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### **SAMHSA Block Grants**

#### **What are the Block Grants?**

- The Block Grants are grants given to States to allow States to address their unique behavioral health issues.
- There are two block grants, the Substance Abuse Prevention and Treatment Block Grant (SAPT) and the Community Mental Health Services Block Grant (CMHS).

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#### **What is the purpose of the Block Grants?**

States will use the Block Grant (BG) program for prevention, treatment, recovery supports and other services that will supplement services covered by Medicaid, Medicare and private insurance. Specifically the BG funds will be directed toward four purposes:

- Fund priority treatment and support services for individuals without insurance or for whom coverage is terminated for short periods of time.
- Fund those priority treatment and support services not covered by Medicaid, Medicare or private insurance for low income individuals and that demonstrate success in improving outcomes and/or supporting recovery.
- Fund primary prevention – universal, selective and indicated prevention activities and services.
- Collect performance and outcome data to determine the ongoing effectiveness of behavioral health promotion, treatment and recovery support services and plan the implementation of new services on a nationwide basis.

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#### **Why are the Block Grants changing?**

- In lieu of changing health care systems, laws and knowledge and conditions in States, the Block Grants have followed suit.
- SAMHSA's proposed changes to the FY 2012/2013 Block Grants was to get State behavioral health systems ready for 2014 when more people were insured through Medicaid or 3rd party insurance. Under this new approach States and territories have the opportunity to use block grant dollars for prevention, treatment, recovery supports and other services that supplement services covered by Medicaid, Medicare and private insurance.

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#### **What were the significant changes?**

These changes were made to better align with the purpose of the BG. They include:

- Providing opportunity for States to submit a combined application.
- Ensuring that BG spending aligns with statewide needs assessment.
- Placing more emphasis on strategic planning and accountability.

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- Moving the planning period from a Federal to State Fiscal Year for a two-year plan with annual update.  
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### **Why has the application process changed?**

SAMHSA has developed a uniform application and reporting process to streamline the application and reporting procedures; as well as to promote consistent planning, application, assurance and reporting dates across both block grants.

The expectation of the block grant application is that States will:

- Take a broader approach in reaching beyond the populations they have historically served through block grants
- Conduct a needs assessment and develop a plan that will identify and analyze the strengths, needs and priorities of the State's behavioral health system – painting a fuller picture of the States behavioral system that we previously did not have.
- Design and develop collaborative plans for health information systems—grants and other funding.
- Form strategic partnerships to provide individuals better access to good and modern health services
- Focus more on services in support of recovery from mental health and substance use problems.
- Focus their block programs on improving accountability for quality and performance of services they provide.
- Conduct tribal consultation activities on decisions necessary to insure culturally appropriate, effective and accessible behavioral health services.
- Fund primary prevention – universal, selective and indicated prevention activities and services for persons not identified as needing treatment.
- Collect performance and outcome data to determine the ongoing effectiveness of behavioral health promotion, treatment and recovery support services and plan the implementation of new services on a nationwide basis.

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### **What is the obligation and expenditure period for Block Grant funds and can these dates be extended?**

Per Title 42, USC §300x-62(a), Block Grant funds are available for obligation and expenditure until the end of the fiscal year following the fiscal year for which the funds were appropriated.

For example, the obligation and expenditure period for the FFY 2014 SAPT Block Grant award is 10/1/2013 to 9/30/2014. The obligation and expenditure periods are fixed by statute and no extensions are authorized. A federal agency is a creature of law, and can function only to the extent authorized by law. Thus, if the statute does not authorize an extension, none can be granted.

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### **Are there required assurances the State must sign in order to receive block grant funding?**

Yes, The State must sign agreements and assurances which then are passed on to contractors and subcontractors. Like the State, Contractors assure they have:

- Not been debarred or suspended;
- Not used funds for lobbying activities or expenditures;
- Enacted drug-free workplace policy; and
- Enacted an Indoor anti-smoking policy in all facilities.

