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Summary of PPACA Grants, Demonstration Projects and Other Funding Opportunities

Public Law 111-148, entitled “The Patient Protection and Affordable Care Act” (the “PPACA”) is, in large part, best understood by reviewing the number and type of funding initiatives and programs it creates to address perceived deficiencies in health care and reformulate the model for delivery of health care services. Many of the programs and projects will begin almost immediately and thus, require that states and providers alike be prepared to position themselves in what will likely be a contest for the funds and opportunities. The purpose of the following summary is to inform you of the many projects and programs available under PPACA so that you can be prepared for the opportunities as they arise. Those providers and community health organizations that are proactive rather than reactive will likely benefit the most. There are also opportunities for providers to partner and collaborate with or without local and state government to deliver the models of care that the Federal government has legislated.

We have organized the summary by recipient and subject matter and then by the size of the entitlement. For further reference to the cited sections, please click <http://www.shipmangoodwin.com/files/upload/HealthCareReformAct.pdf> for a complete copy of the PPACA. In the attached tables, there are live links to the specific pages referred to in each section.

Summary of PPACA Grants, Demonstration Projects and Other Funding Opportunities

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
A. Federal, State and Local Governments and Indian Tribes					
1.	Services to Individuals with a Postpartum Condition and their Families Title II, Sec. 2952, Page 227	To establish, operate and coordinate the delivery of essential services to individuals with or at risk for postpartum conditions and their families	State and local governments Public-private partnerships Recipients of Healthy Start Initiative grants Public or nonprofit private hospitals Community-based organizations Hospices Ambulatory care facilities Community health centers Migrant health centers Public housing primary care centers Homeless health centers	Grants to be awarded in FYs 2010-2012 \$3 million appropriated for FY 2010 with additional funding for FYs 2011-2012 as necessary	Hospitals Home health agencies Hospices Clinics Federally Qualified Health Centers (“FQHCs”) School-based health centers Behavioral health providers Community-based organizations and centers

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
2.	Competitive Grants for Regionalized Systems for Emergency Care Response Title III, Sec. 3504, Page 400	To support pilot projects that design, implement and evaluate models of regionalized emergency care and trauma systems	States or a partnership of 1 or more states and 1 or more local governments Indian tribes	Department of Health and Human Services (“HHS”) will award at least 4 contracts or grants Funding amount not specified	Hospitals Emergency medical services
3.	Grants for Early Childhood Home Visitation Programs Title II, Sec. 2951, Page 217	To provide early childhood home visitation programs to promote maternal and prenatal health, infant health, child development, parenting skills, school readiness and reductions in child abuse	States Indian tribes Non-profit organizations with an established record of providing early childhood home visitation programs	Funding amount not specified	Home health agencies
4.	State Option to Provide Health Homes for Enrollees with Chronic Conditions * Title II, Sec. 2703, Page 201	To develop a state plan amendment to provide Medicaid beneficiaries with chronic conditions who select a designated provider, a team of health care professionals or a health team as the individual’s “health home” for purposes of providing the individual with health home services. “Health home” means a designated provider (including a provider that operates in coordination with a team of health care professionals) or a health team selected by an eligible individual to provide health home services	States	Total amount to be awarded to all states may not exceed \$25 million Planning grants may be awarded beginning 1/1/11	Home health agencies Physicians Personal or home care agencies

	Grant/Project <i>* Denotes funding is discretionary</i>	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
5.	Establishing Community Health Teams to Support the Patient-Centered Medical Home Title III, Sec. 3502, Page 395	To establish “health teams” to provide support services and capitated payments to primary care providers. A “health team” is a community-based, interdisciplinary, inter-professional team	States or state-designated entities Indian tribes or tribal organizations	Funding amount not specified	Home health agencies Physicians FQHCs Clinics
6.	Pregnancy Assistance Fund Title X, Sec. 10211-10214, Page 813	To award competitive grants to states to assist pregnant and parenting teens and women. To award funding to establish, maintain and operate pregnant and parenting services. To improve services for pregnant women who are victims of domestic violence, sexual violence, sexual assault and stalking	States	\$25 million to be appropriated each FY 2010-2019 (funding cannot supplant existing funding for such services) Eligible entity shall match 25% of funds received with non-federal funds (can be cash or in-kind)	Institutions of higher education High schools Community-based health prevention programs State Attorneys General
7.	Medicaid Emergency Psychiatric Demonstration Project Title II, Sec. 2707, Page 208	To permit a state to provide payments to mental health facilities to stabilize emergency mental conditions and review such stabilizations	States	3-year program \$75 million is appropriated for FY 2011	Behavioral health facilities (not publically owned or operated and subject to the requirements of 42 U.S.C. 1395dd for the provision of medical assistance in emergency circumstances)

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8.	Trauma Service Availability - Grants to States Title III, Sec. 3505, Page 407	To promote universal access to trauma care services, particularly in underserved communities	States, which in turn may make grants to: Hospitals in underserved areas; Safety net public or nonprofit trauma centers; and Certain other public or nonprofit trauma centers	\$100 million per FY from 2010-2015 At least 40% of any grant awarded must be directed to safety net trauma centers	Hospitals Trauma centers
9.	Trauma Care Centers and Service Availability Title III, Sec. 3505, Page 404	To defray uncompensated care costs, further the core missions of trauma centers and ensure the continued availability of trauma services	Public, nonprofit Indian Health Service, Indian tribal and urban Indian trauma centers	Maximum available grant is \$2 million per FY \$100 million to be appropriated in FY 2009 and as needed for FYs 2010-2015	Public and Indian Health Service trauma centers
10.	National Diabetes Prevention Program Title X, Sec. 10501, Page 879	To prevent adult-onset diabetes	State and local health departments Tribal organizations National networks of community-based non-profits focused on health and well being Academic institutions	Funding amount not specified for 2010-2014	State and local health departments Tribal organizations National networks of community-based non-profits focused on prevention Academic institutions

	Grant/Project <i>* Denotes funding is discretionary</i>	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
11.	Incentives for Prevention of Chronic Diseases in Medicaid Title IV, Sec. 4108, Page 443	To encourage behavior modification by Medicaid beneficiaries and determine scalable solutions to prevent chronic diseases	States	Program shall begin 1/1/11 for 5-year period \$100 million allocated to the program for the 5-year period	Hospitals Home health agencies FQHCs
12.	Personal Responsibility Education Grants Title II, Sec. 2953, Page 229	To enable a state or local organization to carry out education programs to reduce teen pregnancy and to educate young people about abstinence, STDs, contraception, dating, marriage, healthy adult relationships, body image, diversity, financial literacy, parenting skills, career skills, life skills, goals and decision-making	States Indian tribes Local community organizations Faith-based organizations	Grants will be available in each FY from 2010-2014 \$75 million allocated per FY from 2010-2014 Must submit application by FY 2011 to be eligible	Hospitals Home health agencies Clinics FQHCs School-based health centers
13.	Healthy Aging, Living Well Grant Title IV, Sec. 4202, Page 448	To carry out 5-year pilot programs to provide public health community interventions, screenings and clinical referrals for individuals who are between 55 and 64 years old	State and local health departments Indian tribes	Funding amount not specified for FYs 2010-2014	Hospitals Home health agencies FQHCs Community-based health prevention programs

