



Speaker Won Pat <speaker@judiwonpat.com>

MESSAGES AND COMMUNICATIONS: NOTICE OF FEDERAL GRANT APPLICATION FOR DPHSS (163N)

Speaker Won Pat <speaker@judiwonpat.com>
To: Guam Legislature Clerks Office <clerks@guamlegislature.org>

Fri, Aug 8, 2014 at 1:17 PM

8/8/2014/8/2014 Guam State Clearinghouse

Federal Grant Application from (DPHSS - CDCP) 32-14-1942
17008141163N *EMAILED

----- Forwarded message -----

From: **TrinaJae Apatang** <trinajae.apatang@guam.gov>
Date: Fri, Aug 8, 2014 at 12:51 PM
Subject: NOTICE OF FEDERAL GRANT APPLICATION FOR DPHSS (163N)
To: Speaker Won Pat <speaker@judiwonpat.com>

Hafa Adail Please see attached federal grant application for the DPHSS.

Kindest Regards,
Trinajae M. Apatang

32-14-1942
Office of the speaker
Judith T. Won Pat
Date 8.8.14
Time 11:20 PM
Received by [Signature]

Ufisinan I Etmás Ge'helo'Gi Liheslaturan Guåhan
Office of Speaker Judith T. Won Pat Ed.D.
Kumiten Idukasion yan Laibirihan Publeko
Committee on Education and Public Libraries & Women's Affairs
155 Hesler Place, Suite 201, Hagatna, Guam 96910
472-3586 Fax: (671) 472-3589
www.guamlegislature.com / speaker@judiwonpat.com

2014 AUG - 8 PM 1:23
Tel: (671)

2 attachments

- Notice Spkr 163N.docx
401K
- DPHSS 163N.pdf
3730K

1942



GUAM STATE CLEARINGHOUSE

P.O. Box 2950 Hagåtña, Guam 96932

Tel: (671) 475-9380

Website: www.gsc.guam.gov

Email: clearinghouse@guam.gov

EDDIE BAZA CALVO

I Maga'låhen Guahan

RAYMOND S. TENORIO

I Segundu Na Maga'låhen Guahan

Kate G. Baltazar

Administrator

August 08, 2014

HONORABLE JUDITH T. WON PAT, Ed. D.

Speaker gi I Mina'Trentai Dos Na Liheslaturan Guåhan

155 Hesler Place

Hagåtña, Guåhan 96910

Ref: Department of Public Health and Social Service's federal grant application for PPHF 2014 Immunization Capacity Building Assistance for Infrastructure Enhancements

Hafa Adai Madam Speaker,

This letter is to respectfully notify you the Guam State Clearinghouse (GSC) has received a federal grant application from the Department of Public Health & Social Services (DPHSS). The GSC has accepted the application, assigned the State Application Identifier (SAI) 17008141163N and has initiated the process for an area wide review. An abstract of the project is provided below.

Grantor: Centers for Disease Control and Prevention

Grant Title/ PPHF 2014 Immunization Capacity Building Assistance for
Infrastructure Enhancements

Project Title:

Details: Funding from this grant will be used towards ensuring that all Guam healthcare providers with Electronic Health Record (EHR) systems and other Immunizers are able to exchange and/or submit immunization information. DPHSS proposes to conduct an inventory system, review contracts for Provider EHR, establish an EHR infrastructure, establish a data use, provide an early adopter incentive, and provide technical support. Funding will also go towards paying out personnel and benefits, travel, supplies, and contractual costs. A total of \$480,385 will be for indirect charges.

Start Date: 09/01/2014

End Date: 08/31/2016

Federal Grant: \$ 1,164,413

GSC conducts area wide reviews and solicits comments through electronic communication and this notice is sent to you as a part of the review process. A digital copy of the grant proposal is attached for your perusal. Please submit any comments you may have pertaining to this proposal to Trinajae M. Apatang by **August 22, 2014**, via email at trinajae.apatang@guam.gov.

Dangkolo Na Si Yu'os Ma'åse',

Kate G. Baltazar

Administrator

Cc: File



GOVERNMENT OF GUAM

DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIPATTAMENTON SALUT PUPBLEKO YAN SETBISION SUSIAT



EDDIE BAZA CALVO
GOVERNOR

RAY TENORIO
LIEUTENANT GOVERNOR

JAMES W. GILLAN
DIRECTOR

LEO G. CASIL
DEPUTY DIRECTOR

AUG 06 2014
JUL 31 2014

MEMORANDUM



TO: Administrator, Guam State Clearinghouse
FROM: Director, Department of Public Health and Social Services
SUBJECT: PPHF 2014 Immunization Capacity Building Assistance for Infrastructure Enhancement Grant Application

Buenas yan Hafa Adai! Submitted herewith for your concurrent review is Guam's application for PPHF 2014 Immunization Capacity Building Assistance for Infrastructure Enhancements to Meet Interoperability Requirements financed in part by 2014 Prevention and Public Health Fund. The grant project is for two years which is expected to commence in September 2014. The first year project period will cover September, 2014 to September, 2015.

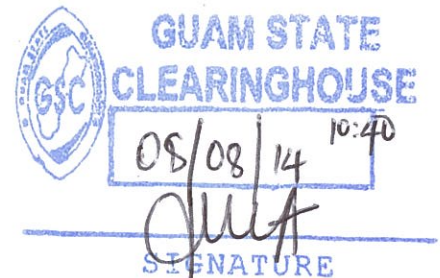
This new grant funding will assist the Department of Public Health and Social Services provide operational and infrastructure support for Guam's Immunization Registry, GuWebIZ, and our efforts to establish and maintain interoperability with provider electronic health record (EHR) systems. Appropriate activities will include support of EHR onboarding and data quality personnel, software and/or hardware intended to directly improve the function, operation, and capacity of IIS-specific systems, and services to develop, configure, and install such software/hardware.

Should you require additional information, please contact Ms. Josephine T. O'Mallan at 735-7142 or email josephine.omallan@dphss.guam.gov. Your favorable review is greatly appreciated.



[Signature]
JAMES W. GILLAN
Director

Attachments





GUAM STATE CLEARINGHOUSE

P.O. Box 2950 Hagåtña, Guam 96932
Tel: (671) 475-9380
Website: www.guamclearinghouse.com
Email: clearinghouse@guam.gov

EDWARD J.B. CALVO
I Maga'låhen Guahan

RAYMOND S. TENORIO
I Segundu Na Maga'låhen Guahan

Grant Project Application Notice of Intent to Apply for Federal Assistance GSC FORM REVISED 03/21/2012

Guam State Clearinghouse Use Only	
Date Received:	02/08/14
Received By:	QMA
SAI Number:	17008/4/163 N

Type of Application New Grant* Continuing Grant** Supplemental Grant** Other*

A.) DUNS Number B.) Date

C.) Applicant/Department Name

D.) Division

E.) Applicant Address

F.) Applicant/Department Point of Contact Information
Contact Person Name Phone Number

E-mail Address

G.) Due Date to Federal Agency H.) Federal Funds

I.) Non-Federal, Matching Funds
a.) Local
b.) In-Kind
c.) Other

a.) Grant
b.) Other

J.) TOTAL FUNDS

K.) CFDA/Federal Program Name

L.) Federal Agency Name

M.) Federal Agency Address

N.) For Continuing or Supplemental Grants, Please provide the following information:

a.) Initial Grant Period

b.) Guam State Clearinghouse SAI Number

c.) Grant Year This Application Impacts

O.) Has the Federal Funding Agency been notified? YES NO

P.) During which Fiscal Year will this program be implemented?

Q.) If the project requires local funding in addition to the federal funding requested, please specifically identify source and rationale:

R.) This program is: Budgeted - Please identify legal budget authority
 Non-Budgeted

S.) Will this program require the hiring of additional employees? Is YES, please provide the number of employees (both existing and new) and justification. YES - Existing New NO

T.) List Departments and Agencies that would be affected directly or indirectly by this application

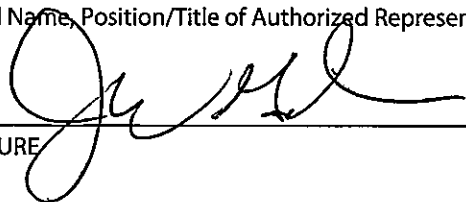
U.) Please provide a Project Summary with supporting documents if needed.

