| GrantName   | CFDA   | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants  | Grant Amount   | Cost<br>Sharing<br>Matching   | Apply<br>Yes No                  |                    | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
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| Workforce<br>Grants   |        |   |                 |                    |  |  |   |                                  |                    |                    |                       |                               |  |
| Affordable Care Act: State Health Care Workforce Planning Grants                    | 93.509 | The State Health Care Workforce Development Grant program authorizes the Secretary of Health and Human Services (HHS), acting through the Administrator of the Health Resources and Service Administration (HRSA), to administer planning and implementation grants for the purposes of enabling State partnerships (1) to complete comprehensive health care workforce development planning and (2) to implement those plans or carry out activities as defined by the State application in order to address current and projected workforce demands within the State. | 6/17/10         |                    | Planning Grant Eligibility To be eligible to receive a planning grant, an applicant must be an eligible State partnership. Generally, an eligible partnership will be a State Workforce Investment Board | Grant total with   | Ratio<br>(Federal:N   | YES<br>DOL/D<br>WS               | DOH<br>and<br>NMHR | 7/19/2010          | 9/24/2010             | \$150,000                     | https://grants.hrsa.go<br>y/webExternal/Fundin<br>gOppDetails.asp?Fun<br>dingCycleld=70332C<br>9D-C405-4199-BFE2-<br>78FBF3C52CD3&Vie<br>wMode=EU&GoBack<br>=&PrintMode=&Onlin<br>eAvailabilityFlag=&pa<br>geNumber=&version=<br>&NC=&Popup= |
| Affordable Care Act State Health Care Workforce Development Implementatio n Grants: | 93.509 | The State Health Care Workforce Development Grant program authorizes the Secretary of Health and Human Services (HHS), acting through the Administrator of the Health Resources and Service Administration (HRSA), to administer planning and implementation grants for the purposes of enabling State partnerships (1) to complete comprehensive health care workforce development planning and (2) to implement those plans or carry out activities as defined by the State application in order to address current and projected workforce demands within the State. | 6/17/10         | 7/19/10            | To be eligible to receive a planning grant, an applicant must be an eligible State partnership. Generally, an eligible partnership will be a State Workforce Investment Board                            | \$3,000,000<br>Grant total with<br>only one grant<br>given | Yes<br>Cost<br>Sharing<br>Ratio<br>(Federal:N<br>on-<br>Federal):<br>25:1 | None<br>known<br>at this<br>time |                    |                    |                       |                               | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=s9J1MfNQ<br>bT3kffnJF3G04GGp1<br>LL9l0wvvFFxZHK5yy<br>Y3nTDv3j1g!-<br>2026516818?oppld=5<br>5288&mode=VIEW   |

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| GrantName   | CFDA   | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants  | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No                   | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
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| Care Act Primary Care Residency Expansion (PCRE) Program                          |        | Title VII, Section 747, of the Public Health Service Act supports projects that improve the nation's access to well trained primary care physicians by supporting primary care residency training. The Primary Care Residency Expansion Program is aimed at increasing the number of residents trained in primary care specialty - family medicine, general internal and general pediatric medicine. Funding may only be used to increase the enrollment in an accredited primary care residency program through resident stipend support. Eligible applicants include public or nonprofit private hospitals, schools of medicine or osteopathic medicine or osteopathic medicine or a public or private nonprofit entity of which the Secretary has determined is capable of carrying out such grants. Applicants may request support for only one residency program/discipline per application. | 6/17/10         |                    | Public or nonprofit private hospitals, schools of medicine or osteopathic medicine, or a public or private nonprofit. Must be Accredited                                 | \$168,000,000<br>with 105<br>expected<br>awards          | None                        | YES<br>UNM-<br>HSC<br>Others<br>? |              |                    |                       |                               | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=wN5mMf0<br>ThHzkPyLzDyDCBkN<br>BTRWBzCQnd0zs2Z<br>mY9QG2PG7R91SpI-<br>491952003?oppId=55<br>287&mode=VIEW |
| Affordable<br>Care Act<br>Advanced<br>Nursing<br>Education<br>Expansion<br>(ANEE) | 93.513 | The Advanced Nurse Education Expansion initiative's two purposes are to increase the number of students enrolled full time in accredited primary care Nurse Practitioner and Nurse Midwifery programs and to accelerate the graduation of part time students.   | 6/17/10         |                    | Eligible applicants are collegiate schools of nursing, academic health centers, and other private or public entities accredited by a national nursing accrediting agency | \$30,000,000<br>total with<br>approximately<br>40 awards | None                        | YES<br>UNM-<br>HSC                | None         | Unknown            | 8/5/2010              | \$38,333                      | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=hDHtMfCJf<br>hvK2ylCkvjg1QBFQG<br>KXjDT2Ws8HDQvFZ<br>DyYJdlPSBGZ!-<br>491952003?oppld=55<br>280&mode=VIEW |

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| GrantName  | CFDA   | Grant Description  | Release<br>Date | Application<br>Due | Eligible Applicants  | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No                         |      | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
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| Nurse<br>Education,<br>Practice,<br>Quality and<br>Retention | N/A    | supports 108 infrastructure grants to expand the capacity of the nursing pipeline, promote career mobility for individuals in nursing, prepare more nurses at the baccalaureate level, and provide continuing education training to enhance the quality of patient care.   | N/A             |                    | by a national nursing  | Total of<br>\$29,900,000<br>with varible<br>awards. There<br>are 108<br>infrastructure<br>grants | None                        | Yes-<br>UNM-<br>HSC                     | None | Unknown            | 8/5/2010              | \$406,078                     | <u>N/A</u>  |
| Nurse<br>Education,<br>Practice,<br>Quality and<br>Retention | N/A    | supports 108 infrastructure grants to expand the capacity of the nursing pipeline, promote career mobility for individuals in nursing, prepare more nurses at the baccalaureate level, and provide continuing education training to enhance the quality of patient care.   | N/A             |                    | by a national nursing  | Total of<br>\$29,900,000<br>with varible<br>awards. There<br>are 108<br>infrastructure<br>grants |                             | Yes<br>Wester<br>n NM<br>Univers<br>ity | None | Unknown            | 8/5/2010              | \$249,740                     | N/A   |
| Advanced<br>Education<br>Nursing<br>Traineeship              | 93.358 | Grants are awarded to eligible institutions to provide financial support through traineeships for registered nurses enrolled in advanced education nursing programs to prepare nurse practitioners, clinical nurse specialists, nurse-midwives, nurse anesthetists, nurse administrators, nurse educators, public health nurses and nurses in other specialities requiring advanced education. | 12/1/10         |                    | Eligible applicants are collegiate schools of nursing, academic health centers, and other private or public entities accredited by a national nursing accrediting agency | A total of<br>\$16,000,000<br>with a total of<br>350 awards                                      | None                        | None<br>known<br>at this<br>time        |      |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=JsZCM31dBy<br>YJ64krGTfD7HpQCM<br>1SHkCrD1xY19Srgg<br>TpY7Fk5J0z!-<br>243159580?mode=VI<br>EWREVISIONS&rev<br>Num=2 |

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| GrantName  | CFDA   | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants  | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No    | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
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| Affordable Care Act Expansion of Physician Assistant Training Program (EPAT) | 93.514 | As the need for primary care is growing due to the expansion of the health care coverage by the Affordable Care Act, the Expansion of Physician Assistants Training (EPAT) will help meet this need by improving the access to primary care services through increased supply of primary care physician assistants. The program purpose is to increase student enrollment in primary care physician assistant programs and graduates planning to practice primary care specialties. Eligible entities are public or private academically affiliated physician assistant training programs that have as their objective the education of individuals who, upon completion of their studies in the program, will be qualified to provide primary care medical services with the supervision of a physician. | 6/17/10         | 7/19/10            | Eligible entities are public or private academically affiliated physician assistant training programs that have as their objective the education of individuals. Mainly Primary Care | with 40 awards | None                        | Yes<br>UNM-<br>HSC | None         | Unknown            | 9/28/2010             | \$204,239                     | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=JmDCMf3<br>K21QJVw5zgSHTmG<br>qyQVqNc2HvysBmQ<br>XTxGnG7DDRpW44<br>8!-<br>491952003?oppld=55<br>283&mode=VIEW |

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| GrantName  | CFDA   | Grant Description  | Release<br>Date | Application<br>Due | Eligible Applicants   | Grant Amount                                  | Cost<br>Sharing<br>Matching | Apply<br>Yes No                   | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
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| Affordable Care Act (ACA) Nurse Managed Health Clinics | 93.515 | The purpose of this initiative will be to provide federal funding to support the development and operation of Nurse-Managed Health Clinics (NMHC) to: 1) improve access to primary health care, disease prevention and health promotion in medically underserved areas (including enhancements of outreach strategies); 2) enhance nursing practice by increasing the number of structured clinical teaching sites for undergraduate and graduate nursing students; and 3) enhance electronic processes for establishing effective patient and workforce data collection systems. Under this program, the focus would support the training and practice development site for nurse practitioners to build the capacity of primary care provider workforce. |                 | 7/19/10            | Eligible applicants must be nurse-practice arrangements managed by advanced practice nurses, which provide primary care or wellness services to underserved or vulnerable populations, and have an association with a school, college, university | \$15,000,000<br>with 10<br>expected<br>awards | None                        | YES<br>UNM-<br>HSC<br>Others<br>? |              |                    |                       |                               | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=lp7BMfLXz<br>0QZQ8spfLZQkLGBj<br>pTvydmjT84XQH2Ny<br>cVIJJ8y5b1Z!-<br>2026516818?oppld=5<br>5281&mode=VIEW |

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| GrantName   | CFDA   | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants  | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No   | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
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| Health Profession Opportunity Grants for Tribes, Tribal Organizations or Tribal College or University | 93.093 | Cooperative agreements, awarded under this Funding Opportunity Announcement, will support demonstration projects that are designed to provide eligible individuals with the opportunity to obtain education and training for occupations in the health care field that pay well and are expected to either experience labor shortages or be in high demand. Eligible applicants are Indian Tribes, Tribal organizations, defined by Section 4 of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 450b), are eligible applicants under this announcement. Tribal Colleges or universities defined by Section 316(b) of the Higher Education Act of 1965, 20 U.S.C. 1059 c(b), are eligible under this announcement. Applicants are required to consult with, and implement their projects in coordination with, the entities identified in Section 2008(a)(2)(B) of the Social Security Act. | 6/21/10         |                    | The only eligible applicants are Indian Tribes, tribal organizations, and Tribal Colleges and Universities | \$7,500,000 with an award ceiling of \$5,000,000 and an award floor of \$1,000,000. With a total of 3 awards expected. | None                        | ** It is unkno wn if anyone applied for this grant. There was no respon se from UNM and IAD did not know of any entities. |              |                    |                       |                               | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=0JKhMhrf2<br>31TMZkwkWSB61k2<br>9ITNhg0kyYp4MyWq<br>khl0jy9GnhyP!138685<br>8017?oppId=55371&<br>mode=VIEW |

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| GrantName   | CFDA   | Grant Description  | Release<br>Date | Application<br>Due | Eligible Applicants   | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No   | Partner<br>s   | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
|---|--------|--|-----------------|--------------------|---|--|-----------------------------|---|--|--------------------|-----------------------|-------------------------------|---|
| Health Profession Opportunity Grants to Serve TANF Recipients and Other Low- Income Individuals | 93.093 | Office of Family Assistance is announcing the solicitation of applications to competitively award cooperative agreements for demonstration projects that support the establishment and maintenance of training, education, and career advancement programs to address health care professions workforce needs. [Section 2008 of the Social Security Act as enacted by Section 5507 of the Patient Protection and Affordable Care Act Cooperative agreements, awarded under this Funding Opportunity Announcement, will support demonstration projects that are designed to provide eligible individuals with the opportunity to obtain education and training for occupations in the health care field that pay well and are expected to either experience labor shortages or be in high demand. Individuals who are eligible to participate in funded | 6/21/10         |                    | Commonwealth of Puerto<br>Rico, the United States<br>Virgin Islands, Guam, and<br>American Samoa. Local<br>Workforce Investment | \$51,000,000<br>total for grants.<br>Award ceiling is<br>\$5,000,000<br>with award<br>floor of<br>\$1,000,000. A<br>total of 17<br>awards will be<br>released. | None                        | Yes<br>HSD/A<br>LTSD<br>NMSU<br>has<br>also<br>applied<br>for this<br>grant | NM<br>Direct<br>Caregiv<br>ers,<br>Golden<br>Mentor<br>s |                    |                       |                               | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=0JKhMhrf2<br>31TMZkwkWSB61k2<br>9ITNhg0kyYp4MyWq<br>khl0jy9GnhyP!138685<br>8017?oppId=55372&<br>mode=VIEW |

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| GrantName  | CFDA   | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants  | Grant Amount  | Cost<br>Sharing<br>Matching | Apply<br>Yes No   | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
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| Affordable Care Act (ACA) Nursing Assistant and Home Health Aide Program | 93.503 | The purpose of the Nursing Assistant and Home Health Aide (NAHHA) program is to provide infrastructure support for the development, evaluation, and demonstration of a competency based uniform-curriculum to train qualified nursing assistants and home health aides. The NAHHA program will strengthen the direct care workforce by providing nursing assistants and home health aides with the necessary skills that can be transportable to any job market in the nation. Grants will be made to state-approved community colleges or community-based training programs for the development, evaluation and demonstration of training programs for nursing home aides and home health aides on-campus, at alternative sites, and through telehealth methodologies. | 6/18/10         | 7/22/10            | State-approved community colleges or community-based training programs | \$2,500,000 with an award ceiling of \$250,000 with 10 awards | None                        | **It is<br>unkno<br>w of<br>any<br>nursing<br>assista<br>nt<br>progra<br>m<br>applied<br>for this<br>grant. |              |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=CVm1MfyC9<br>sJLwjYv12vn7nfn5nY<br>hcZhWXdL92CdJfsG<br>6TGY9YRL6!-<br>491952003?oppId=55<br>338&mode=VIEW |

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| GrantName   | CFDA   | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants           | Grant Amount                                   | Cost<br>Sharing<br>Matching | Apply<br>Yes No  | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
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| Affordable Care Act Personal and Home Care Aide State Training (PHCAST) Program | 93.512 | This announcement solicits agrant applications for the Personal and Home Care Aide Training (PHCAST) Program, a new demonstration grant program in collaboration with the Administration for Children and Famnilies (ACF) to establish a program to recruit low-income individuals and recipients of public assistance to train as qualified personal and home care aides. Grants may be awarded to the States (as defined in the funding opportunity announcement) to conduct demonstration projects for purposes of developing core training competencies and certification programs for personal or home care aides. It is expected that the training standards established under these State grants would be utilized as a "Gold Standard" for future training of personal and home care aides. | 6/17/10         | 7/19/10            | the District of Columbia, the | with an award<br>ceiling of<br>\$750,000 and a | None                        | **It is<br>unkno<br>wn of<br>any<br>nursing<br>assista<br>nt<br>progra<br>m<br>applied<br>for this<br>grant. |              |                    |                       |                               | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=fj9MMfTJn<br>23l1Nnhp1PWZ5G5k<br>TkCkBTIL7nf7fLGCw<br>KXF6nTWHsY!-<br>2026516818?oppld=5<br>5289&mode=VIEW |

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| GrantName   | CFDA   | Grant Description  | Release<br>Date | Application<br>Due | Eligible Applicants  | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No                |      | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
|---|--------|--|-----------------|--------------------|--|--|-----------------------------|--------------------------------|------|--------------------|-----------------------|-------------------------------|--|
| Affordable Care Act (ACA) Teaching Health Center (THC) Graduate Medical Education (GME) Payment Program | 93.530 | To provide graduate medical education payments to support community-based training. Teaching Health Center Graduate Medical Education payments will cover the costs of new residency programs in community-based ambulatory primary care settings such as health centers. Payments will be maed for direct expenses and for indirect expenses to qualified teaching health centers that are listed as sponsoring institutions by the revelant accrediting body for expansion of existing, or establishing of new approved, graduate medical residency training programs. | 11/29/10        |                    | Eligible entities include community-based ambulatory patient care centers that operate a primary care residency program.   | \$230,000,000<br>with<br>approximately<br>10 awards            | None                        | Unkno<br>wn at<br>this<br>time | None |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=1Mp9M1GTp<br>ssQQqyh1kxkYc8j80<br>pR2DdbshMYrLhlLNp<br>h6MvQC5Jq!7323555<br>40?oppld=58913&mo<br>de=VIEW |
| Affordable Care Act (ACA) Nurse Education, Practice, Quality and Retention (NEPQR) Program              | 93.359 | Grants are awarded to eligible institutions for projects to strengthen and enhance the capacity for nurse education, practice and retention to address the nursing shortage. There are 9 focuses listed in the original RFP.   | 12/6/10         |                    | Eligible applicants are accredited schools of nursing, health care facilities, or a partnership of such a school and facility. The term 'health care facility' means an Indian Health Service health center, a Native Hawaiian health center, a hospital, a Federally qualified health center, a rural health clinic, a nursing home, a home health agency, a hospice program, a public health clinic, a State or local department of public health, a skilled nursing facility, an ambulatory surgical center | A total of<br>\$10,310,909 is<br>anticipated with<br>36 awards | None                        |                                |      |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=pPM2M1jLn1<br>srxhpmHmVly7YPbnc<br>gvYwL8s8Fbpn5KQnj<br>HtQCLMbs!-<br>23762818?oppId=590<br>20&mode=VIEW |

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| GrantName  | CFDA   | Grant Description   | Release<br>Date | Application Due | Eligible Applicants   | Grant Amount   | Cost<br>Sharing<br>Matching   | Apply<br>Yes No | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
|--|--------|---|-----------------|-----------------|---|--|---|-----------------|--------------------|-----------------------|-------------------------------|---|
| Nursing<br>Workforce<br>Diversity  |        | This announcement solicits grant applications for the Nursing Workforce Diversity (NWD) Program. Grants are awarded to eligible applicants to increase nursing education opportunities for individuals who are from disadvantaged backgrounds, including racial and ethnic minorities underrepresented among registered nurses, through projects that incorporate retention, pre-entry preparation, and student scholarships and/or stipends. | 12/6/10         |                 | Eligible applicants are schools of nursing, nursing centers, academic health centers, State or local governments, tribes and tribal organizations and other private or public entities  | There is a total of \$3,564,385 with 11 awards expected.           | None  |                 |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=g7H0M1pJL<br>Mbq0rFM71DJbLDvR<br>vnKDP6y0g9J7QhSB<br>H7G30GVKfBb!1838<br>295238?oppId=59027<br>&mode=VIEW |
| Area Health Education Centers Point of Service Maintenance and Enhancement | 97.107 | The Area Health Education Center (AHEC) programs consist of interdisciplinary, community-based, primary care training programs wherein academic and community-based leaders work to improve the distribution, diversity, supply, and quality of health care personnel, particularly primary care personnel in the health care services delivery system and more specifically in delivery sites in rural and other underserved areas.          | 4/22/11         | 0/10/11         | Eligible Applicants: State controlled institutions of higher education, Native American tribal organizations (other than Federally recognized tribal governments), Nonprofits having a 501 (C)(3) status with IRS, other than institutions of higher education, Private institutions of higher education                                | There will be<br>\$6,500,000<br>with<br>approximately<br>19 awards | Yes Cost<br>Sharing<br>Ratio<br>(Federal:N<br>on-<br>Federal):<br>1:1 |                 |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=mQJzN11RY<br>f98vpPyRdYT8RSxk9<br>Kf8hWTkVc3Llz3hDX<br>JhZv1f82w!77396116<br>4?oppId=89393&mod<br>e=VIEW  |
| Area Health Education Centers Infrastructure Development                   |        | The Area Health Education Center (AHEC) programs consist of interdisciplinary, community-based, primary care training programs wherein academic and community-based leaders work to improve the distribution, diversity, supply, and quality of health care personnel, particularly primary care personnel in the health care services delivery system and more specifically in delivery sites in rural and other underserved areas.          | 4/22/11         | 5,15,11         | Eligible Applicants: State controlled institutions of higher education, Native American tribal organizations (other than Federally recognized tribal governments), Nonprofits having a 501 (C)(3) status with IRS, other than institutions of higher education, Private institutions of higher education. Nursing schools are eligible. | There will be<br>\$5,000,000<br>with<br>approximately<br>5 awards  | Yes Cost<br>Sharing<br>Ratio<br>(Federal:N<br>on-<br>Federal):<br>1:1 |                 |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=mQJzN11RY<br>f98vpPyRdYT8RSxk9<br>Kf8hWTkVc3Llz3hDX<br>JhZv1f82w!77396116<br>4?oppId=89373&mod<br>e=VIEW  |

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| GrantName   | CFDA   | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants   | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No                       | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
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| Start of<br>Insurance<br>HCR Grants   |        |   |                 |                    |   |  |                             |                                       |              |                    |                       |                               |   |
| "Grants to States for Health Insurance Premium Review-Cycle I" Office of Consumer Information and Insurance Oversight (OCIIO) | 93.511 | Key components of this oversight require insurers to report certain health insurance rate information to both the Secretary and the States in which they operate, including:1. All increases in rates for health insurance over the prior year that meet the established unreasonable threshold (currently under development);2. Justifications for unreasonable increases in rates prior to their implementation. Public disclosure of this information and insurers will be required to prominently post the information on their respective Internet websites. Section 2794 also provides for a program of grants to states to help them improve the health insurance rate review and reporting process. Congress has appropriated \$250 million for this grant program for the federal fiscal years (FFYs) of 2010-2014. HHS is authorized to award this money during multiple award cycles to eligible States beginning in FFY 2010. Federal regulatory guidance is currently under development to establish | 6/7/10          | 7/7/10             | State governments   | approximately<br>51 awards with<br>\$1,000,000<br>award ceiling. | required to provide         | PRC/In<br>suranc<br>e<br>Divisio<br>n | None         | 7/7/2010           | 8/16/2010             | \$1,000,000                   | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=NDgpMhn<br>SXgmt7BBMQmFHz1<br>sy46kY7wl22P09N1h<br>2cGTQCcCL2hyF!13<br>86858017?oppld=550<br>29&mode=VIEW |
| Early Retiree<br>Reinsurance<br>Program   | NA     | The Early Retiree Reinsurance Program will reimburse employers for medical claims for retirees age 55 and older who are not eligible for Medicare and their spouses, surviving spouses and ependents. Employers who provide health coverage for early retirees are eligible to apply. Program participants will be able to submit claims for medical care back to June 1, 2010. This program is intended as bridge coverage until insurance exhanges become operational in 2014.  | 6/29/10         |                    | businesses, unions, state<br>and local governments who<br>provide health insurance for<br>early retirment |  |                             | Yes<br>NMRH<br>CA                     |              |                    | 9/16/2010             |                               | www.hhs.gov/ociio/re<br>gulations/index.html  |

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| Affordable Care Act Medicare Beneficiary Outreach and Assistance Program Funding for Title VI Native American Programs | 93.071 | AoA will provide a grant of \$1,000 to each Older Americans Act Title VI Native American program. The purpose of these grants will be for the coordination of at least one community announcement and at least one outreach event to inform eligible Native American elders about the benefits available to them through Medicare Part D, the Low Income Subsidy, the Medicare Savings Program or Medicare prevention benefits and screenings. The example of \$1000 per event is for illustrative purposes only. There is data available from the National Association of Area Agencies on Aging (n4a) and studies performed by the National Council on Aging (NCOA) that reflect these costs for planning and implementing a community event for Medicare Part D and LIS outreach activities. | 6/7/10          |                    | Only current Title VI Native American Program awardees are eligible to apply for this funding opportunity. | \$246,000 with<br>an expected<br>246 grants to<br>be awarded   |                             | None<br>known<br>at this<br>time |   |                    |                       |                               | http://www.grants.gov<br>/search/search.do?m<br>ode=VIEW&oppId=55<br>023  |
| Affordable Care Act (ACA) - Consumer Assistance Program Grants   | 93.519 | These are grants to States to assist consumers with filing complaints and appeals, assist consumers with enrollment into health coverage, and educate consumers on their rights and responsibilities. In addition, by law they will collect data on consumer inquires and complaints to help the Secretary identify problems in the marketplace and strengthen enforcement. Starting in 2014, programs must also help resolve problems with premium credits for Exchange coverage.  | 7/22/10         | 9/10/10            | State governments  | \$29,000,000<br>total with a<br>ceiling of<br>\$3,400,000 and<br>floor \$120,00 a<br>total of 56<br>awards |                             | OI                               | SW Women 's Law Center and the AG's Office of Consu mer Protecti on | 9/10/2010          | 10/19/2010            | \$226,426                     | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=THbqMLpZyh<br>IYTWQSSWn0cxYyX<br>wN2xdpsFTptWtXfdP<br>OxVJnM1Prh!-<br>832749192?oppId=56<br>058&mode=VIEW |

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| GrantName  | CFDA | Grant Description  | Release<br>Date | Application<br>Due | Eligible Applicants | Grant Amount                                  | Cost<br>Sharing<br>Matching | Apply<br>Yes No                                 | Partner<br>s                               | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded  | Webpage   |
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| Money Follows the Person Rebalancing Grant Demonstration Patient Protection and Affordable Healthcare Act Section 2403 |      | Building and strengthening their MFP Demonstration Programs and for additional States to participate. The law amends section 6071 of the DRA to make the following changes: 1) Extends the MFP Demonstration Program through September 30, 2016, and appropriates an additional \$450 million for each FY 2012-2016, totaling an additional \$2.25 billion. Any remaining MFP appropriation at the end of each FY carries over to subsequent FYs and is available to make grant awards to current and new grantees until FY 2016. Grant awards shall be made available to the State for the FY in which the award was received and for additional FYs. As such, any unused portion of a State grant award made in 2016 would be available to the State until 2020. Under the Affordable Care Act, individuals that reside in an institution for more than 90 consecutive days are now eligible to participate in the demonstration. However, one exception applies in the expanded definition of | 7/23/10         | 1/7/11             |                     | \$22,500,000<br>total funds with<br>20 awards | None                        | Yes<br>HSD<br>will<br>submit<br>applicat<br>ion | HSD with collabor ation with ALTSD and DOH | Unknown            |                       | the first year<br>with<br>additional<br>\$23,724,360<br>committed<br>thru 2016 | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=drc5MJ5K1Y<br>5QWQfmvQ80vLZkv<br>292cYhrTjv9RLjXv4b<br>byl6CYv2b!-<br>169038256?oppId=56<br>091&mode=VIEW |

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| State Planning and Establishment Grants for the Affordable Care Act's Exchanges |      | Section 1311 of the Affordable Care Act provides funding assistance to the States for the planning and establishment of American Health Benefit Exchanges (?Exchanges?). The Affordable Care Act provides that each State may elect to establish an Exchange that would: 1) facilitate the purchase of qualified health plans; 2) provide for the establishment of a Small Business Health Options Program (?SHOP Exchange?) designed to assist qualified employers in facilitating the enrollment of their employees in QHPs offered in the SHOP exchange; and 3) meet other requirements specified in the Act. The funding awarded pursuant to this Funding Opportunity Announcement is intended to assist States with initial planning activities related to the potential implementation of the Exchanges. Grants will be awarded in amounts up to a | 7/29/10         | 9/1/10             | State Governments   | Total of<br>\$51,000,000<br>with a ceiling of<br>\$1,000,000. 51<br>Awards are<br>Anticipated | None                        | Yes<br>HSD      |              | 9/1/2010           | 9/30/2010             | \$1,000,000                   | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=yFPDMR6Bh<br>Z1nWvWdFffh4ZlPxh<br>6Jc2znhwj8628sQk9<br>8jht0PlK1!108769964<br>3?oppld=56204&mod<br>e=VIEW |

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| GrantName  | CFDA | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants | Grant Amount  | Cost<br>Sharing<br>Matching | Apply<br>Yes No                  | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
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| Limited Competition for State Planning and Establishment Grants for the Affordable Care Acts Exchanges |      | Is intended to assist states with initial planning activities related to the potential implementation of the Exchanges. | 1/19/11         | 2/18/11            |                     | \$2,000,000<br>total funding for<br>2 anticipated<br>awards | None                        | None<br>known<br>at this<br>time | N/A          | N/A                | N/A                   | N/A                           | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=bvSnN5mD9<br>JQpGdCf0HqBBsLHy<br>Lyfhd3SYTJ6tLfjhLk0<br>LgznT2XC!15526385<br>00?oppId=65413&mo<br>de=VIEW |

