

Tribal Consultation Block Grant Priorities FFY26-FFY27

Opening Statements

- ▶ Tribal Leaders
- ▶ State Agency Representatives

Block Grant Biennial Application and Timeline

The Block Grant biennial application prioritizes federal funding to address SUD and MH needs within Washington.

DTLL sent by
HCA April,
2025 with
informative
attachments

SAMHSA
opens
application
July 1, 2025

Tribal
Consultation:
August 12,
2025

Application
due
September 1,
2025.

Tribal
listening
session with
HCA June,
2025

Tribal
Roundtables:
July 1 & July
16, 2025

Public
Comment
period
tentatively
scheduled
August 18 –
22, 2025

FY2026-FY2027 Updated Priorities

Priority 1: Tribes

- ▶ **Indicator 1:** Maintain substance use disorder prevention services to American Indian/Alaska Natives
- ▶ **Baseline Measurement:** SUD Prevention – Average of 39,373 total unduplicated and duplicated participants served by direct tribal prevention services provided during SFY2022 (July 1, 2023-June 30, 2024)
- ▶ **Prior First Year Target:** Increase or maintain 51,714 total unduplicated and duplicated participants in direct services prevention programs
 - ▶ Proposed new year one target for SFY26 51,714
- ▶ **Prior Second Year Target:** Increase or maintain 51,714 total unduplicated and duplicated participants in direct services prevention programs
 - ▶ Proposed new year two target for SFY27 51,714
- ▶ **Data Source:** Minerva – SUD Prevention and MH Promotion Online Reporting System

Priority 1: Tribes

- ▶ **Indicator 2:** Maintain substance use disorder intervention, treatment and recovery support services to American Indian/Alaska Natives
- ▶ **Baseline Measurement:** SUD treatment outpatient services – individuals Served 4,578 (July 1, 2023-June 30,2024)
- ▶ **Prior First Year Target:** Maintain SUD treatment outpatient services – individuals Served 3,335
 - ▶ Proposed new year one target for SFY26 3,335
- ▶ **Prior Second Year Target:** Maintain SUD treatment outpatient services – individuals Served 3,335
 - ▶ Proposed new year one target for SFY27 3,335
- ▶ **Data Source:** Target, or its successor, for treatment counts.

Priority 1: Tribes

- ▶ **Indicator 3:** Maintain opioid treatment programs providing services to American Indian/Alaska Natives.
- ▶ **Baseline Measurement:** Opioid Treatment Programs (OTP's) within Tribes: 10 OTPs for SFY2024 (July 1, 2023-June 30, 2024)
- ▶ **Prior First Year Target:** Increase tribal MOUD and OTPs to a total of 8 OTPs available in tribal communities.
 - ▶ Proposed new year one target for SFY26 10 OTPs
- ▶ **Prior Second Year Target:** Increase tribal MOUD and OTPs to a total of 10 OTPs available in tribal communities.
 - ▶ Proposed new year one target for SFY27 10 OTPs
- ▶ **Data Source:** Data collected from State Opioid Authority
- ▶ [OTPs Fact Sheet](#)

Priority 1: Tribes

- ▶ **Indicator 4:** G2G
- ▶ **Baseline Measurement:** 28 tribal plans completed with tribal governments for SFY2025.
- ▶ **Proposed First Year Target:** Maintain number of Tribal plans completed with at least 28 Tribal governments for SFY2026.
- ▶ **Proposed Second Year Target:** Maintain number of tribal plans completed with at least 28 tribal governments for SYF2027
- ▶ **Data Source:** Government to Government tribal agreements.

