



**CONGRESSIONAL BUDGET OFFICE
COST ESTIMATE**

March 23, 2007

**H.R. 477
Stroke Treatment and Ongoing Prevention Act**

*As ordered reported by the House Committee on Energy and Commerce
on March 15, 2007*

SUMMARY

H.R. 477 would amend the Public Health Service Act to direct the Health Resources and Services Administration and the Centers for Disease Control and Prevention (CDC) to administer several programs related to education, prevention, and treatment of stroke. The bill would authorize the appropriation for those purposes of \$19 million for 2008 and \$95 million over the 2008-2012 period. Assuming appropriation of the specified amounts, CBO estimates that implementing H.R. 477 would cost \$7 million in 2008 and \$82 million over the 2008-2012 period. Enacting the bill would not affect direct spending or revenues.

H.R. 477 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act (UMRA) and could benefit state, local, and tribal governments.

ESTIMATED COST TO THE FEDERAL GOVERNMENT

The estimated budgetary impact of H.R. 477 is shown in the following table. The costs of this legislation fall within budget function 550 (health).

	By Fiscal Year, in Millions of Dollars				
	2008	2009	2010	2011	2012
CHANGES IN SPENDING SUBJECT TO APPROPRIATION					
Authorization Level	19	22	24	17	13
Estimated Outlays	7	16	21	21	17

BASIS OF ESTIMATE

H.R. 477 would modify the Public Health Service Act to authorize the appropriation of \$19 million for 2008 and \$95 million over the 2008-2012 period for several activities related to stroke prevention and treatment. Based on historical patterns of spending for similar activities, CBO estimates that implementing H.R. 477 would cost \$7 million in 2008 and \$82 million over the 2008-2012 period, assuming appropriation of the specified amounts.

The bill would authorize the appropriation of \$5 million a year for 2008 through 2012 for the Centers for Disease Control and Prevention to conduct stroke education campaigns and to maintain an existing stroke registry. Assuming appropriation of the specified amounts, CBO estimates those activities would cost \$2 million in 2008 and \$22 million over the 2008-2012 period.

The bill would authorize the appropriation of \$4 million a year for 2008 through 2012 to the Health Resources and Services Administration for grants to train physicians in treating stroke and traumatic injury. Assuming appropriation of the specified amounts, CBO estimates those activities would cost \$1 million in 2008 and \$16 million over the 2008-2012 period.

The bill also would authorize the appropriation of \$10 million for 2008 and \$50 million over the 2008-2012 period for grants to fund pilot projects through the Office for the Advancement of Telehealth. Those pilot projects would attempt to improve stroke treatment delivered through telehealth communications networks. Assuming appropriation of the specified amounts, CBO estimates those activities would cost \$4 million in 2008 and \$44 million over the 2008-2012 period.

INTERGOVERNMENTAL AND PRIVATE-SECTOR IMPACT

H.R. 477 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act. State, local, and tribal governments may qualify for grants

authorized by the bill. Any costs those governments would incur in order to meet requirements of the grants would be conditions of assistance and would be incurred voluntarily.

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