H.R. 234, Korean America As ordered reported by the House C					
By Fiscal Year, Millions of Dollars	2021	2021-2026	2021-2031		
Direct Spending (Outlays)	0	0	0		
Revenues	0	0	0		
Increase or Decrease (-) in the Deficit	0	0			
Spending Subject to Appropriation (Outlays)	*	87	not estimated		
Statutory pay-as-you-go procedures apply?	No	Mandate Effects			
Increases on-budget deficits in any of the four consecutive 10-year	No	Contains intergovernmental ma	andate? No		
periods beginning in 2032?	INO	Contains private-sector manda	te? No		

H.R. 234 would require the Department of Veterans Affairs (VA) to provide health care to any U.S. citizen who served in Vietnam as a member of the armed forces of the Republic of Korea during the period beginning on January 9, 1962, and ending May 7, 1975. Using information from the department, CBO estimates that about 3,000 people would become eligible to enroll in the VA health care system.

CBO estimates that 1,300 people would gradually enroll in VA's health care system over the next few years. We expect that those new enrollees would be similar in age and health to other Vietnam War veterans and would use VA health care at similar rates. The department expects to spend an average of \$13,500 to treat veterans of that era in 2021. After accounting for inflation, CBO estimates that implementing the bill would cost \$87 million over the 2021-2026 period. Such spending would be subject to the availability of appropriated funds.

The costs of the legislation, detailed in Table 1, fall within budget function 700 (veterans' benefits and services).



Table 1.
Estimated Increases in Spending Subject to Appropriation Under H.R. 234

	By Fiscal Year, Millions of Dollars							
_	2021	2022	2023	2024	2025	2026	2021-2026	
Expanded Health Care								
Estimated Authorization	*	10	14	21	21	21	87	
Estimated Outlays	*	10	14	21	21	21	87	

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