



The Department of Health and Human Services

REPORT TO CONGRESS

Pandemic Influenza Preparedness Spending

Prepared in Response to Request in
Conference Report 109-359

DATE _____

Charles E. Johnson
Assistant Secretary for Resources and Technology
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"The conferees direct the Secretary to provide on a semi-annual basis to the House and Senate Appropriations Committees a report identifying the disbursements of funds received under this heading and a listing of the governments, companies and organizations that received funding. The report should include the amount and purpose of each grant or other form of assistance. Finally, the report should include the cumulative obligations by activity of the funds made available under this heading for pandemic preparedness, as well as any remaining unobligated balances."

AND

"The conferees direct the Secretary of Health and Human Services to provide the Committees on Appropriations with quarterly reports on the expenditure of the funds provided for the Food and Drug Administration in this Act for pandemic influenza preparedness. The reports shall also include details on any reimbursements received by the agency from any other Federal agencies for expenses incurred for pandemic influenza preparedness. The first report shall be transmitted no later than February 15, 2006."

Introduction

This report is an update to the previous five reports to Congress that were provided in June and December of 2006 and 2007, and in June of 2008. This report covers all activities from December 2005 to January 15, 2009. The report covers the pandemic influenza funding provided in both the December 2005 emergency supplemental appropriations bill (PL 109-148) and the June 2006 emergency supplemental appropriations bill (PL 109-234).

Concern surrounding the threat of an influenza pandemic sparked by the existence of a novel influenza virus reemerged in August 2005 when animal outbreaks of highly pathogenic avian influenza H5N1 virus were reported in twelve countries around the world with 112 total human cases confirmed in four of those countries. Three and a half years later, the number of countries confirming animal outbreaks has expanded to 61, with 387 total human cases confirmed in fifteen of those countries. During the past twelve months, animal outbreaks due to the H5N1 influenza virus have continued in Asia and North Africa, where the virus is now endemic. Despite education efforts to minimize exposure to infected poultry, human cases continue to be associated with these outbreaks. The virus has also been identified in European countries, including Germany and the United Kingdom in 2008. In addition to the ongoing global concern raised by the spread and evolution of the H5N1 virus subtype, other novel influenza viruses have emerged. In the United Kingdom, a highly pathogenic avian influenza H7N7 virus infection appeared in domestic poultry. Further evidence for re-emergence of H2 virus infection in humans and animals and H6 virus infection in humans from swine were reported in 2008 in the United States.

While the vast majority of human cases to date can be attributed to exposure to infected poultry, and the sustained human-to-human transmission that is the hallmark of a pandemic has not been observed in reported infections, the illness has been severe. Since the first reported cases in 2003, the overall human death rate for the 387 human cases is 63 percent. In contrast, the case fatality rate in the 1918 influenza pandemic was two percent. Experience with past pandemics is limited, but it is acknowledged that the severity of a pandemic would depend on the characteristics of the ultimate pandemic virus. Once a pandemic begins, time will be a critical factor in our ability to accomplish the necessary production and delivery of vaccines and other medical countermeasures required to mitigate the pandemic.

On November 1, 2005, the President requested a total of \$7.1 billion in emergency funding for pandemic influenza preparedness activities, of which \$6.7 billion was for implementation of the *HHS Pandemic Influenza Plan*. This funding was requested in FY 2006 to fund a staged three-year preparedness effort to ensure the Nation could effectively respond in the event of a pandemic. In December 2005, Congress appropriated \$3.3 billion in emergency funding for HHS in an FY 2006 supplemental, for the first year of the *HHS Pandemic Influenza Plan*. In June 2006, Congress appropriated \$2.3 billion for HHS in emergency funding in a second FY 2006 supplemental for the second year of the HHS Plan. HHS has used these funds to advance the Nation's pandemic preparedness by expanding and diversifying domestic vaccine production and surge capacity; enlarging H5N1 pre-pandemic vaccine and antiviral drug stockpiles; supporting advanced development of cell culture and antigen sparing influenza vaccines and new antiviral drugs; supporting advanced development of point-of-care clinical diagnostics; stockpiling medical supplies and ventilators; improving State and local preparedness; expanding risk communication efforts; enhancing FDA's regulatory science base; and expanding surveillance, research, and international collaboration efforts of CDC, NIH, and the HHS Office of Global Health Affairs.

HHS has made significant progress in enhancing pandemic preparedness for our Nation and our international partners. Over the past few months, promising strides were made in the advanced development of high throughput rapid diagnostics, the development and production of H5N1 vaccine antigen and new adjuvants, and HHS continued to work with States to enhance their pandemic preparedness. As of January 15, 2009, HHS has obligated approximately \$5.1 billion in pandemic influenza funds and has unobligated balances totaling \$527 million from the two emergency supplemental appropriations bills. HHS has obligated an additional \$690 million since the June 2008 report. Key obligations since June 2008 include an award of \$487 million to Novartis to support the design, construction, commission and validation of new domestic bulk manufacturing facilities to produce cell-based seasonal and pandemic influenza vaccines; \$48 million for egg-based vaccine purchase; \$40 million for new antigen-sparing adjuvant purchase; and \$15 million for the storage and stability testing of existing H5N1 bulk vaccine in the national pre-pandemic influenza vaccine stockpile. This report describes key accomplishments on the path to pandemic preparedness and details how appropriated funds have been spent to date.

The full promise of the progress HHS anticipated cannot be achieved as HHS does not have the requested resources to fully implement the plan it initially proposed. The FY 2008 Appropriations bill did not include the \$870 million initially requested by the President to support the next phase of the *HHS Pandemic Influenza Plan*, which was designed to meet the milestone-driven advanced development contracts. The funding requested in the FY 2008 and FY 2009 President's budgets was intended to uphold our funding commitments for additional obligations. Many of the milestone-driven advanced development contracts – designed specifically to accelerate the development of necessary medical countermeasures and to ensure that continued funding went only toward products that remain on track - have made commitments pending successful completion of milestones. For example, the contracts for the advanced development of cell-based seasonal and pandemic influenza vaccines required each contractor to demonstrate adequate product safety and immunogenicity in Phase 2 and 3 clinical studies, a pathway for domestic manufacturing that addresses surge capacity needs, and up-to-date facility biosecurity. Another example is the contracts for the advanced development of an antigen-sparing pandemic influenza vaccine, in which successful completion of Phase 1 trials of the candidate were obtained. Additional funds will be obligated on this contract for production of new investigational lots of vaccine, adjuvant and Phase 2 clinical trials. Should HHS not be able to meet these contractual objectives and in so doing not continue to accelerate the development of medical countermeasures, the national need for these products will not be met. Without additional funds, a signal will be sent to industry that HHS does not intend to reach the goals that have been set. A budget amendment for \$363 million was submitted to Congress on August 1, 2008, bringing the FY 2009 request to \$870 million to purchase egg-based vaccine and adjuvant for the national pre-pandemic influenza vaccine stockpile, accelerate cell-based production capacity, support the critical need for advanced development of new influenza antiviral drugs, develop simple rapid diagnostics for home usage and border screening, and procure countermeasures for HHS clinical employees and patient populations.

The newly revised allocation of funds is included in the table below and in this report. Allocations are based on the most current scientific evidence and technical information available. HHS has reallocated these funds as new scientific and technological opportunities, and contracting realities have necessitated modification in order to best advance our Nation's pandemic response capabilities. Pandemic influenza funding has also been used to support administrative expenses necessary to achieve the goals of the *HHS Pandemic Influenza Plan*.

FY 2006 Pandemic Influenza Supplemental Funding

(dollars in millions)

	Allocation as of December 31, 2008
Vaccines.....	3,196
Antivirals.....	1,122
Medical Supplies.....	162
State and Local Preparedness.....	600
International Collaboration.....	179
Other Domestic Activities.....	280
Risk Communications.....	51
Total, HHS.....	5,590

Vaccine

While all efforts will be made to detect and contain an emerging pandemic, the infectiousness and short incubation period of influenza viruses make preventing a pandemic unlikely. Most of our preparedness efforts are designed to mitigate the consequences of a global pandemic. The one exception is in the area of vaccine development. An effective vaccine could convert population susceptibility into population immunity and alter the course of an emerging pandemic.

A key goal of the *HHS Pandemic Influenza Plan* is to provide pandemic influenza vaccine to every American within six months of detection of sustained human-to-human transmission of pandemic influenza. To achieve this goal, the Nation must continue to invest in the expansion of vaccine manufacturing capacity (egg- and cell-based), the advanced development of new cell-based vaccines, antigen-sparing technologies, the establishment and maintenance of pre-pandemic vaccine stockpiles, as well as in next-generation approaches that could further shorten the time necessary to develop a pandemic vaccine.

Egg-Based Vaccine

HHS has taken advantage of currently available egg-based influenza vaccine production technology to meet our immediate stockpile needs.

Accomplishments to Date:

- Over the past four years, HHS, utilizing available FDA-approved, egg-based manufacturing technology, has established a pre-pandemic vaccine stockpile of H5N1 influenza vaccine. As of January 2009, HHS has procured 11.3 million courses (22.6 million doses) of pre-pandemic vaccine. Recognizing the continuous evolution of the H5N1 virus, balanced stockpile purchases include both clade 1 and clade 2 vaccines, representing a total of the four different antigenic virus strains that have been responsible for the majority of human and animal infections globally. This stockpile is intended to be used to protect critical workforce members, including health care

workers and other first responders in the early stages of a pandemic. The stockpile is also available to support on-going clinical trials.

- HHS purchased 1.2 million additional doses of pre-pandemic H5N1 bulk vaccine in September 2008 in order to replenish losses primarily due to diminished product stability over the past four years. This purchase brings the stockpile to a total of 11.3 million vaccine courses (2 doses/course). HHS is currently testing this vaccine with a number of newly developed adjuvants that are undergoing final clinical studies for U.S. licensure. An adjuvanted vaccine would greatly expand the number of people who could be vaccinated under an Emergency Use Authorization.
 - HHS purchased in December 2008 new oil-in-water emulsion adjuvant for 5.2 million doses of pre-pandemic vaccine.
 - HHS continued storage and stability testing of the H5N1 bulk vaccine in the national pre-pandemic influenza vaccine stockpile, providing greater product shelf-life and maximal flexibility.
 - HHS completed this fall the pre-clinical testing of H5N1 vaccine antigen from one manufacturer with the new oil-in-water emulsion adjuvants under development from two other manufacturers and is scheduled to initiate Phase 1 clinical studies in April 2009 for safety and immunogenicity to expand further the supply of vaccine in the national pre-pandemic influenza stockpile.
- In June 2007, HHS awarded \$120 million to sanofi pasteur and MedImmune to initiate the “retrofitting,” or engineering and actual construction necessary to renovate existing domestic manufacturing facilities of U.S.-licensed biologics that would be appropriate for pandemic influenza vaccine production. A successful retrofit will increase domestic egg-based influenza vaccine manufacturing capacity that can be used for seasonal, pre-pandemic, and pandemic influenza vaccine and will provide a warm-base of manufacturing for a pandemic vaccine.

Cell-Based Vaccine

Cell-based development represents the core of the HHS intermediate and long-term pandemic influenza preparedness strategy for larger, more flexible, and less vulnerable domestic manufacturing surge capacity for production of seasonal and pandemic influenza vaccines. Cell-based production capability provides unprecedented manufacturing flexibility. The transition from egg-based to cell-based production sets the stage for the development of next generation vaccines. Recombinant and universal influenza vaccines will almost inevitably be produced in cell culture facilities, not in living, embryonated eggs fresh from the farm. The success of the HHS investment in cell-based advanced development has led to the next necessary step toward ensuring availability of influenza vaccine during a pandemic event: the construction of a domestic cell-based manufacturing facility.

Accomplishments to Date:

- In January 2009, HHS awarded \$487 million to Novartis to support the design, construction, commissioning and validation of new domestic bulk manufacturing

facilities to produce cell-based seasonal and pandemic influenza vaccines, bridging clinical studies for U.S. licensure of cell-based influenza vaccines, and production of at least two commercial scale lots of influenza vaccine per year over three years with options for production of these vaccines for up to 18 more years.

- In May 2006, HHS awarded five contracts for over \$1 billion to GlaxoSmithKline (GSK), MedImmune, Novartis, Solvay, and Dynport (with Baxter) for support of advanced development of cell-based influenza vaccines toward U.S. licensure and expanded domestic vaccine manufacturing surge capacity. These contracts are designed to establish U.S. production of at least 240 million courses of cell-based pandemic vaccine within six months of the emergence of a pandemic influenza virus. An additional \$200 million was awarded to Dynport/Baxter in 2007 upon completion of contract milestones for further development of a cell-based influenza vaccine.
 - All six contracts remain active and continue to progress. These contracts involve the production of pandemic and seasonal vaccine for sustainability purposes. Success of the cell-based strategy is contingent on Phase 3 trials and Biologics Licensing Application (BLA) approval by FDA. The first BLA filing for seasonal cell-based vaccine is expected in February 2009, and another is expected in late 2009.
 - While progress is evident for seasonal vaccines, most of the development for cell-based pandemic vaccines is expected in future years. At this point, all programs have the potential to reach their agreed upon goals from a technical standpoint. Challenges for the second half of the program include providing approved adjuvants for a successful pandemic vaccine and tailoring the manufacturing processes to novel influenza vaccine strains.

Antigen-Sparing Technologies

Since the initiation of the HHS Pandemic Influenza Preparedness plan, it has been clear that without new vaccine technologies, we would be unable to meet the Nation's pandemic vaccine needs. Together with industry, HHS is encouraged by the promise that new adjuvants may have in meeting this need. Not only do these adjuvants have the potential to greatly reduce the amount of antigen need in a vaccine, but they also appear to provide a broader immune response that may diminish the need to develop influenza virus-specific vaccines that can only be made after a pandemic virus has emerged. Combined, these attributes may substantially change the way that influenza vaccines are developed and may affect our future preparedness approaches.