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14.	Community Transformation Grants Title IV, Sec. 4201, Page 446	To implement, evaluate and disseminate evidence-based community preventive health activities to reduce chronic disease rates, prevent the development of secondary conditions, address health disparities and develop stronger evidence-based prevention programming	State and local agencies National networks of community-based organizations State or local non-profit organizations Indian tribes	Funding amount not specified	Hospitals Home health agencies FQHCs Community-based health prevention programs
15.	Demonstration Program to Improve Immunization Coverage Title IV, Sec. 4204, Page 453	To improve the provision of recommended immunizations for children, adolescents, and adults through the use of evidence-based, population-based interventions for high-risk populations	States	Funding amount not specified for FYs 2010-2014	Hospitals Home health agencies FQHCs Community-based health prevention programs
16.	Demonstration Project to Evaluate Integrated Care Around a Hospitalization Title II, Sec. 2704, Page 205	To evaluate the use of bundled payments for the provision of integrated care to a Medicaid beneficiary with respect to an episode of care that includes a hospitalization and concurrent physician services	States	Project to be conducted from 1/1/12-12/31/16 Funding amount not specified	Hospitals Physicians
17.	Pediatric Accountable Care Organization Demonstration Project Title II, Sec. 2706, Page 207	To allow certain providers of pediatric services to be recognized as accountable care organizations for purposes of receiving incentive payments	States	Project to be conducted from 1/1/12-12/31/16 Applicant must participate for at least 3 years Funding amount not specified	Hospitals Physicians Clinics FQHCs

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18.	Medicaid Global Payment System Demonstration Project Title II, Sec. 2705, Page 206	To evaluate the adjustment of payments made to an eligible safety net hospital system or network from a fee-for-service structure to a global capitated payment model	Hospital must be a “large, safety net hospital system or network” (to be later defined by HHS) in a participating state	Project to be conducted in FYs 2010-2012 Funding amount not specified	Hospitals
19.	Medicare Payment Demonstration Project Title X, Sec. 10315, Page 828	To test whether making adjustments for home health services would improve access to care for patients with high severity illness or for low-income or under-served beneficiaries	HHS	Project will occur over 4 years beginning no later than 1/1/2015 \$500 million appropriated for FYs 2015-2018	Home health agencies
Providers					
20.	Community Health Centers and the National Health Service CORPS Fund Title X, Sec. 10503, Page 886	To expand and sustain national investment in community health centers by establishing a Community Health Center Fund to support health centers under Section 330 of the Public Health Service Act	HHS	Specific amounts appropriated for FYs 2011-2015	Community health centers
21.	State Health Care Workforce Development Grant Program Planning Grants Title V, Sec. 5102, Page 481	To enable state partnerships to complete comprehensive planning and to carry out activities leading to workforce development strategies at the state and local levels	State workforce investment board (board must be comprised of representatives from various sectors including, state, private and public entities)	Planning grants shall be awarded for 1 year State required to match 15% 2010-\$8 million appropriated and such sums as may be necessary for each subsequent year	States and all providers dependent on health care workforce

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22.	State Health Care Workforce Development Grant Program Implementation Grants Title V, Sec. 5102, Page 481	To enable eligible partnerships to implement activities resulting in a plan for health workforce development addressing current and projected workforce demands within a state	Entities that receive a planning grant and complete all of the requirements of such grant or complete a satisfactory application Entities receiving an implementation grant must reserve at least 60% to make grants to encourage regional partnerships to address healthcare workforce development needs	Awarded for no more than 2 years (exception for 1 additional year for high performing grantees and grantees whose activities merit 1 more year) 25% state match requirement \$150 million appropriated for FY 2010 and such sums as may be necessary thereafter	States and all providers dependent on health care workforce
23.	Demonstration Projects to Provide Low Income Individuals with Education, Training, and Career Advancement Title V, Sec. 5507, Page 545	To provide eligible individuals with education and training for occupations in health care fields that pay well and are expected to either experience labor shortages or be in high demand	States Indian tribes or tribal organizations Institutions of higher education Local workforce investment boards established under section 117 of the Workforce Investment Act of 1998 Sponsors of an	\$85 million appropriated for each of FYs 2010-2014 for both this entry and entry 28 below HHS shall award at least 3 grants to an eligible entity that is an Indian tribe, tribal organization, or tribal college or university	States Indian tribes or tribal organizations Institutions of higher education Local workforce investment boards Sponsors of an apprenticeship program registered under the National Apprenticeship Act Community-based

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			apprenticeship program registered under the National Apprenticeship Act Community-based organizations		organizations
24.	Demonstration Project to Develop Training and Certification Programs For Personal or Home Care Aides Title V, Sec. 5507, Page 547	To conduct demonstration projects for purposes of developing core training competencies and certification programs for personal or home care aides	States	Grants must be awarded no later than 9/23/11 and project shall be for no less than 3 years HHS shall use \$5 million for each of FYs 2010-2012 to carry out such projects	Home health agencies Personal or home care agencies Nursing homes
25.	Grants to State and Regional Centers for Health Workforce Analysis Title V, Sec. 5103, Page 486	To allow for the collection, analysis and reporting of data related to health care workforce analysis to the National Center for Health Workforce Analysis and to provide technical assistance to local and regional entities on the collection, analysis and reporting of data	States State workforce investment boards Public health or health professions schools Academic health centers Public or private nonprofit entities	\$4.5 million appropriated for each of FYs 2010-2014	Academic health centers

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26.	Grants to States for Primary Care Extension Program Title V, Sec. 5405, Page 532	To establish state or multi state level Primary Care Extension Program State Hubs for purpose of the Primary Care Extension Program established by PPACA to provide support/assistance to primary care providers) Hubs shall consist of (at a minimum) the state health department, the entity responsible for administering the state Medicaid program (if other than the state health department), the state-level entity administering the Medicare program, and the departments of 1 or more health professions schools in the state that train providers in primary care	States or multi-state entities that submit fully-developed plans for either the implementation of a Hub or for developing a Hub	Grants for implementation of a Hub is for 6 years Grants for planning a Hub is for 2 years \$120 million appropriated for FYs 2011-2012 and such sums as may be necessary for FYs 2013-2014	Primary care providers
27.	Epidemiology-Laboratory Capacity Grants Title IV, Sec. 4304, Page 466	To assist public health agencies in improving surveillance for, and response to, infectious diseases and other conditions of public health importance by strengthening epidemiology capacity, enhancing laboratory practice, improving information systems, and developing and implementing prevention and control strategies	State and local health departments Indian tribes	\$190 million for FYs 2010-2013	State and local health departments Indian tribes

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28.	Fellowship Training in Public Health, Epidemiology, Public Health Laboratory Science, Public Health Informatics, and Expansion Title V, Sec. 5314, Page 518	To address documented workforce shortages in state and local health departments in applied public health epidemiology and public health laboratory science and informatics through expansion of existing fellowship programs in these areas and expanding the Epidemic Intelligence Service	HHS to carry out	\$39.5 million appropriated for each of FYs 2010-2013	State and local health departments
29.	Incentives For States to Offer Home and Community-Based Services as a Long-Term Care Alternative to Nursing Homes Title X, Sec. 10202, Page 805	To provide states with incentives to offer long-term care services in home and community-based settings rather than in a nursing home	State in which Medicaid expenditures for long-term care services and supports provided in non-institutionally-based settings represent less than 50% of all Medicaid expenditures for long-term care services and supports	A state's Federal Medical Assistance percentage (i.e. Federal Matching) will increase by 2% or 5% depending on applicable category state falls into Total payments by HHS to states during 10/1/2011-9/30/2015 up to \$3 billion	Home health agencies, and other community-based providers, such as adult day care and companion services

	Grant/Project <i>* Denotes funding is discretionary</i>	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
30	Grants to Enhance Provisions of Adult Protective Services Title VI, Sec. 6703, Page 676	To enhance adult protective services provided by state and local governments	States and local governments	\$100 million appropriated for each of FYs 2011-2014 Amount paid to each state for a FY shall equal the amount appropriated for that year multiplied by the percentage of the total number of elders who reside in US who reside in the state (guaranteed minimum payment amount may also apply)	State and local adult protective agencies
31	State Demonstration Projects for Purpose of Detecting & Preventing Elder Abuse Title VI, Sec. 6703, Page 677	To improve detection and prevention of elder abuse at state and local levels	States	\$25 million appropriated for each of FYs 2011-2014	States
32.	Grants to State Survey Agencies Title VI, Sec. 6703, Page 681	To protect residents of long-term care facilities by designing and implementing a complaint investigation system	State agencies that perform surveys of skilled nursing facilities or nursing facilities	\$5 million appropriated for each of FYs 2011-2014	State agencies

