CDC Fiscal Year 2015 Funding Profile for American Indian and Alaska Native Tribes and Tribal Organizations

CDC/ATSDR Tribal Advisory Committee Meeting
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CDC’s Office for State, Tribal, Local and Territorial Support
About the Funding Profile Data

- **Includes funding CDC/ATSDR**
  - Obligated and provided to tribes and tribal organizations as primary grantees through cooperative agreements and grants in fiscal year (FY) 2015 (October 1, 2014 – September 30, 2015)
  - Provided to Tribal Epidemiology Centers through an Interagency Agreement with the Indian Health Service
  - Awarded to American Indian/Alaska Native (AI/AN) tribes or tribal organizations through contracts

- “Obligated” refers to new funding (any funding carried over from a previous year or years is not included)
About the Funding Profile Data (cont.)

• Excludes

  ▪ The value of vaccines purchased by CDC and delivered through the Vaccines for Children program

  ▪ Any funds transferred to CDC/ATSDR from other federal agencies or entities (i.e., funds that are not part of CDC/ATSDR’s appropriations)
### CDC Funding to AI/AN Tribes and Tribal Organizations: FY15 Overview and Comparison to FY14

<table>
<thead>
<tr>
<th></th>
<th>FY14</th>
<th>FY15</th>
<th>Comparison FY15 +/- FY14</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Funding (grants/cooperative agreements/contracts)</td>
<td>$96,740,061</td>
<td>$140,715,200</td>
<td>+$44,025,139</td>
</tr>
<tr>
<td>Cooperative Agreement and Grant Funding</td>
<td>$36,317,246</td>
<td>$35,578,385</td>
<td>-$738,851</td>
</tr>
<tr>
<td>Contract Funding</td>
<td>$60,422,815</td>
<td>$105,186,805</td>
<td>+$44,763,990</td>
</tr>
<tr>
<td>Number of Grantees Funded (cooperative agreements and grants)</td>
<td>51</td>
<td>62</td>
<td>+11</td>
</tr>
<tr>
<td>Funding Mechanisms</td>
<td>11 funding opportunity announcements (FOAs); 1 grant</td>
<td>11 FOAs; 1 grant</td>
<td>No change in total mechanisms; some variation in funding FOAs and amounts</td>
</tr>
<tr>
<td>Funding Center or Office</td>
<td>Total FY15 Funding</td>
<td></td>
<td></td>
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<tr>
<td>--------------------------------------------------------------</td>
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<td></td>
<td></td>
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<tr>
<td>National Center for Chronic Disease Prevention and Health Promotion</td>
<td>$33,095,944</td>
<td></td>
<td></td>
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<tr>
<td>National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention</td>
<td>$731,911</td>
<td></td>
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<tr>
<td>National Center for Immunization and Respiratory Diseases</td>
<td>$100,000</td>
<td></td>
<td></td>
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<tr>
<td>Office for State, Tribal, Local and Territorial Support</td>
<td>$1,650,530</td>
<td></td>
<td></td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>$35,578,385</strong></td>
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</tbody>
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### CDC FY15 Grant and Cooperative Agreement Funding by American Indian and Alaska Native Tribe Funded

