Overall, ELC provides funding to fully or partially-support 579 public health workers, including 202 laboratorians. Laboratorians primarily include microbiologists, virologists, parasitologists and laboratory technicians.

Much of ELC funding supports public health workforce (nearly 80% across all program areas).
SUMMARY OF FY 2010 AFFORDABLE CARE ACT ELC AWARDS

$22,740,000 in awards distributed across all 58 ELC grantees. Funding was comprised of $16.7 million of new Prevention and Public Health Funding created by the Affordable Care Act and an additional $6.04 million from CDC’s annual base appropriations.

Three categories of activities funded:

- Activity A: Epidemiology Capacity ($6.2 million)
- Activity B: Laboratory Capacity ($7.3 million)
- Activity C: Health Information Systems Capacity ($9.1 million)

SPECIFIC ACTIVITIES FUNDED

Cross-cutting (General Capacity)

- 19 fully or partially-funded program coordinators in 19 grantee jurisdictions.

Activity A (Epidemiology Capacity)

- 38 fully or partially-funded non-categorical epidemiologists in 35 grantee jurisdictions charged with strengthening outbreak investigation and response and enhancing disease surveillance.
- 33 fully or partially-funded epidemiologists focusing on a variety of activities such as defining the burden of tickborne diseases, vectorborne disease control, outbreak response (particularly food and flu), food and water safety, health education, antimicrobial resistance and outbreak response.

Activity B (Laboratory Capacity)

- 27 fully or partially-funded non-categorical laboratorians in 24 grantee jurisdictions charged with expanding and enhancing core diagnostic and reporting capacity.
- 29 fully or partially-funded laboratory staff focusing on activities such as foodborne pathogen typing techniques (PFGE, MLVA), vectorborne pathogen detection and characterization, and rapid testing for outbreak response.
- $1.4 million for laboratory supplies supporting modernization of laboratory techniques and equipment, increased ability to establish surge capacity, and increased capacity for rapid testing (particularly foodborne and respiratory pathogens).
- $1.4 million for laboratory equipment to expand, enhance and support testing capacity. For example, real-time sequencing platforms to increase capacity for rapid testing (particularly foodborne and respiratory pathogens).

Activity C (Health Information Systems Capacity)

- Approximately $6.5 million of ELR/LIMS activities in 53 grantee jurisdictions.
- $2.650 million biosurveillance activities in 20 grantees.
- 63 fully or partially-funded informatics staff focusing on activities related to Electronic Lab Reporting, Laboratory Information Management Systems, Electronic Health Records, biosurveillance and strengthening epidemiology and laboratory electronic information exchange.

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i Personnel may be partially funded
ii Typically an epidemiologist, but responsibilities span all three Activity Categories
iii Biosurveillance activities primarily funded in Activity C but also funded in other categories (e.g. analysis of biosurveillance data in Activity Category A).