Accomplishments to Date:

- In December 2008, 5.2 million doses of GSK's AS03 adjuvant were purchased for \$40 million. This adjuvant, when formulated with existing stockpiled vaccine that is currently held in bulk form, has the effect of immediately expanding the number of doses of H5N1 vaccine stockpiled from the current 22.6 million to 27.6 million doses

- Adjuvants are likely to have the greatest impact on vaccine availability in the event of a pandemic. If adjuvants were mixed with the 22.6 million doses currently on hand, enough pre-pandemic vaccine may be afforded for a considerable segment (> 135 million) of the U.S. population. Additional safety and immunogenicity data for adjuvants under development are needed prior to their use in human populations.
- In March 2008, HHS and three vaccine manufacturers initiated a “mix-and-match” study to determine whether H5N1 vaccine antigen manufactured by one company can be safely and effectively combined with adjuvants from other companies to result in an antigen-sparing effect and to elicit cross-reactive antibodies against multiple H5N1 virus strains. Pre-clinical studies were completed this fall, and Phase 1 clinical studies are expected to commence in April 2009. The results of these studies will support the greater flexibility and expanded usage of the national pre-pandemic influenza vaccine stockpile.
- In January 2007, HHS awarded three contracts totaling \$120 million to GSK, Novartis and IOMAI for the advanced development of H5N1 influenza vaccines using antigen-sparing techniques toward U.S. licensure and expanded domestic vaccine manufacturing surge capacity. Two manufacturers have begun Phase 1 clinical trials in the United States with their H5N1 vaccine formulated with an oil-in-water emulsion adjuvant. Submission of a BLA to FDA for these vaccine products is expected in 2009. Another contract will receive additional funding based on their successful completion of Phase 1 trials, in which a single dose of H5N1 vaccine with an adjuvant demonstrated effectiveness.

Other Vaccine Advanced Development

Accomplishments to Date:

- In October 2007, HHS issued a Request for Proposals (RFP) for the advanced development of next generation recombinant influenza vaccines toward U.S. licensure that may shorten the timeline for production and release of pandemic influenza vaccine. The RFP closed in December 2007. Contract negotiations are on-going.

As of January 15, 2009, HHS has obligated \$2.9 billion out of the \$3.2 billion allocated between the two supplemental appropriations bills for vaccine-related activities.

Antiviral Drugs

Another key goal in the *HHS Pandemic Influenza Plan* is to ensure the availability of antiviral treatment courses for 25 percent of the U.S. population. The Federal government and States will accomplish this goal by together purchasing a total of 81 million courses of antiviral drugs.

In December 2007, HHS completed the 50 million course Federal antiviral stockpile purchase for the Strategic National Stockpile. The majority of that stockpile, 44 million courses, will be allocated *pro rata* to the States and other public health emergency preparedness partners. In addition, the Federal government has stockpiled six million treatment courses to attempt to control the spread of an emerging pandemic, bringing the Federal stockpile total to 50 million treatment courses.

Almost all States have taken advantage of a Federal contracting subsidy that allows States to purchase a total of 31 million treatment courses of antiviral drugs by leveraging Federal "best price" contracts and a subsidy of up to 25 percent of the Federal contract price. States also purchased antiviral drugs using these Federal contracts with unsubsidized funds, allowing them to purchase additional doses beyond what was initially projected at the Federal contract price.

Accomplishments to Date:

- To date the States have purchased 23 million treatment courses of Tamiflu and Relenza for pandemic stockpiles, of which 17 million treatment courses have been delivered. State contracts with Roche and GSK have been extended to September 1, 2009.
- In December 2007, HHS completed the 50 million course Federal antiviral stockpile purchase of Tamiflu and Relenza. The Federal antiviral stockpile includes pediatric formulations of influenza antiviral drugs, consistent with provisions related to protecting children and other at-risk populations in the Pandemic and All Hazards Preparedness Act.

The U.S. stockpile of influenza antiviral drugs is a vital part of our preparedness program. However, we must also continue searching for better and more effective antiviral drugs, especially to have next generation products that are capable of treating infections that have become resistant to available drugs. There are only two classes of antiviral drugs that can treat and/or prevent influenza – adamantanes and neuraminidase inhibitors. The inherent nature of microbes is to evolve and develop resistance. The emergence of resistance to the first generation antiviral drugs, adamantanes, leaves only neuraminidase inhibitors (Tamiflu® (oseltamivir) and Relenza® (zanamavir)) as the drugs that would potentially be effective in a pandemic. Resistance to oseltamivir emerged in currently circulating human H1N1 influenza viruses in Europe in 2007 and came to the United States in late 2008. For this reason, HHS has secured the only available drugs that could be used in a pandemic and is investing in next generation products.

Accomplishments to Date:

- In October 2008, a second RFP was issued for the advanced development of antiviral drugs. Awards are expected by early spring 2009. In January 2007, HHS awarded a contract for \$102 million for the advanced development of a new

neuraminidase-inhibitor class of influenza antiviral drugs for parenteral administration during life-threatening cases of severe seasonal or pandemic influenza in hospitals. One Phase 2 clinical study for this drug was completed in September 2007 while others are on-going. The NIH is currently funding research to investigate several early phase products that could become some of the next generation products in the research and development pipeline.

As of January 15, 2009, HHS has obligated \$962 million out of the \$1.1 billion allocated between the two supplemental appropriations bills for antiviral-related activities. HHS has expended all funds allocated for direct Federal stockpile of antiviral drugs.

Medical Supplies

HHS is expanding medical infrastructure and response capacity during an influenza pandemic by stockpiling medical supplies for distribution to States in the event of a pandemic. HHS' plan is to purchase personal protective equipment (e.g., surgical masks and respirators) to help reduce exposure to the pandemic influenza virus and reduce the spread of the disease. In addition, HHS plans to purchase and stockpile ventilators to provide assistance in patient breathing to the critically ill. Other purchases include intravenous antibiotics, syringes and needles, and other non-pharmaceuticals, including gloves and surgical gowns.

Accomplishments to Date:

- HHS has purchased approximately 158 million masks and respirators. This includes 106 million N95 respirators and 52 million surgical masks.
- HHS has obligated \$100 million for the purchase of ventilators, syringes, and IV antibiotics for potential distribution in case of an influenza pandemic.

As of January 15, 2009, HHS has obligated \$161 million out of the \$162 million allocated between the two supplemental appropriations bills for medical supplies.

State and Local Preparedness

Unlike all other incidents of national significance, a pandemic will be widespread and will affect many areas of the country simultaneously, and once initiated, will expand over time until it comes under control. The Federal government will not be able to help all communities throughout the duration of the pandemic. Preparedness is therefore a shared responsibility and must involve every level of government as well as every component of society. State and local governments will play a critical role in preparing for and responding to a pandemic. HHS has been working with States and local communities to update their pandemic influenza plans and to ensure that they evaluate their plans through exercises. HHS has also provided States additional information on exercise requirements related to mass vaccination and non-pharmaceutical interventions and distribution of antiviral drugs and other countermeasures, including community-level action designed to

limit the transmission of the pandemic virus, such as school closures. By conducting pandemic influenza summits in every State and Territory, HHS has encouraged States to bring together health, public health and emergency preparedness officials together with schools, the private sector, and community-level organizations to discuss and plan for State and community preparedness.

Accomplishments to Date:

- In September 2008, HHS awarded \$24 million to fund 55 projects in 29 State and local public health departments that could serve as innovative approaches for influenza pandemic preparedness. The projects focus on seven key areas including the integration of State-based immunization information systems to track distribution of influenza pandemic countermeasures.
- In 2007, HHS awarded \$75 million to State and local grantees to increase medical surge capacity, establish stockpiles of critical medical equipment and supplies, support planning and development of alternate care sites, and conduct health care surge exercises for pandemic influenza. HHS awarded \$175 million to assist public health departments in their pandemic influenza planning efforts.
- In 2006, HHS awarded a total of \$325 million for State and local preparedness and conducted over 50 State pandemic influenza summits.
- HHS has partnered with the National Governors Association (NGA) to assist States in upgrading their pandemic influenza preparedness capabilities.

As of January 15, 2009, HHS has obligated the entire \$600 million available between the two supplemental appropriations bills dedicated specifically for State and local preparedness.

International Collaboration

HHS is actively engaged with countries around the world to help them prepare for the possibility of a pandemic influenza outbreak, and to help minimize and contain the impact of an outbreak should one occur. HHS is collaborating with the U.S. Departments of State and Agriculture, as well as the U.S. Agency for International Development (USAID) to enhance preparedness in other countries by providing training, direct assistance, supplies, reagents and technical support to the World Health Organization (WHO), ministries of health and non-governmental organizations. HHS is also actively engaged with the Department of Defense, through entities such as the U.S. Naval Medical Research Units (NAMRUs).

A robust early warning system is critical to identify the first emergence of an influenza virus that is capable of setting off a global pandemic. International surveillance funds continue to be expended through existing cooperative agreements with countries and international partner organizations. These agreements are part of a strategy to diminish

the global risk of pandemic influenza by building laboratory, surveillance and response capacity abroad. CDC is working to accomplish this strategy by providing technical assistance at the country, regional, and global levels; by organizing international technical workshops, meetings, and trainings; and by deploying influenza experts.

HHS directs funds to 40 countries to support pandemic preparedness. In addition, through regional and global approaches HHS reaches well over 100 countries in providing support for development of global guidelines through WHO Regional Offices and various training activities. Through partnerships with non-governmental organizations (NGOs) such as CARE, CDC has developed grass roots community surveillance programs in high risk countries to enhance the ability to report and detect a potential pandemic in early stages. CDC is working with WHO and with its international partners to build the technical knowledge necessary to understand the burden of disease for influenza, and in turn to build the political will for the increased use of influenza vaccine. This is integral to the HHS-led accelerated international development of in-country development and production of H5N1 vaccine for humans. Through WHO, HHS has provided supplemental funds to Vietnam, Thailand, Indonesia, India, Mexico and Brazil to develop influenza vaccine production capacity.

Rapid response funds primarily support a wide array of ongoing avian influenza activities at the six regional CDC Global Disease Detection Centers. Activities supported by the funds include training and exercising of mobile rapid response teams, maintenance of stockpiles of prophylaxis such as Tamiflu and personal protective equipment, building laboratory and epidemiologic capacity, as well as the establishment of surveillance programs and early warning systems.

Accomplishments to Date:

- HHS deploys teams of experts to help investigate suspected human cases of infection with avian influenza A wherever and whenever they are needed. To date, HHS staff have assisted WHO and ministries of health in H5N1 investigations in Turkey, Nigeria, Romania, Djibouti, Indonesia, Ghana, China, Laos, Vietnam, South Sudan, Thailand, and Pakistan. As part of these efforts, HHS scientists participate in WHO teams and with local scientists and public health officials to investigate clusters of H5N1 cases to rule out the occurrence of efficient human-to-human transmission, which would signal the emergence of a potential pandemic influenza strain.
- If a pandemic occurs, 517 HHS staff are trained and ready for deployment overseas. They include 234 current (or recently graduated) Epidemic Intelligence Service (EIS) Officers, 50 international field staff, 20 Career Epidemiology Field Officers currently stationed in U.S. States and cities, and 213 middle-to-senior level CDC internal staff persons.
- 112 countries in all six WHO regions have participated in HHS-sponsored regional response workshops that include training for country-level rapid response

teams. The Global Disease Detection Centers in Guatemala, Kenya and Thailand maintain fully equipped regional rapid response teams, as well as stockpiles of personal protective equipment and antiviral medications for use during the initial wave of a pandemic. HHS has supported establishment of additional regional rapid response teams in China, Egypt, India, Indonesia, and Kazakhstan.

- 68 countries in all six WHO regions have participated in HHS-sponsored regional and country-level laboratory workshops on molecular diagnosis of avian influenza. In March 2007, the new Laos National Influenza Laboratory, established with on-site assistance from HHS, identified a human case of H5N1 without outside assistance and sent the specimen to a WHO Collaborating Center for confirmatory testing. This is a major milestone in the development of capacity for pandemic influenza detection and response in a priority country.
- HHS has stationed CDC Influenza Coordinators at Global Disease Detection Centers in China, Egypt, Guatemala, Kenya and Thailand, and has stationed 16 CDC staff responsible for influenza activities in Cambodia, Republic of the Congo, Egypt, India, Indonesia, Kazakhstan, Laos, Peru, Philippines, Sweden, Switzerland, Vietnam, and the United Kingdom.
- HHS is working with CARE International on community-level avian influenza awareness campaigns and health promotion activities in Cambodia, Indonesia, Laos, and Vietnam.
- HHS has supported the establishment of two new Field Epidemiology Training Programs (FETPs) in Vietnam and Cambodia. The CDC Technical Advisor in Thailand continues to assist countries to establish field epidemiology training programs in the South-East Asia region, including Vietnam and Cambodia. The Pakistan Field Epidemiology and Laboratory Training Program (FELTP) continues to assist the Pakistan Ministry of Health in establishing sentinel site surveillance for influenza. Investigations of H5N1 in Cambodia, China, Thailand, Nigeria, and South Sudan have been completed.
- NAMRU-3 (Cairo) has an Interagency Agreement with HHS to provide technical assistance with influenza diagnostics and surveillance to Afghanistan, Armenia, Azerbaijan, Bulgaria, Macedonia, Morocco, Romania, Ukraine and Uzbekistan. NAMRU-3 also provides influenza support to WHO Regional Office for the Eastern Mediterranean countries (including Djibouti, Egypt, Jordan, Oman, Pakistan, Saudi Arabia and Syria) and to Georgia, Kazakhstan, and Kyrgyzstan. NAMRU-3, through collaboration with the CDC Global Disease Detection Center in Nairobi, is conducting influenza surveillance in Kenya. Beginning in late 2007, NAMRU-3 has also provided assistance to Tajikistan and Turkmenistan.
- HHS is promoting international use of non-pharmaceutical interventions—public health measures other than vaccination and drug treatment—through regional response workshops and exercises, participation in WHO consultations and

diplomatic efforts, and outreach to the private sector via the Asia-Pacific Economic Cooperation forum.

- HHS has helped enhance global capacity for clinical management and infection control during a pandemic by describing the clinical manifestations of the first identified cases of human H5N1 infection; developing hospital infection control training materials and supporting training activities in Cambodia, Laos, Kenya, Thailand, and Vietnam; and by assisting WHO with development and field-testing of international guidelines on respiratory hygiene and cough etiquette for use in healthcare settings.
- NIH awarded a contract for \$8 million to expand the Southeast Asian Infectious Disease Clinical Research Network (formerly the Southeast Asian Influenza Clinical Research Network), a multilateral collaborative partnership of hospitals and institutions in Indonesia, Thailand, the United Kingdom, the United States, and Vietnam. The mission of the Network is to advance the scientific knowledge and management of human influenza and other emerging infectious diseases through clinical research. The Network is currently conducting one large multicenter trial of standard versus higher dose oseltamivir for severe seasonal and avian human influenza. Additional protocols are in development.

