

H.R. 391, Global Health Security Act of 2021

As ordered reported by the House Committee on Foreign Affairs on March 25, 2021

By Fiscal Year, Millions of Dollars	2021	2021-2026	2021-2031
Direct Spending (Outlays)	0	0	0
Revenues	0	0	0
Increase or Decrease (-) in the Deficit	0	0	0
Spending Subject to Appropriation (Outlays)	0	2,950	not estimated
Statutory pay-as-you-go procedures apply?	No	Mandate Effects	
Increases on-budget deficits in any of the four consecutive 10-year periods beginning in 2032?	No	Contains intergovernmental mandate?	No
		Contains private-sector mandate?	No

H.R. 391 would encourage the Administration to participate in and make financial contributions to programs that help public health systems detect and respond to infectious diseases. The bill would require the Administration to support the establishment of a new public-private Fund for Global Health Security and Pandemic Preparedness, which would help other countries implement health security strategies and respond to public health emergencies around the world. Although the bill would authorize the United States to contribute to the fund, it does not specify how much, and it would limit U.S. contributions to 33 percent of the total from all sources.

The bill also would codify the roles and responsibilities of a current interagency review council to advance the goals of the Global Health Security Agenda, of which the United States is a member. Because the council already exists, CBO estimates that implementing those requirements would not increase costs.

H.R. 391 would require the Administration to report to the Congress on U.S. participation in global health security programs and on progress toward meeting the goals of the bill. It also would require the Secretary of State to establish and maintain a financial tracking system to ensure transparency and accountability of the new fund's activities. Finally, the Government Accountability Office would be required to report on the fund's effectiveness.

Currently, the United States contributes to the Global Fund to Fight AIDS, Tuberculosis, and Malaria—a fund similar to the one proposed in H.R. 391. The Department of State initially

contributed a total of \$275 million to the fund between 2001 and 2002 and was authorized to contribute \$1.6 billion annually in 2020 and 2021. CBO expects that similar amounts would be provided for contributions to and management of the new fund for health security. CBO expects that fund would be established in 2022 and that the Department of State would begin making contributions in 2023. Accounting for the limitation on the timing of those contributions, CBO estimates that the United States would disburse \$125 million to the new fund in 2023 and \$3.0 billion over the 2023-2026 period. Such spending would be subject to the appropriation of the estimated amounts.

The costs of the legislation, detailed in Table 1, fall within budget function 150 (international affairs).

Table 1. Estimated Increases in Spending Subject to Appropriation Under H.R. 391							
	By Fiscal Year, Millions of Dollars						2021-2026
	2021	2022	2023	2024	2025	2026	
Global Health Security Fund							
Estimated Authorization	0	0	500	1,000	1,500	1,500	4,500
Estimated Outlays	0	0	125	500	975	1,350	2,950

The CBO staff contact for this estimate is Etaf Khan. The estimate was reviewed by Leo Lex, Deputy Director of Budget Analysis.