

Health Resources and Services Administration (HRSA) Funding: Fact Sheet

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Agency Overview

The Health Resources and Services Administration (HRSA) within the Department of Health and Human Services (HHS) is the federal agency charged with improving the health safety net by providing access to health care for those who are uninsured, isolated, or medically vulnerable. The agency currently awards funding to more than 3,000 grantees, including community-based organizations; colleges and universities; hospitals; state, local, and tribal governments; and private entities to support health services projects, such as training health care workers or providing specific health services.¹

HRSA is organized into five bureaus: (1) Primary Care; (2) Health Workforce;² (3) Maternal and Child Health; (4) HIV/AIDS; and (5) Healthcare Systems. In addition to these bureaus, HRSA has 10 offices. Some offices focus on specific populations or health care issues (e.g., Office of Women's Health, Office of Rural Health Policy), while others provide agency-wide support or technical assistance to HRSA's regional offices (e.g., Office of Planning, Analysis and Evaluation; Office of Regional Operations). This fact sheet focuses on the agency's funding; a number of specific HRSA programs are described in more detail in other CRS reports.³

Funding Sources

HRSA has four major sources of funding, described here in order of magnitude: (1) discretionary appropriations, (2) mandatory funds directly appropriated from the Patient Protection and Affordable Care Act (ACA, P.L. 111-148, as amended) and extended in subsequent legislation, (3) Public Health Service (PHS) Program Evaluation Set-Aside funds,⁴ and (4) user fees. HRSA receives its discretionary appropriation through the Labor, Health and Human Services, and Education appropriations act.⁵ HRSA also began receiving mandatory appropriations from the ACA to support specific programs.⁶ For example, the ACA established the Community Health Center Fund (CHCF) to support health centers and the National Health Service Corps.⁷ HRSA programs also receive transfers from the ACA-created Prevention and Public Health Fund (PPHF).⁸ In addition to mandatory and discretionary funding, HRSA programs receive funds from the PHS Program Evaluation Set-Aside and collect user fees.

A number of ACA funding sources were set to expire in FY2015, but some were extended in the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA, P.L. 114-10).⁹ **Table 1** presents enacted funding

¹ See HRSA's website at http://www.hrsa.gov.

² The Bureau of Health Workforce was created in May 2014 by combining the Bureau of Health Professions, which administered most of HRSA's primary care training programs, and the Bureau of Clinician Recruitment and Service, which administered the NHSC, NURSE Corps, and the Faculty Loan Repayment Program.

³ See CRS Report R43930, Maternal and Infant Early Childhood Home Visiting (MIECHV) Program: Background and Funding; CRS Report R43911, The Community Health Center Fund: In Brief; CRS Report R43937, Federal Health Centers: An Overview; CRS Report R43177, Health Workforce Programs in Title VII of the Public Health Service Act; CRS Report R43920, National Health Service Corps: Changes in Funding and Impact on Recruitment; and CRS Report R42428, The Maternal and Child Health Services Block Grant: Background and Funding.

⁴ For more information, see CRS Report R43304, *Public Health Service Agencies: Overview and Funding (FY2010-FY2016)*.

⁵ For more information, see CRS Report R44287, Labor, Health and Human Services, and Education: FY2016 Appropriations and CRS Report R44378, Department of Health and Human Services: FY2017 Budget Request.

⁶ These programs are described in CRS Report R41278, *Public Health, Workforce, Quality, and Related Provisions in ACA: Summary and Timeline.*

⁷ CRS Report R43911, *The Community Health Center Fund: In Brief.*

⁸ See Appendix C of CRS Report R43304, Public Health Service Agencies: Overview and Funding (FY2010-FY2016).

⁹ CRS Report R43962, The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA; P.L. 114-10).

for HRSA in FY2011 through the amounts included in the FY2017 President's budget request (included amounts that are enacted for FY2016 and FY2016 under MACRA).

Bureau or Activity	2011	2012	2013	2014	2015	2016ª	FY2017 President's Budget Request ^a				
Primary Care	4,149	2,817	2,992	3,636	5,001	5,092	5,092				
Health Centers	, 2,481	2,672	, 2,856	3,545	4,901	4,992	4,992				
Discretionary (non-add)	(1,481)	(1,472)	(1,391)	(1,397)	(1,392)	(1,392)	(1,242)				
CHCF Transfer (non-add)	(1,000)	(1,200)	(1,465)	(2,145)	(3,509)	(3,600)	(3,600)				
New Mandatory Proposal (non-add)				((150)				
Health Center Tort Claims	100	95	89	95	100	100	100				
School Based Health Centers (ACA Sec. 4101(a))	50	50	47	—	_	—	_				
Health Center Construction (ACA Sec. 10503(c))	١,500	—	—	—	—	—	—				
Hansen's Disease Programs ^b	18	—	_		—	—	—				
Health Workforce	1,357	1,086	1,001	1,043	1,058	1,228	1,273				
National Health Service Corps (NHSC)	315	295	285	283	287	310	380				
Discretionary (non-add)	(25)	_	_	_	_	_	(20)				
CHCF Transfer (non-add)	(290)	(295)	(285)	(283)	(287)	(310)	(310)				
New Mandatory Proposal (non-add)	—	—	—	—	—	—	(50)				
Training for Diversity ^c	95	85	80	81	82	83	86				
Primary Care Training and Enhancement	39	39	37	37	39	39	39				
Interdisciplinary, Community- Based Linkages ^d	72	73	62	72	73	129	105				
PPHF Transfer (non-add)	—	(12)	(2)		—	—	—				
Public Health Workforce Development	30	33	8	18	21	21	17				
PPHF Transfer (non-add)	(20)	(25)	—		—	—	—				
Nursing Workforce Development ^e	242	231	218	224	232	229	229				
Children's Hospital GME Payments	268	265	251	264	265	295	295				
New Mandatory Proposal (non-add)	_	_	_	_	—	—	(295)				
Teaching Health Center GME Payments (ACA Sec. 5508(c))	230	_	—	_	—	60	60				
Other Health Workforce Programs ^f	41	35	34	37	39	41	41				
National Practitioner Data Bank (<i>User Fe</i> es)	24	28	27	27	19	21	21				
Maternal and Child Health	1,128	1,208	1,193	1,220	1,254	1,250	1,250				
Maternal and Child Health Block Grant	656	639	605	634	637	638	638				
Healthy Start	104	104	98	101	102	104	104				

