## Office of Financial Resources

# ANNUAL REPORT



Centers for Disease Control and Prevention Office of the Chief Operating Officer **FISCAL YEAR** 

OFR's work demonstrates our commitment to engage in best business practices and find solutions to critical business issues. The Annual Report provides a forum to showcase our efforts and accomplishments.

In FY 2016, OFR:

- Processed over 25,000 contract/grant actions and provided over \$12.9 billion for public health programs
- Conducted 273 briefings, announcements, events and visits to educate key appropriations offices and Congressional staff
- Trained over 260 international staff on international program funds
- Executed 267 actions resulting in grant awards over \$174 million, and 388 acquisition actions resulting in \$91 million in contracts for CDC's Zika response
- Supported CDC staff Temporary Duty Travel to 166 countries
- Completed agency-wide GrantSolutions Grants Management Module implementation and trained over 1,800 staff
- Launched Key OFR Deadlines Tool, which combines FY 2017 key deadlines for OFR, Human Resources, and Print Services
- Updated Unified Financial Management System, CDC's financial system
- Made 245,627 vaccine and commercial payments with a 99.4% Prompt Pay Percentage

## **Director's Letter**



Our organization began operating as the Office of Financial Resources (OFR) in Fiscal Year (FY) 2016. We strive to better provide critical business services to manage the agency's acquisition, assistance, budgeting, and financial management responsibilities and initiatives. As trusted stewards of public funds, the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry (CDC/ATSDR\*) continues to make a positive difference in national public health. OFR's expertise in financial management, grants, and contracts helped CDC manage a record level of funding. OFR empowered CDC to quickly and effectively improve health at home and around the world. In addition, we continued to demonstrate financial excellence by

helping the Department of Health and Human Services (HHS), for the 17th consecutive year, receive a clean audit opinion on the overall HHS annual FY 2015 financial audit.

This past year required intensive OFR support for the Zika response. Our dedicated staff was instrumental in reprogramming funds to support CDC's Zika response and provide emergency resources. Additionally, OFR staff devoted their time and expertise, which were critical to the response effort. Staff helped in their current roles, in the Emergency Operations Center, and in countries and U.S. territories affected by Zika. These individuals were—and continue to be—essential in ensuring that resources reach Zika-affected areas to increase prevention and stop the spread of the virus.

In addition to supporting the Zika response, OFR focused on critical strategic imperatives and better ways to deliver value to our customers through the OFR realignment. For our staff, we created a new employee orientation, guidance, and trainings on how OFR works in the governmental resource lifecycle to support new members when they join the OFR team. Through CDC-wide collaboration, we completed a pilot program, Planning for Execution Project (PEP). PEP was built on the strength of OFR's cross-functional teams and promotes joint problem-solving across CDC and strengthens budget, acquisition, and assistance planning. We listened to feedback, made adjustments, and are institutionalizing the PEP pilot in its second year. We also expanded our customer service surveys across all OFR business offices to better understand and address customer needs.

I hope you will enjoy reading about these and other OFR accomplishments and are reminded of your many contributions to CDC's public health mission. CDC's success hinges on the ability and commitment of its staff. Fiscal accountability and continuous improvement of assistance and acquisition services, budgeting, and financial management are essential to CDC's progress. OFR staff regularly utilize their expertise in these areas to ensure success when interfacing with programs and cultivating relationships with CDC partners.

Over the last year, I have reflected on how fortunate I am to work with OFR's exceptional staff, and I want to express my appreciation and gratitude for your dedication and outstanding work. As we move forward, I am committed to supporting the talent of our current staff members and attracting individuals of the same caliber to join our team. Your efforts contribute to the advancement of CDC's important public health mission of saving lives and protecting people from health and safety threats. I look forward to working with you in the year ahead in support of CDC's critical public health mission.

Sincerely,

Christa Capozzola Chief Financial Officer Director, Office of Financial Resources



Office of Acquisition Services procured 5,000 Zika prevention kits for pregnant women that were assembled and distributed by the Strategic National Stockpile



OFR provided \$45 million to 53 states for Zika preparedness and response activities

and **11 public health** organizations to develop Zika guidance, educational materials and public awareness campaigns

## An Ounce of Prevention is Worth a Pound of Cure

#### **OFR Ensures that CDC has Zika Prevention Resources**

CDC activated the Emergency Operations Center (EOC) January 22, 2016, in response to the Zika outbreak. Since activation, CDC asked staff to volunteer in their home office, the EOC, and countries and U.S. territories affected by Zika. During FY 2016, 140 OFR staff supported the Zika response. Eighteen staff worked in the EOC and three deployed to locations affected by Zika. President Obama signed a continuing resolution on September 29, 2016, that provides \$1.1 billion in emergency funding, of which \$394 million is for CDC's Zika virus response.

