

Federal Stimulus Funds								
(Dollars in Millions)								
Title	Description	Responsible Federal Department	Responsible State Department	Total Spending Package	California Estimated Share	California 2008-09 & Prior	California 2009-10	Distribution**
<b>HEALTH &amp; HUMAN SERVICES</b>				<b>\$ 178,326.5</b>	<b>\$ 15,382.3</b>	<b>\$ 5,256.7</b>	<b>\$ 5,434.3</b>	
<b>WIC Increase</b>	The USDA has received \$500 million for the WIC program, \$400 million is to go to the Secretary of Agriculture to be placed in the contingency reserve fund and used as deemed necessary. The remaining \$100 million is to go to states as a formula grant for implementing or upgrading management information systems.	USDA - Food and Nutrition Service	Department of Public Health	500.0	66.5	-	GNP	S
<b>Commodity Assistance Program</b>	Additional funding for the Emergency Food Assistance Program	USDA - Food and Nutrition Service	Department of Social Services	150.0	18.6	9.3	9.3	S
<b>Supplemental Nutrition Assistance Program</b>	Not later than 60 days after enactment, administrative funding for costs associated with increased Food Stamps caseloads will be increased for each of the FFYs 2009 and 2010. 75% of the amount for each year allocated will be based on each state's share of the national caseload for the most recent 12-month period for which data is available, adjusted for participation in disaster programs.	USDA - Food and Nutrition Service	Department of Social Services	295.0	22.1	10.8	11.3	S
<b>Increase in the Supplemental Nutrition Assistance Program (Food Stamps Program) Benefits</b>	Food Stamp benefit amounts would be increased by 13.6 percent through FFY 2010.	USDA - Food and Nutrition Service	Department of Social Services	20,000.0	840.0	140.0	560.0	S
<b>Food Distribution on Indian Reservations</b>		USDA	N/A	5.0	-	-	-	D
<b>Indian Health Services</b>		DHHS	N/A	85.0	-	-	-	D
<b>Indian Health Facilities</b>		DHHS	N/A	415.0	-	-	-	D
<b>Legal Immigrants</b>	Gives states the option to claim FFP for full scope coverage of legal immigrant children and pregnant women in both Medicaid and SCHIP by eliminating the requirement that they have resided in the United States for at least 5 years (the 5-year bar). California currently covers legal immigrants for full scope Medi-Cal and the Healthy Families Program as a state-only expense.	Center for Medicare and Medicaid Services	Managed Risk Medical Insurance Board	(32,800)	10.0	-	10.0	S

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Health Resources and Services	Grants to Health Centers	DHHS	N/A	500.0	GNP	-	-	D
Health Resources and Services	Grants for construction, renovation and equipment and for acquisition of health information technology systems	DHHS	N/A	1,500.0	GNP	-	-	D
Office of the Inspector General	Audits	OIG	N/A	6.0	-	-	-	F
Administration For Children and Families	Activities pursuant to section 11110 of the Social Security Act	DHHS/ACF	N/A	50.0	GNP	-	GNP	S, D
Meals on Wheels	would provide additional funding for elderly nutrition services, including the Nutrition Services Incentive Program (NSIP).	Administration on Aging	California Department of Aging	100.0	9.8	4.9	4.9	S
Community Services Block Grant	Funds would be directed to eligible community action agencies and expected to remain available until September 30, 2010. Under the stimulus package, at least 1% of a state's allocation shall be dedicated for activities relating to the identification and enrollment of eligible individuals and families in federal, state and local benefit programs. Nationally, \$1B would be provided in FFY 2009.	Administration for Children and Families	Department of Community Services and Development	1,000.0	90.0	90.0	-	S
Prevention and Wellness Fund	Provides \$1 billion in to states to provide additional funding for several health related prevention programs.	DHHS - Centers for Disease Control	Department of Public Health	1,000.0	100.0	GNP	GNP	S
Office of the Inspector General		OIG	N/A	17.0	-	-	-	F
State Grants - Independent Living Centers	Services provided to consumers pursuant to Parts B & C of the Rehabilitation Act are intended to help states comply with the Olmstead decision--requiring services for persons with disabilities to be delivered in a manner enabling people to live independently in their communities.	Rehabilitation Services Administration	Department of Rehabilitation	140.0	12.1	12.1	-	S,D
Social Security Administration Provision	Funding would be provided for normal disability case processing activities.	Social Security Administration	Social Services	1,000.0	GNP	GNP	GNP	U
Office of the Inspector General - Audits		Office of the Inspector Gen.	N/A	1.0	-	-	-	F