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| GrantName CF  | FDA | Grant Description  | Release<br>Date | Application<br>Due | Eligible Applicants | Grant Amount  | Cost<br>Sharing<br>Matching | Apply<br>Yes No                          | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
|---|-----|--|-----------------|--------------------|---------------------|---|-----------------------------|--|--------------|--------------------|-----------------------|-------------------------------|---|
| Planning 93 Grant: The Money Follows the Person Rebalancing Demonstration Program |     | On July 26, 2010, the Centers for Medicare & Medicaid Services (CMS) issued a new grant solicitation to encourage states not yet part of the Money Follows the Person Rebalancing (MFP) Demonstration to apply for grant funds. The Affordable Care Act included an extension of the MFP demonstration program for an additional 5 years (the funding was scheduled to expire at the end of FY 2011). The extension of the MFP Demonstration Program through 2016 offers States substantial resources and additional program flexibilities to remove barriers and improve people?s access to community supports and independent living arrangements. | 8/3/10          | 9/7/10             | State Governments   | 5-20 awards to<br>states. Grant<br>maximum will<br>be \$200,000 |                             | HSD<br>will<br>submit<br>applicat<br>ion |              |                    |                       |                               | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=DrTrMZFJ<br>4ZnLwnt4SsjLylK1xZ<br>c0ysbnyq9PpSyQtHL<br>qT2qFX34X!-<br>357751914?oppId=56<br>311&mode=VIEW |

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| GrantName   | CFDA | Grant Description  | Release<br>Date | Application<br>Due                      | Eligible Applicants  | Grant Amount  | Cost<br>Sharing<br>Matching | Apply<br>Yes No   | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
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| Grants to States for Health Insurance Premium Review - Cycle I  |      | Provide awards to states to enhance their current rate review process for health insurance premiums. States will be required to either develop or enhance their current capcity to review and to the extent permitted by law, approve or deny rate increases in the individual and group markets. States will be required to provide the HHS Secretaru with information about rate trends in health insurance coverage and may utilize grant funds to develop procedures and/or the infrastructure to enable them to report in the future.   | 9/1/10          |   | Five US territories and the 5 states that did not previously apply - Departments of Insurance or state entity with primary statutory and regulatory authority for the regulation of private health insurance;  New Mexico received grant under original announcement of 6/7/10 | \$1,000,000   | None                        | NM<br>Insuran<br>ce<br>division<br>receive<br>d grant<br>from<br>original<br>announ<br>cement | 7/7/2010           | 8/16/2010             | \$0                           | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=hJIZM1yHz<br>rGKGqzXt3ylHcc1Zn<br>p5YByyrJ2Zdf2Zg4S<br>GM4DyTRHh!970355<br>26?oppld=57031&mo<br>de=VIEW |
| Children's Health Insurance Program Reauthorizat ion Act (CHIPRA) Outreach and Enrollment Grants - Cycle II |      | CHIPRA reauthorizes and fully funds the Children?s Health Insurance Program (CHIP) through Federal fiscal year (FFY) 2013. The Affordable Care Act further extended the CHIP program through 2019 and authorized funding through 2015. CHIPRA provided a total of \$100 million devoted to outreach and enrollment activities, with \$80 million to be provided in grant funds to States, local governments, community-based and nonprofit organizations, and others, and \$10 million in grant funds exclusively for Indian health providers, and Tribal entities. The remaining \$10 million is devoted to a national enrollment campaign. | 2/3/11          | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | States, local governments, community-based and nonprofit organizations, and others, and \$10 million in grant funds exclusively for Indian health providers, and Tribal entities.  | \$40,000,000<br>total grant.<br>Unknown<br>number of<br>awards.<br>Ceiling is<br>\$2,500,000 and<br>floor of<br>\$200,000 | None                        | None<br>at this<br>time   |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=vJV5NLQKD<br>y1XKC0WzDvCcLR<br>W2MdMZ2QKZGPvB<br>2gTM1PyGF4c94Lk!3<br>75102673?oppId=681<br>33&mode=VIEW  |
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| GrantName  | CFDA   | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No                                   | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
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| Start of MCH<br>Grants   |        |   |                 |                    |                     |  |                             |   |              |                    |                       |                               |  |
| Affordable Care Act (ACA) Maternal, Infant and Early Childhood Home Visiting Program | 93.505 | The Maternal, Infant, and Early Childhood Home Visiting Program is designed: (1) to strengthen and improve the programs and activities carried out under Title V; (2) to improve coordination of services for at risk communities; and (3) to identify and provide evidence-based home visiting programs to improve outcomes for families who reside in at risk communities. At-risk communities will be identified through a statewide assessment of needs and of existing resources to meet those needs. HRSA and the Administration for Children and Families (ACF) intend that the home visiting program will result in a coordinated system of early childhood home visiting in every State that has the capacity and commitment to provide infrastructure and supports to assure high-quality, evidence-based practice. | 6/10/10         | 7/9/10             | State Governments   | \$90,000,000 with 56 total grant awards of various amounts |                             | CYFD<br>Reque<br>sted<br>Amoun<br>t:\$951,<br>952 | DOH          | 7/9/2010           | 7/21/2010             | \$951,952                     | https://grants.hrsa.go<br>y/webExternal/Fundin<br>gOppDetails.asp?Fun<br>dingCycleld=E24F38<br>4A-7290-49D0-A393-<br>EED7F542B618&Vie<br>wMode=EU&GoBack<br>=&PrintMode=&Onlin<br>eAvailabilityFlag=&pa<br>geNumber=&version=<br>&NC=&Popup= |

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|--|--------|---|-----------------|--------------------|--|--|-----------------------------|--|--------------|--------------------|-----------------------|-------------------------------|---|
| Affordable Care Act (ACA) Tribal Maternal, Infant, and Early Childhood Home Visiting Grant Program | 93.508 | Funds will support 5-year demonstration grants (cooperative agreements) between ACF and Federally-recognized Indian Tribes (or a consortium of Indian Tribes), Tribal Organizations, or Urban Indian Organizations to conduct needs assessments; develop the infrastructure needed for the widespread planning, adoption, implementation, and sustainability of evidence-based maternal, infant, and early childhood home visiting programs; and provide high-quality, evidence-based home visiting services to pregnant women and families with young children aged birth to kindergarten entry. Home visiting programs are intended to promote outcomes such as improvements in maternal and prenatal health, infant health, and child health and development; reduced child maltreatment; improved parenting practices related to child development outcomes; improved school readiness; improved family socioeconomic status; improved coordination of referrals to community resources and supports; and reduced incidence | 6/25/10         | 7/26/2010          | Federally recognized tribal governments) | \$3,000,000 with an award ceiling of \$500,000 and award floor of \$100,000 with an award total of 15. | None                        | Native<br>Americ<br>an<br>Profess<br>ional<br>Parent<br>Resour<br>ces,<br>Inc. | None         | Unknown            | 9/29/2010             | \$330,000                     | https://www.cfda.gov/<br>?s=program&mode=f<br>orm&tab=step1&id=7<br>88d6ac24971c92c35<br>80fda2894431ba |

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| GrantName  | CFDA   | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants   | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No            | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
|--|--------|---|-----------------|--------------------|---|--|-----------------------------|----------------------------|--------------|--------------------|-----------------------|-------------------------------|---|
| Affordable Care Act (ACA) Tribal Maternal, Infant, and Early Childhood Home Visiting Grant Program | 93.508 | Funds will support 5-year demonstration grants (cooperative agreements) between ACF and Federally-recognized Indian Tribes (or a consortium of Indian Tribes), Tribal Organizations, or Urban Indian Organizations to conduct needs assessments; develop the infrastructure needed for the widespread planning, adoption, implementation, and sustainability of evidence-based maternal, infant, and early childhood home visiting programs; and provide high-quality, evidence-based home visiting services to pregnant women and families with young children aged birth to kindergarten entry. Home visiting programs are intended to promote outcomes such as improvements in maternal and prenatal health, infant health, and child health and development; reduced child maltreatment; improved parenting practices related to child development outcomes; improved school readiness; improved family socioeconomic status; improved coordination of referrals to community resources and supports; and reduced incidence | 6/25/10         | 7/26/2010          | recognized) Native American tribal organizations (other than Federally recognized tribal governments) | \$3,000,000 with an award ceiling of \$500,000 and award floor of \$100,000 with an award total of 15. | None                        | Pueblo<br>of San<br>Felipe | None         | Unknown            | 9/29/2010             | \$100,000                     | https://www.cfda.gov/<br>?s=program&mode=f<br>orm&tab=step1&id=7<br>88d6ac24971c92c35<br>80fda2894431ba |

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| GrantName  | CFDA   | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants  | Grant Amount   | Cost<br>Sharing<br>Matching   | Apply<br>Yes No                               |     | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
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| FY10 Support<br>for Pregnant<br>and Parenting<br>Teens and<br>Women FOA  |        | The Act appropriates \$25 million for each of fiscal years 2010 through 2019 and authorizes the Secretary of HHS, in collaboration and coordination with the Secretary of Education (as appropriate) to establish and administer a Pregnancy Assistance Fund for the purpose of awarding competitive grants to States to assist pregnant and parenting teens and women. Grants will not exceed three years (and funding for years 2-3 is subject to the availability of funds). OAH anticipates funding a broad range of projects both in the size and scope of activities. The authorized State representative must make application for grant funds available through this announcement to assist pregnant and parenting teens and women. A signed letter from the authorized State representative must accompany the application; it should include documentation establishing the authorized representative?s authority to apply for and administer the grant funds on behalf of the State. The application may be developed solely by the authorized representative or in consultation with other relevant State agencies such as state education, | 7/1/10          |                    | State governments Native American tribal governments (Federally recognized) Nonprofits having a 501(c)(3) status with the IRS, other than institutions of higher education                           | \$500,000 and a<br>total of 25<br>awards.                | Yes funding an amount from non- Federal funds equal to 25 percent of the amount of the funding provided |   | DOH | 8/2/2010           | 9/29/2010             |                               | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=tyKWMnN<br>NYjbjvygcVKX64Hpn<br>L5M79ZtynKtgqr7phN<br>t3HStRbH9W!404589<br>083?oppId=55579&m<br>ode=VIEW |
| Affordable Care Act (ACA) School- Based Health Centers Capital Program (This is a re-issue of a previous grant that was pulled at an earlier date) | 93.501 | The goal of the program is to award funds made available by the Patient Protection and Affordable Care Act that will support school-based health center efforts to expand capacity to provide primary healthcare services to school-aged children. (This is a re-issue of a previous grant that was pulled at an earlier date)  | 10/4/10         | 12/1/10            | Eligible organizations shall<br>be a school-based health<br>center or a sponsoring<br>facility of a school-based<br>health center: A school-<br>based health center is<br>defined as a health clinic | \$50,000,000<br>with an<br>expected 1000<br>awards total | None  | Current<br>ly<br>individu<br>al<br>SBHC'<br>s | DOH |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=sB7lMrzTwN<br>YROKvvy0LghTwnTL<br>21BLhhMvBDkmp1r2<br>mTbxpjhG0y!-<br>228465525?oppld=58<br>278&mode=VIEW  |

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| State Personal<br>Responsibility<br>Education<br>Program<br>(PREP) |      | The Patient Protection and Affordable Care Act, 2010 (Pub.L. 111-148) amends Title V of the Social Security Act (42 U.S.C. 701 et seq.) by adding section 513, Personal Responsibility Education. The Administration for Children and Families' (ACF) Family and Youth Services Bureau (FYSB) is accepting applications from States and Territories for the development and implementation of the Personal Responsibility Education Program (PREP). The purpose of this program is to educate youth between the ages of 10 and 19 on both abstinence and contraception for the prevention of pregnancy and sexually transmitted infections, including HIV/AIDS. | 7/30/10         | 8/30/10            |                     | Each state will<br>be awarded a<br>minimun of<br>\$250,000 |                              | DOH<br>Family<br>Plannin<br>g<br>Progra<br>m | DOH | 8/30/2010          | 9/30/2010             |                               | http://www.acf.hhs.go<br>v/grants/open/foa/vie<br>w/HHS-2010-ACF-<br>ACYF-PREP-0125 |
| Title V State Abstinence Education Grant Program                   |      | The Administration for Children and Families (ACF)/Family and Youth Services Bureau (FYSB) is accepting applications froms States and Territories for the development and implementation of the State Abstinence Education Grant Program also known as Title V. The purpose of this program is to support decisions to abstain from sexual activity until marriage by providing abstinence education as defined by Section 510(b)(2) of the Social Security Act with a focus on those groups that are most likely to bear children out-of-wedlock.  | 7/30/10         | 8/30/10            | State Governments   | Varible  | Will require a match of 43%. | No   |     |                    |                       |                               | http://www.acf.hhs.go<br>v/grants/open/foa/vie<br>w/HHS-2010-ACF-<br>ACYF-AEGP-0123 |

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| Family-to-<br>Family Health<br>Information<br>Centers in each<br>state and the<br>District of<br>Columbia   | N/A  | Created in 2005, the centers are state-wide, family-run organizations that provide information, education, training, outreach, and peer support to families of children and youth with special health care needs and the professionals who serve them. Funding for the centers was extended through 2012 by the Affordable Care Act. | N/A             |                    |                     | A total of<br>\$4,900,000 for<br>exisiting center<br>a total of 51<br>with variable<br>award amounts | None                        | Parent<br>s<br>Reachi<br>ng Out<br>to Help | None | Unknown            | 7/27/2010  |                               | N/A     |
| Implementing the Affordable Care Act: Making it Easier for Individuals to Navigate their Health and Long-Term Care through Person- Centered Systems of Information, Counseling and Access |      |  |                 |                    |                     |  |                             |  |      |                    |            |                               |         |

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|---|--------|--|-----------------|--------------------|---|---|-----------------------------|-------------------|--------------|--------------------|-----------------------|---|---|
| Option A Medicare Improvement for Patients and Providers Act (MIPPA) Affordable Care Act Medicare Beneficiary Outreach and Assistance Program Funding for Title VI Native American Programs | 93.071 | Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) was amended in Section 3306 to provide additional funding for Medicare outreach and enrollment activities. This legislation builds upon 2008 MIPPA legislation which provided for beneficiary outreach and included funding to State Health Insurance Assistance Programs (SHIPs), Area Agencies on Aging (AAAs) and Title VI Native American Programs, Aging and Disability Resource Center programs (ADRCs), and for a resource center to help coordinate efforts to inform older Americans about available Federal and State benefits available. | 6/7/10          | 7/30/10            | implement ADRCs through   | avaliable with a<br>total award of<br>\$1,000. A total<br>of 246 is<br>antcipated | None                        | Several<br>Tribes | N/A          | 7/30/2010          |                       | \$1,000 per<br>Tribe<br>(Pueblo de<br>Cochiti,<br>Pueblo of<br>Jemez,<br>Pueblo of<br>San Felipe,<br>Pueblo of<br>Taos,<br>Pueblo of<br>Zuni, San<br>Juan Pueblo,<br>Santa Clara<br>Pueblo,<br>Santo<br>Domingo<br>Pueblo<br>Tribe) | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=g3rmMQLc<br>hpxyVQ4YLG4SnLZJ<br>25I5H6mdy216VGjqX<br>xzqLLynzyTII-<br>228465525?oppId=55<br>023&mode=VIEW |
| Option A Medicare Improvement for Patients and Providers Act (MIPPA) Affordable Care Act Medicare Beneficiary Outreach and Assistance Program   | 93.071 | Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) was amended in Section 3306 to provide additional funding for Medicare outreach and enrollment activities. This legislation builds upon 2008 MIPPA legislation which provided for beneficiary outreach and included funding to State Health Insurance Assistance Programs (SHIPs), Area Agencies on Aging (AAAs), Aging and Disability Resource Center programs (ADRCs), and for a resource center to help coordinate efforts to inform older Americans about available Federal and State benefits available.                                       | N/A             | N/A                | State agency or instrument of a State from a State that: 1) received an award to implement ADRCs through the AoA(Formula Funding) |   | ALTSD                       |                   | N/A          | N/A                | N/A                   | \$371,358   | N/A   |

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| GrantName  | CFDA   | Grant Description  | Release<br>Date | Application<br>Due | Eligible Applicants   | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No          | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
|--|--------|--|-----------------|--------------------|---|--|-----------------------------|--------------------------|--------------|--------------------|-----------------------|-------------------------------|---|
| Options Counseling ADRC Options Counseling and Assistance Programs |        | To serve as visible and trusted sources of information on the full range of long-term care options that are available in the community, including both institutional and home and community-based care; to provide personalized and consumer friendly assistance to empower people to make informed decisions about their care options; to provide coordinated and streamlined access to all publicly supported long-term care options so that consumers can obtain the care they need through a single intake, assessment and eligibility determination process; to help people to plan ahead for their future long-term care needs; and to assist, in coordination with the State Health Insurance Assistance Program, Medicare beneficiaries in understanding and accessing the Prescription Drug Coverage and prevention health benefits available under the Medicare Modernization Act. |                 |                    | a State from a State that: 1) received<br>an award to implement ADRCs<br>through the AoA and CMS ADRC | total avaliable<br>with award<br>ceiling of<br>\$600,000 and<br>floor of | None                        | ALTSD                    | None         | 7/29/2010          | 9/27/2010             |                               | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=gx4WMQC<br>hpwsQS1tTx6Q1hF9<br>vJyBnTw0QhQ327kR<br>fTB9ZnyfqNTf3!-<br>228465525?oppId=54<br>948&mode=VIEW |
| Option C.<br>Money<br>Follows the<br>person (MFP)                  | 93.779 | No description at this time  | 6/3/10          | 7/30/10            |   |  |                             | NM is<br>not<br>eligible |              |                    |                       |                               |   |

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| GrantName   |        | Grant Description  | Release<br>Date | Eligible Applicants                  | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No         | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
|---|--------|--|-----------------|--------------------------------------|--|-----------------------------|-------------------------|--------------|--------------------|-----------------------|-------------------------------|---|
| Option D. Aging and Disability Resource Center Evidence- Based Care Transition Programs ADRC Evidence- Based Care Transition Programs | 93.048 | Under this Program Announcement, AoA is making funds available for states to significantly strengthen the role of ADRCs in implementing evidence-based care transition models that meaningfully engage older adults and individuals with disabilities (and their informal caregivers). | 6/3/10          | funded in fiscal years 2008 and 2009 | with an award<br>ceiling of<br>\$500,000 and<br>award floor of | None                        | None<br>at this<br>time |              |                    |                       |                               | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=2WdfMQG<br>dfZ41w1CkPYdf92rM<br>9NZh4HKxzQfG6Q1<br>mZNqgZh2LW1yb!-<br>228465525?oppId=54<br>947&mode=VIEW |
| Epidemiology<br>Grants  |        |  |                 |                                      |  |                             |                         |              |                    |                       |                               |   |

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| GrantName      | CFDA   | Grant Description              | Release<br>Date | Application<br>Due | Eligible Applicants       | Grant Amount     | Cost<br>Sharing<br>Matching | Apply<br>Yes No | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage               |
|----------------|--------|--------------------------------|-----------------|--------------------|---------------------------|------------------|-----------------------------|-----------------|--------------|--------------------|-----------------------|-------------------------------|-----------------------|
| EPIDEMIOLOGY   | 93.521 | The overall purpose of the     | 8/3/10          | 8/27/10            | Mainly State Governments. | A total of       | None                        | DOH             |              |                    |                       |                               | http://www07.grants.g |
| AND            |        | ELC cooperative agreement      |                 |                    | New Mexico is named in    | \$39,500,000 is  |                             | ERD             |              |                    |                       |                               | ov/search/search.do:i |
| LABORATORY     |        | program is to assist state     |                 |                    | the RFP                   | allocated with   |                             |                 |              |                    |                       |                               | sessionid=DrTrMZFJ    |
| CAPACITY FOR   |        | public health agencies improve |                 |                    |                           | variable award   |                             |                 |              |                    |                       |                               | 4ZnLwnt4SsjLylK1xZ    |
| INFECTIOUS     |        | surveillance for, and response |                 |                    |                           | amounts.         |                             |                 |              |                    |                       |                               | c0ysbnyq9PpSyQtHL     |
| DISEASES       |        | to, infectious diseases and    |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
| (ELC) BUILDING |        | other public health threats by |                 |                    |                           | Appears to be    |                             |                 |              |                    |                       |                               | qT2qFX34X!-           |
| AND            |        | (1) strengthening              |                 |                    |                           | formula. A total |                             |                 |              |                    |                       |                               | 357751914?oppld=56    |
| STRENGTHENI    |        | epidemiologic capacity; (2)    |                 |                    |                           | of 58 award      |                             |                 |              |                    |                       |                               | 320&mode=VIEW         |
| NG             |        | enhancing laboratory practice; |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
| EPIDEMIOLOGY   |        | (3) improving information      |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
| , LABORATORY   |        | systems; and (4) developing    |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
| AND HEALTH     |        | and implementing prevention    |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
| INFORMATION    |        | and control strategies. ELC    |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
| SYSTEMS        |        | aims to enhance the ability of |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
| CAPACITY IN    |        | public health agencies to      |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
| STATE AND      |        | identify and monitor the       |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
| LOCAL HEALTH   |        | occurrence of known            |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
| DEPARTMENTS    |        | infectious diseases of public  |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
|                |        | health importance; detect new  |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
|                |        | and emerging infectious        |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
|                |        | disease threats, identify and  |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
|                |        | respond to disease outbreaks;  |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
|                |        | and use public health data for |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
|                |        | priority setting, policy       |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
|                |        | development, and prevention    |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
|                |        | and control. The purpose of    |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
|                |        | this Affordable Care Act       |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
|                |        | funding through the ELC is to  |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
|                |        | enhance public health          |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
|                |        | programs to improve health     |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
|                |        | and help restrain the rate of  |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
|                |        | growth of health care costs    |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
|                |        | through building epidemiology, |                 |                    |                           |                  |                             |                 |              |                    |                       |                               |                       |
|                |        | laboratory, and health         |                 |                    |                           |                  | l                           |                 |              |                    |                       |                               |                       |

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| GrantName   |        | Grant Description   | Release<br>Date | Due     | Eligible Applicants                                       | Grant Amount  | Cost<br>Sharing<br>Matching | Yes No     | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
|---|--------|---|-----------------|---------|---|---|-----------------------------|------------|--------------|--------------------|-----------------------|-------------------------------|---|
| Patient Protection and Affordable Care Act (PPACA); Emerging Infections Program (EIP); Enhancing Epidemiology and Laboratory Capacity (U01) | 93.521 | The purpose of this EIP-ACA FOA is to support state and local health departments' surveillance infrastructure through enhancement of the epidemiology and laboratory capacity of the existing EIP network. Over the past 15 years, the EIP network has proved to be a national resource for conducting active, population-based surveillance and special studies for invasive bacterial diseases, foodborne pathogens, healthcare associated infections (HAIs), influenza, and many other infectious diseases. The network has been instrumental in measuring the impact of the 7-valent pneumococcal conjugate vaccine, informing and evaluating treatment guidelines for Group B Streptococcus, estimating the burden of foodborne illness, documenting the emergence of community-associated methicillin-resistant Staphylococcus aureus, and monitoring the safety of the 2009 H1N1 vaccine as part of the influenza vaccine safety network |                 | 8/27/10 | Mainly State Governments.  New Mexico is named in the RFP | A total of<br>\$4,500,000<br>with ceiling of<br>\$650,000 and a<br>total of 10<br>awards. | None                        | DOH<br>ERD | None         | 8/25/2010          | 9/30/2010             | \$327,379                     | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=DrTrMZFJ<br>4ZnLwnt4SsjLylK1xZ<br>c0ysbnyq9PpSyQtHL<br>qT2qFX34X!-<br>357751914?oppId=56<br>319&mode=VIEW |

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| GrantName   | CFDA   | Grant Description   | Release<br>Date | Eligible Applicants  | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No   | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
|---|--------|---|-----------------|--|--|-----------------------------|---|--------------|--------------------|-----------------------|-------------------------------|---|
| State Competitive Supplemental Funding for Behavioral Risk Factor Surveillance System | 93.520 | The purpose of this supplement is to provide State Health Departments with resources to maintain previous projections in sample size, enhance and expand the utility of BRFSS, and support ongoing state-based public health surveillance infrastructure. Resources are needed specifically to collect BRFSS data to assess the prevalence of Influenza Like Illness (ILI) at state and local levels to support Pandemic Influenza response and preparedness activities as well as to support optional modules of public health significance at the state level (Components IA, IB, and IC). Financial support will be provided for activities related to data collection for the evaluation of interventions and assessment of the effectiveness of activities funded with Affordable Care Act through the Communities Putting Prevention to Work (ACA CPPW) (Component II). Those states eligible to apply for Component II will be notified individually. The amount of funding for individual states will be determined through a competitive evaluation. |                 | is available to the 50 states, the District of Columbia, Puerto Rico and the U.S. Virgin Islands, funded under CDC RFA-DP09-901. Component II: Eligible applicants are limited to State health departments in which a CPPW funded grantee resides within the | A total of<br>\$9,000,000 will<br>be awarded<br>with 53 awards<br>anticipated<br>(Appears to be<br>a supplemental<br>grant to a non-<br>HCR grant) |                             | DOH<br>will<br>apply<br>with<br>ERD<br>being<br>the<br>lead |              |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=D24vMpNQJ<br>ZprygtLT1y39MHPRJ<br>FGpwBYQpLhh4pffR<br>MpRJ3dT4k8!-<br>743945508?oppId=56<br>638&mode=VIEW |

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| GrantName   | CFDA   | Grant Description   | Release<br>Date | Eligible Applicants   | Grant Amount  | Cost<br>Sharing<br>Matching | Apply<br>Yes No   | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
|---|--------|---|-----------------|---|---|-----------------------------|---|--------------------|-----------------------|-------------------------------|---|
| EPIDEMIOLOGY AND LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC) BUILDING AND STRENGTHENIN G EPIDEMIOLOGY, LABORATORY AND HEALTH INFORMATION SYSTEMS CAPACITY IN STATE AND LOCAL HEALTH DEPARTMENTS | 93.521 | The purpose of this Affordable Care Act funding through the ELC is to enhance public health programs to improve health and help restrain the rate of growth of health care costs through building epidemiology, laboratory, and health information systems capacity in state and local public health departments. Specifically, the Affordable Care Act funding is being made available via this FOA to enhance the ability of state, local, and territorial ELC grantees to strengthen and integrate capacity for detecting and responding to infectious disease and other public health threats in state and local public health departments. The purpose of these enhancements is to provide flexible and multipurpose resources to address current high-priority infectious disease problems within grantee jurisdictions, as well as new threats as they emerge. This FOA addresses the following three inter-related areas which are fully consistent with and build upon the existing ELC activities: a. Epidemiology Capacity - To ensure staff are well-trained and well-equipped to provide rapid, effective, and flexible response to infectious | 8/16/10         | ELIGIBILITY Funding under this FOA is intended to continue and enhance capacity for epidemiology, laboratory and health information systems for infectious diseases and other public health threats through the existing ELC program. Eligible applicants that can apply for this funding opportunity are all current ELC grantees and are listed below. These 58 ELC grantees are currently funded under the following ELC Funding Opportunity Numbers: C104-040: Alabama, Arizona, California, Colorado, Connecticut, Florida, Georgia, Hawaii, Houston TX, Iowa, Illinois, Indiana, Kansas, Kentucky, Los Angeles County CA, Louisiana, Maine, Massachusetts, Michigan, Missouri, Mississippi, Montana, Nebraska, New Jersey, New Mexico, New York, New York City NY, North Carolina, Ohio, Oklahoma, Pennsylvania, Philadelphia PA, Republic of Palau, Rhode Island, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming. C107-701: Alaska, Arkansas, Chicago IL, Commonwealth of Puerto Rico, Delaware, District of Columbia, Idaho, Maryland, Minnesota, Nevada, North Dakota, Oregon, | This has a total of \$35,900,000 with approximately 58 awards |                             | NM DOH is applyin g for this grant. ERD and SLD Divisio ns will work on this jointly. |                    |                       |                               | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=3VJmMqv<br>WM6nKj0BXffJJ1CB<br>b4HV0cTvG0NCX4G<br>yTXYKvk2NJRZvt!97<br>035526?oppId=56320<br>&mode=VIEW |

