



**CONGRESSIONAL BUDGET OFFICE  
COST ESTIMATE**

September 24, 2010

**H.R. 1362**  
**National Neurological Diseases Surveillance System Act of 2010**  
*As ordered reported by the House Committee on Energy and Commerce  
on September 23, 2010*

**SUMMARY**

H.R. 1362 would amend the Public Health Service Act to require the Secretary of Health and Human Services to increase epidemiological tracking of neurological diseases. It also would authorize the Secretary to create a surveillance system for neurological disorders. CBO estimates that implementing H.R. 1362 would cost \$16 million over the 2011-2015 period, assuming appropriation of the authorized amounts. Enacting H.R. 1362 would not affect direct spending or revenues; therefore, pay-as-you-go procedures do not apply.

H.R. 1362 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act (UMRA).

**ESTIMATED COST TO THE FEDERAL GOVERNMENT**

The estimated budgetary impact of H.R. 1362 is shown in the following table. The costs of this legislation fall within budget function 550 (health).

	By Fiscal Year, in Millions of Dollars					2011-2015
	2011	2012	2013	2014	2015	2015

**CHANGES IN SPENDING SUBJECT TO APPROPRIATION**

Authorization Level	0	5	5	5	5	20
Estimated Outlays	0	2	4	5	5	16

## **BASIS OF ESTIMATE**

H.R. 1362 would direct the Secretary of Health and Human Services, acting through the Director of the Centers for Disease Control and Prevention (CDC), to expand tracking of the epidemiology of neurological diseases, such as multiple sclerosis and Parkinson's disease.

The Secretary would use this information to create a National Neurological Diseases Surveillance System, which would, in part, facilitate additional research into neurological diseases. Among the data collected and analyzed through the new tracking and surveillance systems would be information on demographic characteristics, risk factors, and diagnoses. The Secretary would ensure coordination with other federal agencies and compliance with existing privacy laws.

To implement the tracking and surveillance systems, the Secretary could award grants to, or enter into contracts or cooperative agreements with, public or not-for-profit entities. The bill would authorize the appropriation of \$5 million a year for fiscal years 2012 through 2016 to implement those programs. Based on historical patterns of spending for grant programs administered by the CDC and assuming appropriation of the authorized amounts, CBO estimates that implementing the bill would cost \$16 million over the 2012-2015 period and an additional \$9 million after 2015.

**PAY-AS-YOU-GO CONSIDERATIONS:** None.

## **INTERGOVERNMENTAL AND PRIVATE-SECTOR IMPACT**

H.R. 1362 contains no intergovernmental or private-sector mandates as defined in UMRA. State and local governments that collect and store information concerning neurological diseases would benefit from grant funds authorized in the bill.

### **ESTIMATE PREPARED BY:**

Federal Costs: Lara Robillard

Impact on State, Local, and Tribal Governments: Lisa Ramirez-Branum

Impact on the Private Sector: Jimmy Jin

### **ESTIMATE APPROVED BY:**

Holly Harvey

Deputy Assistant Director for Budget Analysis