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### **Do block grant requirements need to be handed down to the subcontractor?**

Yes, when funds are distributed to the State then all requirements must be passed on to every entity that received block grant funding from the Single State Agency (which is the Department of Social and Health Services). Tribes are only exempt from the block grant requirements when they apply for the funding directly from the federal Department of Health and Human Services, Substance Abuse Mental Health Services Administration.

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### **How are administrative costs defined under Block Grant regulations?**

The Block Grant regulations do not specifically define "administrative costs." Thus, pursuant to Title 45, Code of Federal Regulations, Part 96, §96.30, the state's processes and procedures apply.

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### **Are there Maintenance of Effort (MOE) requirements for block grant funds?**

Yes, the block grant requires the State to maintain expenditures for substance abuse services at a level that is not less than the average level of such expenditures maintained by the State for the 2-year period proceeding the fiscal year for which the State is applying for the grant.

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### **Can changes be made to the block grant requirements?**

Federal and State mandates are not negotiable and DBHR does not have the authority to waive such requirements or mandates in the contracting process. DBHR's acceptances of such mandates are pre-conditions of receiving resource allocations.

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### **Can block grant funds be contracted to "for-profit" agencies?**

Yes, as long as the contracts remain a procurement/acquisition fee-for-service relationship.

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### **Do Block Grant funds need to be fiscally tracked?**

Title 42, USC Section 300x-62 requires that Block Grant funds be obligated by the end of the Federal Fiscal Year (FFY) appropriated and if obligated within such year, remains available for expenditure until the end of the succeeding FFY.

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### **What services cannot be paid for with Block Grant funding?**

The Block Grant funding cannot be used for the following:

- To provide inpatient hospital services
- To make cash payments to intended recipients of health services
- To purchase or improve land, purchase, construct, or permanently improve (other than minor remodeling) any building or other facility, or purchase major medical equipment;
- To satisfy any requirement for the expenditure of non-Federal funds as a condition for the receipt of Federal funds
- To provide financial assistance to any entity other than a public or nonprofit private entity;
- To provide individuals with hypodermic needles or syringes so that such individuals may use illegal drugs, unless the Surgeon General of the Public Health Service determines that a demonstration needle exchange program would be effective in reducing drug abuse and the risk that the public will become infected with the etiologic agent for AIDS.
- To pay the salary of an individual through a grant or other extramural mechanism at a rate in excess of Level I of the Executive Salary Schedule for the award year; see [http://grants.nih.gov/grants/policy/salcap\\_summary.htm](http://grants.nih.gov/grants/policy/salcap_summary.htm)
- To purchase treatment services in penal or correctional institutions

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### **Can funds from one federal grant be used as matching funds for another federal grant or can the same non-federal funds be used to match two federal grants?**

Neither the federal nor the nonfederal share of a particular grant program may be used by a grantee to match funds provided under another federal grant program, unless specifically authorized by law. In other words, a grantee may neither use funds received under one federal grant to meet the matching funds requirement of a separate grant, nor may it use the same grantee dollars to meet two separate matching requirements. It is also important to note that the *Common Rule* for grants, Section 24, prohibits the use of federal funds and grantee funds to match more than one federal grant.

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### **Can block grant funds be used to provide services that are not covered by Title-XIX?**

Yes. Block Grant funding may be expended for services not covered by TXIX; however, the provider must adhere to the priority population funding requirements. [\(Return to Top\)](#)

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### **Can funds be used to support application for a 501-c3?**

No, because funding is for providing services. This is setting up an organization to not provide a prevention services. This type of cost would not fit into any of the billing reporting we currently have to report on.

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### **Can BG funds be used to buy food at meetings?**

Yes, if the primary purpose of the meetings and conferences is the dissemination of technical information. This includes cost of meals, transportation, rental of facilities, speakers' fees, and other items incidental to such meetings or conferences. Costs must be necessary and reasonable for proper and efficient performance and administration of Federal awards; and be adequately documented. A cost is reasonable if, in its nature and amount, does not exceed that which would be incurred by a prudent person under the circumstance prevailing at the time the decision was made to incur the cost.