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| GrantName   | CFDA   | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants  | Grant Amount  | Cost<br>Sharing<br>Matching | Apply<br>Yes No   | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
|---|--------|---|-----------------|--------------------|--|---|-----------------------------|-------------------|--------------------|-----------------------|-------------------------------|--|
| Patient Protection and Affordable Care Act (PPACA); Emerging Infections Program (EIP); Enhancing Epidemiology and Laboratory Capacity (U01) | 93.521 | The purpose of this EIP-ACA FOA is to support state and local health departments' surveillance infrastructure through enhancement of the epidemiology and laboratory capacity of the existing EIP network. Over the past 15 years, the EIP network has proved to be a national resource for conducting active, population-based surveillance and special studies for invasive bacterial diseases, foodborne pathogens, healthcare associated infections (HAIs), influenza, and many other infectious diseases. The network has been instrumental in measuring the impact of the 7-valent pneumococcal conjugate vaccine, informing and evaluating treatment guidelines for Group B Streptococcus, estimating the burden of foodborne illness, documenting the emergence of community-associated methicillin-resistant Staphylococcus aureus, and monitoring the safety of the 2009 H1N1 vaccine as part of the influenza vaccine safety network (http://www.cdc.gov/ncpdcid/deiss/ein/publications.html). EIP | 8/17/10         |                    | Eligible Institutions You may submit an application(s) if your organization has any of the following characteristics: Eligibility for these awards is limited to current grantees under the EIP cooperative agreement program which are the health departments of California, Colorado, Connecticut, Georgia, Maryland, Minnesota, New Mexico, New York, Tennessee, and Oregon or their Bona Fide Agents. These 10 grantees are currently funded under EIP Funding Opportunity Announcement numbers Cl02-174 (NM) and Cl05-026 (CA, CO, CT, GA, MD, MN, NM, NY, TN, OR). | A total of<br>\$4,500,000<br>with ceiling of<br>\$650,000 and a<br>total of 10<br>awards. | None                        | DOH<br>and<br>ERD |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=NW7MMr4h0<br>vjR22sGQhLQ9Ylpq2<br>vtRcYsKJTSpFd2x9c<br>pKyY2bFtN!5204406<br>42?oppId=56319&mo<br>de=VIEW |

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| CDC Epidemiology & Laboratory Capacity/Emer ging Infections Program Grant  Patient Protection and Affordable Care Act funding Affordable Care Act Epidemiology and Laboratory soluble in the alth programs to improve health nealth programs to improve health on the ealth or   | GrantName   | CFDA   | Grant Description   | Release<br>Date | Application Due | Eligible Applicants   | Grant Amount  | Cost<br>Sharing<br>Matching        | Apply<br>Yes No |      | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage            |
|--|---|--------|---|-----------------|-----------------|---|---|------------------------------------|-----------------|------|--------------------|-----------------------|-------------------------------|--------------------|
| Protection and Affordable Care Act funding for ELC is to enhance public health programs to improve health and help restrain the rate of growth of health care costs through building and Strengthening Epidemiology, Laboratory and Health Information Systems Capacity in State and Local Health State and Local Health Epidemiology afforms and Local Health Back and Local Health Lealth Departments    Affordable Care Act funding for Strengthening For ELC is to enhance public with enhancement of ELC-ACA awards initiated in 2010 under FOA# C110-1012. Therefore, elligible applicants are limited to the 58 current ELC ACA grantes (or their established bona fide agents) under FOA# C110-1012, and are listed below: New Mexico. New York, New York City NV, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Philadelphia PA, Republic of Palau, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Washington, West Virginia, Washington, West Virginia, Washington, West Virginia, with part of the province of the control | Epidemiology<br>& Laboratory<br>Capacity/Emer<br>ging Infections  |        | epidemiologists,<br>laboratory scientists, and<br>health information<br>specialists who can work<br>on multiple infectious<br>diseases. Increasing the<br>number of modern, well-<br>equipped public health<br>laboratories using<br>electronic laboratory<br>information systems to<br>manage and exchange<br>information effectively<br>between labs and public | N/A             | N/A             | Supplemental funding  |   | Formula funding no application was | DOH             | N/A  | N/A                | 9/24/2010             |                               | N/A                |
| Page 33 4/28/2011  | Protection and Affordable Care Act Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) Building and Strengthening Epidemiology, Laboratory and Health Information Systems Capacity in State and Local Health | 53.521 | Affordable Care Act funding for ELC is to enhance public health programs to improve health and help restrain the rate of growth of health care costs through building epidemiology, laboratory, and health information systems capacity in state and local public health  | 3/18/11         |                 | budget period continuation with enhancement of ELC-ACA awards initiated in 2010 under FOA# CI10-1012. Therefore, eligible applicants are limited to the 58 current ELC ACA grantees (or their established bona fide agents) under FOA# CI10-1012, and are listed below: New Mexico, New York, New York City NY, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Philadelphia PA, Republic of Palau, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming. | funding for<br>separate<br>activities.<br>There will be a<br>total of 58<br>awards. |                                    | at this         | this |                    |                       |                               | 2077849862?oppld=8 |

| GrantName  |        | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants  | Grant Amount  | Cost<br>Sharing<br>Matching | Apply<br>Yes No         |                         | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
|--|--------|---|-----------------|--------------------|--|---|-----------------------------|-------------------------|-------------------------|--------------------|-----------------------|-------------------------------|--|
| Patient Protection and Affordable Care Act (ACA), Emerging Infections Programs (EIP), Enhancing Epidemiology and Laboratory Capacity | 93.921 | The purpose of the EIP-ACA cooperative agreement is to support state and local health departments' surveillance infrastructure through enhancement of the epidemiology and laboratory capacity of the existing EIP network. | 3/18/11         |                    | This Announcement provides second Budget Period continuation funding for EIP-ACA awards initiated in 2010 under FOA# CI10-003. Therefore, eligibility is limited to current grantees (or their Bona Fide Agents) funded under FOA# CI10-003, which are the health departments of California, Colorado, Connecticut, Georgia, Maryland, Minnesota, New Mexico, New York, Oregon, and Tennessee. | There will be approximately 20 awards. The average award will be \$706,800. | None                        | None<br>at this<br>time | none at<br>this<br>time |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=5XpjNLQdBx<br>nBl0YsVfShNTd8FQ<br>WLp2YMpNd9yl6D6p<br>ymTLR5qfjX!-<br>2077849862?oppld=8<br>0514&mode=VIEW |
| Start of<br>Miscellaneous<br>Grants  |        |   |                 |                    |  |   |                             |                         |                         |                    |                       |                               |  |
| Territory Cooperative Agreements for the Affordable Care Act Exchanges   | 93.525 | This cooperative agreement Funding Opportunity Announcement is intended to assist Territories with initial implementation activities related to the health insurance Exchanges  | 1/20/11         |                    | States. State of New   | \$5,000,000<br>total funding<br>with 5 awards<br>anticipated                | None                        | N/A                     | N/A                     | N/A                | N/A                   |                               | http://www.grants.gov<br>/search/search.do;jse<br>ssionid=Cg4QN4YPJ<br>3tdRTh8LzP89mQ2Xf<br>5L90Q2h2qTb1l7nyG<br>1XGGf11wy!6151801<br>74?oppId=65713&mo<br>de=VIEW   |

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| GrantName   | CFDA | Grant Description  | Release<br>Date | Application<br>Due | Eligible Applicants   | Grant Amount | Cost<br>Sharing<br>Matching                      | Apply<br>Yes No | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
|---|------|--|-----------------|--------------------|---|--------------|--|-----------------|--------------|--------------------|-----------------------|-------------------------------|---|
| Strengthening the Aging Network: An Opportunity for Training and Evaluation |      | Developing capacity for public health departments to participate in meaningful use of electronic health records, e.g. through implementation of electronic laboratory-based reporting according to national standards. |                 | 8/13/2010          | State governments County governments City or township governments Public and State controlled institutions of higher education Native American tribal governments (Federally recognized) Native American tribal organizations | _            | Yes. This informatio n has not yet been released |                 |              |                    |                       |                               | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=3CYbMyT<br>BGPq1LFwNsrDbvLD<br>1xO04pL1nd398nfQF<br>LLcDsW6r4qWy!175<br>7025235?oppId=5550<br>5&mode=VIEW |

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| GrantName  | Grant Description  | Release<br>Date | Application<br>Due | Eligible Applicants |                                | Cost<br>Sharing<br>Matching                        | Apply<br>Yes No     | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
|--|--|-----------------|--------------------|---------------------|--------------------------------|--|---------------------|--------------|--------------------|-----------------------|-------------------------------|---|
| Nationwide Program for National and State Background Checks for Direct Patient Access Employees of Long Term Care Facilities and Providers | Title VI, Subtitle B, Part III, Subtitle C, Section 6201 of the Affordable Care Act (ACA) directs the Secretary of Health and Human Services (HHS), to establish a nationwide program to identify efficient, effective, and economical procedures for long term care facilities and providers to conduct background checks on a statewide basis on all prospective direct patient access employees. CMS is inviting proposals from all States and U.S. territories to be considered for inclusion in this National Background Check Program which will be in effect through 2013. Federal matching funds are available to all States and U.S. territories that meet the requirements described in section 6201 of the ACA and that provide an application that is scored at 69.5 points or greater by the Federal technical panel. The national program will be evaluated by the HHS Office of Inspector General (OIG). CMS will award a technical support contract to | 4/18/11         | 6/30/11            |                     | grant amout<br>total. There is | Yes<br>depends<br>on amount<br>of grant<br>awarded | Yes<br>DOH<br>(DHI) | None         | 8/9/2010           | Dec-10                |                               | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=d1HpMbH<br>Ovs40vHj0MpxTzZps<br>N8H9nftFGC1pHKGr<br>nSxyPcFD2NO8!168<br>0187280?mode=VIE<br>WREVISIONS&revNu<br>m=0 |

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| GrantName  | Grant Description  |          | Application<br>Due | Eligible Applicants | Grant Amount    | Cost<br>Sharing<br>Matching                        | Apply<br>Yes No     | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
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| GrantName  | CFDA   | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants  | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No   | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
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| Strengthening<br>Public Health<br>Infrastructure<br>for Improved<br>Health<br>Outcomes                             | 93.507 | The goal of the "Strengthening Public Health Infrastructure for Improved Health Outcomes" program is to systematically increase the performance management capacity of public health departments in order to ensure that public health goals are effectively and efficiently met. This program will increase the capacity and ability of health departments to meet national public health standards, such as those of the National Public Health Performance Standard Program (http://www.cdc.gov/od/ocphp/nphpsp/index.htm), Public Health Accreditation Board (http://www.phaboard.org/), and National Quality Forum (http://www.qualityforum.org/). | 7/8/2010        |                    | ligible applicants include all 50 states, Washington, D.C., 9 large local health departments supporting cities with populations of 1 million or more inhabitants (Chicago, Illinois; Dallas, Texas; Houston Texas; Los Angeles, California; New York City, New York; Philadelphia, Pennsylvania; Phoenix, Arizona; San Antonio, Texas; San Diego, California), 5 U.S. Territories, 3 U.S. Affiliated Pacific Islands and up to 7 federally-recognized tribes with an established public health department structure (or their equivalent) that provide public health services to their tribal members, or bona fide agents of any of the eligible entities.  | \$212,500,000 total. There will be 85 awards with a ceiling of \$3,100,000 and a floor of \$1,100,000.                           |                             | DOH<br>PHD<br>will be<br>the<br>lead<br>and IT<br>will be<br>a<br>partner                           | None         | 8/8/2010           | 9/20/2010             |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=LTp0M15hG<br>SdyZRPhkn0QvrWnt<br>7bLwY5VJMFJfgK0k<br>xLZjV02plm5!931914<br>360?oppld=55684&m<br>ode=VIEW     |
| Affordable Care Act (ACA): Capacity Building Assistance to Strengthen Public Health Infrastructure and Performance | 93.524 | This project is an expansion of CDC-RFA-HM08-805: Strengthen and Improve the Nation's Public Health Capacity through National, Non-Profit, Professional Public Health Organizations to Increase Health Protection and Health Equity.  | 8/4/2010        | 8/24/2010          | Eligible applicants are limited to the following national, non-profit, public health professional organizations funded through the competitive funding opportunity announcement CDC-RFA-HM08-805: 1. American Public Health Association (APHA) 2. Association of Maternal and Child Health Programs (AMCHP) 3. Association of State and Territorial Health Officials (ASTHO) 4. Council of State and Territorial Epidemiologists (CSTE) 5. National Association of County and City Health Officials (NACCHO) 6. National Association of Local Boards of Health (NALBOH) 7. National Network of Public Health Institutes (NNPHI) 8. Public Health Accreditation Board (PHAB) 9. Public Health Data Standards Consortium (PHDSC) 10. Public Health | Total of<br>\$6,685,000<br>with a ceiling of<br>\$1,396,000 and<br>a floor of<br>\$75,000. They<br>anticipate 15<br>awards total |                             | Will not<br>apply<br>for this<br>as<br>eligible<br>entities<br>are not<br>based<br>in New<br>Mexico |              |                    |                       |                               | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=Cg1yMvyp<br>69NY1Tt4122p1jSv7J<br>nkkSsJkYLHVsP1Mr<br>TpntNn7Cgs!-<br>1941321387?oppld=5<br>6343&mode=VIEW |

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| GrantName  | CFDA | Grant Description  | Release<br>Date | Application<br>Due | Eligible Applicants  | Grant Amount                  | Cost<br>Sharing<br>Matching                               | Apply<br>Yes No   | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
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| Expansion of<br>the Rural<br>Community<br>Hospital<br>Demonstration<br>under the<br>Affordable<br>Care Act | None | Section 10313 of the Patient Protection and Affordable Care Act of 2010 mandates an extension of the Rural Community Hospital Demonstration Program for an additional 5 years. The law allows additional hospitals to participate in the demonstration program. Since 10 hospitals are currently participating in the program, the Centers for Medicare & Medicaid Services (CMS) is conducting a new solicitation that will allow up to 20 new hospitals to participate in the demonstration for a period of 5 years. | 8/27/2010       | 10/14/2010         | The following eligibility requirements must be met for a hospital to be considered for participation in the demonstration. These requirements are specified in the authorizing legislation. An applicant must be a hospital that:  1. Is located in a rural area [as defined in Section 1886(d)(2)(D) of the Social Security Act (42 U.S.C. 1395ww(d)(2)(D)) or treated as being so located pursuant to section 1886(d)(8)(E) of the Act (42 U.S.C. 1395 ww(d)(8)(E))]; 2. Has fewer than 51 acute care inpatient beds, as reported in its most recent cost report; 3. Makes available 24-hour emergency care services; and 4. Is not designated or eligible for designation as a Critical Access Hospital (CAH) under Section 1820 of the Social Security Act. The authorizing legislation requires that the demonstration be conducted in States with low population densities, as determined by the Secretary. For this demonstration, hospitals must be located in one of the 20 least densely populated States: | with 20 awards<br>anticipated | No informatio n on this could be found on the application | NM DOH Office of Primary Care and Rural Health has send the announ cement to 6 qualifyi ng hospital |              |                    |                       |                               | http://www.cms.gov/D<br>emoProjectsEvalRpts<br>/downloads/2004 Rur<br>al Community Hospit<br>al Demonstration Pr<br>ogram.pdf |

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| GrantName   | CFDA   | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants | Grant Amount  | Cost<br>Sharing<br>Matching | Apply<br>Yes No                | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
|---|--------|---|-----------------|--------------------|---------------------|---|-----------------------------|--------------------------------|--------------|--------------------|-----------------------|-------------------------------|---|
| Affordable Care Act - Health Center Planning Grants | 93.527 | The purpose of the Health Center Program is to extend comprehensive primary and preventive health services (including mental health, substance abuse and oral health services) and supplemental services to populations currently without access to such services, and to improve their health status. The program includes: 1) Community Health Centers, section 330(e); 2) Migrant Health Centers, section 330(e); 2) Migrant Health Centers, section 330(h); and 4) Public Housing Primary Care, section 330(i). The populations served by these programs include: 1) medically underserved populations in urban and rural areas; 2) migratory and seasonal agricultural workers and their families; 3) homeless people, including children and families; and 4) residents of publicly subsidized housing. |                 |                    |                     | There is a total of \$10,000,000 with approx 125 awards. An average award is \$85,000 | None                        | Unkno<br>wn at<br>this<br>time |              |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=LdKSNtQWG<br>6P3TplzSDzzzJDMGI<br>14dWhLtRZCqRPjfzn.<br>hQhslF7n2!15648844<br>9?mode=VIEWREVI<br>SIONS&revNum=0 |

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| GrantName   | CFDA | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants   | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No                | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
|---|------|---|-----------------|--------------------|---|--|-----------------------------|--------------------------------|--------------------|-----------------------|-------------------------------|--|
| Public Prevention Health Fund: Health Promotion and Disease Prevention Research Centers: Special Interest Project Competitive Supplement s (SIPS) |      | This RFA will provide supplemental funding to Prevention Research Centers, to design, test, and disseminate effective prevention research strategies in the areas of chronic disease prevention and control in the areas of: Access to Health Services, Adolescent Health, Cancer, Educational and Community-Based Programs, Immunization and Infectious Diseases, Injury and Violence Prevention, Older Adults, Quality of Life and Well-Being, and Sexually Transmitted Diseases. | 4/11/2010       |                    | Only applicants who have applied for and have been selected as Prevention Research Centers under CDC Program Announcement DP-09-001 are eligible to compete for Special Interest Projects (SIPS) supplemental funding. Mainly universities. | There is no total amount of funding. There is ceiling of \$700,000 and a floor of \$100,000. | None                        | Unkno<br>wn at<br>this<br>time |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=Jr2wNnBYDx<br>LvjTy1zfYDJICyv5xlp<br>v8vtYJtnmDZ1GP30p<br>nWd8kz!505166326?<br>oppId=66853&mode=<br>VIEW |
| Prevention<br>Grants  |      |   |                 |                    |   |  |                             |                                |                    |                       |                               |  |

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| GrantName   | CFDA | Grant Description  | Release<br>Date | Application Due | Eligible Applicants   | Grant Amount                                 | Cost<br>Sharing<br>Matching | Apply<br>Yes No   | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
|---|------|--|-----------------|-----------------|---|--|-----------------------------|---|--------------------|-----------------------|-------------------------------|---|
| Affordable Care Act (ACA): Childhood Obesity Research Demonstration |      | There are 2 components to this grant. A and B. The objective of the demonstrations is to determine whether an integrated model of primary care and public health approaches in the community can improve underserved children's risk factors for obesity. These approaches may include policy, systems, and environmental supports that encourage nutrition and physical activity for underserved children and their families.   | 1/19/2011       | Latter of       | State and local governments,<br>Institutes of Higher Education<br>(IHEs)  | \$5,250,000<br>total funds with<br>5 awards. | None                        | None<br>at this<br>time   |                    |                       |                               | http://www.grants.gov<br>/search/search.do;jse<br>ssionid=bvSnN5mD9<br>JQpGdCf0HqBBsLHy<br>Lyfhd3SYTJ6tLfjhLk0<br>LgznT2XC!15526385<br>00?oppId=65553&mo<br>de=VIEW     |
| Affordable Care Act (ACA) Prevention Center for Healthy Weight      |      | The Health Resources and Services Administration Office of Planning, Analysis and Evaluation (HRSA/OPAE) will provide funding to support a Prevention Center for Healthy Weight (PC). The PC will plan, implement, and manage a nation-wide Healthy Weight Collaborative (HWC) as well as recruit and support communities and teams participating in the HWC. The PC will also serve as a gateway to quality information on the prevention and treatment of overweight and obesity in the context of integration of public and community health and primary care. This program seeks to provide and promote family-centered, community-based, coordinated care for children and families, and facilitate the development of community-based systems of services for such children and their families for the prevention and treatment of overweight and obesity. | 7/16/2010       |                 | Any public or private nonprofit entity, including state and local government agencies, institutions of higher education, and an Indian tribe or tribal organization (as those terms are defined at 25 USC 450(b)) is eligible to apply. | One award at \$5,000,000                     | None is required            | No it was determined to be a very compet ative grant and will not apply for this grant. |                    |                       |                               | http://www07.grants.gov/se<br>arch/search.do;jsessionid=<br>h71sMGkHht1TnNTGpFGL<br>Bm84rJWdYR7P8LhTH1B<br>bhypnD10Q26jY!16801872<br>80?mode=VIEWREVISION<br>S&revNum=0 |
|   |      |  |                 |                 | F   | age 42                                       |                             |   |                    |                       |                               | 4/28/2011   |

| GrantName (  | CFDA   | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants            | Grant Amount  | Cost<br>Sharing<br>Matching | Apply<br>Yes No                      | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
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| Patient Protection and Affordable Care Act (Affordable Care Act) State Supplemental Funding for Healthy Communities, Tobacco Prevention and Control, Diabetes Prevention and Control, and Behavioral Risk Factor Surveillance System | 93.520 | As part of the overall effort to reduce the burden of chronic diseases and chronic disease risk factors, the Centers for Disease Control and Prevention (CDC), National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Office on Smoking and Health (OSH), announces the opportunity to apply for Affordable Care Act funds to create additional tobacco quitters, beyond what states and jurisdictions have projected to achieve in Recovery Act funded programs. | 8/3/2010        |                    | New Mexico is named in the RFP | A total of<br>\$4,250,000 is<br>avaliable<br>funding will be<br>per capita<br>basis |                             | DOH<br>PHD<br>will be<br>the<br>lead |              |                    |                       |                               | http://www07.grants.g<br>ov/search/search.do:j<br>sessionid=DrTrMZFJ<br>4ZnLwnt4SsjLylK1xZ<br>c0ysbnyq9PpSyQtHL<br>qT2qFX34X!-<br>357751914?oppId=56<br>289&mode=VIEW |

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| GrantName  | CFDA | Grant Description   | Release<br>Date | Eligible Applicants | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No  | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
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| Health Center<br>New Access<br>Points Funded<br>Under the<br>Affordable<br>Care Act of<br>2010 |      | A new access point is a new full-time service delivery site(s) for the provision of comprehensive primary and preventive health care services that will improve the health status and decrease health disparities of the medically underserved and vulnerable populations to be served. New access points will address the unique and significant barriers to affordable and accessible primary health care services for the specific population and/or community targeted by the application. Every NAP application is expected to demonstrate compliance (or have a plan for compliance within 120 days of a grant award) with the requirements of section 330 of the PHS Act, as amended and applicable regulations. | 8/9/2010        |                     | \$250,000,000 total funding. \$650,000 ceiling with 650 awards anticipated | None                        | Has been emaile d to various agenci es that may apply. |              |                    |                       |                               | http://www.grants.gov<br>/search/search.do;jse<br>ssionid=ynB7MhVRX<br>051vbmVLfJDxLlpK4<br>Z2MbzYTyRKd2bn4rv<br>DsKPqD4IJ!5133734<br>27?oppId=56499&mo<br>de=VIEW |

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| GrantName                          | CFDA | Grant Description  | Release<br>Date | Application<br>Due | Eligible Applicants | Grant Amount                        | Cost<br>Sharing<br>Matching | Apply<br>Yes No                                | Partner<br>s | Grant<br>Submitted | Date Grant | Amount of<br>Grant<br>Awarded | Webpage |
|------------------------------------|------|--|-----------------|--------------------|---------------------|-------------------------------------|-----------------------------|--|--------------|--------------------|------------|-------------------------------|---------|
| CDC Tobacco<br>Quitlines<br>Grants | N/A  | State supplemental funding for healthy communities totaling \$3.8 million is being divided among 46 locations. The funds will be used to help states implement plans to reduce tobacco use through regulatory and educational arenas, as well as enhance and expand the national network of tobacco cessation quit lines to significantly increase the number of tobacco users who quit. This funding is possible under the new Prevention and Public Health Fund created by the | N/A             | N/A                |                     | Supplemental<br>Funding from<br>CDC |                             | DOH<br>was<br>awarde<br>d<br>Formul<br>a funds |              | N/A                | 9/24/2010  | \$60,340                      | N/A     |

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| GrantName   | Grant Description  | Release<br>Date | Application<br>Due | Eligible Applicants | Grant Amount  | Cost<br>Sharing<br>Matching | Apply<br>Yes No                | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
|---|--|-----------------|--------------------|---------------------|---|-----------------------------|--------------------------------|--------------|--------------------|-----------------------|-------------------------------|--|
| Medicaid<br>Incentives for<br>Prevention of<br>Chronic<br>Diseases<br>(MIPCD) | (The Affordable Care Act) authorizes grants to States to provide incentives to Medicaid beneficiaries of all ages who participate in prevention programs and demonstrate changes in health risk and outcomes, including the adoption of healthy behaviors. The initiatives or programs are to be ?comprehensive, evidence-based, widely available, and easily accessible.? The programs must use relevant evidence-based research and resources, including: the Guide to Community Preventive Services; the Guide to Clinical Preventive Services; and the National Registry of Evidence-Based Programs. An application by a State for a grant under the program must address at least one of the following prevention goals: tobacco cessation, controlling or reducing weight, lowering cholesterol, lowering blood pressure, and avoiding the onset of diabetic, improving the management of the condition. |                 | 5/2/2011           | State Governments   | 10 total awards<br>between<br>\$5,000,000 and<br>\$10,000,000 | None                        | Unkno<br>wn at<br>this<br>time |              |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=PS2JNm0hY<br>yTLjTQSYp6bfKRhT9<br>hVyL7RFVhjQyRNZIL<br>2GTvLG2Fw!615180<br>174?oppId=73653&m<br>ode=VIEW |

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| GrantName   | Grant Description  |           |           | Eligible Applicants  | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
|---|--|-----------|-----------|--|--|-----------------------------|-----------------|--------------|--------------------|-----------------------|-------------------------------|--|
| Affordable Care Act Program for Early Detection of Certain Medical Conditions Related to Environmental Health Hazards | The purpose of the program is to (1) provide medical screening to persons with possible exposure to amphiboles that occurred in Libby and Troy, Montana; (2) conduct nationwide outreach to raise awareness of the screening program among persons eligible to participate and of the availability of certain Medicare benefits; and (3) provide health education to detect, prevent, and treat environmental health conditions. | 3/10/2011 | 1/20/2011 | Health Service, A National Cancer<br>Institute-designated cancer center, | 1 award with funding between \$2,500,000 and \$10,000,000. |                             | None            |              |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=5XpjNLQdBx<br>nBl0YsVfShNTd8FQ<br>WLp2YMpNd9yl6D6p<br>ymTLR5qfjX!-<br>2077849862?oppld=7<br>7933&mode=VIEW |
| Access to<br>Care Grants  |  |           |           |  |  |                             |                 |              |                    |                       |                               |  |

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| GrantName   |        | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants  | Grant Amount               | Cost<br>Sharing<br>Matching                                     | Apply<br>Yes No  | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
|---|--------|---|-----------------|--------------------|--|----------------------------|---|--|--------------|--------------------|-----------------------|-------------------------------|---|
| Affordable Care Act (ACA) Infrastructure to Expand Access to Care Program | 93.502 | Institutions of Higher Education shall be affiliated with an academic health center at a public research university in the United States that contains a State's sole public academic medical and dental school. Governor must certify that: 1. The new health care facility is critical for the provision of greater access to health care within the State; 2. Such facility is essential for the continued financial viability of the State's sole public medical and dental school and its academic health center; 3. The request for Federal support represents not more than 40 percent of the total cost of the proposed new facility; and 4. The State has established a dedicated funding mechanism to provide all remaining funds necessary to complete the construction or renovation of the propose facility. Institutions of Higher Education shall be affiliated with an academic health center at a public research university in the United States that contains a State's sole public academic medical and dental school. Governor must certify that: 1. The new health care facility is critical for the provision of greater access to health care | 8/18/2010       |                    | The purpose of this program is to provide funding for the debt service on, or direct construction or renovation of a health care facility that provides research, inpatient tertiary care, or outpatient clinical services. The program supports the Affordable Care Act (ACA) by expanding access to care through the debt service on, or construction, or renovation of infrastucture. | One Award at \$100,000,000 | Cost<br>Sharing<br>Ratio<br>(Federal:No<br>n-Federal):<br>40:60 | No agency in New Mexico is eligible becaus e we do not have a dental school. Also this is a very compet ative grant with one award |              |                    |                       |                               | http://www07.grants.g ov/search/search.do:j sessionid=TqQYMt4h X1Jt01TqnJHFHJQFt LWPhZh4JNTwzNcx T81Y2JSts3L8!20498 03271?mode=VIEWR EVISIONS&revNum= 7 |