V.) Please answer the following:

- a.) Does this application require an Environmental Impact Study? YES NO
- b.) Will this application conflict with any existing law? YES NO
- c.) Is enabling legislation required? YES NO
- d.) Will the program require a maintenance of effort? YES NO
- e.) Are in-kind services allowed for this program? YES NO
- f.) Does this program allow an indirect cost rate to be applied? YES NO

SUBMITTED AND APPROVED BY:

Printed Name, Position/Title of Authorized Representative



SIGNATURE

Date



Grant Application Package

Opportunity Title:	PPHF 2014: Immunization Capacity Building Assistance fo
Offering Agency:	Centers for Disease Control and Prevention
CFDA Number:	93.733
CFDA Description:	Capacity Building Assistance to Strengthen Public Healt
Opportunity Number:	CDC-RFA-IP14-1404PPHF14
Competition ID:	NCIRD-NR
Opportunity Open Date:	06/16/2014
Opportunity Close Date:	07/31/2014
Agency Contact:	CDC Procurement and Grants Office (PGO) Technical Information Management Section (TIMS) Phone: 770-488-2700 E-mail: pgotim@cdc.gov

This opportunity is only open to organizations, applicants who are submitting grant applications on behalf of a company, state, local or tribal government, academia, or other type of organization.

Application Filing Name:

Select Forms to Complete

Mandatory

[Application for Federal Assistance \(SF-424\)](#)

[Project Abstract Summary](#)

[Disclosure of Lobbying Activities \(SF-LLL\)](#)

[Budget Information for Non-Construction Programs \(SF-424A\)](#)

[HHS Checklist Form PHS-5161](#)

[Project Narrative Attachment Form](#)

[Budget Narrative Attachment Form](#)

Optional

[Other Attachments Form](#)

Instructions

[Show Instructions >>](#)

This electronic grants application is intended to be used to apply for the specific Federal funding opportunity referenced here. If the Federal funding opportunity listed is not the opportunity for which you want to apply, close this application package by clicking on the "Cancel" button at the top of this screen. You will then need to locate the correct Federal funding opportunity, download its application and then apply.

Application for Federal Assistance SF-424

Version 02

* 1. Type of Submission: <input type="checkbox"/> Preapplication <input checked="" type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application	* 2. Type of Application: <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision	* If Revision, select appropriate letter(s): <input type="text"/> * Other (Specify) <input type="text"/>
---	---	---

* 3. Date Received: Completed by Grants.gov upon submission.	4. Applicant Identifier: <input type="text"/>
--	---

5a. Federal Entity Identifier: <input type="text"/>	* 5b. Federal Award Identifier: <input type="text"/>
---	--

State Use Only:

6. Date Received by State: 07/30/2014	7. State Application Identifier: <input type="text"/>
--	--

8. APPLICANT INFORMATION:

*** a. Legal Name:** Department of Public Health and Social Services

* b. Employer/Taxpayer Identification Number (EIN/TIN): 98-0018947	* c. Organizational DUNS: 855028700
--	---

d. Address:

* Street1:	123 Chalan Kareta
Street2:	<input type="text"/>
* City:	Mangilao
County:	<input type="text"/>
* State:	GU: Guam
Province:	<input type="text"/>
* Country:	USA: UNITED STATES
* Zip / Postal Code:	96913-6304

e. Organizational Unit:

Department Name: Public Health and Social Servi	Division Name: Public Health/BCDC
---	---

f. Name and contact information of person to be contacted on matters involving this application:

Prefix: Ms.	* First Name: Josephine
Middle Name: T.	
* Last Name: O'Mallan	
Suffix:	<input type="text"/>

Title: Administrator, BCDC

Organizational Affiliation: Department of Public Health and Social Services

* Telephone Number: 671-473-7142	Fax Number: 671-473-2104
---	---------------------------------

*** Email:** josephine.omallan@dphss.guam.gov

Application for Federal Assistance SF-424

Version 02

9. Type of Applicant 1: Select Applicant Type:

F: U.S. Territory or Possession

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

*** 10. Name of Federal Agency:**

Centers for Disease Control and Prevention

11. Catalog of Federal Domestic Assistance Number:

93.733

CFDA Title:

Capacity Building Assistance to Strengthen Public Health Immunization Infrastructure and Performance - financed in part

*** 12. Funding Opportunity Number:**

CDC-RFA-IP14-1404PPHF14

* Title:

PPHF 2014: Immunization Capacity Building Assistance for Infrastructure Enhancements to Meet Interoperability Requirements ? financed in part by 2014 Prevention and Public Health Funds

13. Competition Identification Number:

NCIRD-NR

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

Guam

*** 15. Descriptive Title of Applicant's Project:**

Guam DPHSS CBA for Infrastructure Enhancements to Meet Interoperability

Attach supporting documents as specified in agency instructions.

Add Attachments

Delete Attachments

View Attachments

Application for Federal Assistance SF-424 Version 02

16. Congressional Districts Of:
* a. Applicant * b. Program/Project

Attach an additional list of Program/Project Congressional Districts if needed.

17. Proposed Project:
* a. Start Date: * b. End Date:

18. Estimated Funding (\$):

* a. Federal	<input type="text" value="1,164,413.00"/>
* b. Applicant	<input type="text" value="0.00"/>
* c. State	<input type="text" value="0.00"/>
* d. Local	<input type="text" value="0.00"/>
* e. Other	<input type="text" value="0.00"/>
* f. Program Income	<input type="text" value="0.00"/>
* g. TOTAL	<input type="text" value="1,164,413.00"/>

*** 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**
 a. This application was made available to the State under the Executive Order 12372 Process for review on .
 b. Program is subject to E.O. 12372 but has not been selected by the State for review.
 c. Program is not covered by E.O. 12372.

*** 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)**
 Yes No

21. *By signing this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**
 ** I AGREE
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix: * First Name:
Middle Name:
* Last Name:
Suffix:

* Title:

* Telephone Number: Fax Number:

* Email:

* Signature of Authorized Representative: * Date Signed:

Application for Federal Assistance SF-424

Version 02

*** Applicant Federal Debt Delinquency Explanation**

The following field should contain an explanation if the Applicant organization is delinquent on any Federal Debt. Maximum number of characters that can be entered is 4,000. Try and avoid extra spaces and carriage returns to maximize the availability of space.

[Empty text input area for Applicant Federal Debt Delinquency Explanation]

Project Abstract Summary

Program Announcement (CFDA)

93.733

Program Announcement (Funding Opportunity Number)

CDC-RFA-IP14-1404PPHF14

Closing Date

07/31/2014

Applicant Name

Department of Public Health and Social Services

Length of Proposed Project

2

Application Control No.

Federal Share Requested (for each year)

Federal Share 1st Year

\$ 684,028

Federal Share 2nd Year

\$ 480,385

Federal Share 3rd Year

\$ 0

Federal Share 4th Year

\$ 0

Federal Share 5th Year

\$ 0

Non-Federal Share Requested (for each year)

Non-Federal Share 1st Year

\$ 0

Non-Federal Share 2nd Year

\$ 0

Non-Federal Share 3rd Year

\$ 0

Non-Federal Share 4th Year

\$ 0

Non-Federal Share 5th Year

\$ 0

Project Title

Guam DPHSS CBA for Infrastructure Enhancements to Meet Interoperability

Project Abstract Summary

Project Summary

The Department of Public Health and Social Services (DPHSS) of the Territory of Guam is submitting an application to PPHF 2014: Immunization - Capacity Building Assistance for Infrastructure Enhancements to Meet Interoperability Requirements - financed in part by 2014 Prevention and Public Health Funds (CDC-RFA-IP14-1404PPHF14). The FOA is timely for Guam since Guam Public Law 32-073 was passed in November 2013 and requires health care providers performing immunizations to submit vaccine administration information to the DPHSS.

The specific objective of the application is to ensure that all Guam healthcare providers with Electronic Health Record (EHR) systems and Other Immunizers are able to electronically exchange and/or submit immunization information to the GuWebIZ within two years.

The immunization data shared among the providers through the Guam State WebIZ Immunization Information System (IIS) Registry will help to ensure that immunizers will be able to improve immunizations coverage and the quality of IIS data, meet the standards and safeguards of the Centers for Disease Control and Prevention (CDC) for immunization data, promote efficiency in the health care system through use of Health Information Technology, and meet the requirements of Guam law, passed in 2013, to require immunizations to be reported.

The objective will be achieved through a systematic program that will engage and collaborate with providers to plan, design, and implement EHR and GuWebIZ IIS bidirectional interfaces. The interfaces will eliminate the need for the Provider with an EHR to key data in both the EHR and the WebIZ, enable Providers to have confidence that data in the GuWebIZ is up-to-date, and enable the WebIZ program to understand and respond to gaps in vaccinations.

The Guam DPHSS proposes to: (1) conduct an inventory of EHR systems used by Guam Immunizers; (2) review the contracts for Provider EHRs to determine whether the Provider vendor contract includes the HL7 software and technical support requirements to establish interoperability; (3) review the Provider EHR system and Other Immunizer infrastructure to assess the readiness and potential issues with implementing the HL7 interface and to ensure connectivity and security of data; (4) establish an infrastructure for implementing the EHR-WebIZ in the DPHSS; (5) establish a Data Use and Reciprocal Sharing Agreement for the electronic exchange of the Immunization data; (6) provide an early adopter incentive that will provide technical assistance to plan, design, develop, implement, test, and "Go Live" with the interface; and, (7) provide technical support for the interoperability capability. Guam DPHSS will also plan the interface the immunization data from the WebIZ into the Guam Clinical Data Repository (CDR) Provider Portal.

