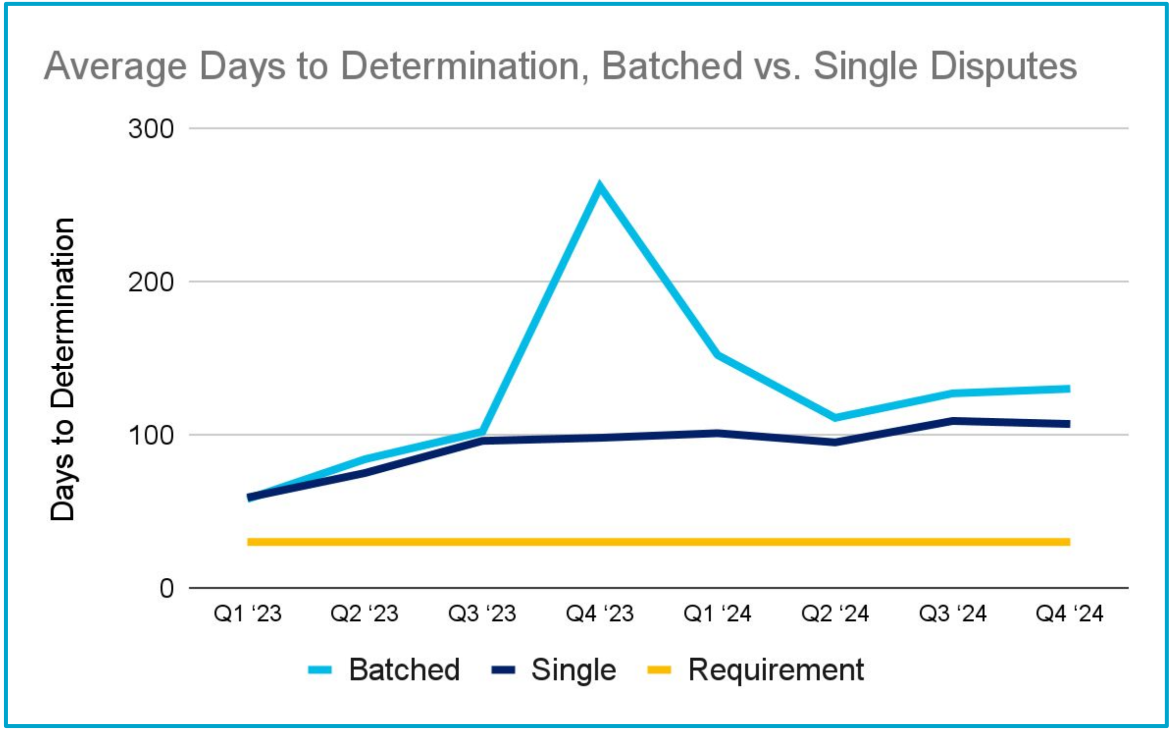
- High volume of disputes submitted
- Providers initiate and win most disputes at large awards amounts
  - Private equity backed and middlemen provider groups are especially successful
- Variation among IDR entities raise questions about incentives and the arbitration process

Process Improvements Have Been Made, As More Disputes Are Closed and Less Are Found Ineligible

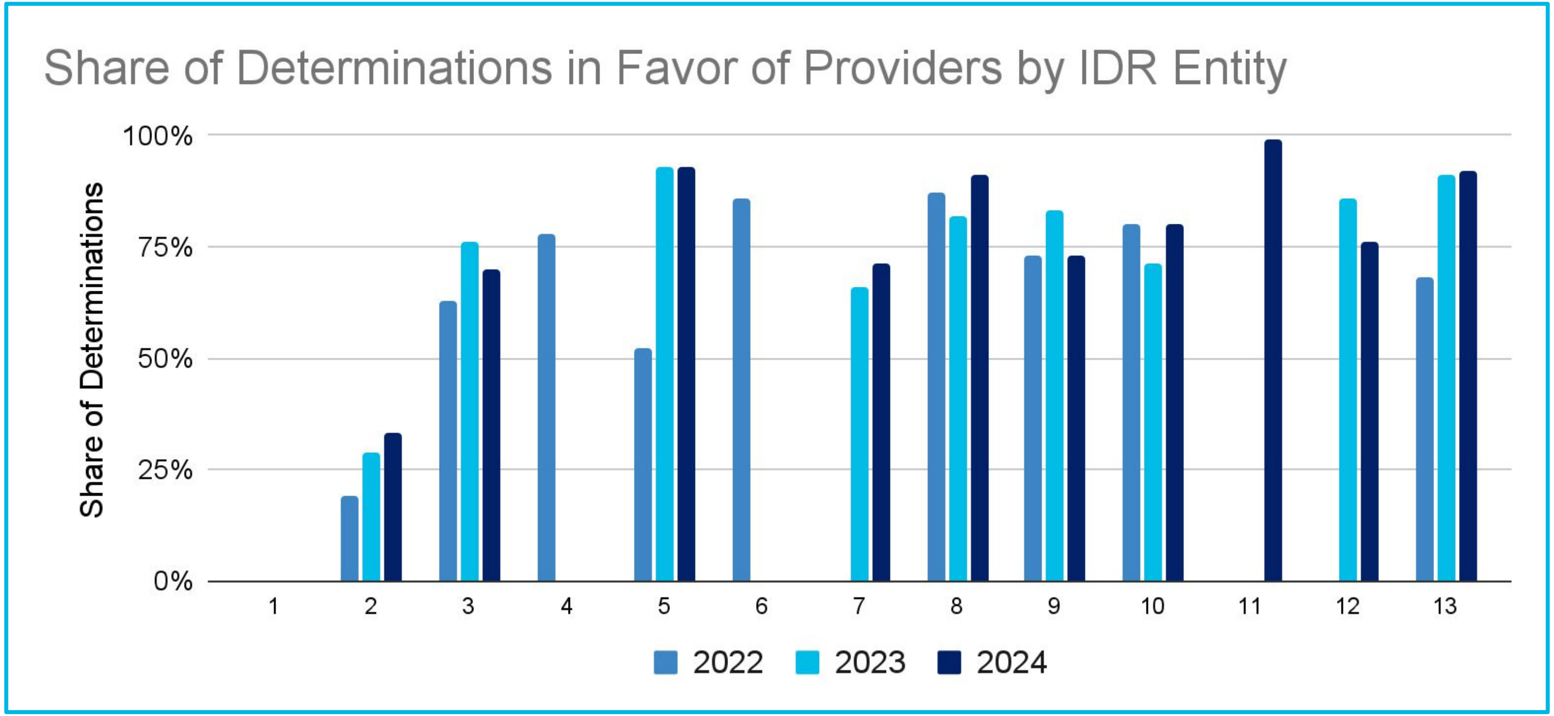




Less Than a Third of Cases are Decided Within the 30 Day Statutory Deadline



IDR Entities Vary Significantly in Their Decision Making Patterns



Days to Determination Varies by IDR Entity