

September 26, 2025

Lt. Isaac Toliver  
RREACT & Specialized Program Assessing Resource Connectivity (SPARC) Supervisor  
City of Columbus, Division of Fire - RREACT  
3639 Parsons Ave.  
Columbus, OH 43207

Dear Lt. Isaac Toliver:

On behalf of Franklin County Public Health, it is my pleasure to inform you that City of Columbus, Division of Fire – RREACT has been awarded funding in the amount of \$200,000.00 for the activities described in your proposal for Franklin County's CDC Overdose Data to Action project (FCPH-RFA-OD2A-2025). This funding is allocated for project activities from September 1, 2025, through August 31, 2026.

Throughout 2025, several federal and state funding streams previously awarded to Franklin County Public Health (FCPH) were either reduced or discontinued. Consequently, FCPH has had to focus on covering its own staffing and programmatic expenses, resulting in fewer OD2A funds available for community partner distribution.

Despite these resource constraints and a highly competitive application process, we are pleased to continue our partnership with RREACT through this award. Along with this notice, for your review, are your subrecipient contract and data use agreement. These items must be signed and returned to FCPH no later than October 10, 2025.

This award is made contingent upon the following conditions being met:

1. Submission of a revised budget and workplan based on your award amount.
2. Grant funds must be used in accordance with the revised budget submitted to FCPH, if applicable, or the budget included with your proposal. Please see **Section I** related to proposed budget and work plan comments.
3. Grantee will have the opportunity to respond to the outlined comments in **Section I**. All comments must have a written response and be submitted to Sade Walton within **15 days** of receiving this letter at [sadewalton@franklincountyohio.gov](mailto:sadewalton@franklincountyohio.gov).
4. Grantee attests that funds will only be used for the purposes allowed by the Centers for Disease Control and Prevention. In particular, no funds will be used for any of the unallowable costs outlined in **Section II** of this notice.
5. Grantee will furnish to Franklin County Public Health any information concerning a change in the proposal or a change in grantee's tax-exempt status.
6. If grantee's exempt status changes or if funds are not used for the purposes described in your proposal Franklin County Public Health reserves the right to have all remaining grant funds immediately returned.
7. As a sub-recipient of this funding, please be aware that all published communications, marketing and promotional materials must include the following: **"This work was funded through the Overdose Data to Action (OD2A) grant received by Franklin County Public Health (FCPH) from the Centers for Disease Control and Prevention (CDC), Division of Overdose Prevention (DOP), National Center for Injury Prevention and Control (NCIPC)"**



Acknowledge receipt of this letter by signing and returning a copy of this letter by the above deadline. Franklin County Public Health is proud to support your mission.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Joe Mazzola', is written over a horizontal line.

Joe Mazzola,  
Health Commissioner

ACCEPTED BY: Jeffrey M. Hayes Fire Chief  
Name & Job Title

10-8-25  
Date



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**Award Attachments**

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Section I: Technical Review/Comments  
Section II: Unallowable Costs

**Section I**  
**Franklin County Overdose Data to Action (OD2A)**  
**Technical Review**

1. Response to Technical Review:

The recipient must submit a written response to the recommendations identified in the technical review within 15 days of receiving the recommendations outlined by U.S. Centers for Disease Control and Prevention.

- Recommendations:
  - Work Plan/Narrative:
    - Please revise work plan to account for award allocation.
    - Please include a more specific start and end date for each activity, staggered throughout the grant year. Provide cadence of activities if specific dates are not known (i.e. monthly, quarterly, etc.).
  - Budget:
    - Please revise budget to account for award allocation.

2. Weaknesses:

Please note this feedback is in relation to either points that were deducted from your overall score, or information to assist in the application process for future opportunities.

- N/A

3. Year 2 Work Plan:

- ☒ Revised Work Plan is needed.
- ☐ Revised Work Plan is NOT required.

4. Year 2 Budget:

- ☒ Revised budget is needed due to a reduction in proposed budget.
- ☐ Revised budget is needed due to weaknesses or errors identified.
- ☐ Revised budget is NOT required.
- ☐ Revised budget narrative is required.
- ☒ Revised budget narrative is NOT required.