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### **Can block grant funds be used to provide services that are not covered by Title-XIX?**

Yes. SAPT funding may be expended for services not covered by TXIX; however, for treatment services the provider must adhere to the priority population funding requirements.

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### **Are there rules about purchasing equipment with block grant funds?**

Yes, according to [Title 45, Part 92-Uniform Administrative Requirements for Grants and Cooperative Agreements to State, Local, and Tribal Governments, Sec. 92.32 Equipment, \(d\) Management Requirement](#).

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### **What are the duties of the Behavioral Health Advisory Council (BHAC)?**

- To review block grant plans provided by the State and to submit to the State any recommendations for modifications to the plans.
- To serve as an advocate for adults with a Serious Mental Illness, children with a Serious Emotional Disturbance, and other individuals with mental illnesses or emotional problems; and
- To monitor, review, and evaluate, , the allocation and adequacy of mental health services within the State.

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### **How is the BHAC membership defined?**

Council membership must be composed of State/territory residents, including representative of the following:

- Principle State agencies: mental health, education, vocational rehabilitation, criminal justice, housing, social services and Medicaid.



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- Public and private entities concerned with the need, planning, operation, funding and use of behavioral health services and related support services.
- Adults with SMI who are receiving (or have received) mental health services

The families of such adults or children with an SMI or SED

- i. The ration of parents of children with a SED to other members of the council must be sufficient to provide adequate representation of such children in the deliberations of the Council
- ii. 50% of the members of the Council are to be individuals who are not State employees or providers of behavioral health services. [\(Return to Top\)](#)

### SUBSTANCE ABUSE PREVENTION AND TREATMENT BLOCK GRANT

#### **Is licensing substance abuse treatment programs an authorized activity under the Substance Abuse Prevention and Treatment (SAPT) Block Grant?**

Yes! Licensing substance abuse treatment programs is part of Quality Assurance. Quality Assurance includes activities to assure conformity to acceptable professional standards and identify problems that need to be remedied. Quality Assurance is part of substance abuse treatment, which is authorized pursuant to Title 42, USC §300x-21(b). [\(Return to Top\)](#)

#### **Is there a specific requirement that treatment and/or prevention activities be an evidence based practice (EBPs)?**

Yes, for SAPT funds EBPs for prevention are required. For CMHS funds it is not required as of yet, it is foreseeable that EBPs will become a requirement one day. [\(Return to Top\)](#)

#### **Can SAPT funds be used to provide services to individuals who have a co-occurring general mental health disorder, or a serious mental illness?**

SAPT funding may be used to cover the substance abuse treatment services for co-occurring individuals; however, the provider must adhere to the priority population placement and funding requirements. [\(Return to Top\)](#)

#### **Can State Grant In Aid (SGIA) counted toward Block Grant MOE be used to match another federal grant?**

Generally, yes, but the statutory and regulatory requirements governing the other federal grant(s) must be reviewed prior to making a final determination as to whether or not SGIA counted towards the MOE can be used to match another federal grant. For example, state general funds included in the state's MOE requirement can be used to match federal Medicaid funds for treatment services.

The purpose of maintenance of effort requirement is to ensure that funds provided by the federal government are used to fund an increased level of program activity, and that the grantee does not simply supplant SGIA

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dollars with federal dollars. Any amount of the MOE used to match one federal grant (e.g. Medicaid) cannot be used to match another federal grant. [\(Return to Top\)](#)

### **To what SAPT Block Grant set-asides can the costs of Resource Development activities be applied?**

The costs of Resource Development activities are not limited to Administration. The costs of Resource Development activities can be applied to substance abuse treatment, the twenty- percent primary prevention set-aside, *and/or* to Administration. Resource Development activities include planning, coordination, and needs assessment, quality assurance, training (post-employment), education (pre-employment), program development, research and evaluation, and information systems. [\(Return to Top\)](#)

