



**U.S. Department of
Health and Human Services**
Centers for Disease
Control and Prevention

Print Date: 3/10/26

Title: Overdose Data to Action Limiting Overdose through Collaborative Actions in Localities (OD2A LOCAL)

Project Id: 0900f3eb8238b8d6

Accession #: NCIPC-PPEB-5/6/24-8b8d6

Project Contact: Alice Asher

Organization: NCIPC/DOP/PPEB

Status: **Project In Progress**

Intended Use: **Project Determination**

Estimated Start Date: 05/17/2024

Estimated Completion Date: 09/04/2028

CDC/ATSDR HRPO/IRB Protocol #:

OMB Control #: 0920-1283

OMB Discontinuation Date:

Determinations

Determination	Justification	Completed	Entered By & Role
HSC: Does NOT Require HRPO Review	Not Research / Other <i>45 CFR 46.102(l)</i> Program Evaluation	5/17/24	Ferdon_Corinne (djz4) CIO HSC
PRA: PRA Applies		5/17/24	Ferdon_Corinne (djz4) OMB / PRA
ICRO: PRA Applies	OMB Approval date: 5/11/23 OMB Expiration date: 5/31/26	5/20/24	Zirger_Jeffrey (wtj5) ICRO Reviewer

Description & Funding

Description

Priority: Standard

Date Needed: 05/16/2024

Priority Justification:

CDC Priority Area for this Project: Not selected

Determination Start Date: 05/06/24

Description: This is a large, multi-component NOFO support overdose prevention and surveillance activities in 40 localities. This project determination is for the overall NOFO. Evaluation activities and specific surveillance activities have separate determinations.

IMS/CIO/Epi-Aid/Lab-Aid/Chemical Exposure Submission: No

IMS Activation Name: Not selected

Submitted through IMS Clearance Matrix: Not selected

Primary Scientific Priority: Not selected

Secondary Scientific Priority (s): Not selected

Task Force Responsible: Not selected

CIO Emergency Response Name: Not selected

Epi-Aid Name: Not selected

Lab-Aid Name: Not selected

Assessment of Chemical Exposure Name: Not selected

Goals/Purpose The purpose of this project is to use data to drive action steps that reduce overdose morbidity and mortality in communities, while addressing health disparities, with a primary focus on opioid, stimulant and polysubstance use involving opioids and/or stimulants. 40 localities are funded under this NOFO. OD2A: LOCAL was designed to empower cities, counties, and territories to: (1) Use data to inform and tailor prevention strategies, with emphasis on reaching groups disproportionately affected by the overdose epidemic, at highest risk of overdose, and those historically underserved by prevention programs; (2) Ensure implementation of culturally relevant interventions and equitable delivery of prevention services, informed through data and ongoing engagement with the populations programs are intended to serve; (3) Develop and grow multisectoral partnerships to strengthen the local overdose response.

Objective: This project has 4 required and 2 optional prevention strategies (linkage to care, harm reduction, stigma reduction, public health /public safety partnerships, guideline-concordant care, and health IT enhancements) as well as 1 required surveillance activity, surveillance infrastructure. There are also two optional and competitive components, drug product and paraphernalia testing, and linkage to care surveillance. Activities take place in community, public safety and health systems settings. The goal is to build a strong infrastructure of overdose prevention and care in communities, through systems building, partnerships, and engagement of people who use drugs.

