CONGRESSIONAL BUDGET OFFICE
COST ESTIMATE

March 29, 2012

S. 1925
Violence Against Women Reauthorization Act of 2011

As reported by the Senate Committee on the Judiciary on February 7, 2012

SUMMARY

S. 1925 would authorize the appropriation of $660 million annually over the 2012-2016 period for programs in the Department of Justice (DOJ) and the Department of Health and Human Services (HHS) to combat violence against women. CBO estimates that the bill also would authorize the appropriation of $7 million over the 2012-2017 period for other programs relating to preventing violence against women. In addition, S. 1925 would make available certain nonimmigrant visas that were unused in previous years.

Assuming appropriation of the necessary amounts (and accounting for the amounts already appropriated for those programs in fiscal year 2012), CBO estimates that implementing S. 1925 would cost about $2.2 billion over the 2012-2017 period. Enacting the legislation would affect direct spending and revenues; therefore, pay-as-you go procedures apply. CBO estimates that enacting the bill would increase direct spending by $108 million (including $6 million that would be classified as off-budget spending) and decrease revenues by $3 million over the 2012-2022 period.

CBO has not reviewed section 3 of S. 1925 for intergovernmental or private-sector mandates. Section 4 of the Unfunded Mandates Reform Act (UMRA) excludes from the application of that act any legislative provision that establishes or enforces statutory rights prohibiting discrimination on the basis of race, religion, national origin, or disability. CBO has determined that the section falls within that exclusion.

Other provisions of S. 1925 would impose no intergovernmental mandates as defined in UMRA. The bill would, however, impose private-sector mandates as defined in the UMRA on international marriage brokers and certain people who supervise persons awaiting judicial proceedings. CBO estimates that the cost of those mandates would fall well below the annual threshold established in UMRA ($146 million in 2012, adjusted annually for inflation).

ESTIMATED COST TO THE FEDERAL GOVERNMENT

The estimated budgetary impact of S. 1925 is shown in the following table. The costs of this legislation fall within budget functions 550 (health), 750 (administration of justice), and 800 (general government).

	By Fiscal Year, in Millions of Dollars						
	2012	2013	2014	2015	2016	2017	2012-2017
CHANGES IN SPENDING SUBJECT TO APPROPRIATION [a]							
DOJ Programs							
Authorization Level	195	595	595	595	595	0	2,575
Estimated Outlays	21	130	313	446	535	530	1,975
HHS Programs							
Authorization Level	26	65	65	65	65	0	286
Estimated Outlays	5	26	53	61	64	52	261
Other Programs							
Estimated Authorization Level	1	2	1	1	1	1	7
Estimated Outlays	1	2	1	1	1	1	7
Total							
Estimated Authorization Level	222	662	661	661	661	1	2,868
Estimated Outlays	27	158	367	508	600	583	2,243
CHANGES IN DIRECT SPENDING [b]							
Estimated Budget Authority	0	0	2	5	7	9	23
Estimated Outlays	0	0	2	5	7	9	23

Note: DOJ = Department of Justice; HHS = Department of Health and Human Services.

a. For fiscal year 2012, the Congress appropriated a total of $439 million for programs authorized by S. 1925. S. 1925 would authorize the appropriation of $661 million for those programs in 2012.

b. CBO estimates that enacting S. 1925 would increase direct spending by $108 million over the 2012-2022 period. Included in that estimated increase in direct spending is $6 million that would be recorded as off-budget spending. Enacting the bill also would reduce revenues by $3 million over the 2012-2022 period.

BASIS OF ESTIMATE

For this estimate, CBO assumes that the bill will be enacted in 2012, that the necessary amounts will be provided each year (including supplemental appropriations for fiscal year 2012), and that spending will follow historical patterns for similar activities.

Spending Subject to Appropriation

S. 1925 would authorize the appropriation of $595 million annually over the 2012-2016 period for DOJ to make grants to state, local, and tribal governments and nonprofit organizations for programs to reduce violence against women. (About $400 million has already been appropriated for fiscal year 2012 for those programs, and CBO estimates that the bill would authorize an additional $195 million for that year.) Activities authorized by the bill include legal assistance for victims, outreach services for victims of rural domestic violence, and training for investigators and prosecutors of sexual assault crimes. CBO estimates that implementing those programs would cost $2 billion over the 2012-2017 period.

S. 1925 also would authorize the appropriation of $65 million annually over the 2012-2016 period for several grant programs administered by HHS. (About $39 million has already been appropriated for fiscal year 2012 for those programs, and CBO estimates that the bill would authorize an additional $26 million for that year.) The legislation would authorize grants for rape prevention and education programs, programs to educate health professionals who address domestic violence and other crimes, and collaborative grants to assist homeless victims. CBO estimates that implementing those programs would cost $260 million over the 2012-2017 period.

In addition, S. 1925 would require DOJ, the Department of Homeland Security, and the Government Accountability Office to carry out studies. Based on the cost of similar activities, CBO estimates that it would cost about $7 million over the 2012-2017 period to implement these provisions.

