



**CONGRESSIONAL BUDGET OFFICE
COST ESTIMATE**

May 23, 2016

S. 800

**Enhancing the Stature and Visibility of Medical
Rehabilitation Research at the NIH Act**

*As reported by the Senate Committee on Health, Education, Labor and Pensions
on April 4, 2016*

SUMMARY

S. 800 would clarify the purpose of the National Center for Medical Rehabilitation Research (the Center) at the National Institutes of Health (NIH) and would require the director of the Center to update its research plan at least every five years. CBO estimates that implementing S. 800 would cost \$317 million over the 2017-2021 period, assuming appropriation of the necessary amounts. Pay-as-you-go procedures do not apply because enacting S. 800 would not affect direct spending or revenues.

CBO estimates that enacting S. 800 would not increase net direct spending or on-budget deficits in any of the four consecutive 10-year periods beginning in 2027.

S. 800 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act (UMRA) and would not affect the budgets of state, local, or tribal governments.

ESTIMATED COST TO THE FEDERAL GOVERNMENT

The estimated budgetary effect of S. 800 is shown in the following table. The costs of this legislation fall within budget function 550 (health).

	By Fiscal Year, in Millions of Dollars					2017- 2021
	2017	2018	2019	2020	2021	
INCREASES IN SPENDING SUBJECT TO APPROPRIATION						
Estimated Authorization Level	75	77	79	80	82	393
Estimated Outlays	23	62	74	77	80	317

Note: Components may not sum to totals because of rounding.

BASIS OF ESTIMATE

The Center supports research on and the dissemination of information about the rehabilitation of individuals with physical disabilities resulting from physiological diseases or disorders. S. 800 would clarify the purpose of the Center, require its director to revise and update the research plan at least every five years, and add a member to the Center’s coordinating committee and to the NIH advisory board on medical rehabilitation research. The bill would also require the coordinating committee to host a scientific workshop on medical rehabilitation research and make recommendations for the research plan.

The authorization of appropriation for research programs at NIH expired at the end of fiscal year 2009. Since then, however, the Congress has appropriated funds for NIH annually. In fiscal year 2016, almost \$74 million was allocated to the Center from the funds appropriated to NIH. Assuming appropriation of the necessary amounts and based on historical spending patterns, CBO estimates that implementing S. 800 would cost \$317 million over the 2017-2021 period.

PAY-AS-YOU-GO CONSIDERATIONS: None.

INCREASE IN LONG-TERM DIRECT SPENDING AND DEFICITS

CBO estimates that enacting S. 800 would not increase net direct spending or on-budget deficits in any of the four consecutive 10-year periods beginning in 2027.

INTERGOVERNMENTAL AND PRIVATE-SECTOR IMPACT

S. 800 contains no intergovernmental or private-sector mandates as defined in UMRA and would not affect the budgets of state, local, or tribal governments.

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