

July 11, 2024



D.C. Update: NASADAD Serves as Speaker at NGA Policy Academy, NASADAD Federal Update: Overview of Proposed FY 2025 House Funding for SAMHSA, HRSA Announces New Rural SUD Info Center, and More.

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Meet The Member

Nisha Wilson, LPC, National Treatment Network (NTN) Coordinator for Oklahoma

Nisha Wilson, LPC, serves as the Deputy Commissioner of Treatment and Recovery for the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS). In this role, Nisha is responsible for the development and implementation of comprehensive approaches to clinical services across the statewide continuum of care. Ms. Wilson also currently serves as the National Treatment Network (NTN) Coordinator for Oklahoma.

Throughout her 20-year career with ODMHSAS, Nisha has served in a variety of roles in both the provision of direct care services and program administration, including the oversight of criminal justice initiatives, the statewide network of Certified Community Behavioral Health Clinics (CCBHCs), substance use disorder (SUD) services, crisis continuums of care, and children's services. She is passionate about bridging the gap between research and practice and is focused on outcomes that deliver quality care and treatment.

Nisha received a bachelor's degree from Southwestern Oklahoma State University and master's degree in counseling psychology from Northeastern State University. Nisha is a Licensed Professional Counselor (LPC) and served as a board member for the Oklahoma State Board of Behavioral Health Licensure from 2014-2022.



NASADAD Executive Director Serves as Speaker at NGA Policy Academy in Salt Lake City Utah

On Monday, July 8, NASADAD Executive Director Robert Morrison participated in a policy academy held in Salt Lake City, Utah, sponsored by the National Governors Association (NGA) regarding the role of Emergency Medical Services (EMS) in addressing the overdose crisis. Rob provided an overview of the role of NASADAD members in managing State substance use disorder (SUD) systems and provided information on certain federal programs that support the purchase of overdose reversal medications as an allowable use of funds. Morrison participated in the day-long meeting where State teams from Kentucky, South Carolina, Wisconsin, Ohio, and Vermont convened. The meeting was planned in partnership with the National Association of State Emergency Medical Services Officials (NASEMSO).

The slide deck from the presentation can be found on NASADAD's webpage, [here](#).

NASADAD Federal Update: Overview of Proposed FY 2025 House Funding for SAMHSA

On July 10, the House Appropriations Committee met to consider and vote on the [Labor, Health and Human Services, Education, and Related Agencies Appropriations Act, 2025](#), a bill that outlines proposed Fiscal Year (FY) 2025 funding (October 1, 2024 - September 30, 2025) for the Departments of Labor, Health and Human Services (HHS), Education, and Related Agencies - which include proposed funding levels for NASADAD's priority programs under the Substance Abuse and Mental Health Services Administration (SAMHSA), the Centers for Disease Control and Prevention (CDC), the Health Resources and Services Administration (HRSA), and other operational divisions. The measure was approved by the Committee with a vote of 31 to 25.

Daniel Diana, Legislative Coordinator, and Allison Beaumont, Public Policy Intern, attended the markup and developed a chart that outlines the House's proposed funding levels for NASADAD's priority programs under SAMHSA for FY 2025. The chart can be accessed on NASADAD's webpage, [here](#).

NASADAD is in the process of developing charts for the remaining agencies under HHS and will release those as completed. Initial observations include:

Substance Use Prevention, Treatment, and Recovery Services (SUPTRS) Block Grant: \$2,508,079,000 or an increase of \$500 million over FY 2024.

- This large, proposed increase stems from a proposal to redirect opioid related funding managed by CDC's National Center for Injury Prevention and Control's Division of Overdose Prevention. The Committee expressed concern with the amount of money CDC was directing to administrative costs used to manage this programming.
- The specific language is included below:

"The SUPTRS funding level reflects a transfer of \$500,000,000 from the CDC to SAMHSA. Of the \$506,079,000 provide for the CDC program in fiscal year 2024, \$114,000,000, or 23 percent, went to administrative costs. The transfer of State program funding from CDC to SAMSHA should increase the funding available to States for these activities by more than \$63,000,000 in reduced Federal administration expenses alone."

NASADAD National Association of State Alcohol and Drug Abuse Directors



Fiscal Year 2025 Appropriations: SAMHSA House Recommendations

July 2024

For questions or more information, please contact:
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- The House Committee did not include a 10 percent set-aside for recovery support services as proposed by the Administration.

State Opioid Response (SOR) Grant: \$1,575,000,000 or level funding with FY 2024.

Center for Substance Abuse Prevention (CSAP): \$203,174,000 or a cut of \$33,705,000 from FY 2024.

