

Department of Health and Human Services

**OFFICE OF  
INSPECTOR GENERAL**

**CDC PROVIDED OVERSIGHT AND  
ASSISTANCE; HOWEVER, ELC  
RECIPIENTS STILL FACED  
CHALLENGES IN IMPLEMENTING  
COVID-19 SCREENING  
TESTING PROGRAMS**

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September 2023  
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# *Office of Inspector General*

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## Report in Brief

Date: September 2023  
Report No. A-05-22-00010

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES  
**OFFICE OF INSPECTOR GENERAL**



### Why OIG Did This Audit

The Centers for Disease Control and Prevention's (CDC's) Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) program provides strategic investments through its cooperative agreement with health departments aimed at reducing domestic infectious disease-related illnesses and death.

The American Rescue Plan (ARP) provided relief to address the continued impact of COVID-19 on the economy, public health, State and local governments, individuals, and businesses. CDC provided \$10 billion in ARP funding to 64 ELC recipients to support COVID-19 screening testing for teachers, staff, and students in K-12 school settings.

Our objective was to determine what oversight and assistance CDC provided to assist ELC recipients in implementing COVID-19 screening testing programs.

### How OIG Did This Audit

We reviewed information the ELC recipients were required to report during the project period of April 2021 through July 2023 and determined the programmatic and financial oversight CDC provided to support the ELC Reopening Schools project. In addition, we reviewed the technical assistance, implementation tools, and resources CDC provided to ELC recipients in implementing the COVID-19 screening testing programs.

## CDC Provided Oversight and Assistance; However, ELC Recipients Still Faced Challenges in Implementing COVID-19 Screening Testing Programs

### What OIG Found

We found that CDC provided oversight and assistance to the ELC recipients in implementing the COVID-19 screening testing programs, by utilizing recipient data and conducting periodic outreach through webinars and technical assistance calls, among other things. However, based on the ELC recipients' responses to the OIG survey, we identified challenges the ELC recipients encountered in implementing the ELC screening testing programs within their jurisdictions. Some of the ELC recipients encountered challenges expending the ELC Reopening Schools funding, such as barriers from schools in implementing the screening testing programs in their districts, while others used alternative sources of government funding in the implementation of the screening testing programs. In addition, some of the ELC recipients encountered challenges implementing the ELC screening testing programs, including: (1) lack of interest from the schools and communities, (2) limitations on the costs that were allowable under the terms and conditions of the awards, (3) insufficient school staffing and resources, and (4) issues with vendors or contractors. The challenges that were identified in implementing the screening testing programs from the survey of ELC recipients provide CDC with areas to focus on when implementing future ELC programs.

### What OIG Recommends

The report includes no recommendations. However, we expect that CDC will use the suggestions and feedback from the ELC recipients' responses to the OIG survey to improve development of ELC programs that are in response to future public health emergencies. CDC elected not to provide formal written comments on our draft report but did provide technical comments, which we addressed as appropriate.

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## INTRODUCTION

### WHY WE DID THIS AUDIT

The Centers for Disease Control and Prevention's (CDC's) Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) program provides strategic investments through its cooperative agreement with health departments aimed at reducing domestic infectious disease-related illnesses and death. Since 1995, CDC's ELC program has been providing support to health departments throughout the United States. Currently, CDC provides financial resources and technical assistance each year to 64 ELC recipients to support activities related to surveillance, detection, response, and prevention of infectious diseases.<sup>1</sup>

The American Rescue Plan (ARP) Act of 2021 (P.L. No. 117-2) provided relief to address the continued impact of COVID-19 on the economy, public health, State and local governments, individuals, and businesses. CDC provided \$10 billion in ARP funding to the 64 ELC recipients to support COVID-19 screening testing for teachers, staff, and students in K-12 school settings.<sup>2, 3</sup> CDC used an existing ELC cooperative agreement (CK19-1904) and recipients to ensure that the funding was deployed quickly to help schools reopen and remain open for in-person instruction. Recognizing that establishing a testing program was new for many schools, CDC and State and local health departments provided support and technical assistance to assist States and schools with implementing these programs.

COVID-19 has created extraordinary challenges for the delivery of health care and human services to the American people. As the oversight agency for the Department of Health and Human Services (HHS), the Office of Inspector General (OIG) oversees HHS's COVID-19 response and recovery efforts. This audit is part of OIG's COVID-19 response strategic plan.<sup>4</sup>

### OBJECTIVE

Our objective was to determine what oversight and assistance CDC provided to assist ELC recipients in implementing COVID-19 screening testing programs.

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<sup>1</sup> The 64 ELC recipients include all 50 States, large local governments, and United States territories and affiliate health departments.

<sup>2</sup> Three of the sixty-four ELC recipients did not accept or use the funds, and one recipient accepted part of the funding, resulting in \$1 billion of ARP funding that was de-obligated. As a result, of the \$10 billion in ARP funding awarded to the ELC recipients, the final obligation amount was \$9 billion.

<sup>3</sup> "Screening testing" is intended to identify people with COVID-19 who are asymptomatic or do not have any known, suspected, or reported exposure to someone with COVID-19.

<sup>4</sup> OIG's COVID-19 response strategic plan and oversight activities can be accessed at [HHS-OIG's Oversight of COVID-19 Response and Recovery | HHS-OIG](#).

## **BACKGROUND**

### **American Rescue Plan Funding for COVID-19 Screening Testing at Schools**

The ARP Act, enacted March 11, 2021, appropriated \$47.8 billion to HHS to carry out activities to detect, diagnose, trace, and monitor SARS-CoV-2 and COVID-19 infections and related strategies to mitigate the spread of COVID-19 (§ 2401 of the ARP Act [or] 42 USC § 247d). CDC, through the ELC program, provided \$10 billion to States to support COVID-19 screening testing for teachers, staff, and students to assist schools in reopening safely for in-person instruction. The objectives and goals of the funding were focused on providing the resources to implement screening testing programs in schools. ELC recipients were encouraged to align their approach to testing with CDC recommendations for K-12 schools whenever possible.

From April 7–8, 2021, the \$10 billion was awarded to the 64 ELC recipients according to a population-based formula. The funding was awarded for a 16-month project period ending July 31, 2022. On March 30, 2022, CDC notified the ELC recipients that it would be extending the use of the ELC Reopening Schools funding through July 31, 2023.

