

March 14, 2019



D.C. Update: Administration releases 2020 budget, study finds link between adolescent alcohol exposure and increased anxiety in adulthood, new SAPT Block Grant fact sheet, and more

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## News from NASADAD

### **NASADAD releases updated fact sheet on Substance Abuse Prevention and Treatment (SAPT) Block Grant**

NASADAD has updated our [fact sheet on the Substance Abuse Prevention and Treatment \(SAPT\) Block Grant](#). The updated version includes a new analysis of the lost purchasing power of the SAPT Block Grant over the past decade; the latest outcomes data from the 2018 Block Grant Report; recent data on primary substance of use and demographics of individuals at time of admission; an overview of the set-asides within the Block Grant; the important role of the State alcohol and drug agencies; and more.

Here are some highlights:

- The SAPT Block Grant is currently funded at \$1.858 billion (FY 2019).
- Over the past decade, SAPT Block Grant funding has not kept up with health care inflation, resulting in a 24% decrease in the real value of funding since FY 2009.
- At discharge from Block Grant-funded programs, 76% of clients demonstrate abstinence from alcohol use, and 57% are abstinent from illicit drug use. Additionally, of clients discharged from treatment, 89% have stable housing, and 93% have had no arrests.
- On average, SAPT Block Grant funds make up 68% of primary prevention funding in States and Territories. In 20 States, the prevention set-aside represents 75% or more of the State agency's substance use prevention budget.
- Pregnant women must be given priority in treatment admissions, and those that are referred to the State for treatment must be placed within a program or have interim arrangements (e.g., education on communicable diseases, counseling on effects of substance use on the fetus, referral to prenatal care, etc.) made within 48 hours.
- Over one-third (34.1%) of individuals admitted to treatment in the publicly-funded system cited heroin or prescription opioids as their primary substance of use in 2016.

## Around the Agencies

### **AHRQ launches Visualization Resources of Community-Level Social Determinants of Health Challenge**

The Agency for Healthcare Research and Quality (AHRQ) recently announced a

### **NIAAA research finds link between adolescent alcohol exposure and increased anxiety in adulthood**

A study funded by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) has

[challenge competition](#) to develop new online tools to present and encourage use of free, publicly available social determinants of health data to better understand and predict communities' unmet healthcare needs. As described in a [press release](#), "Evidence suggests that using data on social determinants of health and community services may help AHRQ and others better plan for the use of limited resources, improve population health outcomes and drive savings." Participants must develop visualization tools that draw information from at least three or more free, publicly available State, federal, or local data sources. The challenge is structured in two phases. In Phase 1, participants will submit concept abstracts and prototype designs of data visualization methods, and in Phase 2, semifinalists will develop proofs-of-concept, which will be judged by an expert panel.

### **SAMHSA seeking applications for First Responders-Comprehensive Addiction and Recovery Act (FR-CARA) Grant program**

The Substance Abuse and Mental Health Services Administration (SAMHSA) is accepting applications for its [First Responders-Comprehensive Addiction and Recovery Act \(FR-CARA\) Grant program](#). Grantees will train and provide resources to first responders and members of other key community sectors at the State, tribal, and local levels on carrying and administering a drug or device for emergency treatment of opioid overdose. Recipients will also establish processes; protocols; mechanisms for referral to appropriate treatment and recovery communities; and safety around fentanyl, carfentanyl, and other dangerous licit and illicit drugs. SAMHSA plans to issue 45 grants of up to \$800,000 per year for up to 4 years. Applications are due May 6, 2019.

identified a link between adolescent alcohol exposure and specific molecular changes in the brain that contribute to increased anxiety in adulthood. A large body of evidence demonstrates a strong relationship between alcohol and anxiety problems in humans. While this preclinical research was conducted on rats, lead researcher, Dr. Subhash Pandey, stated in a [press release](#) that, "These findings provide a better understanding of how adolescent alcohol exposure can lead to life-long biomolecular changes that increase the risk for adult-onset psychiatric disorders."

### **SAMHSA releases Principles of Community-Based Behavioral Health Services for Criminal Justice Involved Individuals: A Research-Based Guide**

The Substance Abuse and Mental Health Services Administration (SAMHSA) has released a new guide, [Principles of Community-Based Behavioral Health Services for Criminal Justice Involved Individuals: A Research-Based Guide](#). The Principles provide a foundation for realizing a quality, community-based treatment system that is responsive to all individuals with mental and substance use disorders. The document is composed of eight guiding principles, frequently asked questions, resources for further reading, and a glossary of terms for behavioral health providers and criminal justice professionals. The document is meant to serve as a guide to assist: Community-based providers in their clinical and case management practice with justice-involved people who have mental and substance use disorders, and agency leaders and program developers who are responsible for shaping how their organizations deliver community-based services.