DPHSS is confident that the plan will result in the vast majority of Providers and Other Immunizers to complete the interface with the WebIZ within the two-year period of the grant.

Estimated number of people to be served as a result of the award of this grant.

160000

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C.1352

Approved by OMB
0348-0046

1. * Type of Federal Action: <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. * Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input checked="" type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. * Report Type: <input checked="" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change
--	--	--

4. Name and Address of Reporting Entity:

Prime SubAwardee

* Name: Department of Public Health and Social Services

* Street 1: 123 Chalan Kareta Street 2: _____

* City: Mangiloa State: GU: Guam Zip: _____

Congressional District, if known: GU _____

5. If Reporting Entity in No.4 is Subawardee, Enter Name and Address of Prime:

6. * Federal Department/Agency: Centers for Disease Control & Prevention	7. * Federal Program Name/Description: Capacity Building Assistance to Strengthen Public Health Immunization Infrastructure and Performance - financed in part CFDA Number, if applicable: 93.733
--	--

8. Federal Action Number, if known: _____	9. Award Amount, if known: \$ _____
---	---

10. a. Name and Address of Lobbying Registrant:

Prefix _____ * First Name N/A _____ Middle Name _____

* Last Name N/A _____ Suffix _____

* Street 1 _____ Street 2 _____

* City _____ State _____ Zip _____

b. Individual Performing Services (including address if different from No. 10a)

Prefix _____ * First Name N/A _____ Middle Name _____

* Last Name N/A _____ Suffix _____

* Street 1 _____ Street 2 _____

* City _____ State _____ Zip _____

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when the transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

* Signature: Completed on submission to Grants.gov

* Name: Prefix _____ * First Name James _____ Middle Name N. _____
 * Last Name Gillan _____ Suffix _____

Title: Director, DPHSS Telephone No.: 671-735-7102 Date: Completed on submission to Grants.gov

BUDGET INFORMATION - Non-Construction Programs

OMB Number: 4040-0006
Expiration Date: 06/30/2014

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Immunization - CBA Infrastructure Enhancement Year 1	93.733	\$	\$	\$ 684,028.00	\$	\$ 684,028.00
2. Immunization - CBA Infrastructure Enhancement Year 2	93.733			480,385.00		480,385.00
3.						
4.						
5. Totals		\$	\$	\$ 1,164,413.00	\$	\$ 1,164,413.00

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1) Immunization - CBA Infrastructure Enhancement Year 1	(2) Immunization - CBA Infrastructure Enhancement Year 2	(3)	(4)	
a. Personnel	\$ 100,656.00	\$ 104,470.00	\$	\$	\$ 205,126.00
b. Fringe Benefits	36,212.00	37,398.00			73,610.00
c. Travel	17,868.00	17,868.00			35,736.00
d. Equipment	0.00	0.00			
e. Supplies	4,200.00	4,200.00			8,400.00
f. Contractual	503,783.00	294,333.00			798,116.00
g. Construction	0.00	0.00			
h. Other	0.00	0.00			
i. Total Direct Charges (sum of 6a-6h)	662,719.00	458,269.00			\$ 1,120,988.00
j. Indirect Charges	21,309.00	22,116.00			\$ 43,425.00
k. TOTALS (sum of 6i and 6j)	\$ 684,028.00	\$ 480,385.00	\$	\$	\$ 1,164,413.00
7. Program Income	\$	\$	\$	\$	\$

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Standard Form 424A (Rev. 7-97)
Prescribed by OMB (Circular A -102) Page 1A

SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS
8. Immunization - CBA for Infrastructure Enhancements	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
9. Immunization - CBA Infrastructure Enhancement Year 2	0.00	0.00	0.00	0.00
10.				
11.				
12. TOTAL (sum of lines 8-11)	\$	\$	\$	\$

SECTION D - FORECASTED CASH NEEDS

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$ 684,028.00	\$ 171,007.00	\$ 171,007.00	\$ 171,007.00	\$ 171,007.00
14. Non-Federal					
15. TOTAL (sum of lines 13 and 14)	\$ 684,028.00	\$ 171,007.00	\$ 171,007.00	\$ 171,007.00	\$ 171,007.00

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) Grant Program	FUTURE FUNDING PERIODS (YEARS)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16.				
17. Immunization - CBA Infrastructure Enhancement Year 2	120,096.25	120,096.25	120,096.25	120,096.25
18.				
19.				
20. TOTAL (sum of lines 16 - 19)	\$ 120,096.25	\$ 120,096.25	\$ 120,096.25	\$ 120,096.25

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges: Total Funding Request: \$1,164,413	22. Indirect Charges: Indirect Rate: 21.27% applied to salaries only.
---	--

23. Remarks:

CHECKLIST

Public Burden Statement:

Public reporting burden of this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC,

Clearance Officer, 1600 Clifton Road, MS D-24, Atlanta, GA 30333, ATTN: PRA (0920-0428). Do not send the completed form to this address.

NOTE TO APPLICANT:

This form must be completed and submitted with the original of your application. Be sure to complete both sides of this form. Check the appropriate boxes and provide the information requested. This form should be attached as the last page of the signed original of the application. This page is reserved for PHS staff use only.

Type of Application: NEW Noncompeting Continuation Competing Continuation Supplemental

PART A: The following checklist is provided to assure that proper signatures, assurances, and certifications have been submitted.

- | | Included | NOT Applicable |
|--|-------------------------------------|-------------------------------------|
| 1. Proper Signature and Date | <input checked="" type="checkbox"/> | |
| 2. Proper Signature and Date on PHS-5161-1 "Certifications" page. | <input checked="" type="checkbox"/> | |
| 3. Proper Signature and Date on appropriate "Assurances" page, i.e., SF-424B (Non-Construction Programs) or SF-424D (Construction Programs) | <input checked="" type="checkbox"/> | |
| 4. If your organization currently has on file with DHHS the following assurances, please identify which have been filed by indicating the date of such filing on the line provided. (All four have been consolidated into a single form, HHS Form 690) | | |
| <input type="checkbox"/> Civil Rights Assurance (45 CFR 80) | | |
| <input type="checkbox"/> Assurance Concerning the Handicapped (45 CFR 84) | | |
| <input type="checkbox"/> Assurance Concerning Sex Discrimination (45 CFR 86) | | |
| <input type="checkbox"/> Assurance Concerning Age Discrimination (45 CFR 90 & 45 CFR 91) | | |
| 5. Human Subjects Certification, when applicable (45 CFR 46) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

PART B: This part is provided to assure that pertinent information has been addressed and included in the application.

- | | YES | NOT Applicable |
|--|-------------------------------------|-------------------------------------|
| 1. Has a Public Health System Impact Statement for the proposed program/project been completed and distributed as required? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Has the appropriate box been checked on the SF-424 (FACE PAGE) regarding intergovernmental review under E.O. 12372 ? (45 CFR Part 100) | <input checked="" type="checkbox"/> | |
| 3. Has the entire proposed project period been identified on the SF-424?..... | <input checked="" type="checkbox"/> | |
| 4. Have biographical sketch(es) with job description(s) been attached, when required?..... | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Has the "Budget Information" page, SF-424A (Non-Construction Programs) or SF-424C (Construction Programs), been completed and included? | <input checked="" type="checkbox"/> | |
| 6. Has the 12 month detailed budget been provided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Has the budget for the entire proposed project period with sufficient detail been provided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. For a Supplemental application, does the detailed budget address only the additional funds requested? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 9. For Competing Continuation and Supplemental applications, has a progress report been included? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

PART C: In the spaces provided below, please provide the requested information.

Business Official to be notified if an award is to be made

Name: Prefix: * First Name: Middle Name:
 * Last Name: Suffix:

Title:

Organization:

Address: * Street1:
 Street 2:
 * City:
 * State: Province:
 * Country: * Zip / Postal Code:

* Telephone Number:

E-mail Address:

Fax Number:

APPLICANT ORGANIZATION'S 12-DIGIT DHHS EIN (If already assigned)

-

PART C (Continued): In the spaces provided below, please provide the requested information.

