



The National Association of State Alcohol and Drug Abuse Directors (NASADAD)

FY 2017 Appropriations

May 2017 Update

Status of FY 2017 Appropriations for:

- Department of Health and Human Services (HHS)
 - Substance Abuse Prevention and Treatment (SAPT) Block Grant
 - Center for Substance Abuse Treatment (CSAT)
 - Center for Substance Abuse Prevention (CSAP)
 - Center for Mental Health Services (CMHS)
 - Centers for Disease Control and Prevention (CDC)
 - Health Resources and Services Administration (HRSA)
 - National Institute on Alcohol Abuse and Alcoholism (NIAAA)
 - National Institute on Drug Abuse (NIDA)
- Department of Justice (DOJ)



Substance Abuse Prevention and Treatment (SAPT) Block Grant

Program	FY 14	FY 15	FY 16	President's FY 17 Request	FY 17 Proposed Omnibus Spending Bill	Proposed Omnibus vs. FY 2016 Enacted
Substance Abuse Prevention and Treatment Block Grant	\$1,819,856,000	\$1,819,856,000	\$1,858, 079,000	\$1,858, 079,000	\$1,858,079,000	Level

Bill Language:

Substance Abuse Prevention and Treatment Block Grant-Overdose Fatality Prevention- “The agreement reflects strong concerns about the increasing number of unintentional overdose deaths attributable to prescription and nonprescription opioids. SAMHSA is urged to take steps to encourage and support the use of Substance Abuse and Prevention Block Grant funds for opioid safety education and training, including initiatives that improve access for licensed healthcare professionals, including paramedics, to emergency devices used to rapidly reverse the effects of opioid overdoses. Such initiatives should incorporate robust evidence based intervention training, and facilitate linkage to treatment and recovery services.”

“The agreement continues bill language directing the Assistant Secretary for Mental Health and Substance Use to exempt the Mental Health Block Grant and the Substance Abuse Prevention and Treatment (SAPT) Block Grant from being used as a source for the PHS evaluation set-aside in fiscal year 2017, as was done prior to fiscal year 2012.”



SAMHSA’s Center for Substance Abuse Treatment (CSAT) – Appropriations by Program

Program	FY 14	FY 15	FY 16	President’s FY 17 Request	FY 17 Proposed Omnibus Spending Bill	Proposed Omnibus vs. FY 2016 Enacted
CSAT TOTAL	\$360,698,000	\$361,463,000	\$335,345,000	\$343,269,000	\$352,427,000	+\$17,082,000
Access to Recovery	\$50,000,000	\$38,223,000	Not funded	Not funded	Not funded	--
Addiction Technology Transfer Centers (ATTCs)	\$9,046,000	\$9,046,000	\$9,046,000	\$8,081,000	\$9,046,000	Level
Children and Families	\$29,678,000	\$29,605,000	\$29,605,000	\$29,605,000	\$29,605,000	Level
Criminal Justice Activities	\$75,000,000	\$78,000,000	\$78,000,000	\$61,946,000	\$78,000,000	Level
Crisis Systems	N/A	N/A	Not funded	\$5,000,000		
Minority AIDS	\$65,732,000	\$65,570,000	\$65,570,000	\$58,859,000	\$65,570,000	Level
Opioid Treatment Programs/Regulatory Activities	\$8,746,000	\$8,724,000	\$8,724,000	\$8,724,000	\$8,724,000	Level
Pregnant and Postpartum Women	\$15,970,000	\$15,931,000	\$15,931,000	\$15,931,000	\$19,931,000	+\$4,000,000
Recovery Community Services Program	\$2,440,000	\$2,434,000	\$2,434,000	\$2,434,000	\$2,434,000	Level
Screening, Brief Intervention, Referral, and Treatment (SBIRT)	\$47,000,000	\$46,889,000	\$46,889,000	\$30,000,000	\$30,000,000	-\$16,889,000
Targeted Capacity Expansion (TCE) General	\$13,256,000	\$23,223,000	\$36,303,000	\$61,303,000	\$67,192,000	+\$30,889,000
Medication-Assisted Treatment for Prescription Drug and Opioid Addiction	N/A	\$12,000,000	\$25,000,000	\$50,080,000	\$56,000,000	+\$31,000,000
Treatment Systems for Homeless	\$41,488,000	\$41,386,000	\$41,304,000	\$36,386,000	\$36,386,000	-\$4,918,000
Building Communities of Recovery	N/A	N/A	N/A	N/A	\$3,000,000	+\$3,000,000
Improving Access to Overdose Treatment	N/A	N/A	N/A	N/A	\$1,000,000	+\$1,000,000

For more information, contact: Robert Morrison, Executive Director (rmorrison@nasadad.org), or Shalini Wickramatilake-Templeman, Federal Affairs Manager (swickramatilake@nasadad.org), at 202-293-0090.



