



Grants for Increasing Blood Alcohol Concentration (BAC) Reporting – Phase II

AGENCY: U.S. Department of Transportation (DOT), National Highway Traffic Safety Administration (NHTSA)

ACTION: Request for Applications (RFA) No. DTNH22-10-R-00385, entitled “Increasing Blood Alcohol Concentration (BAC) Reporting – Phase II”

SUMMARY: The National Highway Traffic Safety Administration (NHTSA) announces discretionary Grant opportunities to provide funding to support NHTSA’s efforts to improve the collection of impaired driving data to enhance programs that reduce alcohol-impaired driving crashes and the resulting injuries and fatalities by focusing on increasing blood alcohol concentration (BAC) reporting. The objective is to increase the BAC testing and reporting of fatally-injured and surviving drivers of a crash by providing financial support to States whose BAC reporting is below the national average. The funding will support ongoing activities to increase BAC reporting and will build the capacity of States to continue to improve BAC reporting. The total available funding for the grants is \$500,000. NHTSA will select five to ten States to receive funding. The Grantee will provide an interim and a final report to describe the activities and results of the grants. Interested applicants must follow the instructions in the application section of this Notice below.

FOR FURTHER INFORMATION, CONTACT: General administrative and program questions may be directed to the Office of Acquisition Management, ATTN: Brenda K Brummer, Contract Specialist (CTR), by e-mail at Brenda.Brummer_ctr@dot.gov, or phone (202) 366-0031; or Chelly Johnson-Jones, Contracting Officer, by email at Chelly.Johnson-Jones@dot.gov, or phone (202) 366-1943. To allow for sufficient time to address questions appropriately, all questions must be received **via e-mail** no later than **2:00 P.M. Eastern Daylight Saving Time, Friday, July 16, 2010.**

DATES: Application(s) must be submitted to the National Highway Traffic Safety Administration, Office of Acquisition Management (NPO-320), ATTN: Brenda K. Brummer, 1200 New Jersey Avenue, S.E., W53-404, Washington, D.C. 20590. All application(s) submitted must include a reference to RFA No. DTNH22-10-R-00385. Complete packages will be considered only if received on or before **3:00 P.M. Eastern Daylight Saving Time on Friday, July 30, 2010.**

Applicant(s) shall provide a complete mailing address where Federal Express mail can be delivered.

Table of Contents

I.	Statement of Authority	3
II.	Background and Objective	3
A.	Background.....	3
B.	Objective.....	4
III.	Scope of Work and General and Specific Requirements	4
A.	Scope of Work.....	4
B.	General Requirements	5
C.	Specific Requirements	5
IV.	Period of Performance	7
V.	Milestones and Deliverables	7
A.	Milestone and Delivery Schedule	7
B.	Place of Delivery and Number of Copies	8
VI.	Acronyms	8

Increasing Blood Alcohol Concentration Reporting Phase Two

I. Statement of Authority

II. Background and Objective

A. Background

Drivers impaired by alcohol have been and continue to be a major highway safety problem. In 2008, there were 11,773 alcohol-impaired driving fatalities (fatalities in crashes involving a driver or motorcycle rider with a blood alcohol concentration (BAC) of .08 g/dL or greater). Of the 50,186 drivers involved in fatal crashes in 2008, 71 percent of the drivers who were killed and 26 percent of the drivers who survived the fatal crash were tested for BAC, and results were reported to the National Highway Traffic Safety Administration's (NHTSA) Fatality Analysis Reporting System (FARS).¹ Lacking a BAC, inferences about a driver's alcohol use are derived from an investigating law enforcement officer's observations and other information (NHTSA 2004). The most precise data come from direct measurements of a driver's BAC from a blood or breath test. NHTSA has collected these data in FARS since 1975. All States submit BAC results to FARS. Each State has a FARS analyst who collects data at the State level and provides it to NHTSA. In order to obtain a more complete picture of the role of alcohol in fatal crashes, NHTSA uses statistical techniques to impute the missing BAC data to better understand the involvement of alcohol in fatal crashes. However, estimated data still may be inaccurate. State-level estimates are quite accurate for States with high levels of known BAC results but may be far less accurate for States with substantial missing BAC data.

