

HHS Grant Awards

Fiscal Year 2005



U.S. Department of Health and Human Services
Office of the Assistant Secretary for Administration and Management
Office of Grants Management and Policy

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FOREWORD

The Department of Health and Human Services (HHS) is one of the largest federal departments, the nation's largest health insurer, and the largest grant-making agency. HHS manages an array of grant programs in basic and applied science, public health, income support, child development, and health and social services.

Collectively these programs are the Department's primary means to achieving its strategic goals to:

- Reduce the major threats to the health and well-being of Americans
- Enhance the ability of the Nation's health care system to effectively respond to bioterrorism and other public health challenges
- Increase the percentage of the Nation's children and adults who have access to health care services, and expand consumer choices
- Enhance the capacity and productivity of the Nation's health science research enterprise
- Improve the quality of health care services
- Improve the economic and social well-being of individuals, families, and communities, especially those most in need
- Improve the stability and healthy development of our Nation's children and youth
- Achieve excellence in management practices

To realize these goals¹ HHS forms partnerships with other federal departments; state, local, and tribal governments; academic institutions; hospitals, the business community; nonprofit and volunteer organizations; faith-based and community-based organizations; and foreign countries and international organizations. The primary vehicle used in these partnerships is a grant. Grants are financial assistance awards that provide support or stimulation to accomplish a public purpose authorized by Federal statute. The primary beneficiary under a grant or cooperative agreement is the public, as opposed to the Government.

This report is the annual summary on grants awarded by HHS during Fiscal Year 2005 (October 1, 2004 through September 30, 2005) and includes data from all grants awarded by HHS. The purpose of this report is to provide an overview of the Department's grant programs. The source of the grant data is the Tracking Accountability in Government Grants System (TAGGS), which is the Department's central grants information database. Annual grants reports for fiscal years 1997 through 2005 are located at <http://taggs.hhs.gov>.

This report does not include technical assistance, which provides services instead of money; other assistance in the form of loans, loan guarantees, interest subsidies, or insurance; direct payments of any kind to individuals; or contracts which are required to be entered into and administered under procurement laws and regulations.

By aggregating this grant information into this single report, we hope to provide a more complete and useful understanding of the Department's grant awards. This report provides grant award information under four sections: Overview, Mandatory Grant Awards, Discretionary Grant Awards and Operating Division Grant Programs.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Office of the Assistant Secretary for Budget, Technology and Finance
Office of Grants

¹ See Appendix C for a list of the FY2004-2009 HHS Strategic Goals and Objectives.

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NOTES ON METHODOLOGY, TAGGS

The grant information contained in this report is from the Department's Tracking Accountability in Government Grants System (TAGGS), which contains data generated by the twelve HHS grant-making staff divisions and operating divisions (OPDIVs). Developed and maintained by the Office of Grants (OG), TAGGS is the Department's central repository for all grant transaction-level data.

TAGGS tracks obligated grant funds of mandatory and discretionary grant programs at the transaction level. The TAGGS database receives data submissions from the HHS OPDIVs on a monthly basis. In addition to the grant award data received from the OPDIVs, TAGGS receives grant recipient demographic data (e.g., type of organization, address) from the Central Registry System (CRS) and Catalog of Federal Domestic Assistance (CFDA) Program information from www.cfda.gov.

OG also maintains an internet site (<http://taggs.hhs.gov>), which is accessible to the public, which allows users to view standard TAGGS-generated reports or query the database. This TAGGS web site helps to increase the transparency of the Department's grant making activities and is used directly by OS and OPDIV staff, Congressional offices, other executive agencies, potential and current grant recipients and other interested parties for a variety of informational purposes. Congressional district, grant program name, recipient (grantee) name, recipient location (state, city, zip, and/or congressional district), awarding OPDIV, transaction amount (or sum of transactions), and fiscal year are some commonly searched TAGGS fields.

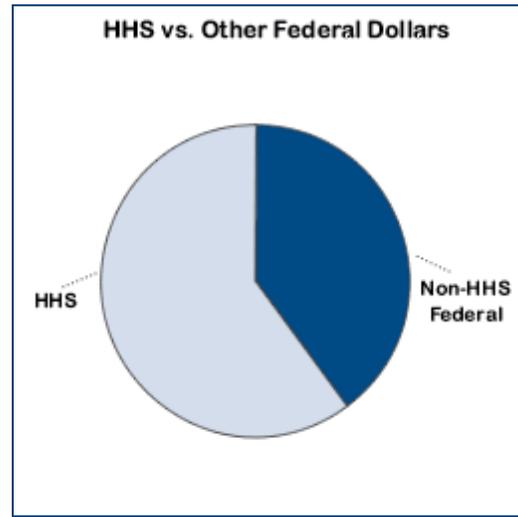
The data in this report reflect all grant awards obligated during FY 2005. The number of grants is a count of awards or projects receiving grant funds. Projects with a zero or negative total awarded during the fiscal year are not included in this report.

The data contained in this report will not necessarily agree with the FY 2005 budget and accounting records (e.g., Medicaid's accounting adjustments) for several reasons, including: 1) the grant award data may include reobligations of prior years' funds in addition to current year funds; 2) costs of furnishing personnel in lieu of cash are included in the grants data, but are recorded as personnel service costs in accounting records; and 3) jointly-funded grants are included in accounting records, but are not included herein unless awards are made by HHS programs.

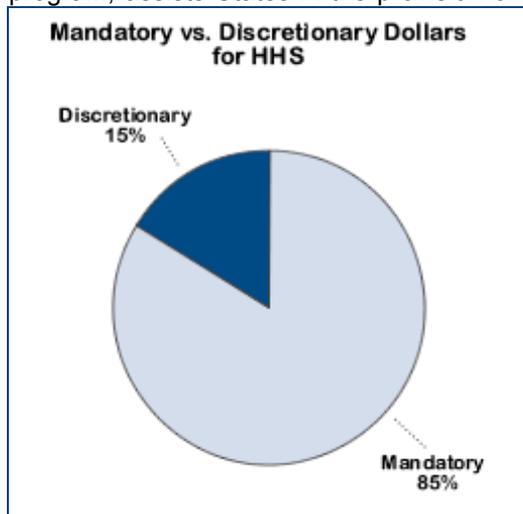
The dollar amounts set forth in this report for each OPDIV may also differ from the amounts shown in the OPDIVs' Budget Requests ("Preliminary Budget Submission to HHS," the "Justification of Budget Estimates to OMB," and the "Justification of Estimates for Appropriations Committees"). Percentages used throughout the report may not add up to exactly 100% due to rounding and other minor adjustments.

SECTION I. OVERVIEW

The Department of Health and Human Services awards approximately 60% of the Federal government's grant dollars. HHS awards two types of grants, mandatory and discretionary. Mandatory grants are those that a Federal agency is required by statute to award if the recipient, usually a State, submits an acceptable State Plan or application, and meets the eligibility and compliance requirements of the statutory and regulatory provisions of the grant program. Discretionary grants are those that permit the Federal government, according to specific authorizing legislation, to exercise judgment, or "discretion," in selecting the applicant/recipient organization, through a competitive grant process. Mandatory and discretionary grants will be discussed further in their subsequent sections.



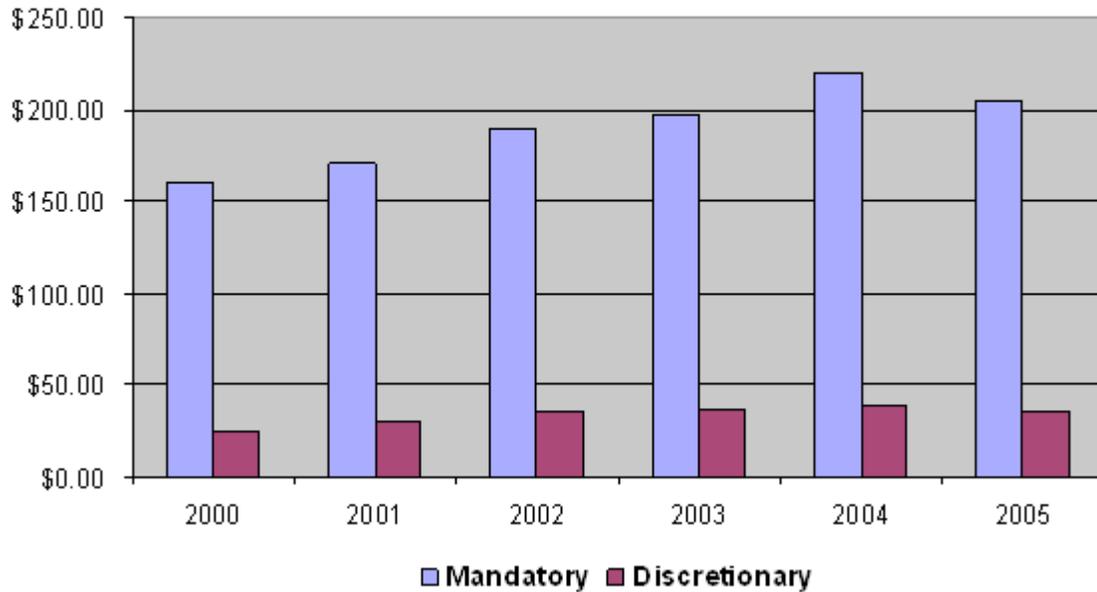
In the health area, the Medicaid program, a jointly-funded Federal-State health insurance program, assists States in the provision of adequate medical care for low-income people. Other



health programs encompass biomedical research, training of biomedical research scientists and health professionals, support of health professional schools, development and delivery of health services, disease prevention and health promotion programs, and construction of research, educational and health facilities.

HHS social service programs provide support to every group of Americans, including children, youth, families, and the elderly. Social service programs include Temporary Assistance to Needy Families, refugee assistance, enforcement of child support payment orders, foster care and adoption, prevention of child abuse and neglect, Indian tribal services, and Head Start programs.

Mandatory vs. Discretionary Dollars by FY



HHS manages its broad range of grant activities in collaboration with its grant recipient partners and through the coordination of its principal grant-making agencies. These twelve HHS operating divisions administer over 300 grant programs².

The principal grant-making operating divisions (OPDIVs) are:

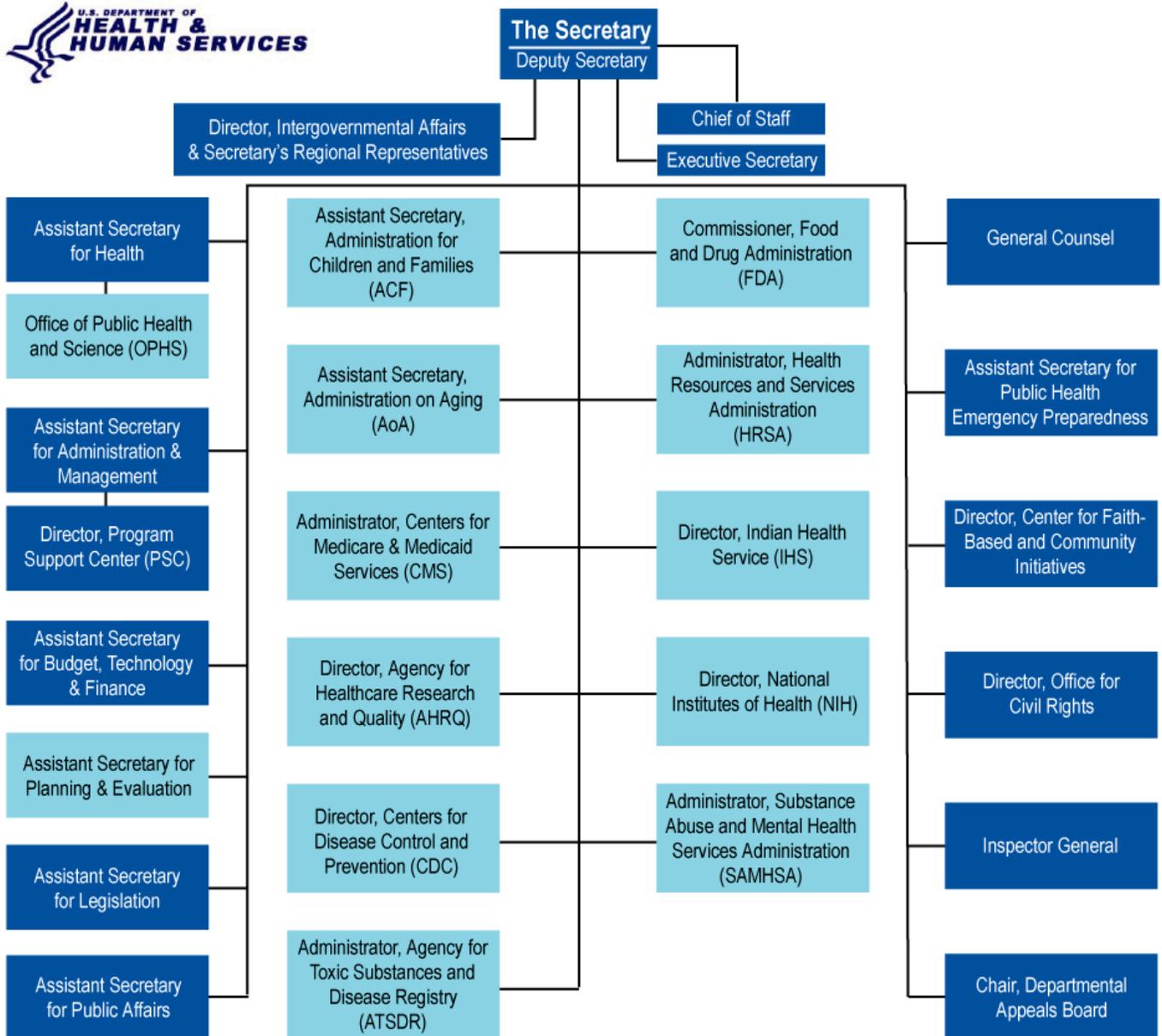
- ACF - Administration for Children and Families
- AHRQ - Agency for Healthcare Research and Quality
- AoA - Administration on Aging
- ASPE/OS - Assistant Secretary for Planning and Evaluation/Office of the Secretary
- CDC³ - Centers for Disease Control and Prevention
- CMS - Centers for Medicare & Medicaid Services
- FDA - Food and Drug Administration
- HRSA - Health Resources and Services Administration
- IHS - Indian Health Service
- NIH - National Institutes of Health
- OPHS/OS - Office of Public Health and Science/Office of the Secretary
- SAMHSA - Substance Abuse and Mental Health Services Administration

² Specific grant programs are identified in this report by their Catalog of Federal Domestic Assistance (CFDA) program numbers. A list of HHS and other Federal agencies' grant and other financial assistance programs is available at the General Services Administration's CFDA website: <http://www.cfda.gov>.

