COALITION AGAINST
SURPRISE MEDICAL BILLING

The *NSA Enforcement Act*: A bill about IDR that ignores everything broken in IDR

H.R. 4710/S. 2420 leaves every driver of IDR abuse untouched — and raises costs on the families and employers already footing the bill.

$5+ billion	6+ million	40%
in IDR costs borne by consumers and employers, 2022–2024[3]	disputes advanced through IDR as of May 2026[3]	of disputes in the first half of 2025 challenged as ineligible[2]

THE PROBLEM IN IDR	WHAT H.R. 4710 DOES	WHAT REAL REFORM LOOKS LIKE
Runaway awards far above market rates. CBO warns arbitration outcomes “could lead to higher prices over time” — raising premiums and federal deficits.[1]	**Nothing.** Instead, it stacks treble damages plus interest on top of awards — however inflated they are.[4]	Establish clear guardrails anchoring arbitration awards to market-based benchmarks.
Ineligible disputes flood the system. Nearly 40% of disputes in the first half of 2025 were challenged as ineligible — yet IDR entities, which profit as disputes are finalized, ruled only 17% ineligible.[2]	**Nothing.** Penalties would attach even to claims that are ineligible or already paid through a state process.[4]	Screen eligibility automatically through the IDR Gateway Portal before an IDR entity is assigned to a dispute.
High volume of disputes initiated in bad faith by private equity-backed providers and IDR middlemen.	**Nothing.** Instead, it raises penalties on health plans and employers from $100 a day to $10,000 per failure.[4*]	Establish an upfront IDR eligibility fee and penalties for patterns of abusive initiation.
Scope-of-services loopholes that allow scheduled, non-surprise care for plastic and spinal surgery into a process built for emergencies and ancillary providers.	**Nothing.**	Tighten the ancillary-services and eligibility definitions to keep non-surprise care, like plastic and spinal surgery, out of IDR.
IDR entities profit per finalized dispute — with conflicts of interest and no meaningful oversight.	**Nothing.** New penalties would hit health plans and employers even when delays stem from arbitrators failing to provide the information needed to process a claim.[4]	Establish meaningful certification and decertification standards, performance metrics, and conflict-of-interest rules for IDR entities.

* The bill’s late-payment penalty (Sec. 3) nominally applies to both parties, but its tenfold penalty increases (Sec. 2) and new reporting requirements (Sec. 4) apply exclusively to health plans and employers.

The bottom line: H.R. 4710 exacerbates a broken IDR process with bigger penalties on the families and employers paying for it. Not one provision stops the abuse driving higher costs through IDR. Policymakers should reject it and pursue commonsense reforms.

SOURCES

[1] Congressional Budget Office, request for research on No Surprises Act arbitration, https://www.cbo.gov/publication/62491

[2] Health Affairs, “The No Surprises Act IDR Process: An Early Look At 2025 Data,” https://www.healthaffairs.org/content/forefront/no-surprises-act-idr-process-early-look-2025-data

[3] Centers for Medicare & Medicaid Services, Federal IDR Process Status Reports, https://www.cms.gov/nosurprises/policies-and-resources/reports

[4] No Surprises Act Enforcement Act, H.R. 4710 / S. 2420 (119th Congress), https://www.congress.gov/bill/119th-congress/house-bill/4710