- The cut stems from eliminating the \$43,205,000 dedicated to the Minority AIDS initiative.
- The Strategic Prevention Framework/Partnerships for Success (PFS) is proposed to receive \$140,000,000 or an increase of \$5,000,000 over FY 2024.
- There is no proposed funding for the Synar program.

Center for Substance Abuse Treatment (CSAT): \$433,384,000 or a cut of \$142,835,000 from FY 2024.

- Proposed cuts stem from the following:
 - \$20 million cut in criminal justice activities leaving drug courts as the only justice related programming
 - \$66.8 million cut or elimination of the Minority AIDS Initiative program funds
 - \$33.8 million cut or elimination of SBIRT program
 - \$37.1 million cut or elimination of Treatment Systems for the Homeless

Community Mental Health Services (CMHS) Block Grant: \$1,022,571,000 or an increase of \$15 million over FY 2024.

- The language includes the 10 percent set-aside for first episode psychosis and the 5 percent set-aside for crisis services.
- The language does not include a proposed set-aside for prevention/early intervention services.

Next steps: The Committee on Appropriations approved the Labor, HHS, Education, and Related Agencies bill to be brought before the full House for consideration. The next step would be for scheduling to take place for the full House to consider the bill. At this point, it is our understanding that the House would like to vote and clear the measure before the August break.

If you have any questions, or require additional information, please reach out to rmorrison@nasadad.org or ddiana@nasadad.org.

Capitol Hill Happenings

FY 2025 Appropriations: House Appropriations Committee Approves FY 2025 Financial Services and Commerce, Justice, and Science Bill

On June 13, the House Appropriations Committee held a markup of the [Fiscal Year 2025 Financial Services and General Government Appropriations Act](#). The measure was approved by the Committee with a vote of 33 to 24. This bill outlines Fiscal Year (FY) 2025 funding levels for NASADAD priority programs within the White House Office of National Drug Control Policy (ONDCP). Key takeaways from the bill include:

- Drug-Free Communities (DFC) Support Program: \$109,000,000 (level with FY 2024)
- High Intensity Drug Trafficking Areas (HIDTA) Program: \$299,600,000 (increase of \$1,021,000 compared to FY 2024)
- Community-Based Coalition Enhancement Grants (CARA Grants): \$5,200,000 (level with FY 2024)

A summary of the bill can be found [here](#).

House Appropriations Committee Chairman Representative Tom Cole's (R-OK-4) press release on the markup can be found [here](#).

On July 9, the House Appropriations Committee held a markup of the [Fiscal Year 2025 Commerce, Justice, Science, and Related Agencies Appropriations Act](#). The measure was approved by the Committee with a vote of 31 to 26. This bill outlines FY 2025 funding levels for NASADAD priority programs within the Department of Justice (DOJ). Key takeaways from the bill include:

- Comprehensive Opioid, Stimulant, and Substance Use Program (COSSUP): \$189,000,000 (level with FY 2024)
- Residential Substance Use Treatment (RSAT): \$35,000,000 (level with FY 2024)
- Second Chance Act/Offender Reentry: \$115,000,000 (decrease of \$2,000,000 compared to FY 2024)

A summary of the bill can be found [here](#).

House Appropriations Committee Chairman Representative Tom Cole's (R-OK-4) press release on the markup can be found [here](#).

Next steps: These measures were approved by the House Appropriations Committee to be brought before the Full House for consideration and passage. NASADAD will continue to track developments regarding FY 2025 funding decisions and provide periodic updates as more details emerge.

If you have any questions, or require additional information, please reach out to rmorrison@nasadad.org or ddiana@nasadad.org.

Around the Agencies

SAMHSA Awards Nearly \$1 Million in Grant Funding Through the Services Program for Residential Treatment for Pregnant and Postpartum Women



The Substance Abuse and Mental Health Services Administration (SAMHSA) recently awarded nearly \$1 million to two grant recipients through the [Services Program for Residential Treatment for Pregnant and Postpartum Women](#). The Services Program for Residential Treatment for Pregnant and Postpartum Women (PPW) is designed to provide States with funding to implement and maintain "...comprehensive services for pregnant and postpartum women with substance use disorders across the continuum of residential settings that support and sustain recovery." Further, as a family-centered program, the PPW program also extends these services to family members and the minor children of the women in treatment. The nearly \$1 million in funding comes along with SAMHSA's announcement of [two new funding opportunities](#) designed to address women's unique mental health and substance use disorder (SUD) treatment needs.

SAMHSA's press release announcing the awards can be found [here](#).