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| GrantName  | CFDA | Grant Description  | Release<br>Date | Application<br>Due | Eligible Applicants   | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No                | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
|--|------|--|-----------------|--------------------|---|--|-----------------------------|--------------------------------|--------------|--------------------|-----------------------|-------------------------------|---|
| Mental health<br>care<br>transformation<br>grants  | N/A  | In addition to putting needed infrastructure into place, the grants will fund services including supportive housing, employment and education programs, prevention and wellness services, trauma-informed care programs, and special services for military families.   | N/A             |                    | part of its strategic initiative<br>on health reform 20 new<br>mental health<br>transformation grants<br>totaling up to \$71.5 million<br>over the next five years.<br>The purpose of the program | per year for up  |                             | Grant<br>Awarde<br>d to<br>HSD | HSD          | N/A                | 10/9/2010             | \$734,500                     | http://www.samhsa.g<br>ov/newsroom/advisori<br>es/1010081619.aspx |
| Grants from<br>the Affordable<br>Care Act to<br>upgrade and<br>expand<br>community<br>health centers | N/A  | The Capital Development (CD) program grants, administered by HHS' Health Resources and Services Administration (HRSA), will support major construction and renovation at 143 community health centers nationwide. This builds on the more than \$2 billion investment in community health centers in the American Recovery and Reinvestment Act. | N/A             |                    | Choice Community<br>Healthcare, Inc.<br>Albuquerque, NM   | \$727 million to<br>143 community<br>health centers<br>across the<br>country | None                        | N/A                            | N/A          | N/A                | 10/8/2010             | \$8,153,989                   | http://www.hhs.gov/n<br>ews/press/2010pres/<br>10/chc_chart.html  |

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| GrantName  | CFDA | Grant Description  | Release<br>Date | Application<br>Due | Eligible Applicants               | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
|--|------|--|-----------------|--------------------|-----------------------------------|--|-----------------------------|-----------------|--------------|--------------------|-----------------------|-------------------------------|--|
| Grants from<br>the Affordable<br>Care Act to<br>upgrade and<br>expand<br>community<br>health centers | N/A  | The Capital Development (CD) program grants, administered by HHS' Health Resources and Services Administration (HRSA), will support major construction and renovation at 143 community health centers nationwide. This builds on the more than \$2 billion investment in community health centers in the American Recovery and Reinvestment Act. |                 | N/A                | Archer Health Center<br>Hatch, NM |  | None                        | N/A             | N/A          | N/A                | 10/8/2010             |                               | http://www.hhs.gov/n<br>ews/press/2010pres/<br>10/chc_chart.html |
| Grants from<br>the Affordable<br>Care Act to<br>upgrade and<br>expand<br>community<br>health centers | N/A  | The Capital Development (CD) program grants, administered by HHS' Health Resources and Services Administration (HRSA), will support major construction and renovation at 143 community health centers nationwide. This builds on the more than \$2 billion investment in community health centers in the American Recovery and Reinvestment Act. |                 | N/A                | NM                                | \$727 million to 143 community health centers across the country | None                        | N/A             | N/A          | N/A                | 10/8/2010             | \$3,786,635                   | http://www.hhs.gov/n<br>ews/press/2010pres/<br>10/chc_chart.html |

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| GrantName  | CFDA | Grant Description  | Release<br>Date | Application<br>Due | Eligible Applicants               | Grant Amount   | Cost<br>Sharing<br>Matching | Apply<br>Yes No | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
|--|------|--|-----------------|--------------------|-----------------------------------|--|-----------------------------|-----------------|--------------|--------------------|-----------------------|-------------------------------|--|
| Grants from<br>the Affordable<br>Care Act to<br>upgrade and<br>expand<br>community<br>health centers | N/A  | The Capital Development (CD) program grants, administered by HHS' Health Resources and Services Administration (HRSA), will support major construction and renovation at 143 community health centers nationwide. This builds on the more than \$2 billion investment in community health centers in the American Recovery and Reinvestment Act.   | N/A             | N/A                | Medical Services<br>Lordsburg, NM | \$727 million to<br>143 community<br>health centers<br>across the<br>country | None                        | N/A             | N/A          | N/A                | 10/8/2010             | \$8,715,094                   | http://www.hhs.gov/n<br>ews/press/2010pres/<br>10/chc_chart.html |
| Develop and<br>Modernize<br>Community<br>Health<br>Centers   |      | Health Center Cooperative Agreements support the development and operation of health centers. Cooperative agreement organizations use training and technical assistance funds to support the following core functions related to supporting health centers: community development, expansion planning, patient-centered medical home development, meaningful use health information technology adoption and workforce development. | N/A             |                    | Mexico Primary Care               | A total of \$8<br>Million was<br>awarded in<br>various<br>amounts            | None                        | N/A             | N/A          | N/A                | 11/19/2010            | \$90,547                      | http://www.hhs.gov/n<br>ews/press/2010pres/<br>11/20101119b.html |

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| GrantName   | CFDA   | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants   | Grant Amount  | Cost<br>Sharing<br>Matching | Apply<br>Yes No  |             | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
|---|--------|---|-----------------|--------------------|---|---|-----------------------------|--|-------------|--------------------|-----------------------|-------------------------------|---|
| Health Center<br>Expanded<br>Services (ES)<br>Fiscal Year<br>2011                                       |        | This announcement details the fiscal year (FY) 2011 Expanded Services (ES) supplemental funding for existing Health Center Program grantees (health centers currently funded, as of September 30, 2010, under section 330 of the Public Health Service (PHS) Act as amended (42 U.S.C. 254b)). The ES funds will support increased access to preventive and primary health care services including oral health, behavioral health, pharmacy, vision, and/or enabling services, at existing health center sites. | 10/26/2010      |                    | In FY 2011, the following types of existing health centers currently receiving funding as of September 30, 2010, under the Health Center Program are eligible for ES funds: Community Health Centers (CHC) - section 330(e), Migrant Health Centers (MHC) - section 330(g), Health Care for the Homeless (HCH) - section 330(h) and Public Housing Primary Care (PHPC) - section 330(i) | HRSA will<br>award between<br>\$270 million<br>and \$335<br>million through<br>formula-based<br>supplements to<br>existing section<br>330 funded<br>health centers. |                             | Previou<br>s<br>awarde<br>d NM<br>Health<br>Center<br>s    | Unkno       |                    |                       |                               | http://www.hrsa.gov/g<br>rants/apply/assistanc<br>e/ExpandedServices/<br>announcementandins<br>tructions.pdf  |
| Affordable Care Act Family Professional Partnership/ Family-to- Family Health Information and Education | 93.504 | This competing continuation guidance is for "Family To Family Health Care Information and Education Centers for Families of Children with Special Health Care Needs".   | 10/26/2010      | 12/16/2010         | Eligibility for this funding opportunity is limited to organizations within the 41 States that will not have an MCHB-funded Center as of June 1, 2011. NM is included in this list  | This will be a total of \$3.9 million. A total of 41 awards is expected with a ceiling of \$95,700.   |                             | The only MCHB-funded Center in NM is Parent s Reaching Out | Unkno<br>wn |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=cG91MLxbHf<br>L7jsNFfcL1yNvms3v<br>MqSxJRLxTMb8hhPn<br>5XJLg7Ry7!-<br>883699945?oppId=58<br>573&mode=VIEW |

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| GrantName  | CFDA   | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants  | Grant Amount  | Cost<br>Sharing<br>Matching | Apply<br>Yes No                                       |             | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
|--|--------|---|-----------------|--------------------|--|---|-----------------------------|---|-------------|--------------------|-----------------------|-------------------------------|--|
| Affordable Care Act (ACA): Capacity Building Assistance to Strengthen Public Health Infrastructure and Performance | 93.524 | The overall goal of this expansion is to support the provision of capacity building assistance (CBA) to state, tribal, local and territorial (STLT) health departments that ensures performance improvement and successful adoption of best or promising practices to address key areas of public health infrastructure investments. These investments are in accordance with Health Care Reform legislation, Affordable Care Act (PL 111-148). | 3/18/2011       | 11172011           | and III under the Non-Competitive 12-month Cost-Extension Supplement are limited the following grantees funded under CDC-RFA- HM08-8030301SUPP10: PART I 1. American Public Health Association (APHA) 2. Association of State and Territorial Health Officials (ASTHO) 3. National Association of County and City Health Officials (NACCHO) 4. National Network of Public Health | Part I. 5<br>awards with<br>average of<br>\$524,400. Part<br>II . Applied Epi<br>Fellow 3 Award<br>betweem<br>\$650,000 and<br>\$1,370,000,<br>and Part III 6<br>awrads with an<br>average of<br>\$650,000. | None                        | None  | Unkno<br>wn |                    |                       |                               | http://www.grants.gov<br>/search/search.do:jse<br>ssionid=5XpjNLQdBx<br>nBlOYsVfShNTd8FQ<br>WLp2YMpNd9yl6D6p<br>ymTLR5qfjX!-<br>2077849862?oppId=8<br>0533&mode=VIEW |
| IT PPACA   |        |   |                 |                    | Hadional Association of Escal  |   |                             |   |             |                    |                       |                               |  |
| Grants Cooperative Agreements to Support Innovative Exchange Information Technology Systems                        |        | This Funding Opportunity Announcement (FOA) will provide competitive incentives for States to design and implement the Information Technology (IT) infrastructure needed to operate Health Insurance Exchanges? new competitive insurance market places that will help Americans and small businesses purchase affordable private health insurance starting in 2014.  | 10/29/2010      |                    | This FOA is open to all States as that term is defined in Section 1304(d) of the Affordable Care Act. This includes the 50 States, consortia of States, and the District of Columbia.  | No total award information but up to 5 awards.  | None                        | No<br>agency<br>at this<br>time.<br>Possibl<br>e DoIT |             |                    |                       |                               | http://www.grants.gov<br>/search/search.do;jse<br>ssionid=8pWYMRwQ<br>yybpSQhJjK38YLwm<br>sKMZMb8f5N8RZPG<br>XSZrQH2cdTmdK!19<br>72789458?oppId=586<br>05&mode=VIEW  |
| Medicaid<br>Medicare<br>Grants   |        |   |                 |                    | Į į  | Page 53   |                             |   |             |                    |                       |                               | 4/28/2011  |

| GrantName   | CFDA                    | Grant Description   | Release<br>Date  | Application<br>Due | Eligible Applicants  | Grant Amount | Cost<br>Sharing<br>Matching | Apply<br>Yes No | Partner<br>s | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
|---|-------------------------|---|------------------|--------------------|--|--------------|-----------------------------|-----------------|--------------|--------------------|-----------------------|-------------------------------|--|
| Medicare Program; Solicitation for Proposals for the Medicare Community- Based Care Transitions Program | 93.772<br>and<br>93.774 | The goals of the CCTP are to improve the quality of care transitions, reduce readmissions for high risk Medicare beneficiaries, and document measurable savings to the Medicare program by reducing unnecessary readmissions. | Rolling<br>Basis |                    | Hospitals with high readmission rates that partner with CBOs or CBOs that provide care transition services are eligible to participate in the CCTP. We anticipate that a wide variety of interested parties may be eligible to form a CBO in order to apply in collaboration with other organizations to perform the responsibilities specified. |              | None                        | None            |              |                    |                       |                               | http://www.gpo.gov/fd<br>sys/pkg/FR-2011-04-<br>15/pdf/2011-9126.pdf |

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## Qualifying Therapeutic Discovery Project Grants for the State of New Mexico (PPACA) 11/1/2010

|    | Applicant Name               | Project Name  | Grants Awarded<br>for 2009 | Grants Awarded for 2010 | Total 2009 to 2010 |
|----|------------------------------|---|----------------------------|-------------------------|--------------------|
|    |                              | Prostate Cancer Prevention  |                            |                         |                    |
| 1  | Accent Alternatives, Inc.    | Using Tocopherylquinone (TQ)  | \$750.00                   | \$116,500.00            | \$117,250          |
| 2  | ATOF Inc                     | Development of BiosparQ<br>Instrument for rapid microbial<br>characterization of clinical | 0                          | \$2.44.470.25           | ¢244.470           |
|    | ATOF, Inc                    | samples.  | U                          | \$244,479.25            | \$244,479          |
| 2  | Among Dhawasasutisala las    | C-Reactive Protein Therapy for Lupus Nephritis in Systemic Lups                           | фга 020 F0                 | <b>Ф</b> 22.052.50      | <b>407.070</b>     |
| 3  | Azano Pharmaceuticals Inc    | Eryrhematosus   | \$53,920.50                | \$33,952.50             | \$87,873           |
| 4  | Biomoda, Inc.                | Diagnostic Assay for Detection of Early-Stage Lung Cancer                                 | \$244,479.25               | 0                       | \$244,479          |
| 5  | Caldera Pharmaceuticals Inc. | Diagnostics for Trauma Injuries   | \$205,791.33               | \$38,687.91             | \$244,479          |
| 6  | Exagen Diagnostics Inc       | Exagen Gastrointestinal Discoveries   | \$244,479.25               | 0                       | \$244,479          |
| 7  | Exagen Diagnostics, Inc.     | Exagen Autism Spectrum<br>Disorder Discoveries  | \$19,164.00                | \$139,724.50            | \$158,889          |
| 8  | InLight Solutions, Inc       | Noninvasive Glucose Monitoring for Gestational Diabetes                                   | \$151,661.50               | \$92,817.75             | \$244,479          |
| 9  | Intellicyt Corporation       | Biomarker Discovery Platform to<br>Accelerate Development of<br>Cancer Therapies          | \$244,479.25               | 0                       |                    |
|    | Manhattan Isotope            | Recycling of the Cardiac Imaging Agent, Strontium-82, from Spent                          |                            |                         |                    |
| 10 | Technology                   | Generators  | 0                          | \$244,479.25            | \$244,479          |

|     |                                      | Point of care molecular                                |                           |                    |                    |
|-----|--------------------------------------|--|---------------------------|--------------------|--------------------|
|     |                                      | diagnostic device for respiratory                      |                           |                    |                    |
| 11  | Mesa Tech International, Inc.        |  | \$244,479.25              | 0                  | \$244,479          |
|     |                                      | Miniature NMR Pathogen                                 |                           |                    |                    |
| 12  | nanoMR, Inc.                         | Detection System                                       | \$244,479.25              | 0                  | \$244,479          |
|     |                                      | Early detection of endometrial                         |                           |                    |                    |
| 13  | ProteaSure,Inc.                      | cancer   | 0                         | \$167,750.00       | \$167,750          |
|     | O - maid a com NA a di a a l         | Navada sia di Otimo datian fan                         |                           |                    |                    |
| 1.1 | Samitaur Medical                     | Neurological Stimulation for                           | 0                         | <b>\$20,000,00</b> | ¢00.000            |
| 14  | Technologies, LLC                    | Samitaur Medical Technologies A Biomagnetic Method for | 0                         | \$90,000.00        | \$90,000           |
|     |                                      | Detecting and treating breast                          |                           |                    |                    |
| 15  | Senior Scientific LLC                | cancer   | \$152,704.00              | \$63,661.00        | \$216,365          |
| 15  | Geriioi Geleritiile EEG              | cancer   | Ψ132,704.00               | ψ00,001.00         | \$210,303          |
|     |                                      | A Biomagnetic Method for                               |                           |                    |                    |
|     |                                      | Determining Transplant Rejection                       |                           |                    |                    |
| 16  | Senior Scientific LLC                | and Monitoring Therapy                                 | \$79,805.50               | \$44,762.00        | \$124,568          |
|     |                                      | Magnetic Biopsy Needle for                             |                           |                    |                    |
|     |                                      | Minimum Residual Disease                               |                           |                    |                    |
| 17  | Senior Scientific LLC                | Detection in Luekemia                                  | \$130,914.00              | \$105,725.00       | \$236,639          |
|     |                                      | Biomagnetic In-vivo Imaging and                        |                           |                    |                    |
|     |                                      | Image-Guided Therapy of                                |                           |                    |                    |
| 18  | Senior Scientific LLC                | Ovarian Cancer   | \$54,528.00               | \$70,799.50        | \$125,328          |
|     |                                      | Early Detection of skin cancer                         |                           |                    |                    |
| 40  | OK large as all LO                   | using non-invasive infrared                            | <b>#</b> 00 <b>545</b> 00 | \$4.00.000.05      | <b>#4</b> ( 0, 700 |
| 19  | SK Infrared LLC                      | imaging. SURGICAL SUITE UNIT:                          | \$63,515.36               | \$106,222.25       | \$169,738          |
|     |                                      | Automated Blood Analyte                                |                           |                    |                    |
| 20  | TECMED, INC.                         | Monitoring System                                      | \$5,502.50                | \$7,891.00         | \$13,394           |
| 20  | TEOMED, INC.                         | Noninvasive alcohol diagnostic                         | ψ5,502.50                 | Ψ1,031.00          | \$13,374           |
|     |                                      | device for emergency care                              |                           |                    |                    |
| 21  | TruTouch Technologies, Inc.          | facilities   | \$169,386.21              | \$75,093.04        | \$244,479          |
|     | VeraLight Inc                        | SCOUT  | \$244,479.24              | 0                  | \$244,479          |
|     | <u> </u>                             | Automatic eye disease diagnosis                        |                           |                    |                    |
| 23  | Visionquest Biomedical LLC           | system   | \$244,479.25              | 0                  | \$244,479          |
|     |                                      |  |                           |                    |                    |
|     |                                      | Stroke risk stratification through                     |                           |                    |                    |
|     | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | plaque motion analysis of                              |                           | <b>405</b> 5-5-5   |                    |
| 24  | Visionquest Biomedical LLC           | longitudinal carotid                                   | 0                         | \$39,853.78        | \$39,854           |

| 25 | NanoBiosensor for Continuous<br>Biomarker Monitoring | \$244,479.25 | 0     | \$244,479   |
|----|--|--------------|-------|-------------|
|    |  |              | Total | \$4,725,876 |

| GrantName  | CFDA | Grant Description   | Release<br>Date | Application<br>Due | Eligible Applicants  | Grant<br>Amount  | Cost<br>Sharing<br>Matching | Apply Yes<br>No  | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant Awarded | Webpage  |
|--|------|---|-----------------|--------------------|--|--|-----------------------------|------------------|--------------------|-----------------------|----------------------------|--|
| Affordable Care Act: State Health Care Workforce Planning Grants |      | The State Health Care Workforce Development Grant program authorizes the Secretary of Health and Human Services (HHS), acting through the Administrator of the Health Resources and Service Administration (HRSA), to administer planning and implementation grants for the purposes of enabling State partnerships (1) to complete comprehensive health care workforce development planning and (2) to implement those plans or carry out activities as defined by the State application in order to address current and projected workforce demands within the State. | 6/17/10         | 7/19/10            | Generally, an eligible<br>partnership will be a State<br>Workforce Investment<br>Board   | \$2,000,000<br>Grant total<br>with a<br>ceiling of<br>\$150,000<br>with 30<br>total<br>awards            |                             | YES<br>DOL/DWS   | 7/19/2010          | 9/24/2010             |                            | https://grants.hrsa.gov/<br>webExternal/FundingO<br>ppDetails.asp?Funding<br>Cycleld=70332C9D-<br>C405-4199-BFE2-<br>78FBF3C52CD3&View<br>Mode=EU&GoBack=&<br>PrintMode=&OnlineAva<br>ilabilityFlag=&pageNu<br>mber=&version=&NC=<br>&Popup= |
| Affordable Care Act Advanced Nursing Education Expansion (ANEE)  |      | The Advanced Nurse Education Expansion initiative's two purposes are to increase the number of students enrolled full time in accredited primary care Nurse Practitioner and Nurse Midwifery programs and to accelerate the graduation of part time students.   | 6/17/10         | 7/19/10            | collegiate schools of<br>nursing, academic health<br>centers, and other private  | \$30,000,00<br>0 total with<br>approximat<br>ely 40<br>awards  |                             | YES UNM-<br>HSC  | Unknown            | 8/5/2010              |                            | http://www07.grants.go<br>v/search/search.do:jse<br>ssionid=hDHtMfCJfhvK<br>2ylCkvjg1QBFQGKXjD<br>T2Ws8HDQvFZDyYJdl<br>PSBGZ!-<br>491952003?oppld=552<br>80&mode=VIEW  |
| Nurse<br>Education,<br>Practice,<br>Quality and<br>Retention     |      | supports 108 infrastructure grants to expand the capacity of the nursing pipeline, promote career mobility for individuals in nursing, prepare more nurses at the baccalaureate level, and provide continuing education training to enhance the quality of patient care.  | N/A             | N/A                | Eligible applicants are collegiate schools of nursing, academic health centers, and other private or public entities accredited by a national nursing accrediting agency | Total of<br>\$29,900,00<br>0 with<br>varible<br>awards.<br>There are<br>108<br>infrastructu<br>re grants | None                        | Yes- UNM-<br>HSC | Unknown            | 8/5/2010              | \$406,078                  | <u>N/A</u>   |

| Nurse<br>Education,<br>Practice,<br>Quality and<br>Retention                 | supports 108 infrastructure grants to expand the capacity of the nursing pipeline, promote career mobility for individuals in nursing, prepare more nurses at the baccalaureate level, and provide continuing education training to enhance the quality of patient care.  | N/A     | Eligible applicants are collegiate schools of nursing, academic health centers, and other private or public entities accredited by a national nursing accrediting agency             | Total of<br>\$29,900,00<br>0 with<br>varible<br>awards.<br>There are<br>108<br>infrastructure grants | None | Yes<br>Western<br>NM<br>University | Unknown | 8/5/2010  | \$249,740 | <u>N/A</u>  |
|--|---|---------|--|--|------|------------------------------------|---------|-----------|-----------|---|
| Affordable Care Act Expansion of Physician Assistant Training Program (EPAT) | As the need for primary care is growing due to the expansion of the health care coverage by the Affordable Care Act, the Expansion of Physician Assistants Training (EPAT) will help meet this need by improving the access to primary care services through increased supply of primary care physician assistants. The program purpose is to increase student enrollment in primary care physician assistant programs and graduates planning to practice primary care specialties. Eligible entities are public or private academically affiliated physician assistant training programs that have as their objective the education of individuals who, upon completion of their studies in the program, will be qualified to provide primary care medical services with the supervision of a physician. | 7/19/10 | Eligible entities are public or private academically affiliated physician assistant training programs that have as their objective the education of individuals. Mainly Primary Care | \$32,000,00<br>0 with 40<br>awards   | None | Yes UNM-<br>HSC                    | Unknown | 9/28/2010 |           | http://www07.grants.go<br>v/search/search.do:jse<br>ssionid=JmDCMf3K21<br>QJVw5zgSHTmGqyQV<br>qNc2HvysBmQXTxGn<br>G7DDRpW448!-<br>491952003?oppld=552<br>83&mode=VIEW |

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| "Cranta to           | 02 511 | Key components of this oversight    | / 17/10 | 7/7/10        | State governments         | \$51,000,00  | Augusta       | Voc            | 7/7/2010 | 0/1//2010 | ¢1 000 000   | http://www07.grants.go |
|----------------------|--------|-------------------------------------|---------|---------------|---------------------------|--------------|---------------|----------------|----------|-----------|--|------------------------|
| "Grants to           | 93.511 | require insurers to report certain  | 6/7/10  | 7/7/10        | State governments         |              |               | Yes,           | 7/7/2010 | 8/16/2010 | the state of the s |                        |
| States for           |        | health insurance rate information   |         |               |                           | 0 there will | are not       | PRC/Insura     |          |           |  | v/search/search.do;jse |
| Health               |        |                                     |         |               |                           | be           | required to   |                |          |           |  | ssionid=NDqpMhnSXq     |
|                      |        | to both the Secretary and the       |         |               |                           |              | •             |                |          |           |  | 0.                     |
| Insurance            |        | States in which they operate,       |         |               |                           | approximat   |               | Division       |          |           |  | mt7BBMQmFHz1sy46       |
| Premium              |        | including:1. All increases in rates |         |               |                           | ely 51       | matching      |                |          |           |  | kY7wl22P09N1h2cGT      |
| Review-              |        | for health insurance over the prior |         |               |                           | awards       | contribution  |                |          |           |  | OCcCL2hyF!13868580     |
|                      |        | year that meet the established      |         |               |                           |              |               |                |          |           |  |                        |
| Cycle I"             |        | unreasonable threshold (currently   |         |               |                           | with         | s. However,   |                |          |           |  | 17?oppld=55029&mod     |
| Office of            |        | under development);2.               |         |               |                           | \$1,000,000  | the state     |                |          |           |  | e=VIEW                 |
| Consumer             |        | Justifications for unreasonable     |         |               |                           | award        | share of      |                |          |           |  |                        |
|                      |        | increases in rates prior to their   |         |               |                           |              |               |                |          |           |  |                        |
| Information          |        | implementation.Public disclosure    |         |               |                           | ceiling.     | funds         |                |          |           |  |                        |
| and                  |        | of this information and insurers    |         |               |                           |              | expended      |                |          |           |  |                        |
| Insurance            |        | will be required to prominently     |         |               |                           |              | for rate      |                |          |           |  |                        |
|                      |        | post the information on their       |         |               |                           |              |               |                |          |           |  |                        |
| Oversight            |        | respective Internet                 |         |               |                           |              | review        |                |          |           |  |                        |
| (OCIIO)              |        | websites.Section 2794 also          |         |               |                           |              | activities    |                |          |           |  |                        |
| (000)                |        | provides for a program of grants    |         |               |                           |              | under the     |                |          |           |  |                        |
|                      |        | to states to help them improve the  |         |               |                           |              |               |                |          |           |  |                        |
|                      |        | health insurance rate review and    |         |               |                           |              | state's       |                |          |           |  |                        |
|                      |        |                                     |         |               |                           |              | proposed      |                |          |           |  |                        |
|                      |        | reporting process. Congress has     |         |               |                           |              | plan for rate |                |          |           |  |                        |
|                      |        | appropriated \$250 million for this |         |               |                           |              |               |                |          |           |  |                        |
|                      |        | grant program for the federal       |         |               |                           |              | review shall  |                |          |           |  |                        |
|                      |        | fiscal years (FFYs) of 2010-2014.   |         |               |                           |              | not be less   |                |          |           |  |                        |
|                      |        | HHS is authorized to award this     |         |               |                           |              |               |                |          |           |  |                        |
|                      |        | money during multiple award         |         |               |                           |              | than the      |                |          |           |  |                        |
|                      |        | cycles to eligible States beginning |         |               |                           |              | funds         |                |          |           |  |                        |
|                      |        | in FFY 2010. Federal regulatory     |         |               |                           |              | expended      |                |          |           |  |                        |
|                      |        | guidance is currently under         |         |               |                           |              |               |                |          |           |  |                        |
|                      |        | development to establish the        |         |               |                           |              | in the fiscal |                |          |           |  |                        |
|                      |        | statutorily mandated process of     |         |               |                           |              | year          |                |          |           |  |                        |
|                      |        | annual rate review for health       |         |               |                           |              |               |                |          |           |  |                        |
|                      |        | insurance.                          |         |               |                           |              |               |                |          |           |  |                        |
|                      |        |                                     |         |               |                           |              |               |                |          |           |  |                        |
| <b>Early Retiree</b> | NA     | The Early Retiree Reinsurance       | 6/29/10 | This grant is | businesses, unions, state | This is a    |               | Yes            |          | 9/16/2010 |  | www.hhs.gov/ociio/reg  |
| Reinsurance          |        | Program will reimburse              |         | based on a    | and local governments     | variable     |               | NMRHCA         |          |           |  | ulations/index.html    |
|                      |        | employers for medical claims        |         |               | who provide health        |              |               | TAIVITAT 107 A |          |           |  | diations/index.num     |
| Program              |        | for retirees age 55 and older       |         | first come    | insurance for early       | amount to    |               |                |          |           |  |                        |
|                      |        | who are not eligible for            |         | first serve   | retirment                 | be           |               |                |          |           |  |                        |
|                      |        | Medicare and their spouses,         |         | basis         |                           | distributed. |               |                |          |           |  |                        |
|                      |        | surviving spouses and               |         | Dasis         |                           | distributed. |               |                |          |           |  |                        |
|                      |        |                                     |         |               |                           |              |               |                |          |           |  |                        |
|                      |        | ependents. Employers who            |         |               |                           |              |               |                |          |           |  |                        |
|                      |        | provide health coverage for         |         |               |                           |              |               |                |          |           |  |                        |
|                      |        | early retirees are eligible to      |         |               |                           |              |               |                |          |           |  |                        |
|                      |        | apply. Program participants will    |         |               |                           |              |               |                |          |           |  |                        |
|                      |        | be able to submit claims for        |         |               |                           |              |               |                |          |           |  |                        |
|                      |        | medical care back to June 1,        |         |               |                           |              |               |                |          |           |  |                        |
|                      |        | 2010. This program is intended      |         |               |                           |              |               |                |          |           |  |                        |
|                      |        | as bridge coverage until            |         |               |                           |              |               |                |          |           |  |                        |
|                      |        | insurance exhanges become           |         |               |                           |              |               |                |          |           |  |                        |
|                      |        |                                     |         |               |                           |              |               |                |          |           |  |                        |
|                      |        | operational in 2014.                |         |               |                           |              |               |                |          |           |  |                        |
|                      |        |                                     |         |               |                           |              |               |                |          |           |  |                        |
|                      |        |                                     |         |               |                           |              |               |                |          |           |  |                        |
|                      |        |                                     |         |               |                           |              |               |                |          |           |  |                        |