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<b>Healthy Homes and Lead Hazard Control</b>	Funds shall be awarded first to applicant jurisdictions which had applied under the Lead-Based Paint Hazard Control Grant Program Notice of Funding Availability for fiscal year 2008, and were found in the application review to be qualified for award, but were not awarded because of funding limitations. Remaining funds shall be added to the amount of funds to be awarded under the Lead Hazard Reduction Program Notices of Funding Availability for fiscal year 2009.	Department of Housing and Urban Development	Department of Community Services and Development / Department of Public Health	100.0	3.0	-	3.0	GNP
<b>Assistance for Vulnerable Individuals - Emergency Fund for TANF Program (TANF Contingency Fund)</b>	would provide additional funds for FFY 2009 and 2010 to states with 1) caseload increases, 2) increased expenditures for non-recurring short term benefits, and/or 3) increased expenditures for subsidized employment.	Administration for Children and Families	Department of Social Services	5,000.0	416.9	120.8	236.9	S
<b>Temporary Resumption of Prior Child Support Law (Child Support Incentives)</b>	Adds federal incentive funds for states to collect support owed to families and removes the prohibition on using incentive funds to match federal funds for two years.	Administration for Children and Families	Department of Child Support Services	1,000.0	54.4	20.4	27.7	S
<b>Economic Recovery Payments to Certain Individuals - Economic Recovery Payment to Recipients of Social Security, Supplemental Security Income, Railroad Retirement Benefits, and Veterans Disability Compensation or Pension Benefits (One-Time Emergency Payment)</b>	Provides a one-time emergency payment of \$250 to Supplemental Security Income (SSI) recipients (except those residing in Medicaid institutions), Social Security recipients, Railroad Retirement recipients, and veterans compensation or pension recipients. An estimated \$1.2B would be paid directly to Social Security beneficiaries, \$8M to Railroad Retirement recipients, \$262M to SSI recipients, and \$74M to recipients of veterans benefits in CA.	Social Security Administration	Department of Social Services / Various	14,200.0	1,510.0	1,510.0	-	D
<b>Premium Assistance For COBRA Benefits</b>	Provides for premium assistance for COBRA continuation coverage for individuals and their families by reducing premiums.	USDOL	Dept of Managed Health Care	24,700.0	GNP	-	-	D
<b>Medicare Incentives - Incentives for Eligible Professionals</b>		Center for Medicare and Medicaid Services	N/A	-	-	-	-	F

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<b>Medicaid Incentives - Medicaid Provider Hit Adoption and Operation Payments; Implementation Funding ("HITECH ACT" Health Information Technology for Economic and Clinical Health Act)</b>	Invests in health information technology (HIT) infrastructure and Medicare and Medicaid incentives to encourage providers to use HIT and electronic health information exchange.	DHHS	Dept of Health Care Services / OHI	19,000.0	1,900.0	-	-	S, D
<b>Miscellaneous Medicare Provisions - Moratoria on Certain Medicare Regulations/Long-Term Care Hospital Technical Corrections</b>		Center for Medicare and Medicaid Services	N/A	-	-	-	-	F
<b>Temporary Increase of Medicaid FMAP -</b>	The across-the-board increase in FMAP would be 6.2 percentage points. The reductions in state share for states with increases in unemployment rates would be 5.5%, 8.5%, and 11.5%. These percent reductions would be applied against the state share after the hold harmless reduction and after an across-the board increase of 3.1 percentage points. California would receive a 11.59 percent FMAP increase; 6.2% general increase + an increase for unemployment.	Center for Medicare and Medicaid Services	Dept of Health Care Services	87,000.0	10,112.0	3,259.9	4,469.9	S, D
<b>Temporary Increase in Medicaid FMAP for IV-E - This proposal would increase the FMAP by 6.2 percent for Adoption and Foster Care Assistance from Oct 1,2008 - Dec 31, 2010.</b>	This proposal would increase the FMAP by 6.2 percent for Adoption and Foster Care Assistance from Oct 1,2008 - Dec 31, 2010.	Center for Medicare and Medicaid Services	Department of Social Services	GNP	162.9	51.5	74.3	S,D
<b>Compliance with Prompt Payment Requirements for SNFs</b>	Temporarily extends federal mandate requirements for prompt payments to nursing facilities. Currently payments to nursing facilities can be part of payment holds/delays and are paid from the loan during 'no budget' periods.	Center for Medicare and Medicaid Services	Dept of Health Care Services	-	-	-	-	S