³ Grant awards made by Agency for Toxic Substances and Disease Registry (ATSDR) are included in CDC grant funding data.

ORGANIZATIONAL CHART

The following organizational chart shows the structure of the HHS OPDIVS within the agency.



GRANT AWARDS BY OPERATING DIVISION

FY 2005 Total Dollars: \$241,303,674,906

FY 2005 Total Awards: 73,302

FY 2005 Total Recipients: 13,142

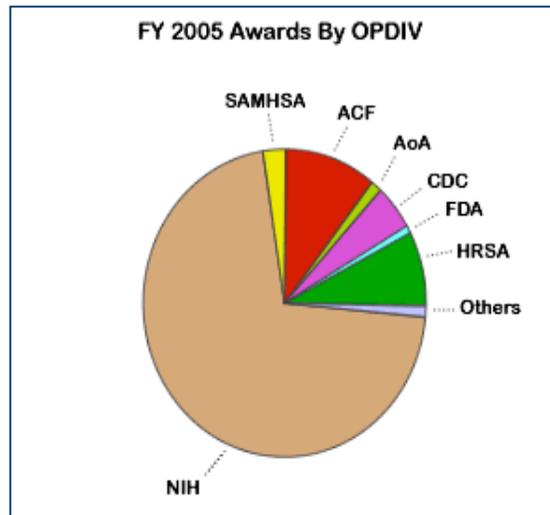
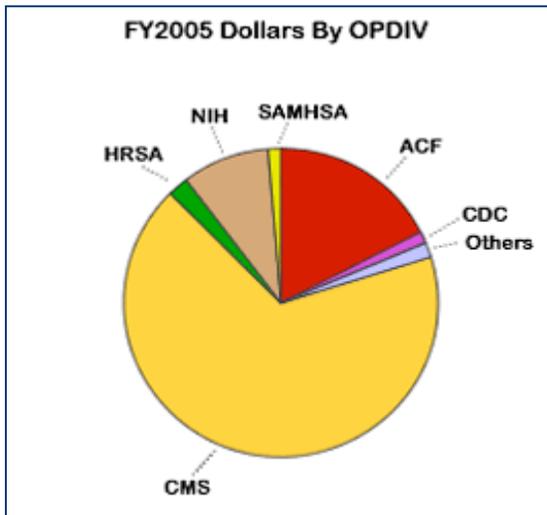
In FY 2005, HHS awarded \$241.3 billion in grants. This included both discretionary awards totaling \$37.2 billion, and mandatory awards totaling \$204.03 billion.

CMS, which administers the Medicaid Program, awarded 67% (\$162 billion) of the total HHS grant funds, representing less than 1% of the total number of grants.

ACF awarded the second highest percentage (18.5%, \$44.5 billion) of the total HHS grant funds, which represents 11% of the total number of grants.

OPDIV	Awards	% Awards	Dollars	% Dollars
ACF	7,745	10.57	\$44,506,414,921	18.44
AHRQ	356	0.49	\$102,571,629	0.04
AOA	1,168	1.59	\$1,381,222,114	0.57
ASPE	5	0.00	\$3,373,699	0.00
CDC	3,409	4.65	\$5,070,342,866	2.11
CMS	511	0.70	\$162,058,069,032	67.16
FDA	124	0.17	\$26,263,352	0.01
HRSA	6,928	9.45	\$6,162,098,643	2.55
IHS	898	1.23	\$1,144,297,744	0.47
NIH	49,266	67.21	\$17,361,225,662	7.19
OPHS	573	0.78	\$496,046,601	0.21
SAMHSA	2,319	3.16	\$2,991,748,643	1.24
Total	73,302	100.00	\$241,303,674,906	100.00

NIH awarded 67% (49,266) of the total number of HHS grants in FY 2005, which is 47% of the discretionary grant funds, but only 7% of the total HHS grant funds.



OPDIV Grant Funding: Mandatory and Discretionary Totals												
OPDIV	Mandatory				Discretionary				Total			
	#	%	Dollars	%	#	%	Dollars	%	#	%	Dollars	%
ACF	2,832	61.38	\$37,000,348,632	18.13	4,913	7.15	\$7,506,066,289	20.14	7,745	10.57	\$44,506,414,921	18.44
AHRQ					356	0.52	\$102,571,629	0.28	356	0.49	\$102,571,629	0.04
AOA	837	18.14	\$1,293,588,355	0.63	331	0.48	\$87,633,759	0.24	1,168	1.59	\$1,381,222,114	0.57
ASPE					5	0.01	\$3,373,699	0.01	5	0.01	\$3,373,699	0.00
CDC	61	1.32	\$115,278,754	0.06	3,348	4.87	\$4,955,064,112	13.30	3,409	4.65	\$5,070,342,866	2.10
CMS	288	6.24	\$161,883,156,336	79.34	223	0.32	\$174,912,696	0.47	511	0.70	\$162,058,069,032	67.16
FDA					124	0.18	\$26,263,352	0.07	124	0.17	\$26,263,352	0.01
HRSA	60	1.30	\$586,647,809	0.29	6,868	10.00	\$5,575,450,834	14.96	6,928	9.45	\$6,162,098,643	2.55
IHS	303	6.57	\$975,465,078	0.48	595	0.87	\$168,832,666	0.45	898	1.23	\$1,144,297,744	0.47
NIH					49,266	71.72	\$17,361,225,662	46.59	49,266	67.21	\$17,361,225,662	7.19
OPHS					573	0.83	\$496,046,601	1.33	573	0.78	\$496,046,601	0.21
SAMHSA	233	5.05	\$2,183,785,027	1.07	2,086	3.04	\$807,963,616	2.17	2,319	3.16	\$2,991,748,643	1.24
Totals	4,614	100.00	\$204,038,269,991	100.00	68,688	100.00	\$37,265,404,915	100.00	73,302	100.00	\$241,303,674,906	100.00
% Total	6.29%		84.56%		93.71%		15.44%					

SECTION II. MANDATORY GRANT AWARDS

FY 2005 Mandatory Dollars: \$204,038,269,991

FY 2005 Mandatory Awards: 4,614

FY 2005 Mandatory Recipients: 1,275

HHS mandatory grant awards comprise 85% of the total FY 2005 HHS grant funds, but only 6% of the total number of grant awards. Mandatory grants are those that a Federal agency is required by statute to award if the applicant, usually a State, submits an acceptable State Plan or application, and meets the eligibility and compliance requirements of the statutory and regulatory provisions of the grant program. Mandatory grants are either block, closed ended or entitlement grants. In the past, mandatory grants were sometimes referred to as “formula grants.”

HHS Mandatory Grants by Award Class		
Award Type	Number of Awards	Dollars
Block	1,372	\$30,488,408,218
Closed-Ended	2,781	\$2,925,210,040
Open-Ended	495	\$170,624,651,733
Total	4,648	\$204,038,269,991

HHS awards three types of mandatory grants:

Block: A block grant is typically a consolidation of related programs into one legislative package. The block grant recipient, usually a state, has substantial authority over the use of grant funds and the type of activities to support with minimal federal control and direction. The authorizing legislation determines the purpose of the block grant, who is eligible, the scope of the program, and how the award amount will be determined.

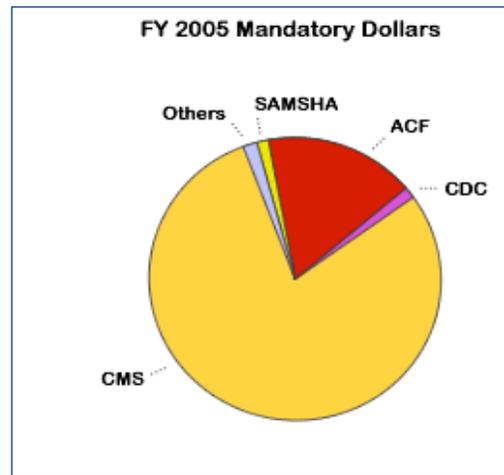
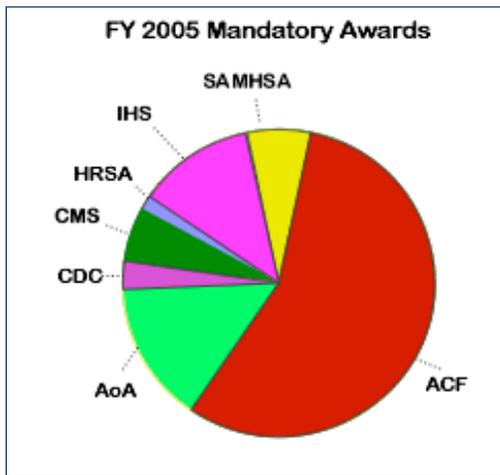
Select HHS Block Grants				
CFDA	Program Name	OPDIV	Awards	Dollars
93.558	Temporary Assistance for Needy Families (TANF)	ACF	109	\$17,309,563,377
93.596	Child Care and Development Fund (CCDF)	ACF	337	\$4,736,471,572
93.959	Prevention and Treatment (SAPT) Block Grant	SAMHSA	61	\$1,686,776,984

Closed-Ended: A mandatory grant where the award constitutes an upper limit on the amount of funds the Federal Government may pay for program activities. The grants for State and community programs on aging, under Title III of the Older Americans Act are closed-ended grants.

Select HHS Closed-Ended Grants				
CFDA	Program Name	OPDIV	Awards	Dollars
93.045	Special Programs for the Aging, Title III, Part C, Nutrition	AoA	56	\$1,097,915,155
93.556	Promoting Safe and Stable Families	ACF	142	\$381,573,249
93.645	Child Welfare Services State Grants	ACF	238	\$288,982,060

Open-Ended Entitlement: A mandatory grant where there is no upper limit on the amount of funds the Federal Government will pay for allowable services and activities, where the Federal Government pays a statutorily-required share of costs without dollar limits. The principal entitlement grants of the Social Security Act are: 1) Medical Assistance (Medicaid), 2) Foster Care and Adoption Assistance, and 3) Child Support Enforcement and Establishment of Paternity.

Select HHS Open-Ended Entitlement Grants				
CFDA	Program Name	OPDIV	Awards	Dollars
93.778	Medicaid; Title XIX	CMS	186	\$160,357,769,906
93.658	Foster Care: Title IV-E	ACF	77	\$4,328,095,778
93.563	Child Support Enforcement (CSE)	ACF	93	\$2,880,550,562



MANDATORY GRANT AWARDS TO STATE GOVERNMENT RECIPIENTS

FY 2005 Mandatory State Dollars: \$202,656,110,218

FY 2005 Mandatory State Awards: 2,392

Highlights

The six states receiving the most HHS grant funds (in billions) are New York (\$27.7), California (\$26.01), Texas (\$12.7), Pennsylvania (\$6.7), Florida (\$10.2), and Ohio (\$7.2).

State	#	Dollars
Alabama	51	\$3,189,079,816
Alaska	40	\$822,410,551
Arizona	43	\$3,730,086,268
Arkansas	40	\$2,394,100,866
California	52	\$26,011,212,612
Colorado	46	\$1,931,086,823
Connecticut	48	\$2,648,808,967
Delaware	39	\$459,945,677
District of Columbia	39	\$642,521,958
Florida	48	\$10,163,393,045
Georgia	50	\$5,150,376,124
Hawaii	43	\$789,552,672
Idaho	45	\$903,967,493
Illinois	42	\$6,050,788,356
Indiana	39	\$1,476,547,445
Iowa	44	\$1,952,944,353
Kansas	45	\$1,589,898,973
Kentucky	44	\$3,561,829,993
Louisiana	44	\$4,535,189,665
Maine	44	\$1,714,297,336
Maryland	41	\$1,998,534,315
Massachusetts	48	\$5,703,566,440
Michigan	49	\$4,194,833,173
Minnesota	42	\$3,186,350,890
Mississippi	54	\$3,159,783,101
Missouri	46	\$4,955,597,988
Montana	41	\$697,008,896
Nebraska	39	\$1,203,159,919
Nevada	40	\$922,267,164
New Hampshire	41	\$790,893,530
New Jersey	43	\$4,495,704,701
New Mexico	40	\$1,943,126,555
New York	47	\$27,792,393,386

State	#	Dollars
North Carolina	52	\$6,684,823,161
North Dakota	48	\$475,743,294
Ohio	42	\$7,247,442,221
Oklahoma	45	\$2,356,176,941
Oregon	43	\$2,368,419,412
Pennsylvania	40	\$6,751,282,870
Rhode Island	42	\$1,160,799,394
South Carolina	39	\$3,344,295,978
South Dakota	45	\$534,741,998
Tennessee	45	\$5,897,993,691
Texas	46	\$12,622,156,590
Utah	43	\$1,340,143,124
Vermont	40	\$677,355,722
Virginia	41	\$2,853,561,629
Washington	43	\$4,077,075,744
West Virginia	46	\$1,004,285,993
Wisconsin	41	\$1,582,639,291
Wyoming	41	\$313,238,714
Total	2,239	\$202,053,434,817

Territories and Freely Associated States	#	Dollars
American Samoa	27	\$12,139,967
Fed States - Micron	4	\$1,404,150
Guam	29	\$25,333,818
Northern Mariana Is	7	\$4,086,642
Puerto Rico	47	\$532,684,944
Rep-Marshall Island	4	\$643,568
Republic of Palau	4	\$344,620
US Virgin Islands	31	\$26,037,492
Total	153	\$602,675,401
Grand Total	2,392	\$202,656,110,218

This table details mandatory grant awards received by State Government recipients sorted by operating division and state location. Note that six HHS operating divisions did not make mandatory grant awards to State Government recipients during FY 2005. These are AHRQ, ASPE, FDA, OPA, OPHS and NIH.

