Congressional Budget Office
Cost Estimate

July 15, 2026

At a Glance

H.R. 6993, Veterans TBI Breakthrough Exploration of Adaptive Care Opportunities Nationwide Act of 2026

As ordered reported by the House Committee on Veterans' Affairs on May 14, 2026

By Fiscal Year, Millions of Dollars	2026	2026-2031	2026-2036
Direct Spending (Outlays)	*	20	-41
Revenues	0	0	0
Increase or Decrease (-) in the Deficit	*	20	-41
Spending Subject to Appropriation (Outlays)	*	40	40

Increases *net direct spending* in any of the four consecutive 10-year periods beginning in 2037?	No	Statutory pay-as-you-go procedures apply?	Yes
Increases *on-budget deficits* in any of the four consecutive 10-year periods beginning in 2037?	No	**Mandate Effects**	
		Contains intergovernmental mandate?	No
		Contains private-sector mandate?	No

* = between zero and $500,000.

The bill would

- Establish two grant programs at the Department of Veterans Affairs (VA) to support research, development, and evaluation of certain rehabilitative treatments for veterans with chronic mild traumatic brain injury
- Authorize appropriations for grants and program administration
- Extend the higher rates for fees that VA charges borrowers for home loan guarantees

Estimated budgetary effects would mainly stem from

- Authorizing appropriations for traumatic brain injury research and treatment grants
- Extending the higher rates for fees charged by VA for home loan guarantees

Detailed estimate begins on the next page.

Bill Summary

H.R. 6993 would require the Department of Veterans Affairs (VA) to establish two grant programs to support the development, evaluation, and study of neurorehabilitation treatments for veterans with chronic mild traumatic brain injury. Such treatments are aimed at helping people recover from injuries to the nervous system. The bill also would extend certain VA housing loan fees through July 14, 2034.

Estimated Federal Cost

The estimated budgetary effects of H.R. 6993 are shown in Table 1. The costs of the legislation fall within budget function 700 (veterans benefits and services).

Table 1.
Estimated Budgetary Effects of H.R. 6993

	By Fiscal Year, Millions of Dollars												
	2026	2027	2028	2029	2030	2031	2032	2033	2034	2035	2036	2026-2031	2026-2036
Increases in Direct Spending													
Estimated Budget Authority	6	7	7	0	0	0	0	0	-61	0	0	20	-41
Estimated Outlays	*	6	7	7	*	0	0	0	-61	0	0	20	-41
Increases in Spending Subject to Appropriation													
Estimated Authorization	14	13	13	0	0	0	0	0	0	0	0	40	40
Estimated Outlays	*	14	13	13	*	0	0	0	0	0	0	40	40

* = between zero and $500,000

Basis of Estimate

For this estimate, CBO assumes that H.R. 6993 will be enacted in fiscal year 2026, that VA will begin awarding grants in 2027, and that outlays will follow historical spending patterns for affected programs.

Provisions That Affect Direct Spending and Spending Subject to Appropriation

H.R. 6993 would establish two grant programs related to the treatment of chronic mild traumatic brain injury among veterans. One program would provide grants to eligible entities to develop, implement, and evaluate neurorehabilitation treatments for veterans with such injuries. The other program would provide grants to eligible entities to conduct independent research studies and treatment initiatives related to traumatic brain injury. The bill would authorize the appropriation of $20 million annually for fiscal years 2026 through 2028, $10 million per year for each program. CBO expects that VA would spend the authorized amounts over the 2026-2030 period. Using historical spending patterns for similar VA grant

programs, CBO estimates that implementing the pilot program would cost $60 million over the 2026-2036 period.

VA uses several appropriation accounts to pay for the costs of health care, disability claims processing, medical research, and information technology modernization. One of those accounts, the Toxic Exposures Fund (TEF), is a mandatory appropriation that can be used to pay for some of the costs of those activities if they support veterans who were exposed to toxic substances or environmental hazards.[1] The other accounts are discretionary appropriations. H.R. 6993 would affect health care that benefits veterans with and without toxic exposures; therefore, enacting the bill would increase direct spending from the TEF as well as spending subject to appropriation. CBO allocates the estimated costs of legislation between the TEF and the discretionary appropriation accounts on the basis of the portion of all funding for those activities that are projected, in CBO's baseline, to come from the TEF.

On that basis, CBO estimates that over the 2026-2036 period, implementing the pilot grant program under H.R. 6993 would increase direct spending by $20 million and spending subject to appropriation by $40 million.

Direct Spending

The discussion under "Provisions That Affect Direct Spending and Spending Subject to Appropriation" describes the costs of implementing changes to VA health care programs. Those changes would increase direct spending by $20 million over the 2026-2036 period. In addition, H.R. 6993 would affect direct spending by extending higher fees for VA home loan guarantees. In total, CBO estimates that enacting H.R. 6993 would decrease net direct spending by $41 million over the 2026-2036 period (see Table 2).