3

| Affordable Care Act (ACA) - Consumer Assistance Program Grants | assist comp consumer to the co | e are grants to States to t consumers with filing plaints and appeals, assist umers with enrollment into h coverage, and educate umers on their rights and possibilities. In addition, by they will collect data on umer inquires and plaints to help the Secretary of the problems in the etplace and strengthen cement. Starting in 2014, ams must also help we problems with premium tes for Exchange coverage. | 7/22/10 | 9/10/10 | State governments | \$29,000,00<br>0 total with<br>a ceiling of<br>\$3,400,000<br>and floor<br>\$120,00 a<br>total of 56<br>awards |  | PRC/DOI | 9/10/2010 | 10/19/2010 |  | http://www.grants.gov/s<br>earch/search.do:jsessi<br>onid=THbqMLpZyhlYT<br>WQSSWn0cxYyXwN2<br>xdpsFTptWtXfdPQxVJ<br>nM1Prh!-<br>832749192?oppId=560<br>58&mode=VIEW |
|--|--|--|---------|---------|-------------------|--|--|---------|-----------|------------|--|---|
|--|--|--|---------|---------|-------------------|--|--|---------|-----------|------------|--|---|

| State         | 93.525 | Section 1311 of the Affordable | 7/29/10 | 9/1/10 | State Governments | Total of    | None | Yes HSD  | 9/1/2010 | 9/30/2010 | \$1,000,000 | http://www.grants.gov/s |
|---------------|--------|--------------------------------|---------|--------|-------------------|-------------|------|----------|----------|-----------|-------------|-------------------------|
| Planning      | 93.525 | Care Act provides funding      | 1129110 | 9/1/10 |                   |             |      | 162 1130 | 9/1/2010 | 9/30/2010 | \$1,000,000 |                         |
| •             |        | assistance to the States for   |         |        |                   | \$51,000,00 |      |          |          |           |             | earch/search.do:jsessi  |
| and           |        | the planning and               |         |        |                   | 0 with a    |      |          |          |           |             | onid=yFPDMR6BhZ1n       |
| Establishme   |        | establishment of American      |         |        |                   | ceiling of  |      |          |          |           |             | WvWdFffh4ZlPxh6Jc2      |
| nt Grants for |        | Health Benefit Exchanges       |         |        |                   | \$1,000,000 |      |          |          |           |             | znhwj8628sQk98jht0Pl    |
| the           |        | (?Exchanges?). The             |         |        |                   | . 51        |      |          |          |           |             | K1!1087699643?oppld     |
| Affordable    |        | Affordable Care Act provides   |         |        |                   | Awards are  |      |          |          |           |             | =56204&mode=VIEW        |
| Care Act's    |        | that each State may elect to   |         |        |                   | Anticipated |      |          |          |           |             | - COZO IGINOGO VILVV    |
| Exchanges     |        | establish an Exchange that     |         |        |                   | Articipateu |      |          |          |           |             |                         |
| Exchanges     |        | would: 1) facilitate the       |         |        |                   |             |      |          |          |           |             |                         |
|               |        | purchase of qualified health   |         |        |                   |             |      |          |          |           |             |                         |
|               |        | plans; 2) provide for the      |         |        |                   |             |      |          |          |           |             |                         |
|               |        | establishment of a Small       |         |        |                   |             |      |          |          |           |             |                         |
|               |        | Business Health Options        |         |        |                   |             |      |          |          |           |             |                         |
|               |        | Program (?SHOP Exchange?)      |         |        |                   |             |      |          |          |           |             |                         |
|               |        | designed to assist qualified   |         |        |                   |             |      |          |          |           |             |                         |
|               |        | employers in facilitating the  |         |        |                   |             |      |          |          |           |             |                         |
|               |        | enrollment of their employees  |         |        |                   |             |      |          |          |           |             |                         |
|               |        | in QHPs offered in the SHOP    |         |        |                   |             |      |          |          |           |             |                         |
|               |        | exchange; and 3) meet other    |         |        |                   |             |      |          |          |           |             |                         |
|               |        | requirements specified in the  |         |        |                   |             |      |          |          |           |             |                         |
|               |        | Act. The funding awarded       |         |        |                   |             |      |          |          |           |             |                         |
|               |        | pursuant to this Funding       |         |        |                   |             |      |          |          |           |             |                         |
|               |        | Opportunity Announcement is    |         |        |                   |             |      |          |          |           |             |                         |
|               |        | intended to assist States with |         |        |                   |             |      |          |          |           |             |                         |
|               |        | initial planning activities    |         |        |                   |             |      |          |          |           |             |                         |
|               |        | related to the potential       |         |        |                   |             |      |          |          |           |             |                         |
|               |        | implementation of the          |         |        |                   |             |      |          |          |           |             |                         |
|               |        | Exchanges. Grants will be      |         |        |                   |             |      |          |          |           |             |                         |
|               |        | awarded in amounts up to a     |         |        |                   |             |      |          |          |           |             |                         |
|               |        | maximum of \$1 million per     |         |        |                   |             |      |          |          |           |             |                         |
|               |        | State, depending on the        |         |        |                   |             |      |          |          |           |             |                         |
|               |        | number and scope of activities |         |        |                   |             |      |          |          |           |             |                         |
|               |        | for which funding is sought.   |         |        |                   |             |      |          |          |           |             |                         |

| Grants to 93.5 States for Health Insurance Premium Review - Cycle I | Provide awards to states to enhance their current rate review process for health insurance premiums. States will be required to either develop or enhance their current capcity to review and to the extent permitted by law, approve or deny rate increases in the individual and group markets. States will be required to provide the HHS Secretaru with information about rate trends in health insurance coverage and may utilize grant funds to develop procedures and/or the infrastructure to enable them to report in the future. |  | IO/1/10  Five US territories and the 5 states that did not previously apply - Departments of Insurance or state entity with primary statutory and regulatory authority for the regulation of private health insurance;  New Mexico received grant under original announcement of 6/7/10 |  | NM<br>Insurance<br>division<br>received<br>grant from<br>original<br>announcem<br>ent | 7/7/2010 | 8/16/2010 |  | http://www07.grants.go<br>v/search/search.do:jse<br>ssionid=hJIZM1yHzrG<br>KGqzXt3ylHcc1Znp5Y<br>ByyrJ2Zdf2Zg4SGM4D<br>yTRHh!97035526?oppl<br>d=57031&mode=VIEW |
|---|--|--|---|--|---|----------|-----------|--|---|
|---|--|--|---|--|---|----------|-----------|--|---|

6

| Affordable<br>Care Act<br>(ACA)<br>Maternal,<br>Infant and | 93.505 The Maternal, Infant, and Early Childhood Home Visiting Program is designed: (1) to strengthen and improve the programs and activities carried out under Title V; (2) to improve   | 6/10/10 | 7/9/10 | State Governments | \$90,000,00<br>0 with 56<br>total grant<br>awards of<br>various | None | CYFD<br>Requested<br>Amount:\$9<br>51,952 | 7/9/2010 | 7/21/2010 | \$951,952 | https://grants.hrsa.gov/<br>webExternal/FundingO<br>ppDetails.asp?Funding<br>CycleId=E24F384A-<br>7290-49D0-A393-       |
|--|---|---------|--------|-------------------|---|------|---|----------|-----------|-----------|---|
| Early<br>Childhood<br>Home<br>Visiting<br>Program          | coordination of services for at risk communities; and (3) to identify and provide evidence-based home visiting programs to improve outcomes for families who reside in at risk communities. At-risk   |         |        |                   | amounts   |      |   |          |           |           | EED7F542B618&View<br>Mode=EU&GoBack=&<br>PrintMode=&OnlineAva<br>ilabilityFlag=&pageNu<br>mber=&version=&NC=<br>&Popup= |
|  | communities will be identified through a statewide assessment of needs and of existing resources to meet those needs. HRSA and the Administration for Children and Families (ACF) intend that the home visiting program will result in a coordinated system of early childhood home visiting in every State that has the capacity and | t<br>,  |        |                   |   |      |   |          |           |           | <u>«горир=</u>  |
|  | commitment to provide infrastructure and supports to assure high-quality, evidence-based practice.  |         |        |                   |   |      |   |          |           |           |   |

| Affordable   | 02 500 | Funds will support 5-year                                   | 6/2E/10 | 7/2//2010 | Native American tribal      | ¢2 000 000  | None | Motivo      | Linknown | 0/20/2010 | ¢220.000 | https://www.cfda.gov/? |
|--------------|--------|---|---------|-----------|-----------------------------|-------------|------|-------------|----------|-----------|----------|------------------------|
| Affordable   | 73.300 | demonstration grants (cooperative                           | 6/25/10 | 7/26/2010 | governments (Federally      | \$3,000,000 | None | Native      | Unknown  | 9/29/2010 |          |                        |
| Care Act     |        | agreements) between ACF and                                 |         |           | recognized)                 | with an     |      | American    |          |           |          | s=program&mode=for     |
| (ACA) Tribal |        | Federally-recognized Indian                                 |         |           | Native American tribal      | award       |      | Professiona |          |           |          | m&tab=step1&id=788d    |
| Maternal,    |        | Tribes (or a consortium of Indian                           |         |           | organizations (other than   | ceiling of  |      | I Parent    |          |           |          | 6ac24971c92c3580fda    |
|              |        | Tribes), Tribal Organizations, or                           |         |           | Federally recognized tribal | \$500,000   |      |             |          |           |          | 2894431ba              |
| Infant, and  |        | Urban Indian Organizations to                               |         |           | governments)                |             |      | Resources,  |          |           |          | 2094431ba              |
| Early        |        | conduct needs assessments;                                  |         |           | Others (see text field      | and award   |      | Inc.        |          |           |          |                        |
| Childhood    |        | develop the infrastructure needed                           |         |           | entitled "Additional        | floor of    |      |             |          |           |          |                        |
| Home         |        | for the widespread planning,                                |         |           | Information on Eligibility" | \$100,000   |      |             |          |           |          |                        |
| Visiting     |        | adoption, implementation, and                               |         |           | for clarification)          | with an     |      |             |          |           |          |                        |
| _            |        | sustainability of evidence-based                            |         |           | ioi ciarincation)           |             |      |             |          |           |          |                        |
| Grant        |        | maternal, infant, and early                                 |         |           |                             | award total |      |             |          |           |          |                        |
| Program      |        | childhood home visiting programs;                           |         |           |                             | of 15.      |      |             |          |           |          |                        |
|              |        | and provide high-quality, evidence-                         |         |           |                             |             |      |             |          |           |          |                        |
|              |        | based home visiting services to                             |         |           |                             |             |      |             |          |           |          |                        |
|              |        | pregnant women and families with                            |         |           |                             |             |      |             |          |           |          |                        |
|              |        | young children aged birth to                                |         |           |                             |             |      |             |          |           |          |                        |
|              |        | kindergarten entry. Home visiting                           |         |           |                             |             |      |             |          |           |          |                        |
|              |        | programs are intended to promote                            |         |           |                             |             |      |             |          |           |          |                        |
|              |        | outcomes such as improvements                               |         |           |                             |             |      |             |          |           |          |                        |
|              |        | in maternal and prenatal health,                            |         |           |                             |             |      |             |          |           |          |                        |
|              |        | infant health, and child health and                         |         |           |                             |             |      |             |          |           |          |                        |
|              |        | development; reduced child                                  |         |           |                             |             |      |             |          |           |          |                        |
|              |        | maltreatment; improved parenting practices related to child |         |           |                             |             |      |             |          |           |          |                        |
|              |        | development outcomes; improved                              |         |           |                             |             |      |             |          |           |          |                        |
|              |        | school readiness; improved family                           |         |           |                             |             |      |             |          |           |          |                        |
|              |        | socio-economic status; improved                             |         |           |                             |             |      |             |          |           |          |                        |
|              |        | coordination of referrals to                                |         |           |                             |             |      |             |          |           |          |                        |
|              |        | community resources and                                     |         |           |                             |             |      |             |          |           |          |                        |
|              |        | supports; and reduced incidence                             |         |           |                             |             |      |             |          |           |          |                        |
|              |        | supports, and reduced incluence                             |         |           |                             |             |      |             |          |           |          |                        |

| A CC I - I - I | 00 500 | Funds will support 5-year                                       | (105110 | 7/0//0040 | Native American tribal      | Φ2 000 C22  | Nicola | Develope of | I I a I a a a a a a a a | 0/00/0040 | <b>#</b> 100 000 | https://www.sfda.ge.v/0 |
|----------------|--------|---|---------|-----------|-----------------------------|-------------|--------|-------------|-------------------------|-----------|------------------|-------------------------|
| Affordable     | 75.500 | demonstration grants (cooperative                               | 6/25/10 | 7/26/2010 |                             | \$3,000,000 | None   | Pueblo of   | Unknown                 | 9/29/2010 |                  | https://www.cfda.gov/?  |
| Care Act       |        | agreements) between ACF and                                     |         |           | governments (Federally      | with an     |        | San Felipe  |                         |           |                  | s=program&mode=for      |
| (ACA) Tribal   |        | Federally-recognized Indian                                     |         |           | recognized)                 | award       |        | ·           |                         |           |                  | m&tab=step1&id=788d     |
|                |        | Tribes (or a consortium of Indian                               |         |           | Native American tribal      |             |        |             |                         |           |                  | 6ac24971c92c3580fda     |
| Maternal,      |        | `   |         |           | organizations (other than   | ceiling of  |        |             |                         |           |                  |                         |
| Infant, and    |        | Tribes), Tribal Organizations, or Urban Indian Organizations to |         |           | Federally recognized tribal | \$500,000   |        |             |                         |           |                  | 2894431ba               |
| Early          |        | conduct needs assessments;                                      |         |           | governments)                | and award   |        |             |                         |           |                  |                         |
| Childhood      |        | develop the infrastructure needed                               |         |           | Others (see text field      | floor of    |        |             |                         |           |                  |                         |
|                |        | for the widespread planning,                                    |         |           | entitled "Additional        |             |        |             |                         |           |                  |                         |
| Home           |        | adoption, implementation, and                                   |         |           | Information on Eligibility" | \$100,000   |        |             |                         |           |                  |                         |
| Visiting       |        | sustainability of evidence-based                                |         |           | for clarification)          | with an     |        |             |                         |           |                  |                         |
| Grant          |        | maternal, infant, and early                                     |         |           |                             | award total |        |             |                         |           |                  |                         |
| Program        |        | childhood home visiting programs;                               |         |           |                             | of 15.      |        |             |                         |           |                  |                         |
| rrogram        |        | and provide high-quality, evidence                              |         |           |                             | 01 10.      |        |             |                         |           |                  |                         |
|                |        | based home visiting services to                                 |         |           |                             |             |        |             |                         |           |                  |                         |
|                |        | pregnant women and families with                                |         |           |                             |             |        |             |                         |           |                  |                         |
|                |        | young children aged birth to                                    |         |           |                             |             |        |             |                         |           |                  |                         |
|                |        | kindergarten entry. Home visiting                               |         |           |                             |             |        |             |                         |           |                  |                         |
|                |        | programs are intended to promote                                |         |           |                             |             |        |             |                         |           |                  |                         |
|                |        | outcomes such as improvements                                   |         |           |                             |             |        |             |                         |           |                  |                         |
|                |        | in maternal and prenatal health,                                |         |           |                             |             |        |             |                         |           |                  |                         |
|                |        | infant health, and child health and                             |         |           |                             |             |        |             |                         |           |                  |                         |
|                |        | development; reduced child                                      |         |           |                             |             |        |             |                         |           |                  |                         |
|                |        | maltreatment; improved parenting                                |         |           |                             |             |        |             |                         |           |                  |                         |
|                |        | practices related to child                                      |         |           |                             |             |        |             |                         |           |                  |                         |
|                |        | development outcomes; improved                                  |         |           |                             |             |        |             |                         |           |                  |                         |
|                |        | school readiness; improved family                               |         |           |                             |             |        |             |                         |           |                  |                         |
|                |        | socio-economic status; improved                                 |         |           |                             |             |        |             |                         |           |                  |                         |
|                |        | coordination of referrals to                                    |         |           |                             |             |        |             |                         |           |                  |                         |
|                |        | community resources and   |         |           |                             |             |        |             |                         |           |                  |                         |
|                |        | supports; and reduced incidence                                 |         |           |                             |             |        |             |                         |           |                  |                         |

| FY10 Support for Pregnant and Parenting Teens and Women FOA | The Act appropriates \$25 million for each of fiscal years 2010 through 2019 and authorizes the Secretary of HHS, in collaboration and coordination with the Secretary of Education (as appropriate) to establish and administer a Pregnancy Assistance Fund for the purpose of awarding competitive grants to States to assist pregnant and parenting teens and women. Grants will not exceed three years (and funding for years 2-3 is subject to the availability of funds). OAH anticipates funding a broad range of projects both in the size and scope of activities. The authorized State representative must make application for grant funds available through this announcement to assist pregnant and parenting teens and women. A signed letter from the authorized State representative must accompany the application; it should include documentation establishing the authorized representative?s authority to apply for and administer the grant funds on behalf of the State. The application may be developed solely by the authorized representative or in consultation with other relevant State agencies such as state education, human services and health agencies. HHS encovarges applications that |  | 8/2/10 | 501(c)(3) status with the | total<br>funding for<br>the grant<br>with a<br>Ceiling of<br>\$500,000 | Yes funding an amount from non-Federal funds equal to 25 percent of the amount of the funding provided | Yes PED | 8/2/2010 | 9/29/2010 |  | http://www07.grants.go<br>v/search/search.do:jse<br>ssionid=tyKWMnNNYjb<br>jvygcVKX64HpnL5M79<br>ZtynKtgqr7phNt3HStR<br>bH9W!404589083?opp<br>Id=55579&mode=VIE<br>W |
|---|--|--|--------|---------------------------|--|--|---------|----------|-----------|--|--|
|---|--|--|--------|---------------------------|--|--|---------|----------|-----------|--|--|

| State Personal Responsibili ty Education Program (PREP)  | The Patient Protection and Affordable Care Act, 2010 (Pub.L. 111-148) amends Title V of the Social Security Act (42 U.S.C. 701 et seq.) by adding section 513, Personal Responsibility Education. The Administration for Children and Families' (ACF) Family and Youth Services Bureau (FYSB) is accepting applications from States and Territories for the development and implementation of the Personal Responsibility Education Program (PREP). The purpose of this program is to educate youth between the ages of 10 and 19 on both abstinence and contraception for the prevention of pregnancy and sexually transmitted infections, including HIV/AIDS. | 7/30/10 | 8/30/10 | State Governments                              | Each state<br>will be<br>awarded a<br>minimun of<br>\$250,000   | None | DOH<br>Family<br>Planning<br>Program | 8/30/2010 | 9/30/2010 |          | http://www.acf.hhs.gov/<br>grants/open/foa/view/H<br>HS-2010-ACF-ACYF-<br>PREP-0125 |
|--|---|---------|---------|--|---|------|--------------------------------------|-----------|-----------|----------|---|
| Family-to-<br>Family Health<br>Information<br>Centers in<br>each state<br>and the<br>District of<br>Columbia | Created in 2005, the centers are state-wide, family-run organizations that provide information, education, training, outreach, and peer support to families of children and youth with special health care needs and the professionals who serve them. Funding for the centers was extended through 2012 by the Affordable Care Act.  | N/A     | N/A     | Exisiting Family to Family Information Centers | A total of<br>\$4,900,000<br>for exisiting<br>center a<br>total of 51<br>with<br>variable<br>award<br>amounts | None | Parents<br>Reaching<br>Out to Help   | Unknown   | 7/27/2010 | \$95,700 | N/A   |

|                | <br>Ind. II.                        |        |         | 10                         |              |      |         |           |           |                                |
|----------------|-------------------------------------|--------|---------|----------------------------|--------------|------|---------|-----------|-----------|--------------------------------|
| Option A       | Medicare Improvements for           | 6/7/10 | 7/30/10 | State agency or instrument | \$246,000    | None | Several | 7/30/2010 | 9/27/2010 | \$8,000 http://www07.grants.go |
| Medicare       | Patients and Providers Act of       |        |         | of a State from a State    | avaliable    |      | Tribes  |           |           | v/search/search.do;jse         |
|                | 2008 (MIPPA) was amended in         |        |         | that: 1) received an award | with a total |      | 111000  |           |           | ssionid=g3rmMQLchpx            |
| Improvemen     | Section 3306 to provide             |        |         | to implement ADRCs         |              |      |         |           |           |                                |
| t for Patients | additional funding for Medicare     |        |         | through the AoA and CMS    | award of     |      |         |           |           | <u>yVQ4YLG4SnLZJ25l5</u>       |
| and            | outreach and enrollment             |        |         | ADRC grants funded in      | \$1,000. A   |      |         |           |           | H6mdy216VGjqXxzqLL             |
| Providers      | activities. This legislation builds |        |         | fiscal years 2003, 2004,   | total of 246 |      |         |           |           | ynzyTl!-                       |
|                | upon 2008 MIPPA legislation         |        |         | 2005 and 2009              | io           |      |         |           |           | 3 3                            |
| Act (MIPPA)    | which provided for beneficiary      |        |         |                            | 15           |      |         |           |           | 228465525?oppld=550            |
| Affordable     | outreach and included funding       |        |         |                            | antcipated.  |      |         |           |           | 23&mode=VIEW                   |
| Care Act       | to State Health Insurance           |        |         |                            | \$1,000 per  |      |         |           |           |                                |
| Medicare       | Assistance Programs (SHIPs),        |        |         |                            | Tribe        |      |         |           |           |                                |
| Beneficiary    | Area Agencies on Aging (AAAs)       |        |         |                            | (Pueblo de   |      |         |           |           |                                |
|                | and Title VI Native American        |        |         |                            | •            |      |         |           |           |                                |
| Outreach       | Programs, Aging and Disability      |        |         |                            | Cochiti,     |      |         |           |           |                                |
| and            | Resource Center programs            |        |         |                            | Pueblo of    |      |         |           |           |                                |
| Assistance     | (ADRCs), and for a resource         |        |         |                            | Jemez,       |      |         |           |           |                                |
| Program        | center to help coordinate efforts   |        |         |                            | Pueblo of    |      |         |           |           |                                |
|                | to inform older Americans about     |        |         |                            |              |      |         |           |           |                                |
| Funding for    | available Federal and State         |        |         |                            | San Felipe,  |      |         |           |           |                                |
| Title VI       | benefits available.                 |        |         |                            | Pueblo of    |      |         |           |           |                                |
| Native         | borionte avanabio.                  |        |         |                            | Taos,        |      |         |           |           |                                |
| American       |                                     |        |         |                            | Pueblo of    |      |         |           |           |                                |
|                |                                     |        |         |                            | Zuni, San    |      |         |           |           |                                |
| Programs       |                                     |        |         |                            |              |      |         |           |           |                                |
|                |                                     |        |         |                            | Juan         |      |         |           |           |                                |
|                |                                     |        |         |                            | Pueblo,      |      |         |           |           |                                |
|                |                                     |        |         |                            | Santa        |      |         |           |           |                                |
|                |                                     |        |         |                            | Clara        |      |         |           |           |                                |
|                |                                     |        |         |                            |              |      |         |           |           |                                |
|                |                                     |        |         |                            | Pueblo,      |      |         |           |           |                                |
|                |                                     |        |         |                            | Santo        |      |         |           |           |                                |
|                |                                     |        |         |                            | Domingo      |      |         |           |           |                                |
|                |                                     |        |         |                            | Pueblo       |      |         |           |           |                                |
|                |                                     |        |         |                            |              |      |         |           |           |                                |
|                |                                     |        |         |                            | Tribe)       |      |         |           |           |                                |
|                |                                     |        |         |                            |              |      |         |           |           |                                |

| Option A Medicare Improvemen t for Patients     | Pa<br>20<br>Se       | dedicare Improvements for latients and Providers Act of 008 (MIPPA) was amended in lection 3306 to provide   | N/A | N/A | of a State from a State that: 1) received an award to implement ADRCs | Variable<br>Amounts | ALTSD | ALTSD | N/A | N/A | \$371,358 | N/A |
|---|----------------------|--|-----|-----|---|---------------------|-------|-------|-----|-----|-----------|-----|
| and Providers Act (MIPPA) Affordable            | ot<br>ac<br>up<br>w  | dditional funding for Medicare utreach and enrollment ctivities. This legislation builds pon 2008 MIPPA legislation which provided for beneficiary |     |     | through the AoA(Formula<br>Funding)                                   |                     |       |       |     |     |           |     |
| Care Act<br>Medicare<br>Beneficiary<br>Outreach | to<br>A:<br>Ai<br>(A | utreach and included funding<br>o State Health Insurance<br>ssistance Programs (SHIPs),<br>rea Agencies on Aging<br>AAAs), Aging and Disability    |     |     |   |                     |       |       |     |     |           |     |
| and<br>Assistance<br>Program                    | (A<br>ce<br>to<br>av | ADRCs), and for a resource<br>enter to help coordinate efforts<br>o inform older Americans about<br>vailable Federal and State                     |     |     |   |                     |       |       |     |     |           |     |
|   | be                   | enefits available.   |     |     |   |                     |       |       |     |     |           |     |