FY 2005 Mandatory State Dollars: \$202,656,110,218

FY 2005 Mandatory State Awards: 2,392

Mandatory Grants To State Government Recipients (Part I)																
States	ACF		AoA		CDC		CMS		HRSA		IHS *		SAMHSA		Total	
	#	Dollars	#	Dollars	#	Dollars	#	Dollars	#	Dollars	#	Dollars	#	Dollars	#	Dollars
Alabama	35	\$352,337,985	3	\$20,139,489	1	\$1,939,544	7	\$2,771,159,988	1	\$12,348,388			4	\$31,154,422	51	\$3,189,079,816
Alaska	24	\$125,396,388	3	\$5,896,041	1	\$421,611	7	\$683,768,762	1	\$1,174,208	1	\$0	3	\$5,753,541	40	\$822,410,551
Arizona	30	\$536,280,413	3	\$22,234,576	1	\$1,453,514	5	\$3,121,646,936	1	\$7,769,858			3	\$40,700,971	43	\$3,730,086,268
Arkansas	25	\$230,823,658	3	\$13,631,458	1	\$1,090,867	6	\$2,123,448,779	1	\$7,483,501			4	\$17,622,603	40	\$2,394,100,866
California	37	\$6,574,713,390	3	\$119,427,767	1	\$8,377,629	6	\$18,942,813,429	1	\$47,947,194			4	\$317,933,203	52	\$26,011,212,612
Colorado	31	\$401,521,082	3	\$14,059,639	1	\$1,509,943	7	\$1,475,888,493	1	\$7,569,141			3	\$30,538,525	46	\$1,931,086,823
Connecticut	34	\$537,663,683	3	\$15,929,860	1	\$1,770,489	5	\$2,066,002,537	1	\$4,974,598			4	\$22,467,800	48	\$2,648,808,967
Delaware	27	\$86,288,600	3	\$6,053,942	1	\$227,177	4	\$357,416,755	1	\$2,028,207			3	\$7,930,996	39	\$459,945,677
District of Columbia	28	\$189,250,050	3	\$6,136,640	1	\$943,752	3	\$431,175,842	1	\$7,160,786			3	\$7,854,888	39	\$642,521,958
Florida	33	\$1,499,713,786	3	\$90,241,375	1	\$3,651,638	7	\$8,423,940,318	1	\$20,818,016			3	\$125,027,912	48	\$10,163,393,045
Georgia	34	\$827,198,528	3	\$26,708,008	1	\$3,760,207	7	\$4,209,500,468	1	\$17,245,237			4	\$65,963,676	50	\$5,150,376,124
Hawaii	29	\$181,135,771	3	\$6,135,432	1	\$953,115	6	\$589,711,580	1	\$2,381,011			3	\$9,235,763	43	\$789,552,672
Idaho	30	\$112,875,425	3	\$6,227,303	1	\$452,284	7	\$771,967,751	1	\$3,373,170			3	\$9,071,560	45	\$903,967,493
Illinois	30	\$1,507,282,871	3	\$53,227,494	1	\$2,881,953	4	\$4,374,876,302	1	\$22,846,316			3	\$89,673,420	42	\$6,050,788,356
Indiana	28	\$564,379,642	3	\$24,591,901	1	\$2,051,841	2	\$830,174,883	1	\$12,265,926			4	\$43,083,252	39	\$1,476,547,445
Iowa	31	\$300,976,419	3	\$15,679,843	1	\$1,342,075	5	\$1,610,594,372	1	\$6,737,839			3	\$17,613,805	44	\$1,952,944,353
Kansas	31	\$263,311,282	3	\$12,775,767	1	\$1,111,645	5	\$1,291,414,342	1	\$4,939,926			4	\$16,346,011	45	\$1,589,898,973
Kentucky	28	\$436,015,214	3	\$17,468,275	1	\$1,637,511	7	\$3,067,401,713	1	\$11,890,984			4	\$27,416,296	44	\$3,561,829,993
Louisiana	29	\$507,396,417	3	\$18,735,396	1	\$3,548,358	7	\$3,958,753,014	1	\$14,098,675			3	\$32,657,805	44	\$4,535,189,665
Maine	31	\$164,077,872	3	\$6,268,900	1	\$1,090,600	5	\$1,530,620,089	1	\$3,507,117			3	\$8,732,758	43	\$1,714,297,336
Maryland	29	\$627,924,610	3	\$20,119,764	1	\$2,299,500	3	\$1,293,887,617	1	\$12,327,972			4	\$41,974,851	41	\$2,998,534,315
Massachusetts	35	\$864,446,091	3	\$30,208,345	1	\$3,315,336	5	\$4,749,749,625	1	\$11,752,162			3	\$44,094,540	48	\$5,703,566,440
Michigan	37	\$1,503,715,986	3	\$43,745,689	1	\$4,824,062	3	\$2,548,960,777	1	\$19,804,006			4	\$73,782,805	49	\$4,194,833,173
Minnesota	29	\$685,012,124	3	\$20,356,3217	1	\$3,085,873	4	\$2,440,328,777	1	\$9,393,432	1	-\$330,000	3	\$28,504,363	42	\$3,186,350,890

Mandatory Grants To State Government Recipients (Part I, continued)																
States	ACF		AOA		CDC		CMS		HRSA		IHS *		SAMHSA		Total	
	#	Dollars	#	Dollars	#	Dollars	#	Dollars	#	Dollars	#	Dollars	#	Dollars	#	Dollars
Mississippi	32	\$263,191,964	3	\$12,846,035	1	\$1,755,906	7	\$2,852,991,937	1	\$10,238,437			3	\$18,738,822	54	\$3,159,783,101
Missouri	32	\$580,006,646	3	\$27,275,195	1	\$3,041,214	5	\$4,297,594,523	1	\$12,967,992			4	\$34,712,418	46	\$4,955,597,988
Montana	27	\$105,488,410	3	\$6,257,296	1	\$807,517	7	\$574,000,509	1	\$2,547,932			2	\$7,907,232	41	\$697,008,896
Nebraska	27	\$195,964,991	3	\$8,644,741	1	\$1,995,155	4	\$982,055,899	1	\$4,167,938			3	\$10,331,195	39	\$1,203,159,919
Nevada	26	\$166,102,473	3	\$8,047,190	1	\$475,101	6	\$728,841,527	1	\$1,976,405			3	\$16,824,468	40	\$922,267,164
New Hampshire	28	\$120,834,409	3	\$6,422,427	1	\$1,742,043	5	\$651,385,080	1	\$2,065,063			3	\$8,444,508	41	\$790,893,530
New Jersey	30	\$897,469,921	3	\$37,320,082	1	\$3,528,870	5	\$3,483,679,808	1	\$12,283,978			3	\$61,422,042	43	\$4,495,704,701
New Mexico	25	\$230,481,099	3	\$8,056,533	1	\$1,712,200	6	\$1,686,346,038	1	\$4,688,570	1	\$416,670	3	\$11,425,445	40	\$1,943,126,555
New York	32	\$4,167,111,589	3	\$92,683,095	1	\$8,409,860	6	\$23,330,663,692	1	\$43,450,702			4	\$150,074,448	47	\$27,792,393,386
North Carolina	36	\$815,942,656	3	\$32,239,597	1	\$3,343,956	7	\$5,764,698,387	1	\$17,434,522			4	\$51,164,043	52	\$6,684,823,161
North Dakota	30	\$82,451,627	3	\$6,415,179	1	\$311,777	7	\$377,170,566	1	\$1,876,452	2	\$800,000	4	\$6,717,693	48	\$475,743,294
Ohio	29	\$1,761,073,185	3	\$50,838,580	1	\$5,530,333	4	\$5,322,287,584	1	\$23,195,606			4	\$84,516,933	42	\$7,247,442,221
Oklahoma	30	\$365,032,346	3	\$16,498,250	1	\$1,146,146	6	\$1,942,424,397	1	\$7,743,394			4	\$23,332,408	45	\$2,356,176,941
Oregon	28	\$412,582,376	3	\$14,509,330	1	\$880,899	7	\$1,912,711,880	1	\$6,545,709			3	\$21,189,218	43	\$2,368,419,412
Pennsylvania	29	\$1,700,631,319	3	\$65,037,039	1	\$5,825,919	3	\$4,876,917,055	1	\$25,502,552			3	\$77,368,986	40	\$6,751,282,870
Rhode Island	29	\$167,006,132	3	\$6,299,437	1	\$579,671	5	\$976,647,602	1	\$1,878,666			3	\$8,387,886	42	\$1,160,799,394
South Carolina	25	\$296,898,684	3	\$16,674,805	1	\$1,500,022	6	\$2,990,503,912	1	\$11,900,111			3	\$26,818,444	39	\$3,344,295,978
South Dakota	29	\$66,325,201	3	\$6,543,631	1	\$284,128	7	\$452,825,805	1	\$2,347,448			4	\$6,415,785	45	\$534,741,998
Tennessee	32	\$563,693,690	3	\$23,365,369	1	\$1,983,325	6	\$5,258,606,792	1	\$12,349,717			2	\$37,994,798	45	\$5,897,993,691
Texas	32	\$1,706,801,282	3	\$72,159,119	1	\$4,962,387	6	\$10,627,577,844	1	\$37,574,044			3	\$173,081,914	46	\$12,622,156,590
Utah	28	\$243,682,850	3	\$7,032,583	1	\$1,172,698	7	\$1,061,238,987	1	\$6,202,532			3	\$20,813,474	43	\$1,340,143,124
Vermont	27	\$104,526,148	3	\$6,079,593	1	\$333,283	5	\$558,445,256	1	\$1,738,282			3	\$6,233,160	40	\$677,355,722
Virginia	29	\$496,043,796	3	\$26,541,405	1	\$2,486,452	3	\$2,259,386,823	1	\$12,942,168			4	\$56,160,985	41	\$2,853,561,629
Washington	29	\$793,027,868	3	\$21,873,845	1	\$1,232,057	6	\$3,206,697,046	1	\$9,556,668			3	\$44,688,260	43	\$4,077,075,744
West Virginia	34	\$243,112,732	3	\$10,323,003	1	\$1,095,303	3	\$731,004,677	1	\$6,685,824			4	\$12,064,454	46	\$1,004,285,993
Wisconsin	30	\$732,395,298	3	\$24,425,433	1	\$2,389,067	2	\$778,254,491	1	\$11,219,694			4	\$33,955,308	41	\$1,582,639,291
Wyoming	26	\$50,198,451	3	\$6,346,082	1	\$277,275	7	\$250,964,269	1	\$1,304,249			3	\$4,148,388	41	\$313,238,714
States Total	1,533	\$36,407,814,430	153	\$1,236,754,099	51	\$112,563,088	275	\$161,601,125,724	51	\$564,222,325	5	\$886,670	171	\$2,130,068,481	2,239	\$202,053,434,817

Mandatory Grants to State Government Recipients (Part II)																
Territories and Freely Associated States	ACF		AOA		CDC		CMS		HRSA		IHS *		SAMHSA		Total	
	#	Dollars	#	Dollars	#	Dollars	#	Dollars	#	Dollars	#	Dollars	#	Dollars	#	Dollars
American Samoa	17	\$5,079,818	2	\$1,328,019	1	\$64,860	2	\$4,460,300	1	\$527,373			4	\$679,597	27	\$12,139,967
Fed States - Micron					1	\$78,511			1	\$556,672			2	\$768,967	4	\$1404,150
Guam	19	\$11,853,005	3	\$3,057,121	1	\$268,378	2	\$8,178,375	1	\$814,498			3	\$1,162,441	29	\$25,333,818
Northern Mariana Is	1	\$193,617					2	\$2,847,723	1	\$498,075			3	\$547,427	7	\$4,086,842
Puerto Rico	36	\$210,642,207	3	\$15,723,091	1	\$1,911,983	2	\$258,552,900	1	\$16,981,400			4	\$28,873,363	47	\$532,684,944
Rep-Marshall Island					1	32,122			1	\$246,106			2	\$365,340	4	\$643,568
Republic of Palau					1	25,794			1	\$158,212			2	\$160,614	4	\$344,620
US Virgin Islands	17	\$11,447,593	3	\$2,912,706	1	212,236	5	\$7,991,314	2	\$2,643,148			3	\$830,495	31	\$26,037,492
Territories and Freely Associated States Total	90	\$239,216,240	11	\$23,020,937	7	\$2,593,884	13	\$282,030,612	9	\$22,425,484			23	\$33,388,244	153	\$602,675,401
Grand Total	1,623	\$36,647,030,670	164	\$1,259,775,036	58	\$115,156,972	288	\$161,883,156,336	60	\$586,647,809	5	\$886,670	194	\$2,163,456,725	2,449	\$202,656,110,218

SECTION III DISCRETIONARY GRANT AWARDS BY FINANCIAL ASSISTANCE TYPE

FY 2005 Discretionary Dollars: \$37,265,404,915

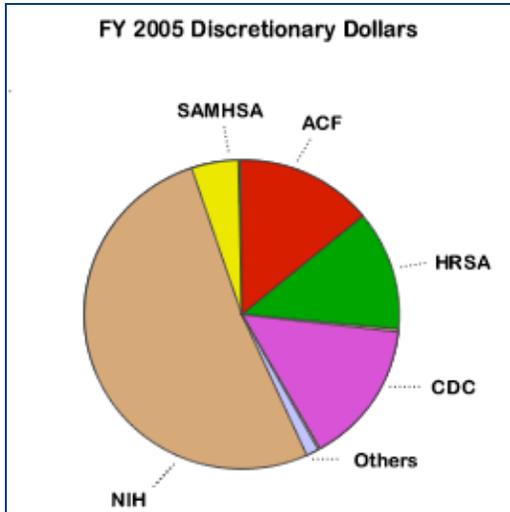
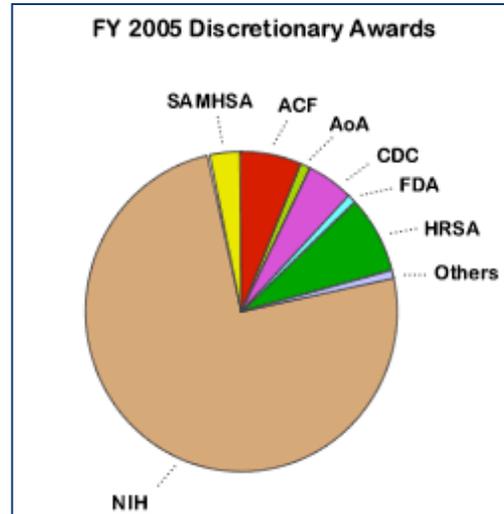
FY 2005 Discretionary Awards: 68,688

FY 2005 Discretionary Recipients: 12,590

Discretionary grant awards comprise only 15% of the total FY 2005 grant funds, but they account for 94% of the total number of grant awards made in FY 2005. Discretionary grants are those that permit the Federal government, according to specific authorizing legislation, to exercise judgment, or “discretion,” in selecting the applicant/recipient organization, through a competitive grant process.

