

Reauthorization of the Substance Abuse Prevention and Treatment (SAPT) Block Grant

The Substance Abuse Prevention and Treatment (SAPT) Block Grant, housed within the Substance Abuse and Mental Health Services Administration (SAMHSA), is a federal block grant distributed by formula to all States, Territories, and jurisdictions. The SAPT Block Grant supports States to “plan, implement, and evaluate activities that prevent and treat substance [use]” ([SAMHSA, 2022](#)). The SAPT Block Grant was last reauthorized in the 21st Century Cures Act (P.L. 114-255) in December 2016. The authorization applied through 2022. As a result, Congress is considering legislation to reauthorize the program through 2027.

The SAPT Block Grant serves as the cornerstone of States’ substance use disorder prevention, treatment, and recovery systems. State alcohol and drug agencies play a pivotal role in applying and receiving funds to distribute to counties and local communities. The funds are dedicated to evidenced-based programing, performance data management and reporting, contract monitoring, corrective action planning, onsite reviews, and technical assistance to community coalitions. Grantees are required to spend 20% of SAPT Block Grant funds on primary prevention strategies that support the general population. In addition, the SAPT Block Grant by statute is designed to serve priority populations and service areas such as:

- Pregnant women and women with dependent children
- Intravenous drug users
- Tuberculosis services
- Early intervention services for HIV/AIDS

Status of reauthorization legislation in the U.S. House of Representatives: The Substance Use Prevention, Treatment, and Recovery Services Block Grant Act of 2022 (H.R. 7235) was introduced by Representatives Paul Tonko (D-N.Y.), Brett Guthrie (R-KY), Susan Wild (D-PA), and David McKinley (R-W.V.). Ultimately, H.R. 7235 was included in a larger package of substance use disorder and mental health bills titled the Restoring Hope for Mental Health and Well-Being Act of 2022 (H.R. 7666). H.R. 7666 (Committee Report 117-364) was approved by the full House Energy and Commerce Committee on May 18, 2022. The full House of Representatives considered and approved the bill on June 22, 2022 by a vote of 402-20.

Status of reauthorization legislation in the U.S. Senate: The Substance Use Prevention, Treatment, and Recovery Act (S. 4301) was introduced by Senators Maggie Hassan (D-N.H.), Lisa Murkowski (R-AK), and Ben Ray Lujan (D-N.M.) on May 25, 2022. The bill was referred to the Senate Health, Education, Labor, and Pensions (HELP) Committee. The HELP Committee has announced its intention to develop a larger package of bills related to substance use disorders and mental health issues. As a result, a version of S. 4301 could be included in this larger Senate reauthorization package.

Outlook: Congress is set to leave Washington, D.C. for the annual summer State work period for most of August through Labor Day weekend. As a result, staff-level discussions will continue during this time. Any formal hearings or votes in the Senate would have to take place in the autumn. From there, the Senate and House will have to iron out differences between the two versions and clear a final product before Congress adjourns either before the elections or during a “lame duck” session.

Role of State Alcohol and Drug Agencies: State alcohol and drug agencies within the fifty States, District of Columbia, and Territories manage and oversee their respective SAPT Block Grant. States work with counties and local communities to ensure that public dollars are dedicated to effective and efficient programs using tools such as: performance data management and reporting, contract monitoring, corrective action planning, onsite reviews, and technical assistance to community coalitions. The National Association of State Alcohol and Drug Abuse Directors (NASADAD) serves as the voice of State alcohol and drug agencies in Washington, D.C.

Overview of SAPT Block Grant Reauthorization

	Restoring Hope for Mental Health and Well-Being Act of 2022 (H.R.7666)	Substance Use Prevention, Treatment, and Recovery Act (S.4301)
<u>Sponsor(s)</u>	Rep. Frank Pallone Jr. [D-NJ-6]	Senators Hassan [D-NH], Murkowski [R-AK], and Lujan [D-N.M.]
<u>Committee of Jurisdiction</u>	House Committee on Energy and Commerce	Senate Committee on Health Education, Labor and Pensions (HELP)
<u>Changes to the SAPT Block Grant Name</u>	✓ "Substance Use Prevention, Treatment, and Recovery Block Grant"	✓ "Block Grant for Prevention and Treatment of Substance Use"
<u>Authorization level:</u> <i>Current:</i> \$1,858,079,000	↑ "\$1,908,079,000 for each of fiscal years 2023 through 2027"	↑ "\$3,200,000,000 for each of fiscal years 2023 through 2027"
<u>Recovery Support Services</u>	Requires States, in their SAPT Block Grant plan, to "...provide a description of the State's comprehensive statewide recovery support services activities, including the number of individuals served, target populations, and priority needs; and the amount of funds received...expended on recovery support services..." [H.R. 7666, 2022]	Requires States to spend at least 10 percent of SAPT Block Grant funds for "community-based and peer recovery support services for individuals with a substance use disorder" in 2024. [S.4301, 2022]
<u>Changes to HIV Set-Aside</u>	✓ Beginning in FY 2025, any State whose rate of cases of human immunodeficiency virus (HIV) is 10 or more such cases per 100,000 individuals (as indicated by the CDC) must allocate 5 percent of SAPT Block Grant funds to early intervention services. The previous proxy was AIDS cases per 100,000 individuals. [H.R. 7666, 2022]	X
<u>Changes to Allowable and Required Use of Funds</u>	✓ States are required to routinely make available viral hepatitis screening and referral services to each individual receiving treatment for such disorders. [H.R. 7666, 2022]	✓ "Measures for infrastructure, education, or outreach to prevent overdose or other health risks" "Allow a State to allocate between 5 and 10 percent of SAPT Block Grant funds for the purpose of providing treatment services in penal or correctional institutions" "Barring funds from going to recovery programs that are not evidence-based. For instance, organizations that refuse to serve individuals receiving medication-assisted treatment – which is the gold standard for opioid use disorder treatment – would not be able to receive funding." [Murkowski, 2022]
<u>Language Changes</u>	✓ Removes "abuse" and other stigmatizing language.	✓ Removes "abuse" and other stigmatizing language.
<u>Development of a New Model Needs Assessment</u>	✓	✓