Obtaining the BAC of drivers involved in fatal crashes is vital to determining if alcohol was involved in the crash. Missing the BAC is a concern in terms of accurately determining the extent of impaired driving crashes. Accurate data are the best and most objective way to measure the size of the impaired driving problem, describe its characteristics, evaluate its trends, explore potential countermeasures, and evaluate the effects of laws and programs. The information also serves as a crucial piece of evidence in impaired driving court case.

Depending on the outcome of a crash, the way in which the driver's BAC may be obtained varies. The driver may be fatally injured at the scene, survive but be taken to a medical facility, or survive and remain on the scene of the crash. If the driver was fatally injured in the crash, the BAC may be obtained from the medical examiner or coroner. State laws that authorize post mortem testing of drivers typically do so only when the victim dies within a specified number of hours of the crash. If the driver survived and remains on the scene of the crash, a law enforcement officer may administer the BAC test in accordance with State laws. In a typical DUI investigation, the law allows this request when the officer has reasonable grounds or probable cause to believe that the motorist was operating in violation of the State's impaired driving statute. A voluntarily given BAC test can provide evidence of sobriety to protect the driver in criminal or civil action. If the driver was taken to the hospital for treatment, law enforcement must request the BAC to be tested. Many emergency treatment facilities draw blood from trauma patients for clinical purposes. This clinical blood sample may be the only source of a BAC test result. Until recently, the Uniform Accident and Sickness Policy Provision Law (UPPL) of the National Association of Insurance Commissioners (NAIC) contained a provision that allowed insurers to deny payment for medical treatment of

¹ National Highway Traffic Safety Administration Traffic Safety Fact Sheet State Traffic Data 2008

intoxicated persons. More than 30 States adopted this provision (also known as an alcohol exclusion law), which impeded BAC testing and reporting in some States. NAIC repealed this provision in 2001, but many States have not yet eliminated it from their laws or insurance codes. Once a BAC test is performed, systems and agreements should be in place to cause the test result to be transmitted to FARS.

States vary considerably in their BAC reporting levels. Known BAC testing rates in 2008 ranged from 22 percent to 95 percent for fatally injured drivers and from 1 percent to 80 percent for surviving drivers. BAC testing laws differ from State to State. Some States require BAC testing for all drivers involved in fatal crashes; others only authorize BAC testing for such drivers. According to a NHTSA report, *State Laws and Practices for BAC Testing and Reporting of Drivers Involved in Fatal Crashes*², the testing rates varied widely. A mandatory law by itself does not guarantee a high testing rate, and high rates can be obtained under both mandatory and non-mandatory laws.

Section 2007 of the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU), the alcohol-impaired driving countermeasures incentive grant program (under 23 U.S.C. Section 410) encourages States to adopt and implement effective programs to reduce impaired driving, and a State may use these grant funds to implement impaired driving activities. A State is eligible for a Section 410 grant by either demonstrating an alcohol-related fatality rate of 0.5 or less per 100 million vehicle miles traveled (VMT) as of the date of the grant (as determined by the most recent data available in the FARS) or by meeting program criteria. To qualify in fiscal years 2008 and 2009, the State must meet 5 of 8 program criteria, one of which is a program to increase the rate of BAC testing of drivers involved in fatal crashes. Additionally, States are eligible to receive funds as a high fatality rate state if they are one of the 10 states with the highest impaired driving related fatality rates, as determined by the most recent data available from FARS.