#### **OFR Plays Critical Role in Obtaining Zika Prevention Kits**

Concerns about Zika transmission with pregnant women in Zika-affected areas meant that quick access to prevention resources was critical. CDC developed Zika Prevention Kits (ZPKs) that contained items like mosquito nets, repellent, condoms, mosquito tablets to kill larvae in standing water, and CDC educational materials. OFR's Office of Acquisition Services (OAS) was able to quickly develop contracts to procure the items for the first batch of 5,000 ZPKs. These items supplemented donations from the CDC Foundation. Once OAS obtained materials for the ZPKs, the Zika Policy Unit in the EOC worked with CDC's Division of Strategic National Stockpile (SNS) staff to assemble the kits. After assembly, the kits were distributed to pregnant women in Puerto Rico, American Samoa, and the U.S. Virgin Islands (USVI).

Together, OAS, SNS, and the CDC Foundation continued to procure, assemble, and distribute ZPKs beyond the first batch of 5,000, ultimately distributing 21,658 ZPKs to affected areas by the end of FY 2016. This collaboration created an opportunity to gather necessary items for effective ZPKs and continue the distribution of kits to pregnant women.

#### **OFR Staff Support the Zika Response Abroad**

Additionally, OFR staff engaged in a variety of Zika response activities. Julie Armstrong, OFR's Office of Policy, Performance, and Communications Director, completed a detail in St. Thomas and St. John, USVI. Julie gave presentations to agencies and business staff, such as the National State Park (St. John), the Westin Resort, and senior citizens homes. She also conducted outreach activities with local schools, residents, and clinicians on Zika virus protection and prevention.

Another way CDC contributed to Zika prevention efforts was through vector control services, including manual mosquito spraying in pregnant women's homes. OAS procured contracts for mosquito spraying in several U.S. territories including the USVI, American Samoa, Guam, and Puerto Rico. Christine Godfrey, an OAS Team Lead, coordinated the process to secure a contract for exterminating services. This contract employed a local company to spray the homes of pregnant women in Puerto Rico. Typically contracts of this type take up to six months to complete. However, OAS established contracts



Julie Armstrong, Director of OFR's Office of Policy, Performance, and Communications (OPPC) during her detail in the USVI.

for mosquito spraying in a week. Christine worked on the Zika response in the EOC and the USVI for close to a year. After working on these contracts she said, "CDC is charged with vector control and we were able to support this mission with the contracts we quickly put in place in the territories."

#### **OFR Staff and CDC Programs Collaborate to Fund Critical Zika Resources**

Grants and cooperative agreements supported by OFR's Office of Grants Services (OGS) were also critical to the Zika response. OGS published two new Zika birth defects surveillance, intervention, and prevention Funding Opportunity Announcements (FOAs). The FOAs provided critical funding to states, territories, and larger local areas to support CDC's Zika response. The purpose of the FOAs was to reduce microcephaly, prevent severe birth defects in children, and to determine the impact of maternal Zika virus infection and other adverse pregnancy outcomes in U.S. states and territories.



Zika Response OFR Staff by the Numbers

## 140

supported the Zika Response in their current roles

#### **18** supported the Zika Response in the EOC

**3** deployed for the Zika Response



**Key OFR Zika Actions** 

OVER \$600 Million Coordinated USAID\* funds transferred to CDC for Zika Response

267 ASSISTANCE ACTIONS resulting in OVER \$174 Million in grants

388 ACQUISITION ACTIONS resulting in \$91 Million in contracts to support CDC's Zika response

\*United States Agency for International Development



USVI healthcare staff promote ZPKs and help distribute the kits to local pregnant women.

Cheryl Maddux, OGS's Chronic Disease and Birth Defects Branch Chief, worked closely with Bill Paradies, National Center on Birth Defects and Developmental Disabilities (NCBDDD) Deputy Branch Chief to quickly announce the funding opportunities. The FOAs were developed as formula grants and OGS organized group discussions with applicants and reviewers. Bill said, "These were innovations that I had not used before and I was pleased with how much time was saved using these techniques while also maintaining high standards regarding the grant process requirements." Typically, new FOA awards are finalized between a year to a year and a half. Due to the collaboration with NCBDDD and OGS staff, all forty-five FOA applicants received funding in five months.

Cheryl shared that, "It was a really great example of how we worked in concert with the program and our office to quickly release the FOAs and funding. With lots of phone calls, talking to people, and really trying to figure out how we could work together to get things accomplished quickly, we reduced our turnaround time by more than half. It was a great example of how collaboration improved response."

