



Office of Recovery Act Coordination

Department of Health and Human Services
Office of the Assistant Secretary for Financial Resources

Recovery Act:

District of Columbia Highlights



Since the enactment of the Recovery Act in 2009, the U.S. Department of Health and Human Services has made **\$686.8 million in stimulus funds available in the District of Columbia*** for Community Health Centers, universities and other institutions to provide fiscal relief, improve and expand access to health care, provide child care and other social services for its most vulnerable citizens, establish the infrastructure for health information technology, and conduct scientific research.

This includes:

- **\$381.7 million** for the increased Federal share (FMAP) of State Medicaid costs.
- **\$128.1 million** for scientific research, equipment and research facilities, including:
 - **\$15 million** for construction of a facility to research tropical diseases and other infections at George Washington University.
 - **\$4.7 million** to improve research facilities at Georgetown University.
- **\$67.2 million** for health information technology (IT), including:
 - **\$4.6 million** to George Washington University for advanced health IT training programs.
- **\$41.2 million** for Temporary Assistance for Needy Families (TANF), including **\$18.7 million** for subsidized jobs programs.
- **\$18.1 million** for Community Health Centers services, construction, renovation, and equipment, including:
 - **\$15.9 million** for Unity Health Care for construction, renovation, increased demand for services, and equipment.
- **\$1.1 million** for Mary's Center for Maternal & Child Care for increased demand for services, construction and equipment.
- **\$17.4 million** for the Community Services Block Grant for community action agencies to reduce poverty and help low-income residents to become self-sufficient.
- **\$6.2 million** for Early Head Start and Head Start programs for expansion and quality improvement.
- **\$4.3 million** for immunization programs.
- **\$2.9 million** to support programs at the community level to help seniors better self-manage their chronic diseases.
- **\$2.7 million** for the Child Care and Development Fund to improve access to child care and improve quality.
- **\$643,000** to support 13 National Health Service Corps clinicians providing primary health care in Health Professional Shortage Areas.
- **\$485,000** for meals and nutrition services for the elderly.
- **\$250,000** to strengthen community nonprofit groups that help the needy.

**The total funding in this document is based on the HHS Sept. 30, 2011, Financial and Activity Report (FAR) for the Recovery Act, available at the Department's website, <http://www.hhs.gov/recovery/reports/index.html>, except for FMAP, which is based on the Oct. 21, 2011, FAR and FMAP obligations of \$51.5 million in Recovery Act funds extended by P.L. 111-226. The highlights are a selection of programs funded by the Recovery Act and do not add up to the total funding within the State. For more information about individual HHS programs and Recovery Act funding, see <http://www.hhs.gov/recovery/>.*