HHS awards discretionary grants to a variety of types of organizations, including state, local, and tribal governments; academic institutions; hospitals; nonprofit organizations; faith-based and community-based organizations; for-profit organizations, and foreign and international organizations.

The types of activities commonly supported by discretionary grants include demonstration, research,



training, service, and construction projects or programs. Discretionary grants are sometimes referred to as “project grants.”

In this report, grants awarded as cooperative agreements are included in the charts summarizing discretionary grant awards. A cooperative agreement is an award instrument of financial assistance where “substantial involvement” is anticipated between the HHS awarding agency and the recipient during performance of the project or activity. This means that the recipient can expect Federal programmatic collaboration or participation in managing the grant project. Cooperative Agreements account for 10% of the total FY 2005 discretionary grant funds, and 5% of the total number of FY 2005 discretionary grant totals.

Discretionary Grants		
Financial Assistance Type	Number of Awards	Dollars
Cooperative Agreement	3,432	\$3,726,796,034
Grant	65,256	\$33,538,608,881
Total	68,688	\$37,265,404,915

DISCRETIONARY GRANT AWARDS BY MAJOR ACTIVITY TYPE

Highlights

The Tracking Accountability in Government Grants System (TAGGS) uses 16 activity types to describe the nature of the grant being funded. For the purpose of this report, these 16 have been grouped into four major activity types:

Discretionary Grants by Major Activity Type		
Grant Type	Awards	Dollars
Research	43,759	\$17,905,925,448
Services	12,242	\$16,211,687,797
Training	6,940	\$2,007,478,431
Other	5,747	\$1,140,313,239
TOTAL	68,688	\$37,265,404,915

Research (48% of FY 2005 discretionary grant funds and 64% of the number of discretionary awards): The majority of discretionary awards support traditional research projects by individual investigators, as well as broadly-based traditional research; multi-disciplinary research programs; general and categorical research centers and research resources; research career programs; and general research support to grantee institutions to strengthen research activities. Over half of the discretionary grant funds in FY 2005 (44%, \$16.3 billion) were awarded by the NIH in support of research programs.

Top Research Programs				
CFDA	Program Name	OPDIV	Awards	Dollars
93.859	Pharmacology, Physiology, and Biological Chemistry Research	NIH	5,257	\$1,557,105,368
93.856	Microbiology and Infectious Diseases Research	NIH	3,354	\$1,121,396,077
93.837	Heart and Vascular Diseases Research	NIH	2,869	\$1,188,201,171

Services (43% of FY 2005 discretionary grant funds and 18% of the number of discretionary awards): The second largest category of discretionary grant funds in FY 2005 went to support health and/or social services programs (43%, \$16.2 billion). This category includes grant programs for the delivery of health services; treatment and rehabilitation programs; education and information programs; and programs for the detection of health problems.

ACF awarded \$7.4 billion for social service programs supporting Head Start, runaway and homeless youth, abandoned infants, refugee assistance, low-income energy assistance, food and nutrition, and community services. CDC awarded \$3.3 billion to support health services programs, including those directed at communicable diseases prevention, childhood lead poisoning prevention, and disabilities prevention. HRSA awarded \$3.9 billion to support health services to homeless populations; community health centers focused on providing services in the most medically underserved areas; and comprehensive care services for children, youth, women and families who are infected with or affected by HIV and/or AIDS.

Top Services Programs				
CFDA	Program Name	OPDIV	Awards	Dollars
93.600	Head Start	ACF	1,867	\$6,688,866,582
93.283	Centers for Disease Control and Prevention Investigations and Technical Assistance	CDC	1,114	\$1,707,152,804
93.268	Immunization Grants	CDC	65	\$1,437,322,689

Training (5% of FY 2005 discretionary grant funds and 10% of the number of discretionary awards): Includes research training programs; applied training programs and traineeships; education projects; general educational support to health professions schools; and the research career programs. NIH and HRSA awarded most of the training grants (89%) primarily to support training in health professions, but also to provide support to AIDS education and training centers, and interdisciplinary training for health care in rural areas.

Top Training Programs				
CFDA	Program Name	OPDIV	Awards	Dollars
93.110	Maternal and Child Health Federal Consolidated Programs	HRSA	794	\$117,726,428
93.398	Cancer Research Manpower	NIH	793	\$122,345,427
93.281	Mental Health Research Career/Scientist Development Awards	NIH	473	\$68,106,399

Other (3% of FY 2005 discretionary grant funds and 8% of the number of discretionary awards): Includes construction projects; grants for the planning and development of health programs and health resources; evaluations; and health infrastructure awards. Relatively few HHS FY 2005 discretionary grant dollars support projects classified in this activity type.

Top Other Programs:

Top Other Programs				
CFDA	Program Name	OPDIV	Awards	Dollars
93.389	Research Infrastructure	NIH	1,068	\$1,032,071,240
93.887	Project Grants for Renovation or Construction of Non-Acute Health Care Facilities and Other Facilities	HRSA	1,110	\$422,435,960
93.230	Consolidated Knowledge Development and Application (KD&A) Program	SAMHSA	306	\$74,496,477

DISCRETIONARY GRANT AWARDS BY ALL ACTIVITY TYPES

Activity Type		Awards	Dollars
Research	Scientific/Health Research (Includes Surveys)	43,525	\$17,841,547,722
	Social Science Research (Includes Surveys)	234	\$64,377,726
	Research Total	43,759	\$17,905,925,448
Services	Demonstration	2,387	\$808,295,530
	Health Services	6,073	\$8,182,881,138
	Social Services	3,782	\$7,220,511,129
	Services Total	12,242	\$16,211,687,797
Training	Conferences (Information Transfer/Technology Transfer)	25	\$811,906
	Technical Assistance	404	\$645,118,076
	Training/Traineeship	6,511	\$1,361,548,449
	Training Total	6,940	\$2,007,478,431
Other	Construction	794	\$478,615,139
	Evaluation	139	\$29,721,325
	Fellowship/Scholarship/Student Loans	3,801	\$183,152,113
	Knowledge/Development/Application (KDA)	270	\$152,145,960
	Other Total	626	\$281,862,503
	Planning	117	\$14,816,199
	Other Total	5,747	\$1,140,313,239
Discretionary Grants Total		68,688	\$37,265,404,915

THE FIFTY RECIPIENTS RECEIVING THE GREATEST DISCRETIONARY FUNDING LEVELS

FY 2005 Top 50 Recipient Dollars: \$11,153,580,964

FY 2005 Top 50 Recipient Awards: 24,398

Highlights

Universities and colleges represent 40 of the top 50 HHS discretionary grant recipients in FY 2005. The University of California received more HHS discretionary grant funds for more projects than any other recipient. Seven state or city health and welfare organizations are in the top 50 HHS discretionary grant recipients. Four hospital and four research organizations are in the top 50 HHS discretionary grant recipients.

Top 50 Recipients			
Rank	Recipient Name	Number of Awards	Dollars
1	Johns Hopkins University	1,223	\$470,065,548
2	CA ST Department of Health Services	26	\$416,855,406
3	University of Pennsylvania	1,120	\$411,056,338
4	University of Washington	978	\$395,351,209
5	University of California-San Francisco	966	\$376,693,590
6	Texas State Department of Health	32	\$326,533,832
7	University of Michigan	920	\$326,422,257
8	University of California-Los Angeles	880	\$320,874,796
9	University of Pittsburgh	939	\$316,734,893
10	Health Research, INC	124	\$305,892,644
Top 10		7,210	\$3,666,480,513
11	Yale University	831	\$292,933,993
12	Washington University	804	\$287,601,167
13	University of North Carolina	800	\$278,676,940
14	Duke University	736	\$275,059,946
15	Stanford University	722	\$255,650,618
16	University of California-San Diego	644	\$253,412,868
17	Massachusetts General Hospital	681	\$248,337,384
18	Columbia University, School of Arts & Science	607	\$244,000,861
19	New York City Department of Health	19	\$228,337,257
20	Florida State Dept of Health	22	\$226,465,300
21	University of Wisconsin	657	\$225,225,399
22	Brigham & Women's Hospital	548	\$216,740,538
23	Vanderbilt University	617	\$214,027,640
24	Harvard University	391	\$198,274,189
25	Emory University	565	\$192,817,714
Top 25		15,854	\$7,304,042,327
26	New York City Agency For Child Development	2	\$189,064,122
27	Los Angeles County Office of Education	1	\$187,115,571

THE FIFTY RECIPIENTS RECEIVING THE GREATEST DISCRETIONARY FUNDING LEVELS (CONT.)

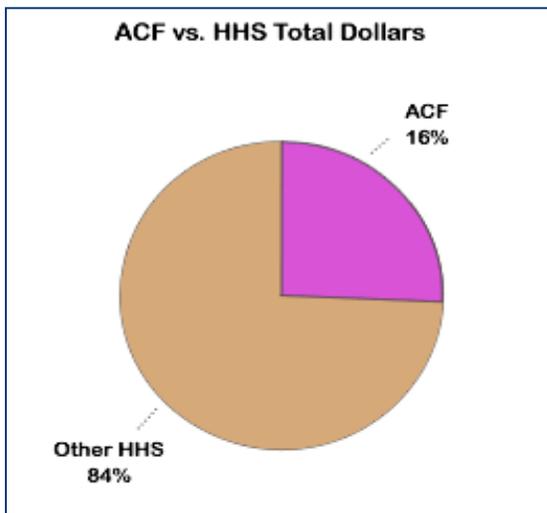
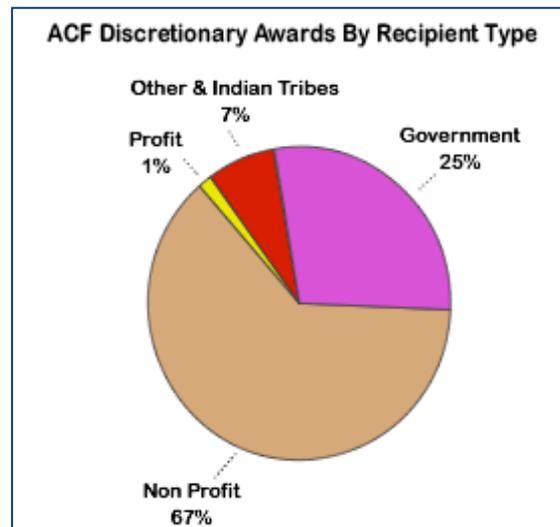
Rank	Recipient Name	Number of Awards	Dollars
28	Baylor College of Medicine	546	\$186,051,652
29	Scripps Research Institute	440	\$177,297,652
30	Oregon Health & Science University	523	\$166,549,739
31	University of IOWA	455	\$165,224,325
32	GA ST Department of Human Resources	51	\$162,290,590
33	Case Western Reserve University	443	\$160,895,407
34	University of Southern California	335	\$160,442,709
35	NC State Department of Health & Human Services	60	\$156,480,224
36	University of Alabama	467	\$156,480,224
37	Mount Sinai School Of Medicine	397	\$151,445,184
38	NJ State Dept of Health and Senior Services	40	\$148,384,608
39	Boston University	394	\$146,241,702
40	Albert Einstein College of Medicine of Yeshiva University	341	\$145,880,847
41	University of Minnesota	476	\$145,019,561
42	Northwestern University	451	\$142,262,564
43	University of Chicago	423	\$141,533,876
44	University of Maryland	410	\$140,818,587
45	Mayo clinic-Rochester	336	\$139,552,209
46	University of Texas	396	\$139,137,522
47	University of Virginia	428	\$136,453,337
48	University of TX SYS Cancer CTR	311	\$135,641,308
49	University of Rochester	415	\$134,881,152
50	University of Illinois	403	\$134,330,192
Total		24,398	\$11,153,580,964

SECTION IV. OPERATING DIVISION GRANT PORTFOLIOS: ADMINISTRATION FOR CHILDREN AND FAMILIES (ACF)

***Mission:** Provides national leadership and creates opportunities for families to lead economically and socially productive lives, including helping children to develop into healthy adults and communities to become more prosperous and supportive of their members.*

ACF Awards by Award Class		
Award Class	Awards	Dollars
Discretionary	4,913	\$7,506,066,289
Mandatory	2,832	\$37,000,348,632
Total	7,745	\$44,506,414,921

ACF administers grant programs that promote the economic and social well-being of families, children, individuals and communities. These programs are the primary mechanisms ACF uses to achieve its major goals to (1) empower families and individuals to increase their own economic independence and productivity; (2) encourage the development of strong, healthy and supportive communities that have a positive impact on the quality of life and development of children; (3) partner with individuals, front-line service providers, communities, American Indian tribes, Native communities, states and



Congress to achieve solutions which transcend traditional agency boundaries; (4) plan, reform and integrate services to improve needed access; and (5) commit to working with people with developmental disabilities, refugees and migrants to address their needs, strengths and abilities.

ACF leads the nation in improving the economic and social well-being of families, children, and communities by administering mandatory and discretionary grant programs such as the national welfare-to-work program, TANF (Temporary Assistance for Needy Families); foster care; adoption assistance; Head Start, child care; child

support enforcement; positive youth development programs; refugee resettlement; and services for those with developmental disabilities.

ACF Mandatory - Selected CFDA Programs			
CFDA	Program Name	Awards	Dollars
93.558	Temporary Assistance for Needy Families (TANF)	109	\$17,309,563,377
93.658	Foster Care: Title IV-E	77	\$4,328,095,778
93.563	Child Support Enforcement (CSE)	93	\$2,880,550,562
93.667	Social Services Block Grant (SSBG)	61	\$1,715,200,000

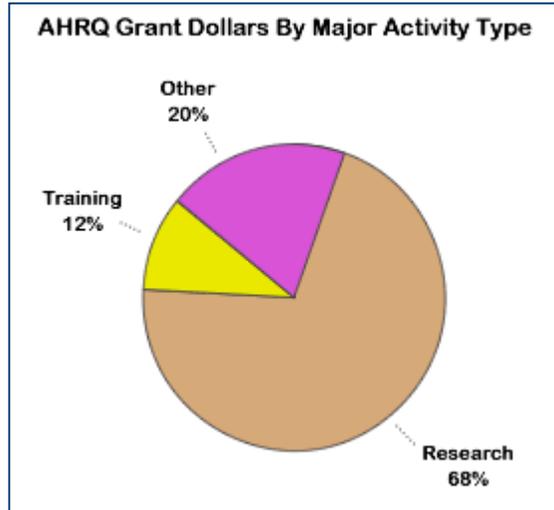
ACF Discretionary - Selected CFDA Programs			
CFDA	Program Name	Awards	Dollars
93.600	Head Start	1867	\$6,688,866,582
93.576	Refugee and Entrant Assistance Discretionary Grants	400	\$88,098,576
93.550	Transitional Living for Homeless Youth	197	\$35,791,880
93.612	Native American Programs	147	\$28,293,445
93.632	Developmental Disabilities University Affiliated Programs	65	\$31,164,628
93.592	Family Violence Prevention and Services/Grants for Battered Women's Shelters: Discretionary Grants	31	\$13,832,068
93.593	Job Opportunities for Low-Income Individuals	11	\$4,935,481

www.acf.hhs.gov

**SECTION IV. OPERATING DIVISION GRANT PORTFOLIOS:
AGENCY FOR HEALTHCARE RESEARCH & QUALITY (AHRQ)**

Mission: To improve the quality, safety, efficiency, and effectiveness of health care for all Americans.