<table>
<thead>
<tr>
<th>Tribe</th>
<th>Total FY15 Funding*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bad River Band of Lake Superior Chippewa</td>
<td>$100,000</td>
</tr>
<tr>
<td>Catawba Indian Nation</td>
<td>$199,804</td>
</tr>
<tr>
<td>Cherokee Nation</td>
<td>$1,004,300</td>
</tr>
<tr>
<td>Cheyenne River Sioux Tribe</td>
<td>$535,101</td>
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<tr>
<td>Fond du Lac Reservation</td>
<td>$255,644</td>
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<tr>
<td>Hopi Tribe</td>
<td>$482,694</td>
</tr>
<tr>
<td>Kalispel Tribe of Indians</td>
<td>$97,067</td>
</tr>
<tr>
<td>KAW Nation of Oklahoma</td>
<td>$384,877</td>
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<tr>
<td>Kickapoo Tribe in Kansas</td>
<td>$240,490</td>
</tr>
<tr>
<td>Lower Brule Sioux Tribe</td>
<td>$200,000</td>
</tr>
<tr>
<td>Navajo Nation</td>
<td>$1,211,985</td>
</tr>
<tr>
<td>Nez Perce Tribe</td>
<td>$200,000</td>
</tr>
<tr>
<td>Pascua Yaqui Tribe</td>
<td>$100,000</td>
</tr>
<tr>
<td>Pawnee Nation of Oklahoma</td>
<td>$267,346</td>
</tr>
<tr>
<td>Pueblo of Santa Ana</td>
<td>$120,651</td>
</tr>
<tr>
<td>Red Cliff Band of Lake Superior Chippewa</td>
<td>$200,000</td>
</tr>
<tr>
<td>San Carlos Apache Tribe</td>
<td>$186,936</td>
</tr>
<tr>
<td>Santee Sioux Tribe of Nebraska</td>
<td>$45,615</td>
</tr>
<tr>
<td>Sault Ste. Marie Tribe of Chippewa Indians</td>
<td>$1,959,823</td>
</tr>
<tr>
<td>Tohono O’odham Nation</td>
<td>$143,534</td>
</tr>
<tr>
<td>Winnebago Tribe of Nebraska</td>
<td>$178,393</td>
</tr>
<tr>
<td>Total</td>
<td>$8,114,260</td>
</tr>
</tbody>
</table>

21 tribes funded

*Funding totals may include funding from more than one CDC program and FOA/grant
## CDC FY15 Funding to AI/AN Tribes and Tribal Organizations by FOA or Grant

<table>
<thead>
<tr>
<th>Funding Opportunity Announcement or Grant</th>
<th>FY15 Funding</th>
</tr>
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<tbody>
<tr>
<td>DP14-1421: A Comprehensive Approach to Good Health and Wellness in Indian Country (Financed solely by Prevention and Public Health Fund)</td>
<td>$13,319,266</td>
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<tr>
<td>DP14-1417: Partnerships to Improve Community Health (PICH)</td>
<td>$4,201,137</td>
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<tr>
<td>DP14-1419: Racial and Ethnic Approaches to Community Health (REACH) (Financed in part by the Prevention and Public Health Fund)</td>
<td>$2,165,957</td>
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<tr>
<td>DP12-1205: Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations (Breast and cervical cancer - $6,802,102; Comprehensive cancer control - $1,811,146)</td>
<td>$8,613,248</td>
</tr>
<tr>
<td>DP15-1502: Integrating Colorectal Cancer Screening within Chronic Disease Programs</td>
<td>$732,400</td>
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<tr>
<td>DP13-1302: Well Integrated Screening and Evaluation for Women Across the Nation (WISEWOMAN)</td>
<td>$1,001,600</td>
</tr>
<tr>
<td>DP13-1314: Consortium of National Networks to Impact Populations Experiencing Tobacco-Related and Cancer Health Disparities</td>
<td>$622,536</td>
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<tr>
<td>PS13-001: Natural History and Prevention of Viral Hepatitis among Alaska Natives</td>
<td>$181,911</td>
</tr>
<tr>
<td>PS15-1502: Comprehensive High Impact HIV Prevention Projects for Community-Based Organizations</td>
<td>$350,000</td>
</tr>
<tr>
<td>OT13-1302: OSTLTS Partnerships Building Capacity of the Public Health System to Improve Population Health through National, Non-Profit Organizations (Financed in part by 2013 Prevention and Public Health Fund)</td>
<td>$1,612,233</td>
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<tr>
<td>OT13-1303: Tribal Public Health Capacity Building and Quality Improvement</td>
<td>$547,067</td>
</tr>
<tr>
<td>Preventive Health and Health Services Block Grant</td>
<td>$91,230</td>
</tr>
</tbody>
</table>
FY15 CDC COOPERATIVE AGREEMENT AND GRANT FUNDING TO TRIBES AND TRIBAL ORGANIZATIONS BY PUBLIC HEALTH FOCUS AREA

- Cancer: 26.3%
- Tobacco: 11.8%
- Racial and Ethnic Approaches to Community Health (REACH): 6.1%
- Good Health and Wellness in Indian Country: 5.2%
- Tribal Epidemiology Centers: 6.0%
- National Leadership Academy for the Public’s Health: 0.8%
- Partnerships to Improve Community Health (PICH): 0.5%
- WISEWOMAN: 0.3%
- HIV/AIDS: 32.4%
- Hepatitis: 0.1%
- Tribal Public Health Infrastructure/Capacity Building: 1.0%
Fiscal Year Budget Activities Overlap

