

Report Information				
Award Type	Award Number	Prime DUNS	Calendar Yr/Qtr	Final Report
Grant	1U66IP000445-01	067976824	2013 / 3	No

Award Recipient Information	
<b>Recipient DUNS Number</b> 067976824	<b>Recipient Address 1</b> 600 E BOULEVARD AVE # 301
<b>Recipient Account Number</b> H0490	<b>Recipient Address 2</b>
<b>Recipient Congressional District</b> 00	<b>Recipient City</b> BISMARCK
<b>Parent DUNS Number</b> 073131823	<b>Recipient State</b> ND
<b>Recipient Type</b> 2F.V2	<b>Recipient ZIP Code + 4</b> 585050602
<b>Recipient Legal Name</b> HEALTH, NORTH DAKOTA DEPARTMENT OF	<b>Recipient Country</b> USA
<b>Recipient DBA Name</b>	

Project / Award Information	
<b>Funding Agency Code</b> 7523	<b>Total Number of Sub Awards less than \$25,000/award</b> 4
<b>Awarding Agency Code</b> 7523	<b>Total Amount Sub Awards less than \$25,000/award</b> 60000.00
<b>Program Source (TAS) Code</b> 75-0942	<b>Total Number of Sub Awards to Individuals</b> 0
<b>Sub Account Number for Program Source</b>	<b>Total Amount of Sub Awards to Individuals</b> 0.00
<b>CFDA Number</b> 93.712	<b>Total Number of Payments to Vendors less than \$25,000/award</b> 1
<b>Amount of Award</b> 620021.00	<b>Total Amount of Payments to Vendors less than \$25,000/award</b> 15000.00
<b>Award Date</b> 09/01/2010	
<b>Award Description</b> The North Dakota Department of Health (NDDoH) is using this grant to increase interoperability between the North Dakota Immunization Information System (NDIIS) and various electronic health records (EHR) throughout the state. The NDIIS is a confidential, population-based, computerized information system that attempts to collect vaccination data about all North Dakotans. Interoperability between the NDIIS and EHRs at provider practices will improve the completeness of immunization histories available to clinicians and public health by ensuring that all vaccine doses administered are in the NDIIS. Interoperability will also ensure that doses are in the NDIIS in a timely manner. Health care provider practices will benefit from interoperability because	

**Report Information**

Award Type	Award Number	Prime DUNS	Calendar Yr/Qtr	Final Report
Grant	1U66IP000445-01	067976824	2013 / 3	No

duplicate data entry into the NDIIS and their own private EHRs will no longer be necessary. The objectives are that by the end of the grant period, the NDDoH will increase the number of EHR-NDIIS practice-based connections available, increase the number of practice-based electronic immunization transactions reported to the NDIIS each week, and maintain the percent of immunization data received by the NDIIS in a timely manner. Other activities include participating on a federal interoperability panel of experts, selecting which provider practices and EHRs to connect to, developing implementation and sustainability plans for interoperability, implementing interoperability specifications in the NDIIS and selected EHRs, and evaluating the success of this activity. Funding was requested for contracts with Blue Cross Blue Shield of North Dakota (BCBSND), who maintains the NDIIS, and various provider practices and their EHR vendors.

**Report Information**

Award Type	Award Number	Prime DUNS	Calendar Yr/Qtr	Final Report
Grant	1U66IP000445-01	067976824	2013 / 3	No

