GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No		Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Workforce Grants													
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		planning grant, an applicant must be an eligible State	Grant total with	Ratio (Federal:N	YES DOL/D WS	DOH and NMHR	7/19/2010	9/24/2010	\$150,000	https://grants.hrsa.go y/webExternal/Fundin gOppDetails.asp?Fun dingCycleld=70332C 9D-C405-4199-BFE2- 78FBF3C52CD3&Vie wMode=EU&GoBack =&PrintMode=&Onlin eAvailabilityFlag=&pa geNumber=&version= &NC=&Popup=
Affordable Care Act State Health Care Workforce Development Implementatio n 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		planning grant, an applicant must be an eligible State	\$3,000,000 Grant total with only one grant given	Yes Cost Sharing Ratio (Federal:N on- Federal): 25:1	None known at this time					http://www07.grants.g ov/search/search.do:j sessionid=s9J1MfNQ bT3kffnJF3G04GGp1 LL9l0wvvFFxZHK5yy Y3nTDv3j1g!- 2026516818?oppld=5 5288&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No		Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Care Act Primary Care Residency Expansion (PCRE) Program	93.510	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 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.			Public or nonprofit private hospitals, schools of medicine or osteopathic medicine, or a public or private nonprofit. Must be Accredited	\$168,000,000 with 105 expected awards	None	YES UNM- HSC Others ?			0/5/0010		http://www07.grants.g ov/search/search.do:j sessionid=wN5mMf0 ThHzkPyLzDyDCBkN BTRWBzCQnd0zs2Z mY9QG2PG7R91Sp!- 491952003?oppId=55 287&mode=VIEW
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		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 total with approximately 40 awards	None	YES UNM- HSC	None	Unknown	8/5/2010	\$38,333	http://www07.grants.g ov/search/search.do:j sessionid=hDHtMfCJf hvK2ylCkvjg1QBFQG KXjDT2Ws8HDQvFZ DyYJdlPSBGZ!- 491952003?oppld=55 280&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No		Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Nurse Education, Practice, Quality and 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 \$29,900,000 with varible awards. There are 108 infrastructure grants	None	Yes- UNM- HSC	None	Unknown	8/5/2010	\$406,078	<u>N/A</u>
Nurse Education, Practice, Quality and 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 \$29,900,000 with varible awards. There are 108 infrastructure grants		Yes Wester n NM Univers ity	None	Unknown	8/5/2010	\$249,740	N/A
Advanced Education Nursing 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 \$16,000,000 with a total of 350 awards	None	None known at this time					http://www.grants.gov /search/search.do:jse ssionid=JsZCM31dBy YJ64krGTfD7HpQCM 1SHkCrD1xY19Srgg TpY7Fk5J0z!- 243159580?mode=VI EWREVISIONS&rev Num=2

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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		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 UNM- HSC	None	Unknown	9/28/2010		http://www07.grants.g ov/search/search.do:j sessionid=JmDCMf3 K21QJVw5zgSHTmG qyQVqNc2HvysBmQ XTxGnG7DDRpW44 8!- 491952003?oppld=55 283&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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 with 10 expected awards	None	YES UNM- HSC Others ?					http://www07.grants.g ov/search/search.do:j sessionid=lp7BMfLXz 0QZQ8spfLZQkLGBj pTvydmjT84XQH2Ny cVIJJ8y5b1Z!- 2026516818?oppld=5 5281&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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 ov/search/search.do:j sessionid=0JKhMhrf2 31TMZkwkWSB61k2 9ITNhg0kyYp4MyWq khl0jy9GnhyP!138685 8017?oppId=55371& mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant 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 Rico, the United States Virgin Islands, Guam, and American Samoa. Local Workforce Investment	\$51,000,000 total for grants. Award ceiling is \$5,000,000 with award floor of \$1,000,000. A total of 17 awards will be released.	None	Yes HSD/A LTSD NMSU has also applied for this grant	NM Direct Caregiv ers, Golden Mentor s				http://www07.grants.g ov/search/search.do:j sessionid=0JKhMhrf2 31TMZkwkWSB61k2 9ITNhg0kyYp4MyWq khl0jy9GnhyP!138685 8017?oppId=55372& mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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 unkno w of any nursing assista nt progra m applied for this grant.					http://www.grants.gov /search/search.do:jse ssionid=CVm1MfyC9 sJLwjYv12vn7nfn5nY hcZhWXdL92CdJfsG 6TGY9YRL6!- 491952003?oppld=55 338&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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 ceiling of \$750,000 and a	None	**It is unkno wn of any nursing assista nt progra m applied for this grant.					http://www07.grants.g ov/search/search.do:j sessionid=fj9MMfTJn 23l1Nnhp1PWZ5G5k TkCkBTIL7nf7fLGCw KXF6nTWHsY!- 2026516818?oppld=5 5289&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No		Grant Submitted	Date Grant Awarded	Amount of Grant 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 with approximately 10 awards	None	Unkno wn at this time	None				http://www.grants.gov /search/search.do:jse ssionid=1Mp9M1GTp ssQQqyh1kxkYc8j80 pR2DdbshMYrLhlLNp h6MvQC5Jq!7323555 40?oppld=58913&mo 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 \$10,310,909 is anticipated with 36 awards	None						http://www.grants.gov /search/search.do:jse ssionid=pPM2M1jLn1 srxhpmHmVly7YPbnc gvYwL8s8Fbpn5KQnj HtQCLMbs!- 23762818?oppId=590 20&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Nursing Workforce 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 /search/search.do:jse ssionid=g7H0M1pJL Mbq0rFM71DJbLDvR vnKDP6y0g9J7QhSB H7G30GVKfBb!1838 295238?oppId=59027 &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	6/16/11	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 \$6,500,000 with approximately 19 awards	Yes Cost Sharing Ratio (Federal:N on- Federal): 1:1					http://www.grants.gov /search/search.do:jse ssionid=mQJzN11RY f98vpPyRdYT8RSxk9 Kf8hWTkVc3Llz3hDX JhZv1f82w!77396116 4?oppId=89393&mod 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 \$5,000,000 with approximately 5 awards	Yes Cost Sharing Ratio (Federal:N on- Federal): 1:1					http://www.grants.gov /search/search.do:jse ssionid=mQJzN11RY f98vpPyRdYT8RSxk9 Kf8hWTkVc3Llz3hDX JhZv1f82w!77396116 4?oppId=89373&mod e=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No		Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
University Partnership Research Grants for the Health Profession Opportunity Grants (HPOG) Program under the Affordable Care Act (ACA)	93.093	The Office of Planning, Research and Evaluation (OPRE), within the Administration for Children and Families (ACF) plans to provide funds to support new research regarding the Health Profession Opportunity Grants (HPOG) program. These University Partnership grants to researchers and scholars are expected to augment the national evaluations of the HPOG demonstrations by focusing on questions relevant to career track education and training programs in the health professions and related labor market issues. The grants are intended to support research to inform and improve HPOG program performance and policy decisions and solutions, particularly for underserved populations.	6/17/11		Nonprofits having a 501(c)(3) status with the IRS, other than	Total funding \$1,500,000 with 5 awards anticipated	None	N/A	N/A				http://www.grants.gov /search/search.do:jse ssionid=kQkJTDQSI mjTnnW9RGQCQkxx 49ZmdnnY21gsS3Qq bhbp8ljW7PfQ!12116 05884?oppId=100054 &mode=VIEW
Advanced Education Nursing Traineeships		Traineeships prepare nurse practitioners, clinical nurse specialists, nurse-midwives, nurse anesthetists, nurse administrators, nurse educators, public health nurses and nurses in other specialties requiring advanced education. The Affordable Care Act removed the 10 percent cap in this program that limited the amount of support that could go to nursing students pursuing doctoral degrees.	N/A		eligible institutions for registered nurses enrolled in advanced education nursing programs.	(\$16 million total with ~349 awards)** Awarded to University of New Mexico Health Sciences Center, Albuquerque	None	UNMH SC	N/A	N/A	7/29/2011		http://www.hhs.gov/n ews/press/2011pres/ 07/20110729a.html

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Advanced Education Nursing Traineeships	93.358	Traineeships prepare nurse practitioners, clinical nurse specialists, nurse-midwives, nurse anesthetists, nurse administrators, nurse educators, public health nurses and nurses in other specialties requiring advanced education. The Affordable Care Act removed the 10 percent cap in this program that limited the amount of support that could go to nursing students pursuing doctoral degrees.		N/A	Funds traineeships at eligible institutions for registered nurses enrolled in advanced education nursing programs.	(\$16 million total with ~349 awards)** Awarded to The Regents of New Mexico State University, Las Cruces		NMSU	N/A	N/A	7/29/2011		http://www.hhs.gov/n ews/press/2011pres/ 07/20110729a.html
Nurse Faculty Loan Program	93.264	Assists registered nurses in completing their graduate education to become qualified nurse faculty. Through grants to eligible entities, offers partial loan forgiveness for borrowers that graduate and serve as full-time nursing faculty for the prescribed period of time. The Affordable Care Act increased the annual loan limit to \$35,500 from \$30,000 and established a priority for doctoral nursing students.		N/A	Funds traineeships at eligible institutions for registered nurses enrolled in advanced education nursing programs.	\$23.4 million with ~ 109 awards** Awarded to University of New Mexico Health Sciences Center, Albuquerque		UNMH SC	N/A	N/A	7/29/2011	\$56,880	http://www.hhs.gov/n ews/press/2011pres/ 07/20110729a.html
Start of Insurance HCR Grants					I	age 13							9/1/2011

GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No		Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
"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	\$51,000,000 there will be approximately 51 awards with \$1,000,000 award ceiling.	required to provide	e Divisio	None	7/7/2010	8/16/2010	\$1,000,000	http://www07.grants.g ov/search/search.do:j sessionid=NDgpMhn SXgmt7BBMQmFHz1 sy46kY7wl22P09N1h 2cGTQccCL2hyF!13 86858017?oppld=550 29&mode=VIEW
Early Retiree Reinsurance 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	is based on a first come	businesses, unions, state and local governments who provide health insurance for early retirment	This is a variable amount to be distributed. To date funding as of 8/24/2011		Yes NMRH CA			9/16/2010	\$8,700,000	www.hhs.gov/ociio/re gulations/index.html

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No		Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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 an expected 246 grants to be awarded		None known at this time					http://www.grants.gov /search/search.do?m ode=VIEW&oppId=55 023
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 total with a ceiling of \$3,400,000 and floor \$120,00 a total of 56 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 /search/search.do:jse ssionid=THbqMLpZyh IYTWQSSWn0cxYyX wN2xdpsFTptWtXfdP OxVJnM1Prh!- 832749192?oppId=56 058&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Money Follows the Person Rebalancing Grant Demonstration Patient Protection and Affordable Healthcare Ac 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	State governments	\$22,500,000 total funds with 20 awards	None	Yes HSD will submit applicat ion	HSD with collabor ation with ALTSD and DOH	Unknown		the first year with additional	http://www.grants.gov /search/search.do:jse ssionid=drc5MJ5K1Y 5QWQfmvQ80vLZkv 292cYhrTjv9RLjXv4b byl6CYv2b!- 169038256?oppId=56 091&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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 \$51,000,000 with a ceiling of \$1,000,000. 51 Awards are Anticipated	None	Yes HSD		9/1/2010	9/30/2010	\$1,000,000	http://www.grants.gov /search/search.do:jse ssionid=yFPDMR6Bh Z1nWvWdFffh4ZlPxh 6Jc2znhwj8628sQk9 8jht0PlK1!108769964 3?oppld=56204&mod e=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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 total funding for 2 anticipated awards	None	None known at this time	N/A	N/A	N/A	N/A	http://www.grants.gov /search/search.do:jse ssionid=bvSnN5mD9 JQpGdCf0HqBBsLHy Lyfhd3SYTJ6tLfjhLk0 LgznT2XC!15526385 00?oppId=65413&mo de=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Planning Grant: The Money Follows the Person Rebalancing Demonstration Program	93.791	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		5-20 awards to states. Grant maximum will be \$200,000		HSD will submit applicat ion					http://www07.grants.g ov/search/search.do:j sessionid=DrTrMZFJ 4ZnLwnt4SsjLylK1xZ c0ysbnyq9PpSyOtHL qT2qFX34XI- 357751914?oppId=56 311&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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 Insuran ce division receive d grant from original announ cement	7/7/2010	8/16/2010		http://www07.grants.g ov/search/search.do:j sessionid=hJIZM1yHz rGKGqzXt3ylHcc1Zn p5YByyrJ2Zdf2Zg4S GM4DyTRHh!970355 26?oppId=57031&mo 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 total grant. Unknown number of awards. Ceiling is \$2,500,000 and floor of \$200,000	None	None at this time				http://www.grants.gov /search/search.do:jse ssionid=vJV5NLQKD y1XKC0WzDvCcLR W2MdMZ2QKZGPvB 2gTM1PyGF4c94Lk!3 75102673?oppId=681 33&mode=VIEW
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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Start of MCH 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 Reque sted Amoun t:\$951, 952	DOH	7/9/2010	7/21/2010	\$951,952	https://grants.hrsa.go y/webExternal/Fundin gOppDetails.asp?Fun dingCycleld=E24F38 4A-7290-49D0-A393- EED7F542B618&Vie wMode=EU&GoBack =&PrintMode=&Onlin eAvailabilityFlag=&pa geNumber=&version= &NC=&Popup=