### **CDC's COVID-19 Screening Testing Program**

According to CDC, screening testing was a tool that schools could utilize to help safely reopen as part of a comprehensive COVID-19 mitigation approach. CDC awarded the funds to existing cooperative agreement recipients to ensure the funding was deployed quickly to help schools reopen and remain open. In addition to providing diagnostic testing of symptomatic and exposed individuals, screening testing would help schools identify infected individuals without symptoms who may be contagious so that prompt action could be taken to prevent further transmission. With the ARP funding, ELC recipients could support implementing critical screening testing programs that were needed in schools. Recognizing that establishing a testing program was new for many schools, CDC and State and local health departments provided support and technical assistance to assist States and schools with implementing these programs.

CDC stated that reopening school resources were critical in ensuring that students and staff safely continued in-person learning. As of April 2023, over 156 million tests have been conducted as a result of ELC Reopening Schools funding. ELC Reopening Schools funding provided financial support for over 5,600 positions. The main category of funded positions was school nurses, representing over 3,200 positions.

## **ELC Reopening School Guidance**

CDC published the initial *ELC Reopening Schools: Support for Screening Testing To Reopen & Keep Schools Operating Safely* (ELC Reopening Schools) guidance document in March 2021. As the response to the pandemic changed throughout the COVID-19 public health emergency (PHE), the ELC program issued revised ELC Reopening Schools guidance documents to align with CDC recommendations and the current needs of the ELC recipients to address the PHE.

In accordance with the ELC Reopening Schools guidance, a minimum of 85 percent of the funds must be directly used to support prevention efforts in school districts. This support can include directly providing funds to schools or indirectly providing support to increase screening testing and support for related prevention strategies in all K-12 schools within the ELC recipient's jurisdiction. ELC recipients may use a combination of approaches to successfully provide the necessary support to schools. Up to 15 percent of the funds may be used by ELC recipients for coordination, management, technical assistance, monitoring, data collection, and reporting activities.

The funds could not be applied to expenditures that were incurred before the date of award. However, ELC recipients could use previously awarded COVID-19 funding for any school screening testing activities that are consistent with those awards.<sup>5</sup>

### **Requirements for CDC's Monitoring and Oversight of the ELC Recipients**

CDC is required to conduct post-award monitoring for all cooperative agreements on a regular basis.<sup>6</sup> Post-award monitoring is intended to ensure the ELC recipients make progress to achieve the objectives of the Federal award, consistent with performance goals included in the Federal award, and specific project activities.<sup>7</sup> The objectives and goals of the ELC Reopening Schools funding focused on providing needed resources to implement screening testing programs in schools aligned with the CDC recommendations for K-12 schools. As an awarding agency, CDC is required to ensure that program objectives and goals are accomplished by the ELC recipients.

The ELC program operates within the CDC's Division of Preparedness and Emerging Infections, Scientific Program and Development Branch (DPEI branch). The ELC project officers and program advisors provide oversight to the ELC recipients on the financial reporting requirements under the cooperative agreement. In addition, the ELC project officer team and

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<sup>5</sup> The previously awarded COVID-19 funding was the ELC Enhancing Detection funding of \$10.25 billion awarded under the Paycheck Protection Program and Health Care Enhancement Act of 2020 (P.L. No. 116-139, April 24, 2020) and the ELC Enhancing Detection Expansion funding of \$19.11 billion awarded under the Coronavirus Response and Relief Supplemental Appropriations Act of 2021 (P.L. No. 116-260, Dec. 27, 2020).

<sup>6</sup> Post-award monitoring extends through the period of performance and closeout.

<sup>7</sup> HHS Grants Policy Administration Manual, part H, chapter 2.

other units within the DPEI branch provided guidance, technical assistance, and resources to ELC recipients in implementing the ELC screening testing programs. The project officers are listed on the Notice of Award and have the responsibility for overseeing the project. Program advisers are subject matter experts who provide technical information to help recipients move their projects forward.

CDC stated that it continuously and closely monitored the ELC recipients' performance, activities, and progress through regular engagement, including routine and ongoing communication between CDC and ELC recipients.

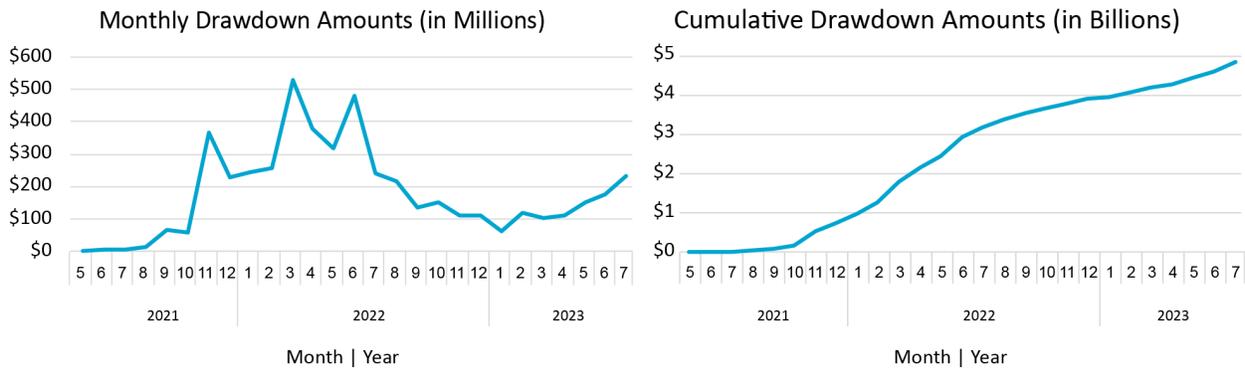
### **Recipients' Use of ELC Reopening School Funding During the ELC Reopening School Project Period**

The \$10 billion in ELC Reopening Schools funding was awarded to the ELC recipients from April 7-8, 2021, under the current ELC cooperative agreement (CK19-1904). The funding was awarded for a 16-month funding period ending July 31, 2022. On March 30, 2022, CDC notified ELC recipients that it would be extending the use of the ELC Reopening Schools funding through July 31, 2023. Recipients were encouraged to continue using the funding to meet current K-12 COVID-19 testing needs. According to CDC, the extension of the ELC Reopening Schools funding budget period allowed ELC recipients to avoid interrupting current school testing activities and maintain critical testing capacity to quickly ramp up school testing when COVID-19 community levels increase.

As of July 2023, the ELC recipients had expended approximately \$4.9 billion of the \$10 billion in ELC Reopening Schools funding. Of the 64 ELC recipients that were awarded ELC Reopening Schools funding, 61 expended funds. The remaining three recipients did not accept or use ELC Reopening Schools funding. The three recipients explained they would be utilizing other sources of government funding for school-related COVID-19 testing.