#### **OFR Expertise Ensures Zika and CDC Activities Run Smoothly**

Many OFR staff who volunteered for the Zika response also participated in the Ebola response. They were able to lean on their previous Ebola response experiences and proactively implement processes for the Zika response. OFR's Office of Budget Services (OBS) recognized that without Zika-specific costs, travel funding may be a concern due to the travel funding cap, an administrative restriction. Jon Worley, an OBS budget analyst, described that by separating Zika-related travel funding, CDC travel was not limited by the travel funding cap. Separating Zika travel funding afforded CDC the opportunity to support travel for the Zika response while maintaining other travel to support CDC's priorities.

In addition to creating processes to ease travel-funding concerns, OBS also utilized a system to quickly report Zika obligations. Unique Zika funding requirements made the obligation reporting system critically important. The system allowed OFR to easily report what funding had been obligated for what resources during the Zika response. By identifying Zika-related obligations on the front end of spending, OBS was able to ensure obligations were reported with efficiency and accuracy to OFR leadership. OFR leadership was then able to share Zika obligations data with the Department of Health and Human Services (HHS), the Office of Management and Budget (OMB), and Congress, which improved transparency across CDC and to the public.

#### **OFR Deploys to the EOC and Supports Zika at Home**

OFR's OGS also provided key staff contacts to serve in the EOC and answer critical questions. Carla Harper, Branch Chief in the Infectious Diseases Services Branch of OGS, was on the front lines of the domestic Zika response in the EOC. During Carla's detail, she facilitated communication between the EOC, CDC Centers, Institutes, and Offices (CIO) and the OGS operations branches. Carla noted, "What has been most interesting is seeing how collaboratively all the relevant players within the agency have come together fully equipped with the will and dedication to put a stop to this dreadful disease. But that is CDC's way, it's what we do!"

Juan Suazo, who formerly worked in the Office of Appropriations (OA), also experienced a sense of collaboration while detailed to the EOC. Juan reviewed and provided feedback on policy statements and briefs for CDC leadership meetings with Congressional committees regarding Zika. Juan said, "This detail has been beneficial to my day-to-day work in OA. I have learned to be more assertive in my work and have witnessed firsthand how interconnected the agency is while learning to understand the relationship CDC has with Congress."

The Zika response required quick financial attention to help those at risk of contracting the virus. The expertise of OFR staff enabled quick and efficient acquisition and distribution of resources. OFR staff have been instrumental in the Zika response. The staff contributed greatly to the response's success thus far while continuing to support CDC's priorities and mission.



OFR's UFMS upgrade to the R12 version provides CDC with **more flexibility** to **standardize**, **centralize**, **and simplify** complex processes to effectively address business requirements



The UFMS Team was awarded the HHS Award for Secretary's Award for Distinguished Service at the 2015 HHS Departmental Awards Ceremony for their excellent work on the UFMS upgrade

## OFR Staff Recognized for Excellence with Unified Financial Management System Upgrade

Several teams across OFR played critical roles in the upgrading the Unified Financial Management System (UFMS). UFMS is an integrated HHS-wide financial system that produces timely financial information to support decision-making and business operations. OFR Director and CFO, Christa Capozzola, honored the teams in an awards ceremony for their hard work and excellent results. Upgrading CDC's UFMS to the R12 version was part of the HHS Financial Systems Improvement Program (FSIP). The FSIP strives to facilitate better collaboration and consistency of accounting and financial management principles across HHS Operating Divisions.

OFR staff played an integral role in improving UFMS security, availability, and reliability while strengthening compliance with the Federal Financial Management Improvement Act and Department of Treasury mandates. HHS honored distinguish OFR staff for their exceptional support during the agency-wide transition in addition to their normal duties.

The upgrade planning began in FY 2014. Since then, OFR staff have participated in intensive testing and resolutions to ensure the upgrade supports HHS requirements. Throughout this effort, HHS leadership, including the HHS Deputy Chief Financial Officer, commented that CDC staff participating in testing helped solve many problems HHS-wide.

CDC's success was due to the hard work of the CDC testers, who thoroughly tested system functionality and worked with the team to identify and resolve issues in a timely manner. "The staff has really distinguished themselves," OFR Director and CFO Christa Capozzola, told UFMS team members at the ceremony.



CDC now has a more modern financial infrastructure, contributing to better financial reports, and better compliance with current Office of Management and Budget, Department of Treasury, Government Accountability Office, and HHS requirements.

Several teams across OFR played critical roles in the UFMS upgrade. OFR Director and CFO, Christa Capozzola honored the teams in an awards ceremony for their hard work and excellent results.