As of January 15, 2009, HHS has obligated \$176 million out of the \$179 million allocated between the two supplemental appropriations bills for international collaboration. The remaining \$3 million will be used to continue to carry out activities begun in FY 2006.

Other Domestic Activities, including Rapid Diagnostic Tests and Risk Communications

HHS is working on the domestic front to enhance surveillance through partnerships with State and local laboratories. HHS is working to increase and expand the capacity of quarantine stations, enhance laboratory capacity at CDC, and improve diagnostic tools. Development of novel, rapid, and effective influenza diagnostics will facilitate the speed and accuracy with which scarce countermeasures will be distributed to mitigate both seasonal and pandemic influenza. Risk communication strategies are being developed and implemented. These activities will allow HHS to build the domestic capacity needed to detect and respond to a pandemic early and effectively.

Rapid Diagnostic Test, Reagent Resource, and Library of Reference Strains Accomplishments to Date:

- In September 2008, CDC received FDA clearance for an internally developed diagnostic test that can detect influenza A, B and subtypes A/H1, A/H3, and A/H5, the avian influenza subtype of greatest concern. This test has high sensitivity and specificity and will be in place at over 70 laboratories participating in surveillance in the United States and at selected Department of Defense

laboratories around the world. This test will serve as the gold-standard test for confirming the first cases of avian or potentially pandemic influenza.

- In September 2008, CDC awarded a \$17 million contract for development of an “Influenza Reagent Resource”. This contract will greatly enhance the availability of influenza viruses and reagents for researchers, developers, and public health response laboratories.
- In May 2008, \$4.8 million was awarded through existing contracts to meet important milestones in developing point-of-care influenza rapid test devices. Both of the prototype devices have concluded an independent government evaluation and are anticipating clinical trials this coming influenza season. Both new devices are being developed under government-funded contracts with commercial test manufacturers. These devices will allow doctors and other health professionals to diagnose influenza, including avian influenza, rapidly and easily in a clinic office or other outpatient setting.
- In April 2008, CDC, in conjunction with BARDA, awarded \$13.1 million for the development of a new, bench top laboratory-based rapid influenza test for use in community hospitals. Contracts were awarded to two device manufacturers to develop the test which will provide results in around 3 hours.
- HHS continues to invest in the development of rapid diagnostic tests capable of distinguishing between seasonal and pandemic influenza. In addition to the 5-target PCR, laboratory influenza and point of care tests, HHS plans to support use of simple influenza tests for detecting any influenza viruses. Current rapid tests could be adapted for use in non-healthcare settings along with improved and more reliable methods for specimen collection. Improved specimen collection devices could enable increased testing capabilities during a pandemic and assist with community and individual management approaches. HHS expects to award contracts for improved specimen collection by the end of FY 2009.

The HHS Office of the Assistant Secretary of Public Affairs (ASPA), in partnership with the National Center for Health Marketing at the CDC, has undertaken a significant number of activities to support State and local pandemic planning efforts, educate the public about avian and pandemic influenza, and enhance our own emergency response capabilities so the department can communicate efficiently and effectively during a pandemic.

Risk Communications Accomplishments to Date:

- In March 2008, HHS launched **PlanFirst**, a regular webcast series of live, internet dialogues engaging Federal and State officials and community members on pandemic planning. Program topics have included individual preparedness, home healthcare agency planning, workplace preparation, and the State planning process. To date, seven episodes of **PlanFirst** have been broadcast. The live

http://www.pandemicflu.gov/news/panflu_webinar.html .

- To highlight the significance of the 1918 pandemic and the toll it took, a collection of personal stories is now available online, highlighting narratives from survivors, families, and friends who lived through the 1918 and 1957 pandemics. The Storybook is available at: <http://www.pandemicflu.gov/storybook/index.html>.

Other Domestic Activities Accomplishments to Date:

- In Spring 2007, CDC opened two additional quarantine stations in Dallas and Philadelphia, bringing the total number of stations to 20. Since the end of FY 2008, CDC has maintained a staffing capacity of 50 percent or greater at all 20 quarantine stations.
- HHS continues to evaluate community mitigation strategies for pandemic influenza. CDC is working with the Council of State and Territorial Epidemiologists to assess the effectiveness of community mitigation activities at the community, State and Federal level. CDC published “A Summary of the Interim Pre-Pandemic Planning Guidance: Community Strategy for Pandemic Influenza Mitigation in the United States – Early Targeted, Layered Uses of Nonpharmaceutical Interventions.”
- Through cooperative agreements with six national and two international influenza research centers, CDC has supported applied research on non-pharmaceutical interventions for seasonal influenza. The outcomes of these studies will provide valuable information for both seasonal and pandemic influenza preparedness.
- HHS continues to work with local, State and Federal partners to develop strategies to prevent importation of pandemic influenza at U.S. borders. CDC has engaged with airline stakeholders and obtained concurrence for en route screening processes, such as identification and notification of ill passengers on board inbound international aircraft, distribution of health declaration forms in flight, and passenger disembarkation processes that enhance the port screening process and minimize disease transmission. CDC continues to plan for obtaining, processing, training, and deploying local public health staff and volunteers for surge capacity during a pandemic. CDC will continue to work with partners to exercise pandemic preparedness at all ports of entry over the next two and three years.

As of January 15, 2009, HHS has obligated \$284 million out of the \$331 million allocated between the two supplemental appropriations bills for these domestic activities.

Department of Health and Human Services
Report to Congress
Pandemic Influenza
(\$ in millions)

Activities Funded with FY 2006 Emergency Funding:	FY 2006 December 2005 Supplemental Obligations	FY 2006 June 2006 Supplemental Obligations
VACCINE FUNDING	1,781.0	1,415.0
ACHIEVE CAPACITY AND/OR BUY COURSES FROM EGG-BASED MANUFACTURER	593.5	300.0
<i>ASPR/CDC Contracts issued for the acquisition of H5N1 vaccine for pre-pandemic stockpile:</i>		
Sanofi Pasteur & Chiron (contracts issued in 2005)	80.0	
<i>ASPR Contracts issued for the acquisition of H5N1 vaccine for pre-pandemic stockpile:</i>		
GlaxoSmithKline (contract for the acquisition of H5N1 clade 2 vaccine in November 2006)	41.0	
Novartis (contract for the acquisition of H5N1 clade 2 vaccine in November 2006)	41.0	
Sanofi Pasteur (contract for the acquisition of H5N1 clade 2 vaccine in November 2006)	118.0	
GlaxoSmithKline (contract for the acquisition of H5N1 vaccine in September 2008)	1.8	
Novartis (contract for the acquisition of H5N1 vaccine in September 2008)	13.7	
Sanofi Pasteur (contract for the acquisition of H5N1 vaccine in September 2008)	32.5	
<i>ASPR Modifications to contracts for additional doses, replenishment, and storage and stability:</i>		
	59.8	97.6
GlaxoSmithKline (modifications to existing contract for add'l manufacturing of bulk H5N1 vaccine in July 2007)		
Novartis (modifications to existing contract for additional manufacturing of bulk H5N1 vaccine in August 2007)	38.3	52.8
Sanofi Pasteur (modifications to existing contract for additional manufacturing of bulk H5N1 vaccine in July 2007)	76.5	124.7
Sanofi Pasteur (modifications to existing contract for additional manufacturing of bulk H5N1 vaccine in August 2007)	9.8	
Sanofi Pasteur (modifications to existing contract for storage and stability studies in September 2006)	4.8	
Sanofi Pasteur (modifications to existing contract for storage and stability testing in September 2007)		5.9
Sanofi Pasteur (modifications to existing contract for storage and stability testing in October 2007)		4.8
Sanofi Pasteur (modifications to existing contract for additional manufacturing of bulk and final container of H5N1 vaccine in September 2007)		5.8
Sanofi Pasteur (modifications to existing contract for additional studies under egg supply contract in September 2007)		0.5
Sanofi Pasteur (storage and stability in September 2008)	2.8	
Novartis (storage and stability in September 2008)	0.3	
Sanofi Pasteur (formulation, fill and finish in September 2008)	1.2	
Sanofi Pasteur (storage and stability in December 2008)	11.5	
GlaxoSmithKline (storage and stability in December 2008)	3.4	
Novartis (storage and stability in December 2008)	0.2	
GlaxoSmithKline (AS03 adjuvant manufacturing, storage and stability in December 2008)	40.0	
<i>Program Management</i>	7.2	
Cumulative Obligations, Achieve Capacity and/or Buy Courses from Egg-based Manufacturers	583.6	292.1
<i>Unobligated Balances, Achieve Capacity and/or Buy Courses From Egg-based Manufacturers</i>	9.9	8.0
ACCELERATE CELL-BASED VACCINE	1,022.0	867.0
<i>ASPR Contract issued January 2009 for the construction of domestic cell-based pandemic influenza vaccine manufacturing facility:</i>		
Novartis		486.6
<i>ASPR Contracts issued May 1, 2006 for the advanced development of cell-based pandemic influenza vaccines for domestic licensure & manufacturing:</i>		
DynPort	41.0	
GlaxoSmithKline	274.8	
MedImmune	169.5	
Novartis/Chiron (includes \$159,000 additional funding for storage and stability)	220.5	
Solvay	298.6	
<i>ASPR Modifications to contracts:</i>		
Dynport (modification to existing contract in October 2007)		201.3
<i>Program Management</i>	15.1	
Cumulative Obligations, Accelerate Cell-Based Vaccine	1,019.4	687.9
<i>Unobligated Balances, Accelerate Cell-Based Vaccine</i>	2.6	179.1
RETROFIT OF FACILITIES FOR EMERGENCY PRODUCTION OF VACCINE	0.0	120.9
<i>ASPR Contracts issued June 4, 2007 for the retrofitting of facilities for the emergency production of influenza vaccine:</i>		
MedImmune		55.1
Sanofi Pasteur		64.8
<i>Program Management</i>		1.1
Cumulative Obligations, Retrofit of Facilities	0.0	121.0
<i>Unobligated Balances, Retrofit of Facilities</i>	0.0	(0.0)
ADVANCED DEVELOPMENT OF ANTIGEN-SPARING TECHNIQUES	145.5	127.1

ASPR Contracts issued January 4, 2007 for the advanced development of antigen-sparing techniques:

GlaxoSmithKline	63.3	
IOMAI	14.5	12.5
Novartis	54.8	
Mix-N-Match Studies	4.51	
IAA to NIH/NIAD for antigen-sparing study		4.00
IAA to USDA/NVSL for egg-based vaccine testing		0.004
Program Management		2.0
Cumulative Obligations, Advanced Development of Antigen-Sparing Techniques	137.1	18.5
<i>Unobligated Balances, Advanced Development of Antigen-Sparing Techniques</i>	8.4	108.5
FDA ACTIVITIES	20.0	0.0
Contracts for IT Development and Maintenance, Technical and Contractual Support Services, Renovations for Quality Controlled Labs, Fraudulent Flu Awareness Campaign; Events Mgmt., and Publications	7.9	
Purchase of Lab Supplies, i.e. Biological Materials and Chemicals; Personal Protective Emergency Equipment/Materials for Field Investigators; Medical and Scientific Lab Equipment, i.e. Centrifuge, Gas Chromatograph System, Voltammetric Digital Analyzer System, Spectrometer; IT Equipment	7.7	
Program Management Costs (salaries and benefits; rent; travel and transportation; training; meetings and workshops; and miscellaneous)	4.4	
Cumulative Obligations, FDA	20.0	0.0
<i>Unobligated Balances, FDA</i>	0.0	0.0
Cumulative Obligations, Vaccine	1,760.1	1,119.4
<i>Unobligated Balances, Vaccine</i>	20.9	295.6

ANTIVIRAL DRUGS FUNDING

731.0 **391.0**

FEDERAL STOCKPILE & CONTAINMENT EFFORT

391.8 **350.0**

CDC Contracts to procure a supply of treatment courses of antiviral drugs (Roche's Tamiflu & GSK's Relenza) for the Strategic National Stockpile:

Roche and GlaxoSmithKline (purchase of Tamiflu and Relenza)	391.8	350.0
Cumulative Obligations, Federal Stockpile & Containment Efforts	391.8	350.0
<i>Unobligated Balances, Federal Stockpile & Containment Efforts</i>	0.0	0.0

SUBSIDIZE STATE PURCHASE OF ANTIVIRAL DRUGS

153.0 **0.0**

ASPR Contracts to allow States to purchase antiviral drugs (Roche's Tamiflu & GSK's Relenza) at a subsidized Federal government price:

Roche (Federally subsidized purchase of Tamiflu in June 2006)	29.8	
GlaxoSmithKline (Federally subsidized purchase of Relenza in July 2006)	16.8	
Roche (Federally subsidized purchase of Tamiflu in September 2006)	29.8	
Roche (Federally subsidized purchase of Tamiflu in September 2007)	14.9	
Tamiflu Antiviral Drug State Stockpiles	26.6	
Cumulative Obligations, Subsidize State Purchase of Antiviral Drugs	117.9	0.0
<i>Unobligated Balances, Subsidize State Purchase of Antiviral Drugs</i>	35.1	0.0

ADVANCED DEVELOPMENT OF PROMISING ANTIVIRAL DRUGS

186.2 **41.0**

ASPR Contracts issued for the acquisition of promising antiviral drugs:

BioCrist contract awarded for Peramivir, a promising antiviral drug	102.7	
Cumulative Obligations, Advanced Development of Promising Antiviral Drugs	102.7	0.0
<i>Unobligated Balances, Advanced Development of Promising Antiviral Drugs</i>	83.5	41.0
Cumulative Obligations, Antiviral Drugs	612.4	350.0
<i>Unobligated Balances, Antiviral Drugs</i>	118.6	41.0

MEDICAL SUPPLIES (PPE, VENTILATORS, ETC.) FUNDING

162.0 **0.0**

CDC Contracts issued for the acquisition of medical supplies:

CDC Personnel costs associated with Strategic National Stockpile	0.04	
Purchase of 62.5 million N-95 respirators for potential distribution to affected areas in case of an influenza pandemic.	50.0	
Purchase of ventilators, syringes, IV antibiotics, and storage & security from various suppliers	111.1	
Cumulative Obligations, Medical Supplies	161.1	0.0
<i>Unobligated Balances, Medical Supplies</i>	0.9	0.0

STATE AND LOCAL PREPAREDNESS FUNDING

350.0 **250.0**

CDC Cooperative Agreements:

National Governors Association (NGA)	1.0	
Alabama	5.1	2.7
Alaska	1.6	0.8
American Samoa	0.3	0.1
Arizona	6.2	3.4
Arkansas	3.5	1.9
California	24.4	13.3
Chicago	3.6	1.9
Colorado	5.2	2.8
Commonwealth of North Mariana Islands	0.3	0.1
Connecticut	4.1	2.2
Delaware	1.8	0.9

District of Columbia	1.5	0.8
Federated States of Micronesia	0.3	0.2
Florida	16.8	9.2
Georgia	9.0	4.9
Guam	0.3	0.2
Hawaii	2.1	1.1
Idaho	2.3	1.2
Illinois	9.8	5.3
Indiana	6.6	3.6
Iowa	3.7	1.9
Kansas	3.5	1.8
Kentucky	4.7	2.5
Los Angeles	10.0	5.4
Louisiana	5.1	2.7
Maine	2.2	1.1
Maryland	6.0	3.2
Massachusetts	6.7	3.6
NYC Department of Health	8.3	4.5
Michigan	10.1	5.3
Minnesota	5.6	3.0
Mississippi	3.6	1.9
Missouri	6.2	3.3
Montana	1.8	1.0
Nebraska	2.6	1.4
Nevada	3.1	1.7
New Hampshire	2.2	1.1
New Jersey	8.8	4.8
New Mexico	2.7	1.4
New York State	11.0	5.9
North Carolina	8.7	4.7
North Dakota	1.6	0.8
Ohio	11.3	6.1
Oklahoma	4.2	2.2
Oregon	4.2	2.3
Pennsylvania	12.1	6.6
Puerto Rico	4.5	2.4
Republic of Palau	0.2	0.1
Republic of The Marshall Islands	0.3	0.1
Rhode Island	2.0	1.0
South Carolina	4.8	2.6
South Dakota	1.7	0.9
Tennessee	6.3	3.4
Texas	21.3	11.7
Utah	3.2	1.7
Vermont	1.6	0.8
Virgin Islands	0.3	0.2
Virginia	7.7	4.2
Washington	6.6	3.6
West Virginia	2.6	1.4
Wisconsin	6.0	3.2
Wyoming	1.5	0.7

ASPR awards for State and local medical surge capacity:

Alabama		1.2
Alaska		0.4
Arizona		1.4
Arkansas		0.8
California		5.5
LA County		2.3
Colorado		1.2
Connecticut		1.0
Delaware		0.4
District of Columbia		0.4
Florida		3.7
Georgia		2.0
Hawaii		0.5
Idaho		0.5
Illinois		2.2
Chicago		0.8
Indiana		1.5
Iowa		0.9
Kansas		0.8
Kentucky		1.1
Louisiana		1.2
Maine		0.5
Maryland		1.4
Massachusetts		1.6
Michigan		2.3

Minnesota	1.3
Mississippi	0.8
Missouri	1.4
Montana	0.4
Nebraska	0.6
Nevada	0.7
New Hampshire	0.5
New Jersey	2.0
New Mexico	0.6
New York	2.5
New York City	1.9
North Carolina	2.0
North Dakota	0.4
Ohio	2.6
Oklahoma	1.0
Oregon	1.0
Pennsylvania	2.8
Rhode Island	0.5
South Carolina	1.1
South Dakota	0.4
Tennessee	1.4
Texas	4.8
Utah	0.7
Vermont	0.4
Virginia	1.8
Washington	1.5
West Virginia	0.6
Wisconsin	1.4
Wyoming	0.4
Puerto Rico	1.0
Guam	0.2
Virgin Islands (US)	0.1
Federated States of Micronesia	0.1
Northern Marianas Islands	0.1
American Samoa	0.1
Marshall Islands	0.1
Palau	0.1

CDC Competitive Grants

Competitive Obligations	24	
Cumulative Obligations, State and Local Preparedness	<u>350.0</u>	<u>250.0</u>
<i>Unobligated Balances, State and Local Preparedness</i>	<i>0.0</i>	<i>0.0</i>

INTERNATIONAL ACTIVITIES FUNDING

125.0 **54.0**

INTERNATIONAL SURVEILLANCE

89.0 **35.0**

CDC Personnel costs associated with International Surveillance	3.4	5.3
CDC International Travel for the Outbreak Monitoring Team and to assess preparedness	0.7	0.7
CDC Various contracts and IAAs under \$75,000 each	2.4	4.3
Air Filter Maintenance Services contract for lab services		0.3

APHL National laboratory training networks and management information systems		0.5
Applera Corporation contract for equipment		0.1
Masergy Communication		0.2
Universidad del valle de Guatemala grant for implementing public health programs and strengthening public health science		0.1

University Teaching Hospital expansion of reference laboratory infrastructure to support HIV/AIDS/STD/TB		0.1
USAID IAA to study the etiology and characteristics of influenza and other pathogens in acute lower respiratory infections in New Dehli, India	0.2	

CDC Grants to strengthen national capacity for surveillance & containment:

Uganda Virus Research Institute	0.2	0.3
WHO		0.7
WHO/ South East Asia cooperative agreement with US CDC		0.7
WHO/ West Pacific cooperative agreement with US CDC		1.4

CDC Grants and IAA's to support international surveillance, preparedness, detection, response, containment and risk communication activities:

Afghanistan	0.4	0.2
Argentina	0.9	0.5
Armenia	0.4	0.4
Bangkok	1.5	
Bangkok/Thailand Department of Medical Sciences for development of influenza surveillance networks	0.5	0.5
Bangladesh	0.4	0.2
Brazil	0.8	0.3
Cambodia	0.9	
CARE grant for global capacity through international NGO partner	0.1	0.5
CARE grant for Laos surveillance and lab activities	0.4	

COGH Business Services Unit	0.7	0.1
Columbia University Health Services in Rwanda grant for prevention and surveillance studies in Uganda mechanism used to fund and conduct influenza activities	0.2	
Commonwealth N. Mariana Islands Dept. of Public Health cooperative agreement used to fund regional reference laboratories for communicable and outbreak prone diseases including influenza		0.03
Congo (Brazzaville) contract to provide pan flu infrastructure support via cable/containing outbreaks		0.1
Cote d'Ivoire	0.3	
Cote d'Ivoire Ministry of Health and Public Hygiene for epidemiology and lab capacity building for surveillance and response		0.2
Directorate Gen/Dis Ctrl/Env Health grant for surveillance and response to avian and pandemic influenza		0.7
Ethiopia Federal Ministry of Health for preparedness and response to avian and pandemic influenza in the Federal Democratic Republic		0.2
Ethiopia JHPIEGO grant for surveillance and lab activities	0.3	
Ethiopian Health and Nutrition Inst. for surveillance and lab activities	0.1	
Georgia	0.4	0.3
Kenya	0.2	0.2
Laos	0.1	
Luanda Ministry of Health grant for surveillance and response to avian and pandemic influenza		0.3
Mexico	0.9	0.4
Morocco	0.6	0.4
NAMRU 2 IAA to support influenza surveillance activities	1.5	
NAMRU 3 IAA to support influenza surveillance activities	1.5	
Nigeria	0.3	0.2
PAHO	0.2	0.7
PAHO grant for coordination of comprehensive emerging infectious disease plans	0.9	
Peru	0.8	0.4
Public Health Foundation Enterprises for epidemiology and lab capacity for infectious diseases in Russia	0.1	
Romania		
Rwanda Treatment Research AIDS Center (TRAC) mechanism used to fund and conduct influenza activities		0.3
South African National Institute for Communicable Diseases		0.1
Tanzania	0.1	
Tanzania Ministry of Health/Social Welfare grant for preparedness and response to avian and pandemic influenza		0.2
Thailand Ministry of Public Health for prevention and care of infectious diseases	0.1	
Turkey	0.1	
Uganda Makerere Univ. Institute of Public Health grant for prevention and surveillance studies in Uganda mechanism used to fund and conduct influenza activities	0.2	
Ukraine	0.6	0.4
Universidad del valle de Guatemala grant for Research in Human Infectious Diseases in Guatemala	0.03	
University of Kinshasa grant for surveillance and response to avian and pandemic influenza		0.2
University of Maryland grant for prevention and surveillance activities in Nigeria	0.1	
Vietnam	0.9	0.5
WHO grant to address emerging infectious diseases	6.3	3.0
WHO/ AFRO grant for surveillance and response to avian and pandemic influenza	0.6	1.2
WHO/ Brazzaville	0.8	
WHO/ Denmark	0.8	
WHO/ Egypt	2.1	0.9
WHO/ Manila	0.9	
WHO/ New Delhi	0.8	
CDC Grants to support in-country development of influenza surveillance networks:		
China National Influenza Center grant for development of influenza surveillance networks in China	0.4	
Indian Council of Medical Research	2.0	1.0
Kazakhstan Ministry of Health for development of influenza surveillance networks in Central Asia	0.3	
Korean National Influenza Center grant to develop influenza surveillance networks in Korea	0.2	0.2
Ministry of Health, Indonesia	1.3	0.7
Ministry of Health, Malaysia	0.7	
Ministry of Health, Mongolia	0.6	0.4
Pakistan National Institutes of Public Health	0.5	0.1
Philippines Department of Health, National Influenza Center	0.6	0.3
Secretariat of the Pacific grant for development of Pacific public health surveillance network		0.3
Vietnam National Institute of Hygiene & Epidemiology		0.4
CDC Grants and Contracts to support international staffing, including travel, logistical, technical, operational and professional support:		
Americom Government Services Inc. contract for shared bandwidth services, AGS V-SAT generator, SmartPoint Terminal, Activation Fee, Travel and Site Survey	0.1	0.02
ATA Services Inc. for international program consultant	0.01	
ATA Services Inc. for salary and benefits	0.01	
Bangkok International Surveillance: Cable for consulting services in Bangkok (deobligated)	0.00	
Bearingpoint, LLC for technical staffing support	0.04	
Booz Allen for technical assistance	0.1	
China Centers for Disease Control and Prevention grant for development of influenza surveillance networks		0.5
China Centers for Disease Control and Prevention grant for prevention and surveillance activities	1.5	
Comforce Technical Services contract for a biologist	0.1	0.1
Comforce Technical Services contract for international technical and operational support	0.1	

Comforce Technical Services contract for International Technical Operational and Professional Support Services in Nigeria	0.3	0.1
Comforce Technical Services contract for International Technical Operational and Professional Support Services in Rwanda	0.2	
	0.3	
Comforce Technical Services contract for international technical, operational and professional support services		
Comforce Technical Services contract to support influenza surveillance activities in Nigeria	0.2	
Comforce Technical Services contract to support influenza surveillance activities in Tanzania	0.2	
Countertrade Products, Inc. contract for networking, computing and IT solutions	0.1	
Countertrade Products, Inc. for monitors	0.03	
Emtec Federal Inc. for standard desktops	0.1	
Fisher Scientific Company LLC contract for Dermathin latex gloves	0.01	
McKing Consulting Corp. contract for Outreach and Technical Assistance to International Communications Partners	0.1	
National Associates, Inc. for Management Analyst, Secretary	0.1	
Northrop Grumman IT Services for IT support	0.2	0.1
Policy Navigation Group LLC for medical examination of aliens		0.4
Professional and Scientific Associates, Inc. contract for international travel & logistical support services	1.3	0.2
Technology Management Company Inc. contract for global logistics and administration	0.6	
Technology Management Company Inc. contract for technical and logistical support services	0.5	
TEPHENET grant for conference support	0.2	
Thompson, Cobb, Bazilio & Associates contract for accounting and budgetary assistance concerning international surveillance activities	0.1	
Total Solutions Inc. contract for support services		0.03
University of Maryland grant for international staffing of prevention and surveillance activities	0.2	
WPRO grant to support influenza surveillance activities through international staffing	0.4	
ASPR Supplement IAA's, Contracts, Grants and Supplement Grants to support international preparedness, detection, response, containment and risk communication activities:		
Bangkok Regional Site	1.0	
Bangladesh	1.1	
Cambodia grant for development of influenza surveillance network overseas		0.3
CDC IAA to support response and containment activities through establishment of international stockpile	0.3	
Central Asia Platform	1.5	
China	0.4	
Critical Outcome Evaluation supplement grant to support preparedness and risk communication activities	0.1	
Distance Learning: Surveillance & Response supplement grant to support preparedness and risk communication activities	0.1	
FDA IAA to support effective risk communication activities for regulatory preparedness workshops	0.5	
Gorgas Memorial Institute (Panama)	0.8	
Gorgas Memorial Institute (Panama)	2.5	
India	0.4	
Indonesia	1.9	
Institute Pasteur Network (S.E. Asia and Africa)	1.6	
IOM contract modification to fund meeting on influenza containment	0.1	
Kenya Regional Site	0.1	
Kenya Regional Site	1.0	
Malaysia	0.4	
Mexico supplement grant to assist in set-up of operations center	0.1	
Mongolia	0.4	
Multinational Influenza Seasonal Mortality Study Group supplement grant	0.1	
Nigeria FELTP supplement grant to support preparedness, surveillance and containment activities	0.2	
NIH/NIGMS IAA to Support Modeling of disease spread in SE Asia (MIDAS)	0.2	
Outbreak Investigation Support supplement grant to support preparedness, surveillance and containment activities	0.8	
Pakistan	0.4	
Philippines	0.4	
RAND Contract Modification for the Monitoring and Evaluation of Influenza Programs	0.5	
Smithsonian Tropical Research Institute (Panama) supplement grant	0.1	
Smithsonian Tropical Research Institute Bird Monitoring grant to support preparedness, surveillance and containment activities	0.2	
South Africa Field Epidemiology and Lab Training Program (FELTP) grant to support response and containment activities	0.4	
Team PSA contract for WHO/ASEAN/US Stockpile and Tri-lateral SPP coordination meeting	0.1	
Ukraine	0.4	
University of Cape Town supplement grant to support an infectious disease workshop	0.1	
West Africa FELTP supplement grant to support preparedness, surveillance and containment activities	0.2	
WHO Egypt EMRO	0.5	
WHO Headquarters (In-Country Vaccine Development, Various Countries)	10.0	
WHO Specimen transport fund supplement grant to support preparedness, surveillance and containment activities	0.5	
WHO supplement grant to support response and containment activities through Pan Flu Rapid Response and Early Containment Project	1.0	
WHO-AFRO Brazza-ville	0.5	
WHO-AFRO Brazza-ville	0.4	
WPRO (Cambodia)	0.8	