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant 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	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 Americ an Profess ional Parent Resour ces, Inc.	None	Unknown	9/29/2010	\$330,000	https://www.cfda.gov/ ?s=program&mode=f orm&tab=step1&id=7 88d6ac24971c92c35 80fda2894431ba

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No		Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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 family socioeconomic status; improved coordination of referrals to community resources and supports; and reduced incidence	6/25/10		governments (Federally recognized) Native American tribal organizations (other than Federally recognized tribal governments) Others (see text field entitled "Additional Information on Eligibility" for clarification)	\$3,000,000 with an award ceiling of \$500,000 and award floor of \$100,000 with an award total of 15.	None	Pueblo of San Felipe	None	Unknown	9/29/2010		https://www.cfda.gov/ ?s=program&mode=f orm&tab=step1&id=7 88d6ac24971c92c35 80fda2894431ba
AFFORDABL E CARE ACT (ACA) MATERNAL, INFANT AND EARLY CHILDHOOD HOME VISITING PROGRAM		The goal of the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) competitive grant program is to award additional funding to states that have sufficiently demonstrated the interest and capacity to enhance their home visiting efforts.  Successful applicants will be awarded Federal fiscal year (FY) 2011 competitive grant funds, on top of the FY 2011 MIECHV formula based funds, to support the effective implementation of home visiting programs that are part of comprehensive, high-quality early childhood systems in all states. The purpose of this announcement is to promote quality implementation of home	6/1/11		District of Columbia, Puerto Rico, Guam, the Virgin Islands, the Northern Mariana Islands, and American Samoa.	\$99,000,000 with a total of 20 awards expected	None	NM does not qualify for this grant	N/A				http://www.grants.gov /search/search.do;jse ssionid=ddJ1NmBTL pyMzvpyzXyQfM3nQ nvQKJkfR9h0zGD4S GBkLQD5ZGp9!1105 614407?oppId=97455 &mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No		Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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,	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 total of 25 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 ov/search/search.do:j sessionid=tyKWMnN NYjbjvygcVKX64Hpn L5M79ZtynKtgqr7phN t3HStRbH9W!404589 083?oppId=55579&m 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 be a school-based health center or a sponsoring facility of a school-based health center: A school- based health center is defined as a health clinic	\$50,000,000 with an expected 1000 awards total	None	Current ly individu al SBHC' s	DOH				http://www.grants.gov /search/search.do:jse ssionid=sB7lMrzTwN YROKvvy0LghTwnTL 21BLhhMvBDkmp1r2 mTbxpjhG0y!- 228465525?oppld=58 278&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No		Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
State Personal Responsibility 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		Each state will be awarded a minimun of \$250,000		DOH Family Plannin g Progra m	DOH	8/30/2010	9/30/2010		http://www.acf.hhs.go v/grants/open/foa/vie w/HHS-2010-ACF- 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 v/grants/open/foa/vie w/HHS-2010-ACF- ACYF-AEGP-0123

GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Family-to- Family Health Information Centers in each state and the District of 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.				A total of \$4,900,000 for exisiting center a total of 51 with variable award amounts	None	Parent s Reachi ng Out to Help	None	Unknown	7/27/2010		<u>N/A</u>

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GrantName	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Affordable Care Act (ACA) Maternal, Infant and Early Childhood Home Visiting Formula Grant Program	This announcement solicits applications for the Affordable Care Act (ACA) Maternal, Infant, and Early Childhood Home Visiting (MIECHV) formula grant program to continue the Health Resources and Services Administration's (HRSA) and the Administration for Children and Families' (ACF) commitment to comprehensive family services, coordinated and comprehensive statewide home visiting programs, and effective implementation of high-quality evidence-based practices. The ACA MIECHV formula grant program is designed to: (1) strengthen and improve the programs and activities carried out under Title V; (2) improve coordination of services for atrisk communities; and (3) identify and provide comprehensive services to improve outcomes for families who reside in at-risk communities.	6/21/11		Eligibility for funding is limited to a single application from the governor-appointed state lead agency from each state, the District of Columbia, Puerto Rico, Guam, the Virgin Islands, the Northern Mariana Islands, and American Samoa. Regardless of the entity or entities designated by the Governor, this application must contain the required memorandum of concurrence signed by the required agencies. Please see the description for Attachment 5: Memorandum of Concurrence, under Section IV.2.xii of this funding opportunity announcement.	Formula Funding with a total of \$125,000,000 and 56 total awards	None	Sent to CYFD	none				http://www.grants.gov /search/search.do:jse ssionid=kQkJTDQSI mjTnnW9RGQCQkxx 49ZmdnnY21gsS3Qq bhbp8ljW7PfQ!12116 05884?oppId=100594 &mode=VIEW

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GrantName	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No		Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Affordable Care Act Tribal Personal Responsibility Education Program for Teen Pregnancy Prevention	Availability of funding in the form of discretionary, competitive grants to Tribes and Tribal Organizations to support the development of comprehensive, teen pregnancy prevention programs. The Personal Responsibility Education Program (PREP)emphasizes a medically accurate approach, replicating effective programs or elements of programs that have been proven on the basis of rigorous, scientific research to change behavior. Behavioral changes may include delaying sexual activity, increasing condom or contraceptive use for sexually active youth, or reducing pregnancy.	6/24/11	0/20/11	Native American tribal governments (Federally recognized), Native American tribal organizations (other than Federally recognized tribal governments) and Others (see text field entitled "Additional Information on Eligibility" for clarification)	\$6,500,000 with a total of 15 awards anticipated		Unkno wn at this time	Unkno wn				http://www.grants.gov /search/search.do:jse ssionid=GgylTMHJg m1pzGx60YfpQZdK2 ywG165Yj86DpB3tpQ p2Lxhc0n2x!- 258159033?oppId=10 1433&mode=VIEW
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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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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		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	of a State from a State that: 1) received an award to		None	Several Tribes	N/A	7/30/2010		\$1,000 per Tribe (Pueblo de Cochiti, Pueblo of Jemez, Pueblo of San Felipe, Pueblo of Taos, Pueblo of Zuni, San Juan Pueblo, Santa Clara Pueblo, Santo Domingo Pueblo Tribe)	http://www07.grants.g ov/search/search.do:j sessionid=g3rmMQLc hpxyVQ4YLG4SnLZJ 25I5H6mdy216VGjqX xzqLLynzyTI!- 228465525?oppId=55 023&mode=VIEW
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	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 Amounts	ALTSD		N/A	N/A	N/A	\$371,358	N/A

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant 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 an award to implement ADRCs through the AoA and CMS ADRC	total avaliable with award ceiling of \$600,000 and floor of	None	ALTSD	None	7/29/2010	9/27/2010		http://www07.grants.g ov/search/search.do:j sessionid=gx4WMQC hpwsQS1tTx6Q1hF9 vJyBnTw0QhQ327kR fTB9ZnyfqNTf3!- 228465525?oppId=54 948&mode=VIEW
Option C. Money Follows the person (MFP)	93.779	No description at this time	6/3/10	7/30/10				NM is not eligible					

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant 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		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, 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) continues to implement and operate the ADRC	\$2,500,000 with an award ceiling of \$500,000 and award floor of \$300,000. A total of 6 awards is anticipated.	None	None at this time					http://www07.grants.g ov/search/search.do:j sessionid=2WdfMQG dfZ41w1CkPYdf92rM 9NZh4HKxzQfG6Q1 mZNqgZh2LW1yb!- 228465525?oppId=54 947&mode=VIEW
Epidemiology Grants													

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
EPIDEMIOLOGY AND	93.521	The overall purpose of the ELC cooperative agreement	8/3/10	8/27/10	Mainly State Governments.  New Mexico is named in	A total of \$39,500,000 is	None	DOH ERD			8/15/2011	\$739,137	http://www07.grants.g ov/search/search.do;j
LABORATORY		program is to assist state			the RFP			EKD					
CAPACITY FOR		public health agencies improve			line KFP	allocated with							sessionid=DrTrMZFJ
INFECTIOUS		surveillance for, and response				variable award							4ZnLwnt4SsjLylK1xZ
DISEASES		to, infectious diseases and				amounts.							c0ysbnyq9PpSyQtHL
(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											

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GrantName	Grant Description	Release Date	Eligible Applicants	Grant Amount	Matching	Yes No		Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Patient Protection and Affordable Care Act (PPACA); Emerging Infections Program CDC Vaccine Effectiveness Monitoring	Track the effectiveness of certain Vaccines	8/3/10	Capacity for Infectious Diseases	Variable Amounts and is formula funding per state	None	DOH,E RD, SLD	None	N/A	8/25/2011		N/A

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GrantName		Grant Description	Release Date	Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Yes No	Partner s	Submitted		Amount of Grant 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 \$4,500,000 with ceiling of \$650,000 and a total of 10 awards.	None	DOH ERD	None	8/25/2010	9/30/2010	\$327,379	http://www07.grants.g ov/search/search.do:j sessionid=DrTrMZFJ 4ZnLwnt4SsjLylK1xZ c0ysbnyq9PpSyOtHL qT2qFX34X!- 357751914?oppId=56 319&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant 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	This is Supplemental Funding awarded under the above grant.	None	DOH ERD	None	8/25/2010	8/31/2011	\$254,826	http://www07.grants.g ov/search/search.do:j sessionid=DrTrMZFJ 4ZnLwnt4SsjLylK1xZ c0ysbnyq9PpSyOtHL qT2qFX34X!- 357751914?oppId=56 319&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant 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 \$9,000,000 will be awarded with 53 awards anticipated (Appears to be a supplemental grant to a non- HCR grant)		DOH will apply with ERD being the lead					http://www.grants.gov /search/search.do:jse ssionid=D24vMpNQJ ZprygtLT1y39MHPRJ FGpwBYQpLhh4pffR MpRJ3dT4k8!- 743945508?oppId=56 638&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant 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	8/27/10	enhance capacity for epidemiology, laboratory and	This has a total of \$35,900,000 with approximately 58 awards	None	NM DOH is applyin g for this grant. ERD and SLD Divisio ns will work on this jointly.					http://www07.grants.g ov/search/search.do:j sessionid=3VJmMqv WM6nKj0BXffJJ1CB b4HV0cTvG0NCX4G yTXYKvk2NJRZvt!97 035526?oppId=56320 &mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Grant Submitted	Date Grant Awarded	Amount of Grant 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 \$4,500,000 with ceiling of \$650,000 and a total of 10 awards.	None	DOH and ERD				http://www.grants.gov /search/search.do:jse ssionid=NW7MMr4h0 vjR22sGQhLQ9Ylpq2 vtRcYsKJTSpFd2x9c pKyY2bFtN!5204406 42?oppId=56319&mo de=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
CDC Epidemiology & Laboratory Capacity/Emer ging Infections Program Grant		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 funding no application was required		N/A	N/A	9/24/2010		N/A
Patient 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 Departments	53.521	The purpose of this 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 departments.	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.	Various funding for separate activities. There will be a total of 58 awards.	None		none at this time				http://www.grants.gov/search/search.do:jsessionid=5XpjNLQdBxnBl0YsVfShNTd8FQWLp2YMpNd9yl6D6pymTLR5qfjX!-2077849862?oppld=80494&mode=VIEW

GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant 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	5/2/11	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	DOH	none at this time				http://www.grants.gov /search/search.do:jse ssionid=5XpjNLQdBx nBl0YsVfShNTd8FQ WLp2YMpNd9yl6D6p ymTLR5qfjX!- 2077849862?oppId=8 0514&mode=VIEW
Start of Miscellaneous 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	2/22/11	States. State of New	\$5,000,000 total funding with 5 awards anticipated	None	N/A	N/A	N/A	N/A	N/A	http://www.grants.gov /search/search.do;jse ssionid=Cg4QN4YPJ 3tdRTh8LzP89mQ2Xf 5L90Q2h2qTb1l7nyG 1XGGf11wy!6151801 74?oppId=65713&mo de=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant 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.	6/28/10	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	be awarded	Yes. This information has not yet been released						http://www07.grants.g ov/search/search.do:j sessionid=3CYbMyT BGPq1LFwNsrDbvLD 1xQ04pL1nd398nfQF LLcDsW6r4qWy!175 7025235?oppId=5550 5&mode=VIEW

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GrantName	Grant Description	Release Date	Application Due	Eligible Applicants		Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant 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 total. There is	Yes depends on amount of grant awarded	Yes DOH (DHI)	None	8/9/2010	Dec-10		http://www07.grants.g ov/search/search.do:j sessionid=d1HpMbH Ovs40vHj0MpxTzZps N8H9nftFGC1pHKGr nSxyPcFD2NO8!168 0187280?mode=VIE WREVISIONS&revNu m=0

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GrantName	Grant Description		Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant 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	11/30/10	4/4/11	State Governments	total. There is	Yes depends on amount of grant awarded	Yes DOH (DHI)	None				https://grants.hrsa.go v/webExternal/Fundin gOppDetails.asp?Fun dingCycleId=450970E 7-563E-4D2D-A021- 5C775F7F614E&Vie wMode=EU&GoBack =&PrintMode=&Onlin eAvailabilityFlag=&pa geNumber=&version= &NC=&Popup=

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No		Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Strengthening Public Health Infrastructure for Improved Health 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/).	7/8/2010		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	\$212,500,000 total. There will be 85 awards with a ceiling of \$3,100,000 and a floor of \$1,100,000.		DOH PHD will be the lead and IT will be a partner	None	8/8/2010	9/20/2010	******	http://www.grants.gov /search/search.do:jse ssionid=LTp0M15hG SdyZRPhkn0QvrWnt 7bLwY5VJMFJfgK0k xLZjV02plm5!931914 360?oppld=55684&m ode=VIEW
Strengthening Public Health Infrastructure for Improved Health 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/).	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.	This is Supplemental Funding from the Above Grant		DOH PHD will be the lead and IT will be a partner	None	8/8/2010	8/31/2011	\$300,000	http://www.grants.gov/search/search.do:jsessionid=LTp0M15hGSdyZRPhkn0QvrWnt7bLwY5VJMFJfgK0kxLZjV02plm5!931914360?oppld=55684&mode=VIEW

GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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	G/24/2010	Association of Maternal and Child			Will not apply for this as eligible entities are not based in New Mexico					http://www07.grants.g ov/search/search.do:j sessionid=Cg1yMvyp 69NY1Tt4122p1jSv7J nkkSsJkYLHVsP1Mr TpntNn7Cgs!- 1941321387?oppld=5 6343&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Expansion of the Rural Community Hospital Demonstration under the Affordable 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.			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:	\$32,000,000 with 20 awards 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 emoProjectsEvalRpts /downloads/2004_Rur al_Community_Hospit al_Demonstration_Pr ogram.pdf

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant 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 wn at this time					http://www.grants.gov /search/search.do:jse ssionid=LdKSNtQWG 6P3TplzSDzzzJDMGI 14dWhLtRZCqRPjfzn. hQhslF7n2!15648844 9?mode=VIEWREVI SIONS&revNum=0

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Grant Submitted	Date Grant Awarded	Amount of Grant 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 wn at this time				http://www.grants.gov /search/search.do:jse ssionid=Jr2wNnBYDx LvjTy1zfYDJICyv5xlp v8vtYJtnmDZ1GP30p nWd8kz!505166326? oppId=66853&mode= VIEW
Prevention Grants												

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Grant Submitted	Date Grant Awarded	Amount of Grant 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, Institutes of Higher Education (IHEs)	\$5,250,000 total funds with 5 awards.	None	None at this time				http://www.grants.gov /search/search.do;jse ssionid=bvSnN5mD9 JQpGdCf0HqBBsLHy Lyfhd3SYTJ6tLfjhLk0 LgznT2XC!15526385 00?oppId=65553&mo 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	required	No it was determined to be a very compet ative grant and will not apply for this grant.				http://www07.grants.gov/se arch/search.do;jsessionid= h71sMGkHht1TnNTGpFGL Bm84rJWdYR7P8LhTH1B bhypnD10Q26jY!16801872 80?mode=VIEWREVISION S&revNum=0
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GrantName (	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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 \$4,250,000 is avaliable funding will be per capita basis		DOH PHD will be the lead					http://www07.grants.g ov/search/search.do:j sessionid=DrTrMZFJ 4ZnLwnt4SsjLylK1xZ c0ysbnyq9PpSyQtHL qT2qFX34X!- 357751914?oppId=56 289&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Health Center New Access Points Funded Under the Affordable Care Act of 2010	93.527	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.		11/17/2010		\$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 /search/search.do;jse ssionid=ynB7MhVRX 051vbmVLfJDxLlpK4 Z2MbzYTyRKd2bn4rv DsKPqD4IJ!5133734 27?oppId=56499&mo de=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
CDC Tobacco Quitlines Grants		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 Funding from CDC		DOH was awarde d Formul a funds	None	N/A	9/24/2010	\$60,340	N/A
CDC Tobacco Quitlines Grants		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		Additional Supplemental Funding from CDC		DOH was awarde d Formul a funds	None	N/A	8/25/2011	\$85,482	N/A

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants		Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Medicaid Incentives for Prevention of Chronic Diseases (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 diabetes or in the case of a diabetic, improving the management of the condition.		5/2/2011	State Governments	10 total awards between \$5,000,000 and \$10,000,000		DOH					http://www.grants.gov /search/search.do;jse ssionid=PS2JNm0hY yTLjTQSYp6bfKRhT9 hVyL7RFVhjQyRNZIL 2GTvLG2Fw!615180 174?oppId=73653&m ode=VIEW
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	4/25/2011	Health Service, A National Cancer Institute-designated cancer center,	funding between	None	None					http://www.grants.gov /search/search.do:jse ssionid=5XpjNLQdBx nBl0YsVfShNTd8FQ WLp2YMpNd9yl6D6p ymTLR5qfjX!- 2077849862?oppld=7 7933&mode=VIEW
					F	age 53							9/1/2011

GrantName	Grant Description	Release Date	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
FY 2011 Supplements for Rapid HIV Testing	The Substance Abuse and Mental Health Services Administration (SAMHSA) announces the availability of funds to expand the capacity of Minority AIDS Initiative (MAI) grantees in the Center for Substance Abuse Treatment (CSAT)) and Center for Substance Abuse Prevention (CSAP) to provide rapid HIV testing, counseling, and referral to care.	5/2/2011	CO, ii iii, ii giantoco. 1.CO, ti o i i	\$50,000	None	None	DOH				http://www07.grants.g ov/search/search.do:j sessionid=BVmtNQp Yvn9pJNhTLfb51djT G6GTGwQXJNNRpn hcQw3Jpp2KJkGW!- 703747468?oppId=91 174&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Public Prevention Health Fund: Community Transformatio n Grant		The purpose of this program is to create healthier communities by 1) building capacity to implement broad evidence and practice-based policy, environmental, programmatic and infrastructure changes, as appropriate, in large counties, and in states, tribes and territories, including in rural and frontier areas and 2) supporting implementation of such interventions in five strategic areas (Strategic Directions) aligning with Healthy People 2020 focus areas and achieving demonstrated progress in the following five performance measures outlined in the Affordable Care Act: 1) changes in weight, 2) changes in proper nutrition, 3) changes in physical activity, 4) changes in tobacco use prevalence, and 5) changes in emotional well being and overall mental health, as well as other program-specific measures.	5/13/2011	Application 7/15/2011	this program.  A state governmental agency, its bona fide agent, or its equivalent, as designated by the Governor, Health Officer, or other state executive as the official applicant for this program. For this announcement, the term "State" includes the 50 states and territories.  State nonprofit organizations  Local nonprofit organizations  Federally recognized American Indian Tribes	\$102,000,000 total with approximate 75 awards. The first round will be for \$100,000,000 with increased thru 2015 Total amounts depends on entity applying for grant.	None	None	Yes DOH/P HD	Work with HSD			http://www.grants.gov /search/search.do:jse ssionid=snnKNTPZjd SVTSvZGrrv1JQznC 2JJpShwp9Rgxt8cTIL S2yC9Clp!- 210279180?oppId=93 873&mode=VIEW

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GrantName		Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No		Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Prevention and Public Health Fund Coordinated Chronic Disease Prevention and Health Promotion Program	93.544	The purpose of the program is to establish or strengthen Chronic Disease Prevention and Health Promotion Programs within State Health Departments, to provide leadership and coordination, support development, implementation and evaluation of CDC funded Chronic Disease Prevention and Health Promotion programs, focusing on the top five leading chronic disease causes of death and disability (e.g. heart disease, cancer, stroke, diabetes, and arthritis) and their associated risk factors, in order to increase efficiency and impact of categorical diseases and risk factor prevention programs, including, but not limited to heart disease, cancer prevention and control, stroke, arthritis, diabetes, nutrition, physical activity and obesity.	6/8/2011		Grantees currently funded under DP09-901 Collaborative Chronic Disease, Health Promotion, and Surveillance Program Announcement: Tobacco Control, Diabetes Prevention and Control, and Behavioral Risk Factor Surveillance System, National Center for Chronic Disease Prevention and Health Promotion.	\$38,724,500 current FY Fudning with an anticipated 52 total awards. There is a total of \$129,271,000 for this project.	None	DOH will apply as they already have a DP09- 901 funded	None				http://www07.grants.g ov/search/search.do:j sessionid=16XSN2cN 79F6pLyj8yLf6hDRJY WvdsbsTHQMWJ5R Tr184V2TQ83G!- 706861639?oppId=98 533&mode=VIEW
Access to Care Grants													

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GrantName	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Affordable Care Act (ACA) Infrastructure to Expand Access to Care Program	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	10/4/2010	city, county and district health departments), its	One Award at \$100,000,000	Cost Sharing Ratio (Federal:No n-Federal): 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 Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Mental health care transformation 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, traumainformed care programs, and special services for military families.	N/A	N/A		\$14.3 million per year will be available to fund the 20 grants. Awardees are eligible for up to \$750,000 per year for up to five years.		Grant Awarde d to HSD	HSD	N/A	10/9/2010	\$734,500	http://www.samhsa.g ov/newsroom/advisori es/1010081619.aspx
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		A state governmental agency, its bona fide agent, or its equivalent, as designated by the Governor, Health Officer, or other state executive as the official applicant for this program. For this announcement, the term "State" includes the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, the Commonwealth of the Northern Marianna Islands, American Samoa, Guam, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau.	\$727 million to 143 community health centers across the country, Awarded to First Choice Community Healthcare, Inc. Albuquerque, NM		N/A	N/A	N/A	10/8/2010	\$8,153,989	http://www.hhs.gov/n ews/press/2010pres/ 10/chc_chart.html

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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 to 143 community health centers across the country. Awarded to Ben Archer Health Center, Hatch,NM	None	N/A	N/A	N/A	10/8/2010		http://www.hhs.gov/n ews/press/2010pres/ 10/chc_chart.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 to 143 community health centers across the country. Awarded to La Clinica de Familia, Inc. Las Cruces, NM	None	N/A	N/A	N/A	10/8/2010	\$3,786,635	http://www.hhs.gov/n ews/press/2010pres/ 10/chc_chart.html

