



Health Resources and Services Administration
United States-Mexico Border Region
Fiscal Year 2016 Investment Report

SECOND ANNUAL REPORT

U.S. Department of Health and Human Services
Health Resources and Services Administration





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BACKGROUND

The United States (U.S.) -Mexico border region is defined as a unique area located in the U.S. and Mexico within 100 kilometers (approximately 62.5 miles) on each side of the border between the U.S. and Mexico. The region spans almost 2,000 miles across four border states in the U.S. (California, Arizona, New Mexico and Texas) and six border states in Mexico (Baja California, Sonora, Chihuahua, Coahuila, Nuevo León, and Tamaulipas). The region is a priority for the Health Resources and Services Administration (HRSA), based on HRSA's mission and goals and the large vulnerable population residing within the four U.S. border states in the region with increasing health disparities and overall poor health status.

HRSA works in collaboration with the Department of Health and Human Services, Office of Global Affairs to support activities in the four U.S. border states through a cooperative agreement with the U.S.-Mexico Border Health Commission. The mission of the U.S.-Mexico Border Health Commission is to provide international leadership to optimize health and quality of life along the U.S.-Mexico border.

HRSA is escalating its efforts to foster a more integrated and collaborative approach to making innovative adjustments to existing programs and the development of new programs in the U.S.-Mexico Border region. This effort is aimed at gaining efficiencies, decreasing duplication, and strengthening health systems capacity.

HRSA INVESTMENTS ALONG THE BORDER

The goal of this report is to identify entities that HRSA funded to directly perform activities or to fund sub-recipients for activities that support programs for the population of the U.S.-Mexico Border region in FY 2016. Some of the funds were provided to state or regional grantees whose impact includes populations in the border region. HRSA invested approximately \$439 million in the four U.S. border states through its Bureaus and Offices (B/O) to improve the health and achieve health equity through access to quality services, a skilled health workforce, and innovative programs. Specifically, HRSA funded 51 programs, 199 grantees, and 100 loans and scholarships in the region. Below are highlights of the FY 2016 HRSA B/O investments.

Bureau of Health Workforce

- The Bureau of Health Workforce (BHW) invested approximately \$31 million in all four U.S. border states to improve the health of underserved and vulnerable populations by strengthening the health workforce and connecting skilled professionals to communities in need. This funding was provided through 21 programs with 41 awards and 100 loan and scholarship recipients. Programs include:



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- The Advanced Nursing Education (ANE) Program supports advanced nursing education programs for registered nurses preparing to become nurse practitioners, nurse midwives, nurse anesthetists, nurse administrators, and other specialties requiring advanced education.
 - BHW funded one grantee in the U.S.-Mexico border region, located in California.
- The Area Health Education Centers (AHEC) support schools of medicine or nursing to develop and enhance education and training networks within communities, academic institutions, and community-based organizations. In turn, these networks develop and maintain a diverse health care workforce, broaden the distribution of the health workforce, enhance health care quality, and improve health care delivery to rural and underserved areas and populations.
 - BHW funded four grantees: one in the Arizona U.S.-Mexico border region and three that serve the U.S.-Mexico border region: one in California, one in New Mexico, and one in Texas.
- The Behavioral Health Workforce Education and Training (BHWET) Program supports professional and paraprofessional training organizations to develop and expand the behavioral health workforce serving populations across the lifespan, including in rural and medically underserved areas. The program places special emphasis on establishing or expanding internships or field placement programs in behavioral health that include interdisciplinary training for students/interns, faculty, and field supervisors to provide quality behavioral health services to communities in need.
 - BHW funded one grantee in the U.S.-Mexico border region, located in Texas.
- The Centers of Excellence (COE) supports health professions schools and other public and nonprofit health or educational entities to serve as innovative resource and education centers for the recruitment, training and retention of underrepresented minority (URM) students and faculty.
 - BHW funded one grantee in the U.S.-Mexico border region, located in Arizona.
- Children's Hospitals Graduate Medical Education (CHGME) Payment Program supports graduate medical education in freestanding children's teaching hospitals. CHGME helps eligible hospitals maintain GME programs to provide graduate training for physicians to provide quality care to children and enhance their ability to care for low-income patients. It supports the training of residents to care for the pediatric population and enhances the supply of primary care and pediatric medical and surgical subspecialties.
 - BHW funded two grantees in the U.S.-Mexico border region: one in California and one in Texas
- Faculty Development in General, Pediatric, and Public Health Dentistry and Dental Hygiene Program funds the planning, development, and operation of programs for the



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training of oral health care providers who plan to teach in general, pediatric, and public health dentistry or dental hygiene. The program provides financial assistance through traineeships and fellowships to dentists who plan to teach or are teaching in general, pediatric, or public health dentistry.

