

Section 317 Funding Awards
CDC/AIM Collaboration Principles

10-30-07

Background

The Section 317 Program is a discretionary program funded by Congress to support immunization infrastructure (activities to increase and sustain immunization coverage rates in the population) and vaccine purchase for underinsured children and adults. Section 317 is a grant award program administered by the Centers for Disease Control and Prevention and carried out by 64 grantees: 50 states, 8 territories, and 6 cities.

The Association of Immunization Managers (AIM) represents the 64 federally-funded Section 317 grantees. AIM works in partnership with CDC to increase immunization coverage rates in the population.

In order to enhance the success of the 317 program, AIM recommends the following principles to guide communication and collaboration between grantees and CDC:

Transparency

To ensure that grantees, CDC, policymakers and advocates are all on the same page and to enhance the ability of grantees to plan and coordinate state funding requests, AIM recommends that CDC produce annual spreadsheets detailing:

- Amount of Congressional appropriation;
- Breakdown of Congressional appropriation by line items (Section 317 FA, DA, evaluation, National Immunization Survey, etc.);
- Total funding available for Section 317 grant awards: vaccine purchase and operations/infrastructure;
- Funding awarded to each grantee for Section 317 operations/infrastructure, VFC vaccine, VFC operations, VFC AFIX, and target amounts for Section 317 vaccine purchase;
- Aggregate carryover reported by grantees.

Communication

The instability of grant funding due to the Congressional appropriations process, fluctuations in carryover funding, and other factors can be extremely challenging for grantees who must work within their own state government and fiscal infrastructure. To assist in this process, AIM recommends ongoing communication and consistent messages.

- Monthly updates on the status of 317 grant awards, both operations/infrastructure and vaccine purchase. The monthly updates should consist of: funding awarded to date; anticipated funding to be awarded – in both aggregate and per grantee delineations.
- All grantees should receive the same information related to the timing, amounts, and award process in the Section 317 program. Project officers should have access to all information necessary to communicate clearly, openly, and consistently with grantees.

Collaboration/Partnership

Ongoing partnership between CDC and grantees is imperative to identify challenges and barriers to the efficiency and success of the grant program and develop strategies to address these challenges. AIM recommends:

- Annual consultation and discussion with AIM leadership following the passage of the Congressional appropriation regarding the distribution of appropriated funds across Section 317 line items. Every attempt should be made to distribute overall funding increases in a way that ensures at least level funding in operations/infrastructure to all grantees.
- Support from AIM in educating grantees about the funding award process and methodology.
- Annual consultation and discussion with the AIM Finance Committee, perhaps through an in-person meeting, to identify and address challenges, barriers, and information gaps and to identify and highlight best practices.

Removal of Carryover from Base

It appears to be the practice of CDC to award carryover in lieu of new funds to grantees that have not completely spent their previous year grant funds. This practice allows newly appropriated funds to be spread farther across grantees. However, this practice has caused the program to rely on carryover funding in order to provide level funding awards from year to year. When carryover fluctuates, the overall funding level is affected. In addition, the timing of awards is considerably later than it could be due to the unknown of carryover availability until well into the grant year.

- AIM recommends that CDC end the practice of awarding carryover as part of base funding.
- AIM recommends that CDC work with the AIM Finance Committee to develop alternatives for handling unspent funds.
- AIM will continue to work with grantees to identify and address challenges and barriers to timely spending of funds once awarded.

Early Notification of Grant Awards

The earlier grantees receive accurate information about funding awards, the earlier they can plan and implement activities and contracts. Receiving partial awards and late funding supplements can have unintended consequences leading to breach of contracts and/or unspent funds. AIM recognizes that delays in funding award notifications are largely the result of the Congressional appropriations process. However,

- AIM encourages CDC to look at how other federal grant programs handle uncertain appropriations.
- AIM recommends that CDC work with the Finance Committee to identify potential improvements to support early notification of funding awards to grantees.