WPRO (Laos, Vietnam)	0.3	
OGHA Supplement Grants to support surveillance and detection activities:		
Afghanistan	0.8	
Angola	0.8	
Brazil	0.1	
Iraq	0.4	
Kenya	0.2	
Libya	1.0	
Mexico	0.1	
REDI Center	2.1	
Turkey	0.3	
OGHA Other:		
ISTC & STCU IAA to support preparedness and risk communication activities	0.8	
OGHA Influenza Strategic Management Unit to support the management and administration of avian influenza activities	0.6	
Cumulative Obligations, International Surveillance	89.0	33.0
Unobligated Balances, International Surveillance	0.0	2.0
RAPID RESPONSE	15.0	15.0
CDC Travel and Personnel costs associated with Rapid Response	0.1	0.9
CDC Various contracts and IAAs under \$75,000 each	0.2	0.4
CDC Rapid Response Contracts:		
Bangkok contract for pan flu infrastructure support via cable/containing outbreaks	1.2	0.8
China contract to provide pan flu infrastructure support via cable/containing outbreaks	0.2	0.3
Comforce Technical Services, Inc. contract for international technical, operational services		0.8
Kenya contract to provide pan flu infrastructure support via cable/containing outbreaks	1.8	1.1
McKing Consulting Corp. contract for management consultation		0.4
Northrop Grumman IT, Inc. contract for consulting services		0.2
Total Solutions Inc. contract for support services		0.1
CDC Rapid Response IAA's:		
CID IAA for supplies and materials in Kenya	0.2	
Department of State IAA for international cooperative administrative support services		0.2
Egypt Embassy IAA for infrastructure support in Egypt	1.2	1.9
U.S. Naval Medical Research Unit No. 2 interagency agreement for the Southeast Asia Influenza Initiative		1.2
USAID/Bangkok IAA to provide supplies and materials in Bangkok	0.7	
CDC Rapid Response Grants:		
CDC GAP for NPEC Pacific Division mechanism used to fund and conduct influenza activities	0.5	
China Centers for Disease Control and Prevention grant mechanism used to fund and conduct influenza activities	1.7	
Council of State and Territorial Epidemiology grant for development of state level surveillance systems and training programs		0.1
	0.5	0.2
Department of Medical Sciences grant for special cooperative health investigations and assessments in Thailand		
	0.1	0.1
International Ctr/Diarrhoeal Disease Research grant for addressing emerging infectious disease in Bangladesh		
Kenya Medical Research Institute (KEMRI) grant for KEMRI/CDC program	1.9	0.5
National Institute for Communicable Diseases grant for South African preparedness for rapid detection of highly pathogenic avian influenza	0.8	0.2
National Institute of Viral Disease Control/Prev grant for support the CDC of The Peoples Republic of China		1.6
Pan American Health Organization grant for coordination of comprehensive emerging infectious disease plans	0.8	
Thailand Ministry of Public Health grant for prevention and care of infectious diseases	0.8	1.3
Training Programs In Epidemiology grant for China Epidemiology Technical Assistance		0.1
Universidad del valle de Guatemala grant for implementing public health programs and strengthening public health science		1.4
Universidad del valle de Guatemala grant for research and human resource development in human infectious disease in Guatemala	1.9	
USDA Graduate School for training of rapid response personnel		0.1
WHO grant for international staff for special cooperative health investigations, addressing emerging infectious disease and assignments in Thailand	0.6	0.6
Cumulative Obligations, Rapid Response	15.0	14.3
Unobligated Balances, Rapid Response	0.0	0.7
HUMAN ANIMAL INTERFACE	3.0	4.0
CDC Travel and Personnel costs associated with Human Animal Interface	0.2	0.1
Verizon contract to support CDC-wide Audio Web Conference		0.2
CDC Human-Animal Interface Grants:		
Colorado State University grant for zoonotic avian influenza	0.9	0.9
Mahidol University grant for avian influenza surveillance in Thailand	0.9	0.9
National Institute of Public Health for Avian Influenza CRC for studies at the human-animal interface		0.2
University of Georgia grant for avian influenza surveillance in the environment	0.2	0.9
University of Minnesota grant for avian influenza cooperative research centers	0.9	0.9
Cumulative Obligations, Human Animal Interface	3.0	4.0
Unobligated Balances, Human Animal Interface	0.0	0.0
NIH ACTIVITIES	18.0	0.0

Armed Forces Research Institute of Medical Sciences (AFRIMS) contract to conduct studies in Vietnam and China to determine the presence of antibodies against H5N1 in potentially exposed individuals	3.0	
Family Health International and PPD Development contracts for clinical studies support	2.0	
	4.0	
National Center for AIDS Prevention and Control (People's Republic of China) grant to conduct studies in China to investigate H5N1 antibody prevalence and characterize virus from animals and humans in SE Asia		
Oxford University contract to expand clinical infrastructure and research in SE Asia for therapeutics, diagnostics and vaccines	8.0	
St. Judes Children's Hospital contract to expand human-animal interface surveillance studies in SE Asia	1.0	
Cumulative Obligations, NIH Activities	18.0	0.0
Unobligated Balances, NIH Activities	0.0	0.0
Cumulative Obligations, International Activities	125.0	51.3
Unobligated Balances, International Activities	0.0	2.7

OTHER DOMESTIC ACTIVITIES FUNDING	138.0	142.0
VACCINE REGISTRY	6.0	4.0
<i>CDC Vaccine Registry Contracts:</i>		
CDC Travel and Personnel costs associated with Vaccine Registry		0.2
ASTHO grant to strengthen and improve the Nation's public health capacity		0.3
Constella Group, LLC contract for emergency preparedness activities		0.7
Northrop Grumman Information contract to add pandemic influenza functionality addition to Vaccine Ordering and Distribution System (VODS) to support CDC pandemic planning and operations)	2.2	
<i>CDC Vaccine Registry IAA's:</i>		
IAA to enhance Countermeasure Response Administration (CRA) functionality	3.4	
<i>CDC Vaccine Registry Grants:</i>		
Denver Health and Hospital Authority grant to evaluate school-based influenza vaccination programs		0.3
Monroe County Public Health Department grant to Monroe County, New York school-based vaccination program		0.2
Cumulative Obligations, Vaccine Registry	5.5	1.7
Unobligated Balances, Vaccine Registry	0.5	2.3
QUARANTINE	20.0	15.9
CDC Travel and Personnel Costs associated with Quarantine	0.9	3.5
CDC Various contracts and IAAs under \$75,000 each	1.0	0.2
<i>CDC Quarantine Contracts:</i>		
Allsteel Inc. contract for Allsteel furniture components including design and installation	0.01	
Cbm/Back LLC contract for back aviation subscription		0.04
CounterTrade Products, Inc. contract for Dell servers	0.01	
Countertrade Products, Inc. contract for networking, computing and IT solutions	0.02	
Crestline Hotels & Resorts contract for hotel rooms		0.01
Dell Marketing L.P. contract for Clin1200 and Optiplex 745 desktop computers		0.01
Dell Marketing L.P. contract for PowerEdge 6850 servers	0.04	
EC America Inc. contract for CISCO 2811 Integrated Services Routers including power supplies and upgrades	0.04	
Emtec Federal, Inc. contract for computer hardware and software	0.03	
ENV Services Inc. contract for biosafety cabinets	0.1	
Firstwatch Inc. contract surveillance software which is a secure file management and transfer system which analyzes CAD data and automatically conducts surveillance of EMS 911 calls in 24 states and provinces		0.1
Force 3 Inc. contract for CISCO 2811 Integrated Services Routers including, accessories, power supplies and upgrades	0.1	
Hilton Enterprises, Inc. contract for xerox copier		0.01
Insight Public Sector, Inc. contract for software, hardware and equipment	0.1	
IRMH contract to stand up two quarantine stations		0.3
Kimball International, Inc. contract for Kimball Office Furniture		0.01
Knowledge Factor Inc. contract for pan flu learning assessment, creation of core curriculum, and evaluation	0.2	
Lewis Allan Office Furniture contract for array tables	0.1	
Lewis Allan Office Furniture contract for furniture		0.1
Lock Petaluma Mariana Hotel Co. LLC contract for Division of Global Migration and Quarantine (DGMQ) retreat to strategize on preparedness and response activities	0.03	
Lockheed Martin Services Inc. contract for professional and technical support for NCID quarantine activities	0.6	0.4
McKing Consulting Corp. contract to provide management consultation and technical assistance for quarantine	0.1	
McKing Consulting Corporation contract for management consultation and technical assistance, quarantine operational and legal assessment	0.3	0.3
Medstat Group contract for patient claims database	0.04	
Mid American CASU contract for operational and management support services	0.3	
Moore Medical LLC contract for Isolation Room Furniture	0.1	
National Associates Inc. contract for media relations specialist	0.1	
National Associates Inc. contract for project manager	0.1	
Northrop Grumman Information Technology Inc. contract for technical support of DHQP pan flu preparedness activities	1.9	0.3
Policy Navigation Group contract for pan flu quarantine policy	0.5	
Professional & Scientific Associates Inc. contract for planning and management of pan flu conference	0.1	
Research Triangle Institute contract to provide services for program policy assessments and evaluation design for quarantine training and education needs	0.8	0.4
Tishman Midwest Management Corp. contract for office space built out of Chicago O'Hare Airport Quarantine Station	0.2	

Trendway Corporation contract for Trendway product		0.04
Trivantis Corporation contract for lectora professional publishing suite	0.03	
Trivantis Corporation contract for publisher	0.01	
Verizon contract to support CDC-wide Audio Web Conference		0.4
CDC Quarantine IAA's:		
COMMERCE/NIST IAA for micro computer support services	0.1	0.1
DGMQ IAA for assessment and evaluation of non-pharmaceutical public health interventions	0.1	
DHHS IAA for a program analyst		0.01
DOE IAA for public healthcare preparedness for DHQP	0.1	
DOE IAA on health care capacity and surge	0.5	
DOE IAA to support table top exercises on pandemic influenza (quarantine system)	0.4	
GSA IAA for multiple hardware and software support items	0.1	
HHS/HRSA & PSC IAA to support quarantine infrastructure at ports of entry for pandemic influenza preparedness		0.7
NCPHI IAA for development of Patient Flu Vaccination Compliance Module & State Health Dept Data Sharing & complete/deploy healthcare personnel safety vaccine module	0.8	
OPM IAA for expansion of infection control capacity (nat'l response & training)	0.6	
OPM IAA for reimbursement fee for PMF program for pandemic-related staff	0.01	0.01
OPM IAA to support pandemic influenza simulation project	0.2	
ORISE IAA for tabletop exercises for healthcare preparedness	0.3	
SAMHSA IAA to purchase adverse drug event data from SAMHSA	0.1	
Teresa Hope IAA for technical assistance and health communications research		0.2
VA IAA for global mapping and migration project		0.1
CDC Quarantine Grants:		
ASTHO grant for nursing and Epidemiologist Cooperative Agreement to Enhance BioSurveillance Capabilities	1.0	
Boston Medical Center grant for Boston Area Travel Medicine Network (Batmn)		0.4
Boston Medical Center grant for Boston Area Travel Medicine Network (Batmn)		0.2
Commonwealth N. Marianas Islands Dept. of Public Health grant used to fund regional reference laboratories for communicable and outbreak prone diseases including influenza		0.04
DGMQ-QBHSB grant to support and train quarantine system personnel for pandemic readiness	0.2	
Emory University grant for cooperative agreement for pan flu assistance: Biostatistician		0.1
Emory University grant for cooperative agreement for special projects of national significance	0.1	
Hawaii Department of Health grant for epidemiology and lab capacity for infectious diseases		0.3
International Rescue Committee grant for improving detection, surveillance, and response for influenza in immigrants and refugees	0.3	0.3
International Society of Tropical Medicine grant for global surveillance network to detect influenza among travelers and other outbreaks of public health significance	0.3	0.3
Johns Hopkins University grant for analysis of legal implications of quarantine during pandemic influenza (state, local, and federal authorities)	0.03	
Kenya Medical Research Institute (KEMRI) grant for KEMRI/CDC program		0.1
Massachusetts General Hospital grant for Global Travelers' Health National Research Center Consortium		0.8
Regents of the University of California grant for effectiveness of selected non-pharmaceutical interventions in reducing influenza like illness among students	0.5	0.5
Regents of the University of Michigan contract for quarantine flu research	0.8	
Regents of the University of Michigan contract for study and reports		0.8
Regents of the University of Michigan grant for reducing transmission of influenza by face masks	1.1	1.1
Regents of the University of Minnesota grant for early detection, surveillance, and response for highly pathogenic influenza A viruses	0.5	
Research Triangle Institute grant for non-pharmaceutical interventions for pandemic influenza	0.8	0.7
SMRU-faculty of Tropical Medicine grant for avian flu surveillance network in displaced populations on the Thai Burma border	0.3	0.2
The Medstat Group grant for patient claims database	0.1	
Trustees of Columbia University grant for stopping upper respiratory infections and flu in the family trial	1.1	0.9
University of Hong Kong grant for a Controlled Trial of Masks and Hand Hygiene For Reducing Influenza Transmission		0.0
University of Hong Kong grant for cooperative agreement for pandemic influenza assistance	0.3	1.0
University of Massachusetts-Lowell grant for evaluation of masks as a source control NPI (non-pharmaceutical intervention)	0.3	0.3
University of Otago grant for pandemic influenza control at the borders of island countries and in household		0.5
University of Otago grant for pandemic influenza control at the borders of island countries and in households	0.4	
University of Pittsburgh grant for Pittsburgh influenza prevention project	0.8	0.8
Wake Forest cooperative agreement for aerobiology study of mask and respirator efficacy to prevent respiratory viral infection in a human model	0.7	
World Health Organization grant for special cooperative health investigations and assessments	0.1	
Cumulative Obligations, Quarantine	20.5	16.7
<i>Unobligated Balances, Quarantine</i>	<i>0.5</i>	<i>0.8</i>
LAB CAPACITY		
CDC Travel and Personnel Costs associated with Lab Capacity	10.5	8.0
CDC Various Contracts and IAAs Under \$75,000 Each	2.1	2.0
CDC Lab Capacity IAA's:		
America's Health Insurance Plans IAA for development of an influenza bio-bank in a managed care setting	1.0	
Atlanta Veterans Affairs Medical Center IAA for improved diagnostics for viral causes of infectious disease	2.0	
Department of Health & Human Services for research participation program in Ncpdcid/Dsr/Bb		0.1
Department of Health & Human Services for research participation program in Ncpdcid/Dsr/Od		0.00
DOC for microcomputer support services	0.1	

