

## Attachment 8A

### Explanatory Note for Department of Health and Human Services Report May 3, 2010

#### Office of the Secretary (OS)

The OS appropriations include:

- General Departmental Management; Office of the National Coordinator for Health Information Technology (ONC HIT); OS spreadsheet page 1, row 1 and
- Public Health and Social Services Emergency (IT Security); spreadsheet page 1, row 2.

NEPA reviews for OS ARRA funding are completed. The spend plans for ONC HIT and the IT Security were reviewed in accordance with Health and Human Services (HHS) National Environmental Policy Act (NEPA) procedures and determined to be categorically excluded from further NEPA review.

Additionally a portion of the appropriation for Comparative Effectiveness Research from Agency for Healthcare Research and Quality (AHRQ) was transferred to Office of the Secretary and categorically excluded from further review. AHRQ will report on the NEPA work associated with those funds in the AHRQ section below and spreadsheet (attachment 8E).

**ONC HIT:** Obligations for an additional 118 activities are reported this period and reflect HITECH grants and contracts awarded by ONC, the HHS Office for Civil Rights, the HHS Office for Planning and Evaluation, SAMHSA, and AHRQ; there are now a total of 121 activities reported. Additionally, \$20 million of ONC's ARRA appropriation was transferred to National Institute of Standards and Technology in September 2009 and is not being reported by HHS.

**IT Security:** Obligated funds for this period are reported in the Section 1609(c) report and reflect 29 new activities (contracts and purchase orders) for this reporting period. There are now a total of 53 activities that are categorically excluded and are in support of the following initiatives:

- Security Incident Response & Coordination
- Operating Division (OPDIV) Security Engineering and Technical Staff Support
- Enterprise-wide Security Situational Awareness
- Endpoint (Desktop Computer) Protection, Internet Content Web Security Filtering, and Data Loss Prevention
- Enhanced OPDIV Security Architecture, Engineering, and Implementation

## Administration for Children & Families (ACF)

The Administration for Children & Families has two ARRA Programs: Child Care and Development Block Grants and Children and Family Services Program.

**Child Care and Development Block Grant** (page 1, row 1 of the ACF spreadsheet) total represents the 315 awards issued to date. One CE was prepared for the grants. \$1,987,184,056 has been obligated through March 31, 2010.

**Children and Family Services Program** (page 1, row 2 of the spreadsheet) total represents 3019 awards issued to date and includes:

- **Head Start Expansion Program** (page 2, rows 2 and 3) has issued an additional 50 awards this reporting cycle for a total of 377 awards issued to date. The NEPA completion date for Programmatic EA (PEA) evaluation for the additional awards reflects the single award date for the awards.
- **Early Head Start Expansion Program** (page 2, rows 4 and 5) has issued an additional 55 awards for a total of 561 awards issued to date. The NEPA completion date for Programmatic EA (PEA) evaluation for the additional awards reflects the single award date for the awards.
- **Head Start Cost of Living Adjustment (COLA) and Quality Improvement (QI) Actions** (page 2, row 6) remains unchanged at 1,701 awards.
  - **NOTE 1:** Each of these three programs allows for construction and major renovations; therefore, Categorical Exclusions (CEs) are not applicable. Under the ACF's Programmatic Environmental Assessment (PEA) for Head Start and Early Head Start programs, applicants are required to prepare an Environmental Report. The reports received from the applicants undergo a final evaluation and ACF completes the work necessary for NEPA compliance.
  - **NOTE 2:** The original **Children and Family Services Program** ARRA awards were issued to existing Head Start grantees that were awarded in previous years under ACF's established PEA and prior to the ARRA reporting requirements. The NEPA status for these actions is reflected as "Done" with an aggregate completion date of December 31, 2008.
- **Community Services Block Grant Program** (ACF spreadsheet page 2, row 7) mandatory awards remain unchanged from the previous reporting cycle, for a total 105. The number of discretionary awards (page 2, row 8) has increased from 47 to 149, as 102 awards were issued since the last reporting cycle. This program has been reviewed and categorically excluded in accordance with HHS NEPA procedures.