For the ELC Reopening Schools funding and expenditures for each ELC recipient, see Appendix B. In addition, Figure 1 on the next page shows the monthly and cumulative drawdown amounts for all ELC recipients during the ELC Reopening Schools funding project period.

**Figure 1: American Rescue Plan ELC Spending During the Project Period (April 2021 through July 2023)**



Source: HHS Payment Management System, OIG analysis of ELC recipient data, July 2023.

CDC explained that any unexpended ELC Reopening Schools funding will be de-obligated from the ELC recipients and returned to CDC following normal grant procedures. CDC will return the funding to HHS after the funding is de-obligated from ELC recipients.

**HOW WE CONDUCTED THIS AUDIT**

Our audit covered the oversight and assistance CDC provided to 64 ELC recipients that were awarded \$10 billion in ELC Reopening Schools funding to implement screening testing programs at schools within their jurisdictions during the project period (April 2021 through July 2023). To accomplish our objective, we obtained and reviewed the Grants Policy Administration Manual, ELC Policy & Procedure Manual, terms and conditions of the supplemental awards, and guidance related to the ELC Reopening Schools funding. We also reviewed the information the ELC recipients were required to report during the project period and determined the programmatic and financial oversight CDC provided to support the ELC Reopening Schools project. In addition, we reviewed the technical assistance, implementation tools, and resources CDC provided to ELC recipients in implementing the COVID-19 screening testing programs.

To assess the oversight and assistance provided by CDC, and to determine the challenges in implementing the COVID-19 screening testing programs, we administered an online survey to the 64 ELC recipients that were awarded the ARP supplemental funding. We received responses from 61 of these recipients, for a response rate of 95 percent. Our analysis of the survey results relied only on self-reported data from ELC recipients. We did not independently verify information received from the ELC recipients.

Prior to administering the survey to the ELC recipients, we met with CDC to discuss the survey. After administering the survey to the ELC recipients, we provided CDC with a summary of the survey responses. In addition, we obtained CDC’s feedback on the survey results. CDC explained how it intended to utilize the survey results. CDC indicated that it would share the

ELC recipient suggestions and feedback with those CDC officials who develop plans for future PHE responses. Appendix C contains the survey that was sent to the ELC recipients.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Appendix A contains the details of our audit scope and methodology.

## **FINDINGS**

We found that CDC provided oversight and assistance to the ELC recipients in implementing the COVID-19 screening testing programs by utilizing recipient data and conducting periodic outreach through webinars and technical assistance calls, among other things. However, based on the ELC recipients' responses to the OIG survey, we identified challenges the ELC recipients encountered in implementing the ELC screening testing programs within their jurisdictions. Some of the ELC recipients encountered challenges expending the ELC Reopening Schools funding, such as barriers from schools in implementing the screening testing programs in their districts (e.g., lack of interest in establishing screening testing programs), while others used alternative sources of government funding in the implementation of the screening testing programs. In addition, some of the ELC recipients encountered challenges implementing the ELC screening testing programs, including: (1) lack of interest from the schools and communities, (2) limitations on the costs that were allowable under the terms and conditions of the awards, (3) insufficient school staffing and resources, and (4) issues with vendors or contractors. The challenges that were identified in implementing the screening testing programs from the survey of ELC recipients provide CDC with areas to focus on when implementing future ELC programs.

### **CDC PROVIDED OVERSIGHT AND ASSISTANCE TO THE ELC RECIPIENTS IN IMPLEMENTING THE COVID-19 SCREENING TESTING PROGRAMS**

#### **CDC Used Recipient Data To Oversee Implementation of the ELC COVID-19 Screening Testing Program**

CDC used the data ELC recipients were required to report to oversee the ELC program. The data included: (1) budget documentation, (2) K-12 screening testing implementation plans, (3) COVID-19 screening testing reporting, and (4) financial reports. The following details the data reported by the ELC recipients and the oversight provided by CDC to the ELC recipients during the project period.

### *ELC Screening Testing Supplemental Award Budget*

CDC used ELC recipient budgets to monitor recipients' implementation of their screening testing programs. CDC's oversight of the ELC recipients' budgets included reviewing workplans to determine whether they were feasible based on the budgets and consistent with the intent of the award. In addition, CDC stated that it closely monitored the budgets for each award by tracking expenditures in the HHS Payment Management System throughout the project period.

### *ELC Recipient K-12 Screening Testing Implementation Plans*

CDC utilized the ELC recipients' comprehensive screening testing implementation plans to understand how they planned to implement the activities under the ELC Reopening Schools project. In addition, the plans provided CDC with an understanding of the ELC recipients' roles, as health departments, to ensure success of the screening testing programs.

According to CDC, the ELC program also used the plans to help ensure that awarded funds were being used in a manner consistent with the legislative language and intent of the funding. CDC indicated it quickly identified recipients that did not include the required activities as described in the funding announcement. CDC followed up with those ELC recipients to provide technical assistance and ensure that activities followed the guidance. CDC also used information provided in the plans to understand general themes or trends for how ELC recipients were planning to implement screening testing, prioritize outreach to ELC recipients whose submitted plans indicated a need for follow-up, and facilitate sharing of information with peers in other jurisdictions.

### *COVID-19 Screening Testing Reporting by ELC Recipients*

CDC utilized the ELC recipients' test volume data to understand breadth of screening testing across districts at a high level.<sup>8</sup> The test volume data were reported from schools that implemented screening testing programs. Weekly and monthly test volume data reports included the number of tests conducted by school district, test type, and cases identified. For the quarterly reports, the test volume data only contained the total number of tests conducted within the jurisdiction. In addition, the information provided CDC with insight on the demand for testing as well as spikes in that demand (e.g., testing associated with return to school from the holidays).

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<sup>8</sup> Weekly reports of test volume data were required to be reported from April through June 2021. From July 2021 through September 2022, the test volume data was reported monthly, and beginning October 2022, the test volume data was reported quarterly.

## *Financial Reporting for ELC COVID-19 Funded Projects*

CDC used monthly reports of expenditures and unliquidated obligations to monitor progress and assess expenditures.<sup>9</sup> According to CDC, reviewing spending in the context of the approved budgets and testing plans allowed CDC to gauge progress at a very high level and provide support to the ELC recipients. In addition, during quarterly calls, CDC project officers and program advisors reviewed the financial reporting with ELC recipients and discussed spending and barriers they were facing in implementing the screening testing programs.

