



Office of Recovery Act Coordination

Department of Health and Human Services

Office of the Assistant Secretary for Financial Resources

Recovery Act:

Nevada Highlights



Since the enactment of the Recovery Act in 2009, the U.S. Department of Health and Human Services has made **\$616.2 million in stimulus funds available in the State of Nevada*** for Community Health Centers, universities and other institutions in the State 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:

- **\$475.4 million** for the increased Federal share (FMAP) of State Medicaid costs.
- **\$19.1 million** for Temporary Assistance for Needy Families (TANF).
- **\$16.3 million** for Community Health Center services, construction, renovation, equipment, and health information technology (IT).
- **\$14.8 million** for the Child Care and Development Fund to increase access to child care and to improve quality.
- **\$14.6 million** for the Communities Putting Prevention to Work Initiative for the Southern Nevada Health District in Clark County for tobacco prevention; and **\$1.2 million** for State programs targeting obesity and tobacco.
- **\$11.9 million** for Early Head Start and Head Start programs to expand and improve quality.
- **\$7.2 million** for health IT programs.
- **\$7.1 million** for scientific research and facilities, including:
 - **\$2.6 million** for research on sepsis pathology, organ damage, and dysfunction at Research and Diagnostic Antibodies.
 - **\$561,000** for research at the University of Nevada, Reno, on suicide prevention for college students.
- **\$5.3 million** for the Community Services Block Grant for community action agencies to reduce poverty and help low-income residents become self-sufficient.
- **\$995,000** for immunization programs.
- **\$846,000** for meals and nutrition services for the elderly.
- **\$758,000** through the Indian Health Service, including funds from the EPA, for sanitation facilities, medical equipment, maintenance, and improvement.
- **\$550,000** to support 11 National Health Service Corps clinicians providing primary health care services in Health Professional Shortage Areas.
- **\$376,000** for State efforts to fight healthcare-associated infections.
- **\$200,000** to support community programs that help seniors self-manage chronic diseases.

**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 \$63.5 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/>.*