



CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

September 23, 2011

H.R. 2074

Veterans Sexual Assault Prevention and Health Care Enhancement Act

As ordered reported by the House Committee on Veterans' Affairs on September 8, 2011

H.R. 2074 would require the Department of Veterans Affairs (VA) to develop a comprehensive policy for tracking and reporting sexual assault incidents and make other changes to health care services. In total, CBO estimates that implementing the bill would have discretionary costs of \$1 million over the 2012-2016 period, assuming the availability of appropriated funds. Enacting this legislation would not affect direct spending or revenues; therefore, pay-as-you-go procedures do not apply.

Section 2 would require VA to prepare and implement a comprehensive policy on tracking and reporting sexual assault incidents and other safety incidents. VA has already begun to address most of the requirements of this section. It has established a multidisciplinary workgroup to assess the actions necessary to prevent sexual assault incidents and improve response to reported incidents. CBO estimates that the costs associated with preparing and distributing the required annual reports would amount to less than \$500,000 over the 2012-2016 period, assuming the availability of appropriated funds.

Section 6 would require VA to establish a pilot program through which veterans diagnosed with post-traumatic stress disorder or other mental health conditions would train service dogs for use by disabled veterans. The pilot program would operate for three years in one to three VA medical centers and require one certified dog trainer at each facility. Based on a similar program at the VA facility in Palo Alto, California, CBO estimates that each facility would train five service dogs every two years. CBO estimates that running the pilot program would cost \$1 million over the 2012-2016 period, assuming appropriation of the necessary amounts.

H.R. 2074 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act. States that provide nursing home care to eligible veterans would be required to comply with a new payment structure in order to receive federal reimbursement. Any costs to those governments would be incurred voluntarily as a condition of federal assistance.

The CBO staff contact for this estimate is Ann E. Futrell. The estimate was approved by Theresa Gullo, Deputy Assistant Director for Budget Analysis.