- ***Strengthening Communities Fund Grant Program*** (page 2, row 8) reflects 42 additional awards bringing the total to 126 awards. This program was reviewed and categorically excluded in accordance with HHS NEPA procedures

### **Administration on Aging (AoA)**

AoA is reporting a total of 406 ARRA funded projects. AoA received \$100 million in funding for the Aging Services Programs for a total of 358 awards (see AoA spreadsheet page 1, row 1). All of this funding has been obligated for projects and activities for three types of ARRA projects:

- Congregate Nutrition Services (page 2, row 1) – includes 56 awards totaling \$65 million to provide meals and related nutrition services for seniors who are homebound;
- Home-Delivered Nutrition Services (page 2, row 2) - includes 56 awards totaling \$32 million; and
- Nutrition Services for Native Americans (page 2, row 3) - included 246 awards totaling \$3 million to provide meals and related nutrition services for American Indian, Alaskan Native and Native Hawaiian elders.

AoA received an additional \$32.5 million from the Centers for Disease Control and Prevention ARRA Prevention and Wellness funding for the Chronic Disease Self Management Program (CDSMP; see page 1, row 2 of the AoA spreadsheet). It is anticipated that \$2.5 million of this amount will be transferred to the Centers for Medicaid and Medicare Services (CMS) Quality Improvement Organization in the near future. On March 31, \$30 million in CDSMP funding was awarded to 47 States and Territories, as well as for a Technical Assistance Resource Center, for a total of 48 grants (page 2, row 4).

All programs have undergone NEPA review and Categorical Exclusions (CE) have been determined to be the appropriate level of NEPA review

### **Agency for Healthcare Research & Quality (AHRQ)**

Under American Recovery and Reinvestment Act (Recovery Act) the Department of Health and Human Services (HHS) appropriated \$1.1 billion for comparative effectiveness research, of which:

- \$300 million is for AHRQ (see page 2, row 10 of the AHRQ spreadsheet)
- \$400 million is for allocation by the Office of the Secretary (OS) (page 2, row 10)
- \$400 million is for the National Institutes of Health (NIH) (see the NIH spreadsheet, attachment 8J)

The AHRQ and the OS-CER programs reported here have undergone NEPA review and categorical exclusions have been determined to be appropriate.

**AHRQ – Comparative Effectiveness Research:**

During this reporting period, AHRQ has obligated an additional \$1.4 million bringing AHRQ’s total ARRA obligations to \$54,216,248. These obligations reflect salaries and benefits used to support this research. In addition, all grant funding opportunity announcements are now closed and an estimated \$198.5 million in research grants is in the review stage. AHRQ will employ grants (~68), contracts (~3), task order contracts (~21), and salaries and benefits to undertake this research for a total of 92 activities (see page 2, row 1 of the spreadsheet).

**Office of the Secretary – Comparative Effectiveness Research:**

Since the last process report, the OS CER has obligated an additional \$10.05 million bringing OS’s total ARRA obligations to \$11,657,857. The obligations were associated with OS/ASPE and CMS. Note: the March 31, 2010 report does not include salary and benefit obligations for this program.

- \$1.01 million in obligations for ASPE project (A4.1) “Strategic Design of Creation of an All-Payer, All-Claims Database.”
- \$9.036 million in obligations for CMS’s project (A2) “Build a Medicaid Analytic eXtract (MAX) Data Repository Designed to Support Comparative Effectiveness Research for Medicaid and CHIP Program Populations”

The OS estimates that it will employ grants (~196), contracts (~23), task order contracts (~47), and salaries and benefits to undertake this research for total of 266 activities (see page 2, row 2).

**Centers for Disease Control & Prevention (CDC)**

The CDC has 3 NEPA actions for the \$1,000,000,000 appropriations for Prevention and Wellness Fund: Section 317 Immunizations Program, Healthcare Associated Infections (HAI) and Communities Putting Prevention to Work (CPPW). The spending and implementation plans for these activities have been reviewed and the projects and activities have been found to be categorically excluded from further NEPA review in accordance with HHS NEPA procedures. During the period, CDC obligated \$510,688,187 for a total of \$ 718,614,295 (CDC spreadsheet page 1, row 1). The narrative information is derived from 361 grants and 47 contracts for a total of 408 ARRA Funded Projects /Activities.

The activities reported in the CDC report include:

- 64 immunization programs that include all 50 states, Washington DC, 5 urban areas, the U.S. Territories, and selected Pacific Island nations (spreadsheet page 2, row 1);

- Programs to reduce preventable healthcare associated infections through State health department efforts, including leveraging the National Healthcare Safety Network to support the dissemination of HHS evidence-based practices within hospitals (spreadsheet page 2, row 1); and
- Programs 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 large cities, urban areas, tribal communities, U.S. territories, state-coordinated small cities and rural areas (see spreadsheet page 2, line 3).

