

NEPA ARRA Section 1609 Report Data (Page 1 of 2) (dttd Dec 31 09)											
Department or Agency Name		Centers for Disease Control and Prevention									
End Date for this Report		30-Jun-10									
Submitter Name		Bill Nichols									
Submitter Contact Info (E-mail / Phone)		lnichols1@cdc.gov / 404-639-7000									
No.	Treasury Appropriation Fund Symbol	Title/Program	Total ARRA Appropriation for Projects and Activities	Number of ARRA Funded Projects / Activities	NEPA Not Applicable	Total Categorical Exclusion Actions	Total Environmental Assessment Actions	Total Environmental Impact Statement Actions	All NEPA Actions for the Recovery Act Funded Activity or Project	Number of projects withdrawn	Total Obligations for Projects and Activities
			Total	Total	Total CE Actions	Total EA Actions	Total EIS Actions	Total Actions	Total	Total	
1	75-0144	Prevention and Wellness Fund, Recovery Act	\$50,000,000	112		1			1		\$48,934,366
2	75-0942	Prevention and Wellness Fund, Recovery Act - (Section 317 & Communities Putting Prevention to Work)	\$917,500,000	305		2			2		\$823,272,132
3											
4											
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No.	Title/Program	Project/Activity Description	NEPA Action: Enter the number of NEPA actions with the same status (see instructions for grouping). Enter ce for Categorical Exclusion; ea for Environmental Assessment; or eis for Environmental Impact Statement.		NEPA Status: Enter pending, done, or withdrawn.	Number of Completed NEPA Actions for the Recovery Act Funded Activity or Project	Number of Pending NEPA Actions for the Recovery Act Funded Activity or Project	Date NEPA is Done (mm/dd/yyyy)	All federal environmental reviews and documents are completed	Leave These Columns Blank	
			TOTAL ACTIONS:	3							
			Quantity	NEPA Action		TOTAL COMPLETED:	TOTAL PENDING:		Total Yes		
1	Prevention and Wellness Fund, Recovery Act - (Section 317 & Communities Putting Prevention to Work)	CFDA # - 93.712 - Disease Control, Research, and Training, Recovery Act (\$300,000,000) Section 317 Immunization program (Section 317) which funds 64 immunization programs that include all 50 states, Washington DC, 5 urban areas, the U.S. Territories, and selected Pacific Island nations.	1	ce	done	1		5/28/2009	Yes		
2	Prevention and Wellness Fund, Recovery Act	CFDA # - 93.717 - Healthcare-Associated Infections \$50,000,000 (CDC) - funds 51 ELC and 10 EIP programs to reduce preventable healthcare-associated infections through State health department efforts to prevent HAIs, including leveraging the National Healthcare Safety Network to support the dissemination of HHS evidence-based practices within hospitals. • Centers for Medicare and Medicaid Services = \$10 million (TAFS #75-0910-0144)	1	ce	done	1		5/28/2009	Yes		
3	Prevention and Wellness Fund, Recovery Act - (Section 317 & Communities Putting Prevention to Work)	CFDA # - 93.723 & 93.724 - Communities Putting Prevention to Work (\$650M) - This effort funds 124 State & Territory and 44 Community awards to expand the use of evidence-based strategies and programs, mobilize local resources at the community-level, and strengthen the capacity of states to reduce risk factors and prevent/delay chronic disease and promote wellness in both children and adults in four well-established, demographically diverse population areas in the United States: large cities, urban areas, tribal communities, and state-coordinated small cities and rural areas. With this funding, CDC obligated \$606 million (TAFS #75-0910-0942). Remaining funds will provide funding, via Inter-Departmental Delegation of Authority (IDDA) to the following agencies/offices: • Administration on Aging = \$32.5 million (TAFS #75-0910-0942) (SEE AoA 1609(c) Report Line Page 1, Line 2) • HHS Office of Public Health and Sciences = \$10 million (TAFS #75-0910-0942) • HHS Office of the Assistant Secretary for Planning and Evaluation = \$1.5 million (TAFS #75-0910-0942) The focal points for the implementation of plans for this effort are state, territory and local health departments, tribes, and national organizations. The initiative has a strong emphasis on policy and environmental change at both the state and local levels and will: Increase levels of physical activity; Improve nutrition (e.g. increased fruit/vegetable consumption, reduced salt and trans fats); Decrease overweight/obesity prevalence Decrease smoking prevalence and decreased teen smoking initiation; and Decrease exposure to secondhand smoke	1	ce	done	1		5/28/2009	Yes		