Does your project measure health disparities among populations/groups experiencing social, economic, geographic, and/or environmental disadvantages?: Yes

Does your project investigate underlying contributors to health inequities among populations /groups experiencing social, economic, geographic, and/or environmental disadvantages?: No

Does your project propose, implement, or evaluate an action to move towards eliminating health inequities?: Yes

Activities or Tasks: Programmatic Work

Target Populations to be Included/Represented: Prisoners ; American Indian or Alaska Native ; Black or African American ; Hispanic or Latino ; Native Hawaiian or Other Pacific Islander ; White ; Female ; Male ; Adult 18-24 years ; Healthcare Provider

Tags/Keywords: Opioid-Related Disorders ; Drug Overdose ; Behavioral Medicine

CDC's Role: Activity originated and designed by CDC staff, or conducted at the specific request of CDC, or CDC staff will approve study design and data collection as a condition of any funding provided ; CDC employees will participate as co-authors in presentation(s) or publication(s) ; CDC employees will provide substantial technical assistance or oversight ; CDC is providing funding

Method Categories: Technical Assistance

Methods: CDC provides technical assistance support for program implementation through project officers, prevention science officers, evaluation science officers and other subject matter experts.

Collection of Info, Data or Biospecimen: Recipients will submit annual progress reports to describe work completed and any barriers to workplan implementation. Evaluation and surveillance data are collected. Separate project determinations are submitted for those collection activities. This data collection is supported by OMB Control No 0920-1283.

Expected Use of Findings/Results and their impact: Recipients are expected to use their own data to inform program implementation. CDC will use information from aggregate APRs and workplans to describe the overall program implementation, partnerships and other approaches to comprehensive overdose prevention. Information may be disseminated via peer-reviewed publications and presentations.

Could Individuals potentially be identified based on Information Collected? No

Funding

Funding Type	Funding Title	Funding #	Original Budget Yr	# Years Award	Budget Amount
CDC Cooperative Agreement	Overdose Data to Action Limiting Overdose through Collaborative Actions in Localities	CDC-CE23-0003	2023	5	400000000.00

HSC Review

HSC Attributes

Program Evaluation Yes

Regulation and Policy

Do you anticipate this project will require review by a CDC IRB or HRPO? No

Estimated number of study participants

Population - Children

Protocol Page #:

Population - Minors

Protocol Page #:

Population - Prisoners

Protocol Page #:

Population - Pregnant Women

Protocol Page #:

Population - Emancipated Minors

Protocol Page #:

Suggested level of risk to subjects

Do you anticipate this project will be exempt research or non-exempt research

Requested consent process wavers

Informed consent for adults	No Selection
Children capable of providing assent	No Selection
Parental permission	No Selection
Alteration of authorization under HIPAA Privacy Rule	No Selection

Requested Waivers of Documentation of Informed Consent

Informed consent for adults	No Selection
Children capable of providing assent	No Selection
Parental permission	No Selection

Consent process shown in an understandable language

Reading level has been estimated	No Selection
Comprehension tool is provided	No Selection
Short form is provided	No Selection
Translation planned or performed	No Selection
Certified translation / translator	No Selection
Translation and back-translation to/from target language(s)	No Selection
Other method	No Selection

Clinical Trial

Involves human participants No Selection

Assigned to an intervention No Selection

Evaluate the effect of the intervention No Selection

Evaluation of a health related biomedical or behavioral outcome No Selection

Registerable clinical trial No Selection

Other Considerations

Exception is requested to PHS informing those bested about HIV serostatus No Selection

Human genetic testing is planned now or in the future No Selection

Involves long-term storage of identifiable biological specimens No Selection

Involves a drug, biologic, or device No Selection

Conducted under an Investigational New Drug exemption or Investigational Device Exemption No Selection

Institutions & Staff

Institutions

Will you be working with an outside Organization or Institution? Yes

Institution	FWA #	FWA Exp Date	Funding	Funding Restriction Amount
40 local health departments			Overdose Data to Action Limiting Overdose through Collaborative Actions in Localities - CDC-CE23-0003	

Institution	Funding Restriction Percentage	Funding Restriction Reason	Funding Restriction has been Lifted
40 local health departments			

Institution	Institution Role(s)	Institution Project Title	Institution Project Tracking #	Prime Institution
40 local health departments	Implementing the Project	OD2A LOCAL		

Institution	Regulatory Coverage	IRB Review Status
40 local health departments	Not Engaged in Conduct of Non-Exempt Human Research	Not Applicable

