

Approximate Average Award:
\$100,000.
Floor of Award Range: None.
Ceiling of Award Range: \$100,000.
Anticipated Award Date: April 1, 2004.

Budget Period Length: 9 months.
Project Period Length: 2 years and 9 months.

Consideration for Funding Levels: All technically acceptable applications will be funded.

Part IV. Enhanced Surveillance for Perinatal Prevention

Fiscal Year Funds: 2004.
Approximate Total Funding:
\$1,800,000.
Approximate Number of Awards: 20.
Approximate Average Award:
\$82,000.
Floor of Award Range: \$30,000 to \$200,000.
Ceiling of Award Range: \$200,000.
Anticipated Award Date: April 1, 2004.

Budget Period Length: 9 months.
Project Period Length: 2 years and 9 months.

Funding Preferences

Because Part IV is competitive, applications for activity under this Part will be evaluated by an Objective Review Panel. Some applicants may not be funded.

The following items are general considerations that will affect decisions on funding levels:

1. Greatest preference will be given to areas that receive categorical funding from CDC for perinatal prevention program activities.

2. Secondary preference will be given to areas that possess an authorized reporting system for pediatric HIV exposure as well as adult, adolescent, and pediatric HIV infection.

3. Additional programmatic funding considerations will be based on the estimated number of HIV infected women giving birth (Source: 1994 Survey of Childbearing Women) and its implications for HIV/AIDS surveillance program activities.

Part V. Laboratory Testing for Recent HIV Infection

Fiscal Year Funds: 2004.
Approximate Total Funding:
\$800,000.
Approximate Number of Awards: 2 to 3.
Approximate Average Award:
\$320,000.
Floor of Award Range: \$270,000 to \$400,000.
Ceiling of Award Range: \$400,000.
Anticipated Award Date: April 1, 2004.

Budget Period Length: 9 months.
Project Period Length: 2 years and 9 months.

Funding Preferences

Because Part V is competitive, applications for activity under this Part will be evaluated by an independent review panel (formerly Objective Review Panel). Some applicants may not be funded.

Preference will be given to sites that achieve the best distribution and representation of geographic regions (e.g., Northeast, South, and West).

Preference will be given to areas that demonstrate the greatest degree of automation in sample processing and testing.

Part VI. Behavioral Surveillance

Fiscal Year Funds: 2004.
Approximate Total Funding:
\$10,000,000.
Approximate Number of Awards: 25.
Approximate Average Award:
\$400,000.
Floor of Award Range: \$350,000 to \$450,000.
Ceiling of Award Range: \$450,000.
Anticipated Award Date: April 1, 2004.

Budget Period Length: 9 months.
Project Period Length: 2 years and 9 months.

Consideration for Funding

All technically acceptable applications will be funded.

Part VII. Core Surveillance in the Pacific Island Jurisdictions

Fiscal Year Funds: 2004.
Approximate Total Funding:
\$100,000.
Approximate Number of Awards: 6.
Approximate Average Award:
\$17,500.
Floor of Award Range: \$10,000 to \$25,000.
Ceiling of Award Range: \$25,000.
Anticipated Award Date: April 1, 2004.

Budget Period Length: 9 months.
Project Period Length: 2 years and 9 months.

Considerations for Funding Levels

All technically acceptable applications will be funded. The following items are general considerations that will affect decisions on funding levels.

1. Greatest consideration will be given to areas that have a functional laboratory physically located on an island within the funded island jurisdiction that is either currently able, or could, with a reasonable investment

in the appropriate equipment, accept, process, and distribute results for confirmatory HIV diagnostic tests. This laboratory should be able to execute Western Blot or immunofluorescence assay (IFA) tests. The health department on an island jurisdiction with such a facility should be able to serve as a central data collection center that coordinates available clinical information on cases confirmed through processing of specimens from other island jurisdictions.

2. The next greatest consideration will be given to areas with an HIV case reporting system as of the due date of this application.

3. Areas that do not meet criterion one, but have a written plan with established regulations or laws that will enable HIV case reporting to be in place as of April 1, 2004 will receive greater consideration than areas with no immediate plans for implementation of such a reporting system.

4. Additional programmatic consideration will be based on increases or decreases in the volume of reported cases of HIV or AIDS and their implications for HIV/AIDS surveillance program activities.

Throughout the project period, CDC's commitment to continuation of awards will be conditioned on the availability of funds, evidence of satisfactory progress by the recipient (as documented in required reports), and the determination that continued funding is in the best interest of the Federal Government.

III. Eligibility Information

Eligible Applicants

Part I. Core Surveillance

Applications may be submitted by health departments of States, U.S. territories or their bona fide agents, including the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, and the six independently-funded city health departments of Chicago, Houston, Los Angeles, New York City, Philadelphia, and San Francisco. All eligible applicants for core HIV/AIDS surveillance activities will be funded. Funding will include activities that expand the uses and improve the quality of HIV/AIDS surveillance data to more effectively guide public health policy and provide relevant information necessary to direct and evaluate prevention and care activities.

Part II. HIV Incidence Surveillance

In order to ensure execution of this complex project, and provide estimates for incidence that possess adequate