In FY 2016, the Office of Budget Services and Office of Grants Services trained over 260 international staff to improve the management of international program funds





saved by The Office of Acquisition Services in direct negotiations for the FY 2016 Vaccines for Children contract



The Office of Finance and Accounting Services contributed to a **17th consecutive** clean audit opinion on the overall HHS annual financial statement audit of FY 2015

## **Regional Training Hosted at International Sites**

OFR's Office of Budget Services (OBS) and Office of Grants Services (OGS) support the Center for Global Health by providing regional training at international locations four times a year. Trainings occur four times a year in various locations including southern Africa, eastern Africa, Asia, and the Americas, usually in Atlanta. Fiscal year 2016, marked the fifth year of regional training in Johannesburg, South Africa with over 60 people attending. The regional training provided an opportunity for overseas staff to receive specialized, hands-on guidance in budget practices



Grantee and Program staff training in Haiti, February 2016

and grants management. Attendees were able to observe and learn from each other. One attendee noted that he gained a "better understanding of common challenges and learned how different countries are doing business."

The regional trainings include two modules. The first module, Management of CDC Funds in a Global Environment focuses on budgetary processes, appropriations law, the distinction between rules and regulations for CDC funds versus Department of State funds, and spend plans.

The second module, Comprehensive International Grants Management Training provides an overview of the laws, regulations, and policies for the awarding, administration, and management of international grants and cooperative agreements. This year included a special overview of the Grants Policy Administration Manual (GPAM) and the supplemental funding process. Okal Jacob, a course participant from CDC's Division of Global HIV and TB wrote, "Many thanks to Gregory Crawford, Deputy Director, OGS and Dionne Bounds, Grants Management Officer/Team Lead, OGS Global Health Services Branch. That was a wonderful training."

## **GrantSolutions Paves the Way for Easier and More Effective Grants Management**

GrantSolutions is a comprehensive grants management system that covers the full grants management lifecycle. The Grants Management Module is used for pre-award, award, and post-award grants management actions. It provides tools for generating notices of award, receiving and reviewing prior



approval requests, conducting carryover requests, and more. CDC staff are now using the GrantSolutions Grants Management Module for non-research grants management. The implementation process began in the spring of 2015 and finished on-time in June, 2016. OFR and the GrantSolutions Center of Excellence trained more than 1,800 CDC staff during the implementation.

Christa Capozzola, OFR Director and CFO, commented on the Grant Management Module saying, "I appreciate everyone's patience and cooperation in making the move to the Grants Management Module a success. I look forward to seeing our agency embrace all the benefits of this new system."

In FY 2017, OFR's GrantSolutions Project Management Office will begin integrating grantees into the system, start transitioning research grants and cooperative agreements, and determine a long-term training strategy. Once grantees have access to the Grants Management Module, they will use the system to receive notices of award, enter non-competing continuation applications, request amendments, and submit federal financial reports. OFR anticipates all non-research grantees will be using GMM by end of calendar year 2017.

## **Fiscal Year 2015 Agency Financial Report**

HHS's Fiscal Year 2015 Agency Financial Report received another "clean" opinion indicating that the data is reliable and complete, and reflects the most current information available. The report provides an overview of programs, accomplishments, challenges, and management's accountability for the resources entrusted to HHS. Thank you to all of the OFR employees who provided input and contributions to this report.



#### In FY 2016 OFR:



Coordinated responses to 113 Freedom of Information Act requests



Provided coordination for **120** Controlled correspondence inquiries



**Coordinated responses to** 

**22** Office of the Inspector General Hotline Complaints, audits, and investigations and

**19** Government Accountability Office engagements

### **Connecting with our Customers**

Central to the success of OFR is our team of employees. OFR staff strive to meet the demanding needs of internal and external customers though training options, new tool development, collaboration of partnerships, and increased transparency. In FY 2016, OFR enhanced several systems and developed training and products to better serve our customers. OFR is dedicated to providing excellent and timely customer service.

#### **OFR Enhances Training Opportunities**

- > Launched Federal Appropriations Law trainings across OFR so staff can better advise our customers.
- Developed OFR 101 resources lifecycle overviews, e-training on grants lifecycle, and higher level courses that delve deeper into specific aspects of the governmental resources lifecycle in order to provide general knowledge about OFR's processes to new staff.
- Trained 200 CDC headquarters and country staff on IRIS Global, a new budgeting tool launched to overseas offices in FY 2016.

#### **Greater Financial Planning Resources Implemented**

- Launched the OFR Intranet site and new online Key Deadline Tool that provides due dates for contracts and grants processing, budget execution, and waivers to CDC's programs.
- Led the revision of FY 2017 financial resources planning guide across the agency.
- Conducted acquisition strategy pilots to further our compliance with HHS Acquisition Policy Memorandum. Results from the pilots will serve as the basis for future guidance to all CIOs.
- Upgraded Markview, a system designed to move different types of invoices through their respective workflows. Most of CDC's vendors submit invoices electronically for processing. With the Markview upgrade, invoices are received, validated and interfaced to UFMS faster than ever before. The upgrade enabled OFR to spend less time printing invoices and fewer dollars purchasing paper. The Markview upgrade also meets an HHS requirement to implement an electronic invoicing solution by FY 2018.