Institution	Registered IRB	IRB Registration Exp. Date	IRB Approval Status
40 local health departments			

Institution	IRB Approval Date	IRB Approval Exp. Date	Relying Institution IRB
40 local health departments			

Staff

Staff Member	SIQT Exp. Date	CITI Biomedical Exp. Date	CITI Social & Behavioral Exp. Date	CITI Good Clinical Practice Exp. Date	CITI Good Laboratory Practice Exp. Date	Staff Role	Email	Phone	Organization
Cherie Rooks-Peck	11/17/2028		12/15/2028			Program Official	whq4@cdc.gov	404-639-6429	APPLIED PREVENTION SCIENCE TEAM
Tiffany Winston	07/18/2026		12/15/2028			Program Official	iwj8@cdc.gov	404-498-1624	STATE & LOCAL TECHNICAL ASSISTANCE TEAM B

Data

DMP

Proposed Data Collection Start Date: 5/17/24
Proposed Data Collection End Date: 9/4/28
Proposed Public Access Level: Non-Public

Non-Public Details:

Reason For Not Releasing Data: Other - Data reflect programmatic reporting and progress updates.

Public Access Justification: Data reflect reporting of program planning and progress updates to be submitted to CDC in annual workplans and annual performance reports. Data would not be useful for re-analysis beyond what will be conducted to guide program technical assistance and other expected CDC-developed products.

How Access Will Be Provided for Data: All data are on a secure website, Partners Portal, only accessible by funded jurisdictions and relevant CDC staff.

Plans for Archival and Long Term Preservation: Partners Portal will maintain the data throughout the project and as needed to meet CDC/HHS guidelines.

Spatiality

Country	State/Province	County/Region
United States		

Dataset

Dataset Title	Dataset Description	Data Publisher /Owner	Public Access Level	Public Access Justification	Landing Page URL	Direct Download URL	Type of Data Released	Collection Start Date	Collection End Date
Dataset yet to be added...									

Supporting Info

Current	CDC Staff Member and Role	Date Added	Description	Supporting Info Type	Supporting Info
	Zirger_Jeffrey (wtj5) ICRO Reviewer	05/20/2024	NOA 0920-1283 (2023)	Notice of Action	NOA 0920-1283_2023.pdf
	Asher_Alice (luq1) Project Contact	05/07/2024	List of funded recipients, by component.	Other	Copy of CE-22-2203 OD2A LOCAL Recipients by Component_8.25.23 - Copy.xlsx
Current	Asher_Alice (luq1) Project Contact	05/06/2024	Full funding announcement is attached.	Notice of Funding Opportunity	Foa_Content_of_CDC-RFA-CE-23-0003.pdf



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention



**U.S. Department of
Health and Human Services**
Centers for Disease
Control and Prevention

Print Date: 3/10/26

Title: Overdose Data to Action in States

Project Id: 0900f3eb82380e41

Accession #: NCIPC-SPIB-4/30/24-80e41

Project Contact: Nakki A Price

Organization: NCIPC/DOP/SPIB

Status: **Project In Progress**

Intended Use: **Project Determination**

Estimated Start Date: 09/01/2023

Estimated Completion Date: 08/31/2028

CDC/ATSDR HRPO/IRB Protocol #:

OMB Control #: 0920-1283

OMB Discontinuation Date:

Determinations

Determination	Justification	Completed	Entered By & Role
HSC: Does NOT Require HRPO Review	Not Research / Other <i>45 CFR 46.102(l)</i> Program Evaluation Other - Programmatic activities	5/2/24	Angel_Karen C. (idy6) CIO HSC
PRA: PRA Applies		5/3/24	Angel_Karen C. (idy6) OMB / PRA
ICRO: PRA Applies	OMB Approval date: 5/11/23 OMB Expiration date: 5/31/26	5/3/24	Zirger_Jeffrey (wtj5) ICRO Reviewer

Description & Funding

Description

Priority: Urgent

Date Needed: 04/30/2024

Priority Justification: The project determination is needed as a required document for continued funding of the program.