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
33.	Funding for Local and Adult Protective Service Offices Title VI, Sec. 6703, Page 676	To provide funding for state and local adult protective services that perform certain specified functions including investigation of reports, research and dissemination of information related to elder abuse and neglect	State and local adult protective service offices	\$3 million appropriated for FY 2011 and \$4 million for each of FYs 2012-2014	State and local adult protective service offices
34.	Grants for Establishment of Elder Abuse, Neglect and Exploitation Forensic Centers Title VI, Sec. 6703, Page 672	To establish and operate stationary and mobile forensic centers and to develop forensic expertise regarding, and provide services relating to, elder abuse, neglect and exploitation Four grants to institutions of higher education with demonstrated expertise in forensics or commitment to preventing or treating elder abuse, neglect to establish and operate stationary forensic centers Six grants to establish and operate mobile forensic centers	The following entities if they have engaged in and have expertise in issues relating to elder justice or in a field necessary to promote elder justice efforts: State or local government agencies; Indian tribes or tribal organizations; and Other public or private entities	\$4 million appropriated for 2011, \$6 million for 2012 and \$8 million for FYs 2013-2014	State or local government agencies Indian tribes or tribal organizations Other public or private entities with expertise in elder justice
35.	Funds for Nationwide Program for National and State Background Checks on Direct Patient Access Employees of Long-Term Care Facilities and Providers Title VI, Sec. 6201, Page 606	To help states carry out a nationwide program established by HHS for long-term care facilities or providers to conduct background checks on prospective direct patient access employees on a nationwide basis	States	State match requirement - 3 times what state guarantees to make available for the program with max of \$3 million for newly participating states and \$1.5 million for previously participating states	Long-term care facilities Nursing homes Assisted living service agencies Home health agencies Personal or home care agencies

	Grant/Project <i>* Denotes funding is discretionary</i>	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
36.	State Demonstration Programs to Evaluate Alternatives to Current Medical Tort Litigation Title X, Sec. 10607, Page 891	To provide grants to states to develop, implement and evaluate alternatives to current medical tort litigation	States	Grants shall only be provided for 5 years Funding amount not specified	States
37.	Community-Based Care Transitions Program Title III, Sec. 3026, Page 295	To provide funding to furnish improved care transition services to high-risk Medicare beneficiaries	Hospitals identified by HHS as having a high rate of readmission Community-based organizations that provide care transition services across a continuum of care through arrangements with eligible hospitals whose governing body includes representation of multiple health care stakeholders (including consumers)	Program shall begin on 1/1/2011 for a 5-year period \$500 million in the aggregate for FYs 2011-2015	Hospitals Home health agencies

	Grant/Project <i>* Denotes funding is discretionary</i>	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
38.	Pilot Testing Pay-For-Performance Programs For Certain Medicare Providers Title X, Sec. 10326, Page 843	To conduct a pilot program for eligible providers to test the implementation of a value-based purchasing program for Medicare payments	Psychiatric hospitals Long-term care hospitals Rehabilitation hospitals PPS-exempt cancer hospitals Hospice programs	Shall be established no later than 2016	Psychiatric hospitals Long-term care hospitals Rehabilitation hospitals PPS-exempt cancer hospitals Hospice programs
39.	National Pilot Program on Payment Bundling Title III, Sec. 3023, Page 281	To establish a pilot program for integrated care during an episode of care provided to a Medicare Part A or B beneficiary around a hospitalization in order to improve the coordination, quality and efficiency of health care services	Hospitals Physician groups Skilled nursing facilities Home health agencies	Program shall occur over a 5-year period Program to be established no later than 1/1/2013	Hospitals Physician groups Skilled nursing facilities Home health agencies
40.	Independence at Home Demonstration Program Title III, Sec. 3024, Page 286	To test a payment incentive and service delivery model that utilizes physician and nurse practitioner directed home-based primary care teams designed to reduce expenditures and improve health outcomes	Home health teams directed by a physician or, in accordance with state law, a physician assistant or nurse practitioner The team may also be composed of nurses, pharmacists and other health and social services staff	Shall begin no later than 1/1/2012 and shall occur over a 3-year period \$5 million allocated for each FY from 2010-2015	Home health agencies Physicians Physician assistants Nurse practitioners

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
41.	Demonstration Grants for Family Nurse Practitioner Training Programs Title X, Sec. 10501, Page 877	To establish a training demonstration program to employ and provide 1-year training to nurse practitioners for careers as primary care providers in FQHCs and Nurse-Managed Health Centers	FQHCs Nurse-Managed Health Centers	Funds shall be appropriated to implement program for FYs 2011-2014 3-year grants Priority given to those with ability to provide training to 3 nurse practitioners Grant amounts shall be up to \$600,000 per grant per year HHS may award technical assistance grants to grant recipients	FQHCs Nurse-Managed Health Centers
42.	Grants to Support Shared Decision making Implementation Title III, Sec. 3506, Page 411	To provide for the phased-in development, implementation and evaluation of shared decision making using patient decision aids to improve the understanding of patients of their medical treatment options	Health care providers	Funding amount not specified	Health care providers
43.	Grants or Contracts to Implement Medication Management Services in Treatment of Chronic Diseases Title III, Sec. 3503, Page 398	To implement medication management services provided by licensed pharmacists as a collaborative, multidisciplinary, interprofessional approach to the treatment of chronic diseases	Entities that provide a setting appropriate for medication management services	Shall begin no later than 5/1/2010	Pharmacists Hospitals Clinics Home health agencies

	Grant/Project <i>* Denotes funding is discretionary</i>	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
44.	Grants or Contracts to Fund Development of Performance - Measures for Medication Therapy Management Services Title III, Sec. 3503, Page 400	To develop performance measures that assess the use and effectiveness of medication therapy management services	Entities that provide a setting appropriate for medication management services	Funding amount not specified	Pharmacists Hospitals Clinics
45.	Incentive Payment Program for Major Surgical Procedures Furnished in Health Professional Shortage Area Title V, Sec. 5501, Page 535	To strengthen and expand access to general surgery services by providing financial incentives for surgeons to perform surgical procedures in shortage areas (10% additional payment for such services)	General surgeon who performs major surgical procedures in shortage areas	For major surgical procedure services on or after 1/1/2011 and before 1/1/2016 Funding amount not specified	Surgeons
46.	Hospital Value-based Purchasing Program Title III, Sec. 3001, Page 235	To establish a hospital value-based purchasing program under which value-based incentive payments are made to hospitals that meet specified performance standards	Hospitals are eligible to participate unless the hospital is subject to certain payment reductions, has been cited for patient health or safety deficiencies that pose immediate jeopardy to the health or safety of patients, or lacks a minimum number of cases or measures, as determined by HHS	Shall apply to payments for discharges occurring on or after 10/1/2012 Funding amount not specified	Hospitals

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
47.	Value-based Purchasing Demonstration Program for Inpatient Critical Access Hospitals Title III, Sec. 3001, Page 244	To test innovative methods of measuring and rewarding quality and efficient health care furnished by inpatient critical access hospitals	Critical access hospitals	Shall be established by 3/23/2012 and shall occur over a 3-year period Funding amount not specified	Critical access hospitals
48.	Value-based Purchasing Demonstration Program for Hospitals Excluded from Hospital Value-based Purchasing Program as a Result of Insufficient Numbers of Measures and Cases Title III, Sec. 3001, Page 245	To test innovative methods of measuring and rewarding quality and efficient health care furnished by hospitals excluded from value-based purchasing program	Hospitals excluded from the hospital value-based purchasing program as a result of an insufficient number of measures or cases as determined by HHS	Shall be established by 3/23/2012 and shall occur over a 3-year period Funding amount not specified	Hospitals
49.	Medicare Hospice Concurrent Care Demonstration Program Title III, Sec. 3140, Page 322	To determine if the use of a concurrent care system improves patient care, quality of life and cost-effectiveness	15 Medicare participating hospice programs from a mix of rural and urban areas	Program shall occur over a 3-year period	Hospices
50.	Research-Based Dental Caries Disease Management Title IV, Sec. 4102, Page 433	To award grants to demonstrate the effectiveness of research-based dental caries management	Community-based providers of dental services, including: FQHCs;	Funding amount not specified	Dentists Hospitals Clinics