Program Director/Project Director/Principal Investigator designated to direct the proposed project

Name:	Prefix: <input type="text" value="Mr."/>	* First Name: <input type="text" value="James"/>	Middle Name: <input type="text" value="W."/>
	* Last Name: <input type="text" value="Gillan"/>		Suffix: <input type="text"/>
Title:	<input type="text" value="Director"/>		
Organization:	<input type="text" value="Department of Public Health and Social Services"/>		
Address:	* Street1: <input type="text" value="123 Chalan Kareta"/>		
	Street2: <input type="text"/>		
	* City: <input type="text" value="Manqilao"/>		
	* State: <input type="text" value="GU: Guam"/>		Province: <input type="text"/>
	* Country: <input type="text" value="USA: UNITED STATES"/>		* Zip / Postal Code: <input type="text" value="96913-6304"/>
* Telephone Number:	<input type="text" value="671-735-7102"/>		
E-mail Address:	<input type="text" value="james.gillan@dphss.guam.gov"/>		
Fax Number:	<input type="text" value="671-734-5910"/>		

SOCIAL SECURITY NUMBER**HIGHEST DEGREE EARNED****PART D: A private, nonprofit organization must include evidence of its nonprofit status with the application. Any of the following is acceptable evidence. Check the appropriate box or complete the "Previously Filed" section, whichever is applicable.**

- (a) A reference to the organization's listing in the Internal Revenue Service's (IRS) most recent list of tax-exempt organizations described in section 501(c)(3) of the IRS Code.
- (b) A copy of a currently valid Internal Revenue Service Tax exemption certificate.
- (c) A statement from a State taxing body, State Attorney General, or other appropriate State official certifying that the applicant organization has a nonprofit status and that none of the net earnings accrue to any private shareholders or individuals.
- (d) A certified copy of the organization's certificate of incorporation or similar document if it clearly establishes the nonprofit status of the organization.
- (e) Any of the above proof for a State or national parent organization, and a statement signed by the parent organization that the applicant organization is a local nonprofit affiliate.

If an applicant has evidence of current nonprofit status on file with an agency of PHS, it will not be necessary to file similar papers again, but the place and date of filing must be indicated.

Previously Filed with: * (Agency)

on * (Date)

INVENTIONS

If this is an application for continued support, include: (1) the report of inventions conceived or reduced to practice required by the terms and conditions of the grant; or (2) a list of inventions already reported, or (3) a negative certification.

EXECUTIVE ORDER 12372

Effective September 30, 1983, Executive Order 12372 (Intergovernmental Review of Federal Programs) directed OMB to abolish OMB Circular A-95 and establish a new process for consulting with State and local elected officials on proposed Federal financial assistance. The Department of Health and Human Services implemented the Executive Order through regulations at 45 CFR Part 100 (Inter-governmental Review of Department of Health and Human Services Programs and Activities). The objectives of the Executive Order are to (1) increase State flexibility to design a consultation process and select the programs it wishes to review, (2) increase the ability of State and local elected officials to influence Federal decisions and (3) compel Federal officials to be responsive to State concerns, or explain the reasons.

The regulations at 45 CFR Part 100 were published in *Federal Register* on June 24, 1983, along with a notice identifying the

Department's programs that are subject to the provisions of Executive Order 12372. Information regarding PHS programs subject to Executive Order 12372 is also available from the appropriate awarding office.

States participating in this program establish State Single Points of Contact (SPOCs) to coordinate and manage the review and comment on proposed Federal financial assistance. Applicants should contact the Governor's office for information regarding the SPOC, programs selected for review, and the consultation (review) process designed by their State.

Applicants are to certify on the face page of the SF-424 (attached) whether the request is for a program covered under Executive Order 12372 and, where appropriate, whether the State has been given an opportunity to comment.

Project Narrative File(s)

* Mandatory Project Narrative File Filename:

To add more Project Narrative File attachments, please use the attachment buttons below.

Budget Narrative File(s)

* Mandatory Budget Narrative Filename:

To add more Budget Narrative attachments, please use the attachment buttons below.

Other Attachment File(s)

* **Mandatory Other Attachment Filename:**

To add more "Other Attachment" attachments, please use the attachment buttons below.

Project Narrative

a. Background

Guam is an island territory with a population of approximately 160,000 people based on the 2010 U.S. Census. Guam is located 3,801 *flight miles* from Hawaii, the closest state, and over 9,000 miles from Atlanta, GA. Depending on whether the continental U.S. is on Daylight Savings Time, Guam is 9 to 10 *time zones* and *a day away* from the East Coast of the United States. Travel costs to and from Guam are costly since there is only one U.S. carrier that provides direct flights from Guam to Honolulu.

Guam lacks locally-based information technology (IT) infrastructure and expertise, which has caused delays implementing needed interoperability projects to exchange information between Guam's Immunization Information System (IIS) and Provider Electronic Health Records (EHR). Currently there are 43 Immunization Provider Sites on Guam (see Table 1). The program's goal is to onboard all Guam Immunization Providers to submit immunization information to Guam IIS (known as GuWebIZ), prioritizing those provider sites with a high volume of immunization clients.

Guam's Desire for an Immunization Information System

Guam is committed to implementing a comprehensive and complete statewide Immunization Information System (IIS) as described in the Guam Immunization Registry Strategic Plan 2013-2017. DPHSS has been collaborating with the CDC to establish an IIS for 20 years.

Highlights of the commitment and efforts to establish a Guam IIS follow, and includes a brief summary of the Guam Health Information Technology (HIT), Guam Health Information Exchange (HIE), and Guam State Medicaid HIT Program activities:

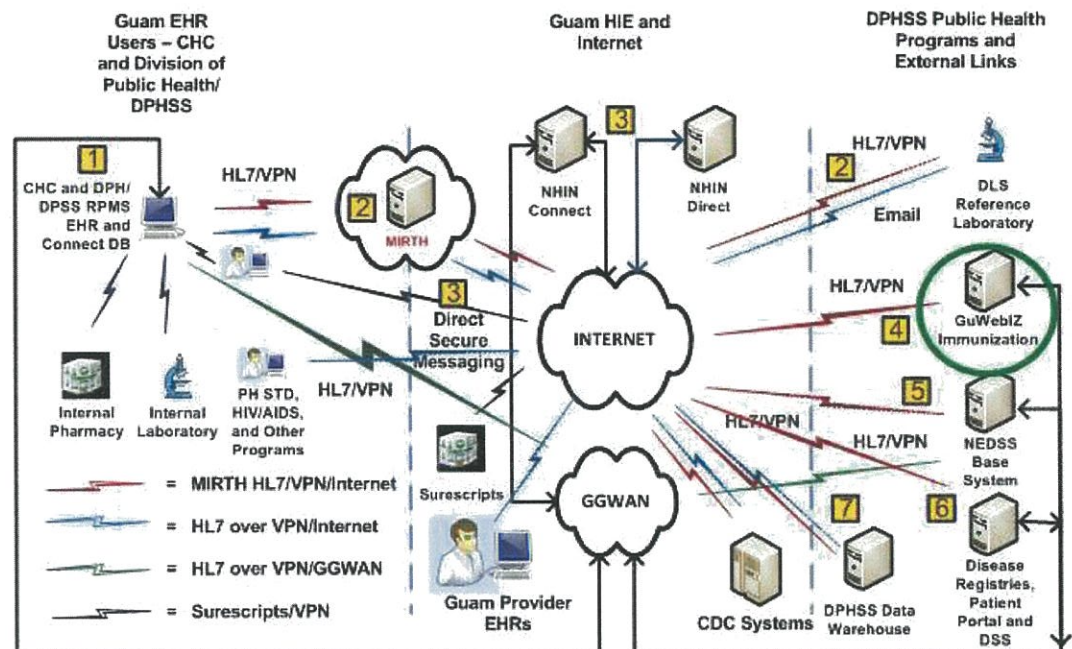
- 1994 - Guam was first selected by the CDC to be a pilot site for a "State" IIS in 1994, together with Maryland, Oklahoma, Utah, and the Virgin Islands. At that time, the CDC contracted with NISE-West, a DoD contractor, to develop software that was to be piloted by the individual sites with sharing of records electronically as the overall goal. CDC's intent was to develop a software program that could be tested, perfected, and then installed in other states/territories. However, for many reasons, including Y2K issues, the system was planned for replacement.
- 2007-2008 - CDC awarded the six U.S. affiliated Pacific Island jurisdictions, including Guam, funding to procure the IIS product (known as WebIZ) from the Envision Technology Partners Inc. The installation of the WebIZ commenced in Summer 2007 at the Guam DPHSS' Northern Regional Community Health Center (NRCHC). Guam WebIZ (GuWebIZ) was later installed at the Guam DPHSS' Southern Regional Community Health Center (SRCHC) and at Central DPHSS by Fall 2008.
- 2009 - The Health Information Technology for Economic and Clinical Health (HITECH) Act was passed. The HITECH Act includes Meaningful Use requirements for Public Health (PH) reporting but did not appropriate any funding for the PH agencies to

onboard EHRs to PH immunization, laboratory reporting, and/or syndromic surveillance systems. Further, at the time that the HITECH was passed, the GuWebIZ did not have the HL7 modules in place.

- 2011 - Guam was awarded funding to initiate the planning activities for an HIE. Since Guam is a territory, the total funds allocated for Guam to design, develop, and implement the HIE was only \$1.6 million, approximately \$2.4 million less than the smallest state. The focus of the Guam HIE program was on the exchange of clinical records through Direct Secure Messaging and Query-Based HIE. Public Health immunization, laboratory reporting, and syndromic surveillance reporting are not prioritized in the HIE, in part because of the limited resources of the HIE, the focus on exchange of clinical documentation, and because the DPHSS did not have information systems that were ready for health information exchange.
- 2011 – DPHSS constitutes an internal HIT committee with the assistance of the Hawaii-Pacific Regional Extension Center and initiates a review of public health information systems and workflows through an effort supported by the National Public Health Improvements Initiative (NPHII) program of the CDC.