### **Can SAPT Block Grant funds be used for Tobacco Cessation Counseling?**

SAPT Block Grant funds can be used for Tobacco Cessation Counseling as long as this counseling is part of the clients' substance abuse treatment plan and **NOT** a stand-alone program or initiative. Title 42, USC §300x-21(b) authorizes the use of SAPT Block Grant funds only for the purpose of planning, carrying out, and evaluating activities to prevent and treat substance abuse, and for related activities contained in 42 USC §300x-24. [\(Return to Top\)](#)

### **Is the expenditure for Vocational Rehabilitation Services authorized under the SAPT Block Grant?**

The use of SAPT Block Grant funds is not allowed for Vocational Rehabilitation Services. Vocational Rehabilitation Services provide for gaining and maintaining job skills, which allow for productive employment. Vocational rehabilitation includes vocational testing, counseling, guidance, job training, job placement, and other relevant activities designed to improve a person's ability to become economically self-supporting.

Per Title 42, USC §300x-21(b), SAPT Block Grant funds can **ONLY** be expended for planning, carrying out, and evaluating activities to prevent and treat substance abuse. [\(Return to Top\)](#)

### **Can SAPT Block Grant funds be expended for group homes or transitional housing?**

SAPT Block Grant funds can be used to establish and maintain a revolving fund to make **loans** to group homes (Title 24, USC §330x-25). In Washington, this program is called the Oxford Housing Program. They provide interest-free loans up to \$4,000 to rent a house or an apartment to be used as an alcohol and drug-free, self-supporting living arrangement for individuals who are recovering alcoholics and/or drug addicts. Loans are to be repaid in two years.

Otherwise, SAPT Block Grant funds cannot be used to fund group homes or transitional housing. SAPT Block Grant funds can be used for residential adolescent and adult treatment programs not considered group homes or transitional housing. [\(Return to Top\)](#)

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### **Can SAPT Block Grant funds be used to augment funding for programs that receive insufficient program funding? (For example, can SAPT Block Grant funds be used to fund activities performed under drug courts, parole service network, etc.?)**

The answer would be yes if all the following conditions are met:

- The SAPT Block Grant funds are used ONLY for planning, carrying out, and evaluating activities to prevent or treat substance abuse;
- The expenditure does not violate a state law or procedure for expending of state funds; and
- The expenditure does not circumvent a requirement, term or condition, or other restriction or prohibition of another federal grant.

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### **What activities can be funded with SAPT Block Grant funds?**

- Title 42, USC §300x-31(a)(2) authorizes the state to use up to 5 percent of a SAPT Block Grant award for administrative costs.
- Title 42, USC. §300x-22(a) requires 20 percent of a SAPT Block Grant award to be used for Primary Prevention.
- Title 42, USC. §300x-22(b) requires that the sum of 5 percent of the SAPT Block Grant award be expended to increase treatment services designed for pregnant women and women with dependent children.
- Title 42, USC §300x-21(b) contains the authorized activities for the SAPT Block Grant. This section states that the state will expend the grant ONLY for the purpose of planning, carrying out, and evaluating activities to prevent and treat substance abuse and for related activities authorized in Section 300x-24. Section 300x-24 contains the requirements governing the use of SAPT Block Grant funds for HIV Early Intervention Services (Washington is not and HIV state) and Tuberculosis Services.

Per Title 45, Code of Federal Regulations, Part 96, §96.137, the SAPT Block Grant must be the funding of last resort for services authorized under Section 300x-22(b), Allocations Regarding Women, and Section 300x-24, Requirements Regarding Tuberculosis and Human Immunodeficiency Virus.