DOD's Chemical and Biological Defense Information Analysis Center (CBIAC) award to engage CBIAC resources in research by providing scientific and technical services to DLS	0.5	
DOE for development of methods for pox virus diagnostic and characterization		0.1
DOE for research participation program	0.1	0.1
DOS for capital security cost sharing programs	0.03	
Fedsources for Administrative Assistant	0.1	
Fedsources for Support for the Office of the Director, DVRD	0.2	
FMO for ICASS	0.02	
FOH IAA for Medical Officer Emergency Preparedness and Response Activities		0.1
GSA IAA for telecommunication charges		0.3
GSA Rand IAA to provide tools to identify and address challenges at the national and regional levels related to planning, surveillance and response to public health emergencies	0.5	
Indian Health Service IAA for preventing infectious disease among residents of Arctic and Sub-Arctic	0.1	
Los Alamos National Lab for Influenza viral sequence database	0.3	
OPM IAA for support services through Booz-Allen-Hamilton	0.5	
ORISE IAA to design, coordinate, conduct and report on a series of meetings for regional public health-healthcare personnel to focus on issues of surge capacity relative to pandemic influenza response	0.2	
PHS for writer/editor for hazard evaluations and technical assistance branch		0.1
Uniformed Services University of the Health Sciences IAA NIOSH - Safety and health at work for all people through research and prevention		0.1
USAID IAA to enhance international efforts for wild bird surveillance for avian influenza	1.0	
USAID to systematically document and disseminate information about the National health care services infrastructure	0.1	
CDC Lab Capacity Grants:		
African Field Epidemiology Network LTD grant for strengthening applied epidemiology training programs in Africa		0.2
	0.1	
American Society of Law Methods & Ethics grant to build system capacity to apply law as a public health tool	0.8	
Association of Public Health Laboratories for national laboratory training and management information systems		
ASTHO grant to strengthen and improve the Nation's public health capacity		0.2
CARE for technical support of pan flu preparedness activities	0.4	
CDC DGMQ-QBHSB to support and train quarantine system personnel for pandemic readiness	2.1	
Direct Gen/Disease Control Jakarta for surveillance and response to avian and pandemic influenza	0.1	
FIOTEC grant to strengthen the Brazilian National AIDS program		0.1
International Ctr/Diarrhoeal Disease Research grant for addressing emerging infectious disease in Bangladesh		0.1
International Rescue Committee cooperative agreement used as mechanism to build capacity in Indonesia	0.1	
Iowa State University for pathogenesis of infections in swine with pathogenic avian influenza virus	0.4	
Marshall Clinic Research Foundation for rapid analysis of influenza vaccine effectiveness	0.5	
Mount Sinai for Development of guinea pig as mammalian model for influenza virus transmission	0.3	
National Institute of Public Health & Environment, Netherlands for avian influenza CRC studies at the human animal interface	0.3	
Oregon State University for replication of highly pathogenic avian influenza viruses in swine	0.2	
University of Georgia for probability of human contact with avian influenza viruses in the environment	0.7	
University of Guatemala for implementing public health programs and strengthening public health science		0.1
University of Maryland for mechanisms of influenza A virus transmission in ferrets	0.2	0.1
Vietnam Veterans of America Foundation used as mechanism to build capacity in Indonesia	0.5	
CDC Lab Capacity Contracts:		
	0.1	
A. Daigger & Company, Inc. for Frezer Upright, Gel System, Power Supply, Pipet-Aid Portable, Spectrafuge Mini, Explosion, Analytical 210Gx, 1Mg, Isotmp + Ref, Vortex Geie 2, Toploader Mettler, Ceramic Striplate		0.3
Academy for Educational Development contract for health marketing communication services		
AFFYMETRIX Inc. contract for work station	0.2	
Agilent Technologies, Inc. for bioanalyzer laptop system	0.03	
Agilent Technologies, Inc. for Capillary Pump, Capillary Kit, 1200 Micro Well-Plate Sampler, Thermostat For Als/Fc/Spotter, 1200 Thermostatted Column Compartme, 1200 Series Instant Pilot Control M, 1200 External Contacts, 1200 Binary Pump, 1200 Fraction Collector, 1200 Thermostatted	0.1	
Agilent Technologies		0.2
America's Health Insurance Plans contract to provide Office of Genomics and Disease Prevention (OGDP) with vaccine safety services	1.2	
Amersham Biosciences contract for lab equipment	0.2	
Applera Corp. contract for 96 cap DNA analyzer	0.3	
Applera Corp. Contract for ABI PRISM® 3100 Genetic Analyzer to Applied Biosystems 3130xl System Upgrade with computer	0.03	
Applera Corp. contract for Applied Biosystems 7500 Real-Time PCR System	0.1	
Applera Corp. contract for array upgrade kit	0.2	
Applera Corp. contract for spectrometer package, discovery system, and accessories	0.7	
Applied Biosystems contract for QST, 7500 fast realtime, tower, computer equipment	0.1	
Applied Maths, Inc. for bionumerics module V4.6 sequencing software required for DNA sequence data analysis and DNA fragment analysis		0.03
Batelle Memorial Institute contract to supporty the project "Reaerosolization of Viruses from NIOSH-certified Filtering Facepiece Respirators"	0.1	
Be Group, LLC for display system	0.1	
Bearingpoint, LLC for technical support	0.1	
Beckman Coulter Inc. for Vi cell system equipment	0.1	
Beckman Coulter, Inc. for optima max ultracentrifuge	0.0	
Becton, Dickinson and Company for Bd Facsanto Ii Flow Cytometer Ivd	0.1	

Beta South Technology Inc. for Cyclor System Ii and Smart System	0.1	
Beta South Technology Inc. for cyclor system II and smart system	0.1	
Biacore Inc. contract for BIOCORE T-100 unit	0.3	
Biaera Technologies contract for PLA001a and other lab equipment	0.1	
Biaera Technologies Inc. for AEROMP automation interface module	0.1	
Biomedic Data Systems Inc. for Das 6007 scanner system	0.03	
Biomerieux Vitek, Inc. for easy mag extraction system	0.1	
Biomicro Systems Inc. for Maui 12 Bay Hybridization System	0.04	
Bio-Rad Laboratories, Inc. for freight	0.1	
Bio-Rad Laboratories, Inc. for mini opticon	0.02	
Bioteam, Inc. for Bioteam Inquiry	0.02	
BL Seamon Corp. contract to coordinate and manage 2007 summit meeting for emergency legal preparedness and public health	0.1	
Booz Allen Hamilton Inc. contract to provide evaluation of pandemic influenza operational plan	0.3	
Carl Zeiss Microimaging Inc. contract for microimaging equipment	0.3	
Cellular Technology Ltd for Ctl-Immunospot S5 microanalyzer	0.1	
Chickasaw Advisory Services LLC for pandemic influenza project, Task E	0.03	
Cni Construction, LLC for supplies/services	0.03	
Columbus Instruments International Corp. for microcapnograph model 240	0.02	
Computer Sciences Corporation contract for worksite health promotion	0.2	
Consolidated Safety Services Inc. contract for bio-safety training for Federal employees	0.1	
Countertrade Products, Inc. contract for networking, computing and IT solutions	0.1	
Dataworks Development Inc. for Freezerworks Unlimited 2.0 software	0.02	
Dataworks Development Inc. for software network	0.02	
Db Consulting Group, Inc. for management consultation and technical support		0.1
Dell Marketing L.P. for 690 mini tower		0.02
Direct Dimensions, Inc. for 3-day custom training, polyworks software upgrade	0.04	
Drew Scientific, Inc. for analyzer	0.02	
Eaton Power Quality Corp. for uninterruptible power system	0.03	
EG&G Technical Services contract for scientific, professional and engineering support services for the National Personal Protective Technology Laboratory	0.7	0.1
Eksigent Technologies LLC contract for system, nano LC-2D HPLC and warranty	0.3	
Eksigent Technologies, LLC for Hplc system	0.1	
Environmental Systems Research Institute Inc. for license		0.03
Eppendorf North American, Inc. for Eppendorf centrifuge	0.1	
Fisher Scientific Company LLC for hazardous materials	0.1	
Georgia (Tbilisi) contract to provide pandemic influenza infrastructure support via cable/containing outbreaks		0.2
Global Technology Solutions contract for sunrack	0.2	
Goldbelt Raven Inc. contract for 171-000205 Bioplex 200	0.1	
Goldbelt Raven Inc. contract for bioanalyzer laptop system	0.03	
Goldbelt Raven Inc. contract for general purpose fisher undercounter	0.02	
Goldbelt Raven Inc. contract for i-cycler thermal cycler-96-well and Versadoc 5000 system	0.2	
Goldbelt Raven Inc. contract for Mj DNA engine	0.1	
Goldbelt Raven LLC contract for MJ Tetrad thermal cycler and alpha engine	0.1	
Goldbelt Raven LLC contract for MX 3005P QPCR system and service	0.1	
Goldbelt Raven LLC contract for Qiagen biorobot, equipment and installation	0.2	
Government Scientific Source Inc. contract for Elx405 microplate washer	0.02	
Government Scientific Source Inc. contract for gene pix scanner and desktop	0.1	
Government Scientific Source Inc. contract for M5 instrument w/ softmax pro, lap top bundle, agreement	0.1	
Government Scientific Source Inc. contract for Sakura Tissue Tek Auto TEC embedding	0.2	
Immix Technology Inc. for 300 GB, 120k RPM, Universal FC disk, appliance and software	0.1	
Johnson Controls Inc. for Cl18 vivarium readers	0.04	
Johnson Controls Inc. for Sa freezer lock	0.02	
JSJ and Associates for technical services		0.03
Klarquist Sparkman, LLP contract for technical services, option period 4	0.02	
Krackeler Scientific Inc. for air driven ultracentrifuge	0.02	
Krug Inc. contract for office furniture and equipment	0.1	
Lewis Allan Office Furniture contract for components	0.1	
Lewis Allan Office Furniture contract for office furniture and installation	0.1	
Lewis Allan Office Furniture contract for technical assistance, consulting, supplies, and equipment supporting laboratory capacity activities	0.04	
Lockheed Martin contract for Consultation Service, Facilitation Services, Project Management and Technical Support to the National Center for Infectious Diseases (NCID)	0.1	1.0
Lockheed Martin contract for COTPER DEOC staffing		0.2
Lockheed Martin contract for DSNS staffing		0.2
Lyme Computer Systems Inc. contract for mat lab for hi-throughput lab	0.1	
Matrix Science Ltd contract for mascot server, workstation, search toolbox, mascot toolbox	0.1	
McKing Consulting Corp. contract for management consultation and technical assistance	1.7	0.6
McKing Consulting Corp. contract to provide Office of Genomics and Disease Prevention (OGDP) with management consultation and technical assistance	0.04	
MPRI, Inc. contract to draft pandemic operational plan and provide operational support	6.6	3.5
Nanodrop Technologies Inc. contract for spectrophotometer	0.04	
National Academy of Sciences contract to provide research associates for the National Personnel Protective Laboratory (NPPTL)	0.1	
National Associates Inc. contract for public affairs specialist	0.1	
National Veterinary Services Laboratory contract to evaluate the circulation of influenza viruses in pigs		0.8

Northrop Grumman contract to develop and support the StarLIMS Laboratory Information Management Systems services	0.3	2.4
Northrop Grumman Information Technology contract for technical support of pan flu preparedness activities	0.2	
Nuair, Inc. contract for silicone sleeve connection kit, manual butterfly, thimble exhaust transition, tables and shipping	0.1	
Office Speciality Ltd. Contract for 366-66-Lu5F10	0.04	
Professional & Scientific Associates Inc. contract for international travel and logistical support services	0.1	
Progroup Instrument Inc. contract for Well Pro Liquid Handler	0.1	
Progroup Instrument Inc. contract for Well Pro WP 3000	0.1	
Protein Sciences Corporation contract for H7N2	0.02	
Qiagen Inc. contract for biorobot Ez1 workstation, for automated purification of nucleic acids from 1-6 clinical or forensic samples	0.1	
Research Triangle Institute contract for health marketing communication		0.1
Roche Diagnostics Corp. contract for genome sequencer 20 instrument	0.2	
Roche Diagnostics Corp. contract for instrument	0.03	
Roche Diagnostics Corp. contract for magna pure	0.1	
Roche Diagnostics Corp. contract for magna pure compact	0.03	
Roche Diagnostics Corp. contract for MagNaPure LC with light cyclor	0.2	
Sanyo Commercial Solutions contract for biomedical and lab refrigerators and freezers	0.02	
Sartorius Bbi Systems Inc. contract for biostat Ct	0.1	
Sartorius Corporation contract for Sartocoon Slice Benchtop System with 3.1L Tank (The Sartocoon Slice Benchtop is a basic cost effective Crossflow filtration system for small Micro and Ultrafiltration applications.)	0.02	
Society for Public Health Education contract for Hhp Supplement	0.1	
Southeast Poultry Research Lab contract to identify methods to prevent, reduce and/or detect transmission of H5N1 HPAl virus in poultry and swine		0.4
STARLIMS Corp. contract for StarLIMS Enterprise Development Kit, Implementation Services and Entries	0.2	1.2
Sudan contract to provide pan flu infrastructure support via cable/containing outbreaks		0.1
Tephinet, Inc. for the development of international surveillance systems		0.3
The Scripps Research Inst. Contract for influenza binding assays	0.4	
Thermo Electron Corp. contract for LTQ ORBITRAP/ESI bundle	0.5	
Thermo Electron Corp. contract for LTQ ORBITRAP/ESI bundle	0.6	
Thermo Electron Corp. contract for mezzanine, single large shelf	0.03	
Thermo Electron Corp. contract for TSQ Quantum Ultra Ion		0.3
Thermo Fisher Scientific (Asheville) LLC contract for 75004377	0.1	
Thermo Forma Inc. contract for Model 8607	0.04	
Tkc Integration Services LLC contract for Spectra T50	0.02	
Total Solutions Inc. contract for support services		0.5
Tsi Incorporated contract for 3321 aerodynamic particle sizer	0.04	
UNICOR Federal Prison Industries, Inc. for 150 Black Fabric Chairs	0.1	
University of Virginia contract for pediatric serum survey	0.03	
USDA-ARS contract for antigenic, molecular, and pathogenesis assessment of swine influenza (SIV) isolates		0.7
Vashaw Scientific Inc. contract for 14.9Cv.Ts5.025	0.1	
Verizon contract to support CDC-wide Audio Web Conference		0.1
Veterans Administration contract for non-research support		0.2
Waters Corp. contract		0.4
Waters Corp. contract for MS system, software and equipment	0.6	
Waters Corp. contract for solvent mgr. warranty, sample mgr. warranty, acquity uplc	0.1	
Westwood Computer Corp. contract for computer equipment	0.2	
Xenogen contract for IVIS SYSTEM 120V	0.3	
Cumulative Obligations, Lab Capacity	48.8	25.7
Unobligated Balances, Lab Capacity	1.2	4.3
BIOSENSE	35.0	0.0
CDC Travel & Personnel Costs associated with Biosense	1.2	
CDC Various contracts and IAAs under \$75,000 each	0.4	
CDC Biosense Contracts:		
America's Health Insurance Plans AREF for improved diagnostics for viral causes of infectious diseases	2.1	
Atlanta Veteran's Affairs Medical Center for epidemiologic data manager	0.2	
BearingPoint for management support	1.4	
Biosense Support Cable for Global Disease Detection in China	0.1	
Dataline Inc. contract for data hardware and software for DISS biosense infrastructure	1.5	
Lockheed Martin Services Inc. contract for technical support of pan flu preparedness activities	0.5	
McKing Consulting Corp. contract for DEPR Management Consultation for Biosense Infrastructure Support	0.3	
Northrop Grumman Information Technology contract for technical support of pan flu preparedness activities	3.4	
STARLIMS Corp. contract for StarLIMS Enterprise Development Kit and Implementation services	0.4	
Total Solutions Inc. contract for technical support of pan flu preparedness activities	0.1	
Unisys Corp. contract for equipment and supplies for DEPR Biosense Infrastructure Support	1.1	
Unisys Corp. contract for Technical assistance for DISS Biosense Infrastructure Support	0.5	
CDC Biosense IAA's:		
Constella IAA for Recruitment and Implementation of Data Sources for BioSense Application	4.9	
DEPR Healthcare IAA for IT Standard Integration	0.4	
FEDSOURCE IAA for technical assistance to infectious disease pathology	0.1	
Gartner IAA for Independent Verification Validation of the BioSense Program	1.6	