• Always: Conducting activities for three fiscal years

• Currently
  - FY16: Implementing FY16 budget activities
  - FY17
    - President’s FY17 budget released on 2/9/16
    - CDC’s FY17 budget materials posted at www.cdc.gov/Budget/
    - CDC will begin responding to related budget inquiries and requests, and continue planning for FY17
  - FY18: Will soon start planning for FY18 budget request

• When to provide input/feedback and engage CDC in program and resource planning?
  - Always – NOW!
Examples of Factors CDC Considers in Budget and Program Planning

• Congressional legislation, appropriations, directives, and priorities

• Guidance and directives—including priorities and funding levels—from White House (through OMB), HHS, and CDC director and other CDC leaders

• Evidence base—health statistics; research and program results; known best practices and practice-based evidence; and results of ASTHO, NACCHO, and other surveys of public health system
Examples of Factors CDC Considers in Budget and Program Planning (cont.)

• National strategies and action plans

• Input from stakeholders (e.g., health departments, grantees, national organizations)

• In FY15 CDC-wide bill language: “$10,000,000 shall be available until September 30, 2018, for acquisition of real property, equipment, construction, and renovation of facilities”
OVERVIEW OF THE BUDGET REQUEST

The fiscal year (FY) 2016 President’s Budget request for CDC and ATSDR includes a total funding level of $11,519,365,000 in discretionary budget authority, mandatory funding, and the Affordable Care Act Prevention and Public Health Fund (PPHF). This is an overall increase of $249,953,000 above the FY 2015 Enacted level. The CDC program level request of $7,010,103,000 (excluding mandatory programs except the Prevention Fund) for FY 2016 is an increase of $110,685,000 compared to the FY 2015 Enacted level.

The FY 2016 budget request builds on priorities set forth in CDC’s FY 2015 President’s budget, proposing strategic new investments and identifying targeted reductions that will allow CDC to advance its core public health mission.

The funding amounts and programmatic approaches described below are changes compared to the FY 2015 Enacted level.

Is a request; not necessarily what finally receive from Congress
Statement of funding priorities and strategies for upcoming year
Communicate with CDC (and Others) Early and Often

• Community and health department status, needs, barriers, ideas, and success stories

• How federal (and even state and local) priorities, proposals, bills/legislation/regulation, and resource decisions will affect, or are affecting, your health department and the public’s health

• How CDC can improve its public health programs, activities, services, processes, and resourcing
Some Key Points in Time to Pay Attention ("Which Way Is the Wind Blowing?" Moments)

- Release of president’s budget and federal agency budget materials (usually 1st Monday in Feb)
- Release of House and Senate budget resolutions (statements of priorities and intent)
- Release and markups of House and Senate bills
- Congressional press conferences
- Congressional appropriations hearings (usually webcast from House and Senate websites)
Some Key Points in Time to Pay Attention ("Which Way Is the Wind Blowing?" Moments) (cont.)

• Passage and content of final appropriations, including committee reports

• Release of funding opportunity announcements (FOAs) from federal agencies that put the appropriations into action
  ▪ Technical assistance webinars for potential applicants

• Initiation of accountability activities and release of those results
Communication and Collaboration

• Subscribe to CDC’s email subscription service for news and updates (www.cdc.gov/Other/emailupdates/), Facebook page or Twitter feed
  ▪ What sources of tribal information would you recommend CDC staff subscribe to?

• Subscribe to Grants.gov alerts for grant and cooperative agreement funding opportunities and FedBizOpps.gov for contract opportunities
• Serve on and/or attend meetings of CDC’s advisory committees; provide input to committee members representing you; provide written statement or testimony, when applicable
  ▪ CDC federal advisory committees—
    [www.cdc.gov/about/advisory.htm](http://www.cdc.gov/about/advisory.htm)
  ▪ CDC/ATSDR Tribal Advisory Committee
  ▪ State, Tribal, Local and Territorial Subcommittee to the Advisory Committee to the Director

• Participate in the twice-yearly CDC/ATSDR Tribal Consultation and/or request a specific tribal consultation
Communication and Collaboration (cont.)