Bill Language:

“Within the total for SAMHSA, the agreement includes \$20,000,000 to support programs authorized in the Comprehensive Addiction and Recovery Act [CARA] of 2016, P.L. 114-198.”

Medication-Assisted Treatment for Prescription Drug and Opioid Addiction (MAT-PDOA)- “The agreement provides \$56,000,000 for the Medication-Assisted Treatment for Prescription Drug and Opioid Addiction program. SAMHSA is directed to support continuation grants and expand the program to additional States. SAMHSA is directed to include as an allowable use medication-assisted treatment and other clinically appropriate services to achieve and maintain abstinence from all opioids and heroin. SAMHSA is directed to give preference in grant awards to treatment regimens that are less susceptible to diversion for illicit purposes. These grants should target States with the highest age adjusted rates of admissions, including those that have demonstrated a dramatic age adjusted increase in admissions for the treatment of opioid use disorders.”

Criminal Justice Activities- “The agreement provides \$78,000,000 for Criminal Justice Activities and directs that no less than \$60,000,000 will be used exclusively for Drug Court activities. SAMHSA is directed to ensure that all Drug Treatment Court funding is allocated to serve people diagnosed with a substance use disorder as their primary condition. *SAMHSA is further directed to ensure that all drug treatment court grant recipients work directly with the corresponding State substance abuse agency in the planning, implementation, and evaluation of the grant.* SAMHSA is further directed to expand training and technical assistance to drug treatment court grant recipients to ensure evidence-based practices are fully implemented.”

Pregnant and Postpartum Women- “The agreement includes an increase of \$4,000,000 for grants authorized under section 501 of the Comprehensive Addiction and Recovery Act of 2016, P.L. 114-198. Consistent with the authorization, the additional funding will be used to fund pilot programs to address treatment gaps for pregnant and postpartum women with substance use disorders, including opioid use disorders.”



SAMHSA’s Center for Substance Abuse Prevention (CSAP) – Appropriations by Program

Program	FY 14	FY 15	FY 16	President’s FY 17 Request	FY 17 Proposed Omnibus Spending Bill	Proposed Omnibus vs. FY 2016 Enacted
CSAP TOTAL	\$175,129,000	\$175,219,000	\$211,219,000	\$211,148,000	\$223,219,000	+\$12,000,000
Center for the Application of Prevention Technologies (CAPT)	\$7,511,000	\$7,493,000	\$7,493,000	\$7,493,000	\$7,493,000	Level
Fetal Alcohol Spectrum Disorder Center for Excellence	\$1,000,000	\$1,000,000	Not funded	Not funded	Not funded	--
Grants to Prevent Prescription Drug/Opioid Overdose Related Deaths	N/A	N/A	\$12,000,000	\$12,000,000	\$12,000,000	Level
Federal Drug-Free Workplace Program (formerly Mandatory Drug Testing)	\$4,906,000	\$4,894,000	\$4,894,000	\$4,894,000	\$4,894,000	Level
Minority AIDS	\$41,307,000	\$41,205,000	\$41,205,000	\$41,205,000	\$41,205,000	Level
Science and Service Program Coordination	\$4,082,000	\$4,072,000	\$4,072,000	\$4,072,000	\$4,072,000	Level
Sober Truth on Preventing Underage Drinking (STOP Act)	\$7,000,000	\$7,000,000	\$7,000,000	\$7,000,000	\$7,000,000	Level
Strategic Prevention Framework/Partnerships for Success	\$109,754,000	\$109,484,000	\$119,484,000	\$119,484,000	\$119,484,000	Level
Strategic Prevention Framework Rx	N/A	N/A	\$10,000,000	\$10,000,000	\$10,000,000	Level
Tribal Behavioral Health Grants	N/A	N/A	\$15,000,000	\$15,000,000	\$15,000,000	Level
First Responder Training	N/A	N/A	N/A	N/A	\$12,000,000	+\$12,000,000

For more information, contact: Robert Morrison, Executive Director (rmorrison@nasadad.org), or
Shalini Wickramatilake-Templeman, Federal Affairs Manager (swickramatilake@nasadad.org), at 202-293-0090.