During this reporting period, CDC received \$650 million, via transfer, from the Recovery Act under the Prevention and Wellness Fund for a multi-facet approach to reducing chronic diseases entitled “Communities Putting Prevention to Work.” This program and its associated categorical exclusion is now reported in the CDC spreadsheet on page 2, row 3. With this funding, CDC obligated \$606 million. Remaining funds will provide funding, via Inter-Departmental Delegation of Authority (IDDA) to the following agencies/offices:

- Administration on Aging = \$32.5 million
- HHS Office of Public Health and Sciences = \$10 million
- HHS Office of the Assistant Secretary for Planning and Evaluation = \$1.5 million

In this report, the total appropriations figure has been reduced report to reflect that this \$44 million has been transferred to other HHS agencies.

### **Centers for Medicaid and Medicare Services (CMS)**

**Prevention and Wellness** (CMS spreadsheet page 1, row 1 and page 2, row 2): CMS has made 55 funding awards to 43 states. The total appropriation available is \$10,000,000 and the total obligation as of March 31, 2010 is \$8,375,966 to a total of 43 states. CMS has determined that these activities fall within a Categorical Exclusion for NEPA under the HHS General Accounting Manual (GAM).

**Comparative Effectiveness Research (CER):** These activities are covered by an existing NEPA finding of Categorical Exclusion made by the Office of the Secretary at the Department of Health and Human Services (HHS) and approved August 18, 2009. The CER activities are reported in the AHRQ section and AHRQ spreadsheet (attachment 8E) under TAF 75-1701.

**Health Information Technology for Economic and Clinical Health (HITECH):** These activities are covered under an existing NEPA finding of Categorical Exclusion made by the Office of the Secretary at the Department of Health and Human Services

(HHS) approved September 30, 2009. The HITECH activities are reported in the OS section and the OS spreadsheet (attachment 8B) under TAF 75-0141.

### **Health Resources and Services Administration (HRSA)**

While no new loan or grant programs by HRSA (HRSA spreadsheet page 1, row 1) were awarded during the last quarter, additional loans were awarded under the existing loan repayment programs, and several grants received financial adjustments under existing programs which have been Categorically Excluded from further review under NEPA. In addition, some grantees elected to revise their scopes of work, for instance, changing the project type, or breaking out projects under a grant, thereby increasing the overall number of projects.

#### **Demand for Services**

The grants are provided for the purpose of providing health care services and were Categorically Excluded from further review under the National Environmental Policy Act. There are a total of 1131 Increased Demand for Services grants that have been awarded; the last was awarded in late 2009 and there is no change since the previous report (HRSA spreadsheet page 2, row 1).

As reported in November, 1 grantee (Planned Parenthood of El Paso, TX) withdrew from the Public Health Service Act Section 330 program and returned all Section 330 and ARRA funding for reasons unrelated to ARRA. This is reflected as 2 projects withdrawn, one under the Increased Demand for Services Program and one under Health Center Cluster Program. See spreadsheet page 2, rows 2 and 5.

#### **Health Center Cluster Programs (see spreadsheet page 2, rows 3-5)**

Eight projects under the Health Center Cluster program involved alteration and renovations and did not fall under a Categorical Exclusion (row 4). After review of the proposed scopes, these projects are listed under one Programmatic Environmental Assessment and have been approved.

#### **Health Information Technology**

Twenty seven additional Health Information Technology Initiative grants were awarded, bringing the total number of awards to 53. This program was determined to be Categorically Excluded from further review under the National Environmental Policy Act. See row 13 of page 2.

#### **New Health Care Services**

Four programs were awarded funding for the purpose of providing training and health care services and were determined to be Categorically Excluded from further review under NEPA.

State Primary Care Offices: 45 Grants (row 14)

Health Careers Opportunity Program: 2 grants (row 15)

Nursing Workforce Diversity Program: 3 grants (row 16)

Centers for Excellence: 2 Grants (row 17)

#### **Federal Investment Program (FIP)**

In December 2009, 108 Federal Investment Program projects were approved. Thirty-two projects were listed under a Programmatic Environmental Assessment. Twenty-six projects under the Programmatic Environmental Assessment are approved, and 6 projects are pending, as explained below. An additional 66 EAs are under development for 66 FIP projects (see page 2, row 168) and are pending; see below. Ten EAs for individual FIP projects were completed during the reporting period (rows 169 to 178) and one new FIP grant was awarded on March 11, 2010 (row 179).

