

NEPA ARRA Section 1609 Report Data (Page 1 of 2) [November 5, 2010]											
Department of Agency Name:		Centers for Disease Control and Prevention									
End Date for this Report:		9/30/2010									
Submitter Name:		Bill Nichols									
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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Impact Statement Actions	All NEPA Actions for the Recovery Act Funded Activity or Project	Number of projects withdrawn	Total Obligations for Projects and Activities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	Total CE Actions	Total EA Actions	Total EIS Actions	Total Actions	Total	Total
1	75-0144	Prevention and Wellness Fund, Recovery Act	\$967,500,000	570		3			3		\$967,437,068
			50,000,000	115		1			1		49,990,913
2	75-0942	Prevention and Wellness Fund, Recovery Act - (Section 317 & Communities Putting Prevention to Work)	917,500,000	455		2			2		917,446,155
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 es 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		NEPA Status: Enter pending, done, or withdrawn.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		TOTAL COMPLETED:	TOTAL PENDING:		Total Yes	
			Quantity	NEPA Action		3			3	
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 ELC and 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 States, Territories and Communities 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 \$604.1 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) • Centers for Medicare and Medicaid Services (TAFS #75-0910-0942) (SEE CMS 1609(c) Report Line Page #, Line #) • 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) • HHS Office of the Assistant Secretary for Public Affairs = \$1.9 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	