



## CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

March 11, 2015

### **H.R. 648** **Trauma Systems and Regionalization of Emergency Care** **Reauthorization Act**

*As ordered reported by the House Committee on Energy and Commerce  
on February 12, 2015*

#### **SUMMARY**

H.R. 648 would amend the Public Health Service Act to authorize funding for public and private entities that provide trauma and emergency care services and for the administration of the Federal Interagency Committee on Emergency Medical Services (FICEMS). The bill also would require states that receive grant aid to comply with national standards and requirements for designating burn centers. Finally, the bill would require the Secretary of Health and Human Services to submit a report to the Congress on federal and state activities associated with trauma and emergency care services.

The bill would authorize the appropriation of \$24 million a year for each of fiscal years 2015 through 2020 for public and private entities that provide trauma and emergency care services and for the administration of FICEMS. CBO estimates that implementing the bill would cost \$126 million over the 2015-2020 period, assuming appropriation of the authorized amounts. Pay-as-you-go procedures do not apply to this legislation because it would not affect direct spending or revenues.

H.R. 648 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act (UMRA).

#### **ESTIMATED COST TO THE FEDERAL GOVERNMENT**

For this estimate, CBO assumes that H.R. 648 will be enacted by the summer of 2015, the Congress will appropriate the authorized amounts for each year, and spending will follow historical patterns for similar programs. The estimated budgetary effects of H.R. 648 are shown in the following table. The costs of this legislation fall within budget function 550 (health).

	By Fiscal Year, in Millions of Dollars						2015- 2020
	2015	2016	2017	2018	2019	2020	
<b>CHANGES IN SPENDING SUBJECT TO APPROPRIATION</b>							
Authorization Level	24	24	24	24	24	24	144
Estimated Outlays	3	28	23	24	24	24	126

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

**INTERGOVERNMENTAL AND PRIVATE-SECTOR IMPACT**

H.R. 648 contains no intergovernmental or private-sector mandates as defined in UMRA. The bill would reauthorize grant programs that state governments could use to improve trauma care systems. Any costs to those governments for complying with grant conditions would be incurred voluntarily.

**ESTIMATE PREPARED BY:**

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