GSA - Northrup and CSC IAA to develop and Support Decision System Specific to Influenza for use in the BioSense Application-Federal Information Systems Support (FISSP)	0.5	
GSA IAA to build and support the Secure Data Network	0.6	
GSA IAA to develop and Support Decision System Specific to Influenza for use in the BioSense Application-Enterprise Information and Technical Infrastructure Technical Services (EITITS)	1.6	
GSA IAA To Fund the Epidemiology Career Training Program (ECTP)	0.4	
National Retail Data Monitoring (NRDM) IAA to Access BioSurveillance Relevant Information from Over the Counter Retail Data Sources	0.5	
Per Se IAA to access biosurveillance relevant information for pharmaceutical data sources	0.6	
CDC Biosense Grants:		
Association of American Medical Colleges grant for program improvements for schools of public health	0.1	
Association of Public Health Laboratories grant for National Laboratory Training Network and Management Information Systems	1.8	
Association of Schools of Public Health, Inc. grant for the improvement of interaction between PHAS and PPHS	0.3	
ASTHO grant for Nursing and Epidemiologist Cooperative Agreement to Enhance BioSurveillance Capabilities	0.7	
International Society of Disease Surveillance (ISDS) grant to Enhance the Capacities of Disease Surveillance	0.6	
Johns Hopkins University	0.3	
Missouri State Department of Health and Senior Services	0.1	
NAPHSIS Foundation Inc. grant for vital statistics re-engineering program	0.7	
South Carolina State Department of Health	0.3	
University of Pittsburgh at Pittsburgh	0.3	
CDC Biosense Grants for population-based domestic surveillance:		
California	0.1	
Colorado	0.1	
Connecticut	0.1	
Georgia	0.1	
Maryland	0.1	
Minnesota	0.3	
New Mexico	0.1	
New York	0.2	
Oregon	0.1	
Tennessee	0.1	
CDC Biosense Grants for population-based surveillance for influenza among children:		
Cincinnati Children's Hospital	0.3	
University of Rochester	0.3	
Vanderbilt University	0.3	
Cumulative Obligations, Biosense	31.4	0.0
Unobligated Balances, Biosense	3.6	0.0
RAPID TESTS FUNDING	27.0	50.0
CDC Influenza Reagent Resource		
American Type Culture Collection contract for IRR - Quantity A		2.4
Enhancements/Management Costs		
CDC Travel and Personnel Costs associated with Rapid Tests	0.9	0.0
Northrop Grumman Information Technology, Inc. contract for technical support of rapid testing activities	0.2	
Unisys Corporation contract for prove portfolio management support	0.4	
University of Nebraska contract for the evaluation of PEDPPI	0.4	
VA IAA for purchase of antiviral drugs to be used for prophylaxis of CDC personnel to ensure sustainability of CDC's capability to do rapid testing to confirm influenza diagnoses and genotype influenza virus isolate during a pandemic	0.04	
Verizon contract to support CDC-wide Audio Web Conference	0.3	
CDC Various contracts and IAAs under \$75,000 each	0.2	0.04
Enhancements/Management Costs Total	2.4	0.04
RT-PCR		
CDC Travel and Personnel Costs associated with Rapid Tests	0.9	
A. Daigger And Company, Inc. contract for combi refrigfreeze 2 door 115V	0.01	
Agilent Technologies, Inc. contract for 2100 Bioanalyzer	0.02	
APHL contract for National Laboratory Training Network & Management Information Systems	1.1	1.0
Applied Biosystems contract for 7500 fast real time PCR	0.04	
Applied Biosystems contract for Tf Bdt V.3.1 Rx-1000 Seq. Buffer	0.02	
Applied Biosystems contract for Tf, Na-Star Influenza Nird Kit	0.02	
Beckman Coulter, Inc. contract for Msa for Beckman Fx	0.02	
Corbett Robotics Inc.contract for 650H-300	0.04	
DOD IAA for HHS/CDC Influenza Diagnostics Enhancement Research and Development	1.3	2.5
Eppendorf North America, Inc. contract for Epmotion 5075 Lh Pc-Control Comp	0.1	
GE Healthcare Bioscience Bioprocess Corp. contract for Exosap-It (2000 Rxn)	0.01	
Goldbelt Raven LLC contract for Stratagen Mx 3005 Real-Time Per Mac	0.1	
Government Scientific Source Inc. contract for Cas-1200 Per Liq Handling Sys	0.1	
Government Scientific Source Inc. contract for hardware and software	0.1	
Intermountain Scientific Corporation contract for capless microcentrifuge tubes 1.7 mL	0.01	
Marshfield Clinic Research Foundation grant for a trial to determine antiviral effectiveness	2.8	
McKing management consultation	0.2	
Medical Staffing Network, Inc. contract for lab workers	0.2	
Nanodrop Technologies, Inc. contract for Nd-1000 spectrophotometer	0.01	
OPM IAA for pandemic influenza capacity management support	0.2	
Promega Corporation contract for bench top pgem DNA markers	0.02	
Qiagen Inc. contract for Magattract Viral RNA M48	0.01	
Rainin Instrument, LLC contract for Edp+3 Elec Lts 88-Ch Pipet 0.5-10Ul	0.01	
Roche Diagnostics Corporation contract for Lightcycler 1.5 System+Laptop	0.02	
Thermo Fisher Scientific (Ashville) LLC		

Thermo Fisher Scientific (Ashville) LLC contract for Ult Frzr 17 U.R.DblDr 120	0.01	
Utech Products Inc. contract to Synergy 2 Multi-Detection Microplat	0.02	
CDC Various contracts and IAAs under \$75,000 each	0.3	
RT-PCR Total	7.5	3.5
Point of Care		
CDC Travel and Personnel Costs associated with Rapid Tests	0.2	
Cepheid contract for advanced development of new or improved in vitro diagnostic products	2.4	1.0
DOD Army Research Office for HHS/CDC influenza diagnostics enhancements research and development		1.1
DOD IAA for HHS/CDC Influenza Diagnostics Enhancement Research and Development	1.4	
Government Scientific Source contract for hardware and software	0.1	
International City/County contract for service	0.3	
Iquum LLC contract for advanced development of new or improved in vitro diagnostic products	3.8	
Meso Scales Diagnostic LLC contract for advanced development of new or improved in vitro diagnostic products	0.7	4.4
Midwest Research Institute, Inc. contract for quarterly report	0.3	
Nanogen Inc. contract for advanced development of new or improved in vitro diagnostic products	4.5	4.3
Northrop Grumman Information Technology, Inc. contract for technical support of rapid testing activities	0.2	
OPM IAA for pandemic influenza capacity management support	0.2	
Podziba, Susan contract for public engagement demonstration pro	0.3	
The Keystone Center contract for service	0.2	
Zeptomatrix Corporation contract to establish repository	0.8	
Zeptomatrix Corporation to provide influenza-related reagents and resources	1.5	
CDC Various contracts and IAAs under \$75,000 each	0.3	
Point of Care Total	17.0	10.8
Cumulative Obligations, Rapid Test	26.9	16.7
Unobligated Balances, Rapid Test	0.1	33.3
LIBRARY OF REFERENCE STRAINS FUNDING		
CDC Travel and Personnel Costs associated with Library of Reference Strains		2.3
CDC Various contracts and IAAs under \$75,000 each		2.2
CDC Influenza Reagent Resource		
American Type Culture Collection contract for IRR - Quantity A		2.4
CDC Library of Reference Strains Contracts:		
A. Daigger And Company, Inc. contract for microcentrifuge with rotor		0.01
Affymetrix Inc. contract for geno chip human genome		0.02
Affymetrix Inc. contract for Hyb Oven And F8450		0.1
Amaxa, Inc. contract for Aad-1001S Nucleofector li Device		0.01
Amaxa, Inc. contract for Nucleofector li Device		0.01
Applera Corporation contract for primer express license		0.01
Applied Defense Research contract for analysis of 100 and 900 samples		0.8
Association of Public Health Laboratories contract for clinical laboratory training program		0.5
Becton, Dickinson And Company contract for Bd Lsr li 3-Laser System		0.4
Benchmark Biolabs, Inc. Clinical Safety and Challenge Study		0.1
Biaera Technologies LLC contract for Cha004 Custom Rodent Inhalation Challenge		0.03
Biodiscovery, Inc. contract for Array Image Analysis Software		0.01
Bioreliance Corp. contract for production of master and working banks of mammalian cell lines under cGMP conditions		0.1
Bio-Tek Instruments, contract for Elx405Vrs		0.04
Bio-Tek Instruments, contract for Elx405Vrs microplate washer		0.03
Carl Zeiss Microimaging Inc. contract for Axio Observer A1 12V/100W Kit		0.1
Carl Zeiss Microimaging Inc. contract for Axio Observer Z1 Motorized Microscope		0.1
Carl Zeiss Microimaging Inc. contract for Axioimager Microscope		0.03
Charles River Laboratories, Inc. contract for four strains of female mice		0.1
Dell Marketing L.P. contract for 745 Minitower		0.01
Dell Marketing L.P. contract for Clin 1300, Optiplex 745 Minitower		0.01
Dell Marketing L.P. contract for Intel Core2 Extreme Processors		0.02
Dell Marketing L.P. contract for laptop		0.00
Dell Marketing L.P. contract for Optiplex 745 Minitower		0.02
Dell Marketing L.P. contract for Pvt Lto-4 Tape Drive		0.01
DOE contract for health care capacity and surge		0.2
Emory University contract for sialoglycan beads		0.2
Emtec Federal, Inc. contract for computer equipment and monitors		0.01
Excel Technologies, Inc. contract for Ts100-F W/Trinoc Iso		0.01
Fluidigm Corporation contract for Tpz-Fid Fid Crystallizer System		0.2
GE Healthcare Bioscience Bioprocess Corp. contract for Decyder V 6.5 Add 1 User License		0.04
GE Healthcare Bioscience Bioprocess Corp. contract for Flow Cell Air-925		0.1
Government Scientific Source Inc. contract for 77888-200 Centrifuge 5415D		0.1
Government Scientific Source Inc. contract for Cfa01M2230-03		0.01
Infotech Biosystems International contract for Im-250 2.5Mm Strip Cutter		0.01
Kemp Biotechnologies Inc. contract for 20 Mg of Recombinant IgG For H5 HA		0.01
Krackeler Scientific Inc. contract for Centrifuge, Thermo Iec		0.01
Lab Products Inc. contract for Bioclean		0.01
LSO-Low Environmental Equipment Co Inc. contract for Lab Refrigerator With Chart Rec/Ala		0.01
Luminex Corporation contract for Luminex Software upgrade kit		0.01
Marcon International (USA) contract for Vwr Freezer, Up 23 Cuft -86		0.1
Mcking Consulting Corporation contract for management consultation		0.03
New Brunswick Scientific Co., Inc. contract for Innova Model 4230 Refrigerated Stac		0.02
New Brunswick Scientific Co., Inc. contract for Innove Model 44R Refrigerated Incub		0.1
Nexcelom Bioscience LLC contract for Cellometer T4 System		0.01
Professional & Scientific Associates Inc. contract for international travel and logistical support		0.01
Progroup Instrument Inc contract for Well Pro Wp3000 Liquid Handler		0.02
Protein Sciences Corporation contract for recombinant HS H5N1		0.01

