



Centers for Disease Control and Prevention
Fiscal Year 2016 Grants Summary Profile Report for

U.S. States and District of Columbia

This profile includes selected CDC grants and cooperative agreements provided to health departments, universities, and other public and private agencies in the United States. Refer to the "About the Data" section below for important qualifying statements about the data.

2016 Population Estimate: 323,127,513

Timeframe: 10/01/15 - 09/30/16

Table with 3 columns: CATEGORY, OBLIGATED AMOUNT, PERCENTAGE. Rows include categories like Agency for Toxic Substances and Disease Registry (ATSDR), Birth Defects, Developmental Disabilities, Disability and Health, etc., ending with a Grand Total of \$3,445,443,505 (100.0%).



CATEGORY & SUB-CATEGORY

OBLIGATED AMOUNT

Agency for Toxic Substances and Disease Registry (ATSDR)	\$13,302,338
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Birth Defects, Developmental Disabilities, Disability and Health	\$65,143,705
Birth Defects, Developmental Disabilities, Disability and Health Set-Asides	\$612,100
Child Health and Development	\$25,465,838
Health and Development with Disabilities	\$31,692,441
Hemophilia	\$1,143,000
Hemophillia Treatment Centers	\$4,340,000
Public Health Approach to Blood Disorders	\$1,020,339
Thalassemia	\$869,987
CDC-Wide Activities and Program Support	\$261,456,200
Ebola Response and Preparedness	\$107,218,811
Preventive Health and Health Services Block Grant - PPHF	\$147,314,013
Public Health Leadership and Support	\$6,923,376
Chronic Disease Prevention and Health Promotion	\$750,013,213
Arthritis	\$7,417,638
Cancer Prevention and Control	\$275,434,461
Chronic Disease Prevention and Health Promotion Set-Asides	\$706,000
Diabetes	\$40,553,416
Diabetes - PPHF	\$61,006,916
Epilepsy	\$5,583,368
Health Promotion	\$9,158,151
Heart Disease and Stroke	\$56,055,008
Heart Disease and Stroke - PPHF	\$66,282,137
Hospitals Promoting Breastfeeding - PPHF	\$2,839,001
Million Hearts - PPHF	\$3,413,591
National Diabetes Prevention Program	\$13,635,715
National Early Child Care Collaboratives - PPHF	\$3,796,359
National Lupus Patient Registry	\$5,159,672
Nutrition, Physical Activity and Obesity	\$26,723,425
Oral Health	\$9,615,494
Prevention Research Centers	\$19,718,148



CATEGORY & SUB-CATEGORY

OBLIGATED AMOUNT

Racial and Ethnic Approach to Community Health (REACH) - PPHF	\$35,290,199
Safe Motherhood/Infant Health	\$16,772,751
School Health	\$8,453,881
Tobacco	\$58,738,331
Tobacco - PPHF	\$23,659,551

Emerging and Zoonotic Infectious Diseases

\$224,067,079

Advance Molecular Detection (AMD)	\$7,094,659
Antibiotic Resistance Initiative	\$103,319,772
Emerging and Zoonotic Core Activities	\$7,494,459
Emerging and Zoonotic Infectious Diseases Set-Asides	\$617,183
Emerging Infectious Diseases	\$15,257,071
Epi and Lab Capacity Program - PPHF	\$36,316,782
Food Safety	\$21,428,217
Healthcare Associated Infections (HAIs) - PPHF	\$10,574,497
Immediate Zika Response - NCEZID	\$2,200,000
Lyme Disease	\$2,679,183
National HealthCare Safety Network	\$632,440
Prion Disease	\$4,001,755
Quarantine	\$4,916,800
Vector-borne Diseases	\$7,534,261

Environmental Health

\$67,777,235

Asthma	\$17,299,847
Environmental and Health Outcome Tracking Network	\$20,217,820
Environmental Health Activities	\$11,891,649
Environmental Health Laboratory	\$7,033,969
Lead Poisoning Prevention - PPHF	\$11,333,950

Health Reform - Childhood Obesity

\$3,192,469

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Health Reform - Toxic Substances & Environmental Public Health

\$2,499,999

Health Reform - Toxic Substances & Environmental Public Health	\$2,499,999
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HIV/AIDS, Viral Hepatitis, STI and TB Prevention

\$714,708,918

Domestic HIV/AIDS Prevention and Research	\$528,942,149
Sexually Transmitted Infections (STIs)	\$98,551,581



CATEGORY & SUB-CATEGORY	OBLIGATED AMOUNT
Tuberculosis (TB)	\$72,867,294
Viral Hepatitis	\$14,347,894
Immunization and Respiratory Diseases	\$357,863,225
Immunization and Respiratory Diseases Set-Asides	\$100,800
Immunization Program	\$96,720,974
Immunization Program - Pandemic Influenza	\$1,673,639
Immunization Program - PPHF	\$222,899,016
Influenza/Influenza Planning and Response	\$36,468,796
Injury Prevention and Control	\$144,774,241
Illicit Opioid Use Risk Factors	\$4,536,946
Injury Control Research Centers	\$7,692,975
Injury Prevention Activities	\$9,452,928
Injury Prevention and Control Set-Asides	\$806,000
Intentional Injury	\$58,628,543
NVDRS	\$10,616,767
Prescription Drug Overdose	\$50,423,902
Unintentional Injury	\$2,616,180
Occupational Safety and Health	\$95,915,611
Education and Research Centers	\$27,956,791
Mining Research	\$1,946,283
National Occupational Research Agenda (NORA)	\$39,968,597
Occupational Safety and Health Set-Asides	\$1,988,025
Other Occupational Safety and Health Research	\$24,055,915
Public Health Preparedness and Response	\$583,128,347
CDC Preparedness and Response Capability	\$12,886,851
Immediate Zika Virus Response - OPHPR	\$10,559,284
Public Health Emergency Preparedness Cooperative Agreement	\$559,682,212
Public Health Scientific Services (PHSS)	\$51,358,002
Health Statistics	\$437,546
Public Health Scientific Services Set-Asides	\$29,292
Public Health Workforce Development	\$5,497,295
Surveillance, Epidemiology, and PH Informatics	\$45,393,869



