



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
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June 16, 2023

Steven T. James
House Clerk
State House Room 145
Boston, MA 02133

Michael D. Hurley
Senate Clerk
State House Room 335
Boston, MA 02133

Dear Mr. Clerk,

Pursuant to Chapter 111 Section 2J, please find enclosed a report from the Department of Public Health entitled "**Public Health Grant Trust Fund Report 2022.**"

Sincerely,

A handwritten signature in black ink, appearing to be 'R. Goldstein'.

Robert Goldstein, MD, PhD
Commissioner
Department of Public Health

Public Health Grant Trust Fund Report 2022

Massachusetts Department of Public Health

Executive Summary

The Public Health Trust was established to allow the Department of Public Health (DPH) to participate in competitive grant opportunities with nonprofit partners. This provides DPH with the ability to pursue funding opportunities that were previously impossible. Prior to the establishment of the Trust, there was no mechanism to accept private foundation funds in a timely manner and no mechanism to serve as a subcontract for a research grant. In particular, the establishment of this Trust is proving to be beneficial to DPH and its academic/medical partners because it has supported opportunities around surveillance and data sharing so state public health data can be utilized for a variety of purposes to inform approaches for addressing current and emerging priorities.

Since the last reporting period, July 2020- December 2021, DPH has received funding for two new subcontracts that are administered through the Public Health Trust from the following organizations:

- National Association of City and County Health Officials (NACCHO): \$166,399
- Association of State and Territorial Health Officials (ASTHO): \$135,000

In addition, of the ten grants and subcontracts administered through the Public Health Trust that were funded in the prior reporting period, seven continued to be funded in 2022 while the other three concluded.

DPH is actively pursuing three new subcontracts that are pending award.

Legislative Mandate

The following report is hereby issued pursuant to M.G.L. Chapter 111, Section 2J –

Section 2J. There shall be a Public Health Grant Trust Fund. The commissioner shall administer the fund to collaborate with nonprofit organizations to participate in competitive grant opportunities that further the mission of the department.

There shall be credited to the fund money received from public and private sources to support public health competitive grant opportunities. Amounts credited to the fund shall not be subject to further appropriation. Money remaining in the fund at the end of a fiscal year shall not revert to the General Fund and shall be available for expenditure in subsequent fiscal years.

Annually, not later than January 1, the commissioner shall report on the activities of the fund to the clerks of the house of representatives and senate and to the chairs of the house and senate committees on ways and means. The report shall include: (i) an accounting of money received by the fund broken down by funding source; (ii) a description of the competitive grant opportunities and whether a competitive grant opportunity is in collaboration or partnership with a nonprofit organization; (iii) an accounting of money expended from the fund broken down by recipient; (iv) the amount of any unexpended balance; and (v) a description of anticipated competitive grant opportunities applied or expected to be applied to in the upcoming calendar year and whether the competitive grant opportunity is in collaboration or partnership with a nonprofit organization.

Opportunity awarded in 2022 through the Public Health Trust:

Title	Amount	Project Period	Subcontract Partnership/ Collaboration with a non-profit	Prime Award Recipient or Funder of Contract
Partnership to Support Leveraging Retail Health Clinics and Pharmacies for STI Services and Care	\$116,399.00	9/1/2022-12/30/2022	Yes	National Association of City and County Health Officials (NACCHO) https://www.naccho.org/blog/articles/new-funding-opportunities-for-working-with-pharmacies-and-retail-health-clinics-to-provide-sexual-health-services
Linking PRAMS and Clinical Outcomes Data Multi-Jurisdiction Learning Community	\$135,000	4/30/2022 – 3/31/2023	Yes	Association of State and Territorial Health Officials (ASTHO) https://www.astho.org/

Opportunities Awarded 2019-2021 through the Public Health Trust that continued to be funded in 2022:

Title	Amount	Project Period	Subcontract Partnership/ Collaboration with a non-profit	Prime Award Recipient
Prevention Policy Modeling Lab	\$286,420.00	01/01/2020-9/30/2023	Yes	Stanford University (https://ppml.stanford.edu/projects)
Melanoma Project	\$4,181.00	3/31/2021 – 6/30/2022	Yes	Rutgers, State University of New Jersey https://www.cinj.org/patient-care/melanoma-oncology-program
HEALing Communities Study	\$3,896,635.00	4/17/2019 – 3/31/2023	Yes	Boston Medical Center https://healingcommunitiesstudy.org/
MA/Region 1 Partnership for Regional Health Disaster Response	\$100,000.00	09/30/2019 - 09/29/2022	Yes	Massachusetts General Hospital https://www.phe.gov/Preparedness/planning/PDHRCA-FOA/Pages/ma-partnership-rdhr.aspx
MA Justice Community Opioid Network	\$883,533.00	09/01/2019 – 8/31/2025	Yes	Baystate Medical Center https://grantome.com/grant/NIH/UG1-DA050067-01