**Project Information**

Project Name or Project/ Program Title	Activity Codes (NAICS or NTEE-NPC) (up to 10)
<p><b>Quarterly Activities/ Project Description</b></p> <p>American Recovery and Reinvestment Act Funding for Enhancing the Interoperability of Electronic Health Records and Immunization Information Systems</p> <p>The North Dakota Information Technology Department Project Manager continues to monitor the schedule and budget. The North Dakota Department of Health participated in monthly conference calls about this project with CDC. Altru Health System continues to submit immunization data to the NDIIS via HL7 2.5.1 and as of June 28, 2012 is receiving data from the NDIIS via HL7 2.3.1. The Department of Health continues to submit post-enhancement benchmarking data to CDC as required by the grant. The project team continues to have bi-monthly meetings. BCBSND developed an automated testing tool which will allow providers and EMR vendors to send test messages and receive responses, allowing them to resolve many issues prior to formal testing. This automated testing tool was completed in December 2012 and posted to the Department of Health website. Project management continues to meet with the North Dakota Health Information Network to connect the NDIIS to the NDHIN. On June 12, 2013, Trinity Health became interoperable with the NDIIS using SOAP/HTTPS and HL7 2.5.1. Sanford West, Sanford North, and Essentia are all interoperable with the NDIIS. The NDIIS sustainability plan was completed. Final reports for this grant will be submitted by November 30, 2013.</p> <p><b>Project Status</b> Completed 50% or more</p>	<p><b>Activity Code 1</b> +E11</p> <p><b>Activity Code 2</b></p> <p><b>Activity Code 3</b></p> <p><b>Activity Code 4</b></p> <p><b>Activity Code 5</b></p> <p><b>Activity Code 6</b></p> <p><b>Activity Code 7</b></p> <p><b>Activity Code 8</b></p> <p><b>Activity Code 9</b></p> <p><b>Activity Code 10</b></p>

**Report Information**

Award Type	Award Number	Prime DUNS	Calendar Yr/Qtr	Final Report
Grant	1U66IP000445-01	067976824	2013 / 3	No

<b>Total Federal Amount ARRA Funds Received/ Invoiced</b>	501215.00
<b>Number of Jobs</b>	0.00
<b>Description of Jobs Created</b>	Not Applicable
<b>Total Federal Amount of ARRA Expenditure</b>	501215.38
<b>Total Federal ARRA Infrastructure Expenditure</b>	0.00
<b>Infrastructure Purpose and Rationale</b>	

**Report Information**

<b>Award Type</b>	<b>Award Number</b>	<b>Prime DUNS</b>	<b>Calendar Yr/Qtr</b>	<b>Final Report</b>
Grant	1U66IP000445-01	067976824	2013 / 3	No

**Infrastructure Contact**

<b>Name</b>	<b>Street Address 1</b>
<b>Email</b>	<b>Street Address 2</b>
<b>Phone</b>	<b>Street Address 3</b>
<b>Ext</b>	<b>City</b>
	<b>State</b>
	<b>ZIP Code + 4</b>

**Primary Place of Performance**

<b>Address 1</b>	600 East Boulevard Ave.
<b>Address 2</b>	Dept 301
<b>City</b>	Bismarck
<b>Country Code</b>	US
<b>State</b>	ND
<b>ZIP Code + 4</b>	58505 - 0200
<b>Congressional District</b>	00

**Recipient Highly Compensated Officers**

<b>Prime Recipient Indication of Reporting Applicability</b>	No	<b>Officer 3 Name</b>	
<b>Officer 1 Name</b>		<b>Officer 3 Compensation</b>	
<b>Officer 1 Compensation</b>		<b>Officer 4 Name</b>	
<b>Officer 2 Name</b>		<b>Officer 4 Compensation</b>	
<b>Officer 2 Compensation</b>		<b>Officer 5 Name</b>	
		<b>Officer 5 Compensation</b>	

**Report Audit Trail**

<b>Created By</b>	Molly Sander
<b>Date Created</b>	10/04/2013 12:56 PM
<b>Last Updated By</b>	Molly Sander
<b>Last Updated On</b>	10/11/2013 12:43 PM

**Report Information**

<b>Award Type</b>	<b>Award Number</b>	<b>Prime DUNS</b>	<b>Calendar Yr/Qtr</b>
Grant	1U66IP000445-01	067976824	2013 / 3

