



CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

August 26, 2010

H.R. 3470 **Nationally Enhancing the Wellbeing of Babies through Outreach and Research Now Act**

As ordered reported by the House Committee on Energy and Commerce on July 28, 2010

SUMMARY

H.R. 3470 would amend the Public Health Service Act to authorize a grant program to provide funds to qualified entities to create, implement, and oversee pilot programs in areas with high rates of infant mortality.

The bill would authorize the appropriation of \$10 million for fiscal year 2011 and \$50 million over the 2011-2015 period. Assuming the appropriation of those amounts, CBO estimates that implementing the act would cost \$4 million in 2011 and \$45 million over the 2011-2015 period. Enacting H.R. 3470 would not affect direct spending or revenues; therefore, pay-as-you-go procedures do not apply.

H.R. 3470 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 H.R. 3470 is shown in the following table. The costs of this legislation fall within budget function 550 (health).

	By Fiscal Year, in Millions of Dollars					2011- 2015
	2011	2012	2013	2014	2015	
CHANGES IN SPENDING SUBJECT TO APPROPRIATION						
Authorization Level	10	10	10	10	10	50
Estimated Outlays	4	9	10	11	10	45

BASIS OF ESTIMATE

For this estimate, CBO assumes that H.R. 3470 will be enacted near the beginning of fiscal year 2011 and that the full amounts authorized will be appropriated near the beginning of each year. H.R. 3470 would authorize \$10 million in fiscal year 2011 and for each fiscal year through 2015. The activities authorized under the act would be carried out by the Health Resources and Services Administration (HRSA). The estimate of outlays is based on historical spending patterns for similar activities.

The bill would direct HRSA to award grants to eligible entities to conduct infant mortality pilot programs giving preference to projects serving counties or groups of counties with the highest rates of infant mortality in the past three years. Grant funds would be available for activities that may include developing and implementing plans that identify the needs of the communities and strategies to address those needs; outreach, education and counseling for at-risk mothers; and developing and implementing systems to improve access and quality of services for women and their infants.

INTERGOVERNMENTAL AND PRIVATE-SECTOR IMPACT

H.R. 3470 contains no intergovernmental or private-sector mandates as defined in UMRA. Funds authorized in the bill would benefit state, local, and tribal governments that carry out activities to reduce infant mortality.

ESTIMATE PREPARED BY:

Federal Costs and Impact on State, Local, and Tribal Governments: Lisa Ramirez-Branum
Impact on the Private Sector: Jimmy Jin

ESTIMATE APPROVED BY:

Holly Harvey
Deputy Assistant Director for Budget Analysis