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			<p>Clinics of a state-owned or operated hospital</p> <p>Indian Health Service, Indian tribe or urban Indian dental service;</p> <p>Health system providers;</p> <p>Private providers of dental services;</p> <p>Medical, dental, public health, nursing or nutrition educational institutions; and</p> <p>National organizations involved in improving children’s oral health</p>		FQHCs
51.	<p>Incentive Payments Program for Primary Care Physicians</p> <p><u>Title V, Sec. 5501, Page 534</u></p>	To expand access to primary care services (provides 10% additional payment on primary care services provided by primary care practitioners)	<p>The following practitioners for whom primary care services accounted for at least 60% of the allowed charges for that practitioner:</p> <p>Practitioners who have primary specialty designations of family medicine, internal medicine, geriatric medicine, or pediatric</p>	<p>For primary care services on or after 1/1/2011 and before 1/1/2016</p> <p>Funding amount not specified</p>	Primary care physicians

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			medicine; or Nurse practitioners, clinical nurse specialists or physician assistants		
52.	Certified EHR Technology Grant Program Title VI, Sec. 6703, Page 674	To assist long-term care facilities by providing funds to offset costs related to purchasing, leasing, etc. certified electronic health records (“EHR”)technology	Long-term care facilities	Appropriated for FY 2011-\$20 million FY 2012-\$17.5 million FYs 2013-2014 \$15 million (includes funding for entries 53 and 54 below)	Long-term care facilities
53.	Grants and Incentives for Long-term Care Staffing Title VI, Sec. 6703, Page 673	To improve long-term care staffing by providing eligible entities funds to carry out programs which offer employees providing direct care in long-term care, continuing training, bonuses, commissions etc.	Long-term care facilities Community-based long-term care providers	Shares same funding as entry 52 above.	Long-term care facilities Community-based long-term care entities
54.	Programs to Improve Management Practices in Long-term Care Title VI, Sec. 6703, Page 673	To enhance quality of long-term care by providing training and technical assistance to eligible entities regarding management practices using methods demonstrated to provide retention of individuals who provide direct care	Long-term care facilities Community-based long-term care entities	Shares same funding as entry 52 and 53 above.	Long-term care facilities Community-based long-term care entities

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55.	Long-term Care Ombudsman Program Grants and Training Title VI, Sec. 6703, Page 678	Support and improvement of state long-term care ombudsman programs-entities to conduct pilot programs with state long-term care ombudsman offices	Eligible entities with relevant expertise and experience in abuse and neglect in long-term care facilities or long-term care ombudsman programs and responsibilities	Appropriated \$5 million for FY 2011 \$7.5 million for FY 2012 \$10 million for FYs 2013-2014	Long-term care facilities Community-based long-term care entities
56.	National Independent Monitor Demonstration Project Title VI, Sec. 6112, Page 598	To develop, test, and implement an independent monitor program to oversee interstate and large intrastate chains of skilled nursing facilities and nursing facilities	Chains of skilled nursing facilities and nursing facilities	Shall begin no later than 3/23/2011 and the project must be conducted for a 2-year period Skilled nursing facility chains are responsible for a portion of the costs associated with the appointment of the independent monitors associated with this demonstration project Funding amount not specified	Skilled nursing facilities Nursing facilities
57.	Graduate Nurse Education Demonstration Project Title V, Sec. 5509, Page 556	To provide additional qualified clinical training to advance practice nurses by reimbursing eligible hospitals for the provision of such training	Up to 5 eligible hospitals “eligible hospital” means a hospital or a critical access hospital that has a written agreement in place	\$50 million appropriated for each FY 2012-2015	Hospitals

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
			with (i) 1 or more applicable schools of nursing; and (ii) 2 or more applicable non-hospital community-based care settings		
58.	Grants for Training in Family Medicine, General Internal Medicine, Pediatrics and Physician Assistantships * Title V, Sec. 5301, Page 497	To enhance health care workforce education and training through support and development of primary care training programs, fellowships, demonstration programs and other efforts in areas of family medicine, general internal medicine or general pediatrics	Accredited public or non profit private hospitals Schools of medicine or osteopathic medicine Academically affiliated physician assistant training programs or Public or private non profit entities deemed appropriate by HHS	Duration of award is 5 years \$125 million appropriated for FY 2010 and such sums as may be necessary for each of FYs 2011-2014 15% of amount above is designated for physician assistant training programs that prepare students to practice in primary care	Hospitals Schools of medicine Physician assistant training programs Public or private non profit entities deemed appropriate by HHS
59.	Quality Improvement Technical Assistance Grant Title III, Sec. 3501, Page 393	To provide technical support to institutions and providers so that such institutions and providers understand, adapt and implement the models and practices identified in research conducted by the Center for Quality Improvement and Patient Safety	The following entities which have demonstrated expertise in providing information and technical support and assistance to health care providers regarding quality improvement:	20% matching fund requirement Funding amount not specified	Hospitals Clinics Physicians FQHCs Home health agencies Nursing homes

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
			Health care providers Health care provider associations Professional societies Health care worker organizations Indian health organizations Quality improvement organizations Patient safety organizations Local quality improvement collaboratives The Joint Commission Academic health centers Universities Physician-based research networks Primary care extension programs		Behavioral health providers

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
			Federal Indian Health Service programs or programs operated by an Indian tribe		
60.	Grants to Nurse-Managed Health Clinics Title V, Sec. 5208, Page 495	To fund operation of Nurse-Managed Health Clinics	Nurse-Managed Health Clinics	\$50 million appropriated for FY 2010 and such sums as shall be necessary thereafter Grant amounts based on financial need of clinic	Nurse-Managed Health Clinics
61.	Nurse Education, Practice, and Retention Grants * Title V, Sec. 5309, Page 511	To enhance the nursing workforce by initiating and maintaining nurse retention programs including career advancement initiatives	Accredited schools of nursing, health care facilities, or partnerships of such schools and facilities	Appropriated such sums as may be necessary for each of FYs 2010-2012	Accredited nursing education programs Health care facilities Partnerships of nursing education programs and health care facilities
62.	Nurse Faculty Loan Program * Title V, Sec. 5311, Page 514	To increase the number of qualified nursing faculty by having HHS make payments on loans of nurses attaining certain levels of education and agreeing to be employed as faculty at accredited nursing schools	Individuals who: (1) are a United States citizen, national, or lawful permanent resident; (2) hold an unencumbered license as a registered nurse; and (3) have either already completed a master's	Individuals completing masters in nursing or equivalent have a cap of \$10,000 per year and total payments during FYs 2010 and 2011 can not exceed \$40,000 Individuals completing doctorate in nursing or equivalent have a cap of \$20,000 per	Nurses