Figure 1, below, shows the GuWebIZ Immunization System in DPHSS plans for Public Health and Guam HIE.

Figure 1



- 2012 - Guam eHealth Collaborative (GeHC) experiences delays with the delivery of an HIE and the Guam and the Office of the National Coordinator agree, in December

2012, with the termination of the vendor agreement and focus only on Direct Secure Messaging.

- 2013 – The Guam State Medicaid HIT Plan receives approval from the Centers for Medicare and Medicaid Services (CMS) to launch the Medicaid EHR Incentive program. However, the Guam Medicaid program and CMS agree to focus on the launch of the EHR program and HIT Implementation Advanced Planning Document. The Public Health HIE components are not included in IAPD.
- 2013 – Guam Public Law 32-073 passed to require health care providers performing immunizations to submit vaccine administration information to the DPHSS.
- 2013 - Data from the Centers for Medicare and Medicaid Services show that only a few providers have applied for Meaningful Use in 2013.
- 2013 – Responsibility for the Guam HIE program is transferred to the DPHSS for program administration. Guam remains committed to HIT and HIE even though funding for the HIE under the Office of the National Coordinator for Health Information Technology (ONC) ends.
- 2014 – Guam has completed the upgrade of the GuWebIZ, is in the process of finalizing the guidelines to implement the 2013 law, and has conducted preliminary outreach sessions with Providers to discuss the options for submitting data to the GuWebIZ. At the first stakeholders' session, technical and financial assistance to implement EHR-GuWebIZ interface was requested by several immunization providers because they lack the resources to implement the necessary enhancements.

The FOA to build capacity to enable interoperability between EHRs and the GuWebIZ is extremely timely for Guam and the DPHSS. DPHSS is committed to Healthy People 2020 goals for immunization and infectious disease and ensuring that age-specific immunizations are obtained by the Guam population for preventative health. Guam has shown its commitment to implementing a territory-wide GuWebIZ that will achieve these objectives. However, it needs financial resources to accomplish the tasks.

b. Approach

The goals of this proposal are to onboard all Guam Providers that have EHR systems to implement an HL7 interface with GuWebIZ and to use the GuWebIZ to improve the rate of immunizations to achieve population outcomes. To achieve this goal, the approach will be to enhance the existing program and operational infrastructure to support and incentivize the onboarding of the Providers; ensure the GuWebIZ systems and network infrastructure will be secure, support increased usage, and ensure resiliency of system; ensure data integrity; and generate timely and accurate information for patients, providers, and other users of the GuWebIZ. DPHSS is confident that with funding and execution of the proposed plan, the goal will be achieved.

i. Problem Statement

Despite the recent success in establishing legislation to require immunization reporting, the remaining challenges for the program include establishing EHR-IIS interoperability between immunization providers and DPHSS and technical infrastructure capability, onboarding the immunization providers, and performing data analytics.

Establishing an EHR-IIS Interoperability and Technical Infrastructure Capacity

DPHSS has initiated the communication with immunization providers on Guam to educate providers regarding immunization reporting requirements to DPHSS. At the operational level, there is a need for a dedicated full-time staff (Special Projects Coordinator – Programs and Operations Specialist) to work with providers to onboard with the GuWebIZ. Additionally, Guam also needs a Special Projects Coordinator (Health Informatician) with technical knowledge, skills, and abilities to perform data quality management activities to ensure accuracy and completeness of submitted immunization data and to respond to technical questions and/or problems.

Guam also needs to upgrade the GuWebIZ systems and network infrastructure to ensure that the system is capable of being operated should there be a failure. This is especially important because the GuWebIZ will be the single registry of all immunization data. In November 2013, the Government of Guam Data Center had a massive disk failure and lost four months of immunization data. A decision was made in January 2014 to relocate public health IT equipment and applications to the Central DPHSS facility and establish an in-house data center. The CDC has financed two servers for the Guam Immunization Program. However, there is a need for failover capability due to the need to maintain system operations.

Onboarding Providers

Guam requires technical assistance to (a) plan, conduct system assessments of Provider EHRs, (b) assist the Providers to plan, configure systems, establish secure telecommunication network links, test immunization transactions, and “go-live”; and (c) operational support for the system and EHR-GuWebIZ transactions. Guam plans to provide both technical and financial assistance for providers to onboard.

Immunization Data Analytics

Guam plans to conduct health analytics on the immunization data to ensure that the system is achieving its objectives and to assess gaps in immunizations. By the end of Year 1 of the grant, DPHSS plans to establish a dashboard which will post data about the immunization status of the population. The dashboard will initially be used internally by DPHSS staff to determine the progress made, and used to provide feedback to provider sites that have enrolled/onboarded into GuWebIZ.

ii. Purpose

The purposes of this program are based on the CDC Project Description and addresses the needs to (a) establish a program and technical infrastructure to ensure that all Guam providers with EHR systems are able to exchange immunization data on a routine basis with the GuWebIZ; (b) ensure that the immunization data is updated by the Guam immunization providers and select public and private schools, consistent with the opt-out provisions of the

GuWebIZ; (c) ensure that the technical infrastructure is robust, secure, and redundant so that information is available to providers and the population when needed; and, (d) that the value of the immunization data to providers and consumers are realized.

iii. **Outcomes**

At the end of the two year grant, DPHSS expects the following outcomes:

- **Personnel and Organizational Capability** – DPHSS will have the technical capability to support the operations and reporting of the GuWebIZ.

There will also be improved data processing efficiency and/or programmatic capacity to support data needs of the Immunization program. The personnel will be expected to maintain the interface between the GuWebIZ and the Guam Provider EHRs, ensure that the system is secure, generate data from the GuWebIZ, and trouble-shoot problems.

- **IIS Systems and Network Capacity** - DPHSS will have established a fully operational IIS capability to ensure that the GuWebIZ is able to routinely receive, consume, and supply immunization information to its stakeholders. The system and network will be upgraded to ensure that the increased volume of transactions and data will be capable of being processed by DPHSS.

The objective is to ensure that the GuWebIZ is able to receive and respond to immunization record updates and queries. Guam anticipates that there will be improved ability for the GuWebIZ to receive and process HL7 transactions and this will increase in the volume of immunization transactions submitted to the IIS using HL7 interfaces. There is also anticipated a reduction in the delays in processing the queries and/or data updates from providers.

- **Provider and Other Immunizer Onboarding** – The ultimate goal is to have all Guam Immunization Providers with EHR systems onboarded to and routinely exchanging data with the GuWebIZ, focusing first on providers immunizing a high volume of patients.

The measurement will be the number of providers that are onboarded, the number of immunization records in the GuWebIZ, and increase in the volume of immunization records queried using HL7 or the web interface of the GuWebIZ.

- **Data** – DPHSS expects that the percentage of the population with records in the GuWebIZ will increase from approximately 20% of the population to 80% of the population within the two years.
 - More timely data provided to providers/users: Improvement in the timeliness of receipt of immunization data to the IIS, as measured by the difference between date of immunization and date of record submission
 - Increased number of providers and provider sites submitted data to IIS from their EHR systems

- Increase in the number of immunization providers, including traditional medical offices, pharmacies, and non-traditional immunizers serving patients of any age (where legally allowed), who submit immunization data to the GuWebIZ and/or retrieve patient data from the GuWebIZ using their EHR systems
- Development and implementation of automated tools to support efficient onboarding of provider EHR systems to the IIS

There are two important data challenges.

First, the percentage of the population with records in the system may have some gaps. Guam has a significant military and veteran population that receives care at the Guam U.S. Naval Hospital and ancillary clinics for the active service population and at the Guam VA Community Based Outpatient Clinic (CBOC). Exchanging data with the DoD and the VA may be a challenge based on the historic discussions.

Second, although the patient coverage will increase, the immunization records may not be accurate since the issue of whether the Guam law requires the providers to exchange historic records remains an issue. DPHSS plans to meet with the Guam Department of Education (GDOE) to discuss two matters. First, DPHSS will seek to have the GDOE rely on the Guam Immunization Registry as the official database for school immunizations. If GDOE is successful in this, the expectation is that the Providers will either interface their EHR and/or key data into the GuWebIZ. Second, the DPHSS will discuss the possibility of requesting parents to authorize the GDOE to enter school immunization records into the GuWebIZ. This will help to increase the accuracy of a student immunization and resolve the FERPA issue.

iv. Strategy and Activities:

The strategy of the Guam Immunization Program has both short and long-term elements. In the *short term*, the program seeks to improve the efficacy of the data in the GuWebIZ since, as evidenced in studies by Groom¹ and Community Preventive Services Task Force, implementation of an IIS provides considerable value. The short term strategy is to ensure that the GuWebIZ technical infrastructure is in place and that the goal of onboarding all Providers that have EHRs is achieved through the implementation of a systematic program that will engage and collaborate with providers to plan, design, implement, test and go-live with the EHR and GuWebIZ IIS interfaces. The interfaces will initially focus on Providers sending data electronically from their EHRs to the GuWebIZ. This will eliminate the need for the Provider with an EHR to key data in both the EHR and the WebIZ, enhance confidence that data in the GuWebIZ is accurate and up-to-date, and enable the WebIZ program to generate information which permits providers and public health to respond to gaps in vaccinations.