HRSA Announces New Rural SUD Info Center

The Health Resources and Services Administration (HRSA) recently announced the publication of the [Rural SUD Info Center](#), a clearinghouse dedicated to highlighting the work of three different [Rural Centers of Excellence on Substance Use Disorders \(SUD\)](#). Funded under HRSA's Federal Office of Rural Health Policy's (FORHP) Rural Communities Opioid Response Program (RCORP), the Rural Centers of Excellence on SUD implement, evaluate, and disseminate evidence-based programs and best practices for prevention, treatment, and recovery in rural communities. The Rural SUD Info Center is designed to share these resources to support rural providers, rural community members, and other partners in developing comprehensive SUD systems in rural areas across the nation. The Info Center will also offer technical assistance opportunities on addressing SUD in rural

communities that supports tailored prevention, treatment, and recovery options.

ICCPUD Hosting STOP Act Stakeholder Meeting for Public Comment



The [Interagency Coordinating Committee on the Prevention of Underage Drinking \(ICCPUD\)](#) is hosting its [STOP Act Stakeholder Meeting for Public Comment](#) on August 7, at 10:00 am ET. The Sober Truth on Preventing Underage Drinking (STOP) Act requires ICCPUD to create, in consultation with stakeholders, including public health and alcohol beverage industry entities, annual reports on: [underage drinking](#); State underage drinking prevention activities; [State performance and best practices](#); and an evaluation of the [National Media Campaign to Prevent Underage Drinking](#). This meeting seeks to solicit input from key stakeholders on these various reports and will include an overview of the state of underage drinking in America, the [2023 ICCPUD Comprehensive Plan](#), and an update on the ongoing [Alcohol Intake and Health Study](#). There will be 30 minutes total for public comment, with 2 minutes per speaker. Comments and questions can be submitted by email to: underagedrinking@samhsa.hhs.gov.

Registration is required.

Research Roundup

NIDA-Supported Study Finds Fentanyl and COVID-19 Altered Demographics of Overdose Deaths in the US Between 2012 and 2021

Researchers from Pennsylvania State University published a study, supported by the National Institute on Drug Abuse (NIDA), in the American Journal on Addictions on [Regional Differences in Fatal Drug Overdose Deaths Among Black and White Individuals in the United States, 2012-2021](#). The study found that from 2012-2021, during which the U.S. experienced a significant rise in fentanyl use and the COVID-19 pandemic, the gap in overdose deaths between demographics shifted, resulting in significant increases in Black overdose mortality rates after the pandemic compared to before. The researchers examined data from the Centers for Disease Control and Prevention (CDC) [Wide-ranging Online Data for Epidemiologic Research \(WONDER\)](#) concerning Non-Hispanic Black and Non-Hispanic White mortality data from 2012 to 2021 in four regions across the United States. Key findings include:

- “From 2012 to 2021, there were 537,085 reported overdose deaths among White (85%) and Black (15%) individuals in the United States.
- Black individuals now die of overdose at a higher rate than White individuals in the U.S.
 - Overdose death rates increased for both Black and White individuals of all ages during the ten-year study
 - Overdose death rates spiked more sharply among Black individuals compared to White individuals during the ten-year study
- Florida had the highest number of overdose deaths (37,132; 9.7% Black and 90.3% White) and Kansas reported the lowest (3,199; 8.6% Black and 91.4% White).
- Regardless of region, Black individuals among younger ages (15-44) all had lower overdose death rates than their White counterparts (10-60% lower).
- Regardless of region, Black individuals among older ages (55 and older) all had higher overdose death rates than their White counterparts (60-300% higher).”

The researchers assert that the increasing rate of fentanyl overdoses and the COVID-19 pandemic resulted in a reverse in overdose death trends where white individuals are no longer significantly more likely to die from overdose than Black individuals in the U.S.

Pennsylvania State University’s press release on the study can be found [here](#).

Webinars to Watch

CoE-TFR Webinar: Getting Beyond “No” - Addressing Tobacco Use Treatment in the Pre-Contemplation Stage



The Substance Abuse and Mental Health Services Administration (SAMHSA)-funded [National Center of Excellence for Tobacco-Free Recovery \(CoE-TFR\)](#) is hosting a webinar on [Getting Beyond “No” - Addressing Tobacco Use Treatment in the Pre-Contemplation Stage](#). This no-cost webinar is on July 30, at 2:00 pm ET. The webinar will outline recovery-oriented strategies to engage, support, and treat people with mental health and substance use disorder (SUD) conditions who use commercial tobacco and are not yet contemplating attempting to quit smoking. The webinar is intended to inform mental health and SUD practitioners on key considerations for how prescribers can work with multi-disciplinary healthcare teams to meet the unique needs of individuals in this “pre-contemplation stage.” Specifically, the webinar will:

- “Discuss current best practices for tobacco use treatment for individuals with behavioral health conditions
- Identify how to successfully integrate stage-wise tobacco interventions with individuals who are in pre-contemplation regarding cessation
- Describe key considerations when prescribing tobacco use treatment for individuals with behavioral health conditions”

Registration is required.

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