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
			or doctorate nursing program at an accredited school of nursing or is currently enrolled	year and total payments during FYs 2010 and 2011 can not exceed \$80,000 Appropriated such sums as may be necessary for each of FYs 2010-2014	
63.	Grants to Individuals to Enter Careers in Geriatrics Title V, Sec. 5305, Page 506	To provide career awards and comprehensive education to individuals in geriatric areas in exchange for minimum employment commitments	Advanced practice nurses, clinical social workers, pharmacists, or students of psychology pursuing doctorate or other advanced degrees in geriatrics or related fields in accredited health professions schools	\$10 million appropriated for FYs 2011-2013	Nurses Social workers Pharmacists Students of geriatric studies
64.	Pediatric Loan Repayment Program Title V, Sec. 5203, Page 489	Increasing the supply of the health care workforce by supporting efforts to recruit and retain individuals in pediatric specialties to service underserved areas	U.S citizen/permanent legal resident that: (i) is a licensed physician entering or receiving training in an accredited pediatric medical sub specialty or pediatric surgical specialty, residency, or fellowship or has completed (but not before the end of 2010) training set forth in PPACA; or	HHS shall make a maximum of \$35,000 per year payment on education loans (undergraduate or GME education loans) for eligible professional for no more than 3 years \$20 million appropriated for each of FYs 2010-2013 for child and adolescent mental	Health care or mental health professionals in pediatric specialties

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
			(ii) a health care professional who (a) has received specialized training or clinical experience in child and adolescent mental health the areas specified in PPACA, or (b) who has a license or certification in the state to practice allopathic medicine, osteopathic medicine, psychology, school psychology, behavioral pediatrics, psychiatric nursing, social work, school social work, substance abuse disorder prevention and treatment, marriage and family therapy, school counseling, or professional counseling; or (iii) is a mental health service professional who completed (but not before the 2010 calendar year) specialized training or clinical experience in child and adolescent	and behavioral health specialists \$30 million appropriated for each of FYs 2010-2014 for pediatric medical specialists and pediatric surgical specialists	

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
			mental health specified in PPACA.		
65.	Public Health Workforce Loan Repayment Program Title V, Sec. 5204, Page 488	To assure adequate supply of public health professionals to eliminate critical public health workforce shortages in Federal, state, local and tribal public health agencies	U.S. Citizen (i) enrolled in or accepted for enrollment in academic educational institutions for public health or health professions degree and meeting additional specifications set forth in PPACA; or (ii) individuals who have graduated during a preceding 10-year period with a public health or health professions degree meeting additional specifications set forth in PPACA	For each year which an individual contracts to serve, HHS may pay a max of \$35,000 per year served with max of 1/3 of loan balance for individuals with less than \$105,000 \$195 million authorized for 2010 and such sums as may be necessary for each of FYs 2011-2015	Individuals in public health Students Recent graduates
66.	Allied Health Loan Forgiveness Program Title V, Sec. 5205, Page 493	To assure an adequate supply of allied health professionals and to eliminate critical allied health workforce shortages in the Federal, state and local and tribal public health care agencies	Allied health professionals who have graduated and received allied health professions degrees or certificates and are employed with Federal, state, local or tribal public health agencies or in a setting where patients might require health care services, including acute care facilities,	Funding amount not specified	Allied health professionals

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
			ambulatory care facilities, personal residences and other settings located in health professional shortage areas, medically underserved areas, or medically underserved populations		
67.	Quality Improvement Program for Hospitals with a High Severity Adjusted Readmission Rate Title III, Sec. 3025, Page 294	To make available a program for hospitals to improve their readmissions rate through the use of patient safety organizations	Hospitals with high readmission rates for patients with certain conditions that has not taken appropriate steps to reduce the readmissions rate and improve patient safety	Program shall begin no later than 3/23/2012 Funding amount not specified	Hospitals
Community Health Centers					
68.	Co-Locating Primary And Specialty Care In Community-Based Mental Health Settings Title V, Sec. 5604, Page 561	To improve care to adults with mental illness who have co-occurring primary care conditions and chronic diseases through co-location of primary and specialty care services in community-based mental and behavioral health settings	Qualified community mental health programs defined under section 1913(b)(1) of the Public Health Act	\$50 million appropriated for FY 2010 and such sums as may be necessary for each of FYs 2011-2014	Community mental health programs

	Grant/Project <i>* Denotes funding is discretionary</i>	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
69.	Program for Early Detection of Certain Medical Conditions Related to Environmental Health Hazards Title X, Sec. 10323, Page 839	To make competitive grants to eligible entities to (1) screen “at risk individuals” (exposed to environmental health hazards) for environmental health conditions including, but not limited to, asbestosis, pleural thickening/plaques, mesothelioma and malignancies of the lungs, colon, rectum, larynx, stomach, esophagus, pharynx or ovary; (2) develop and disseminate public information and education about screening availability, detection, prevention and treatment of environmental health conditions, and availability of Medicare benefits for certain people diagnosed with an environmental health condition	Community health centers FQHCs Indian tribal governments National Cancer Institute designated cancer centers State and local governments Miscellaneous non-profit organizations	\$23 million for FYs 2010-2014 is appropriated for funding \$20 million for each 5-FY period thereafter Appropriated funds shall remain available until expended	Community health centers FQHCs Indian tribal governments National Cancer Institute designated cancer centers Miscellaneous non-profit organizations
70.	Demonstration Project Concerning Individualized Wellness Plan Title IV, Sec. 4206, Page 458	To test the impact of providing at-risk populations who utilize community health centers an individualized wellness plan that is designed to reduce risk factors for preventable conditions as identified by a comprehensive risk-factor assessment, including weight, tobacco/alcohol use, exercise, nutrition and blood pressure	Community health centers	Funding amount not specified	Community health centers
Aging and Disability Resource Centers / Area Agencies on Aging					
71.	Additional Funding for Aging and Disability Resource Centers Title III, Sec. 3306, Page 352	To increase funding for aging and disability resource centers for FYs 2009-2012	Aging and disability resource centers	FY 2009 - \$5 million FYs 2010-2012 - \$10 million in the aggregate	Aging and disability resource centers

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
72.	Funding to Expand State Aging and Disability Resource Centers Title II, Sec. 2405, Page 187	HHS will provide funds to (i) support and expand Aging and Disability Resource Centers, and (ii) support efforts of Aging and Disability Centers and other public and private state and community-based organizations, including faith-based organizations, to serve as benefit enrollment centers	Aging and disability resource centers	For FYs 2010-2014, an additional \$10 million per FY will be appropriated to fund the programs	Aging and disability resource centers
73.	Increased Funding for Area Agencies on Aging Title III, Sec. 3306, Page 352	To increase funding for area agencies on aging for FYs 2009-2012	Area agencies on aging	FY 2009 - \$7.5 million FYs 2010-2012 - \$15 million in the aggregate	Area agencies on aging
Academic Institutions					
74.	Grants Related to Area Health Education Centers Infrastructure Development Title V, Sec. 5403, Page 526	To enable eligible entities to initiate or continue health care workforce education programs and to improve existing area health education programs (programs must use at least 1 area health education center)	Schools of medicine or osteopathic medicine, an incorporated consortium of such schools, or the parent institutions of such schools In states where no center program is in operation, HHS may award this type of grant to a school of nursing	Entity receiving grant must match an amount that is equal to not less than 50% of the costs of operating the program. At least 25% of the total required non-Federal contributions shall be in cash. (Waivers of matching funds requirement may apply) Awards based on number of health education centers included in the program (not less than \$250,000)	Medical or osteopathic schools, an incorporated consortium of schools, or parent institutions of schools Schools of nursing (where above do not exist in state)