¹ Holly Groom, et. al. Immunization Information Systems to Increase Vaccination Rates: A Community Guide Systematic Review

Guam seeks to incent the major providers and early adopters by providing incentive assistance for the onboarding process. The incentive will take the form of providing up to \$7,500 for vendor software and/or consulting services for the first 10 large providers to move forward with the implementation of the EHR-GuWebIZ interface. The second 10 providers will receive up to \$3,500 in incentive assistance. The rest of the providers will need to fully pay for their system interfaces with the GuWebIZ. The selection will be based on an application process to assess (a) estimated number of immunizations provided (40%); (b) number of immunizers (20%); (c) need for assistance (20%); and (d) commitment of provider staff resources (20%) to implement the interface.

The *long-term strategy* is to use the immunization information system to generate information to “(1) create or support effective interventions such as client reminder and recall systems, provider assessment and feedback, and provider reminders; (2) generate and evaluate public health responses to outbreaks of vaccine-preventable disease; (3) facilitate vaccine management and accountability; (4) determine client vaccination status for decisions made by clinicians, health departments, and schools; and (5) aid surveillance and investigations on vaccination rates, missed vaccination opportunities, invalid dose administration, and disparities in vaccination coverage.”²

Project Activities

The major project activities envisioned for this project include:

- **Establishing a Guam Immunization Registry Outreach Program for Onboarding Providers** – DPHSS will conduct outreach meetings through the Guam Medical Association and Guam Medical Society to inform and involve Providers.

The DPHSS will explain to the providers how to onboard with the GuWebIZ; interview and survey each Provider to assess the EHR system of the Provider and current system environment; review the agreement with the vendor of the Provider EHR; conduct teleconferences with the EHR vendor to assess the cost and readiness of the EHR system to exchange information; and prepare a summary plan to onboard the Provider. When the Provider has agreed to move forward with onboarding, the DPHSS will execute Data Use and Reciprocal Sharing Agreements with the Provider.

Onboarding support will be for both Providers that are pursuing Meaningful Use (MU) as well as Providers not involved in EHR Meaningful Use.

The onboarding program will provide technical support as well as a small financial assistance incentive to encourage the Providers to onboard. The assistance will be provided on an as-needed basis to cover costs of vendor technical assistance, software upgrades, or network upgrades.

- **Public Information Campaign** – DPHSS will inform and assist the public to understand the importance of immunizations and the Guam Immunization Registry.

² Community Preventive Services Task Force, J Public Health Management Practice, 2014, 00(00), 1–4.

DPHSS will emphasize that for parents and children, the GuWebIZ will provide a permanent immunization record and parents will also receive important reminders to keep up-to-date.

- **Core Data Elements** – DPHSS will review and assess the GuWebIZ to ensure that the GuWebIZ meets the 2013-2017 Core Data Elements of the Center for Disease Control and Prevention.
- **Upgrading an EHR-GuWebIZ Interoperability infrastructure** – DPHSS will ensure that including EHRs and GuWebIZ implement HL7 2.5.1 CDC standard for immunization data exchange and data quality controls (e.g. incoming data business rules engines).
- **Upgrading an IIS Systems and Network Infrastructure** – DPHSS will upgrade systems hardware/software/network capacity of the GuWebIZ to support the enhanced data processing, storage, and disaster recovery operational requirements created by increased GuWebIZ. The upgrade is needed to ensure that the GuWebIZ has capacity to securely receive, ingest, process, and supply immunization information to its stakeholders.
- **Immunization Analytics** – DPHSS will undertake immunization analytics to identify and inform the public of immunizations on Guam. Guam plans to identify the key metrics and provide a dashboard on the progress of the project through the DPHSS web site.

1. Target Populations

Guam DPHSS seeks to ensure that all Guam residents have age-specific immunizations. In terms of priorities, Guam seeks to focus on ensuring that all children are in the system. In terms of the priorities for the implementation of HL7 interfaces, special attention will be given to the healthcare Providers that serve large populations, including the Guam Memorial Hospital Authority, the new Guam Regional Medical City hospital that will open in October of 2014, the Guam Section 330 Community Health Centers, and the FHP TakeCare. By prioritizing the larger health care providers in Guam, it is anticipated that other medium and smaller providers will seek early adoption as well.

Guam will also work with the Guam Department of Education to determine whether the GDOE will adopt, as a policy, the use of the GuWebIZ for immunizations for school registration.

c. Applicant Evaluation and Performance Measurement Plan

Consistent with the CDC Evaluation and Performance Measurement Strategy, Guam DPHSS will undertake both formative and summative evaluations of this project and will submit a more detailed evaluation and performance measurement plan during the first six months of the project, required.

The formative evaluation will be undertaken by an external program reviewer working together with the DPHSS, local CDC representative, and the CDC Project Officer. The formative evaluation will be developed and reviewed by a Key Stakeholder Working Group. The

participants in the Key Stakeholders group are described in the Project Organization (next section).

The formative evaluation will focus on reviewing the process for planning, implementing, testing, and onboarding the Providers. Some of the key questions that will be asked include:

- Have the efforts to inform Providers been successful?
- Is the plan to onboard Providers clear and realistic?
- What can be done to improve the commitment to implement an interface?

The summative evaluation will focus on objective measures of success. Some of the key questions and indicators will include the following:

- How many large (3 or more) and small (3 or less) Providers or Immunizers been onboarded?
- How many pre-school children are in the GuWebIZ?
- How many K-12 students are in the GuWebIZ?
- What is the estimated proportion of student records that are in the GuWebIZ?
- How many times has the GuWebIZ been off-line and for how long?
- Has the GuWebIZ been used to create or support client reminder and recall systems, provider assessment and feedback, and provider reminders?
- Is the GuWebIZ used to facilitate vaccine management and accountability?
- What is the provider perception on the use of the GuWebIZ to determine client vaccination status?
- Has the immunization database been used to aid surveillance and investigations on vaccination rates, missed vaccination opportunities, invalid dose administration, and disparities in vaccination coverage? If so, how?

The information generated from the formative evaluation will help to undertake program corrections. The summative evaluation will help the DPHSS to understand the relative success of its efforts to fully implement the GuWebIZ. The evaluations will be summarized in reports posted on the Guam DPHSS Web Site.

d. Organizational Capacity of Applicants to Implement the Approach

DPHSS has the program capacity to plan and implement the project approach. The program will be under the Director of the DPHSS and the Chief Public Health Officer who are committed to Health Information Technology.

The Director of the Bureau of Communicable Diseases, who is also the HIE Coordinator for the DPHSS, and the Immunization Program Manager will lead the project and work closely with the CDC Immunization specialist assigned to Guam.

Technical assistance in planning with the Guam provider community, planning and implementing systems and network interfaces, and implementing the specific interfaces will be provided by the Telecommunications and Social Informatics (TASI) Research Program of the University of Hawaii (UH). DPHSS and the UH TASI have a broad Intergovernmental

Cooperative Agreement (ICA) where the UH TASI assists the Guam DPHSS in Health Information Technology, Health Information Exchange, and healthcare analytics.

UH TASI has a broad portfolio of Health Information Technology projects. UH TASI has served as the Hawaii-Pacific Regional Extension Center (HPREC) for the Pacific territories; implemented the CMS State Level Registry for the EHR Incentive program in Guam, CNMI and American Samoa; is implementing the open source Resource and Patient Management System (RPMS) in Guam, the CNMI, and Hawaii; and, undertaking big data analysis with an All-Claims Payers Database in Hawaii.

e. Work Plan (See Page 11 for Work Plan – FOA requires separate upload)

f. Sustainability Plan

The major infrastructure and interfaces with major providers will be completed through this grant. Thus, the program will not require as much resources to support the program on an ongoing basis unless new requirements for interoperability emerge. DPHSS will seek to establish two positions from the Legislature to support the Immunization interoperability project and immunization system and will seek additional grant funding opportunities (e.g. HITECH funding from CMS). DPHSS will also continue to explore the potential of Payers assisting through the “Medical Loss Ratio” provisions of the Affordable Care Act, although the July 16, 2014 decision by the Department of Health and Human Services regarding the application of the insurance rate review provisions may render this option moot.