|            | 00.646 | Tr                                 |        |         | 0.1 0.1-1-                   |              |      |       |           |           |           |                        |
|------------|--------|------------------------------------|--------|---------|------------------------------|--------------|------|-------|-----------|-----------|-----------|------------------------|
| Option B.  | 93.048 | To serve as visible and trusted    | 6/3/10 | 7/30/10 | Only a State agency or       |              | None | ALTSD | 7/29/2010 | 9/27/2010 | \$500,000 | http://www07.grants.go |
| Options    |        | sources of information on the      |        |         | instrument of a State from   | 0 total      |      |       |           |           |           | v/search/search.do;ise |
| Counseling |        | full range of long-term care       |        |         | a State that: 1) received an | avaliable    |      |       |           |           |           | ssionid=gx4WMQChp      |
|            |        | options that are available in the  |        |         | award to implement           |              |      |       |           |           |           |                        |
| ADRC       |        | community, including both          |        |         | ADRCs through the AoA        | with award   |      |       |           |           |           | wsQS1tTx6Q1hF9vJyB     |
| Options    |        | institutional and home and         |        |         | and CMS ADRC grants          | ceiling of   |      |       |           |           |           | nTw0QhQ327kRfTB9Z      |
| Counseling |        | community-based care; to           |        |         | funded in fiscal years       | \$600,000    |      |       |           |           |           | nyfgNTf3!-             |
| and        |        | provide personalized and           |        |         | 2003, 2004, 2005 and         | and floor of |      |       |           |           |           | 228465525?oppld=549    |
|            |        | consumer friendly assistance to    |        |         | 2009, and/or the CMS         |              |      |       |           |           |           | · ·                    |
| Assistance |        | empower people to make             |        |         | Person-Centered Hospital     | \$400,000.   |      |       |           |           |           | 48&mode=VIEW           |
| Programs   |        | informed decisions about their     |        |         | Discharge Planning Model     |              |      |       |           |           |           |                        |
|            |        | care options; to provide           |        |         | Grants funded in fiscal      | anticipated  |      |       |           |           |           |                        |
|            |        | coordinated and streamlined        |        |         | years 2008 and 2009 may      | there will   |      |       |           |           |           |                        |
|            |        | access to all publicly supported   |        |         | apply for this funding       | be a total   |      |       |           |           |           |                        |
|            |        | long-term care options so that     |        |         | opportunity; and 2)          |              |      |       |           |           |           |                        |
|            |        | consumers can obtain the care      |        |         | continues to implement       | of 25        |      |       |           |           |           |                        |
|            |        | they need through a single         |        |         | and operate the ADRC         | awards.      |      |       |           |           |           |                        |
|            |        | intake, assessment and             |        |         | activities funded through    |              |      |       |           |           |           |                        |
|            |        | eligibility determination process; |        |         | their grant award(s), may    |              |      |       |           |           |           |                        |
|            |        | to help people to plan ahead for   |        |         | apply for this funding       |              |      |       |           |           |           |                        |
|            |        | their future long-term care        |        |         | opportunity. AoA will        |              |      |       |           |           |           |                        |
|            |        | needs; and to assist, in           |        |         | accept only one application  |              |      |       |           |           |           |                        |
|            |        | coordination with the State        |        |         | per State. The applicant     |              |      |       |           |           |           |                        |
|            |        | Health Insurance Assistance        |        |         | agency must have the         |              |      |       |           |           |           |                        |
|            |        | Program, Medicare                  |        |         | support and active           |              |      |       |           |           |           |                        |
|            |        | beneficiaries in understanding     |        |         | participation of the State   |              |      |       |           |           |           |                        |
|            |        | and accessing the Prescription     |        |         | Unit on Aging,               |              |      |       |           |           |           |                        |
|            |        | Drug Coverage and prevention       |        |         |                              |              |      |       |           |           |           |                        |
|            |        | health benefits available under    |        |         |                              |              |      |       |           |           |           |                        |
|            |        | the Medicare Modernization Act.    |        |         |                              |              |      |       |           |           |           |                        |
|            |        |                                    |        |         |                              |              |      |       |           |           |           |                        |
|            |        |                                    |        |         |                              |              |      |       |           |           |           |                        |
|            |        |                                    |        |         |                              |              |      |       |           |           |           |                        |
|            |        |                                    |        |         |                              |              |      |       |           |           |           |                        |
|            |        |                                    |        |         |                              |              |      |       |           |           |           |                        |
|            |        |                                    |        |         |                              |              |      |       |           |           |           |                        |
|            |        |                                    |        |         |                              |              |      |       |           |           |           |                        |
|            |        |                                    |        |         |                              |              |      |       |           |           |           |                        |
|            |        |                                    |        |         |                              |              |      |       |           |           |           |                        |

| Dations     | 02 524 | The purpose of this EIP-ACA       | 0/0/10 | 0/07/40 | Mainly State            | A 1-1-1-C       | Nieros | DOLL EDD | 0/05/0040 | 0/20/2010 | ¢227.270  | latter themselves of small services |
|-------------|--------|-----------------------------------|--------|---------|-------------------------|-----------------|--------|----------|-----------|-----------|-----------|-------------------------------------|
|             |        | FOA is to support state and       | 8/3/10 |         | Governments. New Mexico | A total of      | None   | DOH ERD  | 8/25/2010 | 9/30/2010 | \$327,379 | http://www07.grants.go              |
| Protection  |        | local health departments'         |        |         | is named in the RFP     | \$4,500,000     |        |          |           |           |           | v/search/search.do:jse              |
| and         |        | surveillance infrastructure       |        |         | is named in the Ki F    | with ceiling    |        |          |           |           |           | ssionid=DrTrMZFJ4Zn                 |
| Affordable  |        |                                   |        |         |                         | of              |        |          |           |           |           | Lwnt4SsjLylK1xZc0ysb                |
|             |        | through enhancement of the        |        |         |                         | Φ./ F.O. O.O.O. |        |          |           |           |           | • •                                 |
| Care Act    |        | epidemiology and laboratory       |        |         |                         | \$650,000       |        |          |           |           |           | nyq9PpSyQtHLqT2qFX                  |
| (PPACA);    |        | capacity of the existing EIP      |        |         |                         | and a total     |        |          |           |           |           | 34X!-                               |
| Emerging    |        | network. Over the past 15         |        |         |                         | of 10           |        |          |           |           |           | 357751914?oppld=563                 |
| Infections  |        | years, the EIP network has        |        |         |                         | awards.         |        |          |           |           |           | 19&mode=VIEW                        |
|             |        | proved to be a national resource  |        |         |                         | awaius.         |        |          |           |           |           | 1701110de – VIL VV                  |
| Program     |        | for conducting active,            |        |         |                         |                 |        |          |           |           |           |                                     |
| (EIP);      |        | population-based surveillance     |        |         |                         |                 |        |          |           |           |           |                                     |
| Enhancing   |        | and special studies for invasive  |        |         |                         |                 |        |          |           |           |           |                                     |
| Epidemiolog |        | bacterial diseases, foodborne     |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        | pathogens, healthcare             |        |         |                         |                 |        |          |           |           |           |                                     |
| y and       |        | associated infections (HAIs),     |        |         |                         |                 |        |          |           |           |           |                                     |
| Laboratory  |        | influenza, and many other         |        |         |                         |                 |        |          |           |           |           |                                     |
| Capacity    |        | infectious diseases. The          |        |         |                         |                 |        |          |           |           |           |                                     |
| (U01)       |        | network has been instrumental     |        |         |                         |                 |        |          |           |           |           |                                     |
| (001)       |        | in measuring the impact of the 7- |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        | valent pneumococcal conjugate     |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        | vaccine, informing and            |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        | evaluating treatment guidelines   |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        | for Group B Streptococcus,        |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        | estimating the burden of          |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        | foodborne illness, documenting    |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        | the emergence of community-       |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        | associated methicillin-resistant  |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        | Staphylococcus aureus, and        |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        | monitoring the safety of the      |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        | 2009 H1N1 vaccine as part of      |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        |                                   |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        | the influenza vaccine safety      |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        | network                           |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        |                                   |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        |                                   |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        |                                   |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        |                                   |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        |                                   |        |         |                         |                 |        |          |           |           |           |                                     |
|             |        |                                   |        |         |                         |                 |        |          |           |           |           |                                     |

| CDC           | N/A      | Hiring and training of  | N/A      | N/A      | Supplemental funding                                   | N/A         | Formula     | DOH         | N/A      | 9/24/2010 | \$380,081 | N/A                          |
|---------------|----------|---|----------|----------|--|-------------|-------------|-------------|----------|-----------|-----------|------------------------------|
| Epidemiolog   | 1 4/ / 1 | epidemiologists,  | 14/74    | 14/71    |  | 14//        | funding no  | DOTT        | 14/74    | 712412010 | Ψ300,001  | 14/71                        |
| y &           |          | laboratory scientists, and                                    |          |          |  |             | application |             |          |           |           |                              |
| Laboratory    |          | health information  |          |          |  |             | was         |             |          |           |           |                              |
| Capacity/Em   |          | specialists who can work                                      |          |          |  |             | required    |             |          |           |           |                              |
| erging        |          |   |          |          |  |             | required    |             |          |           |           |                              |
| Infections    |          | on multiple infectious  |          |          |  |             |             |             |          |           |           |                              |
|               |          | diseases. Increasing the                                      |          |          |  |             |             |             |          |           |           |                              |
| Program       |          | number of modern, well-                                       |          |          |  |             |             |             |          |           |           |                              |
| Grant         |          | equipped public health  |          |          |  |             |             |             |          |           |           |                              |
|               |          | laboratories using  |          |          |  |             |             |             |          |           |           |                              |
|               |          | electronic laboratory   |          |          |  |             |             |             |          |           |           |                              |
|               |          | information systems to  |          |          |  |             |             |             |          |           |           |                              |
|               |          | manage and exchange   |          |          |  |             |             |             |          |           |           |                              |
|               |          | information effectively                                       |          |          |  |             |             |             |          |           |           |                              |
|               |          | between labs and public                                       |          |          |  |             |             |             |          |           |           |                              |
|               |          | health departments.   |          |          |  |             |             |             |          |           |           |                              |
|               |          | ·   |          |          |  |             |             |             |          |           |           |                              |
|               |          |   |          |          |  |             |             |             |          |           |           |                              |
| Strengthenin  | 93.507   | The goal of the "Strengthening                                | 7/8/2010 | 8/9/2010 | ligible applicants include all                         | \$212,500,0 | None        | DOH PHD     | 8/8/2010 | 9/20/2010 | \$199,877 | http://www.grants.gov/s      |
| g Public      |          | Public Health Infrastructure for                              |          |          | 50 states, Washington,                                 | 00 total.   |             | will be the |          |           | Ψ1>>,011  | earch/search.do;isessi       |
| Health        |          | Improved Health Outcomes"                                     |          |          | D.C., 9 large local health departments supporting      | There will  |             | lead and IT |          |           |           | onid=LTp0M15hGSdyZ           |
| Infrastructur |          | program is to systematically increase the performance         |          |          | cities with populations of 1                           | be 85       |             | will be a   |          |           |           | RPhkn0QvrWnt7bLwY            |
| e for         |          | management capacity of public                                 |          |          | million or more inhabitants                            | awards      |             | partner     |          |           |           | 5VJMFJfgK0kxLZjV02           |
| Improved      |          | health departments in order to                                |          |          | (Chicago, Illinois; Dallas,                            | with a      |             | partito     |          |           |           | plm5!931914360?oppl          |
| Health        |          | ensure that public health goals                               |          |          | Texas; Houston Texas;                                  | ceiling of  |             |             |          |           |           | <u>d=55684&amp;mode=VIEW</u> |
| Outcomes      |          | are effectively and efficiently                               |          |          | Los Angeles, California;                               | \$3,100,000 |             |             |          |           |           | u=33004&IIIoue=VILVV         |
| Outcomes      |          | met. This program will increase                               |          |          | New York City, New York;                               | and a floor |             |             |          |           |           |                              |
|               |          | the capacity and ability of health                            |          |          | Philadelphia,<br>Pennsylvania; Phoenix,                |             |             |             |          |           |           |                              |
|               |          | departments to meet national public health standards, such as |          |          | A  | of          |             |             |          |           |           |                              |
|               |          | those of the National Public                                  |          |          | Texas; San Diego,                                      | \$1,100,000 |             |             |          |           |           |                              |
|               |          | Health Performance Standard                                   |          |          | California), 5 U.S.                                    |             |             |             |          |           |           |                              |
|               |          | Program   |          |          | Territories, 3 U.S. Affiliated                         |             |             |             |          |           |           |                              |
|               |          | (http://www.cdc.gov/od/ocphp/n                                |          |          | Pacific Islands and up to 7                            |             |             |             |          |           |           |                              |
|               |          | phpsp/index.htm), Public Health                               |          |          | federally-recognized tribes with an established public |             |             |             |          |           |           |                              |
|               |          | Accreditation Board   |          |          | health department                                      |             |             |             |          |           |           |                              |
|               |          | (http://www.phaboard.org/), and National Quality Forum        |          |          | structure (or their                                    |             |             |             |          |           |           |                              |
|               |          | (http://www.qualityforum.org/).                               |          |          | equivalent) that provide                               |             |             |             |          |           |           |                              |
|               |          | (p.//quantyrorannorg/).                                       |          |          | public health services to                              |             |             |             |          |           |           |                              |
|               |          |   |          |          | their tribal members, or                               |             |             |             |          |           |           |                              |
|               |          |   |          |          | bona fide agents of any of                             |             |             |             |          |           |           |                              |
|               |          |   |          |          | the eligible entities.                                 |             |             |             |          |           |           |                              |
|               |          |   |          |          |  |             |             |             |          |           |           |                              |
|               |          |   |          |          |  |             |             |             |          |           |           |                              |
|               |          |   |          |          |  |             |             |             |          |           |           |                              |

| CDC<br>Tobacco<br>Quitlines<br>Grants              | N/A | State supplemental funding for healthy communities totaling \$3.8 million is being divided among 46 locations. The funds will be used to help states implement plans to reduce tobacco use through regulatory and educational arenas, as well as enhance and expand the national network of tobacco cessation quit lines to significantly increase the number of tobacco users who quit. This funding is possible under the | N/A | N/A | Supplemental funding  | Supplemen<br>tal Funding<br>from CDC  | None | DOH was<br>awarded<br>Formula<br>funds | N/A | 9/24/2010 | \$60,340 | N/A   |
|--|-----|---|-----|-----|---|---|------|--|-----|-----------|----------|---|
| Mental<br>health care<br>transformati<br>on grants | N/A | new Prevention and Public Health Fund created by the Affordable Care Act. In addition to putting needed infrastructure into place, the grants will fund services including supportive housing, employment and education programs, prevention and wellness services, trauma- informed care programs, and special services for military families.   | N/A | N/A | part of its strategic initiative on health reform 20 new mental health transformation grants totaling up to \$71.5 million over the next five years. The purpose of the program is to bring about needed changes in the organization, management and delivery of public mental health services. | \$14.3<br>million per<br>year will be<br>available to<br>fund the 20<br>grants.<br>Awardees<br>are eligible<br>for up to<br>\$750,000<br>per year for<br>up to five<br>years. |      | Grant<br>Awarded to<br>HSD             | N/A | 10/9/2010 |          | http://www.samhsa.gov<br>/newsroom/advisories/<br>1010081619.aspx |

| Grants from the Affordable   | N/A | The Capital Development (CD) program grants, administered by HHS'  | N/A | N/A | Grant awarded to First<br>Choice Community<br>Healthcare, Inc. | \$727<br>million to<br>143   | None | N/A | N/A | 10/8/2010 | http://www.hhs.gov/ne<br>ws/press/2010pres/10/<br>chc_chart.html |
|--|-----|--|-----|-----|--|--|------|-----|-----|-----------|--|
| Care Act to upgrade and expand community health centers  |     | Health Resources and Services Administration (HRSA), will support major construction and renovation at 143 community health centers nationwide. This builds on the more than \$2 billion investment in community health centers in the American Recovery and Reinvestment Act.   |     |     | Albuquerque, NM  | community<br>health<br>centers<br>across the<br>country  |      |     |     |           | CHC CHAILHUM   |
| Grants from<br>the<br>Affordable<br>Care Act to<br>upgrade and<br>expand<br>community<br>health<br>centers |     | The Capital Development (CD) program grants, administered by HHS' Health Resources and Services Administration (HRSA), will support major construction and renovation at 143 community health centers nationwide. This builds on the more than \$2 billion investment in community health centers in the American Recovery and Reinvestment Act. |     | N/A | Grant awarded to Ben<br>Archer Health Center<br>Hatch, NM      | \$727<br>million to<br>143<br>community<br>health<br>centers<br>across the<br>country<br>(For<br>buildings<br>not<br>operations) | None | N/A | N/A | 10/8/2010 | http://www.hhs.gov/ne<br>ws/press/2010pres/10/<br>chc_chart.html |

| Grants from<br>the<br>Affordable<br>Care Act to<br>upgrade and<br>expand<br>community<br>health<br>centers | The Capital Development (CD) program grants, administered by HHS' Health Resources and Services Administration (HRSA), will support major construction and renovation at 143 community health centers nationwide. This builds on the more than \$2 billion investment in community health centers in the American Recovery and Reinvestment Act. | N/A | Grant awarded to La<br>Clinica de Familia, Inc.Las<br>Cruces, NM | \$727<br>million to<br>143<br>community<br>health<br>centers<br>across the<br>country | None | N/A | N/A | 10/8/2010 | http://www.hhs.gov/ne<br>ws/press/2010pres/10/<br>chc_chart.html |
|--|--|-----|--|---|------|-----|-----|-----------|--|
| Grants from<br>the<br>Affordable<br>Care Act to<br>upgrade and<br>expand<br>community<br>health<br>centers | The Capital Development (CD) program grants, administered by HHS' Health Resources and Services Administration (HRSA), will support major construction and renovation at 143 community health centers nationwide. This builds on the more than \$2 billion investment in community health centers in the American Recovery and Reinvestment Act. | N/A | Grant awarded to Hidalgo<br>Medical Services<br>Lordsburg, NM    | \$727<br>million to<br>143<br>community<br>health<br>centers<br>across the<br>country | None | N/A | N/A | 10/8/2010 | http://www.hhs.gov/ne<br>ws/press/2010pres/10/<br>chc_chart.html |

| Qualifying<br>Therapeutic<br>Discovery<br>Project<br>Grants for<br>the State of<br>New Mexico<br>(PPACA) | N/A | Variable Private Entities have these grants   | N/A | N/A | Grants Awards to Various<br>Research Agencies        | Various<br>Grant<br>Amounts  | N/A  | N/A | N/A | 11/1/2010  | \$4,725,876 | N/A  |
|--|-----|---|-----|-----|--|--|------|-----|-----|------------|-------------|--|
| Develop and<br>Modernize<br>Community<br>Health<br>Centers   | N/A | Health Center Cooperative Agreements support the development and operation of health centers. Cooperative agreement organizations use training and technical assistance funds to support the following core functions related to supporting health centers: community development, expansion planning, patient- centered medical home development, meaningful use health information technology adoption and workforce development. |     | N/A | Grant Awarded to New Mexico Primary Care Association | A total of<br>\$8 Million<br>was<br>awarded in<br>various<br>amounts | None | N/A | N/A | 11/19/2010 |             | http://www.hhs.gov/ne<br>ws/press/2010pres/11/<br>20101119b.html         |
| Qualifying<br>Therapeutic<br>Discovery<br>Project<br>Grants for<br>the State of<br>New Mexico<br>(PPACA) | N/A | Various   | N/A | N/A | Various Research<br>Institutions                     | Various<br>Amounts   | None | N/A | N/A | 11/1/2010  |             | http://www.irs.gov/busi<br>nesses/small/article/0,,i<br>d=229003,00.html |

| Money Follows the Person Rebalancing Grant Demonstrati on Patient Protection and Affordable Healthcare Act Section 2403 |        | Building and strengthening their MFP Demonstration Programs and for additional States to participate. The law amends section 6071 of the DRA to make the following changes: 1) Extends the MFP Demonstration Program through September 30, 2016, and appropriates an additional \$450 million for each FY 2012-2016, totaling an additional \$2.25 billion. Any remaining MFP appropriation at the end of each FY carries over to subsequent FYs and is available to make grant awards to current and new grantees until FY 2016. Grant awards shall be made available to the State for the FY in which the award was received and for additional FYs. As such, any unused portion of a State grant award made in 2016 would be available to the State until 2020. Under the Affordable Care Act, individuals that reside in an institution for more than 90 consecutive days are now eligible to participate in the demonstration. However, one exception applies in the expanded definition of eligibility: days that an | 7/23/10 | 1/7/11  | State governments | \$22,500,00<br>0 total<br>funds with<br>20 awards | None   | Yes HSD will submit application | HSD with collaboratio n with ALTSD and DOH | 2/22/2011 | http://www.grants.gov/s<br>earch/search.do:jsessi<br>onid=drc5MJ5K1Y5Q<br>WQfmvQ80vLZkv292c<br>YhrTjv9RLjXv4bbyl6CY<br>v2b!-<br>169038256?oppId=560<br>91&mode=VIEW         |
|---|--------|--|---------|---------|-------------------|---|--|---------------------------------|--|-----------|---|
| Nationwide Program for National and State Background Checks for Direct Patient  | 70.500 | Title VI, Subtitle B, Part III,<br>Subtitle C, Section 6201 of the<br>Affordable Care Act (ACA) directs<br>the Secretary of Health and<br>Human Services (HHS), to<br>establish a nationwide program to<br>identify efficient, effective, and<br>economical procedures for long<br>term care facilities and providers<br>to conduct background checks on   | 4/18/11 | 6/30/11 | State Governments | amout<br>total.                                   | Yes<br>depends on<br>amount of<br>grant<br>awarded | Yes DOH<br>(DHI)                | 8/9/2010                                   | Dec-10    | http://www07.grants.go<br>v/search/search.do:jse<br>ssionid=d1HpMbHQvs<br>40vHj0MpxTzZpsN8H9<br>nftFGC1pHKGrnSxyPc<br>FD2NQ8!1680187280?<br>mode=VIEWREVISIO<br>NS&revNum=0 |

21 3/31/2010

| GrantName  | CFDA   | Grant Description   | Release<br>Date | Applicatio<br>n Due | Eligible Applicants  | Grant<br>Amount  | Cost Sharing<br>Matching                         | Apply Yes<br>No | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
|--|--------|---|-----------------|---------------------|--|--|--|-----------------|--------------------|-----------------------|-------------------------------|--|
| Agency DWS   |        |   |                 |                     |  |  |  |                 |                    |                       |                               |  |
| Affordable Care Act: State Health Care Workforce Planning Grants | 93.509 | The State Health Care Workforce Development Grant program authorizes the Secretary of Health and Human Services (HHS), acting through the Administrator of the Health Resources and Service Administration (HRSA), to administer planning and implementation grants for the purposes of enabling State partnerships (1) to complete comprehensive health care workforce development planning and (2) to implement those plans or carry out activities as defined by the State application in order to address current and projected workforce demands within the State. |                 |                     | Planning Grant Eligibility To be eligible to receive a planning grant, an applicant must be an eligible State partnership. Generally, an eligible partnership will be a State Workforce Investment Board | \$2,000,000<br>Grant total<br>with a<br>ceiling of<br>\$150,000<br>with 30 total<br>awards | Sharing Ratio<br>(Federal:Non-<br>Federal): 15:1 |                 | 7/19/2010          | 9/24/2010             |                               | https://grants.hrsa.gov/webExternal/FundingOppDetails.asp?FundingCycleId=70332C9D-C405-4199-BFE2-78FBF3C52CD3&ViewMode=EU&GoBack=&PrintMode=&OnlineAvailabilityFlag=&pageNumber=&version=&NC=&Popup= |
|  |        |   |                 |                     |  |  |  |                 |                    | Total:                | \$150,000                     |  |
| NM Dept of<br>Health   |        |   |                 |                     |  |  |  |                 |                    |                       |                               |  |

| State Personal Responsibilit y Education Program (PREP) | 93.092 The Patient Protection and Affordable Care Act, 2010 (Pub.L. 111-148) amends Title V of the Social Security Act (42 U.S.C. 701 et seq.) by adding section 513, Personal Responsibility Education. The Administration for Children and Families' (ACF) Family and Youth Services Bureau (FYSB) is accepting applications from States and Territories for the development and implementation of the Personal Responsibility Education Program (PREP). The purpose of this program is to educate youth between the ages of 10 and 19 on both abstinence and contraception for the prevention of pregnancy and sexually transmitted infections, including HIV/AIDS. |  | 8/30/10 | State Governments | Each state<br>will be<br>awarded a<br>minimun of<br>\$250,000 |  | DOH<br>Family<br>Planning<br>Program | 8/30/2010 | 9/30/2010 |  | http://www.acf.hhs.gov/gr<br>ants/open/foa/view/HHS-<br>2010-ACF-ACYF-PREP-<br>0125 |
|---|--|--|---------|-------------------|---|--|--------------------------------------|-----------|-----------|--|---|
|---|--|--|---------|-------------------|---|--|--------------------------------------|-----------|-----------|--|---|

| Patient Protection and Affordable Care Act (PPACA);                      | 93.521 | The purpose of this EIP-ACA FOA is to support state and local health departments' surveillance infrastructure through enhancement of the epidemiology and laboratory capacity of the existing EIP   | 8/3/10 | Mainly State Governments.<br>New Mexico is named in the<br>RFP | A total of<br>\$4,500,000<br>with ceiling<br>of \$650,000<br>and a total<br>of 10 | None | DOH ERD | 8/25/2010 | 9/30/2010 | http://www07.grants.gov/<br>search/search.do:jsessio<br>nid=DrTrMZFJ4ZnLwnt4<br>SsjLylK1xZc0ysbnyq9Pp<br>SyQtHLqT2qFX34X!-<br>357751914?oppId=56319 |
|--|--------|---|--------|--|---|------|---------|-----------|-----------|---|
| Emerging Infections Program (EIP); Enhancing Epidemiology and Laboratory |        | network. Over the past 15 years, the EIP network has proved to be a national resource for conducting active, population-based surveillance and special studies for invasive bacterial diseases, foodborne pathogens, healthcare associated infections (HAIs), influenza, and many other                                     |        |  | awards.   |      |         |           |           | &mode=VIEW  |
| Capacity<br>(U01)  |        | infectious diseases. The network has been instrumental in measuring the impact of the 7-valent pneumococcal conjugate vaccine, informing and evaluating treatment guidelines for Group B Streptococcus, estimating the burden of foodborne illness, documenting the emergence of community-associated methicillin-resistant |        |  |   |      |         |           |           |   |
|  |        | Staphylococcus aureus, and monitoring the safety of the 2009 H1N1 vaccine as part of the influenza vaccine safety network   |        |  |   |      |         |           |           |   |

| CDC          | N/A | Hiring and training of                       | N/A  | N/A  | Supplemental funding  | N/A        | Formula      | DOH     | N/A  | 9/24/2010 | \$380,081 | NI/A |
|--------------|-----|--|------|------|-----------------------|------------|--------------|---------|------|-----------|-----------|------|
| Epidemiology |     | epidemiologists,                             | IN/A | IN/A | - approximation and a | IN/A       | funding no   | DOIT    | IN/A | 7/24/2010 | \$300,001 | IN/A |
| & Laboratory |     | laboratory scientists,                       |      |      |                       |            | application  |         |      |           |           |      |
| Capacity/Em  |     | and health information                       |      |      |                       |            |              |         |      |           |           |      |
| -            |     |  |      |      |                       |            | was required |         |      |           |           |      |
| erging       |     | specialists who can                          |      |      |                       |            |              |         |      |           |           |      |
| Infections   |     | work on multiple                             |      |      |                       |            |              |         |      |           |           |      |
| Program      |     | infectious diseases.                         |      |      |                       |            |              |         |      |           |           |      |
| Grant        |     | Increasing the number                        |      |      |                       |            |              |         |      |           |           |      |
|              |     | of modern, well-                             |      |      |                       |            |              |         |      |           |           |      |
|              |     | equipped public health                       |      |      |                       |            |              |         |      |           |           |      |
|              |     | laboratories using                           |      |      |                       |            |              |         |      |           |           |      |
|              |     | electronic laboratory                        |      |      |                       |            |              |         |      |           |           |      |
|              |     | information systems to                       |      |      |                       |            |              |         |      |           |           |      |
|              |     | manage and exchange                          |      |      |                       |            |              |         |      |           |           |      |
|              |     | information effectively                      |      |      |                       |            |              |         |      |           |           |      |
|              |     | between labs and                             |      |      |                       |            |              |         |      |           |           |      |
|              |     | public health                                |      |      |                       |            |              |         |      |           |           |      |
|              |     | departments.                                 |      |      |                       |            |              |         |      |           |           |      |
|              |     | departments.                                 |      |      |                       |            |              |         |      |           |           |      |
|              |     |  |      |      |                       |            |              |         |      |           |           |      |
|              | N/A | State supplemental funding                   | N/A  | N/A  | Supplemental funding  | Supplement | None         | DOH was | N/A  | 9/24/2010 | \$60,340  | N/A  |
| Tobacco      |     | for healthy communities                      |      |      |                       | al Funding |              | awarded |      |           |           |      |
| Quitlines    |     | totaling \$3.8 million is being              |      |      |                       | from CDC   |              | Formula |      |           |           |      |
| Grants       |     | divided among 46 locations.                  |      |      |                       |            |              | funds   |      |           |           |      |
|              |     | The funds will be used to                    |      |      |                       |            |              |         |      |           |           |      |
|              |     | help states implement plans                  |      |      |                       |            |              |         |      |           |           |      |
|              |     | to reduce tobacco use through regulatory and |      |      |                       |            |              |         |      |           |           |      |
|              |     | educational arenas, as well                  |      |      |                       |            |              |         |      |           |           |      |
|              |     | as enhance and expand the                    |      |      |                       |            |              |         |      |           |           |      |
|              |     | national network of tobacco                  |      |      |                       |            |              |         |      |           |           |      |
|              |     | cessation quit lines to                      |      |      |                       |            |              |         |      |           |           |      |
|              |     | significantly increase the                   |      |      |                       |            |              |         |      |           |           |      |
|              |     | number of tobacco users                      |      |      |                       |            |              |         |      |           |           |      |
|              |     | who quit. This funding is                    |      |      |                       |            |              |         |      |           |           |      |
|              |     | possible under the new                       |      |      |                       |            |              |         |      |           |           |      |
|              |     | Prevention and Public                        |      |      |                       |            |              |         |      |           |           |      |
|              |     | Health Fund created by the                   |      |      |                       |            |              |         |      |           |           |      |
|              |     | Affordable Care Act.                         |      |      |                       |            |              |         |      |           |           |      |