- Communicate challenges and needs at anytime to CDC
  - The Office for State, Tribal, Local and Territorial Support or its Tribal Support Unit can connect you to the right person or source at CDC to help address your issue
  - If you are a current grantee, let your project officer know about any specific challenges or issues that might be improved in the current or next grant cycle

- Share lessons learned with CDC and the field
Federal Register

- Official publication of the US government that
  - Informs citizens of their rights and obligations
  - Documents federal agencies’
  - Provides a forum for public participation in the democratic process
  - Publishes daily Monday–Friday, except federal holidays

- Federal agencies legally required to publish certain items

- Official site
Federal Register (cont.)

- Four types of entries
  - Presidential documents (e.g., executive orders and proclamations)
  - Rules and regulations (e.g., policy statements and interpretations of rules)
  - Proposed rules (e.g., petitions for rulemaking and other advance proposals)
  - Notices (e.g., scheduled hearings and meetings open to the public, grant applications, administrative orders, and other announcements of government actions)
Federal Register (cont.)

• Consider how information affects your program and stakeholders

• Provide input and comments

• Make stakeholders aware of opportunities to provide input and of items that affect them
• Participate today!

• Submit your comments on proposed regulations and related documents published by the US federal government

• Search and review original regulatory documents, as well as comments submitted by others

• Help improve federal regulations by submitting your comments
The Centers for Disease Control and Prevention’s (CDC) Procurement and Grants Office (PGO) and the Office of the Chief Financial Officer (OCFO) have merged to become the Office of Financial Resources (OFR). OFR aids in achieving CDC’s mission by quickly and effectively allocating funds to where they are needed. In its Pledge to the American People, CDC commits to being a diligent steward of the funds entrusted to the Agency. OFR ensures this pledge remains intact.

Learn more about OFR:
- FY 2015 Annual Report
- Assistance Snapshot
- Acquisition Snapshot

Learn more about CDC’s budget request
Budget, Grants, & Funding

CDC's budget
- Appropriations process and materials
- Funding allocations
- CDC budget and funding-related offices

Grants and funding for STLTs
- Grant funding profiles—Includes selected CDC grants and cooperative agreements provided to health departments, universities, and other public and private agencies in the US states and territories
- Direct Assistance for Assigning CDC Staff to State, Tribal, Local, and Territorial Health Agencies
- Expediting the Federal Grant Process with an Administrative Partner
- Grant writing guidance and tips

Public health system financing
- For the Public's Health, Investing in a Healthier Future
- Investing in America’s Health: A State-by-State Look at Public Health Funding and Key Health Facts
- Prevention for a Healthier America: Investments in Disease Prevention Yield Significant Savings, Stronger Communities
- Public Health Financing (overview) [PDF-44MB], PDF Version [699KB]
Resources

• CDC
  ▪ Budget (CJ and related resources)
    www.cdc.gov/budget/
  ▪ Grant Funding Profiles Tool
    http://wwwn.cdc.gov/FundingProfiles/FundingProfilesRIA/
  ▪ Public Health System Financing
    www.cdc.gov/stltpublichealth/GrantsFunding/index.html
  ▪ Funding Opportunity Announcements
    www.grants.gov

• President’s budget
  ▪ www.whitehouse.gov/omb/budget

• US budget
  ▪ Copies (GPO)
  ▪ How Congress Works: The Budget Process
Resources (cont.)

• USASpending.gov
  ▪ Information on each federal award (e.g., name of entity receiving the award, amount of award, funding agency, award type)
  ▪ www.usaspending.gov

• Tracking Accountability in Government Grants System
  ▪ Central repository for grants awarded by the 11 HHS Operating Divisions
  ▪ http://taggs.hhs.gov/
Thank you!

For more information, please contact CDC’s Office for State, Tribal, Local and Territorial Support

4770 Buford Highway NE, Mailstop E-70, Atlanta, GA 30341
Telephone: 1-800-CDC-INFO (232-4636)/TTY: 1-888-232-6348
E-mail: OSTLTSfeedback@cdc.gov Web: http://www.cdc.gov/stltpublichealth

The findings and conclusions in this presentation are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.