



CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

May 22, 2017

S. 916 **Protecting Patient Access to Emergency Medications Act of 2017**

*As ordered reported by the Senate Committee on Health, Education, Labor,
and Pensions on April 26, 2017*

S. 916 would authorize the Department of Justice (DOJ) to register certain providers of emergency medical services to dispense controlled substances. Under the bill, DOJ could collect additional registration fees from providers of emergency medical services (many providers already register and most pay a few hundred dollars per year, on average). Those fees are treated as reductions in direct spending and DOJ is authorized to spend them without further appropriation. Because enacting the bill could affect direct spending, pay-as-you-go procedures apply. However, CBO estimates that the net budgetary effect would be negligible. Enacting the bill would not affect revenues.

The bill also would require the Government Accountability Office (GAO) to prepare a report for the Congress on the potential abuse of certain controlled substances. Based on the costs of similar activities, we estimate that the GAO report would cost less than \$500,000, assuming the availability of appropriated funds.

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 2028.

S. 916 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act and would impose no costs on state, local, or tribal governments.

The CBO staff contact for this estimate is Mark Grabowicz. The estimate was approved by H. Samuel Papenfuss, Deputy Assistant Director for Budget Analysis.