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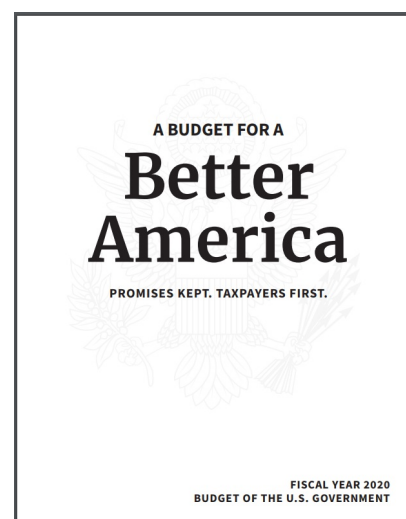
## **White House Happenings**

### **Administration releases first part of proposed FY 2020 budget**

On Monday, March 11th, President Trump released, "[A Budget for a Better America](#)," the Administration's proposed budget for fiscal year 2020 (Oct. 1, 2019-Sept. 30, 2020). The budget calls for domestic spending cuts of 5 percent across the federal government. However, the President states that, "My Budget continues historic levels of funding for our law enforcement, prevention, and treatment efforts to combat the opioid and drug addiction epidemic."

Here are some highlights included in the proposed budget as well as the Department of Health and Human Services' [Budget in Brief](#):

- **Substance Abuse Prevention and Treatment (SAPT) Block Grant:** \$1.858 billion (level funding compared to FY 2019)
- **State Opioid Response (SOR) Grants:** \$1.5 billion (level compared to FY 2019).
- **Center for Substance Abuse Treatment (CSAT)** within the Substance Abuse and



- Mental Health Services Administration (SAMHSA): \$430 million (\$31 million cut)
- **Center for Substance Abuse Prevention (CSAP)** within SAMHSA: \$144 million (\$61 million cut)
  - **Drug-Free Communities** proposed to be moved from the Office of National Drug Control Policy (ONDCP) to CSAP, funded at \$100 million (level funding compared to FY 2019 within ONDCP)
- **National Institute on Drug Abuse (NIDA)**: \$1.296 billion (\$123 million cut)
- **National Institute on Alcohol Abuse and Alcoholism (NIAAA)**: \$452 million (\$73 million cut)
- **CDC Injury Prevention and Control**: \$629 million (\$20 million cut)
- **CDC Chronic Disease Prevention and Health Promotion**: \$951 million (\$237 million cut)
- **Community Mental Health Services Block Grant**: \$723 million (\$20 million increase compared to FY 2019).
- **Comprehensive Opioid Abuse Program (COAP)** within Department of Justice (DOJ): \$145 million
- **Drug Courts, Mental Health Courts, and Veterans Treatment Courts** within DOJ: \$125 million
- **Residential Substance Abuse Treatment (RSAT)** within DOJ: \$30 million
- **Prescription Drug Monitoring Programs (PDMP)** within DOJ: \$30 million

Further details about the Administration's requests for specific programs are expected to be released next week.

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## In the News

### **Court finds that United Behavioral Health used defective criteria to reject coverage for substance use and for mental health treatment services**

A U.S. District Court has found that United Behavioral Health (UBH) used flawed internal guidelines to unlawfully deny mental health and substance use treatment for its clients. In *Wit v. United Healthcare Insurance Company*, 11 plaintiffs, on behalf of over 50,000 patients whose claims were denied based on flawed review criteria, sued UBH. Natasha Wit sought coverage for treatment of a number of conditions, including depression, anxiety, an eating disorder, and related medical complications. UBH repeatedly denied treatment using its criteria, resulting in exorbitant out-of-pocket costs. UBH denied claims based on internally developed medical necessity criteria that were far more restrictive than generally accepted standards for mental health and substance use disorder care. Specifically, the court found that UBH's criteria were skewed to cover "acute" treatment, and disregarded chronic or complex conditions that require ongoing care.

As described by [The Kennedy Forum](#), "The plaintiffs are now tasked with identifying what relief they believe is appropriate. Plaintiffs believe, at a minimum, UBH should revise and adopt new and appropriate guidelines to be upheld by the Court and reprocess class members' claims based on these guidelines. UBH will have a chance to respond. A final decision regarding the requested relief is expected later this year."

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## Upcoming Events

### **Fireside Chat with CDC's National Center for Injury Prevention & Control leadership**

The Centers for Disease Control and Prevention's (CDC) National Center for Injury Prevention and Control (NCIPC) is launching a Fireside Chat series. These Chats will offer an opportunity to hear directly from NCIPC leadership and its partners about NCIPC priorities, including opioid overdose prevention, suicide prevention, and adverse childhood experiences. The first chat will be held on Friday, March 15th, and will feature a conversation between Dr. Deb Houry, NCIPC Director, and Dr. Michael Fraser, CEO of the Association of State and Territorial Health Officials (ASTHO). They will discuss the latest data on the opioid crisis, CDC's key role in the overall public health response, and opportunities for upstream prevention.

Join the webinar [here](#).

Conference Number: 1-877-937-6089; Participant Code: 6673907

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