# NASADAD National Association of State Alcohol and Drug Abuse Directors

D.C. Update: NASADAD Appropriations Overview, Senate Hearing, SAMHSA 988 Website goes live, and More

Visit our Website



#### Meet the Member

Erica Nocho, MS, Bureau Director for the Bureau of County Program Oversight, Women's Services Coordinator, Pennsylvania

Erica Nocho has worked at the Pennsylvania Department of Drug and Alcohol Programs (DDAP) for over 9 years. The majority of the nine years she worked in the Program Monitoring Division overseeing the local drug and alcohol authority's adherence to the grant agreement requirements which includes both fiscal and program compliance. In her current role, she oversees the sections at DDAP that collaborate with the local drug and alcohol agencies' implementation of prevention, intervention,



and treatment services. Her bureau has programmatic oversight for the Substance Abuse Prevention and Treatment (SAPT) block grant, SAPT prevention set aside, maintenance of effort (MOE) for pregnant women, COVID Supplemental, State Opioid Response (SOR) funding, as well as additional State funded services.

She also oversees Pennsylvania's problem gambling services and PA's substance use disorder (SUD) contracted hotline services. She also has 10 years' experience in children and family services at the county, state level, and in a private agency. In her current role she is involved in projects that bridge the gap between SUD and children, youth, and family issues. She is also on the statewide interagency workgroup that addresses policy and practices around substance exposed infants and plans of safe care.

## **NASADAD FY22 Appropriations** Overview

On March 15<sup>th</sup>, President Biden signed into law a \$1.5 trillion spending package that includes \$13.6 billion in emergency aid to Ukraine. NASADAD has developed a new resource, Final FY 22 Appropriations

Overview, that provides a full overview of

fiscal year 2022 funding levels for

Department of Health and Human Services sub-agencies, the Office of National Drug

Control Policy (ONDCP), and relevant programs in the Department of Justice (DOJ).

The omnibus FY 22 appropriations package included the following funding levels for NASADAD's priority programs:

NASADAD National Association of State Alcohol and Drug Abuse

Final FY 2022

March 2022

#### Substance Abuse and Mental Health Services Administration (SAMHSA)

- Substance Abuse Prevention and Treatment (SAPT) Block Grant: \$1.908 billion (+\$50 million compared to FY 2020)
- State Opioid Response (SOR) Grant: \$1.525 billion (+\$25 million)
- Strategic Prevention Framework-Partnerships for Success: \$127.4 million (+\$8 million)
- Medication-Assisted Treatment for Prescription Drug and Opioid Addiction: \$101 million (+\$10 million)
- Drug Courts: \$70 million (level)
- Screening, Brief Intervention, and Referral to Treatment (SBIRT): \$31.8 million (+\$1.8 million)
- Pregnant & Postpartum Women: \$34.9 million (+\$2 million)
- Community Mental Health Services Block Grant: \$857 million (+\$100 million)

#### Centers for Disease Control and Prevention (CDC)

- Injury Prevention and Control: \$714.8 million (+\$32 million)
  - Chronic Disease Prevention and Health Promotion: \$1.338 billion (+\$62 million)
  - Tobacco: \$241.5 million (+\$4 million)
  - Excessive Alcohol Use: \$5 million (+\$1 million)
- Viral Hepatitis: \$41 million (+\$1.5 million)

#### Health Resources and Services Administration (HRSA)

- Peer Support Specialists in the Opioid Use Disorder Workforce: \$14 million (+\$1 million)
- Substance Use Disorder Treatment and Recovery (STAR) Loan Repayment Program: \$24 million (+\$8 million)

#### National Institutes of Health (NIH)

- National Institute on Alcohol Abuse and Alcoholism (NIAAA): \$573.6 million (+\$18.7 million)
- National Institute on Drug Abuse (NIDA): \$1.595 million (+\$115.8 million)

#### Administration for Children and Families (ACF)

- Promoting Safe and Stable Families: \$427 million (Level)
- Programs for Children and Families: \$13 billion (+\$397.8 million)

#### Department of Justice (DOJ)

- Drug Enforcement Administration (DEA): \$2.9 billion (+\$136 million)
- Residential Substance Abuse Treatment (RSAT): \$40 million (+\$6 million)
- Byrne Justice Assistance Grants (JAG): \$381.9 million (+\$21.8 million)
- Justice and Mental Health Collaboration (formerly MIOTCRA): \$40 million (+\$5 million)
- Drug Courts: \$88 million (+\$5 million)



White House Office of National Drug Control Policy (ONDCP)

- Drug-Free Communities (DFC): \$106 million (+\$4 million)
- High-Intensity Drug Trafficking Area (HIDTA) Program: \$296.6 million (+\$6.6 million)

## White House Happenings

## The Model Law Enforcement and Other First Responders Deflection Act

The Office of National Drug Control Policy (ONDCP), Legislative Analysis and Public Policy Association (LAPPA), and the Police, Treatment, and Community Collaborative (PTACC) announced the Model Law Enforcement and Other First Responders Deflection Act. The model law is a resource for States that encourage the development of and use of deflection programs across the country. ONDCP Director Dr. Rahul Gupta, said "President Biden made clear that it is a top priority of this Administration to remove barriers to treatment and get more people the help they need. Deflection programs are supported by law enforcement and health care providers because they are cost-effective and save lives." As stated on LAPPA's website, the model act is designed to:

- 1. authorizes law enforcement and other first responders to develop and implement collaborative deflection programs that provide proactive policing to assist individuals who are at risk;
- 2. offers pathways to treatment, recovery services, housing, medication for addiction treatment, whole family services, and other needed supports;
- 3. requires deflection programs to have certain threshold elements to be eligible to receive grant funding; and
- 4. requires agencies establishing deflection programs to develop comprehensive memoranda of understanding in conjunction with, and agreed to by, all deflection program partners.