Summary

Guam has been committed to establishing a Territory-wide immunization registry for 20 years. Given the passage of the HITECH Act in 2009, the Patient Protection and Affordable Care Act of 2010, and the Guam PL 32-073 which established the Guam Immunization Registry that requires providers to submit immunization information for everyone, Guam is positioned to have a complete and comprehensive immunization registry that will provide immense individual and public health benefits. Guam has a clear strategy and plan to achieve the objective of onboarding all providers with EHR systems to the Guam Immunization Registry within two years, understands the many challenges that will need to be confronted, but firmly believes that success will be achieved. Finally, Guam also believes that much of the same core infrastructure (e.g. DPHSS systems and networks) will also serve as the foundation for other Public Health reporting (e.g., syndromic surveillance, laboratory) and clinical document exchange for providers.

2-Year Budget Narrative

I. Salaries (Total Federal Request: \$ 205,126)

Year 1: \$100,656

Year 2: \$104,470

Position Title	Annual Salary	Time	Months	Amount Requested (Year 1)	Amount Requested (Year 2)	Total Amount Requested
Principal Investigator (JG)	\$74,096.00	0%	12.00	\$-	\$-	\$-
Project Director (JO)	\$65,648.00	0%	12.00	\$-	\$-	\$-
Project Manager (AA)	\$54,040.00	0%	12.00	\$-	\$-	\$-
Special Projects Coordinator (Health Informatician) - TBD	\$50,328.00	100%	12.00	\$50,328	\$52,235	\$102,563
Special Projects Coordinator (Program and Operations Specialist) - TBD	\$50,328.00	100%	12.00	\$50,328	\$52,235	\$102,563
Total Personnel				\$100,656	\$104,470	\$205,126

The proposed positions relate to all project strategies and activities further outlined in the Work Plan.

Job Description: Project Director (Josephine O'Mallan, Bureau of Communicable Disease Control Administrator)

No funds requested for this position.

As the Program Director, Ms. Josephine O'Mallan, who is also the primary lead for HIE for the DPHSS, will lead the project with the Immunization Program Manager, and work closely with the CDC. The Project Director (PD) will have overall responsibility for carrying out project activities and monitoring project deliverables. The PD will serve as Secretariat and convene stakeholders, working groups, vendors/contractors, and all partnering and affiliated organizations to ensure that activities are carried out in compliance with local and federal program and financial requirements. The PD will monitor the overall process for interface development, data collection, performance and project expenditures. The PD will ensure activities are done in a

transparent manner with support from appropriate parties and buy-in from stakeholders. This individual is the responsible authority for ensuring reports and documentation are submitted to CDC.

Job Description: Project Manager (Annette Aguon, Communicable Disease Coordinator III, Supervisor)

No funds requested for this position.

Ms. Annette Aguon will direct specific project operations including supervising the implementation of project activities; coordination with other agencies; development of materials; provisions of service and training; collection, tabulation and interpretation of required data; program evaluation; and staff performance evaluation, as the Project Manager. The Project Manager (PM) will organize activities relating to grant administration and those relating to the research and data collection. The PM will supervise field staff and Special Projects Coordinators, and manage documentation and operations in the implementation of the project. This position shares the responsible authority for ensuring reports and documentations are submitted to CDC with the PD.

Job Description: Special Projects Coordinator (Program Operations Specialist) (TBD)

The Special Projects Coordinator (Program and Operations Specialist) will assist the PM in project operations specific to GuWebIZ enhancements and EHR-IIS interfaces including the implementation of project activities, coordination with other agencies, development of materials, provisions of service and training, data collection and interpretation. This position will assist the PM in organizing activities relating to grant administration and those relating to the research and data collection. This position will assist the PM managing documentation and program evaluation.

Job Description: Special Projects Coordinator (Health Informatician) (TBD)

The Special Projects Coordinator positions will provide EHR liaison and responsible for data quality management. This position will review information and data collected for consistency and will compile data and prepare materials and documentations to update stakeholders and partners. This position will work with project personnel, partners and vendors to facilitate policies and procedures to support the interface developments for GuWebIZ. The Special Projects Coordinator will be trained to support various systems, including Information Technology systems needed to complete project activities and objectives. This positions will also be responsible for collecting and compiling health data from various health units and ensure that are consistent with the GuWebIZ . This position compare resources and data to quantify vital events, surveillance data and prepare appropriate responses to gaps in vaccinations. Retrieves and generate statistical reports as requested by CDC and other agencies. This position will be located in Guam, within the Immunization Program

II. Fringe Benefits (Total Federal Request: \$ 73,610)

Fringe benefits are computed by the establish rate of **35.976%** of salaries and wages.

Guam Immunization Program
 Capacity Building Assistance (CBA) for Infrastructure Enhancements to Meet Interoperability Requirements
 DUNS: 855028700

Year 1: \$36,212
 Year 2: \$37,398

Position Title	Annual Fringe	Time	Months	Amount Requested (Year 1)	Amount Requested (Year 2)	Total Amount Requested
Principal Investigator (J. Gillian)	\$25,255.00	0%	12.00	\$-	\$-	\$ -
Project Director (JO)	\$22,375.00	0%	12.00	\$-	\$-	\$ -
Project Manager (AA)	\$18,419.00	0%	12.00	\$-	\$-	\$ -
Special Projects Coordinator (Health)	\$18,106.00	100%	12.00	\$18,106	\$18,699	\$36,805
Special Projects Coordinator (Docs and Ops)	\$18,106.00	100%	12.00	\$18,106	\$18,699	\$36,805
Total Fringe				\$36,212	\$37,398	\$73,610

III. Contractual Costs (Total Federal Request: \$798,116)

Year 1: \$503,783
 Year 2: \$294,333

Name of Contractor #1: University of Hawaii

Year 1: \$469,178
 Year 2: \$259,728

Method of Selection: The Applicant has an existing Intergovernmental Cooperative Agreement (ICA) with the University of Hawaii Telecommunications and Social Informatics Research Program (UH TASI) to provide technical assistance in Health Information Technology (HIT) related projects.

Period of Performance: The period of performance will be from 9/1/2014 to 8/31/2016

Scope of Work: Through the ICA, the applicant will enter into a Work Task Letter (WTL) with UH TASI to assist in the planning, designing, and implementation of the technical systems setup and communications infrastructure for the DPHSS that will allow for electronic submission of data to the GuWebIZ system. The UH TASI will provide technical assistance to DPHSS for the onboarding of the Providers; ensure the GuWebIZ systems and network infrastructure will support increased usage and ensure resiliency of system; ensure data integrity; and generate timely and accurate information for patients, providers, and other users of the Guam Immunization Registry. The UH TASI will also work with DPHSS and their IIS vendor, Envision Technology Partners, to assess the GuWebIZ capability and implement options to simplify or automate duplicate identification, disambiguation, and identify resolution. The UH TASI is currently working with the Guam CHC and DPHSS in the development of their electronic health record system.

Method of Accountability: The overall progress will be monitored through ongoing meetings on the status of the project and meetings on the progress of the tasks. Josephine O'Mallan and Annette Aguon are the contract supervisors.

Itemized Budget for University of Hawaii:

Guam Immunization Program - Capacity Building Assistance for Infrastructure Enhancements to Meet Interoperability Requirements			
UH Contractual Budget			
	Year 1	Year 2	Y1-Y2
Personnel (Including Fringe)	\$180,592	\$180,592	\$361,184
Equipment	\$135,000	\$-	\$135,000
Travel	\$20,000	\$20,000	\$40,000

Guam Immunization Program
 Capacity Building Assistance (CBA) for Infrastructure Enhancements to Meet Interoperability Requirements
 DUNS: 855028700

Supplies	\$20,000	\$5,000	\$25,000
Consultants	\$85,000	\$35,000	\$120,000
Others	\$12,500	\$5,000	\$17,500
TOTAL DIRECT	\$453,092	\$245,592	\$698,684
Indirect* (6%)	\$16,086	\$14,136	\$30,221
TOTAL PROJECT COST	\$469,178	\$259,728	\$728,905
<i>*MTDC applies to all except equipment.</i>			

The requested amount is based on a budget that includes equipment (server, firewall, backup equipment, switch); travel; technical assistance from IT Manager, ICT Systems Analysts, Programmers, database experts, and management and subcontractors working on Immunization interfaces; supplies; and technical fees required for technical builds.

Equipment: The UH TASI will purchase the following equipment to be used for the project in Guam. All equipment will be owned by DPHSS. All equipment will be purchased in Year 1.

Equipment (Year 1)	No	Cost	Total Request
Server	1.00	\$60,000	\$60,000.00
Network Firewall	1.00	\$15,000	\$15,000.00
Backup Equipment (tape drives)	2.00	\$20,000	\$40,000.00
Rack	1.00	\$5,000	\$5,000.00
UPS	1.00	\$10,000	\$10,000.00
Network Switch	1.00	\$5,000	\$5,000.00
	Equipment total		\$135,000

Travel: The budget includes four (4) annual roundtrips from Hawaii to Guam for UH TASI project team to plan, setup and assist DPHSS with stakeholder meetings and discussions. UH TASI project staff will travel for technical systems and infrastructure setup and installations. Travel also includes trips to partake in planning meetings, stakeholder updates, and workgroup discussions on project plans and implementation schedules.

