



Office of Recovery Act Coordination

Department of Health and Human Services

Office of the Assistant Secretary for Financial Resources

Recovery Act:

South Dakota Highlights



Since the enactment of the Recovery Act in 2009, the U.S. Department of Health and Human Services has made **\$319.8 million in stimulus funds available in the State of South Dakota*** 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:

- **\$148.6 million** for the increased Federal share (FMAP) of State Medicaid costs.
- **\$102.6 million** through the Indian Health Service, including EPA funds, for health care and sanitation facilities construction, maintenance and improvements, equipment, and health information technology (IT), including:
 - **\$84.5 million** to complete construction of a health facility at Eagle Butte.
- **\$14.4 million** for health IT, including:
 - **\$6.1 million** to the South Dakota Department of Health to facilitate health information exchange.
- **\$7.3 million** for the Child Care and Development Fund to increase access to child care and improve quality.
- **\$6.9 million** for Temporary Assistance for Needy Families (TANF), including **\$3 million** for subsidized jobs programs.
- **\$6.5 million** for Early Head Start and Head Start programs to expand services and improve quality.
- **\$6.5 million** for Community Health Center services, construction, renovation, equipment, and health IT, including:
 - **\$1.6 million** for Rapid City's Community Health Center of Black Hills for a new service site, construction, equipment, and increased demand for services.
- **\$5 million** for scientific research, facilities, and equipment, including:
 - **\$1.1 million** to the University of South Dakota to study self-control and alcohol problems.
- **\$5 million** for a Community Services Block Grant for community action agencies to reduce poverty and help low-income residents become self-sufficient.
- **\$1.2 million** to support 27 National Health Service Corps clinicians providing primary health care in Health Professional Shortage areas.
- **\$1 million** to help strengthen community nonprofit groups.
- **\$839,000** for the Communities Putting Prevention to Work initiative for State programs targeting obesity and tobacco use.
- **\$591,000** for meals and nutrition services for the elderly at home and in community settings.

**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 \$26.8 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/>.*