AHRQ is the lead agency charged with supporting research designed to improve the quality of healthcare, reduce its cost, improve patient safety, decrease medical errors, and broaden access to essential services.



AHRQ awards discretionary grants, cooperative agreements, and contracts to carry out research projects, demonstrations, evaluations, and dissemination activities. AHRQ's research projects examine the availability, quality, and costs of health care services; ways to improve the effectiveness and appropriateness of clinical practice, including the prevention of disease; and other areas of health services research, such as services for persons with HIV infection. The information helps healthcare decision makers—patients and clinicians, health system leaders, and policymakers—make more informed decisions and improve the quality of healthcare services.

AHRQ also supports small grants, conference grants, and training through dissertation grants and National Research Service Awards.

AHRQ Totals by Award Class		
Award Class	Awards	Dollars
Discretionary	356	\$102,571,629
Mandatory	0	\$0
Total	356	\$102,571,629

AHRQ Discretionary - All CFDA Programs			
CFDA	Program Name	Awards	Dollars
93.225	National Research Service Awards, Health Services Research	37	\$8,185,810
93.226	Research on Healthcare Costs, Quality and Outcomes	468	\$94,385,819

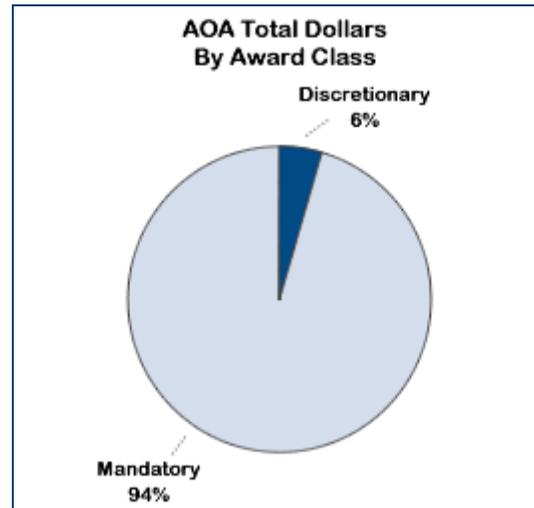
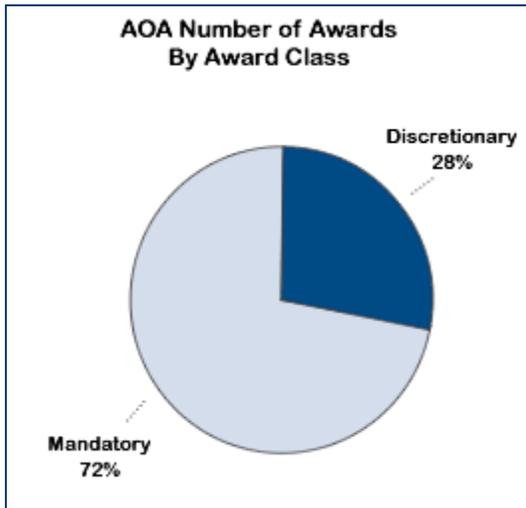
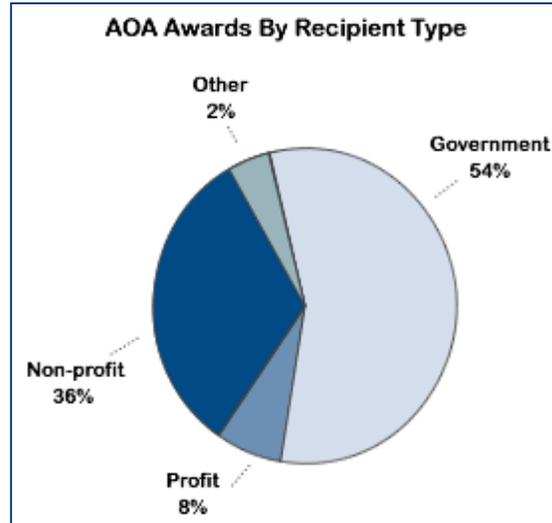
www.ahrq.gov

SECTION IV. OPERATING DIVISION GRANT PORTFOLIOS: ADMINISTRATION ON AGING (AOA)

Mission: To promote the dignity and independence of older people, and to help society prepare for an aging population.

The Administration on Aging (AoA) serves as an advocate for older people and oversees the development of a comprehensive and coordinated system of care that is responsive to the needs and preferences of older people and their family caregivers.

AoA is one of the nation's largest providers of home- and community-based care for older persons and their caregivers. Created in 1965 with the passage of the Older Americans Act, AoA is part of a federal, state, tribal and local partnership called the National Network on Aging. This network provides assistance and services to older individuals and their families in urban, suburban, and rural areas throughout the United States. While all older Americans may receive services, AoA targets those older individuals who are in greatest economic and social need: the poor, the isolated, and those elders disadvantaged by social or health disparities.



AOA Totals by Award Class		
Award Class	Awards	Dollars
Discretionary	331	\$87,633,759
Mandatory	837	\$1,293,588,355
Total	1,168	\$1,381,222,114

AOA Discretionary - All CFDA Programs			
CFDA	Program Name	Awards	Dollars
93.048	Special Programs for the Aging Title IV Training, Research and Discretionary Projects and Programs	296	\$77,209,684
93.051	Alzheimer's Disease Demonstration Grants to States	43	\$10,516,391
93.052	National Family Caregiver Support Program	1	-\$92,316

AOA Mandatory - All CFDA Programs			
CFDA	Program Name	Awards	Dollars
93.045	Special Programs for the Aging Title III, Part C Nutrition Services	56	\$1,097,915,155
93.042	Special Programs for the Aging Title V, Chapter 2 Long Term Care Ombudsman Services for Older Individuals	56	19,095,563
93.053	Nutrition Services Incentive Program	287	\$145,731,137
93.047	Special Programs for the Aging Title VI, Part A, Indian Programs Grants to Indian Tribes and Part B, Grants to Native Hawaiians	239	\$24,590,662
93.052	National Family Caregiver Support Program	199	\$6,255,838

www.aoa.gov

**SECTION IV. OPERATING DIVISION GRANT PORTFOLIOS:
OFFICE OF THE ASSISTANT SECRETARY FOR PLANNING AND
EVALUATION (ASPE)**

The Assistant Secretary for Planning and Evaluation (ASPE) advises the Secretary of the Department of Health and Human Services on policy development in health, disability, human services, and science, and provides advice and analysis on economic policy. ASPE leads special initiatives, coordinates the Department's evaluation, research and demonstration activities, and manages cross-Department planning activities such as strategic planning, legislative planning and review of regulations. Integral to this role, ASPE conducts research and evaluation studies, develops policy analyses and estimates the cost and benefits of policy alternatives under consideration by the Department or Congress.

ASPE - All CFDA Programs			
CFDA	CFDA Program	Awards	Dollars
93.239	Policy Research And Evaluation Grants	5	\$3,373,699

ASPE Awards	
ASPE Award Titles	Dollars
Western Center on Poverty and Public Policy	\$398,442
Human Services Transportation Technical Assistance Project	\$992,000
Kentucky Center for Poverty Research	\$486,371
Area Poverty Research Center	\$498,838
National Poverty Research Center	\$997,648

aspe.hhs.gov

SECTION IV. OPERATING DIVISION GRANT PORTFOLIOS: CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)

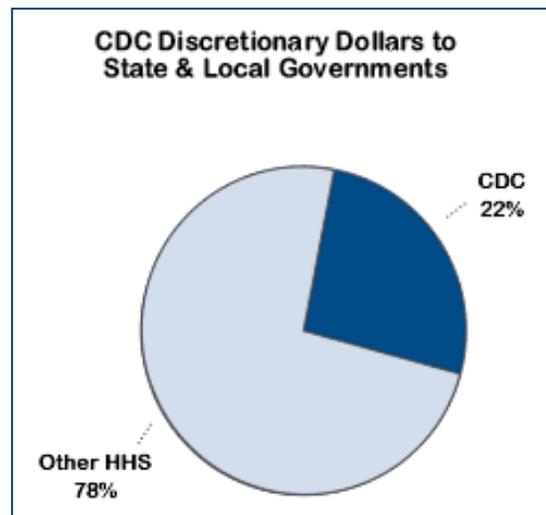
***Mission:** To promote health and quality of life by preventing and controlling disease, injury, and disability.*

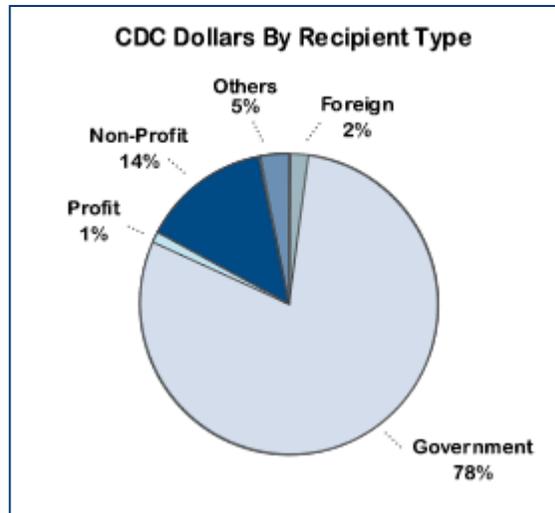
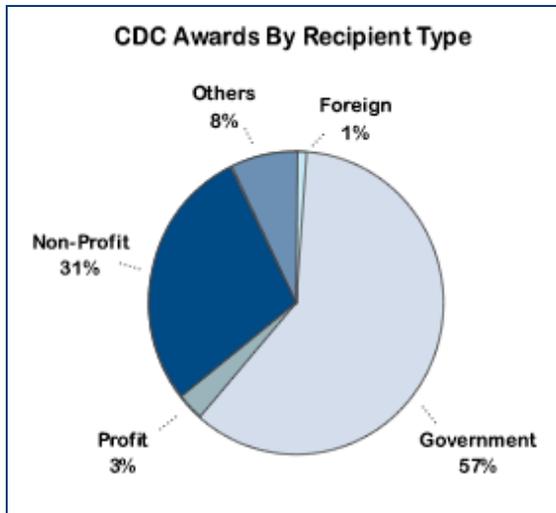
CDC Totals by Award Class		
Award Class	Awards	Dollars
Discretionary	3,348	\$4,955,064,112
Mandatory	61	\$115,278,754
Total	3,409	\$5,070,342,866

The Centers for Disease Control and Prevention (CDC) protects the health and safety of people—at home and abroad—providing credible information to enhance health decisions, and promoting health through strong partnerships. CDC serves as the national focus for developing and applying disease prevention and control, environmental health, and health promotion and education activities designed to improve the health of the people of the United States.

CDC seeks to accomplish its mission by working with partners throughout the nation and world to monitor health, detect and investigate health problems, conduct research to enhance prevention, develop and advocate sound public health policies, implement prevention strategies, promote healthy behaviors, foster safe and healthful environments, and provide leadership and training.

CDC performs many of the administrative functions for the Agency for Toxic Substances and Disease Registry (ATSDR), a sister agency of CDC. ATSDR is charged with assessing health hazards at specific hazardous waste sites, helping to prevent or reduce exposure and the illnesses that result, and increasing knowledge and understanding of the health effects that may result from exposure to hazardous substances.





CDC Discretionary - Selected CFDA Programs			
CFDA	CFDA Name	Awards	Dollars
93.136	Injury Prevention and Control Research	301	\$111,933,888
93.161	Health Program for Toxic Substances and Disease	19	\$5,056,554
93.262	Occupational Safety and Health Research Grants	234	\$81,817,765
93.268	Immunization Grants	65	\$1,437,322,689
93.940	HIV Prevention Activities - Health Department Based	81	\$244,141,520
93.945	Assistance Programs for Chronic Disease Prevention And Control	106	\$74,117,789
93.988	Cooperative Agreements For State-Based Diabetes Control Programs and Evaluation of Surveillance Systems	63	\$34,012,301

CDC Mandatory - Selected CFDA Programs			
CFDA	CFDA Name	Awards	Dollars
93.991	Preventive Health and Health Services Block Grants	61	\$115,278,754

www.cdc.gov

SECTION IV. OPERATING DIVISION GRANT PORTFOLIOS: CENTERS FOR MEDICARE & MEDICAID SERVICES (CMS)

***Mission:** To assure health care security for beneficiaries; to open programs to full partnership with the entire health community; and to improve quality and efficiency in an evolving health care system.*

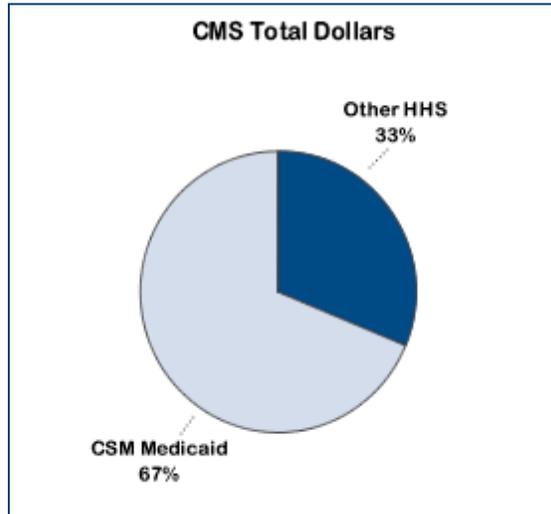
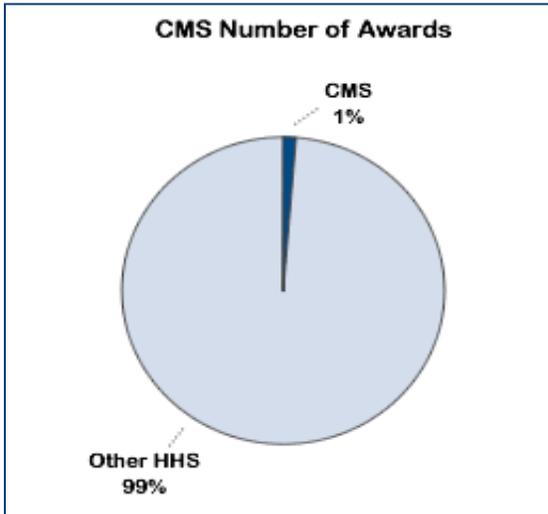
CMS Totals by Award Class		
Award Class	Awards	Dollars
Discretionary	223	\$174,912,696
Mandatory	288	\$161,883,156,336
Total	511	\$162,058,069,032

The Centers for Medicare & Medicaid Services (CMS) administers the *Medicare program and works in partnership with States to administer Medicaid and the State Children’s Health Insurance Program (SCHIP). Through Medicare, Medicaid and SCHIP, about one in four Americans receive health coverage.