### **CDC Provided Several Types of Technical Assistance During Implementation of the School Screening Testing Program**

During implementation of the School Screening Testing Program, CDC provided assistance to State, local, and territorial health departments for testing efforts, including those in K-12 school settings. In addition, CDC offered technical assistance to help keep ELC recipients on track with expending funds by end of the ELC Reopening Schools funding project period. In accordance with CDC guidance, the ELC recipients were required to participate in technical assistance during the ELC Reopening Schools funding project period.

The technical assistance CDC provided included: (1) community-of-practice webinars, (2) technical assistance calls, (3) weekly office hours, (4) peer learning calls, (5) implementation tools and resources, and (6) collaboration with partners. The following details the technical assistance provided by CDC.

#### *Community-of-Practice Webinars*

The CDC ELC program hosted a kickoff webinar on April 1, 2021, to discuss the Reopening Schools guidance with all ELC recipients. Following the webinar, CDC hosted seven community-of-practice webinars from July 2021 through February 2022 to provide the ELC recipients and local partners timely updates and opportunities for peer learning that focused on COVID-19 testing and school readiness. The community-of-practice webinars were attended by hundreds of individuals from the ELC recipients and local partners. The topics of the webinars included prevention strategies in schools, school testing, test-to-stay in K-12 settings, strategies and challenges, testing updates, and requirements.<sup>10</sup>

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<sup>9</sup> Unliquidated obligations refer to financial obligations incurred by the ELC recipients that have not been paid or that have not been recorded.

<sup>10</sup> Test-to-stay strategy enabled unvaccinated students, exposed in school to a person infected with COVID-19, to remain in school while under quarantine if both the infected person and the exposed person wore masks correctly and consistently throughout the exposure.

### *Technical Assistance Calls*

CDC conducted technical assistance calls for the School Screening Testing Program with all of the ELC recipients during the following three timeframes in 2021: (1) May to June, (2) July to August, and (3) October to November.<sup>11</sup>

- May to June: CDC and the ELC recipients discussed the K-12 school screening testing plans including COVID-19 testing models, test reporting, type of tests, staffing, next steps, and available resources.
- July to August: CDC and the ELC recipients discussed the testing program implementation, including overview of testing programs, school participation, evaluation of testing programs, items for follow-up, and available resources.
- October to November: CDC and the ELC recipients discussed the testing program, including staffing, school participation and outreach, contact tracing and case investigation, evaluation of testing program, successes, challenges, items for follow-up, and available resources.

### *Weekly Office Hours*

Beginning in August 2021 through December 2022, CDC hosted weekly office hours for ELC school testing programs. Beginning in January 2023, office hours were hosted on a biweekly basis. During the office hours, ELC recipients had direct access to communicate with CDC ELC program officials and other subject matter experts for technical assistance. In addition, ELC recipients were able to share information and practices among peers.

### *Peer Learning Calls*

To support peer-to-peer learning, CDC organized and facilitated small group discussions where ELC recipients were able to discuss specific COVID-19 testing issues faced by schools and share creative solutions to those challenges. CDC hosted 14 peer learning calls from June through December 2021. The peer learning calls were organized by topic and geographic location. The topics of the calls included creative approaches to school testing, testing strategies, incentives, and benchmarks.

### *Implementation Resources and Tools*

The CDC ELC program provided resources and tools for ELC recipients and schools to implement the School Screening Testing Program. CDC provided resources and tools on the ELC Reopening Schools webpage. In addition, CDC launched a communications toolkit. The toolkit provided

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<sup>11</sup> In addition to the scheduled technical assistance calls in 2021, CDC provided one-on-one technical assistance calls as requested or needed. In 2022, CDC provided one-on-one technical assistance calls with 12 ELC recipients.

flyers and digital media aimed at encouraging parents to opt into school COVID-19 screening testing. Other resources and key information were shared with ELC recipients. For example, CDC developed resources to support the implementation of test-to-stay and shared the resources with the ELC recipients. Additionally, CDC developed frequently asked questions based on guidance and common questions from recipients and distributed weekly school testing announcements with relevant updates and resources.

### *Collaboration With Partners*

CDC collaborated with the Rockefeller Foundation, which hosted a weekly forum for public health and school partners across the country.<sup>12</sup> The forum's goal was to connect and resolve issues through collective thinking and best practice sharing around K-12 reopening efforts through the State and Territory Alliance for Testing K-12 Action Network and the COVID-19 Learning Network for schools. CDC routinely joined weekly forum calls to provide updates, hear feedback from ELC recipients, and address questions. In addition, CDC collaborated with the Shah Family Foundation<sup>13</sup> to provide input on the creation of the Open & Safe Schools website.<sup>14</sup> The website provided a variety of school testing resources, including information on how to get started with COVID-19 testing, checklists, sample documents, and other items for both schools and health departments.

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<sup>12</sup> The Rockefeller Foundation and its partners focused on supporting schools in their efforts to reopen safely amidst the COVID-19 PHE. Available online at <https://www.rockefellerfoundation.org/covid-19-response/k-12-schools-testing-resources> (accessed on August 9, 2023).

<sup>13</sup> The Shah Family Foundation works with local, State, and Federal government partners to test ideas and rethink how budgets are spent, especially in the areas of food access, health and wellness, and education. Available online at <https://www.shahfoundation.org/how-we-work> (accessed on August 9, 2023).

