



# **State Alcohol and Drug Agencies: Role, key initiatives, top considerations**

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**National Meeting of State Health and Human Services Chairs**

**National Conference of State Legislatures (NCSL)**

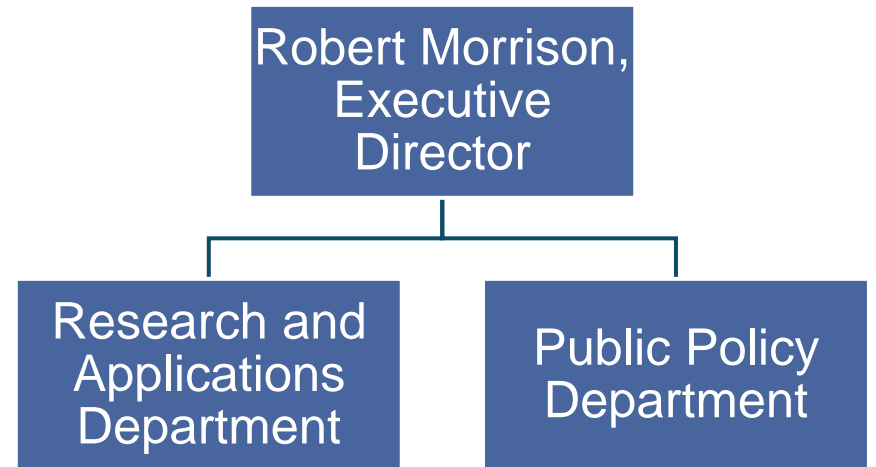
**June 26, 2024**

**Washington, D.C.**

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# Overview of NASADAD

- NASADAD’s mission is to promote effective and efficient publicly funded State substance use disorder prevention, treatment, and recovery systems.
- **Office in Washington, D.C.**
  - Research and Program Applications Department
  - Public Policy Department
- **Governed by Board of Directors**
  - Sara Goldsby (SC), President
  - Val Mielke (N.J.), Vice President
  - Cassandra Price (GA), Public Policy Committee Chair



# What do we do at NASADAD?



Serve as the national voice of State substance use agencies



Foster partnerships among States, federal agencies, and key national organizations



Develop and disseminate knowledge of innovative substance use programs, policies, and practices



Promote key competencies of effective State substance use agencies



Promote increased public understanding of substance use prevention, treatment, and recovery processes and services

**In addition to State Directors, NASADAD serves as an umbrella group for Staff focused on a population or part of the continuum**



Prevention Coordinators  
(National Prevention Network)



Treatment Coordinators  
(National Treatment Network)



Women's Services Coordinators  
(Women's Services Network)



State Opioid Treatment Authorities (SOTAs)  
Opioid Treatment Network (OTN)



Youth Coordinators



HIV Coordinators

# Role of State Alcohol and Drug Agencies

**NASADAD** National Association of State Alcohol and Drug Abuse Directors September 2022

### The Role of State Alcohol and Drug Agencies

The Single State Agency (SSA) is the lead agency in each State or jurisdiction responsible for managing federal funds dedicated to addressing substance use prevention, treatment, and recovery. These agencies are governed by different statutes and regulations, vary in terms of their exact functions, size, and placement within State government. Yet these same agencies also share common characteristics as well. The development of effective federal policy requires an awareness and appreciation of the important role State alcohol and drug agencies play in managing our nation's prevention, treatment, and recovery system.

- Managing the Substance Abuse Prevention and Treatment (SAPT) Block Grant:** The SAPT Block Grant is a \$1.9 billion federal formula grant that is allotted to NASADAD members. By statute, twenty percent of the SAPT Block Grant must be dedicated to critical substance use prevention programming.
- Managing opioid-specific grants to States:** NASADAD members manage the State Opioid Response grants (\$1.525 billion in FY 2022) which address the opioid crisis by increasing access to treatment and reducing opioid overdose deaths through prevention, treatment, and recovery activities. SSAs previously managed the State Targeted Response grants in their State. These grants supplement existing opioid-related services being led by the State alcohol and drug agencies.
- Promoting effectiveness through planning, oversight, and accountability:** States work with stakeholders to craft and implement annual plans for State-wide service delivery. In the process, they employ mechanisms to ensure public programs are effective. State agencies use tools such as performance data management and reporting, contract monitoring, corrective action planning, on-site reviews, and technical assistance.

