



## Legislative Fiscal Bureau

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September 21, 2010

TO: Members  
Joint Committee on Finance

FROM: Bob Lang, Director

SUBJECT: Health Services: Governor's Section 13.10 Request for the Use of Federal Economic Stimulus Funding for Communities Putting Prevention to Work (CPPW) Supplemental Funding -- Agenda Item II

The Governor requests that the Joint Committee on Finance approve the allocation and expenditure of \$2,076,400 in 2010-11 to provide peer-to-peer mentoring and technical assistance for communities that have previously received funding for chronic disease prevention and wellness under the American Recovery and Reinvestment Act of 2009 (ARRA).

The Department of Health Services (DHS) submitted an application for this funding to the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (CDC) on August 12, 2010. The CDC is currently reviewing the state's grant application.

### **BACKGROUND**

The ARRA included the Communities Putting Prevention to Work (CPPW) initiative, which provided grants to states, communities, and organizations around the country to implement projects for obesity and tobacco use prevention, and other chronic disease-related activities. The CPPW components include the community program (\$449 million), state and territories policy and environmental change initiative (\$120 million), national organization initiative (\$10 million), national prevention media initiative (\$30 million), and the chronic disease self-management initiative (\$33 million).

Under the review process established in 2009 Wisconsin Act 2 for federal funds available under ARRA, the Committee approved the allocation and expenditure of ARRA grants provided

under the community program and the state and territory policy and environment change initiative.\* The CDC subsequently approved a total of \$10,733,080 in grants in Wisconsin, including \$6 million for obesity prevention activities in La Crosse and Wood Counties. The CDC also approved a \$1 million CPPW grant for the Great Lakes Inter-Tribal Council (GLITC) to fund tobacco use prevention activities in five tribal communities. (The Act 2 review requirement did not apply to that funding, as the grant was provided directly to the GLITC.) The CPPW community program grants were distributed on a competitive basis, and La Crosse and Wood Counties, and the GLITC tribal communities are among 37 projects nationwide that received funding.

In July, 2010, the CDC announced that \$10 million of supplemental CPPW funding would be provided to support community mentoring, and technical assistance and training for sites that received funding under the CPPW community program, with the goal of disseminating information and best practices among these communities. Recipients of supplemental grants will be required to participate in the national CPPW Training and Technical Assistance Coordination Committee, develop and implement a 19-month plan for mentoring, consultation, and support for CPPW communities, and evaluate and share information on these mentoring activities and outcomes. The recipients are expected to provide mentoring and technical assistance to CPPW communities across the country, not just those projects in the recipient's state.

## **ANALYSIS**

DHS has applied for a supplemental CPPW grant totaling \$2,076,400 for a project period from September, 2010, to March, 2012. This funding would support the following items: (a) a contract with the Wisconsin Clearinghouse for Prevention Resources (WCPR); (b) salaries, fringe benefits, and travel costs for DHS staff; and (c) administrative and other costs.

DHS would provide most of the grant funding to WCPR through a \$1,899,912 contract over the project period. The WCPR, at the University of Wisconsin-Madison, provides information and technical assistance for a range of public health and prevention issues. Under this contract, WCPR would provide mentoring and training to up to 16 CPPW grantee communities identified by the CDC. These activities would focus on farm-to-school and farm-to-institution policies for obesity prevention, various tobacco control activities, and strategic communication for achieving CPPW goals. WCPR would hire an additional 6.25 staff to implement the required 19-month mentorship and consultative plan.

An additional \$143,329 would be provided over the course of the project to support salaries, fringe benefits and travel costs for DHS staff. The grant would support 0.90 full time equivalent (FTE) DHS positions (two 1.00 FTE technical assistance coordinators, each of whom would spend 20% of their time on this project, and one 0.50 tobacco control coordinator). The salaries for these positions would equal \$82,037 over the project period, with \$37,245 budgeted for fringe benefits.

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\* The Committee also approved the allocation of \$1,115,800 in CPPW funding to expand chronic disease self-management programs on March 16, 2010. However, the current request only applies to funding through the CPPW community program.

Over the 19-month project, \$24,047 is also budgeted for these DHS positions to travel to the CPPW communities in Wisconsin (18 days of in-state travel), and six two-day meetings of the national CPPW Training and Technical Assistance Coordinating Committee.

Finally, \$33,072 would be budgeted for administrative and other costs. This includes DHS administrative costs, such as processing fiscal transactions and network computer support (\$19,872), other direct and indirect costs, such as printing, telephone, and postage costs (\$11,300) and office supply costs (\$1,900). The following table summarizes the 19-month budget for this project for the items described above.

**Proposed 19-Month Budget for CPPW Supplemental Funding  
By Budget Item**

<u>Budget Item</u>	<u>Amount</u>
Contract with the Wisconsin Clearinghouse	\$1,899,912
Salary and Fringe Benefits, DHS	119,282
Travel, DHS	24,047
Administrative and Other	<u>33,072</u>
 Total	 \$2,076,313

As previously indicated, the CDC is currently reviewing grant applications submitted by DHS and other CPPW grantees. The CDC plans to make between two and 10 total awards, ranging from \$1 million to \$3 million per award, but it is not known when the CDC will announce its official award decisions.

If the Committee wishes to authorize the allocation and expenditure of these funds, as represented in the DHS grant application, it could approve the DHS request (Alternative 1). However, given that the CDC has not yet approved the DHS grant application, the Committee could approve the DHS request, but require DHS to submit a letter to the Committee within 10 days after receiving official notice of the CDC's decision regarding this grant (Alternative 2). Under this alternative, the Department would be required to provide the following information, as applicable: (a) whether the CDC approved or denied the grant as submitted; and (b) if the final grant award differs from the amount requested, a revised budget for the project that reflects the approved grant amount.

**ALTERNATIVES**

1. Approve the expenditure of \$2,076,400 in 2010-11 from moneys received under the ARRA to conduct mentoring and technical assistance in communities that have received CPPW funds.

2. Approve the request, as described in Alternative 1. In addition, require DHS to submit a letter to the Committee, no later than 10 days after receiving notice of the CDC decision regarding the grant application, that includes the following information: (a) whether the CDC approved or denied the grant as submitted; and (b) if the final grant award differs from the amount requested, a revised budget for the project that reflects the approved grant amount.

3. Deny the request.

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