## **Section II**

### **Franklin County Overdose Data to Action (OD2A)**

#### **Unallowable Costs**

The following activities are considered unallowable by the CDC:

**Introduction:** This document is to give an overview of general unallowable activities and expenditures related to overdose prevention under OD2A: LOCAL. There are a broad range of activities described in the NOFO that are required, allowed, and encouraged. This document is intended to provide some parameters around what is not allowed under this NOFO. While some of the activities listed below may contribute to overdose prevention in some manner, they are either not allowed by HHS, CDC, or congressional appropriations language, or do not directly contribute to overdose prevention as specified in this NOFO. This is not an exhaustive list but does address many activities jurisdictions might consider. Jurisdictions wishing to undertake activities that are not explicitly addressed in this document or as an allowable activity should consult with CDC project officers before allocating funds.

**Approach:** For this document, we reviewed CDC and HHS guidance, drew from previous experience in overdose prevention programs funded through CDC, and reviewed scientific literature to understand what interventions jurisdictions are exploring. We examined whether these activities would be allowable by HHS/CDC policies, if they were evidence-based, and if they support overdose prevention.

**Content:** Below you will see a list of activities that jurisdictions may have considered implementing as part of their overdose prevention response. Although it is not allowable to use OD2A funds for the listed activities, other funding sources may be used if jurisdictions wish to implement them. If something is not listed as allowable or unallowable in the NOFO or in appendices, jurisdictions must consult with CDC before implementing the activity. OD2A: LOCAL unallowable activities and expenditures:

1. Activities related to harm reduction:
  - Establish a new Syringe Services Program (SSPs).
  - Infrastructure costs for SSPs except when contributing to co-location of treatment (funds may be used for additional expenses associated with co-location).
  - Provision of equipment solely intended for illegal drug use, such as syringes, cookers/spoons, syringes, and pipes.
  - Procurement of other equipment solely intended for preparing drugs for illegal drug injection, such as sterile water, filters, tourniquets, razors, straws, plastic cards, and tiny spoons.
  - Safe injection sites (controlled environments that facilitate safer use of illicit drugs by providing medical staff, clean facilities, and education) and developing educational outreach and guidance or materials (including mass media, print, digital, or other) about supervised injection facilities.

- Purchasing and distributing fentanyl test strips for testing in biological samples for clinical decision-making purposes.
  - Purchasing basic food, health, or personal items if not intended to support outreach or engage individuals in venue-based programs (e.g., meal or grocery cards, first aid kits, hygiene items, clothes, etc.).
  - Pharmacy voucher program that provides participants with vouchers redeemable for free syringes at participating pharmacies.
2. Activities related to public health/public safety:
- Drug disposal, including the implementation or expansion of drug disposal programs, drug take back programs, drug drop boxes, and drug disposal bags.
  - Purchase of handheld drug testing machines such as TruNarc, Fourier-transform infrared (FTIR) machines, or HPMS machines for the purposes of reducing possible law enforcement exposure to fentanyl.
  - Public safety activities that do not include overlap/collaboration with public health partners and objectives.
3. Activities related to health systems:
- Purchasing, leasing, or renting equipment intended to help EMS and other clinicians treat and manage overdose.
  - Provision of SUD treatment that includes MOUD and the purchase of medications such as Methadone, Buprenorphine, and Naltrexone.
  - Directly funding or expanding the provision of substance use treatment.
  - Paying for fees associated with clinicians obtaining waived status for DATA waivers. This applies to direct reimbursements, contracts, and waiver fees.
  - Financial incentives to encourage clinicians to participate in educational sessions and training activities (e.g., participation in academic detailing, attending seminars, completion of post session surveys).
  - Paying for the following services (only referral or linkage to them is allowed):
    - i. Treatment for substance use disorder (MOUD)
    - ii. Behavioral therapy (e.g., cognitive behavioral therapy)
    - iii. Housing assistance
    - iv. Food assistance
    - v. Medical care
    - vi. Specialized clinical care, if indicated, such as pain management
4. Other generalized, unallowable activities
- Funding or subsidizing costs associated with programs other than those specifically targeting overdose prevention.
  - Childcare and childcare-related purchases (e.g., pack-n-play).
  - Furniture or equipment (purchase or leasing vehicles may be allowable expenses for linkage to care activities).
  - Research



- Prevention of Adverse Childhood Experiences (ACEs) as a standalone activity.

Funding cannot be used to directly fund or expand the direct provision of substance use disorder treatment programs. Such activities are outside the scope of this NOFO. Funding must also not duplicate or overlap with resources provided under other federal funding sources or CDC mechanisms, including – but not limited to - Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC), Data Modernization Initiative (DMI), and efforts to strengthen the overall U.S. public health infrastructure, workforce, and data systems (i.e., CDC-RFA-OE22-2203).