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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 to 143 community health centers across the country. Awarded to Hidalgo Medical Services, Lordsburg, NM	None	N/A	N/A	N/A	10/8/2010		http://www.hhs.gov/n ews/press/2010pres/ 10/chc_chart.html
Develop and Modernize Community Health 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		inative villages	A total of \$8 Million was awarded in various amounts	None	N/A	N/A	N/A	11/19/2010	\$90,547	http://www.hhs.gov/n ews/press/2010pres/ 11/20101119b.html

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants		Cost Sharing Matching	Apply Yes No		Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Health Center Expanded Services (ES) Fiscal Year 2011	93.527	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.		1/6/2011	Tribal organizations, which include Intertribal Councils and American Indian Health Boards which meet the definition set forth in 25 U.S.C. Section 1603(e) and are under a resolution that such organizations, councils, and boards represent the underlying tribes.	HRSA will award between \$270 million and \$335 million through formula-based supplements to existing section 330 funded health centers.	None	Previou s awarde d NM Health Center s	Unkno				http://www.hrsa.gov/g rants/apply/assistanc e/ExpandedServices/ announcementandins 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	Urban Indian Health Programs, tribal and intertribal consortia that meet the definition set forth in 25 U.S.C. Section 1603(f) or 1603(g).	This will be a total of \$3.9 million. A total of 41 awards is expected with a ceiling of \$95,700.	None	The only MCHB-funded Center in NM is Parent s Reaching Out	Unkno wn				http://www.grants.gov /search/search.do:jse ssionid=cG91MLxbHf L7jsNFfcL1yNvms3v MqSxJRLxTMb8hhPn 5XJLg7Ry7!- 883699945?oppId=58 573&mode=VIEW

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No		Grant Submitted	Date Grant Awarded	Amount of Grant 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	4/19/2011	Eligible applicants for Parts I, II, 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 Institutes (NNPHI) 5. Public Health Foundation (PHF) PART II 1. Association of State and Territorial Health Officials (ASTHO) 2. Council of State and Territorial Epidemiologists (CSTE) 3. Public Health Foundation (PHF) PART III 1. Association of Maternal and Child Health Programs (AMCHP) 2. Association of State and Territorial Health Officials (ASTHO) 3. National Association of County and City Health Officials (ASTHO) 3.	Part I. 5 awards with average of \$524,400. Part II . Applied Epi Fellow 3 Award betweem \$650,000 and \$1,370,000, and Part III 6 awrads with an average of \$650,000.	None	None	Unkno wn				http://www.grants.gov /search/search.do:jse ssionid=5XpjNLQdBx nBl0YsVfShNTd8FQ WLp2YMpNd9yl6D6p ymTLR5qfjX!- 2077849862?oppId=8 0533&mode=VIEW
School-Based Health Center Capital Program	93.501	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010	12/1/2010	For this funding opportunity, an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to DES MOINES MUNICIPAL SCHOOLS Des Moines, NM	None	N/A	N/A	Uknown	7/14/2011	\$499,462	http://www.hhs.gov/n ews/press/2011pres/ 07/20110714a.html
School-Based Health Center Capital Program	93.501	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010	12/1/2010	For this funding opportunity, an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to NATIVE AMERICAN COMMUNITY ACADEMY Albuquerque, NM	None	N/A	N/A	Uknown	7/14/2011	\$500,000	http://www.hhs.gov/n ews/press/2011pres/ 07/20110714a.html
School-Based Health Center Capital Program	93.501	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010	12/1/2010	For this funding opportunity, an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to NORTHEAST REGIONAL EDUCATION COOPERATIVE, Las Vegas, NM	None	N/A	N/A	Uknown	7/14/2011	\$499,232	http://www.hhs.gov/n ews/press/2011pres/ 07/20110714a.html

GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No		Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
School-Based Health Center Capital Program	93.501	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010		For this funding opportunity, an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to UNIVERSITY OF NEW MEXICO HEALTH SCIENCES CENTER Albuquerque, NM	None	N/A	N/A	Uknown	7/14/2011		http://www.hhs.gov/n ews/press/2011pres/ 07/20110714a.html
School-Based Health Center Capital Program	93.501	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010		For this funding opportunity, an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to LA CLINICA DEL PUEBLO DE RIO ARRIBA TIETTA Amarilla, NM	None	N/A	N/A	Uknown	7/14/2011		http://www.hhs.gov/n ews/press/2011pres/ 07/20110714a.html
School-Based Health Center Capital Program		Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010		For this funding opportunity, an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to THE COMMUNITY FOUNDATION OF SOUTHERN NEW MEXICO Las Cruces, NM	None	N/A	N/A	Uknown	7/14/2011	\$117,183	http://www.hhs.gov/n ews/press/2011pres/ 07/20110714a.html
Health Center New Access Point PPACA Grant		The purpose of the New Access Points opportunity is to establish health service delivery sites to improve the health of the Nation's underserved communities and vulnerable populations by assuring access to comprehensive, culturally competent, quality primary health care services.	8/9/2010		Organizations eligible to compete include public or nonprofit private entities, including tribal, faith-based and community-based organizations.	Ben Archer Health Center, Hatch NM Was awarded this grant.	None	N/A	N/A	Uknown	8/9/2011	\$483,333	http://www.grants.gov /search/search.do?m ode=VIEW&oppId=56 499
IT PPACA Grants						22.00							

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
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.		No agency at this time. Possibl e DoIT				http://www.grants.gov /search/search.do;jse ssionid=8pWYMRwQ yybpSQhJjK38YLwm sKMZMb8f5N8RZPG XSZrQH2cdTmdK!19 72789458?oppId=586 05&mode=VIEW
Grants to Expand Care Coordination through the Use of Health Information Technology in Targeted Areas of Need		The purpose of this program is to leverage technology to enhance and/or expand the capacity of substance abuse treatment providers to serve persons in treatment who have been underserved because of lack of access to treatment in their immediate community due to transportation concerns, an inadequate number of substance abuse treatment providers in their community, and/or financial constraints.	5/2/2011		example: State and local	There is a total of \$5,600,000 with a total of 20 awards with average of \$280,000	None	None				http://www.grants.gov /search/search.do;jse ssionid=p1mWNQNR j9wrvCQTcPd1sYcpg G8hNT81ZGsM9QF1 tZx2JnyvVynG!77396 1164?oppId=91153& mode=VIEW
Medicaid Medicare Grants												

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Medicare Program; Solicitation for Proposals for the Medicare Community- Based Care Transitions Program	93.772 and 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.		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 sys/pkg/FR-2011-04- 15/pdf/2011-9126.pdf
PPACA Loans													

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GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Partner s	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
Consumer Operated and Oriented Plan	93.545	Section 1322 of the Affordable Care Act created the Consumer Operated and Oriented Plan program (CO-OP program) to foster the creation of new consumer-governed, private, nonprofit health insurance issuers, known as CO-Ops In addition to improving consumer choice and plan accountability, the CO-OP program also seeks to promote integrated models of care and enhance competition in the Affordable Insurance Exchanges established under sections 1311 and 1321 of the Affordable Care Act. The statute provides loans to capitalize eligible prospective CO-OPs with a goal of having at least one CO-OP in each State.	7/28/2011	Rolling Basis	To be eligible to apply for a loan under the CO-OP program, an applicant must:  1. Intend to become a CO-OP; 2. Have formed a private nonprofit member organization (see Section IV.B for acceptable evidence of nonprofit status); and 3. Submit in its loan application an Eligibility Affidavit and Application Certification signed by the applicant's chief executive officer or chief financial officer, or an officer of the applicant's Board of Directors, certifying the accuracy, completeness, and truthfulness of all information contained in the loan application; and certifying that, if the applicant organization is awarded loan(s) under this FOA, it will repay them according to the terms laid out in this FOA, proposed to be described in 45 CFR part 156 subpart F, and in the Loan Agreement issued when the award is	Varible funding opportunities **PLEASE NOTE THIS IS A LOAN	None						http://www.grants.gov /search/search.do:jse ssionid=FFpwTyNTrb NXLkgqwdhPRzXnBh Syw1QtjhTNJ8f6xjyR 27ykN07j!957673825 ?oppId=109093&mod e=VIEW

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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 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
0	ATOF Inc	Development of BiosparQ Instrument for rapid microbial 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 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 Accelerate Development of 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 Otimulatian 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 Biomarker Monitoring	\$244,479.25	0	\$244,479
			Total	\$4,725,876

GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Grant Submitted	Date Grant Awarded	Amount of 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	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	9		YES DOL/DWS	7/19/2010	9/24/2010		https://grants.hrsa.gov/ webExternal/FundingO ppDetails.asp?Funding CycleId=70332C9D- C405-4199-BFE2- 78FBF3C52CD3&View Mode=EU&GoBack=& PrintMode=&OnlineAva ilabilityFlag=&pageNu mber=&version=&NC= &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		Eligible applicants are collegiate schools of nursing, academic health centers, and other private or public entities accredited by a national nursing accrediting agency	\$30,000,00 0 total with approximat ely 40 awards		YES UNM- HSC	Unknown	8/5/2010		http://www07.grants.go v/search/search.do:jse ssionid=hDHtMfCJfhvK 2ylCkvjg1QBFQGKXjD T2Ws8HDQvFZDyYJdl PSBGZ!- 491952003?oppld=552 80&mode=VIEW
Nurse Education, Practice, Quality and 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	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 \$29,900,00 0 with varible awards. There are 108 infrastructu		Yes- UNM- HSC	Unknown	8/5/2010	\$406,078	N/A

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Education, Practice, Quality and 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	nursing, academic health centers, and other private or public entities accredited by a national nursing accrediting agency	Total of \$29,900,00 0 with varible awards. There are 108 infrastructu re grants		Yes Western NM University	Unknown	8/5/2010	
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.	6/17/10	.,,,,,,	and the second s	\$32,000,00 0 with 40 awards	INone	Yes UNM- HSC	Unknown	9/28/2010	http://www07.grants.go v/search/search.do:jse ssionid=JmDCMf3K21 QJVw5zgSHTmGqyQV qNc2HvysBmQXTxGn G7DDRpW448!- 491952003?oppld=552 83&mode=VIEW

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C   -  -  -  -  -  -  -  -  -  -  -  -	.   02 [	11 Key components of this oversight	(17/10	7/7/10	State governments	¢Ε1 000 00	A	\/	7/7/2010	0/1//2010	¢1 000 000	http://www.07.aaaata.aa
"Grants to		require insurers to report certain	6/7/10	////10	State governments	\$51,000,00		Yes,	7/7/2010	8/16/2010	\$1,000,000	http://www07.grants.go
States for	•	health insurance rate information				0 there will	are not	PRC/Insura				v/search/search.do;jse
Health		to both the Secretary and the				be	required to	nce				ssionid=NDgpMhnSXg
Insurance	ż	States in which they operate,				approximat		Division				mt7BBMQmFHz1sy46
Premium		including:1. All increases in rates				ely 51	matching	D.M.S.G.T.				kY7wl22P09N1h2cGT
		for health insurance over the prior				•	_					
Review-		year that meet the established				awards	contribution					OCcCL2hyF!13868580
Cycle I"		unreasonable threshold (currently				with	s. However,					17?oppld=55029&mod
Office of		under development);2.				\$1,000,000	the state					e=VIEW
Consume	r	Justifications for unreasonable				award	share of					
		increases in rates prior to their										
Informatio	ווכ	implementation.Public disclosure				ceiling.	funds					
and		of this information and insurers					expended					
Insurance	<b>,</b>	will be required to prominently					for rate					
Oversight		post the information on their					review					
(OCIIO)		respective Internet					activities					
(OCIIO)		websites.Section 2794 also										
		provides for a program of grants					under the					
		to states to help them improve the health insurance rate review and					state's					
		reporting process. Congress has					proposed					
		appropriated \$250 million for this					plan for rate					
		grant program for the federal					review shall					
		fiscal years (FFYs) of 2010-2014.										
		HHS is authorized to award this					not be less					
		money during multiple award					than the					
		cycles to eligible States beginning					funds					
		in FFY 2010. Federal regulatory					expended					
		guidance is currently under					in the fiscal					
		development to establish the										
		statutorily mandated process of					year					
		annual rate review for health										
		insurance.										
Early Reti	τοο ΝΛ	The Early Retiree Reinsurance	6/29/10	This grant is	businesses, unions, state	This is a		Yes		9/16/2010	\$8,700,000	www.hhs.gov/ociio/reg
		Program will reimburse	0/2 9/10		and local governments					7/10/2010	\$0,700,000	
Reinsurar	nce	employers for medical claims		based on a	who provide health	variable		NMRHCA				ulations/index.html
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		basis								
		ependents. Employers who				<u>(The</u>						
		provide health coverage for				<u>amount</u>						
		early retirees are eligible to				reported						
		apply. Program participants will				is as of						
		be able to submit claims for										
		medical care back to June 1,				<u>8/24,2011)</u>						
		2010. This program is intended										
		as bridge coverage until										
		insurance exhanges become										
		operational in 2014.										
		operational in 2014.										