Bill Language:

“The agreement directs that ail of the funding appropriated explicitly for substance abuse prevention purposes both in the Center for Substance Abuse Prevention's PRNS lines as well as the funding from the 20 percent prevention set-aside in the SAPT Block Grant be used only for bona fide substance abuse prevention programs and not for any other purpose.”

Grants to Prevent Prescription Drug/Opioid Overdose- “The agreement provides \$12,000,000 for discretionary grants to States to prevent opioid overdose-related deaths. This program will help States equip and train first responders with the use of devices that rapidly reverse the effects of opioids. SAMHSA is directed to ensure applicants outline how proposed activities in the grant would work with treatment and recovery communities in addition to first responders.”

First Responder Training- “The agreement provides \$12,000,000 for First Responder Training grants as authorized in the Comprehensive Addiction and Recovery Act of 2016, P.L. 114-198. Of this amount, \$6,000,000 is set aside for rural communities with high rates of substance abuse. Consistent with the authorization, SAMHSA is directed to ensure applicants outline how proposed activities in the grant would work with treatment and recovery communities in addition to first responders.”

**SAMHSA
Center for Mental Health Services (CMHS) – Appropriations by Program**

Program	FY 14	FY 15	FY 16	FY 17 Request	FY 17 Proposed Omnibus Spending Bill	Proposed Omnibus vs. FY 2016 Enacted
CMHS TOTAL	\$377,315,000	\$370,538,000	\$402,609,000	\$406,388,000	\$386,659,000	-\$15,950,000
Children and Family Programs	\$6,474,000	\$6,458,000	\$6,458,000	\$6,458,000	\$7,229,000	+\$771,000
Children’s Mental Health	\$117,315,000	\$117,026,000	\$119,026,000	\$119,026,000	\$119,026,000	Level
Community Mental Health Services (CMHS) Block Grant	\$483,744,000	\$482,571,000	\$511,532,000	\$532,571,000	\$541,532,000	+\$30,000,000
Consumer/Consumer Support TA Centers	\$1,923,000	\$1,918,000	\$1,918,000	\$1,918,000	\$1,918,000	Level
Consumer and Family Network Grants	\$4,966,000	\$4,954,000	\$4,954,000	\$4,954,000	\$4,954,000	Level
Criminal and Juvenile Justice Programs	\$4,280,000	\$4,269,000	\$4,269,000	\$4,269,000	\$4,269,000	Level
Crisis Systems	N/A	N/A	Not funded	\$5,000,000	Not funded	--
Disaster Response	\$1,958,000	\$1,953,000	\$1,953,000	\$1,953,000	\$1,953,000	Level
Grants to States for the Homeless/Projects for Assistance in Transition	\$64,794,000	\$64,635,000	\$64,635,000	\$64,635,000	\$64,635,000	Level