[www.nasadad.org](http://www.nasadad.org)

<https://nasadad.org/role-of-ssas/>

**Placement in State government varies:** May be Departments of Health, Human Services, Social Services, Cabinet Level, and so on

Develop **State plans** to provide prevention, treatment, and recovery services

Manage the Substance Use Prevention, Treatment, and Recovery Services (SUPTRS) Block Grant

Manage opioid-specific grants to States – including State Opioid Response (SOR) Grant

Promote effectiveness through planning, oversight, and accountability

Report Data

Promote and ensure quality and evidence-based services

Encourage coordination across State government

Work with the provider community

# How do State alcohol and drug agencies support providers?

- **Convene** provider community to ensure communication and awareness; seek and acquire input
- **Support training** to help support providers with education on evidence-based practices related to programs, practices and policies
  - Includes help translating research-to-practice
  - Includes facilitating a dialogue about practice-to-research possibilities

# How do State alcohol and drug agencies support providers?

- Lead on issues related to ***workforce development, recruitment, training, and retention***
- ***Ensure oversight*** of the system through guidance to those deploying policies, programs and practices
- Assist providers in leveraging opportunities offered by ***federal partners***

# Coordinating Funds: Two examples

## Substance Use Prevention, Treatment and Recovery Services (SUPTRS) Block Grant

*(formerly Substance Abuse Prevention and Treatment Block Grant [SAPT or SABG])*

&

## State Opioid Response (SOR) Grant





# Substance Use Prevention, Treatment, and Recovery Services (SUPTRS) Block Grant

- Distributed by formula to all States, Territories, Jurisdictions, and the Red Lake Band of Chippewa Indians (referred to as “States”).
- Administered by the Substance Abuse and Mental Health Services Administration (SAMHSA).
- The SUPTRS Block Grant supports treatment for 2 million Americans per year.
- 20 percent set-aside for primary prevention.
- Flexible program that allows each State to direct resources for prevention, treatment, and recovery to meet their own needs.

## Sample service areas:

1. Primary prevention services;
2. Tuberculosis (TB) services including TB screening, counseling, and referral for medical evaluation and treatment for individuals in SUD treatment services;
3. Early intervention services for HIV/AIDS for individuals in SUD treatment services in designated states;
4. Substance use services for pregnant women and women with dependent children; and
5. Recovery support services.

# Substance Use Prevention, Treatment, and Recovery Services (SUPTRS) Block Grant (Continued)

Critical funding that supports infrastructure of each State’s substance use disorder system – including services not reimbursed

FY 2020	FY 2021	FY 2022	FY 2023	Final FY 2024	FY 2024 vs. FY 2023	President’s FY 2025 Request	FY 2025 vs. FY 2024
\$1,858,079,000	\$1,858,079,000	\$1,908,079,000	\$2,008,079,000	2,008,079,000	Level	\$2,008,079,000	Level

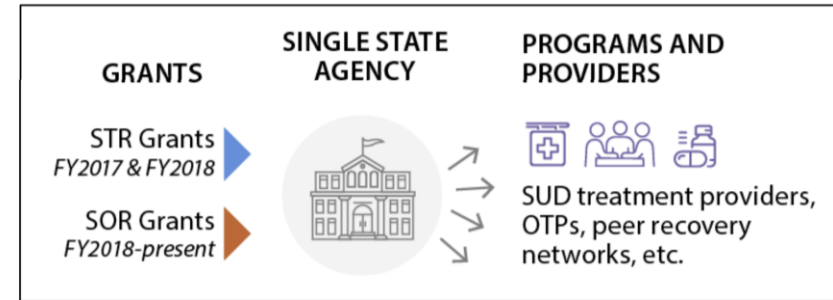
## COVID-19 Relief Supplemental Funding

Consolidated Appropriations Act, 2021 (Coronavirus Relief Package, December 2020)	The American Rescue Plan Act of 2021 (March 2021)
\$1,650,000,000	\$1,500,000,000

# State Opioid Response (SOR) Grants – An Overview

“The purpose of this program is to address the opioid overdose crisis by providing resources to states and territories for increasing access to FDA-approved medications for the treatment of opioid use disorder (MOUD), and for supporting the continuum of prevention, harm reduction, treatment, and recovery support services for opioid use disorder (OUD) and other concurrent substance use disorders. The SOR program also supports the continuum of care for stimulant misuse and use disorders, including for cocaine and methamphetamine. The SOR program aims to help reduce unmet treatment needs and opioid-related overdose deaths across America.”