The bill would extend—for five weeks—the higher fees that VA charges borrowers for its loan guarantees. VA provides loan guarantees to lenders that allow eligible borrowers to obtain better loan terms—such as lower interest rates or smaller down payments—to purchase, construct, improve, or refinance a home. VA typically pays lenders up to 25 percent of the outstanding mortgage balance if a borrower's home is foreclosed upon. Those payments, net of fees paid by borrowers and recoveries by lenders, constitute the subsidy cost for the loan guarantees.[2] That subsidy cost is paid from mandatory appropriations and thus recorded in the budget as direct spending.

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1. For additional information about estimated spending from the TEF, see Congressional Budget Office, "Toxic Exposures Fund—February 2026 Baseline" (February 2026), https://tinyurl.com/5c2kp8fs, and *How CBO Would Estimate the Effects of Future Authorizing Legislation on Spending From the Toxic Exposures Fund* (December 2022), https://www.cbo.gov/publication/58843.
2. Under the Federal Credit Reform Act of 1990, the subsidy cost of a loan guarantee is the net present value of estimated payments by the government to cover defaults and delinquencies, interest subsidies, or other expenses offset by any payments to the government, including origination or other fees, penalties, and recoveries on defaulted loans. Such subsidy costs are calculated by discounting those expected cash flows using the rate on Treasury securities of comparable maturity. The resulting estimated subsidy costs are recorded in the budget when the loans are disbursed or modified. A positive subsidy indicates that the loan results in net outlays from the Treasury; a negative subsidy indicates that the loan results in net receipts to the Treasury.

Table 2.
Estimated Changes in Direct Spending Under H.R. 6993

	By Fiscal Year, Millions of Dollars												
	2026	2027	2028	2029	2030	2031	2032	2033	2034	2035	2036	2026-2031	2026-2036
Grants													
Estimated Budget Authority	6	7	7	0	0	0	0	0	0	0	0	20	20
Estimated Outlays	*	6	7	7	*	0	0	0	0	0	0	20	20
Home Loan Fees													
Estimated Budget Authority	0	0	0	0	0	0	0	0	-61	0	0	0	-61
Estimated Outlays	0	0	0	0	0	0	0	0	-61	0	0	0	-61
Total Changes													
Estimated Budget Authority	6	7	7	0	0	0	0	0	-61	0	0	20	-41
Estimated Outlays	*	6	7	7	*	0	0	0	-61	0	0	20	-41

* = between zero and $500,000.

Under current law, the rates for most of the fees that borrowers currently pay average about 2.3 percent of their loan amount; for loans guaranteed after June 9, 2034, those rates will drop to about 1.2 percent of the loan amount. The bill would extend the higher rates through July 14, 2034, which would reduce the subsidy cost of loans guaranteed during that period, thereby decreasing direct spending.

Using its forecast of loan volume based on data provided by VA, CBO estimates that extending the higher rates for fees as specified in the bill would decrease net direct spending by $61 million over the 2026-2036 period.

Spending Subject to Appropriation

In addition to authorizing appropriations for traumatic brain injury research and treatment grants, the bill would require VA to submit periodic reports to the Congress regarding the outcomes and effectiveness of the grant programs. The bill also would require VA to conduct annual evaluations of grant-funded activities. On the basis of the costs of similar reporting requirements, CBO estimates that satisfying those requirements would cost less than $500,000 over the 2026-2036 period; any related spending would be subject to the availability of appropriated funds.

In total, CBO estimates that implementing H.R. 6993 would increase spending subject to appropriation by $40 million over the 2026-2036 period.

Pay-As-You-Go Considerations

The Statutory Pay-As-You-Go Act of 2010 establishes budget-reporting and enforcement procedures for legislation affecting direct spending or revenues. The net changes in direct spending outlays that are subject to those pay-as-you-go procedures are shown in Table 3.

Table 3.
CBO's Estimate of the Statutory Pay-As-You-Go Effects of H.R. 6993, the Veterans TBI Breakthrough Exploration of Adaptive Care Opportunities Nationwide Act of 2026, as Ordered Reported by the House Committee on Veterans' Affairs on May 14, 2026

	By Fiscal Year, Millions of Dollars												
	2026	2027	2028	2029	2030	2031	2032	2033	2034	2035	2036	2026-2031	2026-2036
	Net Increase or Decrease (-) in the Deficit												
Pay-As-You-Go Effect	0	6	7	7	0	0	0	0	-61	0	0	20	-41

Increase in Long-Term Net Direct Spending and Deficits

CBO estimates that enacting H.R. 6993 would not increase net direct spending or on-budget deficits in any of the four consecutive 10-year periods beginning in 2037.

Mandates

The bill contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act.

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