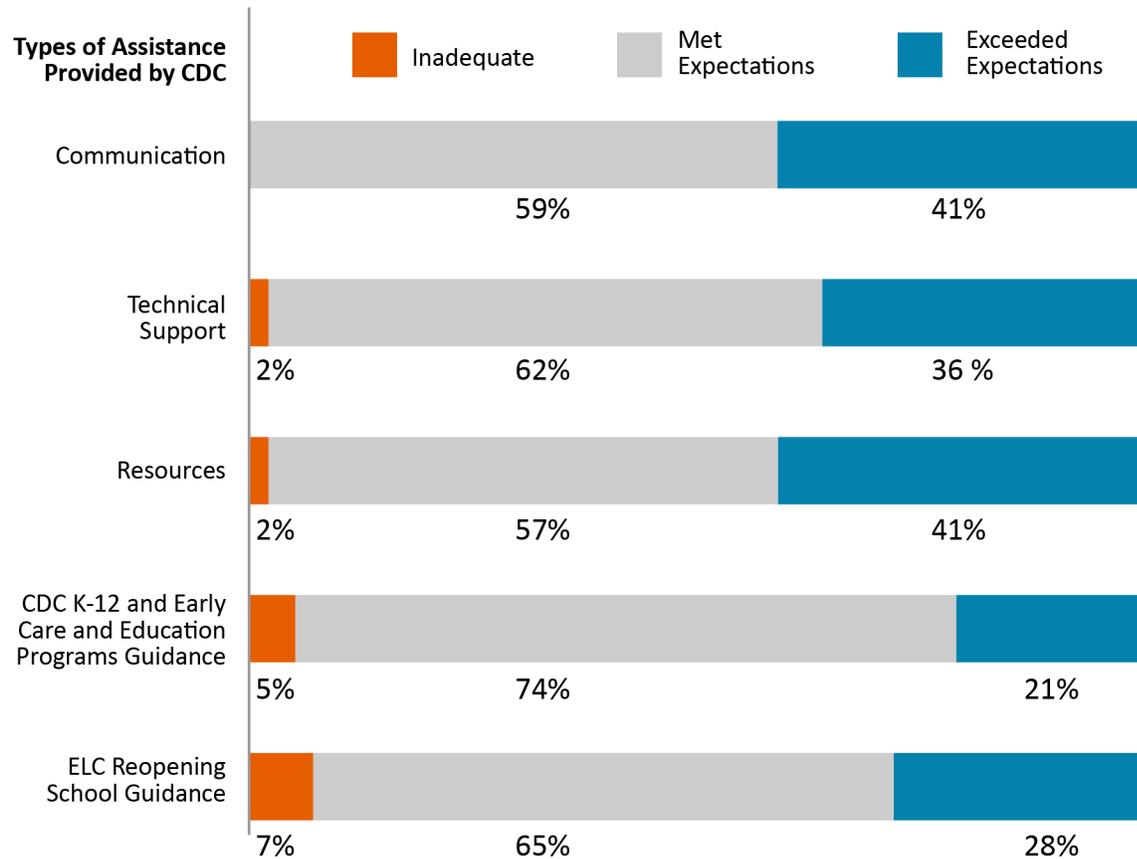
<sup>14</sup> The Open and Safe Schools toolkit was designed to support State public health leaders and school leaders in leveraging Federal Government programs and resources to implement school COVID-19 testing programs as a part of their school reopening strategies. Available online at <https://www.openandsafeschools.org> (accessed on August 9, 2023).

**ELC RECIPIENT RESPONSES RELATED TO THE OVERSIGHT AND ASSISTANCE PROVIDED BY CDC, THE CHALLENGES EXPENDING AWARD FUNDS, AND IMPLEMENTING THE COVID-19 SCREENING TESTING PROGRAMS**

**Most ELC Recipients Responded That Assistance CDC Provided in Implementing the ELC Screening Testing Programs Met or Exceeded Expectations**

We asked the ELC recipients to rate the types of assistance provided by CDC in implementing the ELC screening testing programs. The types of assistance included: (1) communication, (2) technical support, (3) resources, (4) CDC K-12 and early care and education programs guidance, and (5) ELC reopening school guidance. Most of the respondents reported that the assistance provided by CDC in implementing the ELC screening testing programs exceeded or met expectations.

**Figure 2: Survey Responses on the Overall Assistance Provided by CDC in Implementing the ELC Screening Testing Programs<sup>15</sup>**

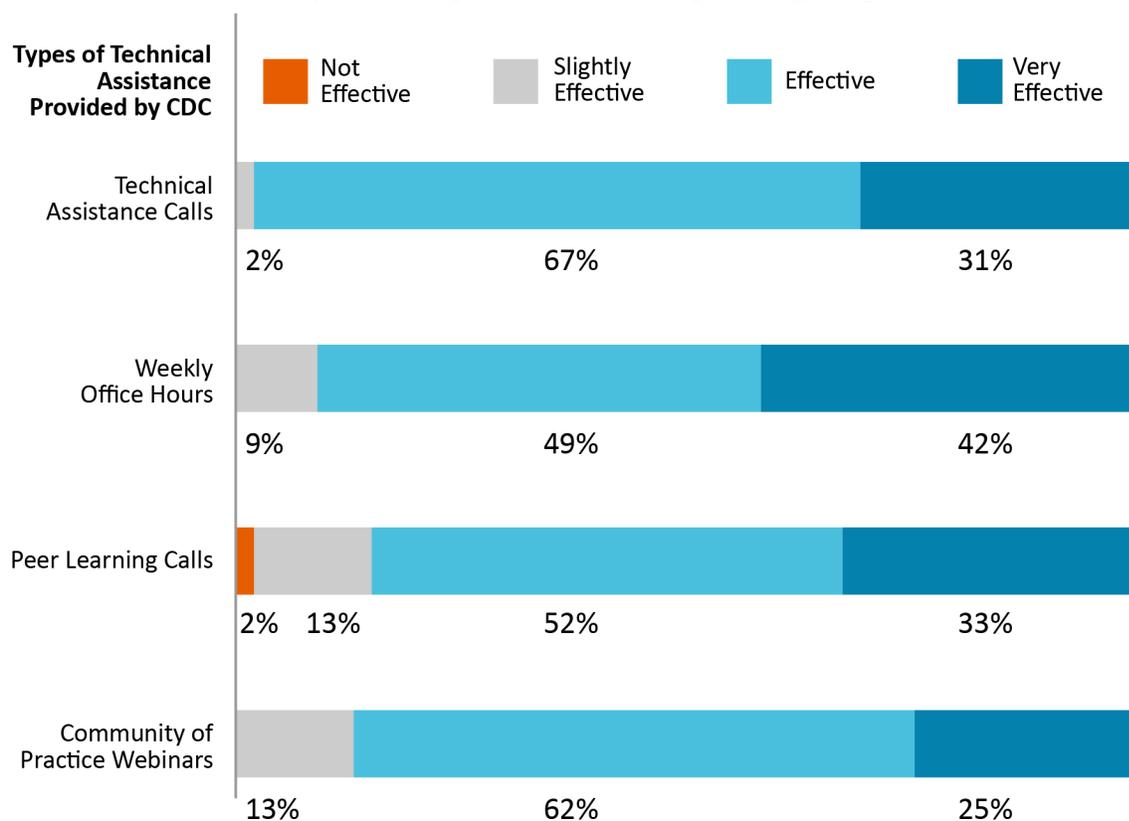


<sup>15</sup> Figure 2 excludes the responses for the three ELC recipients that did not utilize the ELC Reopening Schools funding.

