



CONGRESSIONAL BUDGET OFFICE
COST ESTIMATE

March 19, 2004

H.R. 3658

Stroke Treatment and Ongoing Prevention Act

*As ordered reported by the House Committee on Energy and Commerce
on March 3, 2004*

SUMMARY

H.R. 3658 would amend the Public Health Service Act to authorize the Secretary of the Department of Health and Human Services (HHS) to engage in activities designed to increase knowledge and awareness of stroke prevention and treatment. H.R. 3658 would require the Secretary to conduct educational campaigns, maintain a national registry, and establish an information clearinghouse related to the disease. The bill would authorize the appropriation of \$5 million each year from 2005 through 2009 for these activities.

In addition, H.R. 3658 would allow the Secretary to make grants to states and other public and private entities to develop medical professional training programs and telehealth networks that seek to coordinate stroke care and improve patient outcomes. The bill would authorize the appropriation of \$14 million in 2005 and \$70 million over the 2005-2009 period for the grant programs and for a study and reports evaluating the telehealth grant program.

Assuming appropriation of the specified amounts, CBO estimates that implementing H.R. 3658 would cost \$6 million in 2005 and a total of \$81 million from 2005 through 2009.

The legislation would not affect direct spending or receipts. H.R. 3658 contains no private-sector or intergovernmental mandates as defined in the Unfunded Mandates Reform Act.

ESTIMATED COST TO THE FEDERAL GOVERNMENT

The estimated budgetary impact of H.R. 3658 is shown in the following table. For purposes of this estimate, CBO assumes that outlays will follow historical spending rates for similar activities. The costs of this legislation fall within budget function 550 (health).

	By Fiscal Year, in Millions of Dollars					
	2004	2005	2006	2007	2008	2009
CHANGES IN SPENDING SUBJECT TO APPROPRIATION						
Authorization Level	0	19	22	24	17	13
Estimated Outlays	0	6	17	21	21	16

BASIS OF ESTIMATE

H.R. 3658 would expand the current duties of the Department of Health and Human Services. The duties would include educating the public about strokes and, through the Centers for Disease Control and Prevention (CDC), maintaining a national registry and clearinghouse to collect and coordinate the analysis of stroke treatments. Recently, the CDC evaluated eight pilot tests for a national stroke registry. Although not specifically named, the CDC is also the most likely agency within HHS to carry out the public awareness campaign. The bill would authorize appropriations of \$5 million in each fiscal year over the 2005-2009 period for these activities. Based on historical spending patterns for similar activities, CBO estimates that outlays would total about \$20 million over the 2005-2009 period, assuming appropriation of the authorized amounts.

In addition, H.R. 3658 would allow the Health Resources and Services Agency (HRSA) to make grants to public and private entities for the purpose of training medical personnel, including emergency medical professionals, about strokes and the latest ways to treat the disease. The bill also would allow HRSA to make grants to states and other qualified entities for the purpose of developing telehealth networks to coordinate stroke care and improve patient outcomes. (Telehealth often refers to the ability to diagnose, monitor, or treat patients from afar using information technology.) Telehealth grantees would carry out five-year pilot projects over fiscal years 2005 through 2009. HRSA would conduct a study and report to the Congress on the effectiveness of the telehealth grant program. CBO assumes that grants would be awarded starting in 2005. The bill would authorize the appropriation of

\$14 million in fiscal year 2005 and \$70 million over the 2005-2009 period for such grants. Based on historical spending patterns for similar activities, CBO estimates that outlays would total \$69 million over the 2005-2009 period, assuming appropriation of the authorized amounts.

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