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
				<p>annually per area health education center)</p> <p>\$125 million appropriated for each of FYs 2010-2014 (limitations exist)</p>	
75.	<p>Grants for Training in Family Medicine, General Internal Medicine, General Pediatrics and Physician Assistantships *</p> <p>Title V, Sec. 5301(b), Page 498</p>	<p>To have schools establish, maintain, or improve academic units or programs that improve (i) clinical teaching and research in the fields of family medicine, general internal medicine or general pediatrics; or (ii) programs that integrate academic administrative units in these fields to enhance interdisciplinary recruitment, training and faculty development</p>	<p>Schools of medicine or osteopathic medicine</p>	<p>\$750,000 appropriated per year for each FY 2010-2014</p>	<p>Schools of medicine or osteopathic medicine</p>
76.	<p>Establishment of United States Public Health Sciences Track</p> <p>Title V, Sec. 5315, Page 521</p>	<p>To establish an education track which emphasizes team based service, public health, epidemiology and emergency preparedness (the “Track”) to be located at existing and accredited, affiliated health professions education training programs at selected academic health centers. Surgeon general is provided with authority to set programs, fellowships, hiring, etc. for the Track</p>	<p>Medical, dental, physician assistant, pharmacy, behavioral and mental health, public health, and nursing students in the Track can enter into contract with the Surgeon General for tuition (or tuition remission) and a stipend in return for obligated service with the Commissioned Corps of the Public Health Service equal to 2 years for each</p>	<p>HHS shall transfer from the public health and social services emergency fund such sums as may be necessary to carry out establishment of the Track</p> <p>Funding amount not specified</p>	<p>Track students</p>

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
			<p>school year enrolled at the college (reduction in time may apply as specified)</p> <p>Participating health profession institutions (selected by HHS) may be reimbursed for the cost of educational services provided by the institutions to the Track students</p>		
77.	<p>Area Health Education Centers Point of Service Maintenance and Enhancement Award</p> <p>Title V, Sec. 5403, Page 526</p>	<p>To maintain and improve the effectiveness and capabilities of existing area health education center programs</p>	<p>Entities that have received infrastructure development funds, operates in an area health education center program, including an area health education center or centers, and have a center or centers that are no longer eligible to receive infrastructure development grants (described directly above)</p>	<p>Entity receiving grant must match not less than 50% of the costs of operating the program (25% cash requirement applies). (Waivers of matching funds requirement may apply)</p> <p>Awards of not less than \$250,000 annually per area health education center included in the program apply</p>	<p>Schools of medicine or osteopathic medicine, an incorporated consortium of such schools, or the parent institutions of such schools</p> <p>Schools of nursing (where above do not exist in state)</p>

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
78.	Rural Physician Training Grants Title X, Sec. 10501, Page 882	To increase the number of medical school graduates who practice in underserved rural communities (HHS shall issue regulations that will define the term “underserved rural communities”)	Schools of allopathic or osteopathic medicine	60 days after enactment of this program, HHS shall issue regulations that will define underserved rural community Priority will be given to applicants who meet certain criteria such as having a record of successfully training students who practice in underserved rural communities \$4 million is appropriated for program for each FY from 2010-2013	Schools of allopathic or osteopathic medicine
79.	Preventative Medicine and Public Health Training Grant Program Title X, Sec. 10501, Page 883	To provide training to graduate medical residents in preventive medicine specialties	Accredited schools of public health Accredited schools of medicine or osteopathic medicine Accredited private or public non-profit hospitals State, local or tribal health departments	\$43 million for FY 2011 are appropriated and necessary amounts for FYs 2012-2015	Accredited schools of public health Accredited medical and osteopathy schools Accredited private or public non-profit hospitals State, local or tribal health departments

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
80.	Grants for Training for Mid-Career Public and Allied Health Professionals * Title V, Sec. 5206, Page 494	To provide and give grants to eligible entities for entities to award scholarships to mid-career professionals in the public health and allied health workforce enabling such individuals to receive additional training in the field of public health and allied health	Accredited educational institutions that offer a course of study, certified program, or professional training program in public health or allied health or a related discipline	\$60 million appropriated for FY 2010 and such sums as are necessary for FYs 2011-2015 50% to allied health mid-career professionals and 50% to public health	Educational institutions Mid-career professionals in public health and allied health
81.	Grant for Support and Development of Training in General, Pediatric, and Public Health Dentistry Title V, Sec. 5303, Page 500	To support and develop dental related training programs (including financial assistance programs, training, fellowships, loan repayment program for faculty in dental program)	Schools of dentistry, public or non-profit private hospital, or other private non-profit entity as determined by HHS Eligible entities includes entities that have programs in dental or dental hygiene schools, or approved residency or advanced education programs in the practice of general, pediatric or public health dentistry	Entity receiving grant gets grant for 5 years subject to annual approval \$30 million appropriated for FY 2010 and such sums as may be necessary thereafter for FYs 2011-2015	Dental schools and their students Hospitals Other private non-profit entities as determined by HHS Residents Practicing dentists Dental hygienists Full-time faculty of general, pediatric or public health dentistry
82.	Alternative Dental Health Care Providers Demonstration Project Title V, Sec. 5304, Page 503	To award 15 grants to eligible entities to allow entities to establish a demonstration program designed to increase access to dental health care services in rural and other underserved communities	Entities which are within a program accredited by the Commission of Dental Accreditation or within an accredited dental education program and are	Shall not begin later than 3/23/2012 and shall conclude not later than 7 years after enactment Each grant is not less than \$4 million	Institutions of higher education (including community colleges) Public-private partnerships

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
			either: Institutions of higher education (including community colleges) Public-private partnerships; FQHCs; Indian Health Service facilities; State or county public health clinics; Health facilities operated by Indian tribes; or Public hospitals or health systems	for the 5 year period during which the demonstration project being conducted Cap on first year disbursement applies- 20% of the total funding distributed in first year and minimum of 15% of funding for each year after	FQHCs Indian Health Service facilities or Indian Tribes State or county public health clinics Health facilities operated by Indian tribe Public hospitals or health systems
83.	Grants for Mental and Behavioral Health Education and Training* Title V, Sec. 5306, Page, 508	To support the recruitment of students for, and education and clinical experience of students in certain education tracks related to mental and behavioral health as described in PPACA	Institutions of higher education (At least 4 grants to historically black colleges or universities or other minority institutions)	Authorized to be appropriated for FYs 2010-2013: \$8 million for training in social work; \$12 million for training in graduate psychology, of which not less than \$10 million shall be	Institutions of higher education

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
				allocated for doctoral, postdoctoral, and internship level training; \$10 million for training in professional child and adolescent mental health; and \$5 million for training in paraprofessional child and adolescent work	
84.	Depressive Disorder Grant Program Title X, Sec. 10410, Page 866	To award competitive grants to eligible entities to establish national centers of excellence for depression (“Centers”) to conduct activities related to depressive disorder treatment	Institutions of higher education Public and private research institutions	Not later than 03/23/2011, not more than 20 Centers may be established Not later than 9/30/2016, not more than 30 Centers may be established Grants are awarded to recipients for a 5-year period and 1 additional 5-year period Grant priority will be given if meet	Institutions of higher education Public and private research institutions

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
				specified criteria 1 Grant provided to recipient to be the coordinating center of excellence for depression Entities must match (with non-federal funds) \$1 for every \$5 awarded Recipients may not be awarded more than \$5 million except for coordinating center gets \$10 million	
85.	Demonstration Program to Integrate Quality Improvement and Patient Safety Training into Clinical Education of Health Professionals Title III, Sec. 3508, Page 412	To develop and implement academic curricula that integrates quality improvement and patient safety in the clinical education of health professionals	Health professions schools Schools of public health Schools of social work Schools of nursing Schools of pharmacy Graduate medical education programs Schools of health care administration	Funding amount not specified	Academic institutions