Medicaid provides healthcare to millions of low-income families with children, aged, blind or disabled persons. It is the Department’s largest grant program in terms of funding levels. The SCHIP allows states to initiate and/or expand health insurance to uninsured, low-income children.

In addition to these programs CMS administers a number of quality focused activities that benefit all Americans. CMS program objectives include:

1. Expand health care choices and further strengthen programs and services to adapt to beneficiary needs.
 2. Improve quality of care and health outcomes for the beneficiaries of CMS programs.
 3. Improve access to services for underserved and vulnerable beneficiary populations, including eliminating health disparities.
 4. Protect beneficiaries from substandard or unnecessary care.
- NOTE: Medicare, the nation’s largest health insurance program, is not a grant program and its funding levels are not included in the CMS grant totals. Grant programs which support the administration of some Medicare services are included in CMS totals.



CMS Discretionary - All CFDA Programs			
CFDA	CFDA Program	Awards	Numbers
93.768	Medicaid Infrastructure Grants to Support the Competitive Employment of People with Disabilities	29	\$17,202,498
93.769	Demonstration to Maintain Independence and Employment	3	\$15,000,000
93.779	Centers for Medicare And Medicaid Services Research, Demonstrations and Evaluations	261	\$102,710,199
93.780	Grants to States for Operation of Qualified High-Risk Pools	14	\$25,566,687
93.781	Seed Grants to States for Qualified High-Risk Pools	23	\$14,433,312

CMS Mandatory - All CFDA Programs			
CFDA	CFDA Program	Awards	Numbers
93.767	State Children's Insurance Program (SCHIP)	51	\$1,297,711,167
93.778	Medical Assistance Program (Medicaid)	186	\$160,357,769,906

www.cms.gov

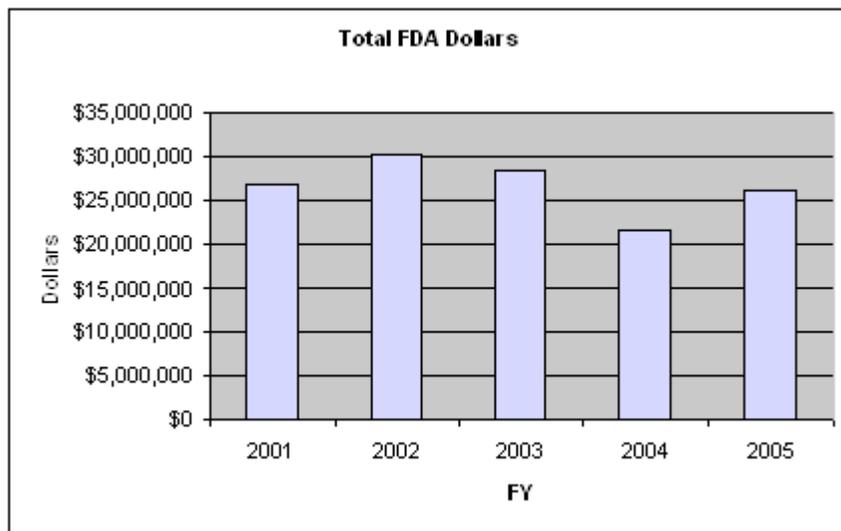
**SECTION IV. OPERATING DIVISION GRANT PORTFOLIOS:
FOOD AND DRUG ADMINISTRATION (FDA)**

Mission: To protect the public health by assuring the safety, efficacy, and security of human and veterinary drugs, biological products, medical devices, the nation’s food supply, cosmetics, and products that emit radiation.

FDA Totals by Award Class		
Award Class	Awards	Dollars
Discretionary	124	\$26,263,352
Mandatory	0	\$0
Total	124	\$26,263,252

The Food and Drug Administration (FDA) is also responsible for advancing the public health by helping to speed innovations that make medicines and foods more effective, safer, and more affordable; and helping the public get the accurate, science-based information they need to use medicines and foods to improve their health.

FDA Discretionary - All CFDA Programs			
CFDA	CFDA Name	Awards	Dollars
93.103	Food and Drug Administration Research	98	\$21,790,643
93.447	State Health Fraud Task Force Grants	10	\$148,600
93.448	Food Safety and Security Monitoring Project	5	\$1,694,690
93.449	Ruminant Feed Ban Support Project	11	\$2,629,419



www.fda.gov

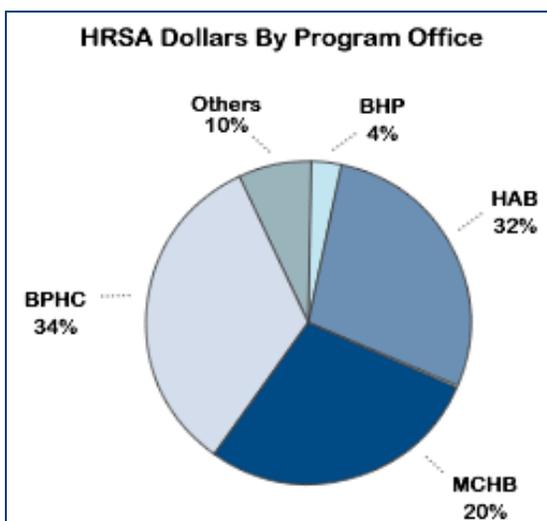
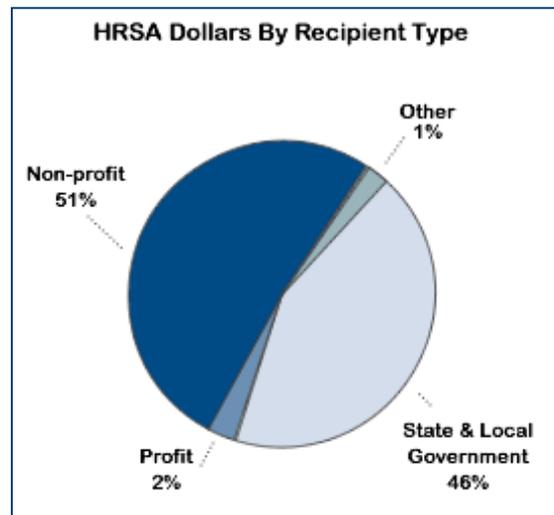
SECTION IV. OPERATING DIVISION GRANT PORTFOLIOS: HEALTH RESOURCES AND SERVICES ADMINISTRATION (HRSA)

Mission: To improve and expand access to quality health care for all.

HRSA Totals by Award Class		
Award Class	Awards	Dollars
Discretionary	6,868	\$5,575,450,834
Mandatory	60	\$586,647,809
Total	6,928	\$6,162,098,643

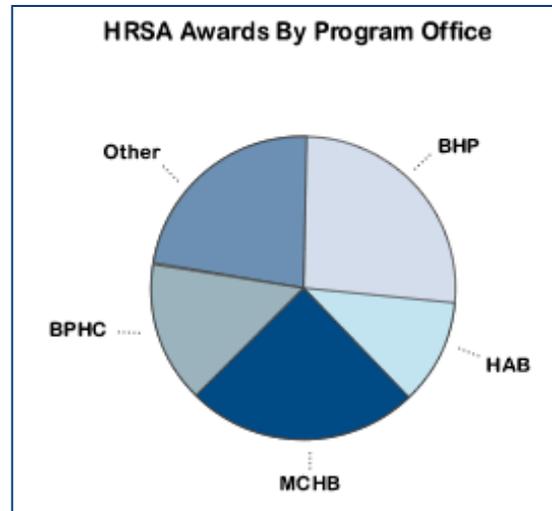
Health Resources and Services Administration, HRSA assures the availability of quality health care to low income, uninsured, isolated, vulnerable and special needs populations and meets their unique health care needs. HRSA's grant portfolio includes a range of programs or initiatives designed to increase access to care, improve quality, and safeguard the health and well-being of the Nation's most vulnerable populations. Collectively, HRSA programs work to improve access to:

- Eliminate Barriers to Care
- Eliminate Health Disparities
- Assure Quality of Care
- Improve Public Health and Health Care Systems.



HRSA's four major program bureaus are the Bureau of Primary Health Care (BPHC), Maternal and Child Health Bureau (MCHB), HIV/AIDS Bureau (HAB), and the Bureau of Health Professionals (BHP). Through these bureaus, HRSA supports over 800 community health centers; funds services for people living with HIV/AIDS through the Ryan White CARE (Comprehensive AIDS Resources Emergency) Act; assists States and health care organizations in improving services to mothers and children; oversees the national system that allocates organs, tissue, and bone marrow for transplant, and

works with academic health centers and other training programs to enhance the supply, diversity, and distribution of the Nation's health care workforce.



HRSA Discretionary - Selected CFDA Programs			
CFDA	CFDA Program	Awards	Dollars
93.224	Community Health Centers	1,047	\$1,546,983,689
93.914	HIV Emergency Relief Project Grants	51	\$587,445,170
93.918	Grants to Provide Outpatient Early Intervention Services	418	\$183,356,922
93.110	Special Projects of Regional and National Significance	794	\$117,726,428
93.926	Healthy Start	115	\$96,631,197
93.252	Community Access Program	305	\$72,302,254
93.884	Primary Care Training	441	\$83,029,279
93.247	Advanced Education Nursing Grant Program	190	\$37,888,021
93.912	Rural Health Outreach and Rural Network Development Program	214	\$33,979,937

HRSA Mandatory - All CFDA Programs			
CFDA	CFDA Program	Awards	Dollars
93.917	HIV Care Formula Grants	1	\$1,043,450
93.994	MCH Block Grants	59	\$585,604,359

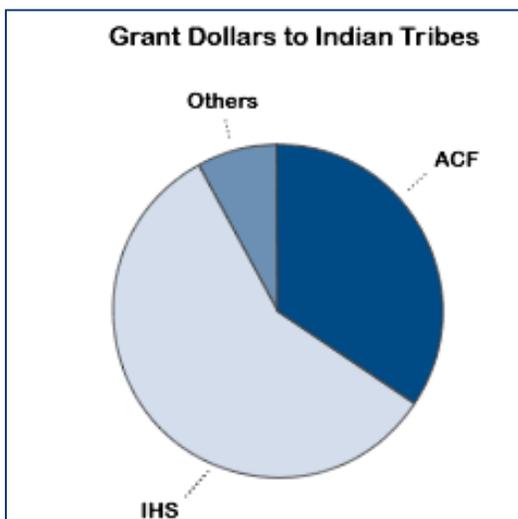
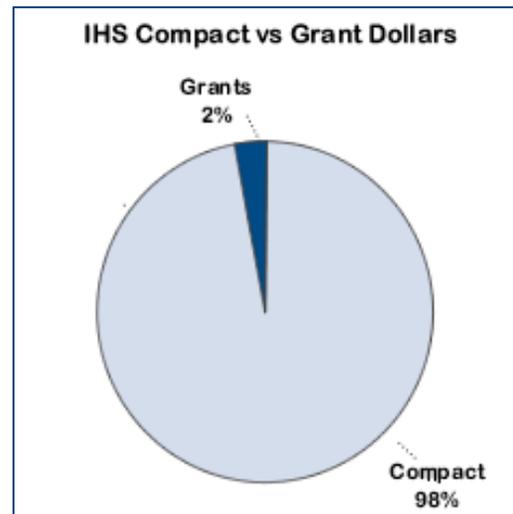
www.hrsa.gov

SECTION IV. OPERATING DIVISION GRANT PORTFOLIOS: INDIAN HEALTH SERVICE (IHS)

Mission: The IHS mission, in partnership with American Indian and Alaska Native people, is to raise their physical, mental, social, and spiritual health to the highest level.

IHS Totals by Award Class		
Award Class	Awards	Dollars
Compact	89	\$908,839,882
Discretionary	595	\$168,832,666
Mandatory	214	\$66,625,196
Total	898	\$1,144,297,744

The IHS provides a comprehensive health services delivery system for American Indians and Alaska Natives with opportunity for maximum tribal involvement in developing and managing programs to meet their health needs. The goal of the IHS is to ensure that comprehensive, culturally acceptable personal and public health services are available and accessible to all American Indian and Alaska Native people. The foundation of the IHS is to uphold the Federal Government obligation to promote healthy American Indian and Alaska Native people, communities, and cultures and to honor and protect the inherent sovereign rights of tribes.



In order to carry out its mission, uphold its foundation, and attain its goal, the IHS:

1. Assists Indian tribes in developing their health programs through activities such as health management training, technical assistance, and human resource development;
2. Facilitates and assists Indian tribes in coordinating health planning, in obtaining and using health resources available through Federal, State, and local programs, and in operating comprehensive health care services and

health programs.

3. Provides comprehensive health care services, including hospital and ambulatory medical care, preventive and rehabilitative services, and development of community sanitation facilities.
4. Serves as the principal Federal advocate in the health field for Indians to ensure comprehensive health services for American Indian and Alaska Native people.

In addition to its grants portfolio, IHS enters into compacts with tribes.

The IHS currently provides health services to approximately 1.5 million American Indians and Alaska Natives who belong to more than 557 federally recognized tribes in 35 states.