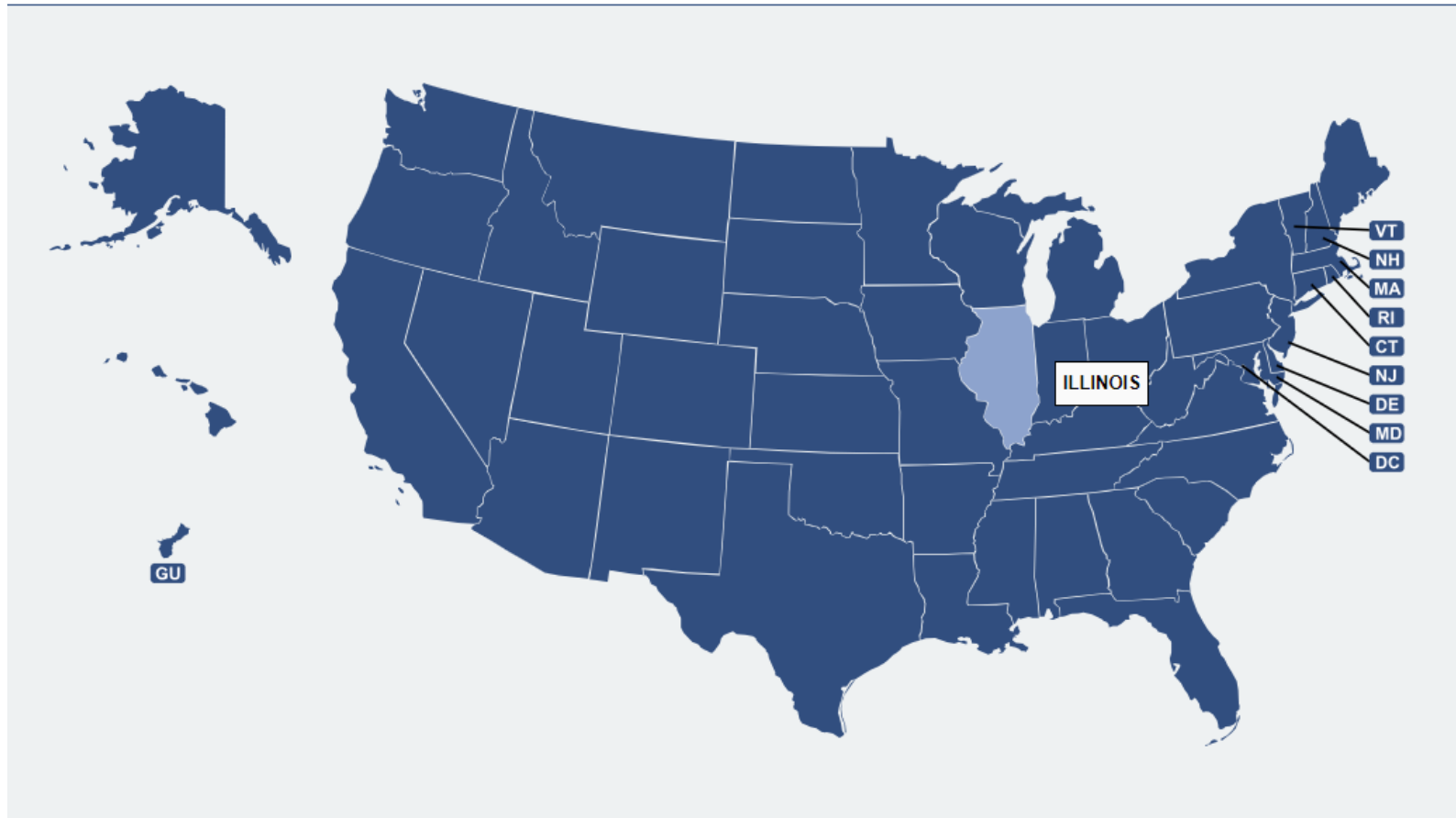
## SOR Distribution



Source: Congressional Research Service.

