



CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

March 31, 2008

S. 1760

Healthy Start Reauthorization Act of 2007

*As ordered reported by the Senate Committee on Health, Education, Labor, and Pensions
on March 13, 2008*

SUMMARY

S. 1760 would amend the Public Health Service Act to authorize programs that provide grants for evidence-supported and community-designed strategies to reduce infant mortality and improve perinatal outcomes. The Healthy Start program works with individual communities to build upon existing resources, such as health education and case management, to improve the quality of and access to prenatal and perinatal health care for women and infants.

The bill would authorize the appropriation of \$120 million for 2008 and \$757 million over the 2008-2013 period. However, \$100 million has already been appropriated for those activities for 2008. Thus, S. 1760 would authorize the appropriation of an additional \$20 million for fiscal year 2008 and \$657 million over the 2008-2013 period.

CBO estimates that implementing the bill would cost \$2 million in 2008, when compared to current law, and \$453 million over the 2008-2013 period, assuming the appropriation of the authorized amounts. Enacting S. 1760 would not affect direct spending or revenues.

S. 1760 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act (UMRA) and would impose no costs on state, local, or tribal governments.

ESTIMATED COST TO THE FEDERAL GOVERNMENT

The estimated budgetary impact of S. 1760 is shown in the following table. The costs of this legislation fall within budget function 550 (health).

	By Fiscal Year, in Millions of Dollars					
	2008	2009	2010	2011	2012	2013
SPENDING SUBJECT TO APPROPRIATION						
Spending Under Current Law						
Budget Authority	100	0	0	0	0	0
Estimated Outlays	85	132	25	10	0	0
Proposed Changes						
Authorization Level	20	122	125	127	130	133
Estimated Outlays	2	22	79	108	120	122
Estimated Spending Under S. 1760						
Authorization Level	120	122	125	127	130	133
Estimated Outlays	87	154	104	118	120	122

BASIS OF ESTIMATE

S. 1760 would authorize grants to reduce infant mortality and improve perinatal health. In total, the bill would authorize the appropriation of \$120 million for 2008 and \$624 million over the 2008-2012 period. The Omnibus Appropriations Act (Public Law 110-161) provided \$100 million in 2008 for those activities. Thus, S. 1760 would authorize the appropriation of an additional \$20 million for fiscal year 2008 and \$657 million over the 2008-2013 period.

Based on historical patterns of spending for those programs, and assuming the appropriation of the authorized amounts, CBO estimates that implementing the bill would cost an additional \$2 million in 2008, and an additional \$453 million over the 2008-2013 period, relative to current law. The estimate assumes that the funding would be appropriated in the spring of 2008 and near the beginning of subsequent fiscal years.

INTERGOVERNMENTAL AND PRIVATE-SECTOR IMPACT

S. 1760 contains no intergovernmental or private-sector mandates as defined in UMRA. Grant funds authorized in the bill would benefit state, local, and tribal governments.

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