Priority 2: Prevention

- ▶ **Indicator 1:** Reduce substance use/misuse for youth
- ▶ **Baseline Measurement:** Average 13,596 unduplicated participants served by direct services provided between SFY24 (July 1, 2023-June 30, 2024).
- ▶ **First Year Target:** Maintain a minimum of 12,662 unduplicated participants in direct services prevention programs.
- ▶ **Second Year Target:** Maintain a minimum of 12,662 unduplicated participants in direct services prevention programs.
- ▶ **Data Source:** Minerva, Washington State Healthy Youth Survey (HYS), Washington State Young Adult Health Survey
- ▶ [Washington Young Adult Health Survey \(YAHS\) fact sheet](#)
- ▶ [Washington State Healthy Youth Survey \(HYS\)](#)

Priority 3: SUD Treatment Services - Youth

- ▶ **Indicator 1:** Increase youth outpatient SUD treatment services.
- ▶ **Baseline Measurement:** SFY24 1,880 Apple Health-enrolled youth (13-17 years) received SUD treatment services.
- ▶ **First Year Target:** Maintain the number of Apple Health enrolled youth receiving SUD outpatient services in SFY2026 to 1,800
- ▶ **Second Year Target:** Maintain the number of youths receiving SUD outpatient treatment services in SFY2027 to 1,800
- ▶ **Data Source:** BHDS
- ▶ [SUD Outpatient Services Fact Sheet](#)
- ▶ [Youth SUD Treatment Services](#)

Priority 3: SUD Treatment Services - Adults

- ▶ **Indicator 2:** Increase outpatient SUD and access to Medications for Opioid Use Disorder (MOUD) for adults in need of SUD treatment.
- ▶ **Baseline Measurement:** SFY24: 45,046 individuals received SUD and MOUD treatment services.
- ▶ **First Year Target:** Increase the number of individuals receiving outpatient SUD treatment and MOUD services at an Opioid Treatment Program in SFY26 to 47,298, which would be a 5% Increase.
- ▶ **Second Year Target:** Increase the number of individuals receiving outpatient SUD treatment and MOUD services at an Opioid Treatment Program in SFY27 to 49,662, which would be a 5% increase from SFY27 target.
- ▶ **Data Source:** BHDS
- ▶ [SUD Outpatient Services Fact Sheet](#)
- ▶ [Naloxone Distribution Fact Sheet](#)

Priority 4: Mental Health Treatment Services - Youth

- ▶ **Indicator 1:** Maintain outpatient Mental Health services to youth with Serious Emotional Disturbance (SED)
- ▶ **Baseline Measurement:** SFY2024: 85,954 youth with SED received services.
- ▶ **First Year Target:** Maintain the number of youths with SED receiving Outpatient services to at least 76,000
- ▶ **Second Year Target:** Maintain the number of youths with SED receiving Outpatient services to at least 76,000
- ▶ **Data Source:** BHDS

Priority 4: Mental Health Treatment Services – Adults

- ▶ **Indicator 2:** Maintain Mental Health outpatient services for adults with Serious Mental Illness (SMI)
- ▶ **Baseline Measurement:** SFY2024: 241,201 adults with Serious Mental Illness (SMI) received mental health outpatient services.
- ▶ **First Year Target:** A minimum of 200,000 adults with SMI receiving mental health outpatient services in SFY2026.
- ▶ **Second Year Target:** A minimum of 200,000 adults with SMI receiving mental health outpatient services in SFY2027.
- ▶ **Data Source:** BHDS

Priority 5: First Episode Psychosis

- ▶ **Indicator:** Maintain outpatient MH capacity for youth with FEP.
- ▶ **Baseline Measurement:** SFY2024 16 FEP programs served a total of 287 youth
- ▶ **First Year Target:** Maintain the number of anticipated coordinated specialty care sites to 15, while maintaining services to a total of 280 youth statewide.
- ▶ **Second Year Target:** Maintain the number of anticipated coordinated specialty care sites to 15, while maintaining services to a total of 280 youth statewide.
- ▶ **Data Source:** DBHR, via reporting from WSU. Extracted from URS reports.
- ▶ [FEP Fact Sheet](#)

