



Office of Recovery Act Coordination

Department of Health and Human Services

Office of the Assistant Secretary for Financial Resources

Recovery Act:

New Jersey Highlights



Since the enactment of the Recovery Act in 2009, the U.S. Department of Health and Human Services has made **\$3.1 billion in stimulus funds available in the State of New Jersey*** for Community Health Centers, universities and other institutions in the State to provide fiscal relief, improve and expand access to health care, provide care and other social services for its most vulnerable citizens, establish the infrastructure for health information technology, and conduct scientific research.

This includes:

- **\$2.4 billion** for the increased Federal share (FMAP) of State Medicaid costs.
- **\$202 million** for Temporary Assistance for Needy Families (TANF), including **\$18.7 million** for subsidized jobs programs.
- **\$96.4 million** for scientific research and facilities, including:
 - **\$14.9 million** to renovate facilities at the University of Medicine and Dentistry of New Jersey that support biomedical research.
 - **\$9.5 million** to build a facility to study the genetic causes of disorders at Rutgers.
- **\$71.2 million** for health information technology (IT), including:
 - **\$11.4 million** to the New Jersey Health Care Facilities Financing Authority to facilitate health information exchange.
- **\$49.6 million** for Community Health Center services, construction, renovation, equipment, and health IT, including:
 - **\$5.8 million** to Ocean Health Initiatives in Lakewood and **\$1.8 million** to CAMcare Health Corporation in Camden, both for increased demand for services, construction, and equipment.
- **\$5.6 million** to Southern Jersey Family in Hammonton for increased demand, construction, equipment, and health IT.
- **\$37.5 million** for Early Head Start and Head Start programs to expand and improve quality.
- **\$34.1 million** for the Child Care and Development Fund to increase access to child care and improve quality.
- **\$24.7 million** for the Community Services Block Grant for community action agencies to reduce poverty and help low-income residents become self-sufficient.
- **\$2.8 million** for meals and nutrition services for the elderly.
- **\$2.1 million** for the Communities Putting Prevention to Work initiative for State programs targeting obesity and tobacco and **\$975,000** for chronic disease self-management programs for the elderly.
- **\$1.4 million** to support 29 National Health Service Corps clinicians providing primary health care in Health Professional Shortage Areas.
- **\$763,000** for State efforts to fight healthcare-associated infections.
- **\$500,000** to strengthen the capacity of community non-profit groups that serve the needy.

**The total funding in this document is based on the HHS Sept. 30, 2011, Financial and Activity Report (FAR) for the Recovery Act, available at the Department's website, <http://www.hhs.gov/recovery/reports/index.html>, except for FMAP, which is based on the Oct. 21, 2011, FAR and FMAP obligations of \$356.3 million in Recovery Act funds extended by P.L. 111-226. The highlights are a selection of programs funded by the Recovery Act and do not add up to the total funding within the State. For more information about individual HHS programs and Recovery Act funding, see <http://www.hhs.gov/recovery/>.*