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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	State governments	\$29,000,00 0 total with a ceiling of \$3,400,000 and floor \$120,00 a total of 56 awards	PRC/DOI	9/10/2010	10/19/2010	\$226,426	http://www.grants.gov/s earch/search.do:jsessi onid=THbqMLpZyhlYT WQSSWn0cxYyXwN2 xdpsFTptWtXfdPQxVJ nM1Prh!- 832749192?oppId=560 58&mode=VIEW
State Planning and Establishme nt 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 maximum of \$1 million per	7/29/10	9/1/10	State Governments	Total of \$51,000,00 0 with a ceiling of \$1,000,000 . 51 Awards are Anticipated	Yes HSD	9/1/2010	9/30/2010	\$1,000,000	http://www.grants.gov/s earch/search.do:jsessi onid=yFPDMR6BhZ1n WvWdFffh4ZIPxh6Jc2 znhwj8628sQk98jht0Pl K1!1087699643?oppld =56204&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		None	NM Insurance division received grant from original announcem ent	7/7/2010	8/16/2010	http://www07.grants.go v/search/search.do:jse ssionid=hJIZM1yHzrG KGqzXt3ylHcc1Znp5Y ByyrJ2Zdf2Zg4SGM4D yTRHh!97035526?oppl d=57031&mode=VIEW
Affordable Care Act (ACA) Maternal, Infant and Early Childhood Home Visiting Program	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	\$90,000,00 0 with 56 total grant awards of various amounts	None	CYFD Requested Amount:\$9 51,952	7/9/2010	7/21/2010	https://grants.hrsa.gov/ webExternal/FundingO ppDetails.asp?Funding CycleId=E24F384A- 7290-49D0-A393- EED7F542B618&View Mode=EU&GoBack=& PrintMode=&OnlineAva ilabilityFlag=&pageNu mber=&version=&NC= &Popup=

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Affordable Care Act (ACA) Tribal Maternal, Infant, and Early Childhood Home Visiting Grant Program	76.000	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 socio-economic status; improved coordination of referrals to community resources and		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)	\$3,000,000 with an award ceiling of \$500,000 and award floor of \$100,000 with an award total of 15.		Native American Professiona I Parent Resources, Inc.	Unknown	9/29/2010		https://www.cfda.gov/? s=program&mode=for m&tab=step1&id=788d 6ac24971c92c3580fda 2894431ba
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Affordable Care Act (ACA) Tribal Maternal, Infant, and Early Childhood Home Visiting Grant Program	, o o o	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 socio-economic status; improved coordination of referrals to community resources and	6/25/10			\$3,000,000 with an award ceiling of \$500,000 and award floor of \$100,000 with an award total of 15.	None	Pueblo of San Felipe	Unknown	9/29/2010		https://www.cfda.gov/? s=program&mode=for m&tab=step1&id=788d 6ac24971c92c3580fda 2894431ba
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FY10 Support for Pregnant and Parenting Teens and Women FOA	P3.500  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 agencies such as state education, human services and health agencies. HHS encourages applications that	7/1/10 8/2/1	Native American tribal governments (Federally recognized) Nonprofits having a 501(c)(3) status with the IRS, other than institutions of higher education	funding for the grant with a function Ceiling of \$500,000 p and a total of 25 on awards.	n amount rom non- ederal unds equal to 25 percent of	Yes PED	8/2/2010	9/29/2010	\$1,300,000 http://www07.grants.v/search/search.do;j:ssionid=tykWMnNNijvygcVKX64HpnL5MZtynKtgqr7phNt3HSibH9W!404589083?cld=55579&mode=VIIW	Se Yjb 179 tR
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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	7/30/10	8/30/10	State Governments	Each state will be awarded a minimun of \$250,000	None	DOH Family Planning Program	8/30/2010	9/30/2010		http://www.acf.hhs.gov/ grants/open/foa/view/H HS-2010-ACF-ACYF- PREP-0125
	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.										
Family-to- Family Health Information Centers in each state and the District of 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 \$4,900,000 for exisiting center a total of 51 with variable award amounts	None	Parents Reaching Out to Help	Unknown	7/27/2010	\$95,700	N/A

Option A Medicare Improvemen t for Patients and Providers Act (MIPPA) Affordable Care Act	70.071	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	6/7/10	that: 1) received an award to implement ADRCs through the AoA and CMS ADRC grants funded in fiscal years 2003, 2004, 2005 and 2009	avaliable with a total	None	Several Tribes	7/30/2010	9/27/2010	\$8,000 http://www07.grants.gov/search/search.do:jsessionid=g3rmMQLchpyyVQ4YLG4SnLZJ25l5H6mdy216VGjqXxzqLlynzyTll-228465525?oppld=55023&mode=VIEW
Assistance Program Funding for Title VI Native American Programs		(ADRCs), and for a resource center to help coordinate efforts to inform older Americans about available Federal and State benefits available.			Jemez, Pueblo of San Felipe, Pueblo of Taos, Pueblo of Zuni, San Juan Pueblo, Santa Clara Pueblo, Santo Domingo Pueblo Tribe)					

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Option B. 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.	6/3/10	7/30/10	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, 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)	\$10,000,00 0 total avaliable with award ceiling of \$600,000 and floor of \$400,000. It is anticipated there will be a total of 25 awards.	ALTSD	7/29/2010	9/27/2010	\$500,000 http://www07.grants.go v/search/search.do:jse ssionid=gx4WMQChp wsQS1tTx6Q1hF9vJyB nTw0QhQ327kRfTB9Z nyfqNTf3!- 228465525?oppId=549 48&mode=VIEW

Patient	93.521	The purpose of this EIP-ACA	8/3/10	8/27/10	Mainly State	A total of	None	DOH ERD	8/25/2010	9/30/2010	\$327,379	http://www07.grants.go
Protection		FOA is to support state and			Governments. New Mexico	\$4.500.000						v/search/search.do;jse
and		local health departments'			is named in the RFP	with ceiling						ssionid=DrTrMZFJ4Zn
Affordable		surveillance infrastructure				_						Lwnt4SsjLylK1xZc0ysb
		through enhancement of the				of						, ,
Care Act		epidemiology and laboratory				\$650,000						nyq9PpSyQtHLqT2qFX
(PPACA);		capacity of the existing EIP				and a total						<u>34X!-</u>
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				awaras.						17QHIOGE-VIEV
Program		for conducting active,										
(EIP);		population-based surveillance										
Enhancing		and special studies for invasive										
Epidemiolog		bacterial diseases, foodborne										
y and		pathogens, healthcare										
9		associated infections (HAIs),										
Laboratory		influenza, and many other infectious diseases. The										
Capacity		network has been instrumental										
(U01)		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										
		HOLWOIK										

Detient	02 524	The purpose of this EIP-ACA	NI/A	INIZA	Mainly State	A total of	None	DOLLEDD	NI/A	0/20/2010	¢254.027	http://www.O7.groupts.ac
Patient		FOA is to support state and	N/A	N/A	Governments. New Mexico	A total of	None	DOH ERD	N/A	9/30/2010	\$254,826	http://www07.grants.go
Protection		local health departments'			is named in the RFP (This	\$4,500,000						v/search/search.do:jse
and					is Supplemental Funding	with ceiling						ssionid=DrTrMZFJ4Zn
Affordable		surveillance infrastructure			io ouppioinionai i analing	of						Lwnt4SsjLylK1xZc0ysb
		through enhancement of the			as this grant is a continuation of PPACA)	OI						
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				awarus.						17ATTIOGE - 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										
		HELWOIK										

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
Epidemiolog	14//	epidemiologists,	14/71	1 4// 1		1 4/7 1	funding no		1477	712412010	Ψ300,001	1071
y &		laboratory scientists, and					application					
Laboratory		health information					was					
Capacity/Em		specialists who can work					required					
erging		on multiple infectious					·					
Infections		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 Public Health Infrastructure for	7/8/2010	8/9/2010	ligible applicants include all 50 states, Washington,		None	DOH PHD	8/8/2010	9/20/2010	\$199,877	http://www.grants.gov/s
g Public		Improved Health Outcomes"			D.C., 9 large local health	00 total.		will be the				earch/search.do:jsessi
Health		program is to systematically			departments supporting	There will		lead and IT				onid=LTp0M15hGSdyZ
Infrastructur		increase the performance			• •	be 85		will be a				RPhkn0QvrWnt7bLwY
e for		management capacity of public health departments in order to			million or more inhabitants (Chicago, Illinois; Dallas,	awards		partner				5VJMFJfgK0kxLZjV02
Improved		ensure that public health goals			Texas; Houston Texas;	with a						plm5!931914360?oppl
Health		are effectively and efficiently			Los Angeles, California;	ceiling of						d=55684&mode=VIEW
Outcomes		met. This program will increase				\$3,100,000						
		the capacity and ability of health departments to meet national			Philadelphia, Pennsylvania; Phoenix,	and a floor						
		public health standards, such as			A	of ¢1 100 000						
		those of the National Public			rexas; San Diego,	\$1,100,000						
		Health Performance Standard			California), 5 U.S.							
		Program			Territories, 3 U.S. Affiliated Pacific Islands and up to 7							
		(http://www.cdc.gov/od/ocphp/n phpsp/index.htm), Public Health			federally-recognized tribes							
		Accreditation Board			with an established public							
		(http://www.phaboard.org/), and			health department							
		National Quality Forum			structure (or their equivalent) that provide							
		(http://www.qualityforum.org/).			public health services to							
					their tribal members, or							
					bona fide agents of any of							
					the eligible entities.							

Strengthenin g Public Health Infrastructur e for Improved Health 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/n phpsp/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.	suppleme ntal funding	None	DOH PHD will be the lead and IT will be a partner	8/8/2010	8/25/2011	\$300,000	http://www.grants.gov/search/search.do;jsessionid=LTp0M15hGSdyZRPhkn0QvrWnt7bLwY5VJMFJfgK0kxLZjV02plm5!931914360?oppld=55684&mode=VIEW
CDC Tobacco Quitlines Grants	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 funding	Supplemen tal Funding from CDC		DOH was awarded Formula funds	N/A	9/24/2010	\$60,340	N/A

CDC Tobacco Quitlines Grants (Supplement al Grand award)	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	TPPALA IT IS LINKHOWN THE	Supplemen tal Funding from CDC	DOH was awarded Formula funds	N/A	8/25/2011	\$85,482	N/A
Mental health care transformati on 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, traumainformed 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.	million per year will be available to fund the 20 grants. Awardees are eligible	Grant Awarded to HSD	N/A	10/9/2010		http://www.samhsa.gov /newsroom/advisories/ 1010081619.aspx

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	N/A	Grant awarded to First Choice Community Healthcare, Inc. Albuquerque, NM	\$727 million to 143 community health centers across the country	None	N/A	N/A	10/8/2010		http://www.hhs.gov/ne ws/press/2010pres/10/ chc_chart.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	N/A	Grant awarded to Ben Archer Health Center Hatch, NM	\$727 million to 143 community health centers across the country (For buildings not operations)	None	N/A	N/A	10/8/2010	\$5,778,210	http://www.hhs.gov/ne ws/press/2010pres/10/ chc_chart.html

