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Concur in the Senate Amendment to H.R. 1222, Congenital Heart Futures Reauthorization Act

FLOOR SITUATION

On Wednesday, December 19, 2018, the House will consider whether to concur in the [Senate Amendment to H.R. 1222](#), Congenital Heart Futures Reauthorization Act, under suspension of the rules. This bill was introduced on February 27, 2017 by Rep. Gus Bilirakis (R-FL), and was referred to the Committee on Energy and Commerce, which ordered the bill reported, as amended, by voice vote on June 7, 2017. Additionally, this bill passed the Senate by unanimous consent on December 12, 2018.

SUMMARY

The Senate Amendment to H.R. 1222 would direct the Secretary of Health and Human Services (HHS), through the Centers for Disease Control and Prevention (CDC), to enhance surveillance capabilities to track the epidemiology of congenital heart disease (CHD) and to provide grants to study the epidemiology of CHD across the lifespan. In addition, the legislation would require the Secretary to produce a report to Congress on CHD that includes information on the demographics and health care utilization of individuals with the disease. Additionally, the bill would reauthorize research on CHD at the National Institutes of Health (NIH) and would require NIH to produce a report on its research efforts on CHD.

BACKGROUND

Congenital heart diseases (CHDs) are defects in the structure and function of the heart that disrupt the flow of blood through the heart. These defects range from simple to severe and life threatening. CHDs are the most common birth defect and the leading cause of infant mortality. Although the causes of CHDs among most infants are unknown, according to the CDC, at least 15 percent of all CHDs are associated with genetic conditions. Indeed, CHD is prevalent in individuals with Down syndrome; approximately half of all infants born with Down syndrome have cardiovascular defects. Although advances in medical care permit adults and children with CHD to lead longer and healthier lives, disease management--especially in critical cases--still requires a lifetime of specialized cardiac care. Accurately tracking the prevalence, further understanding the causes, and identifying novel

treatments will improve the lives of those living with CHD and decrease the risk of birth defects in the future.¹

COST

The Congressional Budget Office (CBO) [estimates](#) that implementing H.R. 1222 would cost \$18 million over the 2019-2023 period, assuming appropriation of amounts consistent with 2018 levels

STAFF CONTACT

For questions or further information please contact [Ryan Hofmann](#) with the House Republican Policy Committee.

¹ See House Report [115-329](#) at 3.