Priority 6: Recovery Support Services

- ▶ **Indicator:** Behavioral health Peer Support Specialist Program
- ▶ **Baseline Measurement:** From July 1, 2023-June 30, 2024 total number of behavioral health Peer Support Specialist trained was 796.
- ▶ **First Year Target:** Peer Support Specialist trained in SFY2026 1,100
- ▶ **Second Year Target:** Peer Support Specialist trained in SFY2027 1,100
- ▶ **Data Source:** Monthly reports obtained from the DBHR Peer Support Database

Priority 7: Crisis Services

- ▶ **Indicator:** Maintain and increase number of mobile crisis providers in the state.
- ▶ **Baseline Measurement:** 58 mobile crisis teams statewide.
- ▶ **First Year Target:** Maintain current statewide number of mobile crisis providers at 58 teams.
- ▶ **Second Year Target:** Increase the statewide number of mobile crisis providers by at least 6 new teams, for a total of 60 teams statewide.
- ▶ **Data Source:** Report on current number of teams and FTE from BH-ASO and OTA (Tribal mobile crisis).

Priority 8: Pregnant and Parenting Women

- ▶ **Indicator:** Maintain capacity for women and their children to have access to case management services.
- ▶ **Baseline Measurement:** SFY2025 the total contracted number of Pregnant and Parenting Women (PPW) clients receiving PCAP case management services is 1,503.
- ▶ **First Year Target:** FY2026 – Maintain the number of Pregnant and Parenting Women clients receiving PCAP services.
- ▶ **Second Year Target:** FY2027 – Maintain the number of Pregnant and Parenting Women clients receiving PCAP case management services.
- ▶ **Data Source:** Contracts with PCAP Providers.
- ▶ [PCAP Fact Sheet](#)
- ▶ [PPW Fact Sheet](#)

Priority 9: Tuberculosis Screening

- ▶ **Indicator:** Provide TB screening and education at all SUD outpatient and residential provider agencies within their provider networks.
- ▶ **Baseline Measurement:** As of July 1, 2024, Tuberculosis screening and education is a continued required element in the BH-ASO contract for SUD treatment services.
- ▶ **First Year Target:** For SFY 2026, ensure TB screening plans continue to be in contract with each of the ten BH-ASOs.
- ▶ **Second Year Target:** For SFY 2027, review TB screening plans prior to the BH-ASO amendment and update as needed to ensure screenings and education services are being provided during SUD treatment services.
- ▶ **Data Source:** Health Care Authority/BH-ASO Contracts.

Priority 10 – Opioid Use Disorder

- ▶ **Indicator 1:** Increase the number of incarcerated people newly prescribed buprenorphine, methadone, or naltrexone.
- ▶ **Baseline Measurement:** Baseline for SFY24: 4,294 incarcerated individuals newly prescribed buprenorphine or naltrexone.
- ▶ **First Year Target:** Increase the number of incarcerated individuals newly prescribed buprenorphine, methadone, or naltrexone in SFY26 to 5,000.
- ▶ **Second Year Target:** Increase the number of incarcerated individuals newly prescribed buprenorphine, methadone, or naltrexone in SFY27 to 6,000.
- ▶ **Data Source:** Programmatic data collected by 19 MOUD in jail programs throughout the state.

Priority 10 - Opioid Use Disorder

- ▶ **Indicator 2:** Increase opioid use disorder treatment penetration rates.
- ▶ **Baseline Measurement:** SFY24 54.8% penetration rate for Medicaid beneficiaries in need of opioid use disorder treatment.
- ▶ **First Year Target:** Increase the percentage of Medicaid beneficiaries receiving needed treatment for OUD in SFY26 to 60%.
- ▶ **Second Year Target:** Increase the percentage of Medicaid beneficiaries receiving needed treatment for OUD in SFY27 to 65%.
- ▶ **Data Source:** All data were drawn from the Department of Social and Health Service's Integrated Client Database (ICDB). The ICDB contains data from several administrative data systems, including the state's ProviderOne data system that contains Medicaid claims and encounter data.