NAS Standardized Surveillance Case Definition Implementation Project	\$249,895.00	03/06/2020-07/30/2022	Yes	Center for Birth Defects Research and Prevention https://www.cdc.gov/ncbddd/birthdefects/cbdrp.html
Implementing WIC Breastfeeding Support	\$479,747.00	04/10/2020 – 9/30/2022	Yes	University of Nevada, Reno https://wicworks.fns.usda.gov/resources/wic-state-agencies-awarded-funding-and-assistance-implement-wic-breastfeeding-support
Improving Linkages to Address OUD Among Pregnant and Postpartum Women	\$57,466.00	10/01/2020-12/31/2022	Yes	The CDC Foundation https://www.cdcfoundation.org/
Pregnancy Risk Assessment Survey (PRAMS) supplement to survey maternal behaviors and experiences before, during and shortly after pregnancy during COVID-19	\$25,000.00	12/18/2020 – 7/31/2022	Yes	Council of State and Territorial Epidemiologists https://www.cste.org/
MOUD Comparative Effectiveness Study	\$36,581.00	7/1/2021 – 4/30/2022	Yes	Boston Medical Center funded by a grant from NIH-NIDA
Informing design of health insurance benefits to reduce coverage barriers to medication for opioid-use disorder	\$20,000.00	8/1/2021-12/31/2021	Yes	Boston Medical Center, funded by a grant from the Robert Wood Johnson Foundation
Development of a novel community-based high-performance surveillance network for drug use	\$7,812.00	8/1/2021-12/31/2021	Yes	Boston Medical Center funded by a grant from NIH-NIDA

Project Descriptions

Prevention Policy Lab: Stanford University is funded by the CDC to create models that improve public health decision-making in five key areas: HIV, viral hepatitis, sexually transmitted infections, tuberculosis, and school/adolescent health. MDPH serves as a subrecipient partner to contribute to development of modeling questions, study design, data acquisition, data analysis, development of decision tools and publications.

Partnership to Support Leveraging Retail Health Clinics (RHC) and Pharmacies for STI Services and Care: The National Association of City and County Health Officials (NACCHO) is funding MDPH through a subcontract to create trainings for the staff of pharmacies and RHC's to offer essential education to support expanded STI and HIV patient care in those settings.

Melanoma Project: The MDPH Massachusetts Cancer Registry program is funded through a subcontract with Rutgers University to support efforts to inform individuals who are eligible to participate in a study of Melanoma, and to track responses from individuals who opt in or out of participation.

HEALing Communities Study: The National Institute on Drug Abuse (NIDA) and the Substance Abuse and Mental Health Services Administration (SAMHSA) launched the HEALing Communities Study (HCS) in 2019 to test the impact of a community-engaged intervention on community-level opioid overdose (OD) deaths. The study is a multi-site, parallel arm, cluster randomized, wait-list controlled trial. The HCS will test the impact of a comprehensive, data-driven community response plan to deploy evidence-based practices (EBPs) across multiple sectors to reduce opioid-related OD deaths.

MA Region 1 Partnership for Regional Health Disaster Response: MDPH is funded through a subcontract with the Massachusetts General Hospital under the federal Health and Human Services, Public Health Emergency Preparedness programming to serve as an implementation partner the Massachusetts/Region 1 Partnership for Regional Disaster Health Response. This initiative is working to develop innovative mechanisms that link medical experts in healthcare disaster response with other key governmental and community partners and stakeholders to improve coordination of planning and response activities and enhance patient care during disasters, including COVID-19 (<https://www.rdhrs.org/covid-19-resources/>).

MA Justice Community Opioid Network: MDPH is funded through a subcontract with Baystate Medical Center to serve as a partner on the federally funded National Institute of Health Justice Community Opioid Network research grant (JCOIN). The goal of JCOIN is to study approaches to increase high-quality care for people with opioid misuse and opioid use disorder (OUD) in criminal justice settings. JCOIN will test strategies to expand effective treatment and care in partnership with local and state justice systems and community-based treatment providers to generate real-world evidence to address the unique needs of individuals with OUD in criminal justice settings.