In total, there are 66 pending NEPA actions for FIP projects. The following projects are pending:

Six FIP projects may fall under one Programmatic Environmental Assessment (EA); they are still pending a final determination of whether the projects are covered by the programmatic EA (see spreadsheet page 2, row 167):

- Four grantees are initiating Section 106 reviews
- One Grantee is making revisions to the scope of work, which will delay completion of environmental and historic preservation reviews
- One project may require a standard EA due to recently identified circumstances, additional information has been requested from the grantee.

Sixty-six projects for which EAs are being prepared are still pending (see page 2, row 168); these were pending in the last CEQ report as well:

- 45 grantees are still working on preparation of draft EAs and Section 106 consultations.
- 3 grantees are making revisions to their project scope of work, which will delay completion of environmental and historic preservation reviews.
- 18 draft EAs are currently under review by HRSA. Of those projects, five require additional documentation and coordination with other Federal Agencies due to issues with National Landmarks, Historic Buildings, and Brownfields.

### **Capital Improvement Program (CIP)**

The overall number of standard (non-programmatic) EAs for construction increased by 5 to 197 projects, due to construction projects that were initially determined to fall under the PEA being reclassified as alteration/renovation/repair projects after grantees clarified the scope of work, and grantees revising project scopes. However, 134 EA reviews have been completed with a Finding of No Significant Impact. One new CIP grant was awarded on March 26, 2010.

The number of alteration/renovation/repair projects increased by 27 to 1171 projects due to construction projects reclassified as alteration, renovation, repair projects after grantees clarified the scope of work, as well as grantees revising project scopes.

There are a total of 69 pending NEPA actions for CIP projects; these actions were also pending in the previous report. The following ARRA funded projects are pending:

Of the 165 construction projects that fell under the PEA (see page 2, row 19), 14 are still pending, with grantees working on initiating Section 106 consultation. Grantees are working on Section 106 consultations for the remaining 14 projects with the determination of the applicability of the Programmatic EA pending.

Sixty-three construction projects pending during the previous reporting period requiring preparation of a draft EA are still pending (page 2, row 20):

- 4 grantees are revising project scopes.
- 12 EAs are under review.
- 47 grantees are still working on preparation of draft EAs and Section 106 consultations.

Ninety-one alteration/renovation/repair projects fall under one Programmatic EA and the applicability of the Programmatic EA still pending (page 2, row 155). Of those:

- 22 grantees are revising their project scope of work, which will delay completion of environmental and historic preservation reviews.
- 69 grantees are still working on Section 106 consultations.

Four alteration/renovation/repair projects require preparation of draft EAs that are still pending (page 2, row 156). Of those:

- 1 grantee is making revisions to the scope of work, which will delay completion of environmental and historic preservation reviews.
- 2 grantees are in the process of preparing Draft EA documentation to submit HRSA.
- 1 draft EA is currently under review and is anticipated to be completed by the next reporting period.

The following is an example of applicant proposals for ARRA financial assistance that show improved planning through the NEPA review process.

***Providence Community Health Center*** EA (HRSA Spreadsheet, page 2, row 85)

This is an important Brownfield redevelopment (formerly Federated Lithographers site) project for the community in south Providence in terms of services and job creation. The NEPA process uncovered the existence of potential residual contaminants from lithography chemicals and historic underground historic tanks that were on this EPA Brownfield's Site. Contacts have been made with the EPA Region 1 and State DEQ who are providing additional oversight to enable confirmation that the cleanup goals are being met and that they are protective of human health

The EA findings have lead to higher scrutiny from regulatory agencies to aid in ensuring that the redevelopment is protective of human health and the potential for future liability is minimal. Upon receipt of appropriate findings that remediation standards have been

met to ensure that the future health of workers and patients is protected, HRSA can move forward with funding the project.

### **Indian Health Service (IHS)**

The 'Indian Health Facilities' report includes the number of funded projects that were obligated by contracts, Memorandum of Agreements (MOA), Indian Sanitation Facilities Act (Public Law 86-121) agreements, or other authorized obligating agreements through March 31, 2010.

Since the last reporting period, 45 new projects have been identified and 152 NEPA actions have been completed, for a total of 698 completed NEPA actions. Five additional projects were withdrawn during the period. The number of pending NEPA actions has been reduced from 125 to 13. The projects with pending NEPA actions are on schedule and in various stages of the routine work order processing system (including NEPA review and concurrent design, materials procurement and regulatory permitting etc.) prior to actual construction. Unless there are extraordinary or exceptional circumstances, most of these 'pending' projects are being processed as CEs.