- BHW funded one grantee in the U.S.-Mexico border region, located in California.
- The Geriatric Workforce Enhancement Program supports health professions schools and health care facilities to improve health care for older people by fostering clinical training environments that integrate geriatrics and primary care delivery systems and by maximizing patient and family engagement in health care decisions. The program provides training across the provider continuum (students, faculty, providers, direct service workers, patients, families, and lay and family caregivers) focusing on training in interprofessional and team-based care and on academic-community partnerships to address gaps in health care for older adults.
 - BHW funded three grantees in the U.S.-Mexico border region: one in Arizona and two in California.
- The Graduate Psychology Education (GPE) Program supports schools in increasing the number and distribution of adequately trained behavioral health professionals in integrated care settings, particularly within underserved and/or rural communities by providing practice-based training experience (including stipends) for psychology students.
 - BHW funded one grantee in the U.S.-Mexico border region, located in New Mexico.
- The Grants to States to Support Oral Health Workforce Activities Program supports states in developing and implementing innovative programs that address oral health workforce needs in Dental Health Professional Shortage Areas (D-HPSAs).
 - BHW funded three grantees that serve the U.S.-Mexico border region: one in Arizona, one in California, and one in Texas.
- The Health Professions Student Loan (HPSL) Program makes funds available to eligible accredited U.S. health professions schools, which match at least one ninth of the funding, and uses the funds to establish revolving funds that support long-term, low-interest loans for eligible students with financial need.
 - BHW funded one grantee in the U.S.-Mexico border region, located in California.
- Loans for Disadvantaged Students (LDS) Program makes funds available to eligible accredited U.S. health professions schools to provides long-term, low-interest rate loans to full-time, financially needy students from disadvantaged backgrounds, to pursue a degree in allopathic medicine, osteopathic medicine, dentistry, optometry, podiatric medicine, pharmacy, or veterinary medicine.



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- BHW funded one grantee in the U.S.-Mexico border region, located in California.
- The National Health Service Corps (NHSC) builds healthy communities by supporting qualified health care providers dedicated to working in areas of the United States with limited access to care. The NHSC seeks clinicians who demonstrate a commitment to serve at NHSC-approved sites located in Health Professional Shortage Areas (HPSAs). Programs include the: (1) the NHSC Scholarship Program, (2) the NHSC Loan Repayment Program, and (3) the Students to Service (S2S) Loan Repayment Program.
 - BHW funded 91 recipients in the United States-Mexico border region: 24 in Arizona, 20 in California, 15 in New Mexico, and 32 in Texas.
- The Nurse Anesthetist Traineeships (NATs) Program funds nursing schools to provide traineeships to increase the number of nurse anesthetists for underserved populations.
 - BHW funded two grantees in the United States-Mexico border region: one in Arizona and one in California.
- The NURSE Corps helps to build healthier communities in urban, rural and frontier areas by supporting nurses and nursing students committed to working in communities with a critical shortage of nurses. Programs include: (1) the NURSE Corps Loan Repayment Program and (2) the NURSE Corps Scholarship Program.
 - BHW funded nine recipients in the U.S.-Mexico border region: three in California, three in New Mexico, and three in Texas.
- The Nurse Education, Practice, Quality and Retention (NEPQR) Program addresses national nursing needs and strengthens the capacity for basic nurse education and practice under three priority areas: Education, Practice and Retention. The programs support academic, service and continuing education projects to enhance nursing education, improve the quality of patient care, increase nurse retention, and strengthen the nursing workforce. Programs include: (1) the Veterans Bachelor of Science in Nursing Program and (2) the Interprofessional Collaborative Practice (IPCP) Program.
 - BHW funded five grantees in the U.S.-Mexico border region: four in California and one in Texas.
- The Nurse Faculty Loan Program (NFLP) funds schools of nursing to increase the number of qualified nurse faculty by providing student loans to graduate-level nursing students who are interested to serve as faculty. Upon graduation, student borrowers are eligible to receive partial loan cancellation (up to 85 percent of the loan principal and interest over four years) in exchange for serving as full-time faculty at an accredited school of nursing.
 - BHW funded three grantees in the U.S.-Mexico border region: two in California and one in Arizona.



