

THE SECRETARY OF VETERANS AFFAIRS WASHINGTON

May 22, 2017

The Honorable Brad Wenstrup Chairman House Committee on Veterans' Affairs Subcommittee on Health U.S. House of Representatives Washington, DC 20515

Dear Mr. Chairman:

The agenda for the House Committee on Veterans' Affairs' Health Subcommittee's March 29, 2017, legislative hearing included two bills for which the Department of Veterans Affairs (VA) was unable to provide cost estimates in our testimony. We are aware of the Committee's interest in receiving our cost estimates for these bills. We are also providing an updated cost estimate for H.R. 907, the Newborn Care Improvement Act. There are limitations inherent in all cost estimates and actual implementation costs could be higher or lower.

VA estimates the cost of H.R. 95, the "Veterans' Access to Child Care Act", would have a one-time cost of \$140.2 million to renovate, build, or lease appropriate space. Additionally, VA estimates childcare costs up to \$41 million in fiscal year (FY) 2018, \$221.4 million over 5 years, and \$489.5 million over 10 years for a total of \$629.7 million.

VA estimates the cost of the draft bill, the "Veterans Affairs Medical Scribe Pilot Act of 2017," of up to \$3.2 million in FY 2018 and \$6.56 million over 2 years.

With regard to H.R. 907, the Newborn Care Improvement Act, VA refined its methodology in estimating the cost of the bill. In the process, we found that the cost estimate originally provided to the Committee needs to be revised. The estimate of the number of annual deliveries of newborns among current enrollees was revised from 3,500 to 3,820. The revised estimate in enrollees increased the estimated cost of the bill to \$28.2 million in FY 2018, \$149.1 million over 5 years, and \$320.4 million over 10 years.

Sincerely,

David J. Shulkin, M.D.

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