Table I. Health Resources and Services Administration (HRSA)

(Millions of Dollars, by Fiscal Year)

							FY2017 President's Budget
Bureau or Activity	2011	2012	2013	2014	2015	2016 ª	Request ^a
Home Visiting (ACA Sec. 2951)	250	350	380	371	400	400	400
Family-to-Family Health Centers (ACA Sec. 5507) ^g	5	5	5	3	5	5	5
Other Maternal and Child Health Programs ^h	113	112	105	110	112	103	103
Ryan White HIV/AIDS	2,337	2,392	2,249	2,313	2,319	2,323	2,332
PHS Evaluation Fund (non-add)	(25)	(25)	(25)	(25)	_	_	(34)
Health Care Systems	87	101	95	103	103	103	119
Other Health Care Systems Programs ⁱ	82	96	91	75	76	76	76
Hansen's Disease Programs	_	18	17	17	17	17	17
340B Drug Pricing Programs/Office of Pharmacy Affairs	4	4	4	10	10	10	26
User Fees (non-add)							9
Rural Health	138	138	131	142	147	150	144
Other Activities	702	647	712	669	683	685	706
Family Planning	299	294	278	286	286	286	300
Program Management	162	160	151	153	154	154	157
Vaccine Injury Compensation Program Operations	6	6	6	6	8	8	9
Vaccine Injury Compensation Program Trust Fund	235	187	277	224	235	237	240
Total, Program Level	9,898	8,389	8,373	9,126	10,565	10,831	10,916
Less Funds From Other Sources							
PHS Evaluation Set-Aside	25	25	25	25	—	_	34
User Fees	24	28	27	27	19	19	30
Trust Fund (Mandatory)	235	241	241	235	235	237	240
ACA Mandatory Funds: PPHF Transfers	20	37	2	—		—	_
ACA Mandatory Funds: CHCF Transfers	1,290	1,495	1,750	2,428	3,796	3,910	3,910
ACA Mandatory Funds: Other	2,035	405	432	374	405	465	465
Proposed New Mandatory Funds							495
Total, Discretionary Budget Authority	6,269	6,212	5,861	6,046	6,112	6,197	5,743

Sources: The funding amounts are from congressional budget justification documents and HHS's *Budget in Brief*, available at http://www.hhs.gov/budget/.

Note: Individual amounts may not add to subtotals or totals due to rounding.

- a. Shows funds appropriated in Medicare Access and CHIP Reauthorization Act of 2015 (P.L. 114-10).
- b. Beginning in FY2012, the Hansen's Disease Programs appears under Health Care Systems.
- c. Training for Diversity includes Centers for Excellence, Scholarships for Disadvantaged Students, Faculty Loan Repayment, and the Health Careers Opportunity Program.
- d. Interdisciplinary, Community-Based Linkages include Area Health Education Centers, Geriatric Programs, and Mental and Behavioral Health Education and Training. FY2015 and FY2016 amounts reflect the Behavioral Health Workforce Education and Training Program (a component of the Mental and Behavioral Health Education and Training). These funds were appropriated to the Substance Abuse and Mental Health Services Administration, for a program that was

administered by HRSA The FY2017 request proposes that this program be transferred to HRSA .In FY2017, the President's budget does not request funding for the Area Health Education Center program.

- e. Nursing Workforce Development include NURSE Corps; Advanced Nursing Education; Nursing Workforce Diversity; Nurse Education, Practice, Quality and Retention; Nurse Faculty Loan Program; and Comprehensive Geriatric Education.
- f. Other Health Workforce Programs include Health Care Workforce Assessment, Patient Navigator (FY2011 only), and Oral Health Training.
- g. P.L. 113-93 provided \$2.5 million for this program for FY2015, which was repealed when P.L. 114-10 provided a full year of funding (\$5 million) for this program for FY2015.
- h. Other Maternal and Child Health Programs include Autism and Other Developmental Disorders, Traumatic Brain Injury, Sickle Cell Services Demonstration, Universal Newborn Hearing Screening, Emergency Medical Services for Children, and Heritable Disorders. In FY2016, the Traumatic Brain Injury program was transferred to the Administration for Community Living, and, therefore was not funded under HRSA.
- i. Health Care Systems Programs include Organ Transplantation, National Cord Blood Inventory, C.W. Bill Young Cell Transplantation Program, and Poison Control Centers.

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