



**CONGRESSIONAL BUDGET OFFICE
COST ESTIMATE**

July 18, 2016

**S. 849
Advancing Research for Neurological Diseases Act of 2016**

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

SUMMARY

S. 849 would authorize the Centers for Disease Control and Prevention (CDC) to undertake activities that would improve the collection of data on neurological diseases and conditions. It would also authorize CDC to begin collecting data for conditions that are among the five most prevalent neurological diseases.

CBO estimates that implementing S. 849 would cost \$152 million over the 2017-2021 period, assuming appropriation of the necessary amounts. Enacting S. 849 would not affect direct spending or revenues; therefore, pay-as-you-go procedures do not apply.

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

S. 849 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 S. 849 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	
CHANGES IN SPENDING SUBJECT TO APPROPRIATION						
Centers for Disease Control and Prevention						
Estimated Authorization Level	35	36	36	39	40	187
Estimated Outlays	9	31	35	38	39	152

BASIS OF ESTIMATE

CBO assumes that the legislation will be enacted near the beginning of fiscal year 2017, that the necessary amounts will be appropriated each year, and that spending will follow historical patterns for similar programs.

The Centers for Disease Control and Prevention currently administers surveillance programs for eight neurologic conditions. Those conditions are amyotrophic lateral sclerosis (ALS), autism, cerebral palsy, epilepsy, muscular dystrophy, stroke, Tourette’s syndrome, and traumatic brain injury. S. 849 would authorize CDC to take steps that would improve the collection of data on those diseases. It would also authorize CDC to collect data for other conditions that are among the five most prevalent neurological diseases.

S. 849 would authorize CDC to enhance their current surveillance work on the eight neurological conditions. Some of the enhancements would include increasing the number of states participating in the surveillance programs and learning more about the causes and epidemiology of these conditions. In fiscal year 2016, CDC spent about \$16 million for surveillance activities on these conditions. Based on information from the agency, CBO estimates that those new activities would cost an additional \$27 million per year.

The bill would also authorize CDC to initiate data collection on additional diseases that are among the top five most prevalent neurological diseases. Multiple sclerosis (MS) and Parkinson’s disease are not currently subject to surveillance and are mentioned in the bill’s purpose. After consulting with the CDC, CBO anticipates that the agency would focus on improving data collection on those two conditions. CBO estimates that feasibility studies for MS and Parkinson’s disease would each cost about \$4 million per year and expects these studies to last about three years, based on data from CDC on the costs and time involved for such studies. Those studies would be used to determine the appropriate surveillance methods for each disease. Once the feasibility studies are completed, CDC would initiate surveillance systems for each disease, and CBO estimates that each system would cost about \$5 million annually.

PAY-AS-YOU-GO CONSIDERATIONS: None.

INCREASE IN LONG-TERM DIRECT SPENDING AND DEFICITS

CBO estimates that enacting the legislation 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. 849 contains no intergovernmental or private-sector mandates as defined in UMRA and would impose no costs on state, local, or tribal governments.

PREVIOUS CBO ESTIMATES

CBO transmitted estimates for two versions of H.R. 6, the 21st Century Cures Act (as ordered reported by the House Energy and Commerce Committee and as contained in the Rules Committee print of H.R. 6). Section 1122 of both versions of H.R. 6 is similar to S. 849, in terms of CDC activities, however H.R. 6 authorizes appropriation of a specified amount for each fiscal year. CBO's estimate of implementing S. 849 reflects those differences.

ESTIMATE PREPARED BY

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