#### **Indian Health Facilities**

The 'Indian Health Facilities' appropriations include maintenance and improvement projects, repair and renovation projects, acquisition of medical equipment and CT scanners, and sanitation projects. See spreadsheet page 1, row 1 and page 2, rows 1-323 and 329-436.

All of IHS' 13 pending NEPA actions are Indian Health Facilities projects. Of these, 12 are pending actions that remain pending from the previous cycle. These remain pending due to the tribal agreements and the tribal consultation process. The IHS is targeting completion of the majority of these actions within the next 90 days.

Twelve projects have been withdrawn. Seven of the twelve withdrawn projects were reported in the last report (spreadsheet page 2, row 310). Five additional projects have been withdrawn during this reporting cycle (page 2, rows 200, 173, 121, 120, 103).

There are four types of Indian Health Facilities program projects:

- Maintenance and Improvement Projects (page 2, rows 1- 301, 395-398): A total of 321 CEs and 1 EAs have been completed. There are 8 pending NEPA actions (7 pending from the previous reporting cycle).
- Equipment (page 2, rows 302-321, 394, 397): There are 208 CEs are completed. There are 5 CEs that remain pending from the previous report.
- Health Facilities Construction (page 2, rows 322 and 323): Both projects have completed their NEPA and other environmental requirements and are not expected to change in future reports.

- Sanitation Projects (page 2, rows 329 – 393, 399-436): All 101 CEs and 2 EAs have been completed. Of these projects 11 sanitation projects are jointly funded with EPA ARRA funds and 43 sanitation projects are funded with EPA ARRA funds only; however IHS is reporting on all these projects.

### **Indian Health Services**

The ‘Indian Health Services’ (spreadsheet page 1, row 2 and page 2, rows 324-328) appropriations includes 63 categorically excluded activities, mostly acquisition, related to Health information technology (HIT) Electronic Health Record Development & Deployment, Telehealth and Network Infrastructure and Project Management, Transparency. The health information technology projects documentation is completed but has not been signed.

- Health Information Technology (page 2, rows 324-328): All CEs are completed.

### **National Institutes of Health (NIH)**

The NIH has the following ARRA funded programs:

- “Building and Facilities” (NIH spreadsheet page 1, row 1);
- “NCRR Extramural construction/Shared Instrumentation” (National Center for Research Resources (page 1, row 2); and
- “Office of the Director, Scientific Research” (spreadsheet 1, row 3).

A portion of the appropriation for “Comparative Effectiveness Research” from AHRQ has been transferred to NIH and used the Office of the Director Treasury Appropriation Fund Symbol, 75-0845.

In this reporting period, an additional 161 NEPA actions were completed, bringing the total number of NEPA actions completed to 1,687. Across the three programs, 18 NEPA actions are pending and the level of NEPA review for 11 grants is under review. In summary:

1. The “Building and Facilities” (page 2, rows 1-16) program currently has 16 projects/activities with 13 categorical exclusions (CE; 1 is pending and 12 are completed), one completed environmental assessment (EA) and one Master Plan completed Environmental Impact Statements (EISs) which covers two projects. One project remains pending as NIH awaits a letter from the Maryland State Historic Preservation Officer (page 2, row 10); this project was also reported as pending in the CEQ’s previous report.
2. The NCRR (page 2, rows 17-19) specializes in extramural grants and grantees are authorized to conduct initial environmental reviews which have resulted in 234 CEs and 17 EAs. The pending actions (page 2, row 18) are waiting on final confirmation from the grantees and NCRR. After confirmation of acceptance the

EAs will be coordinated with the NIH and completed prior to construction grants being dispersed. The appropriate level of NEPA for 11 grants (page 2, row 19) is under review until more information is gathered, including the initial environmental review checklist from potential grantees.

3. The OD (spreadsheet page 2, rows 20-45) appropriations are made available to the various Institutes and Centers through grants which may be intramural or extramural research and are usually determined to be CE. Appropriations to OD for Comparative Effectiveness Research include 20 projects which have been incorporated into the OD line item. Those projects/activities with approved spend plans have completed NEPA reviews. Those pending spend plan approvals will be reviewed for extraordinary circumstances. Extraordinary circumstances, such as, major construction or a high containment laboratory, or controversial issues would require additional environmental review under an EA or EIS. Currently, there have been 1,416 activities under the OD resulting in CEs.