For the ELC recipients that responded that the assistance CDC provided was inadequate, we asked the ELC recipients to describe why the assistance was inadequate. Respondents provided several reasons for rating CDC’s assistance as inadequate, including the timeliness of the initial guidance, communication, and technical support at the beginning of the ELC screening testing program implementation. For example, one respondent stated, “at the beginning of this program, while it was clear that funding was made available, initial communication and technical support was inadequate.” Another respondent explained that “the guidance was inadequate because it was delayed, and changes/updates were not communicated in an effective or timely manner.”

In another survey question, we asked the ELC recipients to rate the types of technical assistance provided by CDC in implementing the ELC screening testing programs. The types of technical assistance included in the survey were: (1) technical assistance calls, (2) weekly office hours, (3) peer learning calls, and (4) community of practice webinars. Most of the respondents reported that all types of technical assistance provided by CDC in implementing the ELC screening testing programs were effective.

**Figure 3: Survey Responses on Types of Technical Assistance Provided by CDC in Implementing the ELC Screening Testing Programs<sup>16</sup>**



<sup>16</sup> Figure 3 excludes the responses for the three ELC recipients that did not utilize the ELC Reopening Schools funding.

For the ELC recipient that responded that the peer learning calls CDC provided were not effective, we asked the ELC recipient to describe why the calls were not effective. The respondent stated, “while the peer learning calls were informative, there was very little information that would be applicable to our response needs.”

### **ELC Recipient Comments on the Oversight CDC Provided in Implementing the ELC Screening Testing Programs**

We also provided the ELC recipients an opportunity to provide additional comments on the oversight provided by CDC during the ELC Reopening Schools funding project period. We received many comments from the ELC recipients on the oversight that CDC provided during the implementation of the ELC screening testing programs. For example, one respondent stated that “CDC has always been responsive in answering questions we have posed. Additionally, they have been generous with their time. One opportunity for improvement is that we would have benefited from peer learning calls with jurisdictions similar to ours.” Another respondent stated that “CDC has provided an effective oversight with implementing screening testing programs for the schools. This program has been of great assistance for the schools, especially the students, faculty, and staff.”

In response to the survey results, CDC officials indicated that the ELC recipients’ feedback was useful in understanding the technical assistance that was most effective. CDC will consider the ELC recipients’ responses to the survey to highlight things to avoid for future situations where rapid development of funding guidance and deployment of resources is necessary.

### **Challenges the ELC Recipients Faced Expending the ELC Reopening Schools Funding**

As of July 2023, the ELC recipients had expended \$4.9 billion.

Figure 4 shows the range of spending by the ELC recipients during the ELC Reopening Schools funding project period as of July 2023.

**Figure 4: Range of Spending by the ELC Recipients During the Project Period**

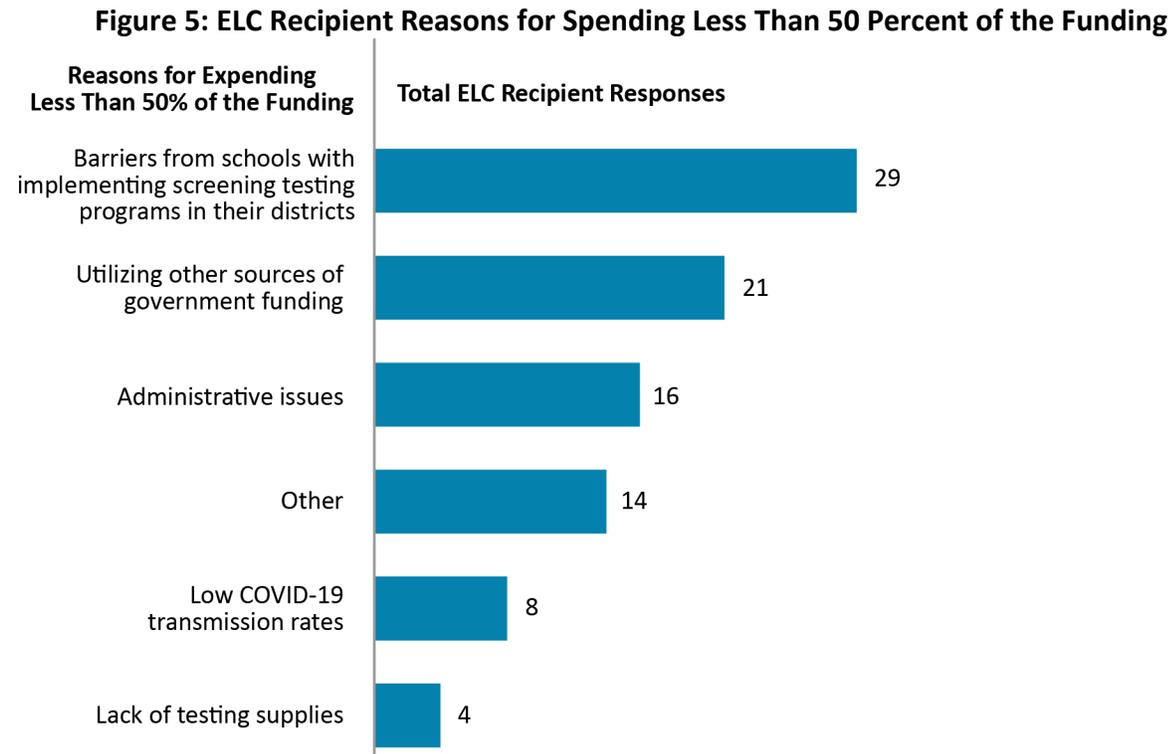


Source: HHS Payment Management System, OIG analysis of ELC recipient data, July 2023.

In one of the survey questions, we asked the ELC recipients to indicate the reasons they had expended less than 50 percent of the ELC Reopening Schools funding at the time of the survey. The ELC recipients were able to select multiple reasons, which included: (1) barriers from schools with implementing screening testing programs in their districts, (2) utilizing other

sources of government funding,<sup>17</sup> (3) administrative issues, (4) low COVID-19 transmission rates, (5) lack of testing supplies, and (6) other.

Figure 5 shows the reasons the ELC recipients gave for expending less than 50 percent of the ELC Reopening Schools funding at the time of the survey.



For the 14 ELC recipients that selected “other” as a response, the respondents were able to enter the reason for expending less than 50 percent of the ELC Reopening Schools funding at the time of our survey. The reasons included limitations on the allowability of costs for certain activities and contract procurement difficulties.

In another survey question, we asked the ELC recipients if they anticipated expending all the ELC Reopening Schools funding by the end of the project period, July 31, 2023. Of the ELC recipients that responded, 44 percent indicated that they anticipated expending all the ELC Reopening Schools funding by the end of the project period.