Just because an activity is authorized does not necessarily mean that the corresponding expenditure is allowable. For example, any cost allocable to other federal grant awards or programs may not be charged to the SAPT Block Grant to overcome any restrictions, to fund deficiencies, to avoid restrictions imposed by law or terms of the federal awards, or for other reasons. [\(Return to Top\)](#)

### **Are there required SAPT Block Grant set-asides?**

Yes, the federal government requires that:

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- At least 5 percent of grant funds be used to increase availability of treatment services (either by establishing new programs or expanding the capacity of existing programs) for pregnant women and women with dependent children;
- No less than 35 percent will be expended for prevention and treatment activities regarding alcohol;
- No less than 35 percent for prevention and treatment activities for prevention and treatment activities regarding other drugs; and
- No less than 20 percent for primary prevention. Funds utilized under this set-aside must be identified and tracked in order to maintain accountability.

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### **What happens when one or more SAPT Block Grant set-asides are not met?**

There are two potential outcomes. One occurs when a set-aside was not met because the funds were not expended. In this case, the unexpended federal funds would be returned to the federal government. The second outcome occurs when the set-aside was not met and the federal funds were expended. In this instance, the Department may not be able to establish that it is entitled to retain the funds. The Department would be subject to repaying, with interest, the amount by which it failed to comply with a given set-aside. Since the grant funds were expended, repayment would be made from the non-Federal funds. The penalties for failure to comply with the SAPT Block Grant requirements/agreements are contained in Title 42, USC §300x-55. [\(Return to Top\)](#)

### **Can SAPT Block Grant funds be expended for drug testing?**

If the cost is part of an alcohol and other drug treatment program and regime, and is NOT a standalone cost, SAPT Block Grant funds can be used for drug testing. [\(Return to Top\)](#)

### **Do the SAPT Block Grant regulations contain a non-supplantation requirement?**

Yes! In addition to the SAPT MOE, Title 45, CFR, Part 96, §96.134(a) contains a non-supplantation requirement. Section 96.134(a) reads in part "The Block Grant shall not be used to supplant state funding of alcohol and other drug prevention and treatment programs."

The Federal Register dated March 31, 1993, contains the statement: "In addition to the maintenance of effort by the principal agency, the Secretary requires the state not to use the Block Grant to supplant State funding of substance abuse prevention and treatment programs." [\(Return to Top\)](#)

### **What types of services is the SAPT Block Grant the funding of last resort?**

Per Title 45, CFR, Part 96, §96.137, the SAPT Block Grant must be the funding of last resort for services authorized under §300x-22(b), and §300x-24. Section 300x-22(b) pertains to services to pregnant women and women with dependent children. Section 300x-24 pertains to HIV Early Intervention Services and Tuberculosis Services. [\(Return to Top\)](#)

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### **What types of substance abuse activities will SAPT fund?**

Projects for the development and implementation of prevention, treatment and rehabilitation activities directed to the diseases of alcohol and drug use, including:

- Treatment: assessment, outpatient counseling, residential rehabilitation -including therapeutic communities, hospital based care (not inpatient hospital services); vocational counseling, case management
- Outreach
- Detoxification
- Prevention: education, counseling and other activities designed to reduce the risk of substance abuse
- Group Homes for persons recovering from substance use disorder
- Program Administration

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### **Can all services be supported with block grant funds?**

Due to limits on public funding from all sources managed by DBHR, and the increasing demands on this funding, it is necessary to remind providers that these public funds are intended to provide professional substance abuse treatment services for those who are most clinically in need of these services, and financially unable to pay the cost of these needed services. Persons who do not meet active substance abuse or dependency diagnosis criteria may not be eligible for public funding supports beyond an initial screening or assessment, and/or minimum initial service period. Such persons may elect, independently or with court directive, to participate in educational, or other services, without proper authorization, but may be expected to pay privately for these services, with advance notice of fees from the program to the client. A person who claims no recurring use of alcohol or other illicit drugs within the past year is not considered actively using.

