

Policy At A Glance:

Further Additional Continuing Appropriations and Other Extensions Act, 2024 (H.R. 2872)

On January 19, 2024, President Biden signed into law the Further Additional Continuing Appropriations and Other Extensions Act, 2024 (HR 2872) to keep the government funded until March. This brief highlights some of the programs that received continued funding as a result.

Introduction

On January 19, 2024, President Biden signed into law the Further Additional Continuing Appropriations and Other Extensions Act, 2024 (H.R. 2872), a short-term government spending bill, to further extend funding for federal agencies and programs until March to avert a potential partial government shutdown.^{1,2} This latest continuing resolution (CR) provides federal agencies with continued funding for programs and projects covered in four of the 12 annual appropriation bills through March 1, 2024. The CR also provides funding for the remaining eight appropriation bills through March 8, 2024.²

A CR is a provisional budget measure that enables the federal government to operate in the absence of approved final appropriations by Congress and the President. Without the final appropriations or a CR, there is a risk of funding gap that can lead to a government shutdown. A CR provides more time for negotiations by Congress and the President until an agreement is reached on spending levels and appropriations.³

This brief provides an overview of some of the grants that promote provision of healthcare to the underserved, the Special Diabetes Program, and other health related programs whose funding is affected by H.R. 2872.

Relevant Dates for H.R. 2872¹

- 4/26/2023** Introduced in the United States House of Representatives
- 9/20/2023** Passed in the United States House of Representatives
- 1/18/2024** Passed in the United States Senate and the difference resolved in the House of Representatives
- 1/19/2024** Signed by President Biden and became law (P.L. 118-35)

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Grants to Promote Healthcare Provision to the Underserved

H.R. 2872 extends funding for the Teaching Health Center Graduate Medical Education Program, the Community Health Center Fund, and the National Health Services Corp through March 8, 2024.¹

The Teaching Health Center Graduate Medical Education (THCGME) Program

The THCGME Program helps communities grow their healthcare workforce by training physicians and dentists in community-based settings with an emphasis on rural and underserved communities. The program aims to improve health outcomes for members of underserved communities and expand healthcare access in underserved and rural areas.⁴

The Community Health Center Fund

Community health centers provide medical, dental, and behavioral healthcare to more than 30 million patients, regardless of their ability to

pay.⁵ The Community Health Center Fund provides billions in grants annually to support community healthcare facilities that serve medically underserved populations.⁶ Centers rely on the Fund to cover the cost of uncompensated care and to increase the services offered.⁵

The National Health Services Corp (NHSC)

The NHSC connects primary healthcare clinicians to populations across the United States with limited access to healthcare through scholarships and student loan repayment awards to over 18,000 healthcare providers who agree to work in areas with healthcare provider shortages.⁶ NHSC participants serve at more than 8,400 community healthcare sites and provide care to patients regardless of their ability to pay for services.⁷

Special Diabetes Program

In 1997, the U.S. Congressional Diabetes Research Working Group reported that a lack of funding prevented the progress of research and treatment for type 1 diabetes. Therefore, the Special Statutory Funding Program for Type 1 Diabetes Research, or the Special Diabetes Program (SDP), was established.⁸ The SDP is a funding program that provides approximately \$150 million annually for research on the prevention and cure of type 1 diabetes that began in fiscal year 1998.⁹ The funding is voted on by the members of Congress and is distributed to various diabetes-focused research programs and clinical trials. H.R. 2872 extends funding for the SPD through March 8, 2024.¹



Other Health-Related Programs Funded by H.R. 2872

Medicare and Medicaid

Medicaid Disproportionate Share Hospital (DSH)

Federal law mandates that state Medicaid programs make Disproportionate Share Hospital (DSH) payments to eligible hospitals that serve a significant population of Medicaid and uninsured individuals.¹⁰ The Affordable Care Act (ACA) reduced DSH payments starting in 2014, but Congress has enacted several legislation since 2010 that delayed the ACA's Medicaid DSH reduction schedule.¹¹ H.R. 2872 delays reductions to Medicaid DSH allotments until March 9, 2024.¹

Medicaid and Medicare Improvement Fund

The Medicaid Improvement Fund and the Medicare Improvement Fund were established in 2008 and were originally intended for contract oversight, program management enhancements, and evaluation of demonstration projects. However, the funding scope has expanded over time and the amount of funding has varied over the years.¹² H.R. 2872 reduces the amount of funding available to both the Medicaid Improvement Fund and Medicare Improvement Fund for activities relating to mechanized claims systems beginning in FY 2028.¹

Child Welfare Services

Stephanie Tubbs Jones Child Welfare Service Program

The Stephanie Tubbs Jones Child Welfare Service Program provides grants to states and Indian tribes for programs aimed at keeping families

together. The program includes preventive interventions that minimize the possibility of removing children from their homes. Services are offered to children and their families regardless of income.¹³

Promoting Safe and Stable Families Program

The Promoting Safe and Stable Families (PSSF) Program is a federal program designed to prevent child maltreatment, support the secure stay of children within their families, and ensure permanency for children placed in foster care. Furthermore, the program supports adoptive families by providing support services as necessary to ensure parents can make a lifetime commitment to their children.¹⁴

Sexual Health Education

Sexual Risk Avoidance Education Program

The Sexual Risk Avoidance Education (SRAE) Program supports projects that implement sexual risk avoidance education that teaches participants how to voluntarily refrain from non-marital sexual activities.^{1,15} SRAE projects empower youth to develop individual protective factors that reduce risks and provide tools and resources to prevent pregnancy and sexually transmitted infections and diseases.¹⁵

Personal Responsibility Education Program

The Personal Responsibility Education Program (PREP) provides grants to states to educate youth aged 10-19 about abstinence and contraception for prevention of pregnancy and sexually transmitted infections.^{4,5} Additionally, the program supports pregnant and parenting youth.¹⁶

Conclusion

The signing of the Further Additional Continuing Appropriations and Other Extensions Act, 2024 (H.R. 2872) crucially averted another potential government shutdown before the January 19, 2024 deadline set by H.R. 6363, the previous continuing resolution (CR) signed in November 2023. This new CR temporarily secures funding for federal agencies through either March 1 or March 8, 2024 (or beyond, for some exceptions), for projects covered by the 12 appropriation bills. As the negotiations continue for the 12 appropriation bills, this stopgap spending bill provides key funding for community programs that rely on federal funding for support. Should Congress pass another short-term spending bill in March, it would be the fourth for FY 2024, reflecting ongoing partisan disagreements.¹⁷

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Did you know?

According to the Health Resources and Services Administration, 65% of rural areas had a shortage of primary care physicians in 2023 and more than 15% of Americans live in rural areas.¹⁸



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