<sup>17</sup> Other sources of government funding that supported COVID-19 testing included the Governor’s Emergency Education Relief funding awarded under the Coronavirus Aid, Relief, and Economic Security Act (P. L. No. 116-136, Mar. 27, 2020), ELC Enhancing Detection funding awarded under the Paycheck Protection Program and Health Care Enhancement Act of 2020 (P. L. No. 116-139, April 24, 2020), ELC Enhancing Detection Expansion funding awarded under the Coronavirus Response and Relief Supplemental Appropriations Act of 2021 (P. L. No. 116-260, Dec. 27, 2020), and Elementary and Secondary School Emergency Relief funding awarded under the ARP.

More than \$5.1 billion of the ELC Reopening Schools funding remained unspent as of July 2023.<sup>18</sup> The ELC Reopening Schools funds were awarded to the ELC recipients at the end of the 2020–2021 school year. According to CDC, the majority of the ELC recipients were not able to begin using the funds to directly support in-person education until the fall of the 2021–2022 school year, several months after the funds were awarded. CDC indicated that it would continue to work with ELC recipients to ensure appropriate use of the ELC Reopening Schools funding before the project end date of July 31, 2023. In addition, CDC explained that any unexpended ELC Reopening Schools funding will be de-obligated from the ELC recipients and returned to CDC following normal grant procedures. CDC will return the funding to HHS after the funding is de-obligated from ELC recipients.

### **Challenges the ELC Recipients Encountered in Implementing the ELC Screening Testing Programs**

We asked the ELC recipients to describe any other issues or barriers the agency faced with the implementation of the ELC screening testing programs. We received various narrative responses from the ELC recipients on issues and barriers that they faced in implementing the ELC screening testing programs. The following are the main categories of responses and examples we received from the ELC recipients.<sup>19</sup>

- **School and community lack of interest in implementing the screening testing program** (25 ELC recipients). For example, one respondent explained that there was “lack of interest from schools, especially in the rural areas of the state.” Another respondent stated that “schools have not been receptive to implementing testing programs. We have supported all who are interested. We have utilized CDC testing resources so haven't needed to purchase as many testing supplies. Testing uptake was low overall due to community.”
- **Limitations on the costs that were allowable under the terms and conditions of the awards** (seven ELC recipients). For example, one respondent indicated that restrictions with the cooperative agreement did “...not allow for flexibility in how funds could be utilized.” Another respondent stated that “funding was initially restricted to K-12 schools. It would have been helpful to permit use of the funding for Early Care and Education Programs from the beginning.”

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<sup>18</sup> Of the \$5.1 billion in unspent funds, \$1 billion has been de-obligated for the four ELC recipients that did not accept, did not use, or accepted part of the funds.

<sup>19</sup> An ELC recipient response could have included more than one issue or barrier the agency faced with implementing the ELC screening testing program. These are the main categories of responses we received from the ELC recipients.

- **Insufficient school staffing and resources** (five ELC recipients). For example, one respondent explained that “many schools reported difficulty hiring staff needed to support implementation of screening testing programs.” Another respondent stated that the “lack of school nursing support was also a barrier.”
- **Issues with vendors or contractors** (three ELC recipients). For example, one respondent explained that “as the Reopening Schools program has evolved over time, we have had some difficulties executing contracts for changing timelines. Because we thought the program would end in July 2022, we didn’t have flexibility in those testing contracts, and we had to put out new bids for third party testing vendors.” Another respondent stated that “there was an issue with a vendor, and it was resolved by not renewing their contract.”

This report includes no recommendations. However, we expect that CDC will use the suggestions and feedback from the ELC recipients’ responses to the OIG survey to improve development of ELC programs that are in response to future public health emergencies. CDC elected not to provide formal written comments on our draft report but did provide technical comments, which we addressed as appropriate.

## APPENDIX A: AUDIT SCOPE AND METHODOLOGY

### SCOPE

Our audit covered the oversight and assistance CDC provided to 64 ELC recipients that were awarded \$10 billion in ELC Reopening Schools funding to implement screening testing programs at schools within their jurisdictions during the project period (April 2021 through July 2023). We obtained and reviewed the Grants Policy Administration Manual, ELC Policy & Procedure Manual, terms and conditions of the supplemental awards, and guidance related to the ELC Reopening Schools funding. We also reviewed the documentation the ELC recipients were required to report during the project period and determined the programmatic and financial oversight CDC provided to support the ELC Reopening Schools project. In addition, we reviewed the technical assistance, implementation tools, and resources CDC provided to ELC recipients in implementing the COVID-19 screening testing programs. Furthermore, we administered an online survey to the ELC recipients that were awarded the ARP supplemental funding.

We did not perform an overall assessment of CDC's internal control structure. Rather, we limited our review of internal controls to those that were significant to our objective. Specifically, we reviewed CDC's monitoring of ELC recipients.

We conducted our audit work from February 2022 to August 2023.

### METHODOLOGY

To accomplish our objective, we:

- reviewed applicable Federal requirements, HHS Grants Policy Administration Manual, terms and conditions of the awards, CDC policies and procedures, and CDC ELC guidance;
- reviewed the budget documentation, K-12 screening testing implementation plans, COVID-19 screening testing reporting, and financial reports submitted by the ELC recipients;
- reviewed the technical assistance CDC provided to the ELC recipients;
- met with CDC ELC officials to gain an understanding of the oversight and assistance CDC provided to the ELC recipients in implementing the COVID-19 screening testing programs;
- administered an online survey to all ELC recipients;

- analyzed and summarized the ELC recipient survey responses;
- obtained the ELC recipient supplemental award and expenditure data from the HHS Payment Management System; and
- discussed the results of our audit with CDC officials.