CDC Priority Area for this Project: Not selected

Determination Start Date: 04/30/24

Description:

This determination is for the overall OD2A in States program. Separate project determinations will be submitted for DOSE, SUDORS, Data Linkage, and Biosurveillance strategies. Additional project determinations will be provided for evaluation components as well. In 2021, 106,699 drug overdose deaths occurred in the United States, which is a 14% rate increase from 2020 (91,799) [1]. Drug overdose death rates increased for each race and Hispanic-origin group except non-Hispanic Asian people between 2020 and 2021 [1]. NonHispanic Native Hawaiian or Other Pacific Islander and non-Hispanic American Indian or Alaska Native (AI/AN) people experienced the largest percentage increases in drug overdose death rates from 2020 through 2021, with rates increasing 47% and 33%, respectively [1]. The overdose epidemic has continued to evolve, with the majority of overdose deaths now involving illicitly manufactured fentanyl and fentanyl analogs [2]. In addition, opioids are nested in a broadening epidemic, including polysubstance overdose deaths, largely driven by deaths coinciding opioids and stimulants, such as cocaine and methamphetamine [1-3]. Finally, many states# data suggest that more than three out of five overdose deaths involved at least one potential opportunity to link a person to care or to implement a lifesaving action like administering naloxone when an overdose occurred [4]. OD2A-S supports SHDs in reducing overdose morbidity and mortality. It builds on the work, expertise, and lessons learned from CDC's previous cooperative agreement, Overdose Data to Action, while simultaneously aligning with shifts in the epidemic, including changes in the illicit drug supply and a rise in polysubstance overdoses (i.e., involving more than one substance). OD2A-S strategies continue to promote the use of surveillance and other data to inform prevention and policy

interventions that are anchored in the best available evidence. Under OD2A-S, funding has also been allocated for surveillance infrastructure, biosurveillance, and data linkage. There is also a greater emphasis on harm reduction (e.g., using fentanyl test strips [FTS] for drug checking and distributing during post-overdose outreach), support for and expansion of navigation programs and outreach by people with lived experience to communities they represent, and an increased focus on achieving health equity to ultimately reduce disparities in overdoses. CDC offers additional funding mechanisms for overdose surveillance and prevention activities tailored to local, township, and territorial jurisdictions. In addition to the Overdose Data to Action in States NOFO, CDC is providing a NOFO suited to local governments and territories called Overdose Data to Action: Limiting Overdose through Collaborative Actions in Localities (OD2A: LOCAL), CDC-RFA-CE-23-0003. In addition to this funding opportunity for states, CDC continues to respond to changes in the epidemic by investing in innovative partnerships addressing areas such as public health and public safety, collaboration and training opportunities with medical examiners and coroners, and improved toxicology testing. CDC invests in primary prevention to address risk factors for overdoses, such as adverse childhood experiences and youth substance use, via the Drug-Free Communities support program.

IMS/CIO/Epi-Aid/Lab-Aid/Chemical Exposure Submission: No

IMS Activation Name: Not selected

Submitted through IMS Clearance Matrix: Not selected

Primary Scientific Priority: Not selected

Secondary Scientific Priority (s): Not selected

Task Force Responsible: Not selected

CIO Emergency Response Name: Not selected

Epi-Aid Name: Not selected

Lab-Aid Name: Not selected

Assessment of Chemical Exposure Name: Not selected

Goals/Purpose

OD2A-S aims to enhance the ability of SHDs to track and prevent nonfatal and fatal overdoses while also identifying emerging drug threats. It emphasizes surveillance strategies and evidence-based and evidence-informed interventions that have an immediate impact on reducing overdose morbidity and mortality, with a focus on opioids, stimulants, and polysubstance use (if addressed in combination with opioids and stimulants). OD2A-S also focuses on closing gaps related to access to care and services to reduce health inequities for populations at greatest risk for overdose.