Program	FY 2020	FY 2021	FY 2022	FY 2023	Final FY 2024	FY 2024 vs FY 2023	President's FY 2025 Request	FY 2025 vs FY 2024
<b>State Opioid Response (SOR) Grants</b>	\$1,500,000,000	\$1,500,000,000	\$1,525,000,000	\$1,575,000,000	\$1,575,000,000	Level	\$1,595,000,000	+\$20,000,000

# State Opioid Response (SOR) Interactive Map



## Illinois Initiative Brief

### Addressing Opioid Misuse and Disorders: The Impact of State Targeted Response and State Opioid Response Grants

#### Background on State Targeted Response and State Opioid Response Grants

The Substance Abuse and Mental Health Services Administration (SAMHSA) administers the State Targeted Response to the Opioid Crisis (STR) and State Opioid Response (SOR) grant programs. The STR program was designed to address the opioid crisis by increasing access to treatment, reducing unmet treatment need, and reducing opioid overdose-related deaths through the provision of prevention, treatment, and recovery support activities for opioid use disorder (OUD). Following STR, the SOR program similarly aims to address the opioid crisis by increasing access to medication-assisted treatment (MAT) using the three Food and Drug Administration (FDA)-approved medications for treatment of OUD and through the provision of prevention, treatment, and recovery activities for OUD. In addition, the SAMHSA SOR program supports evidence-based prevention, treatment, and recovery support services to address stimulant misuse and use disorders, including for cocaine and methamphetamine.

In FY 2017 and FY 2018, grantees received a total of \$1 billion through STR. From FY 2018 through FY 2020, states, territories, and jurisdictions received a total of \$4 billion in SOR grants.

#### Single State Agency (SSA): Illinois Department of Human Services (DHS) Division of Substance Use Prevention and Recovery (SUPR)

In FY 2017 and 2018, the Illinois Department of Human Services (DHS) Division of Substance Use Prevention and Recovery (SUPR) received a total of \$32.6 million in STR funds. From FY 2018 through FY 2020, the state received a total of \$109.8 million in SOR funding.

#### Overview of Illinois' efforts to address opioid misuse and disorders

The State Overdose Action Plan (SOAP) forms the strategic framework for addressing the opioid epidemic in Illinois, setting a statewide goal of reducing opioid-related deaths by one-third in 3 years and formulating a set of evidence-based strategies to achieve this goal. The SOAP focuses on efforts falling into three pillars:

1. **Prevention:** preventing people from using opioids;
2. **Treatment and recovery:** providing evidence-based treatment and recovery services to Illinois citizens with an OUD; and
3. **Response:** avoiding death after overdose.

The programs supported through STR/SOR are designed to address the range of serious opioid-related problems and issues that are being experienced among residents across Illinois. These programs primarily

<https://nasadad.org/2022/09/interactive-map-impact-of-state-targeted-response-state-opioid-response-grants/>

**Thematic briefs** describe some of the most pressing issues faced by the SSAs in responding to the opioid crisis and stimulant misuse and use disorders, common strategies to address them, and innovative programs. The briefs cover:


- Crisis Support Services
- Special Populations Initiatives
- Initiatives to Build Workforce Capacity
- Demonstrating Outcomes for a Healthier Future
- Prevention Initiatives
- Treatment Initiatives
- Overdose Reversal Initiatives
- Recovery Support Initiatives

### STR/SOR ISSUE BRIEF

#### Crisis Service Initiatives

#### BACKGROUND AND OVERVIEW

The Substance Abuse and Mental Health Services Administration (SAMHSA) previously administered the State Targeted Response to the Opioid Crisis (STR) grant program and currently administers the State Opioid Response (SOR) grant program. The STR program was designed to address the opioid crisis by increasing access to treatment, reducing unmet treatment need, and reducing opioid overdose-related deaths through the provision of prevention, treatment, and recovery support activities for opioid use disorder (OUD). Following STR, the SOR program similarly aims to address the opioid crisis by increasing access to medication-assisted treatment (MAT) using the three Food and Drug Administration (FDA)-approved medications for treatment of OUD and through the provision of prevention, treatment, and recovery activities for OUD. In addition, the SOR program supports evidence-based prevention, treatment, and recovery support services to address stimulant misuse and use disorders, including for cocaine and methamphetamine.