Neonatal Abstinence Syndrome (NAS) Standardized Surveillance Case Definition Implementation Project: MDPH was awarded funding through a partnership with the CDC, CSTE, and National Center for Birth Defects and Developmental Disabilities (NCBDD) to provide a mechanism for state and local public health organizations or agencies with public health authority to conduct population health surveillance using the CSTE NAS Standardized Surveillance Case Definition while leveraging existing surveillance infrastructure. This pilot project is an opportunity for jurisdictions to improve or develop standardized NAS Surveillance as well as identify key challenges with implementing the case definition in their jurisdiction.

Implementing WIC Breastfeeding Support: Through a cooperative agreement (grant) from the US Department of Agriculture, Food and Nutrition Service, to the University of Nevada, Reno, MDPH has been awarded a subcontract to implement and evaluate the [WIC Breastfeeding Support Learn Together Grow Together](#) social marketing campaign. The overarching goal of the updated breastfeeding campaign is to increase the knowledge of and to promote behavior change about breastfeeding among WIC participants, their family and friends and WIC staff.

Improving Linkages to Address Opioid Use Disorder (OUD) among Pregnant and Postpartum Women: A CDC Foundation-funded project that builds upon Rapid Maternal Overdose Review (RMOR) efforts to advance the understanding of both fatal and nonfatal maternal opioid use, while strengthening state coordination to advance policy and programs. The Subrecipient performs activities that focus on disseminating data gathered during the collaborative work shared during participation in the jurisdiction-based maternal mortality review committee (MMRC) and CDC collaborative work on RMOR. State collaborations with the CDC and the CDC Foundation will yield improvements made to linkages addressing OUD among pregnant and postpartum women.

Neonatal Abstinence Syndrome (NAS) Standardized Surveillance Case Definition Implementation Project: MDPH is funded under a subcontract with the Council of State and Territorial Epidemiologists (CTSE) through a grant from the federal Centers for Disease Control and Prevention to conduct population health surveillance using the CSTE NAS Standardized Surveillance Case Definition while leveraging existing surveillance infrastructure. This pilot project is an opportunity to improve or develop standardized NAS Surveillance as well as identify key challenges with implementing the case definition in their jurisdiction.

Pregnancy Risk Assessment Survey (PRAMS) supplement to survey maternal behaviors and experiences before, during and shortly after pregnancy during COVID-19: MDPH is funded under a subcontract with the Council of State and Territorial Epidemiologists (CTSE) through a grant from the federal Centers for Disease Control and Prevention to supplement existing [PRAMS](#) data collection with a COVID-19 questionnaire that will help to understand pregnant women's experiences and needs during pregnancy and the postpartum period, and stressful events including emotional stress, financial stress, and partner-related stress due to the COVID-19 pandemic.

The Association of State and Territorial Health Officials (ASTHO), with support from the Centers for Disease Control and Prevention (CDC), is launching the second cohort of the **Linking PRAMS and Clinical Outcomes Data Multi-Jurisdiction Learning Community** project to support states, territories, and jurisdictions as they build capacity to conduct data linkage activities between PRAMS and clinical outcomes data sets. These linked data sets will inform Patient-Centered Outcomes Research and clinical quality improvement initiatives in maternal and child health. <https://www.astho.org/topic/population-health-prevention/women-infant-family-health/prams/>

Summary of Expenditures and Unexpended Balances January 2022-December 2022

Title	Total Award Amount	Amount Received 2022	Expenditures 2022*
Melanoma Project	\$4,181	\$0	\$3,298