**Sub Recipient Information**

<b>Sub Recipient DUNS Number</b>	071762694	<b>Sub Recipient Address 1</b>	1 BURDICK EXPRESSWAY W
<b>Sub Recipient Congressional District</b>	00	<b>Sub Recipient Address 2</b>	
<b>Sub Recipient Type</b>	80.A8.VW	<b>Sub Recipient City</b>	MINOT
<b>Sub Recipient Legal Name</b>	TRINITY HEALTH	<b>Sub Recipient State</b>	ND
<b>Sub Recipient DBA Name</b>	TRINITY HOSPITAL	<b>Sub Recipient ZIP Code + 4</b>	587014406
		<b>Sub Recipient Country</b>	USA

**Sub Award Information**

**Sub Award Number** PF09-377A  
**Amount of Sub Award** \$ 25,000.00  
**Total Sub Award Funds Disbursed** 25000.00  
**Sub Award Date** 06/01/2011

**Sub Recipient Place of Performance**

**Address 1** PO Box 5020  
**Address 2**  
**City** Minot  
**Country Code** US  
**State** ND  
**ZIP Code + 4** 58702 - 5020  
**Congressional District** 00

**Sub Recipient Highly Compensated Officers**

<b>Prime Recipient Indication of Reporting Applicability</b>	No	<b>Officer 3 Name</b>	
<b>Officer 1 Name</b>		<b>Officer 3 Compensation</b>	
<b>Officer 1 Compensation</b>		<b>Officer 4 Name</b>	
<b>Officer 2 Name</b>		<b>Officer 4 Compensation</b>	
<b>Officer 2 Compensation</b>		<b>Officer 5 Name</b>	
		<b>Officer 5 Compensation</b>	

**Report Audit Trail**

**Created By** Molly Sander  
**Date Created** 10/04/2013 12:56 PM  
**Last Updated By** Molly Sander  
**Last Updated On** 10/11/2013 12:43 PM

**Report Information**

<b>Award Type</b>	<b>Award Number</b>	<b>Prime DUNS</b>	<b>Calendar Yr/Qtr</b>
Grant	1U66IP000445-01	067976824	2013 / 3

**Sub Recipient Information**

<b>Sub Recipient DUNS Number</b>	073130601	<b>Sub Recipient Address 1</b>	4510 13th Ave S
<b>Sub Recipient Congressional District</b>	00	<b>Sub Recipient Address 2</b>	
<b>Sub Recipient Type</b>		<b>Sub Recipient City</b>	Fargo
<b>Sub Recipient Legal Name</b>	Noridian Mutual Insurance Company	<b>Sub Recipient State</b>	North Dakota
<b>Sub Recipient DBA Name</b>	Blue Cross Blue Shield ND	<b>Sub Recipient ZIP Code + 4</b>	581210002
		<b>Sub Recipient Country</b>	US

**Sub Award Information**

**Sub Award Number** 603035  
**Amount of Sub Award** \$ 309,595.90  
**Total Sub Award Funds Disbursed** 309595.90  
**Sub Award Date** 05/11/2011

**Sub Recipient Place of Performance**

**Address 1** 4510 13 Ave South  
**Address 2**  
**City** Fargo  
**Country Code** US  
**State** ND  
**ZIP Code + 4** 58121 - 1000  
**Congressional District** 00

**Sub Recipient Highly Compensated Officers**

<b>Prime Recipient Indication of Reporting Applicability</b>	No	<b>Officer 3 Name</b>	
<b>Officer 1 Name</b>		<b>Officer 3 Compensation</b>	
<b>Officer 1 Compensation</b>		<b>Officer 4 Name</b>	
<b>Officer 2 Name</b>		<b>Officer 4 Compensation</b>	
<b>Officer 2 Compensation</b>		<b>Officer 5 Name</b>	
		<b>Officer 5 Compensation</b>	

**Report Audit Trail**

**Created By** Molly Sander  
**Date Created** 10/04/2013 12:56 PM  
**Last Updated By** Molly Sander  
**Last Updated On** 10/11/2013 12:43 PM

**Report Information**

<b>Award Type</b>	<b>Award Number</b>	<b>Prime DUNS</b>	<b>Calendar Yr/Qtr</b>
Grant	1U66IP000445-01	067976824	2013 / 3