| Strengthenin<br>g Public<br>Health<br>Infrastructure<br>for Improved<br>Health<br>Outcomes |  | The goal of the "Strengthening Public Health Infrastructure for Improved Health Outcomes" program is to systematically increase the performance management capacity of public health departments in order to ensure that public health goals are effectively and efficiently met. This program will increase the capacity and ability of health departments to meet national public health standards, such as those of the National Public Health Performance Standard Program (http://www.cdc.gov/od/ocphp/nphpsp/index.htm), Public Health Accreditation Board (http://www.phaboard.org/), and National Quality Forum (http://www.qualityforum.org/) |  |  | ligible applicants include all 50 states, Washington, D.C., 9 large local health departments supporting cities with populations of 1 million or more inhabitants (Chicago, Illinois; Dallas, Texas; Houston Texas; Los Angeles, California; New York City, New York; Philadelphia, Pennsylvania; Phoenix, Arizona; San Antonio, Texas; San Diego, California), 5 U.S. Territories, 3 U.S. Affiliated Pacific Islands and up to 7 federally-recognized tribes with an established public health department structure (or their equivalent) that provide public health services to their tribal members, or bona fide agents of any of the eligible entities. | awards with<br>a ceiling of<br>\$3,100,000<br>and a floor<br>of<br>\$1,100,000. |  | DOH PHD<br>will be the<br>lead and IT<br>will be a<br>partner | 8/8/2010 | 9/20/2010 | \$199,877 | http://www.grants.gov/se<br>arch/search.do:jsessionid<br>=LTp0M15hGSdyZRPhk<br>n0QvrWnt7bLwY5VJMFJ<br>fgK0kxLZjV02plm5!9319<br>14360?oppId=55684&mo<br>de=VIEW |
|--|--|--|--|--|---|---|--|---|----------|-----------|-----------|--|
|--|--|--|--|--|---|---|--|---|----------|-----------|-----------|--|

| Nationwide Program for National and State Background Checks for Direct Patient Access Employees of Long Term Care Facilities and Providers | providers to conduct<br>background checks on a<br>statewide basis on all<br>prospective direct patient<br>access employees. CMS is | 6/30/11 | There is no grant amout total. There is a ceiling of \$3,000,000 and floor of \$1,500,000. | Yes DOH<br>(DHI) | 8/9/2010 | Dec-10 | \$1,500,000 | http://www07.grants.gov/search/search.do:jsessionid=d1HpMbHQvs40vHj0MpxTzZpsN8H9nftFGC1pHKGrnSxyPcFD2NQ8!1680187280?mode=VIEWREVISIONS&revNum=0 |
|--|--|---------|--|------------------|----------|--------|-------------|---|
| NM Human<br>Services<br>Dept.  | described in section 6201 of   |         |  |                  |          | Total: | \$2,814,248 |   |

| State Planning and Establishmen t Grants for the Affordable Care Act's Exchanges | Affordable Care Act provides funding assistance to the States for the planning and establishment of American Health Benefit Exchanges (?Exchanges?). The Affordable Care Act provides that each State may elect to establish an Exchange that would: 1) facilitate the purchase of qualified health plans; 2) provide for the establishment of a Small Business Health Options Program (?SHOP Exchange?) designed to assist qualified employers in facilitating the enrollment of their employees in QHPs offered in the SHOP exchange; and 3) meet other requirements specified in the Act. The funding awarded pursuant to this Funding Opportunity Announcement is intended to assist States with initial planning activities related to | 9/1/10 | State Governments | Total of<br>\$51,000,00<br>0 with a<br>ceiling of<br>\$1,000,000.<br>51 Awards<br>are<br>Anticipated | None | Yes HSD | 9/1/2010 | 9/30/2010 | http://www.grants.gov/se<br>arch/search.do:jsessionid<br>=yFPDMR6BhZ1nWvWd<br>Fffh4ZIPxh6Jc2znhwj862<br>8sQk98jht0PIK1!1087699<br>643?oppld=56204&mode<br>=VIEW |
|--|---|--------|-------------------|--|------|---------|----------|-----------|---|
|  | Announcement is intended to assist States with initial  |        |                   |  |      |         |          |           |   |

| Mental health care transformation grants  | In addition to putting needed infrastructure into place, the grants will fund services including supportive housing, employment and education programs, prevention and wellness services, trauma-informed care programs, and special services for military families.  | N/A | N/A    | SAMHSA announced as part of its strategic initiative on health reform 20 new mental health transformation grants totaling up to \$71.5 million over the next five years. The purpose of the program is to bring about needed changes in the organization, management and delivery of public mental health services. | million per<br>year will be<br>available to<br>fund the 20<br>grants.<br>Awardees | None | Grant<br>Awarded to<br>HSD            | N/A                                       | 10/9/2010 | \$734,500    | http://www.samhsa.gov/n<br>ewsroom/advisories/1010<br>081619.aspx   |
|---|---|-----|--------|---|---|------|---------------------------------------|---|-----------|--------------|---|
| Money Follows the Person Rebalancing Grant Demonstratio n Patient Protection and Affordable Healthcare Act Section 2403 | Building and strengthening their MFP Demonstration Programs and for additional States to participate. The law amends section 6071 of the DRA to make the following changes: 1) Extends the MFP Demonstration Program through September 30, 2016, and appropriates an additional \$450 million for each FY 2012-2016, totaling an additional \$2.25 billion. Any remaining MFP appropriation at the end of each FY carries over to subsequent FYs and is available to make grant awards to current and new grantees until FY 2016. Grant awards shall be made available to the State for the FY in which the award was received and for additional FYs. As such, any unused portion of a State grant award made in 2016 would be available to the State until 2020. Under the Affordable Care Act, individuals that reside in an institution for more than 90 consecutive days are now eligible to participate in the demonstration. However, one exception applies in the |     | 1/7/11 | State governments   | \$22,500,00<br>0 total<br>funds with<br>20 awards                                 | None | Yes HSD<br>will submit<br>application | HSD with collaboration with ALTSD and DOH | 2/22/2011 | \$24,320,199 | http://www.grants.gov/se<br>arch/search.do:jsessionid<br>=drc5MJ5K1Y5QWQfmv<br>Q80vLZkv292cYhrTjv9R<br>LjXv4bbyl6CYv2b!-<br>169038256?oppld=56091<br>&mode=VIEW |

|                                    |  |  |  |  | Total: | \$26,054,699 |  |
|------------------------------------|--|--|--|--|--------|--------------|--|
|                                    |  |  |  |  |        |              |  |
|                                    |  |  |  |  |        |              |  |
| Public                             |  |  |  |  |        |              |  |
| Public<br>Regulation<br>Commission |  |  |  |  |        |              |  |
| Division of                        |  |  |  |  |        |              |  |
| Insurance                          |  |  |  |  |        |              |  |
|                                    |  |  |  |  |        |              |  |
|                                    |  |  |  |  |        |              |  |
|                                    |  |  |  |  |        |              |  |
|                                    |  |  |  |  |        |              |  |
|                                    |  |  |  |  |        |              |  |
|                                    |  |  |  |  |        |              |  |
|                                    |  |  |  |  |        |              |  |
|                                    |  |  |  |  |        |              |  |
|                                    |  |  |  |  |        |              |  |
|                                    |  |  |  |  |        |              |  |
|                                    |  |  |  |  |        |              |  |
|                                    |  |  |  |  |        |              |  |
|                                    |  |  |  |  |        |              |  |

| "Grants to<br>States for<br>Health<br>Insurance<br>Premium<br>Review-Cycle<br>I" Office of<br>Consumer<br>Information<br>and<br>Insurance<br>Oversight<br>(OCIIO) | 73.311 | Key components of this oversight require insurers to report certain health insurance rate information to both the Secretary and the States in which they operate, including:1. All increases in rates for health insurance over the prior year that meet the established unreasonable threshold (currently under development);2. Justifications for unreasonable increases in rates prior to their implementation.Public disclosure of this information and insurers will be required to prominently post the information on their respective Internet websites.Section 2794 also provides for a program of grants to states to help the information on their impresses the health insurance. | 6/7/10 | 7/7/10 | State governments | 0 there will<br>be<br>approximat<br>ely 51<br>awards with<br>\$1,000,000<br>award<br>ceiling. | -               | PRC/Insura<br>nce Division | 7/7/2010 | 8/16/2010 | http://www07.grants.gov/search/search.do:jsessionid=NDgpMhnSXgmt7BBMOmFHz1sy46kY7wl22P09N1h2cGTQCcCL2hyF!1386858017?oppId=55029&mode=VIEW |
|---|--------|---|--------|--------|-------------------|---|-----------------|----------------------------|----------|-----------|---|
|   |        | development);2. Justifications  |        |        |                   | _   | •               |                            |          |           |   |
|   |        | rates prior to their  |        |        |                   |   |                 |                            |          |           |   |
|   |        | •   |        |        |                   |   |                 |                            |          |           |   |
| (OCIIO)   |        | •   |        |        |                   |   |                 |                            |          |           |   |
|   |        | information on their respective   |        |        |                   |   |                 |                            |          |           |   |
|   |        |   |        |        |                   |   |                 |                            |          |           |   |
|   |        | grants to states to help them   |        |        |                   |   |                 |                            |          |           |   |
|   |        | improve the health insurance rate review and reporting  |        |        |                   |   | expended in     |                            |          |           |   |
|   |        | process. Congress has   |        |        |                   |   | the fiscal year |                            |          |           |   |
|   |        | appropriated \$250 million for this grant program for the   |        |        |                   |   | ino nodar your  |                            |          |           |   |
|   |        | federal fiscal years (FFYs) of  |        |        |                   |   |                 |                            |          |           |   |
|   |        | 2010-2014. HHS is authorized  |        |        |                   |   |                 |                            |          |           |   |
|   |        | to award this money during multiple award cycles to eligible  |        |        |                   |   |                 |                            |          |           |   |
|   |        | States beginning in FFY 2010.   |        |        |                   |   |                 |                            |          |           |   |
|   |        | Federal regulatory guidance is  |        |        |                   |   |                 |                            |          |           |   |

| Affordable Care Act (ACA) - Consumer Assistance Program Grants | These are grants to States to assist consumers with filing complaints and appeals, assist consumers with enrollment into health coverage, and educate consumers on their rights and responsibilities. In addition, by law they will collect data on consumer inquires and complaints to help the Secretary identify problems in the marketplace and strengthen enforcement. Starting in 2014, programs must also help resolve problems with premium credits for Exchange coverage. |        |   | \$29,000,00<br>0 total with<br>a ceiling of<br>\$3,400,000<br>and floor<br>\$120,00 a<br>total of 56<br>awards | None | PRC/DOI         | 9/10/2010 | 10/19/2010 | \$226,426   | http://www.grants.gov/se<br>arch/search.do:jsessionid<br>=THbqMLpZyhIYTWQSS<br>Wn0cxYyXwN2xdpsFTpt<br>WtXfdPQxVJnM1Prh!-<br>832749192?oppId=56058<br>&mode=VIEW |
|--|--|--------|---|--|------|-----------------|-----------|------------|-------------|---|
| Grants to States for   | Provide awards to states to enhance their current rate review process for health   | 9/1/10 | Five US territories and the 5 states that did not previously apply - Departments of | \$1,000,000  | None | NM<br>Insurance | 7/7/2010  | 8/16/2010  | \$0         | http://www07.grants.gov/search/search.do:jsessio  |
|  |  |        |   |  |      |                 |           | Total:     | \$1,226,426 |   |

| Aging and<br>Long Term<br>Services<br>Department  |  |     |   |                     |       |       |     |     |           |     |
|---|--|-----|---|---------------------|-------|-------|-----|-----|-----------|-----|
| Option A Medicare Improvement for Patients and Providers Act (MIPPA) Affordable Care Act Medicare Beneficiary Outreach and Assistance Program | Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) was amended in Section 3306 to provide additional funding for Medicare outreach and enrollment activities. This legislation builds upon 2008 MIPPA legislation which provided for beneficiary outreach and included funding to State Health Insurance Assistance Programs (SHIPs), Area Agencies on Aging (AAAs), Aging and Disability Resource Center programs (ADRCs), and for a resource center to help coordinate efforts to inform older Americans about available Federal and State benefits available. | N/A | State agency or instrument of a State from a State that: 1) received an award to implement ADRCs through the AoA(Formula Funding) | Variable<br>Amounts | ALTSD | ALTSD | N/A | N/A | \$371,358 | N/A |

| Option B. Options                              | 93.048 | To serve as visible and trusted sources of information                            | 6/3/10  | 7/30/10 | Only a State agency or instrument of a State from a | \$10,000,00<br>0 total                  | None | ALTSD                            | 7/29/2010 | 9/27/2010 | \$500,000   | http://www07.grants.gov/<br>search/search.do;isessio                             |
|--|--------|---|---------|---------|---|---|------|----------------------------------|-----------|-----------|-------------|--|
| 0,000.0  |        |   |         |         | <u> </u>  | 0 (0 (0.                                |      |                                  |           | Total:    | \$871,358   |  |
| Children,<br>Youth and<br>Family<br>Department |        |   |         |         |   |   |      |                                  |           | . Old.:   | \$ 07.17000 |  |
| Affordable<br>Care Act<br>(ACA)                |        | The Maternal, Infant, and<br>Early Childhood Home<br>Visiting Program is designed | 6/10/10 | 7/9/10  |   | \$90,000,00<br>0 with 56<br>total grant | None | CYFD<br>Requested<br>Amount:\$95 | 7/9/2010  | 7/21/2010 | \$951,952   | https://grants.hrsa.gov/we<br>bExternal/FundingOppDe<br>tails.asp?FundingCycleId |
| (NOF)  |        | · (1) to strengthen and   |         |         |   | total graff                             |      | 7 tillount. \$73                 |           | Total:    | \$951,952   |  |

| Public<br>Education<br>Department                |        |   |        |   |                      |  |         |          |           |             |  |
|--|--------|---|--------|---|----------------------|--|---------|----------|-----------|-------------|--|
| FY10<br>Support for<br>Pregnant and<br>Parenting | 70.000 | The Act appropriates \$25 million for each of fiscal years 2010 through 2019 and authorizes the Secretary of HHS, in collaboration and coordination with the Secretary of Education (as | 7/1/10 | Native American tribal governments (Federally recognized) | total<br>funding for | Yes funding<br>an amount<br>from non-<br>Federal funds | Yes PED | 8/2/2010 | 9/29/2010 |             | http://www07.grants.gov/<br>search/search.do:jsessio<br>nid=tyKWMnNNYjbjvygc<br>VKX64HpnL5M79ZtynKtg |
| The University of New Mexico                     |        |   |        | etatus with the IBS other than                            | with o               | logual to 7E   |         |          | Total:    | \$1,300,000 | or Inhalt THE FIRE HOWARDA   |

| Affordable Care Act Advanced Nursing Education Expansion (ANEE) | 93.513 | The Advanced Nurse Education Expansion initiative's two purposes are to increase the number of students enrolled full time in accredited primary care Nurse Practitioner and Nurse Midwifery programs and to accelerate the graduation of part time students.            | 6/17/10 | 7/19/10 | collegiate schools of nursing,<br>academic health centers, and<br>other private or public entities<br>accredited by a national nursing | \$30,000,00<br>0 total with<br>approximat<br>ely 40<br>awards  | None | YES UNM-<br>HSC  | Unknown | 8/5/2010  | \$38,333  | http://www07.grants.gov/<br>search/search.do:jsessio<br>nid=hDHtMfCJfhvK2ylCk<br>vjg1QBFQGKXjDT2Ws8<br>HDQvFZDyYJdlPSBGZ!-<br>491952003?oppld=55280<br>&mode=VIEW |
|---|--------|--|---------|---------|--|--|------|------------------|---------|-----------|-----------|---|
| Nurse<br>Education,<br>Practice,<br>Quality and<br>Retention    | N/A    | supports 108 infrastructure grants to expand the capacity of the nursing pipeline, promote career mobility for individuals in nursing, prepare more nurses at the baccalaureate level, and provide continuing education training to enhance the quality of patient care. |         | N/A     | accredited by a national nursing accrediting agency  | Total of<br>\$29,900,00<br>0 with<br>varible<br>awards.<br>There are<br>108<br>infrastructur<br>e grants | None | Yes- UNM-<br>HSC | Unknown | 8/5/2010  | \$406,078 | N/A   |
| Affordable<br>Care Act  | 93.514 | As the need for primary care is growing due to the expansion of the health care  | 6/17/10 | 7/19/10 |  | \$32,000,00<br>0 with 40   | None | Yes UNM-<br>HSC  | Unknown | 9/28/2010 | \$204,239 | http://www07.grants.gov/<br>search/search.do;jsessio  |
|   |        |  |         |         | , , , , , , , , , , , , , , , , , , ,  |  |      |                  |         | Total:    | \$648,650 |   |

| Western New | ,   |                             |     |   |             |      |         |         |          |           |     |
|-------------|-----|-----------------------------|-----|---|-------------|------|---------|---------|----------|-----------|-----|
| Mexico      |     |                             |     |   |             |      |         |         |          |           |     |
| University  |     |                             |     |   |             |      |         |         |          |           |     |
| Nurse       | N/A | supports 108 infrastructure | N/A |   | Total of    | None | Yes     | Unknown | 8/5/2010 | \$249,740 | N/A |
| Education,  |     | grants to expand the        |     | collegiate schools of nursing, academic health centers, and | \$29,900,00 |      | Western |         |          |           |     |

Total: \$249,740

| NMRHCA                            |  |                                 |   |   |  |               |           |  |
|-----------------------------------|--|---------------------------------|---|---|--|---------------|-----------|--|
| Early Retiree Reinsurance Program | The Early Retiree Reinsurance Program will reimburse employers for medical claims for retirees age 55 and older who are not eligible for Medicare and their spouses, surviving spouses and ependents. Employers who provide health coverage for early retirees are eligible to apply. Program participants will be able to submit claims for medical care back to June 1, 2010. This program is intended as bridge coverage until insurance exhanges become operational in 2014. | is k<br>on<br>cor<br>ser<br>bas | based had a first proper first | ocal governments who provide nealth insurance for early retirment | This is a variable amount to be distributed. | Yes<br>NMRHCA | 9/16/2010 | www.hhs.gov/ociio/regula<br>tions/index.html |

| Native       |
|--------------|
| American     |
| Professional |
| Parent       |
| Resources,   |
| Inc.         |

| L | INC.       |                                  |         |                                  |                  |          |         |           |                                    |
|---|------------|----------------------------------|---------|----------------------------------|------------------|----------|---------|-----------|------------------------------------|
| 7 | Affordable | 93.508 Funds will support 5-year | 6/25/10 | 7/26/2010 Native American tribal | \$3,000,000 None | Native   | Unknown | 9/29/2010 | \$330,000 https://www.cfda.gov/?s= |
| C | Care Act   | demonstration grants             |         | governments (Federally           | with an          | American |         |           | program&mode=form&ta               |

|            |                           |         |           |                        |             |      |            |         | Total:    | \$330,000 |                          |
|------------|---------------------------|---------|-----------|------------------------|-------------|------|------------|---------|-----------|-----------|--------------------------|
|            |                           |         |           |                        |             |      |            |         |           |           |                          |
| Pueblo of  |                           |         |           |                        |             |      |            |         |           |           |                          |
| San Felipe |                           |         |           |                        |             |      |            |         |           |           |                          |
| Affordable | Funds will support 5-year | 6/25/10 | 7/26/2010 | Native American tribal | \$3,000,000 | None | Pueblo of  | Unknown | 9/29/2010 | \$100,000 | https://www.cfda.gov/?s= |
| Caro Act   | demonstration grants      |         |           | governments (Federally | with an     |      | San Folino |         |           |           | program&mode=form&ta     |

Total: \$100,000

Various Tribes

|                                    |     |  |     |     |                           |      |                     |         | Total:    | \$8,000  |            |
|------------------------------------|-----|--|-----|-----|---------------------------|------|---------------------|---------|-----------|----------|------------|
|                                    |     |  |     |     |                           |      |                     |         |           |          |            |
| Parents<br>Reaching Out<br>to Help |     |  |     |     |                           |      |                     |         |           |          |            |
| Family-to-<br>Family Health        | N/A | Created in 2005, the centers are state-wide, | N/A | N/A | A total of<br>\$4,900,000 | None | Parents<br>Reaching | Unknown | 7/27/2010 | \$95,700 | <u>N/A</u> |
|                                    |     |  |     |     | <del>-</del> Ψ4, 700,000  |      | reaciling           |         | Total:    | \$95,700 |            |
| Community Health Centers           |     |  |     |     |                           |      |                     |         |           |          |            |

| Grants from<br>the<br>Affordable<br>Care Act to<br>upgrade and<br>expand<br>community<br>health<br>centers | N/A | The Capital Development (CD) program grants, administered by HHS' Health Resources and Services Administration (HRSA), will support major construction and renovation at 143 community health centers nationwide. This builds on the more than \$2 billion investment in community health centers in the American Recovery and Reinvestment Act. | N/A | Grant awarded to First Choice<br>Community Healthcare, Inc.<br>Albuquerque, NM | \$727 million<br>to 143<br>community<br>health<br>centers<br>across the<br>country   | None | N/A | N/A | 10/8/2010 | \$8,153,989 | http://www.hhs.gov/news/press/2010pres/10/chc_c<br>hart.html |
|--|-----|--|-----|--|--|------|-----|-----|-----------|-------------|--|
| Grants from the Affordable Care Act to upgrade and expand community health centers                         | N/A | The Capital Development (CD) program grants, administered by HHS' Health Resources and Services Administration (HRSA), will support major construction and renovation at 143 community health centers nationwide. This builds on the more than \$2 billion investment in community health centers in the American Recovery and Reinvestment Act. | N/A |  | \$727 million<br>to 143<br>community<br>health<br>centers<br>across the<br>country (For<br>buildings<br>not<br>operations) |      | N/A | N/A | 10/8/2010 | \$5,778,210 | http://www.hhs.gov/news/press/2010pres/10/chc_c<br>hart.html |

| Grants from<br>the<br>Affordable<br>Care Act to<br>upgrade and<br>expand<br>community<br>health<br>centers | N/A | The Capital Development (CD) program grants, administered by HHS' Health Resources and Services Administration (HRSA), will support major construction and renovation at 143 community health centers nationwide. This builds on the more than \$2 billion investment in community health | N/A |   | \$727 million<br>to 143<br>community<br>health<br>centers<br>across the<br>country | None | N/A | N/A | 10/8/2010           | \$3,786,635                 | http://www.hhs.gov/news/<br>press/2010pres/10/chc_c<br>hart.html |
|--|-----|---|-----|---|--|------|-----|-----|---------------------|-----------------------------|--|
| Grants from the  | N/A | centers in the American Recovery and Reinvestment Act.  The Capital Development (CD)  | N/A | Grant awarded to Hidalgo<br>Medical Services Lordsburg, | \$727 million<br>to 143  | None | N/A | N/A | 10/8/2010<br>Total: | \$8,715,094<br>\$26,433,928 | http://www.hhs.gov/news/<br>press/2010pres/10/chc_c              |

| New Mexico              |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|-------------------------|------|---------------------------|------|------|---|------------------|------|------|------|------------|-------------|---------------------------|
| <b>Primary Care</b>     |      |                           |      |      |   |                  |      |      |      |            |             |                           |
| Association             |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
| Develop and             | N/A  |                           | N/A  | N/A  | Grant Awarded to New Mexico<br>Primary Care Association | A total of \$8   | None | N/A  | N/A  | 11/19/2010 | \$90,547    | http://www.hhs.gov/news/  |
| Modernize               |      | Cooperative               |      |      | Primary Care Association                                | Million was      |      |      |      |            |             | press/2010pres/11/20101   |
| Community               |      | Agreements sunnort        |      |      |   | awarded in       |      |      |      | Total:     | \$90,547    | 110h html                 |
|                         |      |                           |      |      |   |                  |      |      |      | rotai.     | Ψ70,547     |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
|                         |      |                           |      |      |   |                  |      |      |      |            |             |                           |
| Various                 |      |                           |      |      |   |                  |      |      |      |            |             |                           |
| Biomedical              |      |                           |      |      |   |                  |      |      |      |            |             |                           |
| Research                |      |                           |      |      |   |                  |      |      |      |            |             |                           |
| Grants Ouglifying       | N/A  | Variable Private Entities | NI/A | N/A  | Grants Awards to Various                                | Various          | N/A  | N/A  | N/A  | 11/1/2010  | ¢4.725.074  | http://www.irc.gov/busins |
| Qualifying  Therapeutic | IN/A | have these grants         | N/A  | IN/A | Research Agencies                                       | Various<br>Grant | IN/A | IV/A | IN/A | 11/1/2010  | \$4,725,876 | http://www.irs.gov/busine |
|                         |      |                           | •    |      |   |                  |      |      |      | Total·     | \$4 725 876 |                           |

|   | А  | В    | С  | D               | Е                  | F  | G   | Н                           | I  | J                  | K                        | L                             | M   |
|---|--|------|--|-----------------|--------------------|--|---|-----------------------------|--|--------------------|--------------------------|-------------------------------|---|
| 1 | GrantName  | CFDA | Grant Description  | Release<br>Date | Application<br>Due | Eligible Applicants  | Grant<br>Amount   | Cost<br>Sharing<br>Matching | Apply Yes<br>No  | Grant<br>Submitted | Date<br>Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage   |
| 2 | Native American<br>Professional Parent<br>Resources, Inc.  |      |  |                 |                    |  |   |                             |  |                    |                          |                               |   |
| 3 | Affordable Care Act (ACA) Tribal Maternal, Infant, and Early Childhood Home Visiting Grant Program |      | Funds will support 5-year demonstration grants (cooperative agreements) between ACF and Federally-recognized Indian Tribes (or a consortium of Indian Tribes), Tribal Organizations, or Urban Indian Organizations to conduct needs assessments; develop the infrastructure needed for the widespread planning, adoption, implementation, and sustainability of evidence-based maternal, infant, and early childhood home visiting programs; and provide high-quality, evidence-based home visiting services to pregnant women and families with young children aged birth to kindergarten entry. Home visiting programs are intended to promote outcomes such as improvements in maternal and prenatal health, infant health, and child health and development; reduced child maltreatment; improved parenting practices related to child development outcomes; improved school readiness: improved | 6/25/10         |                    | Native American tribal governments (Federally recognized) Native American tribal organizations (other than Federally recognized tribal governments) Others (see text field entitled "Additional Information on Eligibility" for clarification) | \$3,000,00<br>0 with an<br>award<br>ceiling of<br>\$500,000<br>and award<br>floor of<br>\$100,000<br>with an<br>award<br>total of 15. |                             | Native<br>American<br>Professio<br>nal Parent<br>Resource<br>s, Inc. | Unknown            | 9/29/2010                |                               | https://www.cfda.gov/?<br>s=program&mode=for<br>m&tab=step1&id=788d<br>6ac24971c92c3580fda<br>2894431ba |
| 4 |  |      |  |                 |                    |  |   |                             |  |                    | Total:                   | \$330,000                     |   |
| 5 | Pueblo of San<br>Felipe  |      |  |                 |                    |  |   |                             |  |                    |                          |                               |   |

|   | Α  | В      | С  | D       | E         | F  | G  | Н    |                            | J       | K              | L         | M   |
|---|--|--------|--|---------|-----------|--|--|------|----------------------------|---------|----------------|-----------|---|
| 6 | Affordable Care Act (ACA) Tribal Maternal, Infant, and Early Childhood Home Visiting Grant Program | 93.508 | Funds will support 5-year demonstration grants (cooperative agreements) between ACF and Federally-recognized Indian Tribes (or a consortium of Indian Tribes), Tribal Organizations, or Urban Indian Organizations to conduct needs assessments; develop the infrastructure needed for the widespread planning, adoption, implementation, and sustainability of evidence-based maternal, infant, and early childhood home visiting programs; and provide high-quality, evidence-based home visiting services to pregnant women and families with young children aged birth to kindergarten entry. Home visiting programs are intended to promote outcomes such as improvements in maternal and prenatal health, infant health, and child health and development; reduced child maltreatment; improved parenting practices related to child development outcomes; improved school readiness: improved | 6/25/10 | 7/26/2010 | Native American tribal governments (Federally recognized) Native American tribal organizations (other than Federally recognized tribal governments) Others (see text field entitled "Additional Information on Eligibility" for clarification) | \$3,000,00<br>0 with an<br>award<br>ceiling of | None | Pueblo of<br>San<br>Felipe | Unknown | K<br>9/29/2010 |           | https://www.cfda.gov/?s=program&mode=form&tab=step1&id=788d6ac24971c92c3580fda2894431ba |
| 7 |  |        |  |         |           |  |  |      |                            |         | Total:         | \$100,000 |   |

