

**H.R. 2166, Global Health Security Act of 2020**

As ordered reported by the House Committee on Foreign Affairs on March 4, 2020

By Fiscal Year, Millions of Dollars	2020	2020-2025	2020-2030
Direct Spending (Outlays)	0	0	0
Revenues	0	0	0
Increase or Decrease (-) in the Deficit	0	0	0
Spending Subject to Appropriation (Outlays)	*	1	not estimated
Statutory pay-as-you-go procedures apply?	No	<b>Mandate Effects</b>	
Increases on-budget deficits in any of the four consecutive 10-year periods beginning in 2031?	No	Contains intergovernmental mandate?	No
		Contains private-sector mandate?	No
* = between zero and \$500,000.			

H.R. 2166 would require the President to establish an interagency council to make recommendations on policies, to facilitate efforts, and to review the government’s global response to the threat of infectious diseases. The council would be composed of representatives from more than a dozen U.S. government agencies and would meet at least four times each year. Such a council has been operating under Executive Order 13747 since November 2016. Thus, CBO estimates implementing that provision would not increase costs because the bill codifies current practice.

The bill also would require the President to appoint a person to coordinate and report on federal responses to emergencies related to global health. Using salary information for senior executive positions, CBO expects that the Administration would appoint a global health coordinator at an average compensation of \$180,000. As a result, CBO estimates that implementing H.R. 2166 would cost \$1 million over the 2020-2025 period; that spending would be subject to the availability of appropriated funds.

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