

S. 2297, International Pandemic Preparedness and COVID-19 Response Act of 2021

As reported by the Senate Committee on Foreign Relations on July 28, 2021

By Fiscal Year, Millions of Dollars	2022	2022-2026	2022-2031
Direct Spending (Outlays)	0	0	0
Revenues	0	0	0
Increase or Decrease (-) in the Deficit	0	0	0
Spending Subject to Appropriation (Outlays)	*	4,752	not estimated
Statutory pay-as-you-go procedures apply?	No	Mandate Effects	
Increases on-budget deficits in any of the four consecutive 10-year periods beginning in 2032?	No	Contains intergovernmental mandate?	No
		Contains private-sector mandate?	No

* = between zero and \$500,000.

S. 2297 would authorize appropriations of \$5 billion over the 2022-2026 period for programs that would help other countries implement health security strategies and respond to public health emergencies. Those amounts would be used to:

- Make contributions to the Fund for Global Health Security and Pandemic Prevention and Preparedness, a new public-private international financing mechanism that would be authorized by the bill;
- Replenish an emergency reserve fund at the United States Agency for International Development;
- Make contributions to the World Bank’s fund for health emergencies; and
- Strengthen bilateral assistance with partner countries by implementing the Global Health Security Agenda.

Using historical spending patterns of appropriations for those purposes and after accounting for limitations on the timing of U.S. contributions to international funds, CBO estimates outlays of \$4.8 billion over the 2023-2026 period. Such spending would be subject to the appropriation of the authorized amounts.

S. 2297 would require 7 one-time reports, and 12 recurring briefings on U.S. efforts to address global health security. Based on the resources needed to complete similar reports and briefings, CBO estimates that meeting those requirements would cost \$2 million over the 2022-2026 period.

In addition, the bill would direct the Administration to enhance its role in the international response to COVID-19, prepare to address future pandemics, and strengthen health systems in vulnerable countries. Those efforts include engaging with multilateral organizations and using bilateral programs to accelerate the delivery of COVID-19 vaccines internationally, making contributions to programs designed to safeguard and strengthen civil societies and human rights, and establishing a committee on global health security and pandemic and biological threats within the National Security Council. The Administration is currently implementing those requirements; therefore, CBO estimates that requiring those activities would not increase costs relative to current law.

The costs of the legislation, detailed in Table 1, fall within budget function 150 (international affairs).

Table 1.
Estimated Increases in Spending Subject to Appropriation Under S. 2297

	By Fiscal Year, Millions of Dollars					2022-2026
	2022	2023	2024	2025	2026	
Global Health						
Authorization	0	5,000	0	0	0	5,000
Estimated Outlays	0	1,250	1,250	1,250	1,000	4,750
Reports & Briefings						
Estimated Authorization	*	1	*	*	*	2
Estimated Outlays	*	1	*	*	*	2
Total Changes						
Estimated Authorization	*	5,001	*	*	*	5,002
Estimated Outlays	*	1,251	1,250	1,251	1,000	4,752

Components may not sum to totals because of rounding; * = between zero and \$500,000.

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