We provided CDC with a draft report on August 31, 2023, for review. CDC elected not to provide formal comments; however, it provided technical comments, which we addressed as appropriate.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

**APPENDIX B: ELC REOPENING SCHOOLS FUNDING AND EXPENDITURES BY ELC RECIPIENT**

<b>ELC Recipient</b>	<b>Award</b>	<b>Expenditure</b>	<b>Percent Expended</b>
Alabama	\$147,681,528	\$115,318,872	78%
Alaska	22,033,777	16,102,241	73%
American Samoa	1,487,904	600,069	40%
Arizona	219,231,387	106,149,520	48%
Arkansas	90,894,777	14,755,405	16%
California	887,715,802	797,712,762	90%
Chicago, IL	81,141,237	53,823,245	66%
Colorado	173,450,305	67,866,620	39%
Connecticut	107,384,696	37,088,805	35%
Delaware	29,329,294	27,177,394	93%
District of Columbia	21,256,814	16,358,604	77%
Florida	646,898,907	-	0%
Georgia	319,791,575	119,619,665	37%
Guam	5,075,137	3,429,249	68%
Hawaii	42,645,370	37,463,873	88%
Houston, TX	69,885,366	16,382,097	23%
Idaho	53,825,522	-	0%
Illinois	300,527,799	152,820,352	51%
Indiana	202,771,135	30,215,264	15%
Iowa	95,029,161	-	0%
Kansas	87,747,589	49,729,208	57%
Kentucky	134,564,120	134,189,692	99%
Los Angeles County, CA	302,372,981	234,066,059	77%
Louisiana	140,019,396	124,947,363	89%
Maine	40,487,006	40,487,006	100%
Marshall Islands	2,346,310	860,610	37%
Maryland	182,092,917	124,225,113	68%
Massachusetts	207,598,811	201,235,492	97%
Michigan	300,799,236	54,187,836	18%
Micronesia	3,084,238	1,643,185	53%
Minnesota	169,862,951	129,285,226	76%
Mississippi	89,640,149	9,366,636	10%
Missouri	184,856,322	43,706,065	24%
Montana	32,191,069	20,849,558	65%
Nebraska	58,263,420	13,342,370	23%
Nevada	92,772,788	86,277,016	93%

ELC Recipient	Award	Expenditure	Percent Expended
New Hampshire	\$40,953,829	\$29,318,966	72%
New Jersey	267,527,208	126,366,116	47%
New Mexico	63,155,461	43,759,491	69%
New York	334,830,878	91,311,974	27%
New York City, NY	251,100,841	251,100,840	100%
North Carolina	315,895,947	183,741,599	58%
North Dakota	22,952,934	16,000,798	70%
Northern Marianas	1,548,143	731,566	47%
Ohio	352,069,960	10,149,819	3%
Oklahoma	119,182,026	42,611,063	36%
Oregon	127,036,170	58,209,743	46%
Palau	653,593	14,575	2%
Pennsylvania	337,878,400	90,729,673	27%
Philadelphia, PA	47,711,231	33,525,626	70%
Puerto Rico	96,192,497	51,591,779	54%
Rhode Island	31,907,434	16,288,131	51%
South Carolina	155,076,741	33,901,834	22%
South Dakota	26,645,495	9,374,385	35%
Tennessee	205,691,372	168,240,953	82%
Texas	803,456,353	277,847,664	35%
Utah	96,561,883	37,048,865	38%
Vermont	18,794,243	2,838,258	15%
Virgin Islands	3,198,692	2,978,494	93%
Virginia	257,085,647	62,732,996	24%
Washington	229,356,843	132,707,570	58%
West Virginia	53,978,589	36,762,685	68%
Wisconsin	175,368,857	163,566,579	93%
Wyoming	17,431,937	3,714,293	21%
<b>Total</b>	<b>\$10,000,000,000</b>	<b>\$4,858,448,807<sup>20</sup></b>	<b>49%</b>

<sup>20</sup> The expenditures are the total drawdowns, as of July 2023, that were obtained from the HHS Payment Management System for the ELC Reopening Schools funding.

APPENDIX C: OIG SURVEY TO ELC RECIPIENTS



# HHS/OIG Audit Survey: ELC Reopening Schools Award

The Department of Health and Human Services (HHS), Office of Inspector General (OIG), is conducting an audit of the Centers for Disease Control and Prevention (CDC) awards to recipients for COVID-19 screening testing at schools. CDC provided \$10 billion in American Rescue Plan funding to the Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) jurisdictions to support COVID-19 screening testing for teachers, staff, and students to assist schools in reopening safely for in-person instruction.

The objective of the audit is to determine whether CDC provided effective oversight to ELC recipients in implementing the screening testing programs.<sup>21</sup> As a recipient of HHS award funds, your agency is subject to OIG audits and other reviews. As a result, HHS/OIG is requesting your timely response to the following survey. The survey should take approximately 15 minutes to complete. Please complete this survey by December 15, 2022.

\* Required

1. Select the jurisdiction of your agency. \*

Select your answer v

2. Rate the types of assistance provided by CDC with implementing the ELC screening testing programs: \*

	Exceeded Expectations	Met Expectations	Inadequate	Did Not Use Funds
a. Communication	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Technical Support	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Resources	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. CDC K-12 and Early Care and Education Programs Guidance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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<sup>21</sup> The audit objective was revised after the online survey was administered to the ELC recipients.

e. ELC Reopening School Guidance                                                                                       

3. If you responded “Inadequate” to any of the types of assistance listed in question 2, describe why the assistance provided by CDC was inadequate.

Enter your answer

4. Did your assigned ELC Project Officer or other CDC staff, provide an appropriate level of assistance with implementing the ELC screening testing programs in your jurisdiction? \*

- Yes
- No
- Not Applicable

5. Rate the types of technical assistance provided by CDC for the implementation of the ELC screening testing programs: \*

	Very Effective	Effective	Slightly Effective	Not Effective	Not Applicable
a. Technical Assistance Calls	<input type="radio"/>				
b. Weekly Office Hours	<input type="radio"/>				
c. Peer Learning Calls	<input type="radio"/>				
d. Community of Practice Webinars	<input type="radio"/>				

6. If you responded “Not Effective” to any of the types of technical assistance listed in question 5, describe why the assistance provided by CDC was not effective.

Enter your answer

7. How much of the ELC Reopening School award has your agency expended to date? \*

- 0-25%
- 26%-50%
- 51%-75%
- 76%-100%

8. If you answered 50% or less to question 7, indicate the reason(s) your agency has only expended 50% or less of the ELC Reopening School award. Select all that apply: \*

- Utilizing other sources of government funding
- Barriers from schools with implementing screening testing programs in their districts
- Lack of testing supplies
- Low COVID-19 transmission rates
- Administrative issues
- Not applicable because my agency has expended greater than 50% of the award
- 

9. Do you anticipate expending all the ELC Reopening School award by July 31, 2023 (i.e., end of current budget period)? \*

- Yes
- No
- Not Applicable

10. Describe any issues or barriers your agency faced with the implementation of the ELC screening testing programs. \*

Enter your answer

11. Provide any additional comments you may have on the oversight CDC provided with implementing the ELC screening testing program. \*

Enter your answer