B. Objective

This project will support NHTSA's efforts to improve the collection of impaired driving data to enhance programs that reduce alcohol-impaired driving crashes and the resulting injuries and fatalities by focusing on increasing the reporting of BAC test results. The objective of these Grants is to increase the BAC testing and reporting for fatally injured and surviving drivers of a crash by providing financial support to States whose BAC reporting is below that of the national average. The funding will support ongoing activities to increase BAC reporting and will build the capacity of States to continue to improve BAC reporting. The total available funding for the grants is \$500,000.00. Five to ten States will be selected to receive funding. The Grantee will provide an interim and a final report to describe the activities and results of the grants

III. Scope of Work and General and Specific Requirements

A. Scope of Work

The Grantee shall be responsible for all aspects of the Grant to include, but not be limited to:

²James Hedlund, Robert Ulmer, and Veronika Shabanova Northrup (2004). *State Laws and Practices for BAC Testing and Reporting Drivers in Fatal Crashes*. DOT HS 809 756. Washington DC National Highway Traffic Safety Administration.

1. Implementing projects described in their Grant that increase BAC reporting levels in their State; and,
2. Providing both an interim and a final report to NHTSA.

B. General Requirements

The Grantee shall:

1. Provide a Project Manager who has lead responsibility for the day-to-day operation of the Grant and who shall serve as primary point of contact for all issues relating to the conduct of this Grant ;
2. Perform the effort as specified in this Grant;
3. Advise the NHTSA Contracting Officer's Technical Representative's (COTR) of any problems or issues involved in the implementation or progress of this Grant;
4. Adhere to the procedures or objectives specified in this Grant unless logical and feasible deviations are submitted to the COTR and approved in writing by the Contracting Officer (CO); and,
5. For a period of performance as herein set forth in *IV, Period of Performance*, shall furnish necessary personnel, equipment and facilities and otherwise perform all things necessary to complete the work required to accomplish the Grant's objective as set forth in *II, Scope of Work, C, Specific Tasks*.

NHTSA will provide a Contracting Officer's Technical Representative's (COTR) to serve as the point of contact for the Project Manager.

C. Specific Requirements

C.1. Task 1: Initial Project Meeting and Work Plan

The task objective is to ensure that the Grantee clearly understands NHTSA's intent for this Grant, identify an appropriate timeline, identify key personnel, and resolve any differences that may exist.

Within one (1) month of award, the Grantee shall meet with the COTR, the Contracting Specialist (CS), the CO, and other interested NHTSA personnel at NHTSA's offices in Washington, D.C. The purpose of this meeting is to discuss project objectives, planned course of action, milestones and deliverables, and resolve any differences between the Government's technical approach and the Grantee's approach. The Grantee shall first conduct a short briefing (i.e., 30 to 45 minutes) describing its planned approach.

After the Grantee's prepared briefing, the Grantee, the COTR, and other NHTSA personnel shall discuss specific details of the project to resolve any differences in approach and/or expected goals.

Two weeks after the initial project meeting, the Grantee shall submit a Work Plan that will incorporate any changes and resolutions discussed during the initial project meeting.

C.2. Task 2: Interim Progress Report

The task objective is to provide to NHTSA an interim progress report on the status and activities underway to meet the project's objectives.

Within ten (10) months of the award, the Grantee shall furnish one electronic copy to the COTR of an interim progress report.

The interim progress report shall be composed using Microsoft Office 2000 or a later version of Microsoft Word and shall be delivered by electronic mail (e-mail). At a minimum, the interim progress report shall include a narrative description of the following items:

- Grant Number
- Accomplishments achieved during the reporting period;
- Funds status by major cost element, the month's obligations, cumulative obligations, estimated cost to complete, and percent of cost expended versus percent of completion;
- Plans for accomplishments in the next reporting period;
- Preliminary or interim results, conclusions, trends or other items of information that the Grantee believes are of interest to NHTSA;
- Problems or delays that grantee has experienced in the conduct of this grant; and
- Specific action that the Grantee would like NHTSA to undertake to alleviate a problem.

Within two (2) weeks of receipt, NHTSA will review and either approve the interim report or return to the Grantee for revision.

C.3. Task 3: Final Report

The task objective is to develop a final report that NHTSA will be published as a technical assistance resource for other States seeking to improve BAC testing for fatally injured drivers and surviving drivers of a crash.

