

**NTCA FY2010 Funding Formula Workgroup
Conference call – July 30, 2008 (3-4pm ET)**

Workgroup members present: Phil Griffin; Kathy Moser, Kasef; Pat Infield, Kim Fields, Angelito Bravo, Tiffany Harris, Joe Scavotto, Greg Andrews, Drew Posey, Dan Rogerio, Margaret Oxtoby, Charles Wallace, Stuart McMullen, Masa Narita, Denise Ingman, Iram Bakhtwawar

- Phil Griffin called the meeting to order.
- Drew Posey from Migration and Quarantine joined the conference call to answer questions concerning the EDN and IMP systems.
- The primary objective of this call is to discuss the reliability and validity of the B1/B2 data during the transition period from the IMP system to the EDN system and whether or not to include the Class A/B variable in the 2010 funding formula.
- The EDN system came online two years ago and is available in all 50 states. The IMP system is still in use at the west coast quarantine stations (Anchorage, Seattle, San Francisco, Los Angeles, San Diego, and Honolulu) and in El Paso and Houston.
- The CDC has hired additional data entry staff for the EDN data center. It is expected that all quarantine stations will be using the EDN system by late summer. All of the Class B1/B2 arrivals in the U.S. will have their information sent to the EDN data center and information transmitted electronically to the jurisdiction where the refugee/immigrant intends to settle. CDC anticipates that once all ports of entry are online, having only one system will make the process easier and the IMP system will be shutdown.
- The states now are receiving information from both systems. If a refugee enters the U.S. from the east coast, the states receive notification from the EDN system but will still receive paper forms if the refugee/immigrant entered through the west coast stations.
- The EDN data should be valid. The reliability of the data depends on whether the refugee/immigrant settles in the location stated on the forms or moves to another state upon arrival. The CDC is not aware of any study determining the accuracy of the data. It was suggested that after the EDN system is stable that such a study might be worthwhile.
- Kansas only sees about 50% of the people for who they receive notification. This percentage may be higher in other jurisdictions. L.A. County stated that they evaluate more refugees/immigrants than they receive notifications.. The IMP system may not be capturing all of the refugees/immigrants. The preferred option

would be for the states who complete the evaluations would receive credit for their work.

- There is no requirement for Class B's to obtain follow-up evaluations. Until there is a federal requirement, many will just move on from their intended settlement location and they lose their connections with the local resettlement agencies. Some states expend considerable resources attempting to locate lost individuals.
- CDC would like to see a higher rate of return on the notifications. Washington state only sees about a 30% return rate. CDC is unsure of the reliability of the data with low return rates.
- Is there a correlation between the IMP and EDN data? CDC has developed a database or mechanism that incorporates data from both systems since some of the variable definitions are different. This mechanism will be able to identify the rate of return from both systems.
- In 2013, the data (2007-2011) still will be a mix of both systems. Data can be looked at in 3 or 5-year increments.
- The suggestion is to eliminate Class A/Bs from the formula until 2013 or 2015 depending on whether the funding formula can be adjusted in 2013. Adding the Class A/B variable back into the formula in 2013 may provide an incentive for states to enter data into the EDN system. The CDC Program and Grants Office will be contacted to determine whether or not the variable can be incorporated in the 2013 formula or if it will need to wait until 2015. One option is to take out the Class A/B until 2015 and avoid a two-year adjustment. Future discussions may include adding performance measures to the formula.
- The current proposed formula is:
 - Incident cases 30%
 - US / Foreign-born 30%
 - Hiv Co-infection 5%
 - MDR TB 5%
 - Substance abuse 5%
 - Homeless 5%
 - Smear positive / pulmonary 10%
 - Class A/B 10%
- It was suggested to split the 10% for Class A/B between smear positive/pulmonary and US/FB or add the 10% solely to US/Foreign-born.
- The next conference call will be Wednesday, August 6.