Objective:

All recipients should be positioned and are expected to impact long-term outcomes within five years of receiving funding. Long-term outcomes include: ? Decreased fatal drug overdoses overall: o Primarily involving opioids and/or stimulants o Among those disproportionately affected by the overdose epidemic and those previously underserved by overdose prevention programs and the healthcare system overall ? Decreased nonfatal drug overdoses overall: o Primarily involving opioids and/or stimulants o Among those disproportionately affected by the overdose epidemic and those previously underserved by overdose prevention programs and the healthcare system overall ? Decreased illicit opioid and stimulant use, including co-use with other substances, OUD, and StUD ? Increased uptake of evidence-based treatment and retention with long-term recovery supports, with a primary focus on OUD and StUD ? Improved health equity among groups disproportionately affected by the overdose epidemic and those previously underserved by overdose prevention programs and the healthcare system overall ? Decreased stigma related to substance use and overdose

Does your project measure health disparities among Yes

populations/groups experiencing social, economic, geographic, and/or environmental disadvantages?:

Does your project investigate underlying contributors to health inequities among populations /groups experiencing social, economic, geographic, and/or environmental disadvantages?: Yes

Does your project propose, implement, or evaluate an action to move towards eliminating health inequities?: Yes

Activities or Tasks: New Collection of Information, Data, or Biospecimens ; Programmatic Work

Target Populations to be Included/Represented: General US Population

Tags/Keywords: Drug Overdose ; Surveillance ; Primary Prevention ; Data Collection ; Data2Action ; Mortality

CDC's Role: CDC employees or agents will obtain data by intervening or interacting with participants ; CDC employees will provide substantial technical assistance or oversight ; CDC is providing funding ; Other - CDC employees will conduct evaluation studies on data collected from recipient reports and data sets

Method Categories: Health Education; Surveillance Support; Technical Assistance; Other - Evaluation

Methods: This program will be executed through a cooperative agreement mechanism for state health departments and the District of Columbia through a formula based on overdose prevalence and optional competitive components.

Collection of Info, Data or Biospecimen: Data collected under this project determination includes the data through the previously submitted ICR (OMB Control No: 0920-1283). This includes Workplans, Annual Progress Reports, evaluation and performance measurement plans. This data is collected through the Partners Portal. Additional data collections that are part of OD2A will be submitted via separate new PDs (DOSE, SUDORS, biosurveillance, data linkage, and evaluation work).

Expected Use of Findings/Results and their impact: What is learned from execution of this cooperative agreement will be used to inform CDC's role in providing public health protection and meeting goals associated with morbidity and mortality associated with overdose.

Could Individuals potentially be identified based on Information Collected? No

Funding

Funding Type	Funding Title	Funding #	Original Budget Yr	# Years Award	Budget Amount
CDC Cooperative Agreement	Overdose Data to Action in States	CDC-RFA-CE-23-0002	2024	5	192115196.00

HSC Review

HSC Attributes

Program Evaluation	Yes
Other - Programmatic activities	Yes

Regulation and Policy

Do you anticipate this project will require review by a CDC IRB or HRPO? No

Estimated number of study participants

Population - Children Protocol Page #:

Population - Minors Protocol Page #:

Population - Prisoners Protocol Page #:

Population - Pregnant Women Protocol Page #:

Population - Emancipated Minors Protocol Page #:

Suggested level of risk to subjects

Do you anticipate this project will be exempt research or non-exempt research

Requested consent process wavers

Informed consent for adults No Selection

Children capable of providing assent No Selection

Parental permission No Selection

Alteration of authorization under HIPAA Privacy Rule No Selection

Requested Waivers of Documentation of Informed Consent

Informed consent for adults	No Selection
Children capable of providing assent	No Selection
Parental permission	No Selection

Consent process shown in an understandable language

Reading level has been estimated	No Selection
Comprehension tool is provided	No Selection
Short form is provided	No Selection
Translation planned or performed	No Selection
Certified translation / translator	No Selection
Translation and back-translation to/from target language(s)	No Selection
Other method	No Selection