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- The Preventive Medicine Residency (PMR) Program funds residency programs to support residents in medical training in preventive medicine, including stipends for residents to defray the costs associated with living expenses, tuition, and fees.
 - BHW funded one grantee in the U.S.-Mexico border region, located in New Mexico.
- Public Health Training Centers (PHTC) Program supports schools of public health and others to strengthen the public health workforce through the provision of education, training and consultation to state, local, and tribal health departments to improve the capacity and quality of a broad range of public health personnel to carry out core public health functions by providing education, training and consultation to these public health personnel.
 - BHW funded one grantee in the U.S.-Mexico border region, located in Arizona.
- The Scholarships for Disadvantaged Students (SDS) Program increases diversity in the health professions and nursing workforce by providing grants to eligible health professions and nursing schools for use in awarding scholarships to students from disadvantaged backgrounds who have financial need, many of whom are underrepresented minorities.
 - BHW funded four grantees in the U.S.-Mexico border region: one in New Mexico, and three in Texas.
- The State Primary Care Offices Program supports states to improve primary care service delivery and workforce availability in the state or territory to meet the needs of underserved populations.
 - BHW funded four state grantees that disbursed or used a portion of their funds for activities in the U.S.-Mexico border region: one each in Arizona, California, New Mexico and Texas.
- Teaching Health Center Graduate Medical Education (THCGME) Program supports new and expanded primary care medical and dental residency programs in community-based ambulatory patient care settings.
 - BHW funded two grantees in the U.S.-Mexico border region: one in New Mexico and one in California.

Bureau of Primary Health Care

- The Bureau of Primary Health Care (BPHC) invested over \$200 million in all four U.S. border states through the Health Center Program which provides comprehensive, culturally competent, high-quality primary health care services to the nation's most vulnerable individuals and families, including people experiencing homelessness, agricultural workers, residents of public housing, and the nation's veterans.



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- BPHC funded 47 grantees in the U.S.-Mexico border region: nine in Arizona, 21 in California, four in New Mexico, and 13 in Texas.

Federal Office of Rural Health Policy

- The Federal Office of Rural Health Policy (FORHP) invested approximately \$7 million in all four U.S. border states. FORHP administers grant programs designed to build health care capacity at both the local and state levels. Rural Hospital Flexibility state-based grants provide funds to improve quality for critical access hospitals and the State Offices of Rural Health (SORH) state-based grants coordinate rural health initiatives statewide. At the local level, FORHP community-based programs encourage an evidence-based approach to population health that can be replicated from one community to the next, and the development of collaborative networks among rural health care providers to achieve project goals. The grants support a variety of projects each year, including quality improvement initiatives for small health care providers, coordination of resources and expertise across geographic regions, and support to prevent and treat opioid overdoses. FORHP programs also provide resources promoting the use of telehealth technologies for health care delivery, education and health information services. The funding was provided through 10 rural health programs with 23 grantees. Programs include:
 - The Rural Health Care Services Outreach Program provides support to promote rural health care services outreach projects utilizing evidence-based or promising practice models in order to address community-specific health concerns.
 - FORHP funded two grantees in the U.S.-Mexico border region, both in Arizona.
 - The Rural Health Network Development Program (RHNDP) provides funding and resources to mature rural health networks that have combined the functions of its members to increase access and quality of healthcare in rural areas.
 - FORHP funded three grantees, two in the U.S.-Mexico border region: one in Arizona and one in New Mexico and one that serves the U.S.-Mexico border region in Arizona.
 - The Rural Health Network Development Planning Program provides support to rural communities for the implementation of activities needed to plan and develop formal and integrated health care networks such as, but not limited to, business plan development, community needs assessment, network organizational assessment, strengths, weaknesses, opportunities, and threats analysis, and health information technology readiness assessment.
 - The FORHP funded one grantee in the U.S.-Mexico border region, located in Arizona.



