



Office of Recovery Act Coordination

Department of Health and Human Services

Office of the Assistant Secretary for Financial Resources

Recovery Act:

Virginia Highlights

Since the enactment of the Recovery Act in 2009, the U.S. Department of Health and Human Services has made **\$2.4 billion in stimulus funds available in the Commonwealth of Virginia*** 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:

- **\$1.8 billion** for the increased Federal share (FMAP) of State Medicaid costs.
- **\$228.7 million** for scientific research, equipment, and facilities.
- **\$165.1 million** for health information technology (IT), including:
 - **\$16.3 million** to Tidewater Community College, Norfolk, to create health IT training programs.
 - **\$6 million** to Northern Virginia Community College, Annandale, to develop a competency examination program to evaluate health IT trainee knowledge and skills acquired through non-degree training programs.
- **\$37.9 million** for the Child Care and Development Fund to increase access to child care and improve quality.
- **\$36.6 million** for Early Head Start and Head Start programs to expand and improve quality.
- **\$31.8 million** for Temporary Assistance for Needy Families (TANF), including **\$1.9 million** for subsidized employment programs.
- **\$31.6 million** for Community Health Center services, construction, renovation, equipment, and health IT, including:
 - **\$488,000** to Kumba Community Health and Wellness Center in Roanoke for increased demand for services, construction, and equipment.
- **\$20.2 million** through the Indian Health Service, including EPA funds, for health care and sanitation facilities construction, maintenance and improvements, equipment, and health IT.
- **\$16.3 million** for the Community Services Block Grant for community action agencies to reduce poverty and help low-income residents become self-sufficient.
- **\$6.2 million** for immunization programs.
- **\$3.2 million** to support 69 National Health Service Corps clinicians providing primary health care in Health Professional Shortage Areas.
- **\$2.3 million** for meals and nutrition services for the elderly.
- **\$2 million** for the Communities Putting Prevention to Work for State programs targeting obesity and tobacco use and **\$1 million** to help seniors better manage their 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 \$275.5 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/>.*