Program	FY 14	FY 15	FY 16	FY 17 Request	FY 17 Proposed Omnibus Spending Bill	Proposed Omnibus vs. FY 2016 Enacted
from Homelessness (PATH)						
Healthy Transitions	\$20,000,000	\$19,951,000	\$19,951,000	\$19,951,000	\$19,951,000	Level
Homelessness	\$2,302,000	\$2,296,000	\$2,296,000	\$2,296,000	\$2,296,000	Level
Homelessness Prevention Programs	\$30,772,000	\$30,696,000	\$30,696,000	\$30,696,000	\$30,696,000	Level
MH System Transformation and Health Reform	\$10,582,000	\$3,779,000	\$3,779,000	\$3,779,000	\$3,779,000	Level
Minority AIDS	\$9,247,000	\$9,224,000	\$9,224,000	\$15,935,000	\$9,224,000	Level
National Traumatic Stress Network	\$46,000,000	\$45,887,000	\$46,887,000	\$46,887,000	\$48,887,000	Level
Primary and Behavioral Health Care Integration	\$50,000,000	\$49,877,000	\$49,877,000	\$26,004,000	\$49,877,000	Level
Primary/Behavioral Health Integration TA	\$1,996,000	\$1,991,000	\$1,991,000	\$1,991,000	\$1,991,000	Level
Project AWARE	\$54,865,000	\$54,865,000	\$64,865,000	\$71,964,000	\$57,001,000	-\$7,864,000
Mental Health First Aid	\$15,000,000	\$14,963,000	\$14,963,000	\$14,963,000	\$14,963,000	Level
Project Aware State Grants	\$40,000,000	\$39,902,000	\$49,902,000	\$57,001,000	\$57,001,000	+\$7,099,000
Project LAUNCH	\$34,640,000	\$34,555,000	\$34,555,000	\$34,555,000	\$23,605,000	-\$10,950,000
Protection and Advocacy	\$36,238,000	\$36,146,000	\$36,146,000	\$36,146,000	\$36,146,000	Level
Seclusion & Restraint	\$1,150,000	\$1,147,000	\$1,147,000	\$1,147,000	\$1,147,000	Level
Suicide Prevention	\$60,032,000	\$60,032,000	\$60,032,000	\$88,032,000	\$69,032,000	+\$9,000,000
Al/AN Suicide Prevention Initiative	\$2,938,000	\$2,931,000	\$2,931,000	\$2,931,000	\$2,931,000	Level
GLS - Suicide Prevention Resource Center	\$6,000,000	\$5,988,000	\$5,988,000	\$5,988,000	\$5,988,000	Level
GLS - Youth Suicide Prevention - Campus	\$6,500,000	\$6,488,000	\$6,488,000	\$6,488,000	\$6,488,000	Level
GLS - Youth Suicide Prevention - States	\$35,500,000	\$35,427,000	\$35,427,000	\$35,427,000	\$35,427,000	Level
National Strategy for Suicide Prevention	\$2,000,000	\$2,000,000	\$2,000,000	\$30,000,000	\$11,000,000	+\$9,000,000
Suicide Lifeline	\$7,212,000	\$7,198,000	\$7,198,000	\$7,198,000	\$7,198,000	Level
Tribal Behavioral Health Grants	\$5,000,000	\$4,988,000	\$15,000,000	\$15,000,000	\$15,000,000	Level
Youth Violence Prevention	\$23,156,000	\$23,099,000	\$23,099,000	Not funded	Not funded	-\$23,099,000

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Bill Language:

Project AWARE- “Of the amount provided for Project AWARE, the agreement directs SAMHSA to use \$10,000,000 for discretionary grants to support efforts in high-crime, high-poverty areas and, in particular, communities that are seeking to address relevant impacts and root causes of civil unrest. These grants should maintain the same focus as fiscal year 2016 grants and continue to be coordinated with the Department of Education grants.”

Project LAUNCH- “The agreement provides continuation funding for all existing grant activities.”

National Strategy for Suicide Prevention- “The agreement provides \$11,000,000 for the National Strategy for Suicide Prevention, an increase of \$9,000,000 above the fiscal year 2016 level. Of this amount, \$9,000,000 is for the Zero Suicide initiative. The Zero Suicide initiative is a comprehensive, multi-setting approach to suicide prevention in health systems. The agreement also supports a set-aside for American Indian/Alaska Native populations of \$2,000,000 within the total for Zero Suicide.”



Centers for Disease Control and Prevention (CDC) – Appropriations for Selected Programs