HEALing Communities	\$3,896,635	\$536,183	\$373,234
MA/Region 1 Partnership for Regional Health Disaster Response	\$100,000	\$40,000	\$48,409
MA Justice Community Opioid Network	\$883,533	\$76,742	\$67,032
NAS Standardized Surveillance Case Definition Implementation Project	\$249,895	\$54,335	\$17,429
Implementing WIC Breastfeeding Support	\$479,747	\$6,764	\$51,861
Improving Linkages to Address OUD Among Pregnant and Postpartum Women	\$57,466	\$0	\$17,374
Linking Pregnancy Risk Assessment Monitoring System (PRAMS) and Clinical Outcomes Data Multi-Jurisdiction Learning Community (ASTHO)	\$135,000	\$20,000	\$19,734
PRAMS COVID-19 Supplement (CSTE)	\$25,000	\$25,000	\$22,880
Public Health Database Fee - Medication for opioid-use disorder (MOUD) Comparative Effectiveness Study	N/A – this is invoiced as a fee for service.	\$36,581	\$0
Public Health Database Fee - Informing design of health insurance benefits to reduce coverage barriers to medication for opioid-use disorder	N/A – this is invoiced as a fee for service.	\$20,000	\$0
Public Health Database Fee - Development of a novel community-based high-performance surveillance network for drug use	N/A – this is invoiced as a fee for service.	\$7,813	\$0
Partnership to Support Leveraging Retail Health Clinics and Pharmacies for Sexual Health Services and Care	N/A – this is invoiced as a fee for service.	\$83,666	\$0
TOTAL		\$907,084	\$621,251

**The expended amount may be higher than the awarded amount for the calendar year due to the continued availability of funds from the prior budget period/project year.*

Expenditure Details

Title	Expenditures	Recipient	Purpose
HEALing Communities	\$373,233.90	Staff Payroll, Fringe Benefit and Indirect Costs	Salary Allocation and Payroll-Related Costs
Melanoma Project	\$3,298.00	Staff Payroll, Fringe Benefit and Indirect Costs	Salary Allocation and Payroll-Related Costs
MA/Region 1 Partnership for Regional Health Disaster Response	\$48,408.94	Staff Payroll, Fringe Benefit and Indirect Costs	Salary Allocation and Payroll-Related Costs
MA Justice Community Opioid Network	\$67,032.06	Staff Payroll, Fringe Benefit and Indirect Costs	Salary Allocation and Payroll-Related Costs
NAS Standardized Surveillance Case Definition Implementation Project	\$17,428.80	Staff Payroll, Fringe Benefit and Indirect Costs	Salary Allocation and Payroll-Related Costs
Implementing WIC Breastfeeding Support	\$1,592.70	Adcare Educational Institute	Costs associated with continuing education services.
Implementing WIC Breastfeeding Support	\$6,750.00	Beasley Media Group Inc.	Costs associated with social media marketing campaign.
Implementing WIC Breastfeeding Support	\$26,918.47	Carroll Communications Group LLC	Costs associated with social media marketing campaign.
Implementing WIC Breastfeeding Support	\$1,230.00	CBS Corp.	Costs associated with social media marketing campaign.
Implementing WIC Breastfeeding Support	\$14,999.10	Hearst Stations Inc.	Costs associated with social media marketing campaign.
Implementing WIC Breastfeeding Support	\$370.45	United Parcel Service	Costs associated with social media marketing campaign.
Improving Linkages to Address OUD Among Pregnant and Postpartum Women	\$11,674.24	Staff Payroll, Fringe Benefit and Indirect Costs	Salary Allocation and Payroll-Related Costs
Improving Linkages to Address OUD Among Pregnant and Postpartum Women	\$1,100.00	Bonnell W. Glass	Health Care and Safety Expert Consultant.
Improving Linkages to Address OUD Among Pregnant and Postpartum Women	\$4,600.00	Margi Coggins	Health Care and Safety Expert Consultant.
Linking Pregnancy Risk Assessment Monitoring System (PRAMS) and Clinical Outcomes Data Multi-Jurisdiction Learning Community	\$19,733.79	Market Decisions LLC	Costs associated with collecting data for the Pregnancy Risk Assessment Monitoring System (PRAMS).
PRAMS COVID-19 Supplement	\$22,879.85	Lane Printing	Costs associated with collecting data for COVID-19 questionnaire.

TOTAL	\$621,250.30		
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Pending Activities

Below is a list of applications that MDPH is actively pursuing and are pending notice of award. Without this Trust serving as mechanism to receive the funding, it would not be possible to serve as a funded partner on these opportunities.

- NACCHO contract extension and expansion to continue work described above through December 2023 in the amount of \$300,000.
- Two subcontracts with the Council for State and Territorial Epidemiologists, funded by the CDC, for Neonatal Abstinence Syndrome Surveillance Implementation pilot and data analysis projects beginning March 2023 for a total amount of \$200,000
- MDPH contract with the CDC – The CDC released a Broad Agency Announcement seeking partners to support research that will address a variety of public health priority areas. If selected for funding DPH will be awarded up to \$250,000, dates pending project identification and timeline.