IHS Discretionary - All CFDA Programs			
CFDA	CFDA Name	Awards	Dollars
93.933	Demonstration Projects for Indian Health	54	\$4,480,056
93.231	Epidemiology Cooperative Agreements	27	\$10,637,797
93.210	Tribal Self-Governance	11	\$2,463,757
93.970	Health Professions Recruitment Program for Indians	2	\$1,035,513

IHS Mandatory - Select CFDA Programs			
CFDA	CFDA Name	Awards	Dollars
93.210	Tribal Self-Governance (Compacts)	89	\$908,839,882
93.237	Indian Health	171	\$58,689,802
93.284	Injury Prevention Program for American Indians and Alaskan Natives	3	\$100,000
93.193	Urban Indian Health Services	32	\$6,704,405

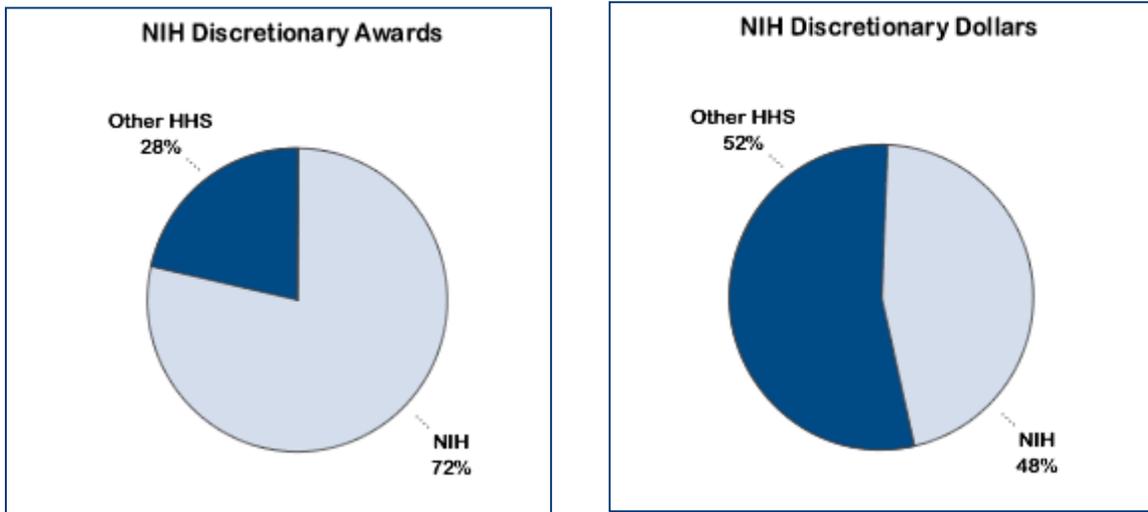
www.ihs.gov

SECTION IV. OPERATING DIVISION GRANT PORTFOLIOS: NATIONAL INSTITUTES OF HEALTH (NIH)

***Mission:** NIH is the steward of medical and behavioral research for the Nation. Its mission is science in pursuit of fundamental knowledge about the nature and behavior of living systems and the application of that knowledge to extend healthy life and reduce the burdens of illness and disability.*

NIH Totals by Award Class		
Award Class	Awards	Dollars
Discretionary	49,266	\$17,361,225,662
Mandatory	0	\$0
Total	49,266	\$17,361,225,662

The National Institutes of Health (NIH) is the primary Federal agency for conducting and supporting medical research. Helping to lead the way toward important medical discoveries that improve people’s health and save lives, NIH investigates ways to prevent disease as well as the causes, treatments, and even cures for common and rare diseases. Composed of 27 Institutes and Centers, the NIH provides leadership and financial support to researchers in every state and throughout the world.



The goals of NIH are to:

- 1) Foster fundamental creative discoveries, innovative research strategies, and their applications as a basis to advance significantly the Nation's capacity to protect and improve health;
- 2) Develop, maintain, and renew scientific human and physical resources that will assure the Nation's capability to prevent disease;
- 3) Expand the knowledge base in medical and associated sciences in order to enhance the Nation's economic well-being and ensure a continued high return on the public investment in research; and

- 4) Exemplify and promote the highest level of scientific integrity, public accountability, and social responsibility in the conduct of science.

In realizing these goals, the NIH provides leadership and direction to programs designed to improve the health of the Nation by conducting and supporting research: in the causes, diagnosis, prevention, and cure of human diseases; in the processes of human growth and development; in the biological effects of environmental contaminants; in the understanding of mental, addictive and physical disorders; in directing programs for the collection, dissemination, and exchange of information in medicine and health, including the development and support of medical libraries and the training of medical librarians and other health information specialists.

NIH Discretionary - Selected CFDA Programs			
CFDA	CFDA Name	Awards	Dollars
93.859	Pharmacology, Physiology, and Biological Chemistry	5,257	\$1,557,105,368
93.856	Microbiology and Infectious Diseases Research	3,347	\$1,115,799,638
93.837	Heart and Vascular Diseases Research	2,869	\$1,188,201,171
93.853	Extramural Research Programs in the Neurosciences	3,667	\$1,161,299,849
93.389	National Center for Research Resources	1,068	\$1,032,071,240
93.242	Mental Health Research Grants	2,572	\$902,966,622
93.395	Cancer Treatment Research	1,480	\$596,461,905
93.866	Aging Research	1,980	\$761,259,708
93.865	National Institute of Child Health And Human Development	2,277	\$722,207,144
93.279	Drug Abuse Research Programs	1,815	\$661,524,957
93.847	Diabetes, Endocrinology and Metabolism Research	1,804	\$554,439,189
93.393	Cancer Cause and Prevention Research	1,611	\$596,125,556

NIH Discretionary Programs by Institute			
Institute	Number of Programs	Awards	Dollars
Center For Drug Evaluation and Research ,NIH	3	320	\$83,905,360
Fogarty International Center	2	400	\$62,432,069
National Cancer Institute	19	6,606	\$2,562,328,250
National Center For Human Genome Research Institute	2	338	\$180,825,781
National Center For Research Resources	5	1,073	\$1,034,816,769
National Eye Institute	3	1,524	\$478,824,500
National Heart, Lung, & Blood Institute	5	4,953	\$2,049,850,480
National Institute of Allergy & Infectious Diseases	12	4,864	\$1,634,152,730
National Institute of Arthritis & Musculoskeletal & Skin Diseases	1	1,296	\$385,354,577
National Institute of Child Health And Human Development	5	2,370	\$755,873,640
National Institute of Dental and Craniofacial Research	2	850	\$235,744,051
National Institute of Diabetes & Digestive & Kidney Diseases	5	4,149	\$1,228,175,679
National Institute of Environmental Health Sciences	10	784	\$312,443,520
National Institute of General Medical Sciences	9	5,310	\$1,578,911,347
National Institute of Mental Health	7	3,303	\$981,484,765
National Institute of Neurological Disorders and Stroke	3	3,669	\$1,161,600,061
National Institute of Nursing Research	1	436	\$117,137,499
National Institute on Aging	1	1,978	\$761,004,899
National Institute on Alcohol Abuse and Alcoholism	9	924	\$297,422,655
National Institute on Deafness and Other Communication Disorders	1	1,158	\$309,603,822
National Institute on Drug Abuse	4	2,010	\$680,477,961
National Institute of Biomedical Imaging & Bioengineering	2	794	\$269,636,052
National Library of Medicine	1	215	\$53,037,477
National Center on Minority Health and Health Disparities	3	136	\$129,084,132
Office Of The Director, NIH	3	23	\$17,250,757

www.nih.gov

**SECTION IV. OPERATING DIVISION GRANT PORTFOLIOS:
OFFICE FOR PUBLIC HEALTH AND SCIENCE (OPHS)**

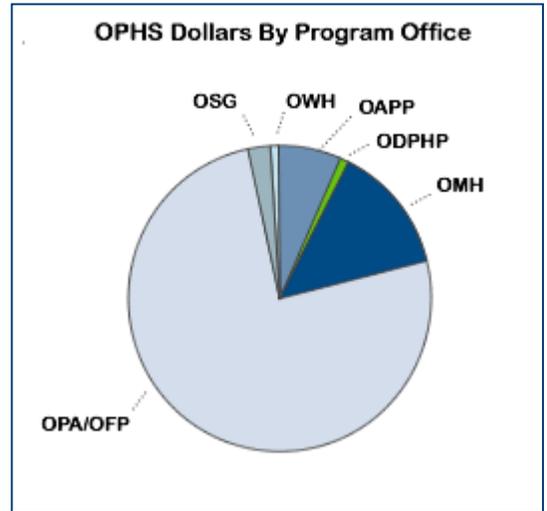
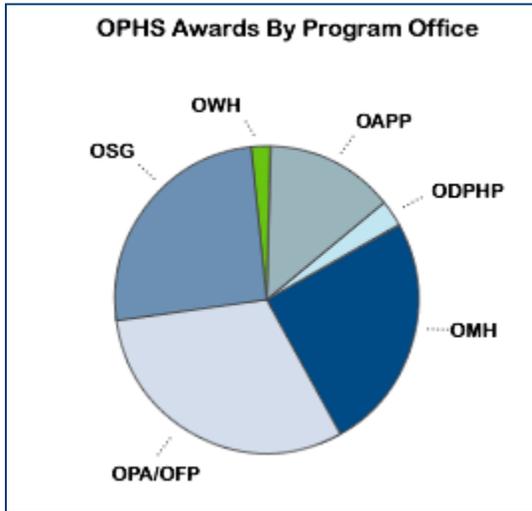
Mission: To provide leadership to the Nation on public health and science and promote, protect and improve the Nation’s health.

OPHS Totals by Award Class		
Award Class	Awards	Dollars
Cooperative Agreements	22	\$64,160,103
Discretionary	551	\$431,886,498
Total	573	\$496,046,601

The Office of Public Health and Science (OPHS) is led by the Assistant Secretary for Health (ASH). OPHS consists of the Immediate Office of ASH, Office of the Surgeon General, the Office of HIV/AIDS Policy, Office of Population Affairs (OPA), the Office of Disease Prevention and Health Promotion, President’s Council on Physical Fitness and Sports, Office of Minority Health (OMH), the Office on Women’s Health, Office of Emergency Preparedness (OEP), the Office for Human Research Protections, Office of Global Health Affairs, the Office of Research Integrity, Office of Military Liaison and Veterans Affairs and National Vaccine Program Office. These offices are actively engaged in a broad array of activities that support and facilitate the work of many of the Department’s Operating Divisions. OPA & OMH are the primary program offices that manage grant programs within OPHS to support its main objectives. OPA & OMH collectively manage 642 awards.

OPHS Awards by CFDA Program			
CFDA	CFDA Name	Count of Awards	Transaction Total
93.004	Cooperative Agreements to Improve the Health	51	\$78,157,059
93.006	State and Territorial Minority HIV/AIDS Demonstration Program	58	\$37,885,494
93.007	Public Awareness Campaigns on Embryo Adoption	3	\$950,918
93.008	Medical Reserve Corps Small Grant Program	126	\$6,096,279
93.012	Heart Health Care for High Risk Women	5	\$744,252
93.013	Ambassadors for Change Program	6	\$225,000
93.016	TA to Physicians at Rabia Balkhi Women’s Hospital in Kabul	1	\$1,500,000
93.105	Bilingual/Bicultural Service Demonstration Projects	18	\$7,478,721
93.111	Adolescent Family Life Research Grants	6	\$1,139,095
93.137	Community Programs to Improve Minority Health Grant Program	36	\$19,726,236
93.217	Family Planning: Services	88	\$263,142,033
93.260	Family Planning Personnel Training	13	\$8,831,872
93.290	National Community Centers of Excellence in Womens Health	15	\$3,830,000

93.879	Medical Library Assistance	1	\$3
93.910	Family Life Centers	2	\$34,776,000
93.974	SDI	22	\$4,956,112
93.990	National Health Promotion	22	\$1,649,999
93.995	AFL	100	\$24,957,528
Total		573	\$496,046,601



OPHS Awards By Program Office		
Program Office	Awards	Dollars
Office of Adolescent Pregnancy Programs (OAPP)	121	\$26,096,623
Office of Disease Prevention & Health Promotion (ODPHP)	22	\$1,649,999
Office of Global Health (OGH)	1	\$1,500,000
Office of Minority Health (OMH)	203	\$56,281,715
Office of Population Affairs/Family Planning (OPA/OFPP)	126	\$276,930,017
Office of The assistant Secretary For Public Health and Science	3	\$950,918
Office of the Surgeon General (OSG)	155	\$6,096,279
Office on Women's Health (OWH)	26	\$4,799,252
Total	657	\$374,304,803

www.ophs.hhs.gov

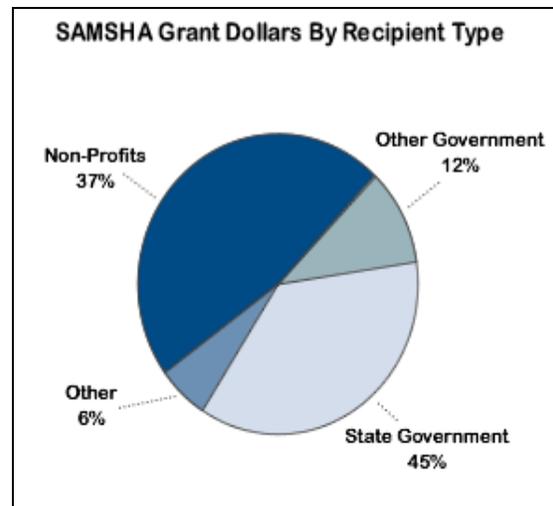
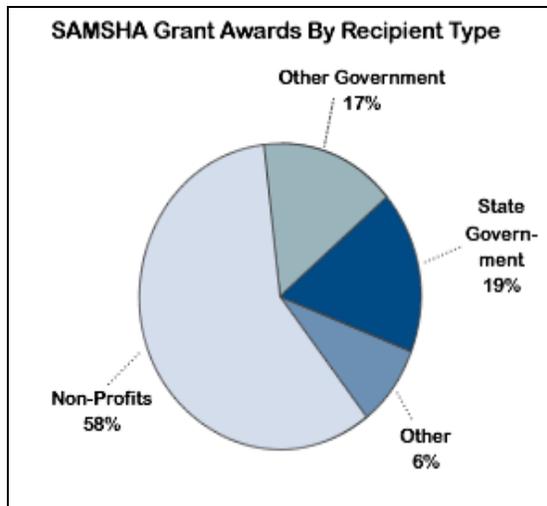
SECTION IV. OPERATING DIVISION GRANT PORTFOLIOS: SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA)

Mission: To build resilience and facilitate recovery for people with or at risk for substance abuse and mental illness.