8 Various Tribes

|    | Α   | В      | С  | D      | E | F   | G | Н    |                   | J         | K         | L       | M   |
|----|---|--------|--|--------|---|---|---|------|-------------------|-----------|-----------|---------|---|
| 9  | Option A Medicare Improvement for Patients and Providers Act (MIPPA) Affordable Care Act Medicare Beneficiary Outreach and Assistance Program Funding for Title VI Native American Programs | 93.071 | Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) was amended in Section 3306 to provide additional funding for Medicare outreach and enrollment activities. This legislation builds upon 2008 MIPPA legislation which provided for beneficiary outreach and included funding to State Health Insurance Assistance Programs (SHIPs), Area Agencies on Aging (AAAs) and Title VI Native American Programs, Aging and Disability Resource Center programs (ADRCs), and for a resource center to help coordinate efforts to inform older Americans about available Federal and State benefits available. | 6/7/10 |   | State agency or instrument of a State from a State that: 1) received an award to implement ADRCs through the AoA and CMS ADRC grants funded in fiscal years 2003, 2004, 2005 and 2009 |   | None | Several<br>Tribes | 7/30/2010 | 9/27/2010 |         | http://www07.grants.go<br>y/search/search.do:jse<br>ssionid=g3rmMQLchpx<br>yVQ4YLG4SnLZJ25l5<br>H6mdy216VGjqXxzqLL<br>ynzyTI!-<br>228465525?oppId=550<br>23&mode=VIEW |
| 10 |   |        |  |        |   | 1   | 1 | ĺ    |                   |           | Total:    | \$8,000 |   |

|   | А  | В    | С   | D               | Е                   | F                        | G   | Н                           | I                                    | J                  | K                     | L                             | М  |
|---|--|------|---|-----------------|---------------------|--------------------------|---|-----------------------------|--------------------------------------|--------------------|-----------------------|-------------------------------|--|
| 1 | GrantName  | CFDA | Grant Description   | Release<br>Date | Applicatio<br>n Due | Eligible Applicants      | Grant<br>Amount   | Cost<br>Sharing<br>Matching | Apply Yes<br>No                      | Grant<br>Submitted | Date Grant<br>Awarded | Amount of<br>Grant<br>Awarded | Webpage  |
| 2 | Agency DWS   |      | The Old Health One World Con-   |                 |                     | Discours Out of Firethin |   |                             |                                      |                    |                       |                               |  |
|   | Affordable Care Act: State Health Care Workforce Planning Grants |      | The State Health Care Workforce Development Grant program authorizes the Secretary of Health and Human Services (HHS), acting through the Administrator of the Health Resources and Service Administration (HRSA), to administer planning and implementation grants for the purposes of enabling State partnerships (1) to complete comprehensive health care workforce development planning and (2) to implement those plans or carry out activities as defined by the State application in order to address current and projected workforce demands within the State.   | 6/17/10         | 711718              | applicant must be an     | \$2,000,00<br>0 Grant<br>total with<br>a ceiling<br>of<br>\$150,000<br>with 30<br>total<br>awards |                             | YES<br>DOL/DW<br>S                   | 7/19/2010          | 9/24/2010             | \$150,000                     | https://grants.hrsa.gov/web<br>External/FundingOppDetails<br>.asp?FundingCycleId=7033<br>2C9D-C405-4199-BFE2-<br>78FBF3C52CD3&ViewMod<br>e=EU&GoBack=&PrintMode<br>=&OnlineAvailabilityFlag=&p<br>ageNumber=&version=&NC<br>=&Popup= |
| 4 |  |      |   |                 |                     |                          |   |                             |                                      |                    | Total:                | \$150,000                     |  |
| 5 | NM Dept of<br>Health   |      |   |                 |                     |                          |   |                             |                                      |                    |                       |                               |  |
| 6 | State Personal Responsibilit y Education Program (PREP)          |      | The Patient Protection and Affordable Care Act, 2010 (Pub.L. 111-148) amends Title V of the Social Security Act (42 U.S.C. 701 et seq.) by adding section 513, Personal Responsibility Education. The Administration for Children and Families' (ACF) Family and Youth Services Bureau (FYSB) is accepting applications from States and Territories for the development and implementation of the Personal Responsibility Education Program (PREP). The purpose of this program is to educate youth between the ages of 10 and 19 on both abstinence and contraception for the prevention of pregnancy and sexually transmitted infections, including HIV/AIDS. | 7/30/10         | 8/30/10             | State Governments        | Each<br>state will<br>be<br>awarded a<br>minimun<br>of<br>\$250,000                               |                             | DOH<br>Family<br>Planning<br>Program | 8/30/2010          | 9/30/2010             | \$346,571                     | http://www.acf.hhs.gov/grant<br>s/open/foa/view/HHS-2010-<br>ACF-ACYF-PREP-0125  |

|   | Α   | В      | С  | D      | E | F   | G  | Н | I       | J         | K         | L         | M   |
|---|---|--------|--|--------|---|-----|--|---|---------|-----------|-----------|-----------|---|
| F A A A A A A A A A A A A A A A A A A A | Patient Protection and Affordable Care Act (PPACA); Emerging infections Program (EIP); Enhancing Epidemiology and Laboratory Capacity (U01) | 93.521 | The purpose of this EIP-ACA FOA is to support state and local health departments' surveillance infrastructure through enhancement of the epidemiology and laboratory capacity of the existing EIP network. Over the past 15 years, the EIP network has proved to be a national resource for conducting active, population-based surveillance and special studies for invasive bacterial diseases, foodborne pathogens, healthcare associated infections (HAIs), influenza, and many other infectious diseases. The network has been instrumental in measuring the impact of the 7-valent pneumococcal conjugate vaccine, informing and evaluating treatment guidelines for Group B Streptococcus, estimating the burden of foodborne illness, documenting the emergence of community-associated methicillinresistant Staphylococcus aureus, and monitoring the safety of the 2009 H1N1 vaccine as part of the influenza vaccine safety network | 8/3/10 |   | RFP | A total of<br>\$4,500,00<br>0 with<br>ceiling of<br>\$650,000<br>and a total<br>of 10<br>awards. |   | DOH ERD | 8/25/2010 | 9/30/2010 | \$327,379 | http://www07.grants.gov/search/search.do:jsessionid=Dr<br>TrMZFJ4ZnLwnt4SsjLylK1x<br>Zc0ysbnyq9PpSyQtHLqT2q<br>FX34X!-<br>357751914?oppId=56319&<br>mode=VIEW |

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| А  | В   | С   | D   | Е   | F                    | G                                       | Н  | I                                      | J   | K         | L         | M   |
|--|-----|---|-----|-----|----------------------|---|--|--|-----|-----------|-----------|-----|
| CDC Epidemiolog y & Laboratory Capacity/Em erging Infections Program Grant | N/A | Hiring and training of epidemiologists, laboratory scientists, and health information specialists who can work on multiple infectious diseases. Increasing the number of modern, well-equipped public health laboratories using electronic laboratory information systems to manage and exchange information effectively between labs and public health departments.  | N/A | N/A | Supplemental funding | N/A                                     | Formula<br>funding no<br>applicatio<br>n was<br>required |  | N/A | 9/24/2010 | \$380,081 | N/A |
| CDC<br>Tobacco<br>Quitlines<br>Grants                                      | N/A | State supplemental funding for healthy communities totaling \$3.8 million is being divided among 46 locations. The funds will be used to help states implement plans to reduce tobacco use through regulatory and educational arenas, as well as enhance and expand the national network of tobacco cessation quit lines to significantly increase the number of tobacco users who quit. This funding is possible under the new Prevention and Public Health Fund created by the Affordable | N/A | N/A | Supplemental funding | Suppleme<br>ntal<br>Funding<br>from CDC |  | DOH was<br>awarded<br>Formula<br>funds | N/A | 9/24/2010 | \$60,340  | N/A |

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|    | А  | В | С  | D        | E | F  | G                                 | Н | I   | J        | K      | L           | M  |
|----|--|---|--|----------|---|--|-----------------------------------|---|---|----------|--------|-------------|--|
| 10 | Strengthenin<br>g Public<br>Health<br>Infrastructure<br>for Improved<br>Health<br>Outcomes |   | The goal of the "Strengthening Public Health Infrastructure for Improved Health Outcomes" program is to systematically increase the performance management capacity of public health departments in order to ensure that public health goals are effectively and efficiently met. This program will increase the capacity and ability of health departments to meet national public health standards, such as those of the National Public Health Performance Standard Program (http://www.cdc.gov/od/ocphp/nphps p/index.htm), Public Health Accreditation Board (http://www.phaboard.org/), and National Quality Forum (http://www.qualityforum.org/). | 7/8/2010 |   | departments supporting cities with populations of 1 million or more inhabitants (Chicago, Illinois; Dallas, Texas; Houston Texas; Los Angeles, California; New York City, New York; Philadelphia, Pennsylvania; Phoenix, Arizona; San Antonio, Texas; San Diego. | 000 total.<br>There will<br>be 85 |   | DOH PHD<br>will be the<br>lead and<br>IT will be<br>a partner | 8/8/2010 |        | \$199,877   | http://www.grants.gov/searc<br>h/search.do:jsessionid=LTp<br>0M15hGSdyZRPhkn0QvrW<br>nt7bLwY5VJMFJfgK0kxLZj<br>V02plm5!931914360?oppld<br>=55684&mode=VIEW |
| 11 |  |   |  |          |   |  |                                   |   |   |          | Total: | \$1,314,248 |  |
| 12 | NM Human<br>Services<br>Dept.  |   |  |          |   |  |                                   |   |   |          |        |             |  |

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|    | Α             | В      | С  | D       | Е      | F   | G            | Н    | I       | J        | K         | L           | M                           |
|----|---------------|--------|--|---------|--------|---|--------------|------|---------|----------|-----------|-------------|-----------------------------|
|    | State         | 93.525 | Section 1311 of the Affordable   | 7/29/10 | 9/1/10 | State Governments                                   | Total of     | None | Yes HSD | 9/1/2010 | 9/30/2010 | \$1,000,000 | http://www.grants.gov/searc |
|    | Planning and  |        | Care Act provides funding  |         |        |   | \$51,000,0   |      |         |          |           |             | h/search.do;jsessionid=yFP  |
|    | Establishme   |        | assistance to the States for the                                       |         |        |   | 00 with a    |      |         |          |           |             | DMR6BhZ1nWvWdFffh4ZIP       |
|    | nt Grants for |        | planning and establishment of  |         |        |   | ceiling of   |      |         |          |           |             | xh6Jc2znhwj8628sQk98jht0    |
|    | the           |        | American Health Benefit  |         |        |   | \$1,000,00   |      |         |          |           |             | PIK1!1087699643?oppId=5     |
|    | Affordable    |        | Exchanges (?Exchanges?). The   |         |        |   | 0. 51        |      |         |          |           |             | 6204&mode=VIEW              |
|    | Care Act's    |        | Affordable Care Act provides that                                      |         |        |   |              |      |         |          |           |             | 0204&ITIOUE=VIEVV           |
|    |               |        | each State may elect to establish                                      |         |        |   | Awards       |      |         |          |           |             |                             |
|    | Exchanges     |        | an Exchange that would: 1) facilitate the purchase of qualified        |         |        |   | are          |      |         |          |           |             |                             |
|    |               |        | health plans; 2) provide for the                                       |         |        |   | Anticipate   |      |         |          |           |             |                             |
|    |               |        | establishment of a Small   |         |        |   | d            |      |         |          |           |             |                             |
|    |               |        | Business Health Options Program  |         |        |   |              |      |         |          |           |             |                             |
|    |               |        | (?SHOP Exchange?) designed to  |         |        |   |              |      |         |          |           |             |                             |
|    |               |        | assist qualified employers in  |         |        |   |              |      |         |          |           |             |                             |
|    |               |        | facilitating the enrollment of their                                   |         |        |   |              |      |         |          |           |             |                             |
|    |               |        | employees in QHPs offered in the                                       |         |        |   |              |      |         |          |           |             |                             |
|    |               |        | SHOP exchange; and 3) meet   |         |        |   |              |      |         |          |           |             |                             |
|    |               |        | other requirements specified in  |         |        |   |              |      |         |          |           |             |                             |
|    |               |        | the Act. The funding awarded   |         |        |   |              |      |         |          |           |             |                             |
|    |               |        | pursuant to this Funding   |         |        |   |              |      |         |          |           |             |                             |
|    |               |        | Opportunity Announcement is  |         |        |   |              |      |         |          |           |             |                             |
|    |               |        | intended to assist States with   |         |        |   |              |      |         |          |           |             |                             |
|    |               |        | initial planning activities related to the potential implementation of |         |        |   |              |      |         |          |           |             |                             |
|    |               |        | the Exchanges. Grants will be  |         |        |   |              |      |         |          |           |             |                             |
|    |               |        | awarded in amounts up to a   |         |        |   |              |      |         |          |           |             |                             |
|    |               |        | maximum of \$1 million per State,                                      |         |        |   |              |      |         |          |           |             |                             |
| 13 |               |        | depending on the number and  |         |        |   |              |      |         |          |           |             |                             |
|    | Mental health | N/A    | In addition to putting needed  | N/A     | N/A    | SAMHSA announced as                                 | \$14.3       | None | Grant   | N/A      | 10/9/2010 | \$734.500   | http://www.samhsa.gov/new   |
|    | care          |        | infrastructure into place, the   |         |        | part of its strategic                               | million per  |      | Awarded |          |           | 4.5.7,555   | sroom/advisories/10100816   |
|    | transformatio |        | grants will fund services including                                    |         |        | initiative on health reform                         | year will    |      | to HSD  |          |           |             | 19.aspx                     |
|    | n grants      |        | supportive housing, employment   |         |        | 20 new mental health                                | be           |      | 10 1130 |          |           |             | <u>17.α3μλ</u>              |
|    | ii granis     |        | and education programs,  |         |        | transformation grants totaling up to \$71.5 million | available    |      |         |          |           |             |                             |
|    |               |        | prevention and wellness services,                                      |         |        | over the next five years.                           |              |      |         |          |           |             |                             |
|    |               |        | trauma-informed care programs,   |         |        | The purpose of the                                  | to fund      |      |         |          |           |             |                             |
|    |               |        | and special services for military                                      |         |        | program is to bring about                           | the 20       |      |         |          |           |             |                             |
|    |               |        | families.  |         |        | needed changes in the                               | grants.      |      |         |          |           |             |                             |
|    |               |        |  |         |        | organization, management                            | Awardees     |      |         |          |           |             |                             |
| 1  |               |        |  |         |        | and delivery of public                              | are          |      |         |          |           |             |                             |
|    |               |        |  |         |        | mental health services.                             | eligible for |      |         |          |           |             |                             |
|    |               |        |  |         |        |   | up to        |      |         |          |           |             |                             |
|    |               |        |  |         |        |   | \$750,000    |      |         |          |           |             |                             |
|    |               |        |  |         |        |   | per year     |      |         |          |           |             |                             |
|    |               |        |  |         |        |   | for up to    |      |         |          |           |             |                             |
|    |               |        |  |         |        |   | five years.  |      |         |          |           |             |                             |
| 14 |               |        |  |         |        |   | Jours.       |      |         |          |           |             |                             |
|    |               |        |  |         |        |   |              |      |         |          |           |             |                             |

| 16 Ins   |  | 00.544 |  |        |                   |                     |                               |          | Total:    | \$1,734,500 |   |
|--|--|--------|--|--------|-------------------|---------------------|-------------------------------|----------|-----------|-------------|---|
| 16 Ins   | egulation<br>commission<br>vivision of<br>asurance<br>Grants to  | 00 544 |  |        |                   |                     |                               |          |           |             |   |
| Pr<br>Re<br>Cy<br>Of<br>Co<br>Inf<br>an<br>Ins | tates for<br>lealth<br>insurance<br>remium<br>eview-<br>cycle I"<br>office of<br>consumer<br>oformation<br>and<br>insurance<br>oversight<br>OCIIO) | 93.511 | Key components of this oversight require insurers to report certain health insurance rate information to both the Secretary and the States in which they operate, including:1. All increases in rates for health insurance over the prior year that meet the established unreasonable threshold (currently under development);2. Justifications for unreasonable increases in rates prior to their implementation.Public disclosure of this information and insurers will be required to prominently post the information on their respective Internet websites.Section 2794 also provides for a program of grants to states to help them improve the health insurance rate review and reporting process. Congress has appropriated \$250 million for this grant program for the federal fiscal years (FFYs) of 2010-2014. HHS is authorized to award this money during multiple award cycles to eligible States beginning in FFY 2010. Federal regulatory guidance is currently under development to establish the statutorily mandated process of annual rate review for | 7/7/10 | State governments | 00 there<br>will be | PRC/Insur<br>ance<br>Division | 7/7/2010 | 8/16/2010 | \$1,000,000 | http://www07.grants.gov/search/search.do:jsessionid=NDgpMhnSXgmt7BBMQmFHz1sy46kY7wl22P09N1h2cGTQCcCL2hyF!1386858017?oppId=55029&mode=VIEW |

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|          | Α  | В | С  | D       | E       | F   | G   | Н    |   | J         | K          | L           | M   |
|----------|--|---|--|---------|---------|---|---|------|---|-----------|------------|-------------|---|
|          | Affordable Care Act (ACA) - Consumer Assistance Program Grants |   | These are grants to States to assist consumers with filing complaints and appeals, assist consumers with enrollment into health coverage, and educate consumers on their rights and responsibilities. In addition, by law they will collect data on consumer inquires and complaints to help the Secretary identify problems in the marketplace and strengthen enforcement. Starting in 2014, programs must also help resolve problems with premium credits for Exchange coverage.   | 7/22/10 | 9/10/10 |   | \$29,000,0<br>00 total<br>with a<br>ceiling of<br>\$3,400,00<br>0 and<br>floor<br>\$120,00 a<br>total of 56<br>awards | None | PRC/DOI   | 9/10/2010 | 10/19/2010 |             | http://www.grants.gov/searc<br>h/search.do:jsessionid=THb<br>qMLpZyhlYTWQSSWn0cxY<br>yXwN2xdpsFTptWtXfdPQx<br>VJnM1Prh!-<br>832749192?oppId=56058&<br>mode=VIEW |
|          | Grants to States for Health Insurance Premium Review - Cycle I |   | Provide awards to states to enhance their current rate review process for health insurance premiums. States will be required to either develop or enhance their current capcity to review and to the extent permitted by law, approve or deny rate increases in the individual and group markets. States will be required to provide the HHS Secretaru with information about rate trends in health insurance coverage and may utilize grant funds to develop procedures and/or the infrastructure to enable them to report in the future. | 9/1/10  |         | Five US territories and the 5 states that did not previously apply - Departments of Insurance or state entity with primary statutory and regulatory authority for the regulation of private health insurance; New Mexico received grant under original announcement of 6/7/10 | #######   |      | NM<br>Insurance<br>Division<br>received<br>grant from<br>original<br>announce<br>ment | 7/7/2010  | 8/16/2010  | \$0         | http://www07.grants.gov/search/search.do:jsessionid=hJlZM1yHzrGKGqzXt3ylHcc1Znp5YByyrJ2Zdf2Zg4SGM4DyTRHh!97035526?oppld=57031&mode=VIEW                         |
| 19<br>20 |  |   |  |         |         |   |   |      |   |           | Takal      | ¢1.007.407  |   |
|          | Aging and  |   |  |         |         |   |   |      |   |           | Total:     | \$1,226,426 |   |
| l l      | Long Term  |   |  |         |         |   |   |      |   |           |            |             |   |
|          | Services Department  |   |  |         |         |   |   |      |   |           |            |             |   |

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| А   | В        | С  | D   | E   | F | G                   | Н     | I     | J   | K   | L         | M   |
|---|----------|--|-----|-----|---|---------------------|-------|-------|-----|-----|-----------|-----|
| Option A Medicare Improvem for Patient and Providers (MIPPA) Affordable Care Act Medicare Beneficiar Outreach and Assistanc Program | s<br>Act | Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) was amended in Section 3306 to provide additional funding for Medicare outreach and enrollment activities. This legislation builds upon 2008 MIPPA legislation which provided for beneficiary outreach and included funding to State Health Insurance Assistance Programs (SHIPs), Area Agencies on Aging (AAAs), Aging and Disability Resource Center programs (ADRCs), and for a resource center to help coordinate efforts to inform older Americans about available Federal and State benefits available. | N/A | N/A |   | Variable<br>Amounts | ALTSD | ALTSD | N/A | N/A | \$371,358 | N/A |

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|          | А  | В      | С  | D      | E       | F   | G  | Н |       | J         | K         | L                 | М   |
|----------|--|--------|--|--------|---------|---|--|---|-------|-----------|-----------|-------------------|---|
|          |  | 93.048 | To serve as visible and trusted sources of information on the full range of long-term care options that are available in the community, including both institutional and home and community-based care; to provide personalized and consumer friendly assistance to empower people to make informed decisions about their care options; to provide coordinated and streamlined access to all publicly supported long-term care options so that consumers can obtain the care they need through a single intake, assessment and eligibility determination process; to help people to plan ahead for their future long-term care needs; and to assist, in coordination with the State Health Insurance Assistance Program, Medicare beneficiaries in understanding and accessing the Prescription Drug Coverage and prevention health benefits available under the Medicare Modernization Act. | 6/3/10 | 7/30/10 | an award to implement ADRCs through the AoA and CMS ADRC grants funded in fiscal years 2003, 2004, 2005 and 2009, and/or the CMS Person-Centered Hospital Discharge Planning Model Grants funded in fiscal years 2008 and 2009 may apply for this funding opportunity; and 2) | \$10,000,0<br>00 total<br>avaliable<br>with<br>award<br>ceiling of<br>\$600,000<br>and floor |   | ALTSD | 7/29/2010 | 9/27/2010 |                   | http://www07.grants.gov/search/search.do:jsessionid=gx<br>4WMQChpwsQS1tTx6Q1h<br>F9vJyBnTw0QhQ327kRfTB<br>9ZnyfqNTf3!-<br>228465525?oppId=54948&<br>mode=VIEW |
| 23<br>24 |  |        |  |        |         |   |  |   |       |           | Total:    | \$871,358         |   |
|          | Children,<br>Youth and<br>Family<br>Department |        |  |        |         |   |  |   |       |           | . O.dii   | <i>\$37.1,000</i> |   |

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|          | Α  | В      | С   | D       | Е | F | G  | Н    | I   | J        | K         | L           | M  |
|----------|--|--------|---|---------|---|---|--|------|---|----------|-----------|-------------|--|
|          | Affordable Care Act (ACA) Maternal, Infant and Early Childhood Home Visiting Program | 93.505 | The Maternal, Infant, and Early Childhood Home Visiting Program is designed: (1) to strengthen and improve the programs and activities carried out under Title V; (2) to improve coordination of services for at risk communities; and (3) to identify and provide evidence-based home visiting programs to improve outcomes for families who reside in at risk communities. At-risk communities will be identified through a statewide assessment of needs and of existing resources to meet those needs. HRSA and the Administration for Children and Families (ACF) intend that the home visiting program will result in a coordinated system of early childhood home visiting in every State that has the capacity and commitment to provide infrastructure and supports to assure high-quality, evidence-based practice. | 6/10/10 | _ |   | \$90,000,0<br>00 with 56<br>total grant<br>awards of<br>various<br>amounts | None | CYFD<br>Requeste<br>d<br>Amount:\$<br>951,952 | 7/9/2010 | 7/21/2010 | \$951,952   | https://grants.hrsa.gov/web<br>External/FundingOppDetails<br>.asp?FundingCycleId=E24F<br>384A-7290-49D0-A393-<br>EED7F542B618&ViewMode<br>=EU&GoBack=&PrintMode=<br>&OnlineAvailabilityFlag=&pa<br>geNumber=&version=&NC=<br>&Popup= |
| 26<br>27 |  |        |   |         |   |   |  |      |   |          | Total:    | \$951,952   |  |
|          | Public<br>Education<br>Department  |        |   |         |   |   |  |      |   |          |           | Ţ: <u> </u> |  |

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| Α   | В      | С  | D | Е       | F  | G   | Н   |         | J        | K         | L           | M  |
|---|--------|--|---|---------|--|---|---|---------|----------|-----------|-------------|--|
| FY10 Support for Pregnant and Parenting Teens and Women FOA | 93.500 | The Act appropriates \$25 million for each of fiscal years 2010 through 2019 and authorizes the Secretary of HHS, in collaboration and coordination with the Secretary of Education (as appropriate) to establish and administer a Pregnancy Assistance Fund for the purpose of awarding competitive grants to States to assist pregnant and parenting teens and women. Grants will not exceed three years (and funding for years 2-3 is subject to the availability of funds). OAH anticipates funding a broad range of projects both in the size and scope of activities. The authorized State representative must make application for grant funds available through this announcement to assist pregnant and parenting teens and women. A signed letter from the authorized State representative must accompany the application; it should include documentation establishing the authorized representative?s authority to apply for and administer the grant funds on behalf of the State. The application may be developed solely by the authorized representative or in consultation with other relevant State admencies such as state education, human |   | 0, 1, 1 | Native American tribal governments (Federally recognized) Nonprofits having a 501(c)(3) status with the IRS, other than institutions of higher education | funding<br>for the<br>grant with<br>a Ceiling<br>of<br>\$500,000<br>and a total<br>of 25<br>awards. | funding an<br>amount<br>from non-<br>Federal<br>funds<br>equal to<br>25 | Yes PED | 8/2/2010 | 9/29/2010 |             | http://www07.grants.gov/search/search.do:jsessionid=ty<br>KWMnNNYjbjvygcVKX64HpnL5M79ZtynKtgqr7phNt3HStRbH9W!404589083?oppId=55579&mode=VIEW |
|   |        |  |   |         |  |   |   |         |          | Total:    | \$1,300,000 |  |

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