

# **FACT SHEET**

## **Substance Abuse Prevention and Treatment Block Grant**

### **Program Intent**

The Substance Abuse Prevention and Treatment Block Grant (SABG) Program was authorized by Congress to provide funds to States, Territories, and one Indian Tribe for the purpose of planning, implementing, and evaluating activities to prevent and treat substance abuse and is the largest Federal program dedicated to improving publicly-funded substance abuse prevention and treatment systems.

### **Program Purpose**

- The SABG, the cornerstone of the States' substance abuse prevention and treatment systems, accounts for approximately 29 percent of all public funds expended by States and Jurisdictions for substance abuse prevention activities and treatment services. The formula grant program – with funds allocated to the States, District of Columbia, American Samoa, Commonwealth of the Northern Mariana Islands, Commonwealth of Puerto Rico, Federated States of Micronesia, Guam, Republic of the Marshall Islands, Republic of Palau, and the Red Lake Band of the Chippewa (MN) – is based on a congressionally mandated formula administered by SAMHSA's Center for Substance Abuse Prevention and Center for Substance Abuse Treatment.
- Each State and Jurisdiction has a designated unit of the executive branch that is responsible for administering the SABG program, e.g., Department of Health, Division of Mental Health and Addiction Services;
- The FY 2013 SABG as authorized by the Department of Defense, Military Construction and Veterans Affairs, and Full-Year Continuing Appropriations Act, 2013 (Pub. L. 113-6) is \$1,600,199,867.
- The data elements used to calculate allotments include total personal income, resident population, total taxable resources, population data for the territories, and a cost of services index comprised of fair market rents and mean hourly (non-manufacturing) wages.
- The SABG provides States and Jurisdictions with the flexibility to plan, carry out, and evaluate substance abuse prevention activities and treatment services provided to individuals and families.
- Each State and Jurisdiction has the flexibility to distribute the SABG funds to units of local government, e.g., county, or an intermediary, e.g., administrative service

organization, and subsequently to community- and faith-based organizations (non-governmental organizations) who deliver substance abuse prevention, early intervention, treatment, and recovery support services.

- Of the total amount appropriated for the FY 2012 SABG, five percent (\$130,893,478) is reserved for technical assistance, national data base, data collection, and program evaluations as authorized under Title XIX, Part B, Subpart II of the Public Health Service Act (42 USC § 300x-35(b)) including, but not limited to, the National Survey on Drug Use and Health (NSDUH), the Behavioral Health Services Information System (including the Treatment Episode Data Set (TEDS), Drug Abuse Warning Network (DAWN), and the National Survey of Substance Abuse Treatment Services (N-SSATS)). The SABG set-aside also supports a number of contracts which enable SAMHSA to provide expert consultants to States and Jurisdictions to provide targeted technical assistance. Further, the SABG supports program staff salaries in the Center for Substance Abuse Prevention, Division of State Programs and the Center for Substance Abuse Treatment, Division of State and Community Assistance.

### **Mandatory Allocations under Existing Block Grant Structure**

- The SABG was established in 1993 with the passage of the ADAMHA Reorganization Act of 1992 (Pub. L. 102-321) and it was amended by the Children’s Health Act of 2000 (Pub. L. 106-310). In Pub. L. 102-321, there are several mandatory expenditure requirements:
- 5 percent of the SABG is required to be used for the SAMHSA set-aside, which supports data collection, technical assistance, the national data center, and program evaluation;
- 5 percent of the SABG can be expended by the States and Jurisdictions to administer the Block Grant;
- 20 percent must be expended by the States and Jurisdictions for primary prevention activities;
- 5 percent must be expended by “designated States” for early intervention services for HIV disease;
- The remainder of the SABG can be expended by the States and Jurisdictions for substance abuse prevention, early intervention, treatment and recovery support services at grantees’ discretion.
- The authorizing legislation required SAMHSA to promulgate regulations to implement the Block Grant. The regulation (45 Code of Federal Regulations Part 96) was published in the Federal Register on March 31, 1993 and the tobacco regulation was published in the Federal Register on January 19, 1996.

- Grantees and their respective sub-recipients are also governed by the Confidentiality of Alcohol and Other Drug Patient Records (42 C.F.R. Part 2) and the Charitable Choice Provisions and Regulations; Final Rule (45 C.F.R. Parts 54 and 54a)
- Additional information regarding SAMHSA's Block Grant programs is available ([www.samhsa.gov/grants/blockgrant](http://www.samhsa.gov/grants/blockgrant)) and CSAT's Treatment Improvement Exchange ([www.tie.samhsa.gov](http://www.tie.samhsa.gov))
- The States and Territories annually apply for SABG funds; the Web Block Grant Application System enables the States and Territories to submit an electronic application to SAMHSA not later than October 1 of the Federal fiscal year for which the States and Territories are applying for a grant.

### **Impact of Federal fiscal year (FY) 2013 Sequester**

- The States that received a FY 2013 SABG Notice of Block Grant Award during the 1<sup>st</sup> or 2<sup>nd</sup> quarter will have their remaining payments reduced by 7 percent.
- The States and jurisdictions that did not receive a FY 2013 SABG Notice of Block Grant Award during the 1<sup>st</sup> or 2<sup>nd</sup> quarter will have their overall payments reduced by 5 percent.

### **Independent Evaluation of the SAPT Block Grant**

- During FY 2003, the Office of Management and Budget conducted an assessment of the SAPT Block Grant Program utilizing the Program Assessment Rating Tool (PART) <http://www.whitehouse.gov/omb/expectmore/summary/10001066.2003.html>.
- In response to the PART, SAMHSA conducted an evaluability assessment and independent evaluation of the SABG program.

### **Additional Resource Information**

1. National Association of State Alcohol and Drug Abuse Directors
  - a. ([www.nasadad.org](http://www.nasadad.org))
2. State Association of Addiction Services
  - a. ([www.saasnet.org](http://www.saasnet.org))
3. SAMHSA's Center for Behavioral Health Statistics and Quality (<http://www.samhsa.gov/data/>)
  - a. Division of Surveillance and Data Collection
    - i. Treatment Services and Survey Branch
      1. [Behavioral Health Services Information System](#)
        - a. [National Survey of Substance Abuse Treatment Services 2011](#)
        - b. [Treatment Episode Data Set \(TEDS\) 2000-2010](#)