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### **Will the SAPT pay for all types of assessments?**

Full assessment, funded by the block grant, are to be provided only for clients who are requesting treatment and/or who, based on screening or observation, have a clear and present need to enter some level of professional substance use disorder treatment beyond the assessment.

DBHR block grant funding shall not be used for procedural “assessments-only” or evaluations ordered of the client by a court or other authority primarily for fact-finding purposes of an external agency or for driver’s license re-evaluations or reinstatement, or for CPS directed assessments for evaluative purposes only.

Clients seeking only assessments or evaluations, to meet court obligations may be expected to be financially

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responsible for the cost of these services, and the nature of service provided, and charges, are at the discretion of the provider.

New clients, who request an “assessment only” visit for external report purposes, should be informed that they may be financially responsible for this service, and what the cost will be prior to the delivery of the service. [\(Return to Top\)](#)

### **Can SAPT funds be used for HIV Early Intervention activities or services?**

No, Washington State is not considered an HIV State therefore block grant funds cannot be used for HIV activities or services. [\(Return to Top\)](#)

### Prevention

#### **What is “primary prevention?”**

Primary prevention programs are:

- For individuals who do not require treatment for substance abuse;
- To educate and counsel the individuals on such abuse; and
- To provide activities to reduce the risk of such abuse by the individual.
- Activities that address one or more of the six strategies: Information Dissemination; Education; Alternatives; Problem Identification and Referral; Community-based Process; or Environmental.

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### **Can SAPT funds be used to pay police officers and teachers to do prevention programs?**

Generally, no, police and teachers usually have inherent governmental duties and their salaries are already being paid. In this case supplanting would occur if SAPT funds were used to pay them. [\(Return to Top\)](#)

### **Can the SAPT funds be used to pay salaries for prevention specialist to write other grants, such as Drug-Free Communities?**

No, it is not allowable to use SAPT Block Grant dollars to pay the salary of people applying for other Federal funds. [\(Return to Top\)](#)

### **Are there restrictions on purchases for prevention services?**

Yes, there are restrictions. SAPT funds may not be used for anything that cannot be tied directly to a prevention activity. Examples include:

Internet and/or cable service	Rent
Utilities	Televisions
Shoes	Personal items (i.e., denture cream, feminine hygiene products, etc.)

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Diapers	Grocery items for non-prevention activities
Cell phones	Sporting good for non-prevention activities
Car payments	501 c3 applications

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### **Can block grant funds be used to support maternity, annual or sick leave for prevention specialist?**

Supporting leave, especially maternity leave, is a slippery issue because the purpose of the block grant is to plan, carry out, and evaluate activities to prevent and treat substance abuse or mental health. Prevention specialists can be supported because they are doing what is necessary to support the purpose of the block grant which is to plan, carry out, and evaluate activities. Technically prevention activities are not being provided while on maternity leave. Paying for maternity leave reduces available funds to support prevention activities. [\(Return to Top\)](#)

### [Treatment Services](#)

#### **What priority populations can be served with SAPT treatment funding?**

In order of priority:

- Pregnant injecting drug users
- Pregnant substance abusers
- Injecting Drug Users
- All other clients with a substance use disorder, regardless of gender or substance preference (as funding is available)

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#### **Is there an age restriction on the population to be served?**

No. However, patients under age 10 require approval of DSHS. [\(Return to Top\)](#)

#### **Will SAPT funds pay for treatment services to undocumented clients?**

No, according to Washington State law services provided to undocumented clients will not be reimbursed from any funding source. [\(Return to Top\)](#)

#### **Does SAPT funding support detoxification services?**

Yes. However, the State has the discretion to determine which treatment services will be funded with SAPT funds based on need and financial constraints. [\(Return to Top\)](#)

#### **Can providers charge a co-payment for SAPT-funded treatment services?**

Yes, low-income clients can be charged a co-payment according to a sliding fee-schedule. The following language is currently in contracts:



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- Indigent patients are exempt from this fee requirement.
- Interim services are exempted from this fee requirement