**Sub Recipient Information**

<b>Sub Recipient DUNS Number</b>	076521392	<b>Sub Recipient Address 1</b>	1200 S COLUMBIA RD
<b>Sub Recipient Congressional District</b>	00	<b>Sub Recipient Address 2</b>	
<b>Sub Recipient Type</b>	80.A8.VW	<b>Sub Recipient City</b>	GRAND FORKS
<b>Sub Recipient Legal Name</b>	ALTRU HEALTH SYSTEM	<b>Sub Recipient State</b>	ND
<b>Sub Recipient DBA Name</b>	ALTRU HOSPITAL	<b>Sub Recipient ZIP Code + 4</b>	582064036
		<b>Sub Recipient Country</b>	USA

**Sub Award Information**

**Sub Award Number** NA  
**Amount of Sub Award** \$ 25,000.00  
**Total Sub Award Funds Disbursed** 25000.00  
**Sub Award Date** 05/02/2011

**Sub Recipient Place of Performance**

**Address 1** 1200 S Columbia Rd  
**Address 2**  
**City** Grand Forks  
**Country Code** US  
**State** ND  
**ZIP Code + 4** 58201 - 4044  
**Congressional District** 00

**Sub Recipient Highly Compensated Officers**

<b>Prime Recipient Indication of Reporting Applicability</b>	No	<b>Officer 3 Name</b>	
<b>Officer 1 Name</b>		<b>Officer 3 Compensation</b>	
<b>Officer 1 Compensation</b>		<b>Officer 4 Name</b>	
<b>Officer 2 Name</b>		<b>Officer 4 Compensation</b>	
<b>Officer 2 Compensation</b>		<b>Officer 5 Name</b>	
		<b>Officer 5 Compensation</b>	

**Report Audit Trail**

**Created By** Molly Sander  
**Date Created** 10/04/2013 12:56 PM  
**Last Updated By** Molly Sander  
**Last Updated On** 10/11/2013 12:43 PM

**Report Information**

<b>Award Type</b>	<b>Award Number</b>	<b>Prime DUNS</b>	<b>Calendar Yr/Qtr</b>
Grant	1U66IP000445-01	067976824	2013 / 3

**Sub Recipient Information**

<b>Sub Recipient DUNS Number</b>	947774527	<b>Sub Recipient Address 1</b>	19108 Centre Rose Blvd
<b>Sub Recipient Congressional District</b>	12	<b>Sub Recipient Address 2</b>	
<b>Sub Recipient Type</b>		<b>Sub Recipient City</b>	Lutz
<b>Sub Recipient Legal Name</b>	Transformations Consulting Group	<b>Sub Recipient State</b>	Florida
<b>Sub Recipient DBA Name</b>		<b>Sub Recipient ZIP Code + 4</b>	335589016
		<b>Sub Recipient Country</b>	US

**Sub Award Information**

**Sub Award Number** PF11.408  
**Amount of Sub Award** \$ 43,600.00  
**Total Sub Award Funds Disbursed** 43600.00  
**Sub Award Date** 05/15/2013

**Sub Recipient Place of Performance**

**Address 1** 6577 Gunn Highway  
**Address 2**  
**City** Tampa  
**Country Code** US  
**State** FL  
**ZIP Code + 4** 33625 - 4021  
**Congressional District** 14

**Sub Recipient Highly Compensated Officers**

<b>Prime Recipient Indication of Reporting Applicability</b>	No	<b>Officer 3 Name</b>	
<b>Officer 1 Name</b>		<b>Officer 3 Compensation</b>	
<b>Officer 1 Compensation</b>		<b>Officer 4 Name</b>	
<b>Officer 2 Name</b>		<b>Officer 4 Compensation</b>	
<b>Officer 2 Compensation</b>		<b>Officer 5 Name</b>	
		<b>Officer 5 Compensation</b>	

**Report Audit Trail**

**Created By** Molly Sander  
**Date Created** 10/04/2013 02:30 PM  
**Last Updated By** Molly Sander  
**Last Updated On** 10/11/2013 12:43 PM