Direct Spending and Revenues

CBO estimates that enacting S. 1925 would increase direct spending by $108 million and decrease revenues by $3 million over the 2012-2022 period. Section 805 of the bill would allow certain unused visas, known as U visas, remaining from fiscal years 2006 through 2011 to be issued to new applicants. CBO estimates that a total of 60,000 U visas that would otherwise be unavailable would be issued under the bill over the 2013-2022 period to adults and children. U visas are issued to people who were victims of specified crimes and who are assisting or are expected to assist law enforcement officials in the investigation or prosecution of those crimes.

Medicaid. By increasing the number of U visas issued, S. 1925 would increase the number of people eligible for Medicaid benefits. Adults and their dependent children issued U visas under the bill who subsequently obtain legal permanent resident (LPR) status would be eligible to enroll in Medicaid and receive full Medicaid benefits after being in the country for five years. Before that, Medicaid would pay for their emergency services. In addition, certain states have elected to provide Medicaid coverage to children and some

adults who have been LPRs in the United States for fewer than five years. In those states, individuals receiving U visas would be eligible for full Medicaid benefits right away. CBO estimates that providing additional Medicaid services to those entering the country with U visas under S. 1925 would increase direct spending by $21 million over the 2013-2022 period.

Exchange Subsidies. The additional U visas issued under S. 1925 also would increase the number of people eligible to receive subsidies for health insurance through the insurance "exchanges" created by the Affordable Care Act, starting in 2014. Individuals obtaining legal permanent resident status or nonimmigrant status under the bill could be eligible for exchange subsidies if they meet income requirements and do not have access to certain other sources of health insurance coverage. Unlike in Medicaid, individuals receiving U visas do not have to be in the country for five years before applying for exchange subsidies. CBO and the staff of the Joint Committee on Taxation (JCT) estimate that the outlay portion of the increase in premium and cost-sharing subsidies for health insurance offered through exchanges under S. 1925 would be about $80 million over the 2013-2022 period.[1]

Social Security and Medicare. Few of the individuals that could obtain U visas under S. 1925 would be able to work long enough to become eligible for Social Security retirement benefits or age-based Medicare during the 2013-2022 period, but many could become eligible for Social Security Disability Insurance and, consequently, disability-based Medicare over that period. CBO estimates that enacting S. 1925 would increase Social Security spending by $6 million (which is recorded as off-budget spending) and Medicare spending by $1 million over the 2013-2022 period.

Revenues. CBO and JCT estimate that enacting S. 1925 would reduce revenues by $3 million over the 2013-2022 period. That estimate is the revenue portion of the increase in premium and cost-sharing subsidies for health insurance offered through exchanges that would occur by increasing the supply of U visas under S. 1925.

S. 1925 also would establish new federal crimes and broaden the coverage of existing crimes relating to violence against women. Enacting the bill could increase collections of criminal fines (which are recorded in the budget as revenues) for violations of the bill's provisions. CBO estimates that any additional collections would not be significant because of the relatively small number of additional cases likely to be affected. Criminal fines are recorded as revenues, deposited in the Crime Victims Fund, and subsequently spent without further appropriation.

1. Subsidies for health insurance premiums are structured as refundable tax credits; the portions of such credits that exceed taxpayers' liabilities are classified as outlays, while the portions that reduce tax payments are reflected in the budget as reductions in revenues.

PAY-AS-YOU-GO CONSIDERATIONS

The Statutory Pay-As-You-Go Act of 2010 establishes budget-reporting and enforcement procedures for legislation affecting on-budget direct spending or revenues. The net changes in outlays and revenues that are subject to those pay-as-you-go procedures are shown in the following table.

CBO Estimate of Pay-As-You-Go Effects for S. 1925, as reported by the Senate Committee on the Judiciary on February 7, 2012

	By Fiscal Year, in Millions of Dollars												
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2012-2017	2012-2022
NET INCREASE OR DECREASE (-) IN THE ON-BUDGET DEFICIT													
Statutory Pay-As-You-Go Impact	0	0	2	5	7	9	11	13	16	18	24	23	105
Memorandum:													
Changes in Outlays	0	0	2	5	7	9	11	13	15	17	23	23	102
Changes in Revenues	0	0	0	0	0	0	0	0	-1	-1	-1	0	-3

INTERGOVERNMENTAL AND PRIVATE-SECTOR IMPACT

CBO has not reviewed section 3 of S. 1925 for intergovernmental or private-sector mandates. Section 4 of UMRA excludes from the application of that act any legislative provision that establishes or enforces statutory rights prohibiting discrimination on the basis of race, religion, national origin, or disability. CBO has determined that the section falls within that exclusion.

Other provisions of S. 1925 would impose no intergovernmental mandates as defined in UMRA. CBO estimates that state spending for Medicaid would increase by about $13 million over the 2013-2022 period, but those costs would not result from intergovernmental mandates. The bill would benefit state, local, and tribal governments by authorizing a variety of new and existing programs to assist law enforcement, institutions of higher education, and housing agencies. Any increased costs to state, local, or tribal governments as a result of complying with grant requirements would be incurred voluntarily as conditions of receiving federal assistance.

The bill would impose private-sector mandates as defined in UMRA by increasing reporting requirements for international marriage brokers and prohibiting certain activities for individuals that hold a supervisory role over persons under official control of the United

States. Because the requirements would be small changes from existing requirements, CBO estimates that the incremental costs of these mandates on the private sector would fall well below the annual threshold established in UMRA ($146 million in 2012, adjusted annually for inflation).

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