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- The Rural Outreach Benefits Counseling Program provides education, outreach, and enrollment services in rural areas to improve health and wellbeing through increased access to, and utilization of health services.
 - The FORHP funded one grantee in the U.S.-Mexico border region, located in Arizona.
- The Telehealth Network Grant Program is used to: (a) expand access to, coordinate, and improve the quality of health care services: (b) improve and expand the training of health care providers: and/or (c) expand and improve the quality of health information available to health care providers, and patients and their families, for decision-making.
 - The FORHP funded one grantee in the U.S.-Mexico border region, located in New Mexico.
- Small Health Care Provider Quality Improvement Program provides support to rural primary care providers for the planning and implementation of quality improvement activities focused on improving patient care and chronic disease outcomes using evidence-based quality improvement models that expand access to, coordinate, contain the cost of, and improve the quality of essential health care services.
 - The FORHP funded one grantee in the U.S.-Mexico border region, located in California.
- Regional Telehealth Resource Centers provide training and support, disseminate information and research findings, promote effective collaboration, and foster the use of telehealth technologies to provide health care information and education for health care providers who serve rural and medically underserved areas and populations.
 - The FORHP funded two grantees that disbursed or used a portion of their funds for activities in the U.S.-Mexico border region: one in Arizona and one in Texas.
- The State Offices of Rural Health (SORH) Program enhances the rural health infrastructure by linking state and Federal resources to rural communities in an effort to develop long-term solutions to rural health problems. It creates a focal point for rural health issues within each state, which shares the core functions of: (a) Collection and Dissemination of Information, (b) Coordination of Rural Health Activities, and (c) Provision of Technical Assistance.
 - The FORHP funded four state grantees that disbursed or used a portion of their funds for activities in the U.S.-Mexico border region: one each in Arizona, California, New Mexico and Texas.
- The Medicare Rural Hospital Flexibility Program provides funding to enable states to assist Critical Access Hospitals (CAHs) in maintaining economic viability and clinical quality through training and technical assistance to impact (a) Quality Improvement, (b) Financial & Operational Improvement, (c) Population Health Management & Emergency



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Management System Integration, (d) Designation of CAHs in the State, and (e) Integration of Innovative Healthcare Models

- The FORHP funded four state grantees that disbursed or used a portion of their funds for activities in the U.S.-Mexico border region: one each in Arizona, California, New Mexico and Texas.
- The Small Rural Hospital Improvement Program provides funds for rural hospitals with 49 beds or fewer for investments in hardware, software and related training efforts. This acts as a catalyst to assist in the adaptation to changing payment systems and movement towards value, including: (a) Value Based Purchasing, (b) Shared Savings, (c) Payment Bundling, and (d) Implementation of Prospective Payment Systems.
 - The FORHP funded four state grantees that disbursed or used a portion of their funds for activities in the U.S.-Mexico border region: one each in Arizona, California, New Mexico and Texas.

Healthcare Systems Bureau

- The Healthcare Systems Bureau (HSB) invested approximately \$2.6 million in all four U.S. border states through the Poison Control Program. This program supports the nation's poison control centers and the services they provide. It maintains a single, national toll free phone number, known as the Poison Help Line that allows the public to access poison center services, supports the poison center infrastructure, and implements and evaluates a campaign to increase awareness of the poison centers.
 - HSB funded three state grantees that disbursed or used a portion of their funds for activities in the U.S.-Mexico border region: one each in Arizona, California, and New Mexico.
 - HSB funded two regional grantees that disbursed or used a portion of their funds for activities in the U.S.-Mexico border region: two grantees in Texas.