#### **Customer Service Initiatives Launched Across OFR**

- Rolled-out customer services surveys across OFR's business offices to identify strengths and areas for improvement.
- Created a new customer service slogan to reflect the unification of OFR following our merger and to serve as a continual reminder to staff of OFR's customer service focus.



#### **Planning for Execution Project**

OFR launched the Planning for Execution Project (PEP) in FY 2016, to strengthen budget, acquisition, and assistance planning. PEP facilitates joint problem-solving across OFR units and with our CDC customers. OFR staff met internally and with Center, Institute, and Office (CIO) staff to discuss key budget, grants, contracts, travel, and legislative issues to improve FY 2016 execution planning. OFR kicked off PEP meetings with CIOs in January 2016 and met throughout the year. OFR highlighted CIOs successes and concerns during the meetings. CIO meetings helped improve collaboration, customer service, and efficiency. For FY 2017, or PEP 2.0, OFR is building on last year's efforts by further integrating the PEP process within the CIO-specific teams. OFR created cross-functional teams for each CIO comprised of staff from each OFR office to mirror the fiscal trail: budget (OBS), grants (OGS), appropriations (OA), and contracts (OAS). The cross-functional teams serve to determine strategies and plans to fulfill their CIOs needs for the year, while achieving PEP and OFR strategic goals to improve execution and advisory services. OFR continues to build working relationships among OFR staff that service each CIO.

#### **Achieving Payment Excellence**

OFR's Commercial Payments Branch (CPB) ensures obligations of all types—contracts, purchase orders, training orders, intergovernmental personnel agreements, inter/intra-agency agreements (IAA), travel orders, permanent change of station orders, print orders, royalties and employee claims for reimbursements are recorded accurately and timely in the accounting system. CPB also ensures that the agency's commercial vendors receive accurate and timely payment in accordance with Prompt Payment Act requirements. In FY 2016, CPB exceeded its goal of 98% on time payments and delivered 99.4% on time payments.

## **Employee Awards and Recognition**

Individual staff and groups within OFR's offices received a variety of awards and honors in 2015 and 2016.



Rapid Awards List (RAL) Improvement Team, Efficiency



Office of Financial Resources Ebola Support Team, Contribution to Public Health Impact



Office of Finance and Accounting Services, Commercial Payments Branch, Motivator

#### **OCOO** Honor Awards

Employee recognition remains a strong cultural focus within each office, as shown by award nominations that captured the accomplishments of 175 employees at the **2015 Office of the Chief Operating Officer (OCOO) Honor Awards.** The Awards Ceremony recognized both nominees and the following winners for their dedication and outstanding professional service:

#### **Individual Award Winners**

- Lisa Hines, Communications
- **Tonya Fisher,** Motivator
- **Shelli Smalling**, Leadership (GS13 & Above)

#### **Group Award Winners**

- Rapid Awards List (RAL) Improvement Team, Efficiency
- Office of Financial Resources Ebola Support Team, Contribution to Public Health Impact
- Office of Finance and Accounting Services, Commercial Payments Branch, Motivator
- Office of Grants Services, Infectious Disease Services Branch, Partnership



Office of Grants Services, Infectious Disease Services Branch, Partnership

## **Employee Awards and Recognition**



**GrantSolutions Implementation Team** 2015 Honor Award for Excellence in Procurement, Contracts and Grants Management



Eric Lyons, 2015 Honor Award for Excellence in Leadership—GS 9 and below



OFR's Deputy Director and CFO, Dave Baden (center) accepted the CEAR award on behalf of CDC from HHS Ellen Murray (left), Assistant Secretary for Financial Resources/HHS CFO and Deepak Bhargava (right), Director, Office of Financial Systems Policy and Oversight.



#### **CDC and ATSDR Honor Awards**

During the **CDC and ATSDR Honor Awards Ceremony,** individuals and teams received recognition for their dedication and accomplishments:

- GrantSolutions Implementation Team, 2015 Honor Award for Excellence in Procurement, Contracts and Grants Management
- Eric Lyons, 2015 Honor Award for Excellence in Leadership—GS 9 and below
- International Financial Support Team, Excellence in Finance

#### **CEAR Award**

For the third consecutive year, HHS received the **Certificate of Excellence in Accountability Reporting (CEAR) Award** from the Association of Government Accountants (AGA) for its work on the Agency Financial Report (AFR). The HHS AFR reflects the hard work of staff at CDC along with those at other HHS operating divisions. The financial data contained in the reports represents all funding, obligations, payments, and collections during the year as well as the mission-related accomplishments achieved with CDC's financial resources.

## Domestic grant programs with the largest total funding amounts

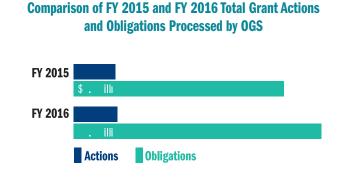
Forty-five percent of CDC's grant spending supports these top ten domestic public health priorities.

	Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Cooperative Agreements	62 Grantees	\$795,916,377 Obligations
A CONTRACT OF STREET	Immunization and Vaccines for Children Program	64 Grantees	\$377,095,340 Obligations
	Comprehensive HIV Prevention Programs for Health Departments	61 Grantees	\$310,865,662 Obligations
	PPHF 2014: Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) — Building and Strengthening Epidemiology, Laboratory and Health Information Systems, Capacity in State and Local Health Departments	64 Grantees	\$257,582,292 Obligations
The second secon	Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations	79 Grantees	\$213,282,518 Obligations
Ē	Preventive Health and Health Services	61 Grantees	\$150,686,252 Obligations
	PPHF 2013: 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 Funds	26 Grantees	\$110,954,778 Obligations
	PPHF 2014: State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health	51 Grantees	\$94,373,478 Obligations
2	Improving Sexually Transmitted Disease Programs Through Assessment, Assurance, Policy Development, and Prevention Strategies (STD AAPPS)	59 Grantees	\$93,920,999 Obligations
	Tuberculosis Elimination and Laboratory Cooperative Agreements	61 Grantees	\$76,226,901 Obligations

## FY 2016 Grants At-A-Glance

#### Grants

In FY 2016, the Office of Grants Services (OGS) supported 4,416 grant awards to 1,632 grantees. These awards generated 11,630 actions that placed more than \$6.6 billion into public health programs and research around the world.



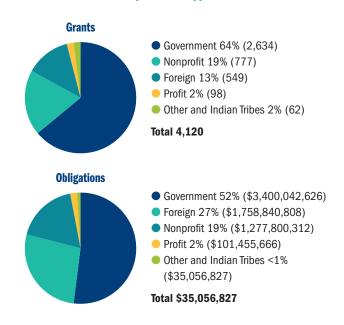
#### CDC FY 2016 Grant Funds Obligated Through Centers, Institutes, and Offices (CIOs)

CIO	Grants	Actions	Obligations	% of Actions	% of Obligations
ATSDR	56	94	\$19,681,331	0.8%	0.3%
CGH	629	1,850	\$2,530,035,316	15.9%	38.3%
CSELS	108	164	\$51,375,764	1.4%	0.8%
NCBDDD	228	562	\$79,909,016	4.8%	1.2%
NCCDPHP	843	2,564	\$744,451,066	22.0%	11.3%
NCEH	197	419	\$62,110,553	3.6%	0.9%
NCEZID	148	620	\$373,524,266	5.3%	5.7%
NCHHSTP	913	2,197	\$953,849,086	18.9%	14.4%
NCHS	6	10	\$817,971	0.1%	0.0%
NCIPC	312	679	\$141,809,671	5.8%	2.1%
NCIRD	341	824	\$444,414,437	7.1%	6.7%
NIOSH	338	740	\$111,886,979	6.4%	1.7%
OD	32	47	\$4,552,682	0.4%	0.1%
OPHPR	156	608	\$822,304,643	5.2%	12.4%
OSTLTS	103	246	\$268,962,258	2.1%	4.1%
OTHER	6	6	\$0*	0.1%	0.0%
Total	4,416	11,630	\$6,609,685,038	100.0%	100.0%

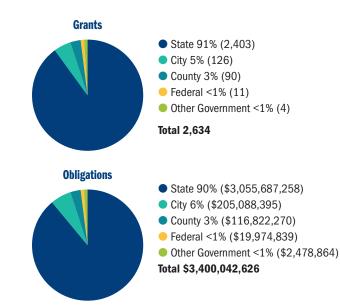
Grant and action counts are based on the organization that administers the grant. Dollars are based on the organization providing funding, regardless of which organization administers the grant.

\*These actions were of an administrative nature and non-monetary.

CDC FY 2016 Percentage of Grants Awarded by Grantee Type





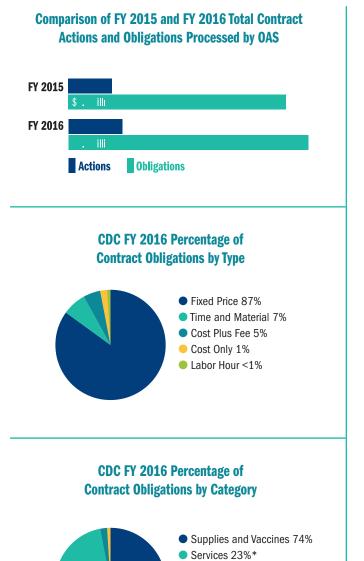


Data for these charts are from http://taggs.hhs.gov. These data are inclusive of obligated and de-obligated information as well as administrative and closeout actions. Thus, when reviewing funding totals in the aggregate, it does not match FY 2016 amount in other charts on this page.