Grants from the Affordable Care Act to upgrade and expand community health 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	Cruces, NM	\$727 million to 143 community health centers across the country	None	N/A	N/A	10/8/2010	\$3,786,635	http://www.hhs.gov/ne ws/press/2010pres/10/ chc_chart.html
Grants from the Affordable Care Act to upgrade and expand community health 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	Lordsburg, NIVI	\$727 million to 143 community health centers across the country	None	N/A	N/A	10/8/2010	\$8,715,094	http://www.hhs.gov/ne ws/press/2010pres/10/ chc_chart.html
Qualifying Therapeutic Discovery Project Grants for the State of New Mexico (PPACA)	N/A	Variable Private Entities have these grants	N/A	N/A		Various Grant Amounts	N/A	N/A	N/A	11/1/2010	\$4,725,876	N/A

Develop and M/A Modernize Community Health 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	Grant Awarded to New Mexico Primary Care Association	A total of \$8 Million was awarded in various amounts	None	N/A	N/A	11/19/2010		http://www.hhs.gov/ne ws/press/2010pres/11/ 20101119b.html
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Money Follows the Person Rebalancing	70.771	Building and strengthening their MFP Demonstration Programs and for additional States to participate. The law amends section 6071 of the DRA to make	7/23/10	1/7/11	State governments	\$22,500,00 0 total funds with 20 awards	None	Yes HSD will submit application	HSD with collaboratio n with ALTSD and	2/22/2011	http://www.grants.gov/s earch/search.do;jsessi onid=drc5MJ5K1Y5Q WQfmvQ80vLZkv292c
Grant Demonstrati on Patient Protection and Affordable Healthcare Act Section 2403		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				20 dwal ds			DOH		YhrTjv9RLjXv4bbyl6CY v2b!- 169038256?oppld=560 91&mode=VIEW
		to participate in the demonstration. However, one exception applies in the expanded definition of eligibility: days that an									

Niedienoviele	02.507	Title VI, Subtitle B, Part III,	4/10/11	(120/11	Ct-t- C	Th	V	V DOLL	0/0/2010	1 Dag 10	¢1 F00 000	latter //07
Nationwide	93.506	Subtitle C, Section 6201 of the	4/18/11	6/30/11	State Governments	There is no		Yes DOH	8/9/2010	1-Dec-10		http://www07.grants.go
Program for		Affordable Care Act (ACA) directs				grant	depends on	(DHI)				v/search/search.do:jse
National and		the Secretary of Health and				amout	amount of					ssionid=d1HpMbHQvs
State		Human Services (HHS), to				total.	grant					40vHi0MpxTzZpsN8H9
Background		establish a nationwide program to					awarded					nftFGC1pHKGrnSxyPc
~		identify efficient, effective, and					awarueu					
Checks for		economical procedures for long				ceiling of						FD2NQ8!1680187280?
Direct		term care facilities and providers				\$3,000,000						mode=VIEWREVISIO
Patient		to conduct background checks on				and floor of						NS&revNum=0
Access		a statewide basis on all				\$1,500,000						
Employees		prospective direct patient access				+ 1/000/000						
		employees. CMS is inviting										
of Long		proposals from all States and U.S.										
Term Care		territories to be considered for inclusion in this National										
Facilities		Background Check Program										
and		which will be in effect through										
Providers		2013. Federal matching funds are										
TOVIGOIS		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										

Medicare Part D "Donut Hole" Rebate Checks	Rebate checks for qualifying individuals	N/A	under Medicare	\$250 Tax free rebate checks for 19,941 New Mexicans	None	N/A	N/A	N/A	\$4,985,250	N/A
School- Based Health Center Capital Program	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010	For this funding opportunity, an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to DES MOINES MUNICIPAL SCHOOLS Des Moines, NM	None	N/A	Uknown	7/14/2011	\$499,462	http://www.hhs.gov/ne ws/press/2011pres/07/ 20110714a.html
School- Based Health Center Capital Program	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010	applicant must be a school-based health	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to NATIVE AMERICAN COMMUNITY ACADEMY Albuquerque, NM	None	N/A	Uknown	7/14/2011		http://www.hhs.gov/ne ws/press/2011pres/07/ 20110714a.html

School- Based Health Center Capital Program	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010	12/1/2010	For this funding opportunity, an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to NORTHEAST REGIONAL EDUCATION COOPERATIVE , Las Vegas, NM	None	N/A	Uknown	7/14/2011	\$499,232	http://www.hhs.gov/ne ws/press/2011pres/07/ 20110714a.html
School- Based Health Center Capital Program	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010	12/1/2010	For this funding opportunity, an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to UNIVERSITY OF NEW MEXICO HEALTH SCIENCES CENTER Albuquerque, NM	None	N/A	Uknown	7/14/2011	\$500,000	http://www.hhs.gov/ne ws/press/2011pres/07/ 20110714a.html
School- Based Health Center Capital Program	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010	12/1/2010	For this funding opportunity, an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to LA CLINICA DEL PUEBLO DE RIO ARRIBA Tierra Amarilla, NM	None	N/A	Uknown	7/14/2011	\$500,000	http://www.hhs.gov/ne ws/press/2011pres/07/ 20110714a.html
School- Based Health Center Capital Program	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010	12/1/2010	For this funding opportunity, an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to THE COMMUNITY FOUNDATION OF SOUTHERN NEW MEXICO Las Cruces, NM		N/A	Uknown	7/14/2011		http://www.hhs.gov/ne ws/press/2011pres/07/ 20110714a.html

Advanced Education Nursing Traineeships	Traineeships prepare nurse practitioners, clinical nurse specialists, nurse-midwives, nurse anesthetists, nurse administrators, nurse educators, public health nurses and nurses in other specialties requiring advanced education. The Affordable Care Act removed the 10 percent cap in this program that limited the amount of support that could go to nursing students pursuing doctoral degrees.	N/A	enrolled in advanced education nursing programs.		UNMHSC	N/A	7/29/2011	 http://www.hhs.gov/ne ws/press/2011pres/07/ 20110729a.html
Advanced Education Nursing Traineeships	Traineeships prepare nurse practitioners, clinical nurse specialists, nurse-midwives, nurse anesthetists, nurse educators, public health nurses and nurses in other specialties requiring advanced education. The Affordable Care Act removed the 10 percent cap in this program that limited the amount of support that could go to nursing students pursuing doctoral degrees.	N/A	enrolled in advanced education nursing programs.		NMSU	N/A	7/29/2011	 http://www.hhs.gov/ne ws/press/2011pres/07/ 20110729a.html

Nurse	93 264	Assists registered nurses	N/A	N/A	Funds traineeships at	\$23./	None	UNMHSC	N/A	7/29/2011	\$56.880	http://www.hhs.gov/ne
Faculty Loan		in completing their	IN//C	IN/A	eligible institutions for		110110	ONNINISC	IN//A	772772011	ψ50,000	ws/press/2011pres/07/
Program		graduate education to			registered nurses	~ 109						20110729a.html
rogram		become qualified nurse				awards**						201107274.111111
		faculty. Through grants to				Awarded						
		eligible entities, offers			programs.							
		partial loan forgiveness			-	to						
		for borrowers that				University						
		graduate and serve as full-				of New						
		time nursing faculty for				Mexico						
		the prescribed period of				Health						
		time. The Affordable Care				Sciences						
		Act increased the annual				Center,						
						Albuquerq						
		loan limit to \$35,500 from				ue						
		\$30,000 and established										
		a priority for doctoral										
		nursing students.										
Health	93 527	The purpose of the New	8/9/2010	11/17/2010	Organizations	Ben Archer	None	N/A	Uknown	8/9/2011	\$483 333	http://www.grants.gov/s
Center New		Access Points	0/ //2010	11/1//2010		Health	140110	14/7	Oknown	0/7/2011	Ψ 100,000	earch/search.do?mode
Access		opportunity is to establish				Center,						=VIEW&oppld=56499
Point		health service delivery				Hatch NM						<u>- 112 11 GOPPIG-3047 7</u>
PPACA		sites to improve the				Was						
Grant		health of the Nation's			_	awarded						
Grant		underserved communities				this grant.						
		and vulnerable			based organizations.	tilis grant.						
		populations by assuring			basea organizations.							
		access to										
		comprehensive, culturally										
		competent, quality										
		primary health care										
		services.										
		SCI VICES.										
										Total	\$83,605,072	

GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Grant Submitted	Date Grant Awarded	Amount of Grant 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.			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 Grant total with a ceiling of \$150,000 with 30 total awards	Sharing Ratio (Federal:Non- Federal): 15:1	YES DOL/DWS	7/19/2010	9/24/2010 Total:		https://grants.hrsa.gov/webExternal/FundingOppDetails.asp?FundingCycleId=70332C9D-C405-4199-BFE2-78FBF3C52CD3&ViewMode=EU&GoBack=&PrintMode=&OnlineAvailabilityFlag=&pageNumber=&version=&NC=&Popup=
NM Dept of Health												

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 state will be awarded a minimun of \$250,000		DOH Family Planning Program	8/30/2010	9/30/2010		http://www.acf.hhs.gov/gr ants/open/foa/view/HHS- 2010-ACF-ACYF-PREP- 0125
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Patient Protection and Affordable Care Act (PPACA); Emerging Infections	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	8/3/10	Mainly State Governments. New Mexico is named in the RFP	Additional Supplemen tal Funding from CDC	None	DOH ERD	8/25/2010	8/25/2011	\$254,826	http://www07.grants.gov/ search/search.do:jsessio nid=DrTrMZFJ4ZnLwnt4 SsjLylK1xZc0ysbnyq9Pp SyQtHLqT2qFX34X!- 357751914?oppId=56319 &mode=VIEW
Program (EIP); Enhancing Epidemiology and Laboratory Capacity (U01)		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									

Patient Protection and Affordable Care Act (PPACA); Emerging Infections Program (EIP); Enhancing Epidemiology and Laboratory Capacity (U01)	0.021	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	8/3/10	Mainly State Governments.  New Mexico is named in the RFP	A total of \$4,500,000 with ceiling of \$650,000 and a total of 10 awards.	DOH ERD	8/25/2010	9/30/2010	\$327,379	http://www07.grants.gov/ search/search.do:jsessio nid=DrTrMZFJ4ZnLwnt4 SsjLylK1xZc0ysbnyq9Pp SyOtHLqT2qFX34X!- 357751914?oppId=56319 &mode=VIEW
		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								

Patient Protection and Affordable Care Act (PPACA); Emerging Infections Program CDC Vaccine Effectiveness Monitoring	93.521	Track the effectiveness of certain Vaccines	8/3/10		Epi and Laboratory Capacity for Infectious Diseases	Variable Amounts and is formula funding per state	None	DOH,ERD, SLD	N/A	8/25/2011	\$162,131	N/A
CDC Epidemiology & Laboratory Capacity/Em erging Infections Program Grant		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 funding no application was required	DOH	N/A	9/24/2010	\$380,081	N/A

CDC	02 722	State supplemental funding	NI/A	INI/A	Supplemental funding	C	Nissa	DOLL	NI/A	0/04/2010	¢(0.240	NI/A
	93.723	for healthy communities	N/A	N/A	Supplemental funding	Supplement	ivone		N/A	9/24/2010	\$60,340	N/A
Tobacco		totaling \$3.8 million is being				al Funding		awarded				
Quitlines		divided among 46 locations.				from CDC		Formula				
Grants		The funds will be used to						funds				
		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										
CDC		Affordable Care Act. State supplemental funding	NI/A	N/A	Supplemental funding	A dditto a of	Mana	DOLL	NI/A	0/05/0011	<b>ФОГ 40</b> 0	NI/A
	93.723	for healthy communities	N/A	IN/A	Supplemental funding		None		N/A	8/25/2011	\$85,482	N/A
Tobacco		totaling \$3.8 million is being				<u>Supplemen</u>		awarded				
Quitlines		divided among 46 locations.				tal Funding		Formula				
Grants		The funds will be used to				from CDC		funds				
		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										

Strengthenin g Public Health Infrastructure for Improved Health Outcomes	P3.507 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/) .		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.	\$1,100,000.	DOH PHD will be the lead and IT will be a partner	8/8/2010	9/20/2010	\$199,877	http://www.grants.gov/se arch/search.do:jsessionid =LTp0M15hGSdyZRPhk n0QvrWnt7bLwY5VJMFJ fgK0kxLZjV02plm5!9319 14360?oppId=55684&mo de=VIEW

Strengthenin g Public Health Infrastructure for Improved Health 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	7/8/2010	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	Supplemen tal Funding	DOH PHD will be the lead and IT will be a partner	8/8/2010	8/25/2011	http://www.grants.gov/se arch/search.do:jsessionid =LTp0M15hGSdyZRPhk n0QvrWnt7bLwY5VJMFJ fgK0kxLZjV02plm5!9319 14360?oppld=55684&mo de=VIEW
Outcomes	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		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					UG-VILVV

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	6/30/11	State Governments	There is no grant amout total. There is a ceiling of \$3,000,000 and floor of \$1,500,000.	Yes DOH (DHI)	8/9/2010	Dec-10	\$1,500,000	http://www07.grants.gov/search/search.do:jsessionid=d1HpMbHQvs40vHj0MpxTzZpsN8H9nftFGC1pHKGrnSxyPcFD2NQ8!1680187280?mode=VIEWREVISIONS&revNum=0
							Total:	\$3,616,687	
NM Human Services Dept.									