Travel (Domestic/ Int'l)	#	Unit Cost	Total Cost (Year 1)	#	Unit Cost	Total Cost (Year 2)	Total Request (Y1-Y2)
Airfare to Guam	4	\$1,500	\$6,000	4	\$1,500	\$6,000	\$12,000
M&IE	40	\$71	\$2,840	40	\$71	\$2,840	\$5,680
Lodging	40	\$237	\$9,480	40	\$237	\$9,480	\$18,960
Misc	40	\$42	\$1,680	40	\$42	\$1,680	\$3,360
			\$20,000			\$20,000	\$40,000

Supplies: The below listed supplies will be bought and used to complete project activities and tasks. Backup software is needed to back-up the GuWebIZ and software environment/infrastructure. The requested analytical workstations are to perform analysis on aggregated GuWebIZ data. Supplies cost per quarter is requested for consumables and general office supplies to conduct project activities.

Supplies (Year 1)			
Backup Software	1	\$10,000	\$10,000
Analytical Workstation	2	\$2,500	\$5,000
Supplies	4	\$1,250	\$5,000
		Supplies Subtotal	\$20,000

Supplies (Year 2)			
Supplies	4	\$1,250	\$5,000
		Supplies Subtotal	\$5,000

EHR Consultants: The UH TASI will require additional support for technical and systems design and development for the Guam Immunization Registry. These efforts require additional technical assistance from electronic health records systems experts who are familiar with immunization interfaces. We recognize that there will be a significant effort to work with the

Guam Immunization Program
 Capacity Building Assistance (CBA) for Infrastructure Enhancements to Meet Interoperability Requirements
 DUNS: 855028700

vendors to resolve any interface issues and errors to successfully exchange data between the multiple EHR systems and the GuWebIZ. The UH TASI will work with DPHSS to assess and test GuWebIZ capability and implement options to address duplicate identities, disambiguation, and identity resolution as well as perform resolve duplicate identifications and errors and duplications and data cleaning component. As providers transition their EHRs to an interface with the GuWebIZ or upgrade the HL7 version from 2.3.1 to 2.5.1 they will need assistance which will be provided by the UH TASI.

	Total Cost (Year 1)	Total Cost (Year 2)	Total Cost (Y1-Y2)
EHR Consultants	\$85,000	\$35,000	\$120,000

Others: Shipping cost is requested for equipment and hardware purchased for the project. Additionally, costs for training fees, members and subscriptions are factored into this category. All purchases are for the benefit of the project.

Other			Total Cost (Year 1)			Total Cost (Year 2)	Total Cost (Y1-Y2)
Shipping to Guam	1	\$7,500	\$ 7,500				\$7,500
Membership, Materials and Training Fees (Mirth)	1	\$5,000	\$ 5,000	1	\$5,000	\$5,000	\$10,000
			\$12,500			\$5,000	\$17,500

Name of Contractor #2: ISS Enhancement (Envision Technology Partners)

Year 1: \$34,605

Year 2: \$34,605

IIS Enhancements: DPHSS Immunization Program will require additional technical and system support from their IIS vendor, Envision Technology Partners, to enhance GuWebIZ data import capability to include but not limited to configuration of HL7, HL7 message support and maintenance, and report modifications. Envision will also provide on-site training on the enhancements for program staff and key partners then release the upgrade to GuWebIZ production environment.

Envision Technology Partners	Total Cost (Year 1)	Total Cost (Year 2)	Total Cost (Y1-Y2)
IIS Enhancements	\$60,000	\$60,000	\$120,000
Training Costs			
Airfare, hotel, meals, and transportation (7 days)	\$7,500	\$7,500	\$15,000.00
Labor- Travel and classroom instruction	\$7,680	\$7,680	\$15,360.00
Labor- Class Preparation	\$14,400	\$14,400	\$28,800.00
Classroom Materials on CDs	\$25	\$25	\$50.00
Classroom rental (30 students)	\$5,000	\$5,000	\$10,000.00
	\$34,605.00	\$34,605.00	\$69,210.00

IV. Equipment (Total Federal Request: \$0)

There is no requested equipment for this project.

V. Supplies (Total Federal Request: \$8,400)

Year 1: \$4,200

Year 2: \$4,200

Item Requested	Type	No. Needed	Unit Cost	Amount Requested (Year 1)	Amount Requested (Year 2)	Total Amount Requested
General Project Supplies	Pens, pencils, papers	12	100	\$1,200	\$1,200	\$2,400
Educational Materials and Documentations	N/A	300	10	\$3,000	\$3,000	\$6,000
<i>Supplies Total</i>				\$4,200	\$4,200	\$8,400

Consumable supplies are requested for carrying out daily activities to adequately support project goals. Educational material and documentation printing is requested to promote project activities and awareness. All supplies will be used 100% for the project.

VI. Travel (Total Federal Request: \$35,736)

Year 1: \$17,868

Year 2: \$17,868

The total travel Budget includes travel costs to the University of Hawaii for project planning, meetings and training. The travel budget also includes travel for personnel to project related trainings, workshops and conferences over the duration of the grant period.

Off-Island Travel Budget:

Guam to Hawaii			
Trainings, Network Meetings and Planning Travels			
	Per Person Per Trip	Annual Request (2ppl x 1 trip)	2-Year Request 4 Trips (2 per year)
Airfare (Guam to HI)	\$2,000.00	\$4,000.00	\$8,000.00
M&IE (\$291 Day)	\$2,037.00	\$4,074.00	\$8,148.00

Misc Costs (Ground Transportation, etc)	\$500.00	\$1,000.00	\$2,000.00
Sub Total - Guam to HI	\$4,537.00	\$9,074.00	\$18,148.00
Guam to US Mainland (Atlanta, GA; Washington DC)			
Program/Grantee Meetings; Workshops; Site Visits			
	Per Person Per Trip	Annual Request (2ppl x 1 trip)	2-Year Request 4 Trips (2 per year)
Airfare (Guam to DC/GA)	\$2,000.00	\$4,000.00	\$8,000.00
M&IE (\$271 Day)	\$1,897.00	\$3,794.00	\$7,588.00
Misc Costs	\$500.00	\$1,000.00	\$2,000.00
Sub Total - Guam to Mainland	\$4,397.00	\$8,794.00	\$17,588.00
Grand Total		\$17,868.00	\$35,736.00

VII. Other (Total Federal Request: \$0)

VIII. Direct Costs (Total Federal Request: \$1,120,988)

The total funding request is as follows:

Guam Immunization Program - Capacity Building Assistance for Infrastructure Enhancements to Meet Interoperability Requirements			
Core Budget			
	Year 1	Year 2	Y1-Y2
Salaries	\$100,656	\$104,470	\$205,126
Fringe	\$36,212	\$37,398	\$73,610
Equipment	\$-	\$-	\$-
Travel	\$17,868	\$17,868	\$35,736
Research Supplies	\$4,200	\$4,200	\$8,400
Consultants	\$503,783	\$294,333	\$798,116
Others	\$-	\$-	\$-
TOTAL DIRECT	\$662,719	\$458,269	\$1,120,988
Indirect* (21.17%)	\$21,309	\$22,116	\$43,425
TOTAL DIRECT	\$684,028	\$480,385	\$1,164,413

*MTDC applies to salaries

Guam Immunization Program
Capacity Building Assistance (CBA) for Infrastructure Enhancements to Meet Interoperability Requirements
DUNS: 855028700

only

IX. Indirect Costs (Total Federal Request: \$43,425)

Indirect rate of 21.17% is applied to Salaries only.

Year 1: \$21,309

Year 2: \$22,116

X. GRAND TOTAL (Total Federal Request: \$1,164,413)

Year 1: \$684,028

Year 2: \$480,385

**Guam Department of Health and Social Services (Guam DPHSS) – Capacity Building Assistance
for Infrastructure Enhancements to Meet Interoperability Requirements**

Table of Contents

Abstract

Project Narrative

a.	Background.....	1
	Guam’s Desire for an Immunization Information System.....	1
b.	Approach.....	3
i.	Problem Statement.....	3
	Establishing an EHR-IIS HIE Program and Technical Infrastructure Capacity.....	4
	Onboarding Providers.....	4
	Immunization Data Analytics.....	4
ii.	Purpose.....	4
iii.	Outcomes.....	5
iv.	Strategy and Activities.....	6
	Project Activities.....	7
	Target Population.....	8
c.	Applicant Evaluation and Performance Measurement Plan.....	8
d.	Organizational Capacity of Applicants to Implement the Approach.....	9
e.	Work Plan.....	10
f.	Sustainability Plan.....	10
	Work Plan.....	11

Budget Narrative

Indirect Rate Agreement

Organizational Chart

Resumes

Letters of Support