**NOTE: Fees may not be charged to Medicaid clients**

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### [Women's and IV Drug Treatment Services](#)

#### **What does Payor of Last Resort mean?**

Block Grant funds administered by DBHR are the last source of payment. If a client has Medicaid funding, or partial insurance, all of these sources would be primary and should be billed first. [\(Return to Top\)](#)

#### **Are SAPT funds the "Payor of Last Resort?"**

Yes, SAPT funds are used as the payment of last resort for treatment services provided to pregnant women and women with dependent children and tuberculosis services. Contractors that receive Block Grant funding and provide these services will make every reasonable effort, including the establishment of systems for eligibility determination, billing, and collection, to:

- Collect reimbursement for the costs of providing such services to persons who are entitled to insurance benefits under the Social Security Act, including programs under Title XVIII and Title XIX, any State compensation program, and other public assistance program for medical expenses, any grant program, any private health insurance and any other benefit program.
- Secure from patients or clients payments for services in accordance with their ability to pay.

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#### **When do interim services need to be provided?**

Interim services are to be provided within 48 hours upon intake/assessment.

The following, at a minimum, are required interim services for women & intravenous substance abusers:

- Risk assessment
- Counseling/education about HIV and Tuberculosis
- Counseling on effects of alcohol/drug use on the fetus (if applicable)
- Referral to primary or prenatal care

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#### **If a person identifies a treatment need for residential, detoxification, or intensive outpatient and the client is able to start that identified treatment 14 days, are interim services needed?**

Yes, if the identified services are available within the required timeframes interim services, should still be provided within 48 hours. Also, if the person is reassessed as needing a treatment service that is not currently available, interim services are required. [\(Return to Top\)](#)



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### **What if the identified treatment is not currently available?**

If a person is referred to a treatment or level of care that has been identified as a clinical need and is not available, the client is to be put on a waiting list. Interim services must then be provided within 48 hours and continuously provided until the most appropriate treatment or level of care becomes available.

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### **If a person refuses treatment, no shows, cancels treatment or patient says they are not interested in treatment, do interim services need to be provided, and does the wait list report need to be completed?**

Yes, interim services must be provided to all clients. If a person refuses treatment, does not show or cancels referral/treatment, the wait list report needs to be completed by providers with their engagement activities indicated. [\(Return to Top\)](#)

## COMMUNITY MENTAL HEALTH SERVICES BLOCK GRANT

### **What is the CMHS Block Grant?**

The CMHS Block Grant is allocated from the Substance Abuse and Mental Health Services Administration (SAMSHA) to provide mental health services to adults diagnosed with Serious Mental Illness (SMI) and children diagnosed with Serious Emotional Disturbance (SED). It is designed to support States in reducing their reliance on psychiatric inpatient services and to facilitate the development of effective community-based mental health services and programs for adults with SMI and children with SED. This grant has the following goals:

- To ensure access to a comprehensive system of care, including employment, housing, case management, rehabilitation, dental services, and health services, as well as mental health services and supports;
- To promote participation by consumer/survivors and their families in planning and implementing services and programs, as well as in evaluating State mental health systems;
- To ensure access for underserved populations, including people who are homeless, residents of rural areas, and older adults;
- To promote recovery and community integration for adults with SMI and children with SED;
- To increase accountability through uniform reporting on access, quality, and outcomes of services.

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### **Can anyone be served with the CMHS Block Grant?**

Only persons with diagnosed with SMI or SED qualify as eligible for services under the CMHS Block grant.

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### **How does Washington define SMI and SED?**

The determination of SMI requires both a qualifying SMI diagnosis and functional impairment as a result of the qualifying diagnosis.