HIV/AIDS Bureau

- The HIV/AIDS Bureau (HAB) invested approximately \$49 million in all four U.S. border states through the Ryan White HIV/AIDS Program. The Ryan White HIV/AIDS Program provides a comprehensive system of HIV care and treatment services for low-income uninsured and underserved people living with HIV. The majority of Ryan White HIV/AIDS Program funds support primary medical care. A smaller but equally critical portion of funds is used to fund technical assistance, clinical training, and the development of innovative models of care. The Ryan White HIV/AIDS Program serves as an important source of ongoing access to HIV medication that can enable people living with HIV to live close to normal lifespans. HAB funded 49 recipients in the U.S.-Mexico border region: six in Arizona, 18 in California, five in New Mexico, and 20 in Texas. Programs include:



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- The RWHAP Part A Program provides direct financial assistance to an eligible metropolitan area (EMA) or a transitional grant area (TGA) that has been severely affected by the HIV epidemic. Grant funds assist eligible jurisdictions to develop or enhance access to a comprehensive continuum of high quality, community-based care for people living with HIV and those affected by HIV who are low-income through the provision of formula, supplemental, and Minority AIDS Initiative (MAI) funds.
 - HAB funded one EMA recipient that disbursed or used a portion of their award to fund subrecipients located in the U.S.-Mexico border region, located in California.

- The RWHAP Part B Program provides grants to States and U.S. Territories to improve the quality, availability, and organization of HIV health care and support services. Part B grants include a base grant for core medical and support services: the AIDS Drug Assistance Program (ADAP) award; ADAP Supplemental award; the Part B Supplemental award for recipients with demonstrated need; Minority AIDS Initiative funding for education and outreach to improve minority access to medication assistance programs, including ADAP; and supplemental grants to States with "emerging communities," defined as jurisdictions reporting between 500 and 999 cumulative AIDS cases over the most recent 5 years.
 - HAB funded three State Part B Programs that distributed or used a portion of their award to fund 13 subrecipients in the U.S.-Mexico border region: two in Arizona, six in California, and five in Texas.

- The RWHAP Part C Program provides comprehensive primary health care and support services in an outpatient setting for low income, uninsured, and underserved people living with HIV. Applicants must propose to provide: (1) counseling for individuals with respect to HIV, (2) targeted HIV testing, (3) medical evaluation, clinical, and diagnostic services, (4) therapeutic measures for preventing and treating the deterioration of the immune system, and for preventing and treating conditions arising from HIV, and (5) referrals to appropriate providers of health care and support services.
 - HAB funded eight recipients in the U.S.-Mexico border region: two in Arizona, four in California, and two in Texas.

- The RWHAP Part D Program provides grant funding to support coordinated and comprehensive health care services in an outpatient or ambulatory care setting for low income, uninsured, underinsured, and medically underserved WICY living with HIV.
 - HAB funded three recipients in the U.S.-Mexico border region: one in California and two in Texas.

- The Part F Program supports several research, technical assistance, and access-to-care programs, which include: (1) The Special Projects of National Significance (SPNS) Program supports the demonstration and evaluation of innovative models of care delivery for hard-to-reach populations, (2) The AIDS Education and Training Centers



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Program supports the education and training of health care providers treating people living with HIV through a network of eight regional centers and three national centers, (3) The Dental Programs provide additional funding to increase access to oral healthcare for people living with HIV and provide dental education and training through the Dental Reimbursement Program and the Community-Based Dental Partnership Program, and (4) The Minority AIDS Initiative provides funding to evaluate and address the impact of HIV on disproportionately affected minority populations.

- HAB funded three SPNS recipients in the U.S.-Mexico border region: all three in California.
- HAB funded two regional AETCs, where a portion of the AETC awards fund 21 activities in the U.S.-Mexico border region: two in Arizona, three in California, five in New Mexico, and eleven in Texas.

Maternal and Child Health Bureau

- The Maternal and Child Health Bureau invested near \$149 million in all four U.S. border states to improve the health of America's mothers, children, and families. This funding was provided through 13 programs with 34 grantees. Programs include:
 - The Maternal and Child Health Block Grant Program provides mothers and children (in particular those with low income or with limited availability of health services) access to quality maternal and child health services.
 - MCHB funded four state grantees that disbursed or used a portion of their funds for activities in the U.S.-Mexico border region: one each in Arizona, California, New Mexico and Texas.
 - The Healthy Start Program aims to reduce disparities in infant mortality and adverse perinatal outcomes by the following five approaches: 1) improving women's health, 2) promoting quality services, 3) strengthening family resilience, 4) achieving collective impact, and 5) increasing accountability through quality improvement, performance monitoring, and evaluation, in the U.S.-Mexico border region.
 - MCHB funded five grantees in the U.S.-Mexico border region: one each in Arizona, California, and Texas and two in New Mexico.
 - The Pediatric Pulmonary Centers support interdisciplinary training of health professionals that incorporates family-centered care, a public health approach, diversity, and cultural and linguistic competence to address health disparities related to chronic respiratory conditions to improve the health status of infants, children, and youth with chronic respiratory conditions.
 - MCHB funded one regional grantee that disbursed or used a portion of their funds for activities in the U.S.-Mexico border region, located in Arizona.