## FY 2016 Contracts At-A-Glance

#### **Contracts**

In FY 2016, the Office of Acquisition Services (OAS) processed 14,137 contract actions. These contract actions totaled \$6.3 billion supporting public health programs and research around the world.



#### CDC's FY 2016 Allocation of Contracts Through Centers, Institutes, and Offices (ClOs)

CIO	# of Actions	Sum of Contract Dollars	% of Actions	% of Total
ATSDR 104		\$14,220,376	0.7%	0.2%
CGH	769	\$83,589,503	5.4%	1.3%
CSELS	337	\$40,551,703	2.4%	0.6%
HRO	130	\$8,042,621	0.9%	0.1%
ITSO	596	\$78,117,443	4.2%	1.2%
MISO	<b>MISO</b> 126 \$77,311,65		0.9%	1.2%
NCBDDD	<b>NCBDDD</b> 125 \$37,380,279		0.9%	0.6%
NCCDPHP	535	\$174,007,299	3.8%	2.8%
NCEH	801	\$49,206,566	5.7%	0.8%
NCEZID	2048	\$203,742,307	14.5%	3.2%
NCHHSTP	905	\$103,074,074	6.4%	1.6%
NCHS	579	\$95,297,791	4.1%	1.5%
NCIPC	170	\$35,841,438	1.2%	0.6%
NCIRD	1279	\$4,428,041,020	9.0%	70.3%
NIOSH	2998	\$178,055,235	21.2%	2.8%
OFR	252	\$25,858,685	1.8%	0.4%
0010	140	\$6,570,366	1.0%	0.1%
OD	630	\$98,041,159	4.5%	1.6%
OID	39	-\$2,571,846	0.3%	0.0%
ONDIEH	14	\$467,960	0.1%	0.0%
OPHPR	579	\$428,065,240	4.1%	6.8%
OPHSS	59	\$35,103,501	0.4%	0.6%
OSSAM	903	\$93,245,505	6.4%	1.5%
OSTLTS	19	\$9,575,749	0.1%	0.2%
Grand Total	14,137	\$6,300,835,642	100.0%	100.0%

\*Services includes some IT services. **Other** includes Equipment and Furniture, Construction, and Architect and Engineering services.

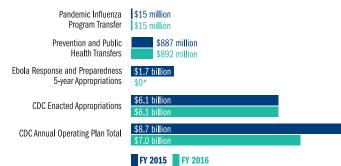
IT 3%
Other <1%\*</li>

Contract dollars data in this table do not reflect auto-closeout actions.

## FY 2016 Budget and Appropriations At-A-Glance

In FY 2016 the Office of Financial Resources (OFR) facilitated over 270 Congressional Staff Interactions supporting public health programs and research around the world.

#### Comparison of CDC's FY 2015 and FY 2016 Operating Plan



\*No new funding for Ebola Response and Preparedness in FY 2016.

#### FY 2016 Congressional Interactions

#### 77 Hill Announcements

- 75 Briefings with Appropriations Congressional Staff
- 66 CDC Director Briefings with Appropriators and Committee Staff
- **33** Briefings with Appropriations Committee staff

#### 22 Other

**273 Total Congressional Interactions** 

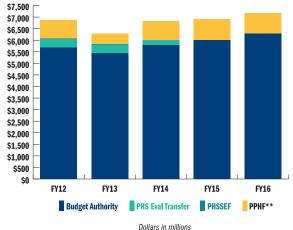
#### FY 2016 Budget Appropriations by Major Area



#### FY 2016 Obligations by Object Class



CDC Program Level FY 2012-2016



\*\*Public Health Service Evaluation Set-Aside Transfer (PHS Eval Transfer), Public Health and Social Services Emergency Fund (PHSSEF), Prevention and Public Health Fund (PPHF)

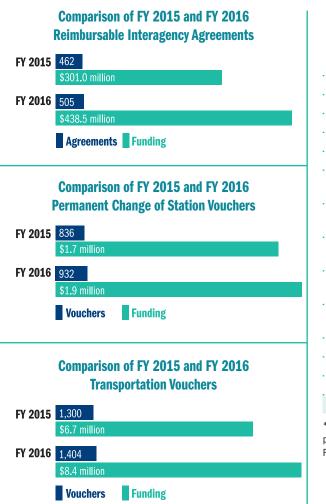


CDC successfully obligated 99.9% of \$5.9 Billion

expiring funds prior to the completion of FY 2016

## FY 2016 Finance At-A-Glance

In FY 2016, the Office of Finance and Accounting Services (OFAS) processed over \$79 million in accounts receivable\* and \$438 million in reimbursable agreements supporting public health programs and research worldwide.



