



CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

February 17, 2016

H.R. 1797 **End Neglected Tropical Diseases Act**

*As ordered reported by the House Committee on Foreign Affairs
on January 7, 2016*

H.R. 1797 would amend the Public Health Service Act to authorize the Secretary of Health and Human Services to support research and training related to treating neglected tropical diseases (NTDs). The National Institutes of Health (NIH) funds eight centers to support research on NTDs; in 2015 the Institute obligated \$3 million for those centers. Although the authority for such research programs expired in 2009, the Congress has appropriated funds each year through 2016 for those programs. NIH recently announced its plans to support six to eight centers for research on NTDs. Based on that announcement and historical spending patterns, CBO estimates that implementing this provision would require annual appropriations of \$3.5 million; outlays would total \$13 million over the 2017-2021 period.

In addition, the bill would require NIH to establish a temporary panel to evaluate and report upon issues related to worm infections. H.R. 1797 also would require the Centers for Disease Control and Prevention to report to the Congress on NTDs in the United States. Based on information from both agencies, CBO estimates that implementing those provisions would cost about \$1 million over the 2017-2018 period.

Finally, the bill would encourage the U.S. Agency for International Development (USAID) to monitor and evaluate NTD programs, coordinate those programs with the agency's other health and development programs, and continue research and development on NTDs. It also would encourage the Department of State to consider the impact of NTDs on its HIV/AIDS programs. Based on information from USAID, CBO estimates that implementing the bill would not impose additional costs on USAID or the department because they are already doing those things.

In total, assuming appropriation of the estimated amounts, CBO estimates that implementing the bill would cost \$14 million over the 2016-2021 period. Because enacting H.R. 1797 would not affect direct spending or revenues, pay-as-you-go procedures do not apply. CBO estimates that enacting H.R. 1797 would not increase net direct spending or on-budget deficits in any of the four consecutive 10-year periods beginning in 2027.

H.R. 1797 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act and would benefit public entities by authorizing federal assistance for the research and treatment of tropical diseases. Any costs to those entities, including matching contributions, would be incurred voluntarily.

The CBO staff contacts for this estimate are Sunita D'Monte, Ellen Werble, and Rebecca Yip. The estimate was approved by H. Samuel Papenfuss, Deputy Assistant Director for Budget Analysis.