CATEGORY & SUB-CATEGORY	OBLIGATED AMOUNT
Vaccines for Children	\$95,179,314
Vaccines for Children	\$95,179,314
World Trade Center Health Programs (WTC)	\$15,063,610
World Trade Center Health Programs (WTC)	\$15,063,610
Grant Total	\$3,445,443,505

About the Data

Data Included

- The grants and cooperative agreements data in this report include actions awarded (i.e., obligated funds) domestically in fiscal year 2016 (FY16; 10/1/15 to 9/30/16) from CDC’s annual appropriation.
- Because the data includes funds obligated in FY16, it may include funding authorized through legislation passed in previous years, but only the amount actually obligated in FY16.
- The funding data is categorized by CDC budget line (i.e., by which CDC appropriation account was used to make the investment), as shown in the FY16 CDC Operating Plan at <https://www.cdc.gov/budget/fy2016/operating-plans.html>.

Data Excluded

- This data does not include any CDC expenditures, such as contracts, personnel, direct assistance, or other CDC operational and administrative costs.
- The value of vaccines purchased and provided to states, cities, and territories by CDC through the Vaccines for Children Program are excluded. Information on the value of vaccine purchases by jurisdiction is available in a separate report each year on the CDC Grant Funding Profiles site at <https://www.cdc.gov/FundingProfiles/>, starting with FY14.
- The following grants and cooperative agreements data were outside the scope of this profile and were excluded: funding of International activities, Reimbursable Agreements (funds from other federal agencies to support their missions), Cooperative Research and Development Agreements, Royalties, User Fees and Intra-Departmental Delegation of Authority funds (e.g., fund transfers to CDC from DHHS, including the HHS Public Health and Social Services Emergency Fund and the Hospital Preparedness Program), Gifts and Donations, Global Health funds, and Buildings and Facilities funds.

Therefore, this data does not reflect CDC’s total appropriations in any given area.

Data Sources

- Funding Data - CDC Office of Financial Resources (for grants and cooperative agreement data) and the CDC National Center for Immunization and Respiratory Diseases (for Vaccines For Children data)
- United States, the District of Columbia, and Puerto Rico - the 2010 U.S. Census, updated with 2016 estimates at <https://www.census.gov/programs-surveys/popest.html>
- For all other geographies - 2016 estimates for population are from *The World Factbook* at <https://www.cia.gov/library/publications/resources/the-world-factbook/index.html>



Data Interpretation and Use

- These data are useful as a snapshot of CDC grant and cooperative agreement funding provided to grantees within states and territories by CDC budget line. However, caution should be used in interpreting variations across years or jurisdictions. Several of the reasons for variations are (1) the amounts, purpose, and focus of funding provided by Congress each year can vary, and (2) changes in national and/or CDC/ATSDR priorities and strategies due to factors such as urgent and emerging health threats and changes in population health status and needs. In terms of funding opportunities, (1) not all eligible entities apply for every program opportunity, (2) most federal funding is awarded via a competitive or merit-based process and not all eligible entities that apply are funded for every program, and (3) some funding is allocated according to a pre-set formula (such as per capita allocation or a need-based funding allocation), which is sometimes specified in law.
- Users of this site and data should be aware of various factors that make comparisons of data between jurisdictions and by per capita difficult to interpret and may lead to inaccurate conclusions in the absence of more in-depth study. Some of those factors include the following:
 - o CDC has many different grant types with differing application eligibility and award criteria such as population disease burden, per capita formula-based, competitive based on proposal merit, non-competitive, etc.
 - o Awards made to an entity will typically reflect the geographic location of the entity's official business or billing address such as a State capitol for a State government award. The awards therefore will not reflect the actual geographic application of the funds by the grantee in carrying out the purpose of the grant.
 - o CDC makes awards to various national associations that carry out national public health programs that have nationwide impact; however, the awards will be reflected in the geographic jurisdiction of the association's main office.
 - o In addition, there may be variation across years for where a program/activity resides in CDC's organizational and budget structure. Funding sources linked to a particular program/activity may also vary year-to-year. Therefore, it is possible for a multi-year project to fall into one category or sub-category one year and into another the next. In addition, funding categories may be added or deleted as CDC's budget changes year to year (e.g., funding categories are deleted because their shorter-term funding sources expire). This makes 1:1 comparisons of one year's set of projects to another year's set of projects under each category or sub-category a challenge.

For More Information

- CDC Budget <https://www.cdc.gov/Budget/>
- CDC Funding <https://www.cdc.gov/funding/>
- CDC-INFO call 800-CDC-INFO (800-232-4636) TTY: (888) 232-6348 or use online form at <https://wwwn.cdc.gov/dcs/ContactUs/Form>