



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

(5/20/11)

--**Affordable Care Act (ACA):** <http://www.healthcare.gov/>. The ACA creates jobs and increases the number of primary care providers through increased resources for training, new incentives to physicians for providing primary care to patients, and support for caregivers who choose to enter primary care in underserved areas.

ACA Prevention and Public Health Fund:

- Creates additional primary care residency slots.
- Supports physician assistant training in primary care.
- Increases the number of nurse practitioners trained.
- Establishes new nurse practitioner-led clinics.
- Encourages States to plan for and address health professional workforce needs.

ACA Education and Worker Training:

- **Increases access to providers in underserved areas:** The ACA provides \$1.5 billion over five years to expand the National Health Service Corps (NHSC) to address the nation's workforce demands. The NHSC repays educational loans and provides scholarships to primary care health care providers who practice in areas of the country that have too few health care professionals to serve people who live there. Eligible providers include primary care physicians, physician assistants, and nurse practitioners. The ACA's combined with the Act's investment of nearly \$2 billion investment is expected to result in an increase of more than 12,000 additional primary care physicians, nurse practitioners, and physician assistants by 2016. [Financial Aid for Health Professions Students & Practitioners: <http://www.hrsa.gov/help/healthprofessions.htm>]
- **Focuses on career training:** The Department of Labor is providing job training across the health care sector with a focus on low-skill and low-wage workers.
- **Expands tax benefits to health professionals working in underserved areas.**
- **Building primary care capacity through Medicare and Medicaid:** Currently, there are unused Medicare-funded resident training slots. The ACA reallocates Medicare resources to primary care residencies in underserved areas of the country. Teaching hospitals benefiting from the additional slots must ensure that the number of primary care residents is not reduced and at least 75 percent of the slots received must be in primary care or general surgery for at least five years. Medicare will provide a 10 percent bonus payment for primary care provided by qualified physicians from 2011-2015. In addition, Medicaid payment rates to primary care physicians will be increased in 2013 and 2014 to at least 100 percent of associated Medicare rates. Emphasizing the critical importance of primary care by providing financial incentives will build capacity in underserved areas.
- **Providing financial assistance for students.**
- **Making health care education more accessible.**

The ACA helps small businesses and small tax-exempt organizations afford the cost of covering their employees with a tax credit for small businesses that insure their employees:

<http://www.healthcare.gov/law/provisions/taxcredits/index.html>.

--**Health Information Technology (IT) Workforce Development Program:**

<http://healthit.hhs.gov/portal/server.pt?open=512&objID=1432&mode=2>.

--**HHS' Administration on Children and Families' Office of Community Services (OCS)** makes competitive grant awards annually for targeted social services and economic development purposes. Programs range from job creation efforts for community development corporations via the Community Economic Development and Job Opportunities for Low-Income Individuals programs; asset development and financial literacy efforts via non-profit organizations funded through the Assets for Independence program (AFI); and Rural Community Facilities programs to regional consortia seeking to provide improved water and waste water. To learn more about those programs, please visit the OCS website: <http://www.acf.hhs.gov/programs/ocs/>.

- Community Economic Development (CED) Program supports employment and development projects to provide economic self-sufficiency for low-income residents and their communities. **Applications due July 11, 2011.** Bonus points for projects addressing the elimination of food deserts and to organizations in the 16 states and territories that do not have active CED projects (Alaska, Alabama, Colorado, Delaware, Idaho, Kansas, Mississippi, New Hampshire, Nevada, Oregon, Rhode Island, Utah, Wyoming, Island of Guam, Northern Mariana Islands, U. S. Virgin Islands). <http://www.acf.hhs.gov/programs/ocs/ced/index.html>
- AFI Program is an assets-based approach for giving low-income families a hand up out of poverty. AFI projects help participants save earned income in special-purpose, matched savings accounts called Individual Development Accounts (IDAs). AFI project families use IDA savings, including the matching funds, to achieve any of three objectives: acquiring a first home; capitalizing a small business; or enrolling in postsecondary education or training. **AFI grant applications due May 25, 2011.** [AFI Resource Center: 1-866-778-6037; <http://idaresources.org/>; <http://www.acf.hhs.gov/programs/ocs/afi/assets.html>]
- Job Opportunities for Low-Income Individuals (JOLI). Upcoming JOLI grant opportunities to be announced: <http://www.acf.hhs.gov/programs/ocs/joli/index.html>

When OCS receives requests for information on grants, potential applicants are encouraged to explore the HHS GrantsNet website at <http://www.hhs.gov/grantsnet> which includes a variety of information about HHS programs and other grants-related resources and information. All materials on GrantsNet are available for viewing, printing, and downloading. Another website for consideration is <http://www.grants.gov> **that lists opportunities for government-wide grants.**

Additionally, OCS administers formula grant programs such as:

- The Community Services Block Grant funds for grants to the States, with pass-throughs to pre-designated local community action agencies (CAA); and
- The Social Services Block Grant program, another grant program with funds to the State agencies.

--**HHS' Administration on Children and Families' Temporary Assistance to Needy Families (TANF)** block grant program allows states to use funds for a variety of employment and training activities. <http://www.acf.hhs.gov/programs/ofa/tanf/about.html>

Contact: Suzanne Krohn, Executive Officer, Office of the Regional Director – Reg. V, U.S. Dept. of Health and Human Services, Phone: (312) 353-5132; suzanne.krohn@hhs.gov.