## Capitol Hill Happenings

Upcoming HELP Committee Hearing on Strengthening Federal Mental Health and Substance Use Disorder Programs

The U.S. Senate Committee on Health, Education, Labor and Pensions (HELP) will host a hearing on "Strengthening Federal Mental Health and Substance Use Disorder Programs: Opportunities, Challenges, and Emerging Issues" on March 23, 2022. Witnesses include:

#### Miriam E. Delphin-Rittmon, Ph.D

Assistant Secretary for Mental Health and Substance Use Substance Abuse and Mental Health Services Administration

#### Carole Johnson

Administrator

Health Resources and Services Administration

#### Joshua A. Gordon, M.D., Ph.D.

Director

National Institute of Mental Health, National Institutes of Health

#### Nora D. Volkow, M.D.

Director

National Institute on Drug Abuse, National Institutes of Health

The hearing is available for viewing on the HELP Committee page here.

u.s. senate committee on Health, Education Labor & Pensions

## Around the Agencies

#### SAMHA's 988 Website Goes Live

On March 15<sup>th</sup>, the Substance Abuse and Mental Health Services Administration (SAMHSA) announced a new webpage that serves as a "one-stop-shop" for 988 resources. The website includes valuable resources for stakeholders including a 988 partner toolkit, frequently asked questions, and key messaging. In the weeks and months to come, SAMHSA will be adding more tools and resources to the 988 website.



## NIH: Webinar on Reducing Stigma Around Alcohol Use Disorder in Minority Communities

The National Institute of Health (NIH) is hosting a webinar on Monday, March 21 st from 1:00-2:15 p.m. ET titled "Reducing Stigma Around Alcohol Use Disorder in Minority Communities". The presenters for this webinar, Dr. Christina S. Lee, Associate Professor of Social Work at Boston University, and Dr. Tamika C.B. Zapolski, Associate Professor of Psychology at Indiana University-Purdue University, will discuss their research targeting stigma related to alcohol and substance use in Latino/a and African American communities, respectively. Humberto Camarena, Dr. Victor Figuereo, and Rocio Moriel—experts on Dr. Lee's project Culturally Adapted Stigma Mitigation Intervention (CASMI) team—will give their perspectives on the significance of such work in community settings, with a focus on how culturally adapted motivational interviewing impacts Latino men and women with unhealthy alcohol use. The webinar can be viewed on NIH Videocast. Please RSVP to dana.west@icf.com by Friday, March 18<sup>th</sup>.

## CDC: Notice of Funding Opportunity on Strengthening Syringe Services Programs

The Centers for Disease Control and Prevention (CDC) recently released a notice of funding opportunity (NOFO) for Strengthening Syringe Services Programs (CDC-RFA-PS22-2208). This NOFO aims to



increase access to harm reduction services for people who currently inject, or have a history of injecting, drugs and reduce incidence of infectious diseases and other complications of injection drug use through:

- 1. Supporting a national network of syringe services programs (SSPs) and oversee implementation and use of an annual survey of SSPs.
- 2. Supporting and strengthen implementation of SSPs.

Registration for an informational webinar on March 29<sup>th</sup> at 1:30 p.m. ET can be accessed here. The application date is May 2, 2022, and the anticipated start date is September 30, 2022.

## CDC: Updated Provisional Data on Vital Statistics Rapid Release Number of Drug Overdose Deaths



Updated <u>provisional data</u> from the Centers for Disease Control and Prevention (CDC) indicate a 15.9% increase in drug overdose deaths from October 2020 to October 2021. This brings the predicted number of deaths to 105,752 for the 12month period ending in October 2021.

## FDA: Tianeptine Products Linked to Serious Harm, Overdoses, Death

The Food and Drug Administration (FDA) recently released an alert warning

consumers about the possible health effects of using tianeptine, an unapproved drug in the U.S. Although other countries have approved tianeptine to treat depression and anxiety, some have restricted how tianeptine is prescribed or dispensed, or revised the drug label to warn of possible addiction. Cases described in medical journals, in calls to U.S. poison control centers, and in reports to the FDA, suggest that tianeptine has a potential for misuse. People with a history of opioid use disorder or dependence may be at particular risk when using tianeptine. The FDA says consumers should avoid all products containing tianeptine, including those claiming to treat an ailment or disorder.

## **Training Time**

## FOCUS: PHI released a new eLearning module "Privacy Basics for Frontline Staff"

The Center for Excellence for Protected Health Information (CoE-PHI) released <u>a</u> <u>new module</u> that focuses on privacy protections under 42 CFR Part 2 ("Part 2") and how to share protected health information (PHI) in compliance with Part 2. It is designed to help professionals who provide or administer Substance Use Disorder (SUD) services understand how PHI can be shared within one's own organization, and when communicating with clients and individuals outside their organizations.

## FOCUS: PHI new module "Are You a Part 2 Program? Guidance for Identified SUD Personnel Within a General Medical Facility"

The Center for Excellence for Protected Health Information (CoE-PHI) released a new resource to help healthcare professionals and administrators who provide Substance Use Disorder (SUD) services to determine if Part 2 applies to them or their practice. The video, "Are you a Part 2 Program? Guidance for Identified SUD Personnel Within a General Medical Facility Whose Primary Function is Providing SUD Treatment" is the third in a set of animated videos meant to assist SUD providers and administrators, in all settings, to determine whether their patients' records are protected by the federal confidentiality law and regulations for SUD treatment records, 42 CFR Part 2 ("Part 2"). The video also addresses Program Type 3: Identified SUD personnel within a general medical facility, such as a DATA 2000-waivered physician in a general hospital who prescribes buprenorphine and whose primary function is providing SUD treatment.