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
86.	Program for Education and Training in Pain Care Title IV, Sec. 4305, Page 468	To develop and implement programs to provide education and training to health care professionals in pain management	Health care professions schools Hospices Other public and private entities	Funding amount not specified	Academic institutions Hospices Hospitals Home health agencies Nursing homes Physicians
87.	Grants for Training for Direct Care Workers Title V, Sec. 5302, Page 499	To allow entities to provide new training opportunities for direct care workers who are employed in long-term care settings such as nursing homes, assisted living facilities and skilled nursing facilities, intermediate care facilities for individuals with mental retardation, home and community-based settings and any other setting HHS determines to be appropriate	Institutions of higher learning who are accredited and have established a public-private educational partnership with a nursing home or skilled nursing facility, agency or entity providing home and community-based services to individuals with disabilities, or other long-term care provider	\$10 million appropriated for FYs 2011-2013 (Eligible entity provides funding to eligible individuals to offset cost of tuition and other fees for enrollment in programs provided by the eligible entity)	Institutions of higher learning Nursing homes Assisted living service agencies Home health agencies
Sponsors of School-Based Health Centers					
88.	Grants for the Establishment of School-based Health Centers Title IV, Sec. 4101, Page 428	To establish and operate school-based health centers	School based health centers or sponsors including hospitals, public health departments, community health centers, nonprofit health care agencies and Indian tribal governments	\$50 million per FY from 2010-2013	Schools with school-based health centers and listed sponsors

	Grant/Project <i>* Denotes funding is discretionary</i>	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
89.	Grants for the Operation of School-based Health Centers Title IV, Sec. 4101, Page 429	To support the operation of school-based health centers	School-based health centers or sponsors including hospitals, public health departments, community health centers, nonprofit health care agencies and Indian tribal governments	Funding amount not specified	Schools with school-based health centers
Miscellaneous Grants and Opportunities					
90.	Programs Relating to Breast Health and Cancer Title X, Sec. 10413, Page 873	To increase awareness of breast health and education for young women (ages 15-44) and provide assistance to young women diagnosed with breast cancer and pre-neoplastic breast diseases	HHS shall award grants to (1) entities to establish national multimedia campaigns oriented towards breast health and education for young women; and (2) any organization or institution who will provide assistance and information directed to young women with breast cancer and pre-neoplastic breast disease	\$9 million appropriated for each FY from 2010-2014 Priority shall be given to applicants that deal specifically with young women diagnosed with breast cancer and pre-neoplastic breast disease	Hospitals Physicians Clinics Community-based health prevention programs
91.	National Congenital Heart Disease Surveillance System Title X, Sec. 10411, Page 870	To track and organize the epidemiology of congenital heart disease (“CHD”) information into 1 population based national surveillance system that compiles data concerning actual occurrences of CHD	Public or private non-profit entity with specialized experience with CHD	Funding amount not specified	Hospitals Clinics FQHCs

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
92.	Grants or Contracts for Quality Measure Development Title III, Sec. 3013, Page 264	To develop quality measures that allow the assessment of health outcomes, coordination of care, decision making, meaningful use of health information technology, patient safety, effectiveness of care, patient-centeredness of care, efficiency, health disparities or patient satisfaction	Entities that: Have demonstrated expertise and capacity in the development and evaluation of quality measures; Have adopted certain procedures in the quality development process; Collaborate with certain entities regarding quality measures; and Have transparent governing and conflicts of interest policies	Funding amount not specified	Hospitals Clinics FQHCs Academic institutions
93.	Office on Women’s Health Grants Title III, Sec. 3509, Page 414	To fulfill the mission of this new government agency including promoting and funding women’s health initiatives, providing advice and consultation regarding women’s health issues and facilitating the exchange of information about women’s health	Public and private entities, agencies and organizations	Funding amount not specified	Hospitals Government agencies Clinics Physicians

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
94.	Program Payments to Teaching Health Centers that Operate Graduate Medical Education Programs Title V, Sec. 5508, Page 552	Expansion of existing or establishment of new approved graduate medical residency training programs at qualified teaching health centers	Qualified teaching health centers that are listed as sponsoring institutions by the relevant accrediting bodies	Amounts appropriated are not to exceed \$230 million for FYs 2011-2015	Teaching health centers
95.	Teaching Health Centers Development Grants Title V, Sec. 5508, Page 550	Establishing or expanding primary care residency training programs (family medicine, internal medicine, pediatrics, internal medicine pediatrics, obstetrics and gynecology, psychiatry, general dentistry, pediatric dentistry, and geriatrics) at teaching health centers	Teaching health centers (entities that are community-based, ambulatory patient care centers and operate a primary care residency program (includes federally qualified health centers, community mental health center, rural health clinic and health center operated by Indian Health Service, an Indian tribe or tribal organization or an urban Indian organization))	Grants shall be for a term of not more than 3 years and the maximum award may not be more than \$500,000 \$25 million appropriated for FY 2010 \$50 million appropriated for FY 2011 \$50 million appropriated for FY 2012 and such sums as may be necessary for each FY thereafter No more than \$5 million annually may be used for technical assistance program grants	Qualified teaching health centers Federally qualified teaching health centers Community mental health centers Rural health clinics Indian health centers

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
96.	Cures Acceleration Network Grant Program Title X, Sec. 10409, Page 860	National Institute of Health to award competitive grants, cooperative agreements and contracts to eligible entities to accelerate the development of high need cures	Private or public research institutions Institutions of higher education medical center Biotechnology/ pharmaceutical companies Disease or patient advocacy organizations Academic research institutions	Each award shall not be more than \$15 million per project for the 1 st FY and may receive \$15 million in subsequent years Appropriated \$500 million for FY 2010 and necessary amounts for subsequent FYs	Private or public research institutions Institutions of higher education medical centers Biotechnology/ Pharmaceutical companies Disease or patient advocacy organizations Academic research institutions
97.	\$100 Million FY 2010 Appropriation Title X, Sec. 10502, Page 885	To be used for debt service on, or direct construction or renovation of, a health care facility that provides research, inpatient tertiary care, or outpatient clinical services	Facility must be affiliated with an academic health center at a public research university in the U.S. that contains a state's sole public academic medical and dental school	To remain available for obligation until 09/30/2011 \$100 million available Federal support represents not more than 40% of total cost of the proposed new facility	Academic institutions

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
98.	Establishment of National Training Institute for Surveyors Title VI, Sec. 6703, Page 680	To protect residents of long-term care facilities by establishing and operating a national training institute for federal and state surveyors of long-term care facilities	Entities chosen by HHS	\$12 million appropriated for HHS to enter into contract with an entity for purpose of establishing and operating this entity	Entities chosen by HHS
99.	Grants for Geriatric Workforce Development Title V, Sec. 5305, Page 504	Enhancing health care workforce education and training in the area of geriatrics by providing awards allowing entities that operate geriatric education centers for such entities to, among other things, run a faculty fellowship program focused on geriatrics, chronic care and long-term care	Entities that operate geriatric education centers	Awards of \$150,000 with max of 24 geriatric centers to receive award \$10.8 million appropriated for FYs 2011-2014	Academic institutions
100.	Grants for Small Businesses to Provide Comprehensive Workplace Wellness Programs Title X, Sec. 10408, Page 859	To award grants to eligible employers to provide their employees with access to workplace wellness programs	For or non-profit employers that employ less than 100 employees who work 25 hours or more per week and does not provide a workplace wellness program as of 03/23/2010	The grant program shall only be conducted for a 5-year period Appropriated \$200 million in the aggregate for FYs 2011-2015	Small businesses
101.	Demonstration Project To Provide Access to Affordable Care Title X, Sec. 10504, Page 886	To establish a 3-year demonstration project in up to 10 states to provide comprehensive health care services to the uninsured at reduced fees	States	HHS shall establish the demonstration project no later than September 23, 2010 Each state in which the entity is located shall receive not more than \$2 million for the 3-year period	State-based, non-profit public-private partnership that provides access to comprehensive health care services to the uninsured at reduced fees

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
102.	Grants or Contracts for Data Collection Title III, Sec. 3015, Page 269	To support new, or improve existing, efforts to collect and aggregate quality and resource use measures	Entities that are: Multi-stakeholder entity that coordinates the development of methods and implementation plans for the consistent reporting of summary quality and cost information; capable of submitting summary data for a particular population and providers; or Federal Indian Health Service program or a health program operated by an Indian tribe	20% matching fund requirement	Multi-stakeholder entities as described Federal Indian Health Service programs or health programs operated by an Indian tribe
103.	Community-Based Collaborative Care Network Program Title X, Sec. 10333, Page 852	To support community-based collaborative care networks, which are a consortium of health care providers with a joint governance structure that provides comprehensive/ coordinated care to low income populations	Unless specific exceptions apply, the network shall include a hospital and all FQHCs in the community	HHS shall give priority to networks that include (1) the capability to provide broad range of services to low-income individuals; (2) the broadest range of providers that serve a high volume of low income individuals; and (3) a county or municipal department of health	Hospitals Community health centers FQHCs