Within twenty (20) months of award, the Grantee shall submit a draft final report.

At a minimum, the final report will answer the following questions:

- What activities the Grantee engage in with the financial support provided?
- Did they focus on fatally injured drivers or surviving drivers or both?
- What obstacles did they encounter and how did they overcome them?
- What improvements do they have in the BAC reporting levels and the BAC reporting process?
- What recommendations would they offer other States who are trying to improve their BAC reporting?

Within one (1) month of receipt, NHTSA will review and either approve the draft report or return to the Grantee for revision.

C.4. Task 4: Final Project Briefing

The task objective is to complete the project by briefing NHTSA staff and other interested personnel on the results of the project and to discuss next steps.

Within twenty-three (23) months of award, the Grantee shall conduct a briefing in Washington, DC, at NHTSA's offices for appropriate NHTSA staff and invited guests to review the project and its results. This briefing shall last no less than 45 minutes, and the Grantee shall be prepared to answer questions from the attendees.

IV. Period of Performance

The period of performance is 24 Months from date of award.

V. Milestones and Deliverables

A. Milestone and Delivery Schedule

The following Milestones (M) and Deliverables (D) are significant in this Grant.

Item No.	Task No.	Milestone (M)/Deliverable (D)	Due Date from Date of Award	Number of Paper Copies	Number of Electronic Copies
1.	*	Grantee submits monthly reimbursement claims (D) (M)	15 days after end of month	1	N/A
2.	C.1.	Grantee and NHTSA COTR conducts initial project meeting (M)	1 month	N/A	N/A
3.	C.1	Grantee submits final work plan to NHTSA COTR (D)	1.5 months	N/A	1
4.	C.2.	Grantee submits interim progress report to NHTSA COTR (D)	10 months after award	N/A1	1
5.	C.2.	NHTSA COTR approves draft report or returns to Grantee for revision (M)	2 weeks after receipt	N/A	N/A
6.	C.3	Grantee submits final report (D)	20 months after award	1	1
7.	C.3.	NHTSA POM approves final report or returns to Grantee for revision (M)	1 month after receipt	N/A	N/A
8.	C.4.	Grantee conducts final project briefing (M)	23 months after award	N/A	N/A

B. Place of Delivery and Number of Copies

All deliverables items shall be furnished to the following address in the number of copies specified.

Item Number	Address	No. of Copies
3, 4, 6	Maureen MacDonald National Highway Traffic Safety Administration Impaired Driving Division, NTI-111 1200 New Jersey Avenue, SE Washington, DC 20590 Phone: (202) 366-1770 Fax: (202) 366-2766 E-mail: maureen.macdonald@dot.gov	1
	Department of Transportation National Highway Traffic Safety Administration ATTN: Brenda K. Brummer, Contract Specialist (CTR) 1200 New Jersey Avenue, SE W53-404 Washington, DC 20590 Phone: (202) 366-0031 E-mail: Brenda.Brummer.ctr@dot.gov	1
1	DOT/National Highway Traffic Safety Administration Mike Monroney Aero Center Accounts Payable Branch, AMZ-150 Oklahoma City, OK 73125	1

VI. Acronyms

The acronyms listed below are used during the performance of this Grant. If the Grantee is currently using, or has used any of the acronyms listed below differently, the Grantee shall use the acronyms listed below as defined under this Grant only.

Acronym	Definition
BAC	Blood Alcohol Concentration
NHTSA	National Highway Traffic Safety Administration
FARS	Fatality Analysis Reporting System
UPPL	Uniform Accident and Sickness Policy Provision Law
NAIC	National Association of Insurance Commissioners
SAFETEA-LU	Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users
VMT	Vehicle Miles Traveled
NHTSA COTR	NHTSA's Contracting Officer's Technical Representative
NHTSA CO	NHTSA's Contracting Officer
NHTSA CS	NHTSA's Contracting Specialist