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The definition of children with SED is as follows:

1. Children from birth up to age 18, AND
2. Child currently or at any time during the past year, has had a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified in the Diagnostic and Statistical Manual, AND
3. The mental, behavioral or emotional disorder has resulted in functional impairment which substantially interferes with or limits the child's role or functioning in family, school, or community activities. Such roles or functioning include achieving or maintaining developmentally appropriate social, behavioral, cognitive, communicative, or adaptive skills. Functional impairments of episodic, recurrent, and continuous duration are included unless they are temporary and expected responses to stressful events in the environment.

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### **How are CMHS grant funds allocated?**

Washington allocates 5 % for state administration to manage and monitor the plan, up to 70% to Behavioral Health Organizations, 5% toward children services and the remainder to support projects managed through headquarters. Projects include, but not limited to:

- Consumer advocate positions
- Evidence-Based Practices trainings
- Stigma reduction
- Crisis Intervention training
- Continuing Education and Employment Services to consumers
- Homeless Outreach
- Peer support counselor training
- Consumer and Family Education
- Community based services to consumers in rural areas

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### **What services can be paid for with the CMHS Block Grant?**

Services for those consumers or services not covered by Medicaid. [\(Return to Top\)](#)

### **Can the CMHS Block Grant be used for crisis services?**

Yes, a limited amount of the CMHS funding can be utilized for crisis services, provided the individual is SMI or SED. [\(Return to Top\)](#)

### **Can the person receiving CMHS funded services be required to pay co-pay?**

Persons provided services paid for with CMHS Block Grant funds cannot be charged co-pays.

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## SAMHSA Block Grants Frequently Asked Questions

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### **Can CMHS be utilized for Room and Board?**

It is an appropriate use of CMHS Block Grant funds for Room and Board for SED. However, Room and Board is not an allowable service for CMHS SMI funds. [\(Return to Top\)](#)

### **Can CMHS funds be used for discharge planning from criminal justice institutions?**

No, Block Grant funds cannot be utilized to provide services to individuals who are incarcerated. [\(Return to Top\)](#)

### **Can costs to a landlord for repairs to an apartment to maintain a placement for an individual in housing be covered?**

Yes, funds that are provided by the state to the agency/contractor/landlord who is running the program can be used for repair and maintenance in order to support and maintain the programs. Funds cannot be used for construction or to permanently improve structures or for direct payment to consumers (like rent, etc.) [\(Return to Top\)](#)

### **Can Ombudsman services be supported with CMHS funds?**

Yes, so long as such is in support of the community MH programs and supports MH needs of SMI/SED populations. [\(Return to Top\)](#)

### **May the CMHS funds be used to support Quality Review Team work?**

Yes. [\(Return to Top\)](#)

### **Can CMHS support the costs of flex funds – e.g. grocery cards, rent, deposits, utilities for MH consumers?**

No, but can fund transportation programs for SMI/SED population to get to services. [\(Return to Top\)](#)

### **Can CMHS funds be used to provide transportation expense reimbursement for attending planning council meetings?**

Funds can be used to reimburse consumers and planning council members for transportation to and from services, training, council meetings, etc. [\(Return to Top\)](#)

### **Can CMHS funds be used to conduct activities to increase the number of kids staying in school?**

Activities have to be specific to the SED population as a system of care for MH consumers to encourage sustained mental health. [\(Return to Top\)](#)

## SAMHSA Block Grants Frequently Asked Questions

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### **Can CMHS funds be used to create a telehealth network?**

Yes, so long as it serves mental health needs for SMI/SED populations and if funds are going toward program and administrative costs are used according to guidelines. Will need specific info on what is being purchased for this as well as expenditures for hiring of personnel, cost for equipment, etc.

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### **Can CMHS funding be used to support prevention activities?**

There is no guidance on what prevention activities entail, but if programs are focused on wellness to SMI or SED populations, those programs would be approved with explanation.

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### **Why is there a Children's set aside in the BG? Where did it come from and how did it come about?**

As part of SAMHSA's reauthorization, SAMHSA revised the language in the Statute to "with respect to children with serious emotional disturbance, a funding agreement for a grant under section 1911 is that the state/territory involved will expend not less than 10%.

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