



**CONGRESSIONAL BUDGET OFFICE
COST ESTIMATE**

August 11, 2003

S. 1279

Disaster Area Health and Environmental Monitoring Act of 2003

*As ordered reported by the Senate Committee on Environment and Public Works
on July 30, 2003*

SUMMARY

S. 1279 would amend title IV of the Robert T. Stafford Disaster Relief and Emergency Assistance Act to authorize a new program to protect the health and safety of disaster relief workers such as firefighters, police officers, and emergency medical technicians. Under this bill, federal agencies would be authorized to collect and analyze environmental data at disaster areas to determine whether substances that may be harmful to human health are present. In addition, this bill would authorize those agencies to disseminate educational materials to affected communities and to conduct long-term epidemiological studies of affected populations. Finally, the bill would authorize the National Academy of Sciences to study and prepare a report on disaster area health and environmental protection and monitoring.

Assuming appropriation of the necessary funds, CBO estimates that implementing S. 1279 would cost \$35 million over the 2004-2008 period. Enacting S. 1279 would not affect direct spending or revenues. S. 1279 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act (UMRA) and would impose no costs on the budgets of state, local, or tribal governments.

ESTIMATED COST TO THE FEDERAL GOVERNMENT

The estimated budgetary impact of S. 1279 is shown in the following table. The costs of this legislation fall within budget function 450 (community and regional development).

	By Fiscal Year, in Millions of Dollars				
	2004	2005	2006	2007	2008
CHANGES IN SPENDING SUBJECT TO APPROPRIATION					
Estimated Authorization Level	5	5	9	9	13
Estimated Outlays	3	5	7	9	11

BASIS OF ESTIMATE

Based on information from the Agency for Toxic Substances and Disease Registry (ATSDR) and the National Academy of Sciences, CBO estimates that implementing the provisions in S. 1279 would cost about \$35 million over the 2004-2008 period, assuming appropriation of the necessary funds.

Under S. 1279, CBO assumes that the ATSDR would be tasked with conducting long-term epidemiological studies in certain disaster areas that are called for under the legislation. We expect such long-term health studies would be conducted at disaster areas where harmful pollutants are released into the environment. According to the ATSDR, each long-term study conducted under this bill would cost \$3 million to \$5 million a year and could last from five to 15 years. It is impossible to predict the number of such studies that might be required in the future. For this estimate, CBO assumes that one new study would be initiated every other year at an average cost of \$4 million per year. Based on information from the National Academy of Sciences, CBO estimates that the long-term study on disaster-area health would cost \$5 million over five years.

INTERGOVERNMENTAL AND PRIVATE-SECTOR IMPACT

S. 1279 contains no intergovernmental or private-sector mandates as defined in UMRA and would impose no costs on the budgets of state, local, or tribal governments.

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