Program	FY 14	FY 15	FY 16	President's FY 17 Request	FY 17 Proposed Omnibus Spending Bill	Proposed Omnibus vs. FY 2016 Enacted
HIV/AIDS, Viral Hepatitis, STD, and TB Prevention	\$1,120,566,000	\$1,117,609,000	\$1,122,278,000	\$1,127,278,000	\$1,117,278,000	-\$5,000,000
HIV Prevention by Health Departments	\$398,238,000	\$397,161,000	\$397,161,000	\$397,161,000	\$397,161,000	Level
School Health	\$31,161,000	\$31,081,000	\$33,081,000	\$33,081,000	\$33,081,000	Level
Viral Hepatitis	\$31,410,000	\$31,331,000	\$34,000,000	\$39,000,000	\$34,000,000	Level
Sexually Transmitted Infections	\$157,719,000	\$157,310,000	\$157,310,000	\$157,310,000	\$152,310,000	-\$5,000,000
Chronic Disease Prevention and Health Promotion	\$1,187,962,000	\$1,198,220,000	\$1,177,000,000	\$1,177,000,000	\$1,115,596,000	-\$61,404,000
Tobacco	\$210,767,000	\$215,492,000	\$210,000,000	\$210,000,000	\$205,000,000	-\$110,000,000
Excessive Alcohol Use	Not broken out	\$3,000,000	\$3,000,000	Not broken out	\$3,000,000	Level
Prevention Research Centers	\$25,530,000	\$25,461,000	\$25,461,000	\$25,461,000	\$25,461,000	Level
Birth Defects and Developmental Disabilities	\$122,435,000	\$131,781,000	\$135,610,000	\$135,610,000	\$137,560,000	+\$1,950,000
Fetal Alcohol Syndrome	\$10,532,000	\$10,505,000	\$11,000,000	Not broken out	\$11,000,000	Level
Injury Prevention and Control	\$150,839,000	\$170,447,000	\$236,059,000	\$298,629,000	\$286,059,000	+\$50,000,000
Unintentional Injury	\$8,619,000	\$8,598,000	\$8,800,000	\$8,800,000	\$8,800,000	Level
Injury Prevention Activities	\$29,023,000	\$48,950,000	\$104,529,000	\$119,529,000	\$28,950,000	-\$75,579,000
Opioid Prescription Drug Overdose	N/A	\$20,000,000	\$70,000,000	\$80,000,000	\$112,000,000	+\$42,000,000
Illicit Opioid Use Risk Factors	N/A	N/A	\$5,579,000	\$5,579,000	\$13,579,000	+\$8,000,000
Preventive Health and Health Services Block Grant	\$160,000,000	\$160,000,000	\$160,000,000	Not funded	\$160,000,000	Level

Bill language:

“The agreement includes \$6,273,503,000 for the Centers for Disease Control and Prevention (CDC), which includes \$6,258,503,000 in discretionary funding and \$15,000,000 in Public Health and Social Services Emergency Fund (PHSSEF) unobligated balances from pandemic influenza supplemental appropriations. This provides a total program level of \$7,255,161,000, which includes \$35,000,000 in emergency funding for Flint, Michigan and \$891,300,000 in transfers from the Prevention and Public Health Fund (PPH Fund). In addition, the Zika Response and Preparedness Appropriations Act, 2016 provided \$394,000,000 to prevent, prepare for, and respond to the Zika virus.”

Opioid Prescription Drug Overdose (PDO) Prevention Activity- “The agreement continues strong support for PDO prevention activities. In such, it reiterates its support for the interconnected language in both the House and Senate reports on this issue. Further, it notes within the funds provided for PDO prevention, no less than \$107,000,000 shall be used to support core PDO activities with the remaining funds available to support, as needed, the prescription guideline distribution efforts.”

Tobacco- “The agreement includes funds for tobacco use prevention and cessation activities for adults and children.”



Health Resources and Services Administration (HRSA) – Appropriations for Selected Programs

Program	FY 14	FY 15	FY 16	FY 17 Request	FY 17 Proposed Omnibus Spending Bill	Proposed Omnibus vs. FY 2016 Enacted
Community Health Centers	\$1,495,236,000	\$1,491,422,000	\$1,491,422,000	\$1,342,422,000	\$1,490,522,000	-\$900,000
Interdisciplinary Community-Based Linkages	\$71,563,000	\$73,403,000	\$78,903,000	Not broken out	\$128,903,000	+\$50,000,000
Mental and Behavioral Health	\$7,916,000	\$8,916,000	\$9,916,000	\$9,916,000	\$9,916,000	Level
Maternal and Child Health Block Grant	\$634,000,000	\$637,000,000	\$638,200,000	\$638,000,000	\$641,700,000	+\$3,500,000
Rural Health	\$142,335,000	\$147,471,000	\$149,571,000	\$144,162,000	\$156,060,000	+\$6,489,000
Telehealth	\$13,900,000	\$14,900,000	\$17,000,000	\$17,000,000	\$18,500,000	+\$1,500,000
Rural Opioid Overdose Reversal Grant Program	Not funded	Not funded	Not funded	\$10,000,000	Not funded	N/A
Ryan White HIV/AIDS Program	\$2,318,781,000	\$2,318,781,000	\$2,322,781,000	\$2,297,781,000	\$2,318,781,000	-\$4,000,000

Bill Language:

“Of the available funding for fiscal year 2017, bill language directs that not less than \$50,000,000 shall be awarded for services related to the treatment, prevention, and awareness of opioid abuse. In addition, not less than \$50,000,000 will be awarded for services related to mental health.”

