## **Centers for Disease Control and Prevention (CDC)**

In 2009, the Centers for Disease Control and Prevention established the Climate and Health Program ("CHP") to assist state and city health departments prepare and adapt to the current and future health impacts of climate change.<sup>1</sup> CHP, through its Climate-Ready States and Cities Initiative ("CRSCI"), currently funds sixteen states and two cities in order to develop adaptation programs.<sup>2</sup> Awardees were funded to implement the CDC's Building Resilience Against Climate Effects ("BRACE") framework.<sup>3</sup> In 2016, the CDC released a Funding Opportunity Announcement ("FOA") for states and cities to compete for CDC assistance with monitoring and evaluation strategies and policies that will reduce the health burden of climate change.<sup>4</sup> This competition provides an opportunity for states and cities that did not receive awards under the previous program to receive climate adaptation funds from the CDC.

## a) Funding Requirements

For previously funded awardees, this FOA is non-competitive, and contingent only on completion of the BRACE framework, which includes awardees submitting an Adaptation Plan with their applications.<sup>5</sup> Applicants under the 2016 FOA are required to demonstrate that they have the capacity to implement a climate and health program. The purpose of this FOA is to

<sup>2</sup> CDC's Climate-Ready States & Cities Initiative, CENTERS FOR DISEASE CONTROL AND PREVENTION, https://www.cdc.gov/climateandhealth/climate\_ready.htm (last visited June 20, 2016) (listing CRSI state grantees as: Arizona, California, Florida, Illinois, Massachusetts, Michigan, Minnesota, New Hampshire, New York, North Carolina, Oregon, Rhode Island, Maine, Vermont, and Wisconsin. The two funded cites are New York City and san Francisco).

<sup>&</sup>lt;sup>1</sup> CENTERS FOR DISEASE CONTROL AND PREVENTION, FUNDING NO. CDC-RFA-EH16-1602, BUILDING RESILIENCE AGAINST CLIMATE EFFECTS: ENHANCING COMMUNITY RESILIENCE BY IMPLEMENTING HEALTH ADAPTATIONS (2016).

<sup>&</sup>lt;sup>3</sup> CENTERS FOR DISEASE CONTROL AND PREVENTION, *supra* at 2.

<sup>&</sup>lt;sup>4</sup> *Id*.

<sup>&</sup>lt;sup>5</sup> *Id.* at 18 (While Florida and Wisconsin currently receive funding, if they do not submit adaptation plans by the due date for this FOA, they will be unable to support public health agencies, academia, and non-public health climate change sector activities).

implement the Climate and Health Adaptation Monitoring Program ("CHAMP").<sup>6</sup> Before an applicant can implement CHAMP, and before an applicant is eligible for this grant program, it must have an existing Climate and Health Adaptation Plan.<sup>7</sup> This plan must address the nexus between climate and health, as the CDC reports that climate change has the potential to disrupt physical, biological, and ecological systems, resulting in increased disease, injury, and premature death.<sup>8</sup>

## a) Indiana Compliance

Applications for the CDC BRACE funds were due Monday, June 20, 2016.<sup>9</sup> Leadership in Indiana has likely prevented the state from applying for this grant because it requires applicants to prepare a Climate and Health Adaptation Plan. While 23 states have general climate adaptation plans finalized or in progress, Indiana has no such plan.<sup>10</sup> Lacking a general climate adaptation plan does not preclude an applicant from preparing the appropriate Climate and Health Adaptation Plan required by the CDC, but for the same reasons that Indiana does not have a general adaptation plan, it is likely that the state would not have prepared a plan specifically addressing the public health emergency that will come from unbridled climate change.

<sup>&</sup>lt;sup>6</sup> *Id.* at 30 (an acceptable Climate and Health Adaptation Plan can be a final adaptation plan, draft adaptation, or adaptation plan summary).

<sup>&</sup>lt;sup>7</sup> *Id.* at 13.

<sup>&</sup>lt;sup>8</sup> Climate Effects on Health, CENTERS FOR DISEASE CONTROL AND PREVENTION,

http://www.cdc.gov/climateandhealth/effects/default.htm (last visited June 20, 2016).

<sup>&</sup>lt;sup>9</sup> *Id.* at 20.

<sup>&</sup>lt;sup>10</sup> State and Local Adaptation Plans, GEORGETOWN CLIMATE CENTER,

http://www.georgetownclimate.org/adaptation/state-and-local-plans (last visited June 20, 2016) (states with final Adaptation Plans: Alaska, California, Colorado, Connecticut, Florida, Massachusetts, Maryland, Maine, New Hampshire, New York, Oregon, Pennsylvania, Virginia, Washington. States with Adaptation Plans in Progress: District of Columbia, Delaware, Hawaii, Michigan, Minnesota, New Jersey, Rhode Island, Vermont, Wisconsin. These adaptation plans do not necessarily constitute a Climate and Health Adaptation Plan for the CDC).

Indiana's climate change avoidance policy could prevent up to \$300,000 per year towards climate adaptation measures from the CDC.<sup>11</sup>

<sup>&</sup>lt;sup>11</sup> CENTERS FOR DISEASE CONTROL AND PREVENTION, *supra* at 16 (this grant, unlike many other federal mitigation grants, does not require the state to match funds. Essentially, as long as an application is approved, and duties fulfilled, this is guaranteed funding at no cost to the applicant beyond developing an application).