#### FY 2016 Sponsoring Agency\*\* **Agreement Amount**

Sponsoring Agencies	Agreement Amount	CIOs
DEPT OF STATE	\$4,167,222.55	CGH/OPHPR
EPA	\$4,319,623.74	ATSDR/NCIPC
US DEPT OF AGRICULTURE	\$9,183,532.20	NCIPC/NCHS/OPHPR
DFAS-INDIANAPOLIS	\$15,618,434.09	OPHPR/NCPIC
HHS/HCFA/CMS	\$18,575,904.38	NCIPC/HS
HHS/OS	\$19,874,825.30	NCCDPHP/NIOSH/OPHPR/OADS/ OSTLS/CSELS
HHS/NIH	\$43,566,871.33	NCIPC/CSELS/NIOSH/ATSDR/ OPHPR/CGH
HHS/FDA	\$44,213,812.37	NCHS/NCIPC/OPHPR/NCCDPHP/ ONDH
DOD/DEPT OF DEFENSE	\$46,691,589.61	NCHS/NCIPC/NCHS/NCEH/ NIOSH/ATSDR
US AGENCY FOR INTL DEVELOPEMENT	\$207,126,789.42	CGH
Subtotal	\$413,338,604.99	
Under \$2,000,000	\$13,757,296.03	
Under \$4,000,000	\$11,415,066.28	
Grand Total	\$438,510,967.30	

\*\*Reimbursable Sponsors-Apply to all organizations and cross-serviced agencies which provide goods and services on a cost reimbursable basis to the public, private, and/or other Federal, state and local agencies.

ARGENTINA · ARMENIA

A · BRAZIL · BURKINA FASO CANADA ·

AL GUIN**ea · Ethio**f

TIC REP · COSTA RICA · COTE DENMARX · DOMIN

M · GUATEMALA · GUINEA · GHINEA.BISS

INDIA INDONESIA

THUAIO · LUXENBOURG · MADAGASCAR

SHALL ISLANDS · MAURITANIA · MEXICO

**IOZAMBIOUE · NAMIBIA · NEPAL · METHER** 

SURINAME · SWAZILAND ANZANIA · THAILAND · THE GAME JNI 🔂 🗸 TURKEY • TURKS AND CA

PHILIPPINES - PORTUGAL - PUERTO RICO - QA RWANDA • SAINT KITTS A

KAZAKHSTÁN <mark>O</mark>keny<mark>a · Korea · Kuwait</mark>

REIGN ECCALITIES · PAKISTAN

ENEGAL · SEYCHELLES

REPUBLIC EOUATO

GEORGIA.

GABON ·

GARY

CHAD .

IRACO IRELAN

ISLANDS (U.S.) · VIRG<mark>IN ISLANDS, BRIT</mark>

**GIIYANA • F** 

KYRGYZSTAN · LAOS · LATVIA · LESOTHO 🍙 MALAWO MALAYSIA · MALDIVO ·

ASRONESIA · MOLDO/A · MONGOLIA

ERLANDS ANTILLES · NEV

**Temporary Duty Assignments (TDY)** 29,073 Vouchers approved totaling over \$70 Million

**166 Countries** visited for TDY

\*Outstanding invoices CDC has or the money that is owed to CDC.

# OFR's Vision and Mission

#### VISION

Excellence and innovation in the investment and management of public funds for public health through the proud contributions of a talented and diverse workforce

#### MISSION

The Office of Financial Resources contributes to the achievement of positive public health outcomes at CDC by providing exemplary customer-focused leadership and fiscal stewardship in appropriations, acquisitions, assistance, and financial management with accountability and sound business practices



## FY 2017 Preview: Looking Forward

#### OFR will:

- Continue to support the agency's Zika response efforts by ensuring all HHS policies are adhered to and resources are dedicated to assist with financial assessments and grants management activities.
- Ensure continued compliance with the Digital Accountability and Transparency Act of 2014 (DATA Act) to provide transparency on CDC's contracts, grants, and other financial data to the public.
- Make enhancements to its external grants website to provide more user friendly information for CDC's customers and partners.
- **Finalize its strategic plan** and begin implementing of activities in FY 2017.
- Continue coordinating management and strengthening of internal controls oversight through our new Risk Management unit.
- Provide uniform guidance, training, oversight, tracking and monitoring for CDC through the newly created OFR Interagency Agreement (IAA) unit.
- Continue to support OGS's new structure with two entities, Domestic Grants Services and Global Grants Services, and address unique domestic and global issues through tailored business process improvements.
- Provide overall links into the EOC to support the agency's Zika response and coordinate budgetary tracking and contract and grant awards through the newly developed virtual team, OFR Zika Assistance and Procurement Resource Team.
- Remain ready to adapt to emerging public health threats or priorities in support of CDC's critical public health mission.

## **Office of Financial Resources Organization Chart**