Qiagen Inc. contract for Biorobot M48		0.1
Rainin Instrument, LLC contract for Pipet-Lite Lts Magnetic Assist Pipe		0.02
Roche Diagnostics Corporation contract for magna lysar		0.01
Sanyo Commercial Solutions contract for -150C Cryogenic Freezer		0.02
Specialty Gases Southeast, Inc. contract for freezer		0.01
Synoptics Inc. contract for 05-Gbox-Hr		0.01
The Scripps Research Institute contract to provide draft of written protocol		0.3
Thermo Fisher Scientific (Ashville) LLC contract for Hera Cell Co2Incubator		0.01
Thermo Fisher Scientific (Ashville) LLC contract for Slc-4000 Fixed Angel Composite Roto		0.01
Thermo Forma Inc. contract for lab equipment		0.2
Triple F Farms Inc. contract Ferrets - Influenza A And B Viruses		0.2
TSI Incorporated contract		0.1
VWR International, Inc. contract for Animal Sera, Hyclone		0.01
Wake Forest University contract for pandemic influenza PPE effectiveness study		0.7
CDC Library of Reference Strains Grants for Emerging Infections Programs:		
California		0.2
Colorado		0.2
Connecticut		0.2
CSTE grant for development of State-level surveillance systems and epi training programs		0.3
Georgia		0.2
Maryland		0.2
Minnesota		0.1
New Mexico		0.2
New York State		0.3
Oregon		0.2
Tennessee		0.2
Cumulative Obligations, Library of Reference Strains	0.0	14.5
Unobligated Balances, Library of Reference Strains	0.0	2.4
DIAGNOSTIC REAGENT STOCKPILE FUNDING		
	0.0	13.0
CDC Travel and Personnel Costs associated with Diagnostic Reagent Stockpile		1.4
CDC Various contracts and IAAs under \$75,000 each		0.6
CDC Influenza Reagent Resource		
American Type Culture Collection contract for IRR - Quantity A		2.4
CDC Diagnostic Reagent Stockpile Contracts:		
Accurate Chemical & Scientific contract for YCC34012 Receptor Destroying Enzyme		0.02
Applera Corporation contract for Na-Star Influenza Nird Kit		0.1
Applied Biosystems contract for Na-Star Influenza Nird Kit		0.2
Bioreliance Corp. contract for cell bank testing		0.1
Biotech Research Technologies contract for dual-labeled probe		0.02
Biotech Research Technologies contract for Influenza Primer/Probe Kits		0.2
Caliper Life Sciences, Inc. contract for Ht Dna 12K Labchip Kit		0.01
Caliper Life Sciences, Inc. contract for Labchip 90 Automated Priming Statio		0.01
Carl Zeiss Microimaging Inc. contract for Axiovert 40 C Stand		0.03
Dell Marketing L.P. contract for Optiplex 745 Minitower		0.01
Fisher Scientific Company LLC contract for Shaker, Incub, Excella E-24		0.01
Goldbelt Raven LLC contract for Rotor-Gene 6000		0.04
Government Scientific Source Inc. contract for Ptc0240 Tetrad2 Chassis		0.03
Invitrogen Corporation contract for Superscript Iii Platinum One-Step R		0.02
J L S Research contract for 201 To 400 Dozen Per Week		0.1
Kuhl Corp. contract for Azyss960-110 W/Cm 48 Trays		0.01
Lab Depot, Inc. contract for Code Reader 3 Scanner		0.02
Lectinity Holdings, Inc. contract for New5Ac Fluoregenic Substrate (5 Gra		0.02
Mason Box Company contract for World Health Organization boxes		0.01
Nanodrop Technologies, Inc contract for 8 Sample Spectrophotometer-Nanodrop		0.02
Perkinelmer Las, Inc. contract for Victor V With 5-Techs		0.1
Professional & Scientific Associates Inc. contract for international travel & logistical support services		0.03
Progroup Instrument Inc. contract for Wellpro Wp3000 Liquid Handler		0.02
Sigma-Aldrich Corporation contract for P/N M8639-Conf		0.01
The Mathworks Inc. contract for Matlab Distrib Computing Engine 16P		0.02
The Mathworks Inc. contract for P2187 Biotech Advisory Services		0.02
Thermo Fisher Scientific (Ashville) LLC contract for Thermo Model 8606 -86C Upright Freezer		0.01
Virginia Commonwealth University contract for serum survey funding		0.03
CDC Diagnostic Reagent Stockpile Grants for Epidemiology and Laboratory Capacity for Infectious Diseases:		
Alabama		0.1
Alaska		0.2
Arizona		0.1
Arkansas		0.1
Chicago		0.1
Colorado		0.1
Connecticut		0.1
Delaware		0.1
District of Columbia		0.0
Florida		0.1
Georgia		0.03
Hawaii		0.2
Houston		0.1

Idaho		0.1
Illinois		0.1
Indiana		0.1
Iowa		0.2
Kansas		0.1
Kentucky		0.1
Louisiana		0.2
Maine		0.1
Maryland		0.1
Massachusetts		0.1
Michigan		0.1
Minnesota		0.1
Mississippi		0.1
Missouri		0.1
Montana		0.1
Nebraska		0.1
Nevada		0.03
New Hampshire		0.1
New Jersey		0.1
New Mexico		0.1
New York City		0.2
New York State		0.2
North Carolina		0.1
North Dakota		0.1
Ohio		0.03
Oklahoma		0.1
Oregon		0.1
Pennsylvania		0.1
Philadelphia		0.00
Public Health Foundation Enterprises		0.2
Puerto Rico		0.02
Rhode Island		0.1
South Carolina		0.1
South Dakota		0.05
Tennessee		0.1
Texas		0.1
Utah		0.1
Vermont		0.1
Virginia		0.1
Washington		0.1
West Virginia		0.1
Wisconsin		0.2
Wyoming		0.1
CDC Diagnostic Reagent Stockpile Grants:		
WHO grant for addressing emerging infectious diseases		0.5
CDC Diagnostic Reagent Stockpile IAAs:		
GSA IAA for Rent		0.9
Cumulative Obligations, Diagnostic Reagent Stockpile	0.0	12.7
<i>Unobligated Balances, Diagnostic Reagent Stockpile</i>	<i>0.0</i>	<i>0.3</i>
REAL-TIME ASSESSMENT FUNDING	0.0	7.0
CDC Various contracts and IAAs under \$75,000 each		0.0
Association of State and Territorial Health Officials (ASTHO)		0.3
Goolsby, Kimberly contract for recorder services		0.01
GSA IAA for March rental bill		0.1
National Association of County and City Health Officials (NACCHO)		0.2
National Safety Council		0.0
Unisys Corporation for LTOP payment		0.3
CDC Real-Time Assessment Grants for epidemiology and laboratory capacity for infectious diseases:		
Alabama		0.02
Alaska		0.1
Arizona		0.1
Arkansas		0.1
Chicago		0.1
Colorado		0.1
Connecticut		0.1
Council of State & Territorial Epidemiologists		0.3
Delaware		0.1
District of Columbia		0.1
Florida		0.1
Georgia		0.1
Hawaii		0.2
Health Research Inc./NYC Dept. of Health		0.2
Houston		0.1
Idaho		0.1
Illinois		0.1
Indiana		0.1

Iowa		0.2
Kansas		0.0
Kentucky		0.1
Louisiana		0.1
Maine		0.1
Massachusetts		0.1
Michigan		0.2
Minnesota		0.1
Mississippi		0.1
Missouri		0.1
Montana		0.1
Nebraska		0.1
Nevada		0.1
New Hampshire		0.1
New Jersey		0.2
New Mexico		0.1
New York City		0.2
North Carolina		0.1
North Dakota		0.1
Ohio		0.1
Oklahoma		0.1
Oregon		0.1
Pennsylvania		0.1
Philadelphia		0.01
Public Health Foundation Enterprises		0.2
Rhode Island		0.1
South Carolina		0.1
South Dakota		0.1
Tennessee		0.1
Texas		0.1
Utah		0.1
Vermont		0.1
Virginia		0.1
Washington		0.1
West Virginia		0.1
Wisconsin		0.2
Wyoming		0.1
Cumulative Obligations, Real-Time Assessment	0.0	7.0
<i>Unobligated Balances, Real-Time Assessment</i>	<i>0.0</i>	<i>0.1</i>
DOMESTIC SURVEILLANCE	0.0	10.0
CDC Travel and Personnel Costs associated with Domestic Surveillance		2.1
CDC Various contracts and IAAs under \$75,000 each		0.6
CDC Contracts for Domestic Surveillance:		
AHIP for elective activity H		1.0
Dell Marketing L.P. for Clin 1300, Optiplex 745 minitower		0.02
Emtec Federal Inc. for 19" Samsung 940Be Monitors		0.01
McKing Consulting Corporation for management consultation		0.5
Medical Staffing Network, Inc. contract for management consultation		0.1
Professional & Scientific Associates Inc. contract for international travel and logistical support services		0.2
Regents of the University of Michigan contract for longitudinal analyses		0.02
Unisys Corporation contract for MTDC II		0.7
CDC Grants for Domestic Surveillance:		
APHL grant for National Laboratory Training Network & Management Information Systems		0.4
Children's Hospital Medical Center in Cincinnati grant for enhanced surveillance for new vaccine preventable diseases		0.3
Council of State & Territorial Epidemiologists grant for development of State-level surveillance systems and epidemiology training programs		0.6
Harvard Pilgrim Health Care, Inc. grant for Joint Initiative in Vaccine Economics (JIVE) project		0.1
Iowa State University grant for pathogenesis of infections in swine with HPAI viruses		0.4
Marshfield Clinic Research Foundation grant for rapid analysis of influenza vaccine effectiveness		0.5
Mount Sinai School of Medicine of NYU grant for development of guinea pigs as mammals to evaluate the constantly changing influenza virus' ability to transmit		0.3
University of Maryland College Park grant for development of ferrets as mammals to evaluate the constantly changing influenza virus' ability to transmit		0.1
University of Rochester grant for new vaccine preventable diseases		0.3
Vanderbilt University grant for new vaccine preventable diseases		0.3
WHO grant for addressing emerging infectious diseases		0.1
CDC IAA's for Domestic Surveillance:		
DOD IAA for development		1.2
GSA IAA for programming service for the NIP		0.1
USN IAA for enhanced surveillance		0.1
VA IAA for improved diagnostics for viral causes of infectious diseases		0.2
Cumulative Obligations, Domestic Surveillance	0.0	9.9
<i>Unobligated Balances, Domestic Surveillance</i>	<i>0.0</i>	<i>0.1</i>
Cumulative Obligations, Other Domestic Activities	133.1	104.9

RISK COMMUNICATIONS FUNDING	33.0	18.0
ASPA Risk Communications Projects:		
American Institutes for Research contract for Message Content Development, Mapping and Evaluation	0.7	
Applied Marine Technology Inc. contract for media tabletop exercises	0.8	
CMS & The Washington Center IAA's for staff support for pandemic communications	0.1	
Glynn Technologies contract for pandemicflu.gov developer support	0.5	
Glynn Technologies contract for pandemicflu.gov developer support (IAA with FDA)	0.3	
Hewlett Packard, Sony, Digital Asset Management System, Avid Tech., ScheduALL, Prof. Products to support HHS-TV operations	0.9	
IGA: funds provided for state pandemic summits	1.3	
Oak Ridge Institute for Science and Education contract to exercise HHS Press Office pandemic response capabilities	0.4	
Ogilvy Public Relations Worldwide contract for strategic communications support	4.9	
Optik Communications contract for HHS-TV programming content and delivery (IAA with FDA)	2.8	
PandemicFlu.gov Equipment: Percussion license and various contracts under \$75,000	0.2	
State Pandemic Summits Travel	0.2	
WHO grant for international communications planning	0.2	
CDC Risk Communications Projects:		
CDC Travel and Personnel costs associated with Risk Communications	0.0	1.2
CDC Various Contracts & IAAs under \$75,000 each	1.0	1.2
Academy for Educational Development contract for the production and distribution of public service announcements	3.0	
Academy for Educational Development media buy plan for Nat'l Influenza Vaccination Week		1.5
ASPA/HHS IAA to support coordination of risk communications activities		0.3
Booz Allen Hamilton Inc. contract for IT professional support		0.1
CNI Construction LLC. Contract to build broadcast communications capacity needs	1.7	
D.B. Consulting for management consultation and technical assistance		0.9
D.B. Consulting for message development team		1.6
Danya International contract to develop national risk communication network		0.3
Danya International contract to test cdc.gov websites and e-health products		0.3
Dept. of Treasury, FedSource IAA for contracts for message development	0.4	
DOE IAA for Oak Ridge Operations to provide staff support	0.2	
DOE ORISE IAA for message testing	0.8	
E.M.T Associates Inc. contract for continuation of quality assurance, assessment, and evaluation	0.1	
Experian Information Solutions, Inc. contract to compile a national consumer database		0.2
Gerald Boyd DBA DB Consulting contract for management consulting and technical assistance	0.1	
GSA IAA for Federal info system support for development of PHIRE (public health information rapid exchange)		0.0
GSA IAA to Develop and Support Decision System Specific to Influenza	0.8	
Harvard University audience research and risk communications support (cooperative agreement with ASTHO)		0.9
Macro International Inc. contract for Health Marketing Communication Services		0.9
McKing Consulting Corp. contract for management consulting services	0.2	
McKing Consulting Corp. contract for mangement consulting for community continuity	0.1	
McKing Consulting Corp. contract for technical assistance to international partners		1.0
Morehouse College program to increase the knowledge/skills of disadvantaged minority students		0.4
NACCHO Pilot Project, grant for Phase II for public engagement for determining vaccine priorities		0.5
National Associates Inc. contract for public affairs services	0.1	
National Public Health Information Coalition cooperative agreement to support materials review, development, distribution and best practices identification	0.4	
NCPHIC grant for development and support of a National Public Health Information Infrastructure		0.3
Northrop Grumman Cits contract to extend influenza vaccination season		3.4
Northrop Grumman contract to obtain personnel to provide specific oversight of the emergency web sites	0.4	
Northrop Grumman Information Technologies contract for technical assistance	0.2	
Pearson Government Solutions Inc. contract for pandemic surge assistance	1.5	
Phoenix Air Group, Inc. contract for air charter services and individual mission flights	0.3	
Professional & Scientific Associates Inc. contract to support Crisis and Emergency Risk Communications (CERC) trainings	1.6	
Research Triangle Institute for knowledge, attitudes and beliefs among disproportionately affected populations		0.9
Science Applications International contract for technical support services	0.6	
Society for Public Health Education grant to build capacity to conduct risk communications and public education activities	0.0	
State Pandemic Influenza Summits	1.5	
The Ogilvy Group for professional services		0.1
Verizon contract to create ready state call technology to respond to public during pandemic		0.5
Westat, Inc. contract for health marketing services		0.9
Cumulative Obligations, Risk Communications	28.1	17.4
<i>Unobligated Balances, Risk Communications</i>	<i>4.9</i>	<i>0.6</i>
Total Cumulative Obligations	3,169.7	1,893.1
<i>Total Unobligated Balances</i>	<i>150.3</i>	<i>376.9</i>
<i>Transfer to USAID</i>	<i>0.0</i>	<i>30.0</i>
Total HHS Pandemic Influenza Supplemental Funding	3,320.0	2,270.0