Clinical Trial

Involves human participants	No Selection
Assigned to an intervention	No Selection
Evaluate the effect of the intervention	No Selection
Evaluation of a health related biomedical or behavioral outcome	No Selection
Registerable clinical trial	No Selection

Other Considerations

Exception is requested to PHS informing those bested about HIV serostatus	No Selection
Human genetic testing is planned now or in the future	No Selection
Involves long-term storage of identifiable biological specimens	No Selection
Involves a drug, biologic, or device	No Selection

Institutions & Staff

Institutions

Will you be working with an outside Organization or Institution? Yes

Institution	FWA #	FWA Exp Date	Funding	Funding Restriction Amount
State Health Departments and DC			Overdose Data to Action in States - CDC-RFA-CE-23-0002	

Institution	Funding Restriction Percentage	Funding Restriction Reason	Funding Restriction has been Lifted
State Health Departments and DC			

Institution	Institution Role(s)	Institution Project Title	Institution Project Tracking #	Prime Institution
State Health Departments and DC	Implementing the Project			

Institution	Regulatory Coverage	IRB Review Status
State Health Departments and DC	IRB Review is Not Required	

Institution	Registered IRB	IRB Registration Exp. Date	IRB Approval Status
State Health Departments and DC			

Institution	IRB Approval Date	IRB Approval Exp. Date	Relying Institution IRB
State Health Departments and DC			

Staff

Staff Member	SIQT Exp. Date	CITI Biomedical Exp. Date	CITI Social & Behavioral Exp. Date	CITI Good Clinical Practice Exp. Date	CITI Good Laboratory Practice Exp. Date	Staff Role	Email	Phone	Organization
Brandon Nesbit	11/26 /2028		07/30/2028			Program Official	vxw6@cdc.gov	404-408-7642	DIVISION OF OVERDOSE PREVENTION
Jocelyn Wheaton	08/31 /2026		12/15/2028			Program Lead	kzw9@cdc.gov	404-639-1048	STATE PROGRAM AND IMPLEMENTATION BRANCH
Nakki Price	07/06 /2026		03/28/2023			Project Coordinator	nhp7@cdc.gov	404-498-2003	STATE PROGRAM AND IMPLEMENTATION BRANCH

Data

DMP

Proposed Data Collection Start Date: 3/1/24
Proposed Data Collection End Date: 3/31/28
Proposed Public Access Level: Non-Public

Non-Public Details:

Other - Data reported is programmatic in nature and reflects the proposed activities and progress made on recipient funded work. It

Reason For Not Releasing Data:

will not be made public.

Public Access Justification:

Data collected under this project determination includes the data through the previously submitted ICR (OMB Control No: 0920-1283). This includes Workplans, Annual Progress Reports, evaluation and performance measurement plans. This data is collected through the Partners Portal. Additional data collections that are part of OD2A will be submitted via separate new PDs (DOSE, SUDORS, biosurveillance, data linkage, and evaluation work).

How Access Will Be Provided for Data:

Data is collected through the Partners Portal and securely stored on CDC network.

Plans for Archival and Long Term Preservation:**Spatiality**

Country	State/Province	County/Region
United States		

Dataset

Dataset Title	Dataset Description	Data Publisher /Owner	Public Access Level	Public Access Justification	Landing Page URL	Direct Download URL	Type of Data Released	Collection Start Date	Collection End Date
Dataset yet to be added...									

Supporting Info

Current	CDC Staff Member and Role	Date Added	Description	Supporting Info Type	Supporting Info
	Zirger_Jeffrey (wtj5) ICRO Reviewer	05/03/2024	NOA 0920-1283 (2023)	Notice of Action	NOA 0920-1283_2023.pdf
	Nesbit_Brandon (vxw6) Project Contact	04/30/2024	OD2A in States NOFO	Other	Foa_Content_of_CDC-RFA-CE-23-0002.pdf



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