The Opioid Response Network (ORN) is a group of diverse individuals and organizations working collaboratively to address the opioid and stimulant crisis. Funded by SAMHSA's SOR Technical Assistance (TA) grant, the ORN works with states, health professionals, community organizations, the justice system, and individuals in all 50 states and nine territories to provide education and training. This issue brief was developed as a form of TA so states can share strategies and learn from one another, as well as seek ORN TA when needed.

The National Association of State Alcohol and Drug Abuse Directors (NASADAD), through its partnership with the ORN, sent an inquiry to the Single State Agencies (SSAs) for alcohol and other drug services in March 2021 requesting information on how they were using the STR and SOR grants to address the opioid crisis in their states. A total of 52 state and territorial responses were received. The results of the inquiry were summarized into state-specific briefs highlighting service delivery models; workforce activities; prevention, treatment, and recovery initiatives; services for special populations; and service outcomes. State briefs generally covered a reporting time frame between FY 2017 and FY 2020.

This issue brief provides a summary of states' crisis services initiatives in addressing the opioid crisis. These initiatives provide crisis interventions to stabilize persons experiencing a substance use-related crisis and serve as pivot points of care to longer-term treatment and recovery support. The final section of the brief highlights examples of innovative state initiatives in crisis services.




### STR/SOR ISSUE BRIEF

#### Initiatives to Build Workforce Capacity


#### BACKGROUND AND OVERVIEW

The Substance Abuse and Mental Health Services Administration (SAMHSA) previously administered the State Targeted Response to the Opioid Crisis (STR) grant program and currently administers the State Opioid Response (SOR) grant program. The STR program was designed to address the opioid crisis by increasing access to treatment, reducing unmet treatment need, and reducing opioid overdose-related deaths through the provision of prevention, treatment, and recovery support activities for opioid use disorder (OUD). Following STR, the SOR program similarly aims to address the opioid crisis by increasing access to medication-assisted treatment (MAT) using the three Food and Drug Administration (FDA)-approved medications for treatment of OUD and through the provision of prevention, treatment, and recovery activities for OUD. In addition, the SOR program supports evidence-based prevention, treatment, and recovery support services to address stimulant misuse and use disorders, including for cocaine and methamphetamine.



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### How states are using State Targeted Response (STR) and State Opioid Response (SOR) funds to make a difference

March 2020

#### PREVENTION INITIATIVES

In April of 2019, the National Association of State Alcohol and Drug Abuse Directors (NASADAD) sent an inquiry to the Single State Agencies for alcohol and other drug services requesting information on how they were using the State Targeted Response (STR) and State Opioid Response (SOR) grants to address the opioid crisis in their states. The results of the inquiry were summarized into state-specific profiles highlighting prevention, treatment, overdose reversal, and recovery support efforts. State profiles generally covered a reporting timeframe between May 2017 - April 2019. A total of 50 state responses were received. Washington D.C. and U.S. Territories did not respond to the inquiry. Below is a brief analysis of the most common ways states have used STR/SOR funds for primary prevention initiatives, as well as select examples of innovative prevention initiatives.

### STR/SOR OUTCOMES SNAPSHOT

#### Demonstrating Outcomes for a Healthier Future

#### Background and Overview

The Opioid Response Network (ORN) is a group of diverse individuals and organizations working collaboratively to address the opioid and stimulant crisis. Funded by SAMHSA's SOR Technical Assistance (TA) grant, the ORN works with states, health professionals, community organizations, the justice system, and individuals in all 50 states and nine territories to provide education and training. This snapshot captures national data on three common state outcomes: national kits distributed; overdose reversals reported; and individuals who received medication for opioid use disorder (MOUD). It also provides two examples of state-specific outcomes. The snapshot was developed as a form of TA so states can share strategies and learn from one another, as well as seek ORN TA when needed.

#### Nationwide Estimates\*

**3.1 million** naloxone kits distributed (46 states reporting)

**167,982** overdose reversals reported (25 states reporting)

**294,978** individuals received medication for opioid use disorder (MOUD) (38 states reporting)

\*Estimates were developed with data voluntarily reported by states. These estimates include data reported from 2017 to 2021. Some states did not report data for all years.