Telehealth- “The agreement allocates not less than \$7,300,000 for the Telehealth Network Grant Program. For the additional new funds for the Telehealth Network Grant Program, HRSA is directed to issue a new funding opportunity announcement, giving preference in grant awards to small hospitals serving communities with high rates of poverty, unemployment, and substance abuse.”

National Institute on Alcohol Abuse and Alcoholism (NIAAA) – Appropriations

Program	FY 14	FY 15	FY 16	FY 17 Request	FY 17 Proposed Omnibus Spending Bill	Proposed Omnibus vs. FY 2016 Enacted
NIAAA	\$446,282,000	\$447,153,000	\$467,700,000	\$467,445,000	\$483,363,000	+\$15,663,000

National Institute on Drug Abuse (NIDA) – Appropriations

Program	FY 14	FY 15 Enacted	FY 16	FY 17 Request	FY 17 Proposed Omnibus Spending Bill	Proposed Omnibus vs. FY 2016 Enacted
NIDA	\$1,025,435,000	\$1,028,614,000	\$1,077,488,000	\$1,050,550,000	\$1,090,853,000	+\$13,365,000



Department of Justice – Appropriations for Selected Programs

Program	FY 14	FY 15	FY 16	President's FY 17 Request	FY 17 Proposed Omnibus Spending Bill	Proposed Omnibus vs. FY 2016 Enacted
Drug Enforcement Administration	\$2,018,000,000	\$2,033,320,000	\$2,080,000,000	\$2,103,000,000	\$2,102,976,000	+\$22,976,000
Office of Justice Programs	\$1,503,300,000	\$1,690,800,000	\$1,882,960,000	Not broken out	\$1,690,800,000	-\$192,160,000
Research, Evaluation and Statistics	\$120,000,000	\$111,000,000	\$116,000,000	\$154,000,000	\$89,000,000	-\$27,000,000
State and Local Law Enforcement Assistance	\$1,171,500,000	\$1,241,000,000	\$1,408,500,000	\$1,097,800,000	\$1,258,500,000	-\$150,000,000
Byrne Memorial Justice Assistance Grants	\$376,000,000	\$376,000,000	\$476,000,000*	\$383,500,000	\$403,000,000	-\$73,000,000
<i>After carve-outs</i>	<i>\$344,000,000</i>	<i>\$333,000,000</i>	<i>\$347,000,000</i>	<i>\$289,500,000</i>	<i>\$334,600,000</i>	<i>-\$12,400,000</i>
Drug Courts	\$40,500,000	\$41,000,000	\$42,000,000	\$42,000,000	\$43,000,000	+\$1,000,000
Mentally Ill Offender Act	\$8,250,000	\$8,500,000	\$10,000,000	\$14,000,000	\$12,000,000	+\$2,000,000
Residential Substance Abuse Treatment (RSAT)	\$10,000,000	\$10,000,000	\$12,000,000	\$14,000,000	\$14,000,000	+\$2,000,000
Second Chance Act/Offender Reentry	\$67,750,000	\$68,000,000	\$68,000,000	\$100,000,000	\$68,000,000	Level
Veterans Treatment Courts	\$4,000,000	\$5,000,000	\$6,000,000	\$6,000,000	\$7,000,000	+\$1,000,000
Prescription Drug Monitoring	\$7,000,000	\$11,000,000	\$13,000,000	\$12,000,000	\$14,000,000	+\$1,000,000
Juvenile Justice Programs	\$254,500,000	\$251,500,000	\$270,160,000	\$334,400,000	\$247,000,000	-\$23,160,000
Community Oriented Policing Systems (COPS)	\$214,000,000	\$208,000,000	\$212,000,000	\$286,000,000	\$221,500,000	+\$9,500,000

*Note that the FY 2016 \$100 million increase for Byrne/JAG was a carve out to cover extra costs of security at the two presidential nominating conventions.

Bill language:

Countering the Heroin and Opioid Epidemic- “DOJ shall take steps to build on its programs to contain and reduce heroin trafficking and abuse of opioids. This scourge continues to threaten public health and safety, and addressing it must be a top Departmental priority. This Act includes substantial funding for both DOJ enforcement and grant assistance programs, including significant increases such as \$103,000,000 to implement the Comprehensive Addiction and Recovery Act of 2016 (Public Law 114-198), and DOJ shall report on its progress in these efforts as specified in House and Senate reports.” Note that this \$103 million for CARA is mostly for existing programs.