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
104.	Grants To Promote Positive Health Behaviors and Outcomes Title V, Sec. 5313, Page 516	To promote positive health behaviors and outcomes for populations in medically underserved communities through the use of community health workers	Public or nonprofit private entities, including: States Public health departments Free health clinics Hospitals FQHCs A consortium of any of the above entities	Appropriated such sums as may be necessary to carry out this section for each of FYs 2010-2014	Public or private entity using community health workers FQHCs Hospitals Health care provider consortium
105.	Pilot Programs For Care of Certain Individuals Residing In Emergency Declaration Areas Title X, Sec. 10323, Page 836	To establish one mandatory and one optional pilot program to develop and provide innovative approaches to reimburse providers and to furnish comprehensive, coordinated and cost effective care to eligible individuals suffering from conditions caused by environmental conditions or public health hazards such as asbestosis, pleural thickening, pleural plaques, mesothelioma and other malignancies	Individual's suffering from environmentally caused conditions Any medical provider providing services to such individuals	Funding amount not specified	Providers

	Grant/Project * Denotes funding is discretionary	Purpose	Recipient Eligible for Funding	Important Dates & Funding Amounts	Potential Providers to Benefit
106.	Minority Health Program Title X, Sec. 10334, Page 853	To award grants, contracts, enter into memoranda of understanding and inter or intra agency agreements to assure the improved health status of racial and ethnic minorities and to develop measures to evaluate the effectiveness of activities aimed at reducing health disparities and supporting the local community	Public and non-profit entities and agencies Departmental and cabinet agencies and organizations Organizations that are indigenous human resource providers in communities of color	Funds appropriated as necessary for FYs 2011-2016	Public and non-profit entities and agencies Departmental and cabinet agencies and organizations Indigenous human resource providers in communities of color

Modifications/Amendments to Existing Grants, Demonstration Projects and Other Funding Opportunities

The following amendments were made to existing programs:

	Grant/Project	Purpose	Amendments/Modifications
1.	Post-partum Depression Research Title II, Sec. 2952, Page 226	HHS currently provides grants and other funding to research post-partum depression	HHS is “encouraged” to increase research, education and public outreach
2.	Abstinence Education Funding Title II, Sec. 2954, Page 234	Grants to states to provide abstinence education, and at the option of the state, where appropriate, mentoring, counseling, and adult supervision to promote abstinence from sexual activity, with a focus on those groups which are most likely to bear children out-of-wedlock. The program was last funded in 2003.	Funding to be appropriated for FYs 2010-2014
3.	Gainsharing Demonstration Title III, Sec. 3027, Page 297	Program to allow eligible hospitals and physicians to investigate the effectiveness and efficiency of hospital gainsharing arrangements	Extends the program to 9/30/11, increases funding and requires a final report on the program by 3/31/2013
4.	Childhood Obesity Demonstration Project Title IV, Sec. 4306, Page 469	To conduct a demonstration project to develop a comprehensive and systematic model for reducing childhood obesity	Extends \$25 million in aggregate funding for FYs 2010-2014
5.	School-Based Sealant Program Title IV, Sec. 4102, Page 433	To provide grants to states and Indian tribes for school-based oral health and dental sealant programs	Grants must now be awarded to each of the 50 states
6.	Rural Community Hospital Demonstration Program Title III, Sec. 3128, Page 305	Program to test the feasibility and advisability of establishing rural community hospitals to furnish covered inpatient hospital services	Extends the program for 5 years and provides that not more than 20 rural community hospitals may participate in the program during the extended period
7.	Medicare Rural Hospital Flexibility Program Title III, Sec. 3129, Page 308	To provide grants to states to establish a Medicare rural hospital flexibility program to create 1 or more rural health networks, promote regionalization of rural health services and improve access to hospital and other health services for rural residents. Also provides grants to hospitals assist eligible small rural hospitals in meeting the costs of implementing data systems and programs under PPACA including value-based purchasing programs, accountable care organization programs and the National Pilot Program on Payment Bundling.	Extends the availability of grants from an original end date of FY 2010-2012

	Grant/Project	Purpose	Amendments/Modifications
8.	Demonstration Project on Community Health Integration Models in Certain Rural Counties Title III, Sec. 3126, Page 307	<p>To develop and test new models for the delivery of health care services in eligible counties for the purpose of improving access to, and better integrating the delivery of, acute care, extended care, and other essential health care services to Medicare beneficiaries</p> <p>Eligible entities must be located in a state in which at least 65% of the counties have 6 or less residents per square mile</p>	<p>An eligible entity selected for this project may now choose up to 8 counties in the state in which they are located, rather than the previous limit of 6 counties</p>
9.	Additional Funding for National Health Services Corps Title V, Sec. 5207, Page 494	<p>National Health Services Corps is a part of HHS and its members are health professionals serving in underrepresented communities who receive loan repayment assistance and scholarships in exchange for services in these communities</p>	<p>Increases appropriations for existing National Health Services Corps</p> <p>2010- \$320,461,632 2011- \$414,095,394 2012- \$535,087,442 2013- \$691,431,432 2014- \$893,456,433 2015- \$1,154,510,336 2016 and thereafter- amount is based on prior FY adjusted as set forth in Act</p>
10.	Public Health Service Act/Longitudinal Evaluations Title V, Sec. 5103, Page 486	<p>Provides for grants to state and state workforce investment board, public health or health professions schools, academic health centers or appropriate public or private entities for longitudinal evaluation of individuals who have received education, training, or financial assistance from programs under Public Health Service Act (42 U.S.C. 294m)</p>	<p>Increases amounts available for longitudinal studies to “such sums as may be necessary for FYs 2010-2014”</p>
11.	Expansion of Eligibility for Geriatric Academic Career Awards Title V, Sec. 5305, Page 506	<p>Makes awards to faculty in areas of geriatrics to promote careers as academic geriatricians</p>	<p>Replaces definition of eligible individual who can receive grants under Section 753(c) of the Public Health Service Act 294(c).</p>

	Grant/Project	Purpose	Amendments/Modifications
12.	Additional Funding for Existing Centers of Excellence Title V, Sec. 5401, Page 524	Makes grants to health professions schools and other entities for the purpose of supporting programs of excellence in health professions schools for underrepresented minorities.	Increases funding to health professions schools that meet the requirements of a center of excellence and requires certain percentages of amounts authorized (based on amounts actually appropriated) to be provided to certain types of schools (eg. historically black schools, Native American institutions etc.) Appropriated \$50,000,000 for each of FYs 2010-2015 and such sums as may be necessary thereafter
13.	Increase in Amounts Available for Health Care Professionals Training for Diversity Title V, Sec. 5402, Page 526	To increase diversity in health professions by providing loans, scholarships and other incentives	Increases the maximum amount which can be paid off for a diverse faculty member's educational loans serving at selected schools (from \$20,000 to \$30,000 per year of service) Increases amounts available for scholarships for disadvantaged students in health professions schools from \$37,000,000 to \$51,000,000 Appropriated \$60,000,000 for FY 2010 and such sums as may be necessary thereafter for loan repayment program and fellowship programs

Questions or Assistance?

If you have questions about or need assistance with any of these matters, please contact one of the following members of our Health Law Practice Group. Please visit our Health Care Reform Resource Center at www.shipmangoodwin.com/healthcarereformresourcecenter periodically for updates, alerts and notifications of workshops.

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