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- Leadership Education in Neurodevelopmental and Related Disabilities (LEND) programs provide interdisciplinary training to enhance the clinical expertise and leadership skills of professionals dedicated to caring for children with neurodevelopmental and other related disabilities, including autism.
 - MCHB funded one grantee in the U.S.-Mexico border region, located in Arizona.
- The Developmental-Behavioral Pediatrics Training Program supports fellows in developmental-behavioral pediatrics preparing for leadership roles as teachers, investigators, and clinicians advancing the field of developmental/behavioral pediatrics: and provides pediatric practitioners, residents, and medical students with essential biopsychosocial knowledge and clinical expertise.
 - MCHB funded one grantee in the United States-Mexico border region, located in California.
- The EMSC State Partnership Program provides grants to 58 states and jurisdictions to improve the delivery and quality of pediatric emergency care within the larger Emergency Medical Services (EMS) System by ensuring the unique needs of children are integrated and well-coordinated in state emergency medical services systems:
 - MCHB funded four state grantees that have used a portion of their funds for activities in the U.S.-Mexico border region: one each in Arizona, California, New Mexico and Texas.
- The EMSC State Partnership Regionalization of Care (SPROC) Program improves access to specialized emergency healthcare services to children in tribal and rural communities. SPROC projects are establishing policies and procedures that would develop and institute an organized, preplanned, pre-event process to locally manage or immediately transport injured or critically ill children that live in geographically disadvantaged regions: and integrating telemedicine services and systems to reduce transport and increase timely access to pediatric specialists.
 - MCHB funded two regional grantees that have used a portion of their funds for activities in the U.S.-Mexico border region: one each in California and New Mexico.
- The Sickle Cell Disease Treatment Demonstration Regional Collaborative Program funds entities to improve health outcomes in individuals with sickle cell disease, reduce morbidity and mortality caused by sickle cell disease, reduce the number of individuals with sickle cell receiving care only in emergency departments, and improve the quality of coordinated and comprehensive services to individuals with sickle cell and their families. In 2014, MCHB changed the program to a regional approach in which grantees are funded to support multiple states in a region.



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- MCHB funded two grantees that support states in the U.S.-Mexico border region, in California (which supports California, Arizona and New Mexico) and in Missouri (which supports Texas).
- The Universal Newborn Hearing Screening Program develops statewide comprehensive and coordinated programs and systems of care targeted towards ensuring that newborns and infants are receiving appropriate and timely services including screening, evaluation, diagnosis, and early intervention.
 - MCHB funded four state grantees that disbursed or used a portion of their funds for activities in the U.S.-Mexico border region: one each in Arizona, California, New Mexico and Texas.
- The Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV) supports the delivery of coordinated and comprehensive, high-quality, voluntary, early childhood home visiting services to eligible families. HRSA administers this program in partnership with the Administration for Children and Families.
 - MCHB funded four state grantees that disbursed or used a portion of their funds for activities in the U.S.-Mexico border region: one each in Arizona, California, New Mexico and Texas.
- Family-to-Family Health Information Center (F2F HIC) Program funds family-staffed and family-run centers in the 50 states and the District of Columbia. The F2F HICs provide information, education, technical assistance, and peer support to families of children (including youth) with special health care needs (CSHCN) and health professionals who serve such families. They also assist in ensuring that families and health professionals are partners in decision making at all levels of care and service delivery.
 - MCHB funded four state grantees that disbursed or used a portion of their funds for activities in the U.S.-Mexico border region: one each in Arizona, California, New Mexico and Texas.
- The Regional Hemophilia Network Program establishes integrated and collaborative regional networks to promote the comprehensive care of individuals with hemophilia and related bleeding disorders or clotting disorders such as thrombophilia.
 - MCHB funded two regional grantees that disbursed or used a portion of their funds for activities in the U.S.-Mexico border region: one each in California and Texas.