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<b>Temporary Increase in Disproportionate Share Hospital Allotments During Recession</b>	Private hospitals, upon certification of expenditures, may draw down additional federal funding (approx. \$27 million per year of eligibility) which will result in a General Fund increase. Current law requires an increase in state payments by the same amount of additional federal funds (based on methodology in the hospital financing waiver).	Center for Medicare and Medicaid Services	Dept of Health Care Services	GNP	54.0	27.0	27.0	S
<b>Extension of Transitional Medical Assistance (TMA)</b>	Extends program until 12/31/2010. States have options: to change the initial 6 months to 12 months and waive the requirement that beneficiaries have to have received Medicaid in at least 3 of the last 6 months period to qualify.	Center for Medicare and Medicaid Services	Dept of Health Care Services	GNP	GNP	GNP	GNP	GNP
<b>Extension of the Qualifying Individual (QI) Program</b>		Center for Medicare and Medicaid Services	N/A	562.5	-	-	-	D
<b>Protections for Indians Under Medicaid and CHIP (Tribal Technical Advisory Group) -</b>	requires the establishment of a Tribal Technical Advisory Group to obtain advice regarding Medicaid law and its effects on Indian Health Programs and Urban Indian Organizations. This provision would require California to seek a state plan amendment (SPA) to include this provision. The SPA would include the requirement to seek advice prior to any SPAs, waiver requests, and demonstration project proposals likely to impact Indians, Indian Health Programs or Urban Indian Organizations.	Center for Medicare and Medicaid Services	Dept of Health Care Services	-	-	-	-	GNP
<b>Protections for Indians Under Medicaid and CHIP -</b>	Adds new provisions which prohibits enrollment fees, premiums and cost sharing provisions such as deductibles and co-payments upon Indians who receive Medicaid covered services directly from Indian Health Services, an Indian Tribe, Tribal Organization, or Urban Indian Organization, or through referral under contract health services.	Center for Medicare and Medicaid Services	Dept of Health Care Services	-	-	-	-	GNP

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<b>Protections for Indians under Medicaid and CHIP (b) Treatment of Certain Property from Resources for Medicaid and CHIP Eligibility -</b>	exempts four specified classes of property from resources in determining Medicaid Eligibility Determinations under Medicaid and CHIP for Indians	Center for Medicare and Medicaid Services	Dept of Health Care Services	-	-	-	-	GNP
<b>Protections for Indians under Medicaid and CHIP (d) Rules Applicable under Medicaid and CHIP to Managed Care Entities with Respect to Indian Enrollees, Indian Health Care Providers and Indian Managed Care Entities (MCE)</b>	requires Indians enrolled in a non-Indian Medicaid MCE with an Indian provider participating as a primary care provider within the plan network be allowed to choose the Indian provider as the primary care provider when the Indian is otherwise eligible to receive services from the provider and the Indian provider has the capacity to provide the primary care services.	Center for Medicare and Medicaid Services	Dept of Health Care Services	-	-	-	-	GNP

\*\* S = Federal Stimulus Funds will pass through state funds  
 D = Federal Stimulus Funds will go directly to non state entities (e.g., counties,  
 GNP = Guidance has not been provided.  
 F = Funds allocated to federal departments or programs