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										
other requirements specified in the Act. The funding awarded pursuant										
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										
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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		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 year will be available to fund the 20 grants. Awardees	None	Grant Awarded to HSD	N/A	10/9/2010	\$734,500	http://www.samhsa.gov/newsroom/advisories/1010 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		\$22,500,00 0 total funds with 20 awards	None	will submit application	HSD with collaboration with ALTSD and DOH	2/22/2011 Total:		http://www.grants.gov/se arch/search.do:jsessionid =drc5MJ5K1Y5QWQfmv Q80vLZkv292cYhrTjv9R LjXv4bbyl6CYv2b!- 169038256?oppld=56091 &mode=VIEW
									rotai:	\$26,054,699	

Public Regulation Commission Division of Insurance	93.511	Key components of this	6/7/10	7/7/40	State governments	¢51,000,000	Awardoos ora	Voc	7/7/2010	8/16/2010	¢1 000 000	http://www.07.gropto.gov/
"Grants to States for Health Insurance Premium Review-Cycle I" Office of Consumer Information and Insurance Oversight (OCIIO)	93.511	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	6///10	<i>////</i> 10		0 there will be approximat ely 51 awards with \$1,000,000 award	1.	PRC/Insura nce Division	7/7/2010	8/16/2010	\$1,000,000	http://www07.grants.gov/search/search.do:jsessionid=NDgpMhnSXgmt7BBMQmFHz1sy46kY7wl22P09N1h2cGTQCcCL2hyF!1386858017?oppld=55029&mode=VIEW

		IT:					1					
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.		9/10/10	State governments	\$29,000,00 0 total with a ceiling of \$3,400,000 and floor \$120,00 a total of 56 awards	None	PRC/DOI	9/10/2010	10/19/2010		http://www.grants.gov/se arch/search.do:jsessionid =THbqMLpZyhlYTWQSS Wn0cxYyXwN2xdpsFTpt WtXfdPQxVJnM1Prh!- 832749192?oppld=56058 &mode=VIEW
Grants to States for Health Insurance Premium Review - Cycle I	93.511	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	9/1/10	10/1/10	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 Insurance Division received grant from original announcem ent	7/7/2010	8/16/2010	·	http://www07.grants.gov/ search/search.do:jsessio nid=hJIZM1yHzrGKGqzXt 3ylHcc1Znp5YByyrJ2Zdf 2Zg4SGM4DyTRHh!970 35526?oppId=57031&mo de=VIEW
										Total:	\$1,226,426	
Aging and Long Term Services Department												

Option A Medicare Improvement for Patients and Providers Act (MIPPA) Affordable Care Act Medicare Beneficiary Outreach and Assistance Program	76.671	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		State agency or instrument of a State from a State that: 1) received an award to implement ADRCs through the AoA(Formula Funding)	Variable Amounts	ALTSD	ALTSD	N/A	N/A	\$371,358	<u>N/A</u>
		efforts to inform older									

Option B. 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	6/3/10	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, and/or the CMS Person- Centered Hospital Discharge Planning Model Grants funded in fiscal years 2008 and 2009	a total of 25 awards.	ALTSD	7/29/2010	9/27/2010		http://www07.grants.gov/ search/search.do:jsessio nid=gx4WMQChpwsQS1 tTx6Q1hF9vJyBnTw0Qh Q327kRfTB9ZnyfqNTf3!- 228465525?oppId=54948 &mode=VIEW
							Total:	\$871,358	
Children, Youth and Family Department									

Affordable Care Act (ACA) Maternal, Infant and Early Childhood Home Visiting Program	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	6/10/10	7/9/10	\$90,000,00 0 with 56 total grant awards of various amounts	None	CYFD Requested Amount:\$95 1,952	7/9/2010	7/21/2010		https://grants.hrsa.gov/webExternal/FundingOppDetails.asp?FundingCycleId=E24F384A-7290-49D0-A393-EED7F542B618&ViewMode=EU&GoBack=&PrintMode=&OnlineAvailabilityFlag=&pageNumber=&version=&NC=&Popup=
Program	outcomes for families who reside in at risk communities. At-risk communities will be identified through a statewide							Total:	\$951,952	
Public Education Department										

FY10 Support for Pregnant and Parenting Teens and Women FOA	75.500	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.	7/1/10	8/2/10	recognized) Nonprofits having a 501(c)(3) status with the IRS, other than institutions of higher education	total	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	\$1,300,000	http://www07.grants.gov/ search/search.do:jsessio nid=tyKWMnNNYjbjvygc VKX64HpnL5M79ZtynKtg qr7phNt3HStRbH9W!404 589083?oppId=55579&m ode=VIEW
		A signed letter from the outhorized								Total:	\$1,300,000	
The University of New Mexico	93.513	The Advanced Nurse	(117110	7/10/10	Eligible applicants are	¢20,000,00	None	VEC LINIA	Halmar	0/5/2010	¢20.222	http://www.07-marks.ac./
Affordable Care Act Advanced Nursing Education Expansion (ANEE)	143.313	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, academic health centers, and other private or public entities accredited by a national nursing	\$30,000,00 0 total with approximat ely 40 awards		YES UNM- HSC	Unknown	8/5/2010	<b>\$3</b> 6,333	http://www07.grants.gov/ search/search.do:jsessio nid=hDHtMfCJfhvK2ylCk vjg1QBFQGKXjDT2Ws8 HDQvFZDyYJdlPSBGZ!- 491952003?oppId=55280 &mode=VIEW
Nurse Education, Practice, Quality and 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 \$29,900,00 0 with varible awards. There are 108 infrastructur e grants		Yes- UNM- HSC	Unknown	8/5/2010	\$406,078	N/A

Program (EPAT)    Reed by improving the access   to primary care experices		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		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 0 with 40 awards		Yes UNM- HSC	Unknown	9/28/2010	search/search.do:jse nid=JmDCMf3K21Q. zgSHTmGqyQVqNc sBmQXTxGnG7DDF 448!- 491952003?oppId=5
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Advanced Education Nursing Traineeships	93.358	Traineeships prepare nurse practitioners, clinical nurse specialists, nurse-midwives, nurse anesthetists, nurse administrators, nurse educators, public health nurses and nurses in other specialties requiring advanced education. The Affordable Care Act removed the 10 percent cap in this program that limited the amount of support that could go to nursing students pursuing doctoral degrees.		N/A	Funds traineeships at eligible institutions for registered nurses enrolled in advanced education nursing programs.	(\$16 million total with ~349 awards)** Awarded to University of New Mexico Health Sciences Center, Albuquerq ue	None	UNMHSC	N/A	N/A	7/29/2011	\$34,686
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Nurse Faculty Loan Program	93.264	Assists registered nurses in completing their graduate education to become qualified nurse faculty. Through grants to eligible entities, offers partial loan forgiveness for borrowers that graduate and serve as full-time nursing faculty for the prescribed period of time. The Affordable Care Act increased the annual loan limit to \$35,500 from \$30,000 and established a priority for doctoral nursing students.	N/A	N/A	registered nurses enrolled in advanced education nursing programs.	\$23.4 million with ~ 109 awards** Awarded to University of New Mexico Health Sciences Center, Albuquerq ue	None	UNMHSC	N/A	N/A	7/29/2011	\$56,880
										Total:	\$730,156	
Western New Mexico University												
Nurse Education, Practice, Quality and 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	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	\$29,900,00 0 with	None	Yes Western NM University	Unknown	8/5/2010	\$249,740	<u>N/A</u>

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.		This grant is based on a first come first serve basis	local governments who provide health insurance for early retirment	This is a variable amount to be distributed. (This amount is as of 8/24/2011)	None	Yes NMRHCA		9/16/2010		www.hhs.gov/ociio/regula tions/index.html
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Total

\$8,700,000

Native American Professional Parent Resources,

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		governments (Federally recognized) Native American tribal organizations (other than Federally recognized tribal governments) Others (see text field entitled "Additional Information on Eligibility" for clarification)	\$3,000,000 with an award ceiling of \$500,000 and award floor of \$100,000 with an award total of 15.	Native American Professiona I Parent Resources, Inc.	Unknown	9/29/2010 Total:		https://www.cfda.gov/?s= program&mode=form&ta b=step1&id=788d6ac249 71c92c3580fda2894431b a
							rotal.	<b>\$500</b> ,000	
Pueblo of San Felipe									

Affordable Care Act (ACA) Tribal Maternal, Infant, and Early Childhood Home Visiting Grant	70000	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,	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)	\$3,000,000 with an award ceiling of \$500,000 and award floor of \$100,000	Pueblo of San Felipe	Unknown	9/29/2010	https://www.cfda.gov/?s= program&mode=form&ta b=step1&id=788d6ac249 71c92c3580fda2894431b a
		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 socio- economic status; improved							

Various Tribes Total: \$100,000

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	76.671	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	funded in fiscal years 2003, 2004, 2005 and 2009	\$246,000 avaliable with a total award of \$1,000. A total of 246 is antcipated. \$1,000 per Tribe (Pueblo de Cochiti, Pueblo of Jemez, Pueblo of San Felipe, Pueblo of Taos, Pueblo of Zuni, San Juan	None	Several Tribes	7/30/2010	9/27/2010	\$8,000	http://www07.grants.gov/search/search.do:jsessionid=g3rmMQLchpxyVQ4YLG4SnLZJ25I5H6mdy216VGjqXxzqLLynzyTI!-228465525?oppId=55023&mode=VIEW
						Pueblo, Santa Clara Pueblo, Santo Domingo Pueblo Tribe)						
										Total:	\$8,000	
Parents Reaching Out to Help												

Family-to- Family Health Information Centers in each state and the District of 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	Exisiting Family to Family Information Centers	A total of \$4,900,000 for exisiting center a total of 51 with variable award amounts	None	Parents Reaching Out to Help	Unknown	7/27/2010	\$95,700	N/A
Community										Total:	\$95,700	
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	Grant awarded to First Choice Community Healthcare, Inc. Albuquerque, NM	\$727 million to 143 community health centers across the country	None	N/A	N/A	10/8/2010		http://www.hhs.gov/news/ press/2010pres/10/chc_c hart.html

Grants from the Affordable Care Act to upgrade and expand community health 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 Archer Health Center Hatch, NM	\$727 million to 143 community health centers across the country (For buildings not operations)		N/A	N/A	10/8/2010	\$5,778,210	http://www.hhs.gov/news/ press/2010pres/10/chc_c hart.html
Health Center New Access Point PPACA Grant	The purpose of the New Access Points opportunity is to establish health service delivery sites to improve the health of the Nation's underserved communities and vulnerable populations by assuring access to comprehensive, culturally competent, quality primary health care services.		Organizations eligible to compete include public or nonprofit private entities, including tribal, faith-based and community-based organizations.	Ben Archer Health Center, Hatch NM Was awarded this grant.	None	N/A	Uknown	8/9/2011	\$483,333	http://www.grants.gov/se arch/search.do?mode=VI EW&oppId=56499

Grants from the Affordable Care Act to upgrade and expand community health 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		\$727 million to 143 community health centers across the country	None	N/A	N/A	10/8/2010	\$3,786,635	http://www.hhs.gov/news/ press/2010pres/10/chc_c hart.html
Grants from the Affordable Care Act to upgrade and expand community health 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.	14/71	Medical Services Lordsburg, NM	\$727 million to 143 community health centers across the country	None	N/A	N/A	10/8/2010		http://www.hhs.gov/news/press/2010pres/10/chc_c hart.html