SAMSHA Totals by Award Class		
Award Class	Awards	Dollars
Discretionary	2,086	\$807,963,616
Mandatory	233	\$2,183,785,027
Total	2,319	\$2,991,748,643

The Substance Abuse and Mental Health Services Administration (SAMHSA) provides leadership and national focus for efforts to reduce national health problems resulting from substance abuse and to foster improvements in the mental health of Americans through increased knowledge and the advancement of effective strategies for dealing with these health problems.

SAMHSA supports programs, policy, and knowledge development about substance abuse prevention, addiction treatment, and mental health services. SAMHSA programs translate research to practice — bringing new science-based knowledge to community-based services for people with or at risk for mental and substance abuse disorders. As the substance abuse and mental health systems of services evolve, SAMHSA will be at the forefront of that transformation to promote a life in the community for everyone with or at risk for mental and substance abuse disorders to have the opportunity for a fulfilling life that includes a job, a home, and meaningful relationships with family and friends.



SAMHSA Discretionary - All CFDA Programs			
CFDA	CFDA Program	Awards	Dollars
93.104	CMHS Child Mental Health Service Initiative	53	\$72,865,239
93.230	Consolidated Knowledge Development and Application (KD&A) Program	156	\$74,496,477
93.238	Treatment Outcomes and Performance Pilot Studies: TOPPS II	2	\$800,000
93.243	PRNS	1,343	\$458,906,785
93.244	Mental Health Clinical and AIDS Service-Related Training	4	\$3,022,130
93.275	SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES-ACCESS TO RECOVER	15	\$99,200,003
93.276	Drug-Free Community Grants	752	\$72,087,369
93.982	Mental Health Disaster Assistance	19	\$26,585,613
Total		2,086	\$807,963,616

SAMHSA Mandatory - All CFDA Programs			
CFDA	CFDA Program	Awards	Dollars
93.138	Protection and Advocacy for Individuals with Mental Illness	57	\$33,656,179
93.150	PATH	56	\$52,399,000
93.958	CMHS Block Grant	59	\$410,952,864
93.959	Prevention and Treatment (SAPT) Block Grant	61	\$1,686,776,984
Total		233	\$2,183,785,027

www.samhsa.gov

APPENDIX A. MAJOR PROGRAMS LISTED IN OMB CIRCULAR A-133 COMPLIANCE SUPPLEMENT

Major Programs Listed in OMB Circular A-133 Compliance Supplement			
CFDA	Name	Number	Dollar
93.558	Temporary Assistance for Needy Families (TANF)	109	\$17,309,563,377
93.600	Head Start	1,867	\$6,688,866,582
93.596	Child Care and Development Fund (CCDF)	337	\$4,736,471,572
93.658	Foster Care: Title IV-E	77	\$4,328,095,778
93.563	Child Support Enforcement (CSE)	93	\$2,880,550,562
93.568	Low-Income Home Energy Assistance (LIHEAP)	222	\$2,161,752,400
93.667	Social Service Block Grants (SSBG)	61	\$1,715,200,000
93.959	Substance Abuse Prevention and Treatment (SAPT) Block Grant	61	\$1,686,776,984
93.659	Adoption Assistance	63	\$1,712,124,876
93.210	Tribal Self-Governance	100	\$911,303,639
93.569	Community Service Block Grant (CSBG)	133	\$627,117,686
93.914	HIV Emergency Relief Project Grants	51	\$587,445,170
93.994	Maternal and Child Health (MCH) Block Grants	59	\$585,604,359
93.958	Community Mental Health Services (CMHS) Block Grant	59	\$410,952,864
93.556	Promoting Safe and Stable Families	142	\$381,573,249
93.645	Child Welfare Services State Grants	238	\$288,982,060
93.991	Preventative Health and Health Services (PHHS) Block Grants	61	\$115,278,754
93.575	Child Care and Development Fund (CCDF)	11	\$6,913,898

APPENDIX B. HHS GRANT PROGRAMS

Rank	CFDA	Name	Number	Dollars
1	93.778	Medical Assistance Program (Medicaid)	186	\$160,357,769,906
2	93.558	Temporary Assistance for Needy Families (TANF)	109	\$17,309,563,377
3	93.600	Head Start	1,867	\$6,688,866,582
4	93.596	Child Care Mandatory and Matching Funds of the Child Care and Development Fund	337	\$4,736,471,572
5	93.658	Foster Care: Title IV-E	77	\$4,328,095,778
6	93.563	Child Support Enforcement (CSE)	93	\$2,880,550,562
7	93.568	Low-Income Home Energy Assistance (LIHEAP)	222	\$2,161,752,400
8	93.667	Social Services Block Grant (SSBG)	61	\$1,715,200,000
9	93.659	Adoption Assistance	63	\$1,712,124,876
10	93.283	Centers for Disease Control and Prevention Investigations and Technical Assistance	1,114	\$1,707,152,804
11	93.959	Block Grants for Prevention and Treatment of Substance Abuse	61	\$1,686,776,984
12	93.859	Pharmacology, Physiology, and Biological Chemistry Research	5,257	\$1,557,105,368
13	93.224	Community Health Centers	1,047	\$1,546,983,689
14	93.268	Immunization Grants	65	\$1,437,322,689
15	93.767	State Children's Insurance Program (SCHIP)	51	\$1,297,711,167
16	93.837	Heart and Vascular Diseases Research	2,869	\$1,188,201,171
17	93.853	Extramural Research Programs in the Neurosciences and Neurological Disorders	3,667	\$1,161,299,849
18	93.856	Microbiology and Infectious Diseases Research	3,354	\$1,121,396,077
19	93.045	Special Programs for the Aging Title III, Part C Nutrition Services	56	\$1,097,915,155
20	93.917	HIV Care Formula Grants	59	\$1,080,118,700
21	93.389	Research Infrastructure	1,068	\$1,032,071,240
22	93.210	Tribal Self-Governance Demonstration Program: Planning and Negotiation Cooperative Agreements and IHS Compacts	100	\$911,303,639

Rank	CFDA	Name	Number	Dollars
23	93.242	Mental Health Research Grants	2,572	\$902,966,622
24	93.866	Aging Research	1,980	\$761,259,708
25	93.865	Child Health and Human Development Extramural Research	2,277	\$722,207,144
26	93.279	Drug Abuse Research Programs	1,815	\$661,524,957
27	93.569	Community Services Block Grant (CSBG)	133	\$627,117,686
28	93.395	Cancer Treatment Research	1,487	\$598,457,776
29	93.393	Cancer Cause and Prevention Research	1,611	\$596,125,556
30	93.914	HIV Emergency Relief Project Grants	51	\$587,445,170
31	93.994	Maternal and Child Health Services Block Grant to the States	59	\$585,604,359
32	93.847	Diabetes, Endocrinology and Metabolism Research	1,804	\$554,439,189
33	93.396	Cancer Biology Research	1,658	\$542,927,622
34	93.855	Allergy, Immunology and Transplantation Research	1,455	\$500,599,507
35	93.838	Lung Diseases Research	1,177	\$484,054,093
36	93.889	Preparedness Program	153	\$476,178,043
37	93.867	Vision Research	1,500	\$4,730,390,763
38	93.243	Substance Abuse and Mental Health Services: Projects of Regional and National Significance	1,343	\$458,906,785
39	93.887	Project Grants for Renovation or Construction of Non-Acute Health Care Facilities and Other Facilities	1,110	\$422,435,960
40	93.958	Block Grants for Community Mental Health Services	59	\$410,952,864
41	93.846	Arthritis, Musculoskeletal and Skin Diseases Research	1,298	\$385,806,476
42	93.556	Promoting Safe and Stable Families	142	\$381,573,249
43	93.848	Digestive Diseases and Nutrition Research	1,269	\$359,647,700
44	93.397	Cancer Centers Support Grants	137	\$342,709,338
45	93.839	Blood Diseases and Resources Research	781	\$332,820,901
46	93.173	Research Related to Deafness and Communication Disorders	1,174	\$318,730,485
47	93.849	Kidney Diseases, Urology and Hematology Research	1,075	\$314,379,227
48	93.645	Child Welfare Services State Grants	238	\$288,982,060
49	93.286	Discovery and Applied Research-Human Health	793	\$269,288,398
50	93.217	Family Planning: Services	89	\$263,142,033

APPENDIX C. HHS STRATEGIC GOALS AND OBJECTIVES

HHS Strategic Goals and Objectives - FY 2004-2009

- GOAL 1: Reduce the major threats to the health and well-being of Americans**
- Objective 1.1 Reduce behavioral and other factors that contribute to the development of chronic diseases
 - Objective 1.2 Reduce the incidence of sexually transmitted diseases and unintended pregnancies
 - Objective 1.3 Increase immunization rates among adults and children
 - Objective 1.4 Reduce substance abuse
 - Objective 1.5 Reduce tobacco use, especially among youth
 - Objective 1.6 Reduce the incidence and consequences of injuries and violence
- GOAL 2: Enhance the ability of the Nation's health care system to effectively respond to bioterrorism and other public health challenges**
- Objective 2.1 Build the capacity of the health care system to respond to public health threats in a more timely and effective manner, especially bioterrorism threats
 - Objective 2.2 Improve the safety of food, drugs, biological products, and medical devices
- GOAL 3: Increase the percentage of the Nation's children and adults who have access to health care services, and expand consumer choices**
- Objective 3.1 Create new, affordable health insurance options
 - Objective 3.2 Strengthen and expand the health care safety net
 - Objective 3.3 Strengthen and improve Medicare
 - Objective 3.4 Eliminate racial and ethnic health disparities
 - Objective 3.5 Expand access to health care services for targeted populations with special health care needs
 - Objective 3.6 Increase access to health services for American Indians and Alaska Natives (AI/AN)
- GOAL 4: Enhance the capacity and productivity of the Nation's health science research enterprise**
- Objective 4.1 Advance the understanding of basic biomedical and behavioral science and how to prevent, diagnose, and treat disease and disability
 - Objective 4.2 Accelerate private sector development of new drugs, biologic therapies, and medical technology
 - Objective 4.3 Strengthen and diversify the pool of qualified health and behavioral science researchers
 - Objective 4.4 Improve the coordination, communication, and application of health research results
 - Objective 4.5 Strengthen the mechanisms for ensuring the protection of human subjects and the integrity of the research process

GOAL 5: Improve the quality of health care services

- Objective 5.1 Reduce medical errors
- Objective 5.2 Increase the appropriate use of effective health care services by medical providers
- Objective 5.3 Increase consumer and patient use of health care quality information
- Objective 5.4 Improve consumer and patient protections
- Objective 5.5 Accelerate the development and use of an electronic health information infrastructure

GOAL 6: Improve the economic and social well-being of individuals, families, and communities, especially those most in need

- Objective 6.1 Increase the proportion of low-income individuals and families, including those receiving welfare, who improve their economic condition
- Objective 6.2 Increase the proportion of older Americans who stay active and healthy
- Objective 6.3 Increase the independence and quality of life of persons with disabilities, including those with long-term care needs
- Objective 6.4 Improve the economic and social development of distressed communities
- Objective 6.5 Expand community and faith-based partnerships

GOAL 7: Improve the stability and healthy development of our Nation's children and youth

- Objective 7.1 Promote family formation and healthy marriages
- Objective 7.2 Improve the development and learning readiness of preschool children
- Objective 7.3 Increase the involvement and financial support of non-custodial parents in the lives of their children
- Objective 7.4 Increase the percentage of children and youth living in a permanent, safe environment

GOAL 8: Achieve excellence in management practices

- Objective 8.1 Create a unified HHS committed to functioning as one Department
- Objective 8.2 Improve the strategic management of human capital
- Objective 8.3 Enhance the efficiency and effectiveness of competitive sourcing
- Objective 8.4 Improve financial management
- Objective 8.5 Enhance the use of information technology in service delivery and record keeping
- Objective 8.6 Achieve integration of budget and performance information
- Objective 8.7 Reduce regulatory burden on providers and consumers of HHS services

APPENDIX D. HHS EXECUTIVE COMMITTEE ON GRANTS ADMINISTRATION POLICY MEMBERSHIP LIST

The HHS Executive Committee on Grants Administration Policy (ECGAP) is the Department's primary, executive-level, information-exchange forum on Grants Management. It is chaired by the Director, Office of Grants, OS/ASAM. ASAM oversees the functional business management, namely grants management, of HHS grant programs. ECGAP meetings cover government-wide, Departmental, and OPDIV-specific grants-related policies and initiatives affecting the management of grant programs. The ECGAP membership, listed below, consists of the Grants Management Executives from all HHS grant-making OPDIV and representatives from other related HHS offices. Alternate members are denoted by an asterisk (*).

ECGAP Interim Chairperson (ASAM/OG)	Andrea Brandon
ACF	Joel B. Anthony Deborah Kellaheer*
AoA	Steve Daniels
AHRQ	Mable Lam Michelle Burr*
ASPE	Cassandra L. Cisse Roy Brunson
CDC	William P. Nichols William Ryan*
CMS (Mandatory Grants)	John Hoover William Tate*
CMS (Discretionary Grants)	Rodney Benson Judith Norris*
FDA	Hugh Hurwitz Usha Ganti*
HRSA	Nancy McGinness Gail Lipton*
IHS	Michelle Bulls Denise Clark*
NIH	Joe Ellis Marcia Hahn*
OPHS	Eric West Karen Campbell*
PSC	Christie Goodman
SAMHSA	Christine Chen Kimberly Pendleton*
PSC/PMS Contacts	Philip Giza
ASBTF/OARCP	Jean Augustine Ann Russo*
PSC/DCA	Paul Nacon
ASL	Tiajuana Tripplet
OIG	Karen S. Young Carol Lessans Sharon Colby Michael Goforth*
OFBCI	Kimberly Konkel
OGC/General Law Division	Business/Administrative Law Division Jonathan Baker Elizabeth H. Saindon*
Office of Grants, OS/ASBTF	Diane Osterhus
Rotational Members June 1, 2005 to May 31, 2006	Tim Chappelle, ACF Cynthia Polit, FDA Shonda Kast, HRSA

	Sylvia Ryan, IHS Palm Fleming, NIH Victoria Connors, NIH Regina Richmond, PSC
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