



**CONGRESSIONAL BUDGET OFFICE
COST ESTIMATE**

September 20, 2017

H.R. 2824
**Increasing Opportunity and Success for Children and Parents
 through Evidence-Based Home Visiting Act**
As ordered reported by the House Committee on Ways and Means on September 13, 2017

SUMMARY

H.R. 2824 would reauthorize the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program through fiscal year 2022 and would directly appropriate \$400 million for each fiscal year 2018 through 2022 for the program. CBO estimates that enacting the bill would cost about \$2 billion over the 2017-2027 period.

Pay-as-you-go procedures apply because enacting the bill would affect direct spending. H.R. 2824 would not affect revenues.

CBO estimates that enacting the bill would not increase net direct spending or on-budget deficits in any of the four consecutive 10-year periods beginning in 2028.

H.R. 2824 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 effect of H.R. 2824 is shown in the following table. The costs of this legislation fall within budget function 550 (health).

	By Fiscal Year, in Millions of Dollars											2017-	2017-
	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2022	2027
INCREASES IN DIRECT SPENDING													
Budget Authority	0	400	400	400	400	400	0	0	0	0	0	2,000	2,000
Estimated Outlays	0	12	140	300	396	396	384	256	96	0	0	1,244	1,980

BASIS OF ESTIMATE

The Health Resources and Services Administration (HRSA) administers the MIECHV grant program. The funds are distributed to states, territories, and tribal entities to develop and implement evidence-based, voluntary programs that aim to improve maternal and child health, prevent child abuse and neglect, encourage positive parenting, and promote child development and school readiness. In fiscal year 2017, the MIECHV program received \$372 million, after accounting for sequestration. The program expires at the end of fiscal year 2017.

H.R. 2824 would appropriate \$400 million for each fiscal year 2018 through 2022 for the MIECHV program and would make several other programmatic changes. The bill would:

- Require states to review and update assessments on statewide needs and identify at-risk communities by October 1, 2020;
- Set standards for data exchange with state agencies;
- Authorize a grantee to use funds for pay-for-outcomes initiatives;
- Alter several reporting and benchmark requirements; and
- Require grantees, starting in 2020, to provide matching funds. Grantees could count spending on relevant activities from other federal funds or by third parties toward the matching requirement.

Based on historical spending patterns, CBO estimates enacting H.R. 2824 would cost about \$2 billion over the 2018-2027 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 outlays that are subject to those pay-as-you-go procedures are shown in the following table.

CBO Estimate of Pay-As-You-Go Effects for H.R. 2824, as ordered reported by the House Committee on Ways and Means on September 13, 2017

	By Fiscal Year, in Millions of Dollars												
	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2017-2022	2017-2027
NET INCREASE IN THE DEFICIT													
Statutory Pay-As-You-Go Impact	0	12	140	300	396	396	384	256	96	0	0	1,244	1,980

INCREASE IN LONG-TERM DIRECT SPENDING AND DEFICITS

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.

INTERGOVERNMENTAL AND PRIVATE-SECTOR IMPACT

H.R. 2824 contains no intergovernmental or private-sector mandates as defined in UMRA.

ESTIMATE PREPARED BY:

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