



Substance Abuse and Mental Health
Services Administration

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March 11, 2021

Dear State Mental Health Commissioner:

In accordance with the Coronavirus Response and Relief Supplement Appropriations Act, 2021 [P.L. 116-260], the Substance Abuse and Mental Health Services Administration (SAMHSA) is releasing an additional \$825 million to states through the Community Mental Health Services Block Grant (MHBG) program to assist in response to the COVID-19 pandemic. The specific language in the Act states:

Provided further, That with respect to the amount appropriated under this heading in this Act the Substance Abuse and Mental Health Services Administration may waive requirements with respect to allowable activities, timelines, or reporting requirements for theCommunity Mental Health Services Block Grant as deemed necessary to facilitate a grantee's response to coronavirus: Provided further, That such amount is designated by the Congress as being for an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985.

MHBG is designed to provide comprehensive community mental health services to adults with serious mental illness (SMI) or children with serious emotional disturbance (SED). States may use this supplemental COVID-19 Relief funding to prevent, prepare for, and respond to SMI and SED needs and gaps due to the on-going COVID-19 pandemic. The COVID-19 pandemic has significantly impacted people with mental illness. Public health recommendations, such as social distancing, are necessary to reduce the spread of COVID-19. However, these public health recommendations can at the same time negatively impact those with SMI/SED. The COVID-19 pandemic can increase stress, anxiety, feelings of isolation and loneliness, the use of alcohol or illicit substances, and other symptoms of underlying mental illness.

Too many people with SMI and SED cannot access the treatment and support that they need, and the pandemic has further disrupted access and care for even greater numbers. The Biden-Harris Administration is committed to advancing behavioral health and addressing the particular challenges the pandemic has brought to the forefront (e.g., concerning suicide and overdose rates). The MHBG is a critical source of funding to states to support a continuum of prevention, intervention, treatment, and recovery services. SAMHSA recommends that states use the COVID-19 Relief supplemental funds wherever possible to develop and support evidence-based crisis services development and to increase access to evidence-based treatment and coordinated recovery support for those with SMI and SED.

With this letter, SAMHSA is providing recommendations for potential funding use. In addition to meeting the standard goals and objectives of the MHBG to provide evidence-based services to

individuals with SMI/SED, COVID-19 Relief supplemental funds can be used for:

- a. operation of an “access line,” “crisis phone line,” or “warm lines” to address any mental health issues for individuals;
- b. training of staff and equipment that supports enhanced mental health crisis response and services;
- c. Mental Health Awareness training for first responders and others.
- d. hire of outreach and peer support workers for regular check-ins for people with SMI/SED;
- e. prison and jail re-entry and enhanced discharge from inpatient settings in order to reduce risks of COVID-19 transmission; and
- f. COVID-19 related expenses for those with SMI/SED, including testing and administering COVID vaccines, COVID awareness education, and purchase of Personal Protective Equipment (PPE)

Further information about these initiatives is summarized below.

Through careful design, planning and coordination, states can increase access through crisis response system development. A fully realized crisis response system will have the capacity to respond, deescalate, and follow-through crises so that individuals in crisis not only land safely but also transition well onto a path of recovery. Services that include three elements are ideal: someone to talk with; someone to respond and/or a place to go for rapid treatment; and stabilization. This includes attention to services that address the needs of children, particularly in regard to school re-entry and related crises for children and adolescents. Children at risk for maltreatment or who have been maltreated should also be considered.

Developing a functioning crisis response system that works well for individuals in crisis involves engagement and often new ways of working with multiple components. These can include local community mental health centers and Certified Community Behavioral Health Clinics, substance use disorder treatment centers, other providers, emergency departments and inpatient psychiatric beds, local law enforcement, social services, and others. States are encouraged to use the recently developed SAMHSA [Crisis Services: Meeting Needs, Saving Lives](#), which includes “[National Guidelines for Behavioral Health Crisis Care: Best Practice Toolkit](#)” as well as other related National Association of State Mental Health Programs Directors (NASMHPD) papers on crisis services to develop a comprehensive crisis service system.

SAMHSA requests that the following information is included when submitting the proposals:

1. Identify the needs and gaps of your state’s mental health services in the context of COVID-19.
2. Describe how your state’s spending plan proposal addresses the needs and gaps.
3. Describe how the state will advance the development of crisis services based on the *National Guidelines for Behavioral Health Crisis Care: Best Practice Toolkit*. The five percent crisis services set-aside applies to these funds.
4. Explain how your state plans to collaborate with other departments or agencies to address the identified needs.

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5. If your state plans to utilize any of the waiver provisions or the recommendations listed in this guidance, please explain how your state will implement them with these funds. (These waivers are only applicable to these COVID-19 Relief supplemental funds and not to the regular or FY 2021 MHBG funds. States will be required to provide documentation ensuring these funds are tracked separately.)

Using the webBGAS revision request, upload the document (Microsoft Word or pdf) using the upload tab into State Information Page. Please title this document “COVID-19 Supplemental Funding Plan for FY 21.” Upon submission, SAMHSA will review the proposal to ensure it is complete and responsive. Please complete the submission by April 5, 2021.

SAMHSA is ready and willing to assist you in addressing the needs of individuals with mental illness. Please feel free to contact your SAMHSA state project officers and grants management specialists with any questions that you may have.

Sincerely,

/Tom Coderre/

Tom Coderre
Acting Assistant Secretary for
Mental Health and Substance Use