

Substance Abuse Prevention and Treatment Block Grant (SABG)

Overview

The Substance Abuse Prevention and Treatment Block Grant (SABG) supports states in planning, implementing, and evaluating activities to prevent and treat substance abuse and/or illicit use of alcohol and other drugs. The SABG supports critical services that Medicaid or other federal and state funds do not cover, such as community prevention, recovery support services, education, training, and support for individuals seeking services and their families. A portion of the SABG funds are utilized to train peers with substance use disorder (SUD) to become certified peer counselors and provides technical assistance to community behavioral health agencies who want to add SUD peer services.

Grant funds are acquired through an application process that details how the state will spend the federal funds. Grants are awarded on an annual basis, and funding comes through the Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Substance Abuse (CSAT) and the Center for Substance Abuse Prevention (CSAP).

Eligibility requirements

Individuals who:

- Are recognized as a priority population as mandated by the grant:
- Pregnant women and women with dependent children who use drugs intravenously.
- Pregnant women and women with dependent children.
- Individuals who use drugs intravenously.
- Need medically necessary services as determined by the Diagnostic and Statistical Manual of Mental Disorders version 5 (DSM5) and American Society of Addiction Medicine (ASAM) criteria.

- Families and children who do not require treatment receive primary prevention services.

Authority

- Title XIX, Part B, Subpart II and Subpart III of the Public Health Service Act (Children's Health Act of 2000)
- Title 42, Chapter 6A, Subchapter XVII of the United States Code
- Title 45 of the Code of Federal Regulations Part 96 (45 CFR Part 96), Substance Abuse Prevention and Treatment Block Grants; Interim Final Rule
- ADAMHA Reorganization Act (Public Law 102-321, 102d Congress) of 1992
- The Office of Management and Budget (OMB) 2 CFR Part 200
- The Charitable Choice final rules published in the Federal Register on September 30, 2003
- Revised Code of Washington 70.96A


Budget

FFY2021: \$37,788,257

Federal law requires that the funds awarded to states be obligated and expended within two years. SAMHSA operates on a federal fiscal year (October to September) while Washington state operates on a July through June state fiscal year. Block grant funds awarded in October cannot be allocated until the state budget is approved the following year.

This grant does not require a state match, but requires a statutory maintenance of effort to document that the state has maintained expenditures for SUD services at a level similar to the previous two-year period.

The grant requires that at least 20 percent of the block grant funds be spent on primary prevention activities. The grant also requires 5 percent of the



total award be set aside to enhance or develop new programs for pregnant women and women with dependent children

FY20 Numbers served

Individuals who received SUD treatment: 48,298

Unduplicated direct prevention services provided: 13,592

Number of peers who received training via the Certified Peer Counselor program: 417

Number of pregnant and parenting women clients who received case management services: 1,813

Partners

DBHR works with stakeholders and the public to ensure all voices are heard in developing the application. Partners include tribes and a variety of stakeholders, including individuals in recovery from substance use disorder, counties, SUD organizations, provider associations, and problem gambling services agencies.

Oversight

DBHR has implemented a State Behavioral Health Advisory Council (BHAC) which includes membership from substance use disorder, mental health, problem gambling, individuals with lived experience of behavioral health disorders, providers, tribes, and other interested parties. BHAC reviews the state block grant plan and progress reports and provides recommendations for changes when necessary.

For More information

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