#### Example of State Programmatic Outcomes: California Department of Health Care Services

California has substantially increased access to treatment and other services for opioid and stimulant use disorder with STR/SOR funding. As of June 2021, more than 48,000 individuals have received treatment through the state's Hub and Spoke System (otherwise known as the Medication Assisted Treatment (MAT) Expansion Project), with significant expansions in treatment availability in the northern and central parts of the state, where individuals and communities have been most impacted by the opioid crisis.

Through STR/SOR investments, over 48,000 individuals have been connected to substance use navigators in emergency departments to reduce obstacles and facilitate access to treatment; 24,191 individuals have been identified with opioid use disorder (OUD); and 10,471 individuals have received MOUD during their encounter.

Additionally, as of March 2021, over 10,748 individuals have been treated with MOUD in county jails. This number is quickly growing.

The state has distributed more than 600,000 units of naloxone to law enforcement, first responders, harm reduction organizations, community organizations, county behavioral health agencies, schools, and homeless service programs. More than 37,000 overdose reversals have been reported.

To learn more about the 30 projects in the California MAT Expansion Project, visit <http://www.cdhsommat.org>.

#### Outcomes Across the Continuum of Care: Maryland Department of Health Behavioral Health Administration

Prevention	Treatment	Recovery
<ul style="list-style-type: none"> <li>Public awareness campaigns have made <b>392,719,634</b> impressions on the public, increasing knowledge of the opioid crisis and where to get help.</li> <li><b>114,968</b> individuals have been trained to provide evidence-based prevention programs.</li> <li>In hospital emergency departments, <b>248,879</b> individuals were screened for OUD, and <b>2,961</b> were referred to treatment.</li> </ul>	<ul style="list-style-type: none"> <li><b>11,317</b> individuals received substance use treatment.</li> <li>Seven counties have established crisis stabilization centers, serving <b>4,731</b> individuals to date.</li> <li><b>8,205</b> individuals have received MOUD. Of these individuals, <b>3,227</b> were referred to MOUD through Screening, Brief Intervention, and Referral to Treatment (SBIRT).</li> </ul>	<ul style="list-style-type: none"> <li><b>15,161</b> individuals who are at high risk of an overdose or are high utilizers of the emergency department have received intensive care coordination and recovery support services.</li> <li><b>50,776</b> individuals have received critical peer recovery services.</li> </ul>

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***Revisit: Supplemental funding to the Substance Use Prevention, Treatment, and Recovery Services (SUPTRS) Block Grant***

<b>Consolidated Appropriations Act, 2021 (Coronavirus Relief Package, December 2020)</b>	<b>The American Rescue Plan Act of 2021 (March 2021)</b>
\$1,650,000,000	\$1,500,000,000
<b>Deadline to spend:</b> <b>March 14, 2025</b>	<b>Deadline to spend:</b> <b>September 30, 2025</b>

# Issue:

## Federal fiscal cliff arrives September 30, 2025

**A fiscal cliff arrives Sept 30, 2025 – a deadline to spend \$1.5 billion in supplemental funds Congress added to the Substance Use Prevention, Treatment, Recovery Services (SUPTRS) Block Grant in the American Rescue Plan Act (ARPA).**

### What could be done?

- Additional federal funds to the SUPTRS Block Grant that would flow October 1, 2025
- Extend the September 30, 2025 deadline to September 30, 2026 to allow more time to allocate the ARPA supplemental dollars to the SUPTRS Block Grant.
- Combination of both additional time and additional federal or State general revenue resources

# **Issue: Investing opioid settlement funds**

**Leverage your State alcohol and drug agency – including the State alcohol and drug agency’s annual/biennial plan – as opioid settlement dollars investments are considered**

- Every State’s alcohol and drug agency develops a plan for substance use prevention, treatment, recovery.
- Many State alcohol and drug agencies already utilize county-based systems.
- Consider building reporting/evaluations to “tell the story” about opioid settlement investments



# **Issue:     Prioritize and invest in workforce initiatives**

**State-level action on workforce is critical given current federal approach to substance use disorder workforce crisis is not adequate.**

- Workforce challenges (prevention, treatment, and recovery) identified as top priority by all State alcohol and drug agencies.
- Federal substance use workforce initiatives help but often the construct of these programs are not nimble – causing a delay in their impact
  - (e.g. loan repayment vs. scholarships; federal workforce shortages as strict pathway for action)
- Workforce crisis threatens to impede progress on spending resources allocated by Congress

# Thank you

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