									Total:	\$26,917,261	
New Mexico Primary Care Association											
Develop and Modernize Community Health 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	Primary Care Association	A total of \$8 Million was awarded in various amounts	None	N/A	N/A	11/19/2010	\$90,547	http://www.hhs.gov/news/press/2010pres/11/20101 119b.html
<b>Various</b>											
Biomedical Research Grants											

(PPACA)		Therapeutic Discovery Project Grants for the State of New Mexico		Variable Private Entities have these grants	N/A	N/A	Research Agencies	Various Grant Amounts	N/A	N/A	N/A	11/1/2010		http://www.irs.gov/busine sses/small/article/0,,id=2 29003,00.html
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Total: \$4,725,876

School Based Health Center Capital Projects								
School- Based Health Center Capital Program	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010	For this funding opportunity, an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to DES MOINES MUNICIPAL SCHOOLS Des Moines, NM	N/A	Uknown	7/14/2011	http://www.hhs.gov/news/ press/2011pres/07/20110 714a.html
School- Based Health Center Capital Program	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010	an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to NATIVE AMERICAN COMMUNITY ACADEMY Albuquerque, NM	N/A	Uknown	7/14/2011	http://www.hhs.gov/news/ press/2011pres/07/20110 714a.html

School- Based Health Center Capital Program	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010		For this funding opportunity, an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to NORTHEAST REGIONAL EDUCATION COOPERATIVE, Las Vegas, NM	None	N/A	Uknown	7/14/2011	\$499,232	http://www.hhs.gov/news/ press/2011pres/07/20110 714a.html
School- Based Health Center Capital Program	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010		For this funding opportunity, an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to UNIVERSITY OF NEW MEXICO HEALTH SCIENCES CENTER Albuquerque, NM	None	N/A	Uknown	7/14/2011	\$500,000	http://www.hhs.gov/news/ press/2011pres/07/20110 714a.html
School- Based Health Center Capital Program	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010	12/1/2010	For this funding opportunity, an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to LA CLINICA DEL PUEBLO DE RIO ARRIBA Tierra Amarilla, NM	None	N/A	Uknown	7/14/2011	\$500,000	http://www.hhs.gov/news/ press/2011pres/07/20110 714a.html
School- Based Health Center Capital Program	Provided by the Affordable Care Act, the awards will help clinics expand and provide more health care services at schools nationwide.	10/4/2010		For this funding opportunity, an eligible applicant must be a school-based health center or a sponsoring facility of a school-based health center as defined in section 4101(a)(6) of the Affordable Care Act,	Awards of \$95 million to 278 school-based health center programs across the country. Awarded to THE COMMUNITY FOUNDATION OF SOUTHERN NEW MEXICO Las Cruces, NM	None	N/A	Uknown	7/14/2011	\$117,183	http://www.hhs.gov/news/ press/2011pres/07/20110 714a.html

NMSU									
Advanced Education Nursing Traineeships	Traineeships prepare nurse practitioners, clinical nurse specialists, nurse-midwives, nurse anesthetists, nurse administrators, nurse educators, public health nurses and nurses in other specialties requiring advanced education. The Affordable Care Act removed the 10 percent cap in this program that limited the amount of support that could go to nursing students pursuing doctoral degrees.		Funds traineeships at eligible institutions for registered nurses enrolled in advanced education nursing programs.	(\$16 million total with ~349 awards)** Awarded to The Regents of New Mexico State University, Las Cruces	None	NMSU	N/A	7/29/2011	\$37,614 http://www.hhs.gov/news/press/2011pres/07/20110/729a.html

http://www .hhs.gov/n ews/press /2011pres /07/20110 729a.html http://www .hhs.gov/n ews/press /2011pres /07/20110 729a.html

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1	GrantName	CFDA	Grant Description	Release Date	Application Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
2	Native American Professional Parent 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 0 with an award ceiling of \$500,000 and award floor of \$100,000 with an award total of 15.		Native American Professio nal Parent Resource s, Inc.	Unknown	9/29/2010		https://www.cfda.gov/? s=program&mode=for m&tab=step1&id=788d 6ac24971c92c3580fda 2894431ba
4											Total:	\$330,000	
5	Pueblo of San Felipe												

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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 0 with an award ceiling of	None	Pueblo of San Felipe	Unknown	K 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 Tribes	7/30/2010	9/27/2010		http://www07.grants.go y/search/search.do:jse ssionid=g3rmMQLchpx yVQ4YLG4SnLZJ25l5 H6mdy216VGjqXxzqLL ynzyTI!- 228465525?oppId=550 23&mode=VIEW
10						1	1	ĺ			Total:	\$8,000	

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1	GrantName	CFDA	Grant Description	Release Date	Applicatio n Due	Eligible Applicants	Grant Amount	Cost Sharing Matching	Apply Yes No	Grant Submitted	Date Grant Awarded	Amount of Grant Awarded	Webpage
2	Agency DWS												
3	Affordable Care Act: State Health Care Workforce Planning Grants	73.307	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	with a ceiling of		YES DOL/DW S	7/19/2010	9/24/2010	\$150,000	https://grants.hrsa.gov/web External/FundingOppDetails .asp?FundingCycleId=7033 2C9D-C405-4199-BFE2- 78FBF3C52CD3&ViewMod e=EU&GoBack=&PrintMode =&OnlineAvailabilityFlag=&p ageNumber=&version=&NC =&Popup=
4											Total:	\$150,000	
5	NM Dept of 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 state will be awarded a minimun of \$250,000	None	DOH Family Planning Program	8/30/2010	9/30/2010	\$346,571	http://www.acf.hhs.gov/grant s/open/foa/view/HHS-2010- ACF-ACYF-PREP-0125

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F aa A C () E III F () E aa L L	Patient Protection and Affordable Care Act PPACA); Emerging Infections Program EIP); Enhancing Epidemiology aboratory Capacity U01)		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			Mainly State Governments. New Mexico is named in the RFP	A total of \$4,500,000 with ceiling of \$650,000 and a total of 10 awards.		DOH ERD	8/25/2010	9/30/2010	\$327,379	http://www07.grants.gov/search/search.do:jsessionid=Dr TrMZFJ4ZnLwnt4SsjLylK1x Zc0ysbnyq9PpSyQtHLqT2q FX34X!- 357751914?oppId=56319& mode=VIEW

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CDC Epidemiology & Laboratory Capacity/Er erging Infections Program Grant		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 funding no applicatio n was required		N/A	9/24/2010	\$380,081	N/A
CDC Tobacco Quitlines 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	Supplemen tal Funding from CDC		DOH was awarded Formula funds	N/A	9/24/2010	\$60,340	N/A

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	Α	В	С	D	Е	F	G	Н		J	K	L	M
g F He Inf for He	rengthenin Public ealth frastructure r Improved ealth utcomes		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		Pennsylvania; Phoenix,	\$212,500,0 00 total. There will be 85 awards with a ceiling of \$3,100,000 and a floor of \$1,100,000		DOH PHD will be the lead and IT will be a partner	8/8/2010	9/20/2010	\$199,877	http://www.grants.gov/search/search.do:jsessionid=LTp 0M15hGSdyZRPhkn0QvrWnt7bLwY5VJMFJfgK0kxLZj V02plm5!931914360?oppld =55684&mode=VIEW

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	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).		6/30/11		amout total. There is a	depends on amount of grant awarded	Yes DOH (DHI)	8/9/2010	1-Dec-10	\$1,500,000	http://www07.grants.gov/search/search.do:jsessionid=d1 HpMbHQvs40vHj0MpxTzZpsN8H9nftFGC1pHKGrnSxyPcFD2NQ8!1680187280?mode=VIEWREVISIONS&revNum=0
12											Total:	\$2,814,248	
13	NM Human Services Dept.												

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State Plannir Establis nt Grar the Afforda Care A Exchar	ng and ishme nts for able	93.525	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 maximum of \$1 million per State, depending on the number and	7/29/10	_	State Governments	Total of \$51,000,00 0 with a ceiling of \$1,000,000 . 51 Awards are Anticipated	None	Yes HSD	9/1/2010	9/30/2010	\$1,000,000	http://www.grants.gov/searc h/search.do:jsessionid=yFP DMR6BhZ1nWvWdFffh4ZlP xh6Jc2znhwj8628sQk98jht0 PIK1!1087699643?oppld=5 6204&mode=VIEW
		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		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.	\$14.3 million per year will be available to fund the 20 grants. Awardees are eligible for up to \$750,000 per year for up to five years.		Grant Awarded to HSD	N/A	10/9/2010	\$734,500	http://www.samhsa.gov/new sroom/advisories/10100816 19.aspx

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16	Money Follows the Person Rebalancing Grant Demonstratio n Patient Protection and Affordable Healthcare Act Section 2403	93.791	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 exception applies in the expanded		1/7/11	State governments	\$22,500,00 0 total funds with 20 awards	None	will submit applicatio				http://www.grants.gov/searc h/search.do:jsessionid=drc5 MJ5K1Y5QWQfmvQ80vLZk v292cYhrTjv9RLjXv4bbyl6C Yv2b!- 169038256?oppld=56091& mode=VIEW
17											Total:	\$26,054,699	
	Public Regulation Commission Division of Insurance												

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	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 health insurance.		7/7/10		\$51,000,00 0 there will be approximat ely 51 awards with \$1,000,000 award ceiling.	Awardees are not required to provide matching contributio ns.	PRC/Insur ance 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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	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	State governments	\$29,000,00 0 total with a ceiling of \$3,400,000 and floor \$120,00 a total of 56 awards	None	PRC/DOI	9/10/2010	10/19/2010	\$226,426	http://www.grants.gov/searc h/search.do:jsessionid=THb qMLpZyhlYTWQSSWn0cxY yXwN2xdpsFTptWtXfdPQx VJnM1Prh!- 832749192?oppId=56058& 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	\$1,000,000		NM Insurance Division received grant from original announce ment	7/7/2010	8/16/2010	\$0	http://www07.grants.gov/search/search.do:jsessionid=hJlZM1yHzrGKGqzXt3ylHcc1Znp5YByyrJ2Zdf2Zg4SGM4DyTRHh!97035526?oppld=57031&mode=VIEW
21											<b>T</b>	<b>#4.007.45</b>	
22	Aging and										Total:	\$1,226,426	
23	Long Term Services Department												

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	Α	В	С	D	E	F	G	Н		J	K	L	M
Ir fc a P (M A C M B C a A	Option A Medicare mprovement or 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			Variable Amounts	ALTSD	ALTSD	N/A	N/A	\$371,358	N/A

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			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		Only a 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, 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) continues to implement and operate the ADRC activities funded through their grant award(s), may apply for this funding opportunity. AoA will accept only one application per State. The applicant agency must have the support and active participation of the State Unit on Aging,	anticipated		ALTSD	7/29/2010	9/27/2010		http://www07.grants.gov/search/search.do:jsessionid=gx 4WMQChpwsQS1tTx6Q1h F9vJyBnTw0QhQ327kRfTB 9ZnyfqNTf3!- 228465525?oppId=54948& mode=VIEW
25 26											Takal	<b>4074.050</b>	
	Children,										Total:	\$871,358	
	Youth and Family Department												

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	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		\$90,000,00 0 with 56 total grant awards of various amounts	None	CYFD Requeste d Amount:\$ 951,952	7/9/2010	7/21/2010	\$951,952	https://grants.hrsa.gov/web External/FundingOppDetails .asp?FundingCycleId=E24F 384A-7290-49D0-A393- EED7F542B618&ViewMode =EU&GoBack=&PrintMode= &OnlineAvailabilityFlag=&pa geNumber=&version=&NC= &Popup=
28 29											Total:	\$951,952	
	Public Education Department											+ 70 1,702	

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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	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	funding for the grant with a Ceiling of \$500,000 and a total of 25 awards.	funding an amount from non- Federal funds equal to	Yes PED	8/2/2010	9/29/2010		http://www07.grants.gov/search/search.do:jsessionid=ty KWMnNNYjbjvygcVKX64Hp nL5M79ZtynKtgqr7phNt3HS tRbH9W!404589083?oppId =55579&mode=VIEW
32										Total:	\$1,300,000	

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