Reporting requirements

- ▶ Minerva
 - ▶ SUD Prevention and MH Promotion
- ▶ BHDG (Behavioral Health Data Guide)
 - ▶ Collected through Target.
- ▶ Excel

Questions?

Please feel free to reach out with any questions or recommendations you have by emailing the Block Grant inbox listed below.

DBHRBlockGrant@hca.wa.gov

Where Does the Block Grant Come From?

- ▶ The Block Grants are SAMHSA formula grants awarded to States to allow States to address their unique behavioral health issues.
- ▶ Who is SAMHSA
 - ▶ SAMHSA is the Substance Abuse and Mental Health Services Administration
 - ▶ Formula vs Competitive Grants.

What is the Block Grant?

- ▶ There are two types of block grants:
 - ▶ Substance Use, Prevention, Treatment and Recovery Services Block Grant (SUPTRS)
 - ▶ Community Mental Health Services Block Grant (MHBG)
- ▶ Regular Block Grant awards are received annually, beginning October 1st and are open for two years (ending September 30th). Awards must be obligated within one year and fully spent within two years.
- ▶ Under each of the Block Grants (SUPTRS and MHBG) we may also receive technical assistance funding on an annual basis (funding amounts and availability varies)
- ▶ We occasionally receive supplemental awards
 - ▶ Supplemental awards include Covid Enhancement, ARPA, etc.
 - ▶ Supplemental awards typically run on different cycles

Mental Health Block Grant

▶ Purpose

- ▶ Provide mental health services to adults diagnosed with Serious Mental Illness (SMI) and children diagnosed with Serious Emotional Disturbance (SED).
- ▶ Services paid for with MHBG must not be Medicaid covered

▶ Required Set-Asides

- ▶ 10% minimum First Episode Psychosis
- ▶ 5% minimum Crisis Services
- ▶ 5% maximum Administrative cost (HCA Only)

▶ [MHBG Fact Sheet](#)

Mental Health Block Grant

► Requirements/Allowable Activities

- ▶ MHBG may be used to provide comprehensive community mental health services to adults diagnosed with SMI and children diagnosed with SED. Allowable activities include:
 - Treatment services not covered by Medicaid for individuals diagnosed with SMI or SED
 - Crisis services for individuals diagnosed with SMI or SED
 - Revolving funds for establishment of group homes
 - Direct transportation costs to get SMI/SED diagnosed individuals to treatment services

Mental Health Block Grant

Unallowable Expenses

- ▶ MHBG funds may not be used to supplant state funding of mental health treatment programs.
- ▶ Inpatient hospital services
- ▶ Cash payments to intended recipients of health services
- ▶ Purchase or improvement of land, buildings or other facilities
- ▶ Purchase of major medical equipment
- ▶ To satisfy any matching requirements
- ▶ Primary prevention or preventive intervention for those at risk of SMI or SED
- ▶ Rent or housing vouchers (room and board is an allowable cost for SED diagnosed individuals)

Substance Use Prevention, Treatment and Recovery Services Block Grant (SUPTRS)

▶ Purpose

- ▶ Plan, carry out and evaluate activities for the prevention, treatment and recovery of substance use for individuals not covered by Medicaid.

▶ Required Set-Asides

- ▶ 20% minimum Primary Prevention
- ▶ 5% minimum services for pregnant women and women with dependent children
- ▶ 5% maximum Administrative costs (HCA Only)

▶ Targeted Population

- ▶ Pregnant women and women with dependent children
- ▶ Intravenous drug users

▶ [SUPTRS Fact Sheet](#)

Substance Use Prevention, Treatment and Recovery Services Block Grant (SUPTRS)

► Requirements/Allowable Activities

- ▶ SUPTRS BG can be used for projects related to the development and implementation of prevention, treatment and rehabilitation activities directed to the diseases of alcohol and substance 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 disorders
 - Program administration

SUPTRS Unallowable Expenses

- ▶ SUPTRS BG funds may not be used to supplant state funding of alcohol and other drug prevention and treatment programs
- ▶ Inpatient hospital services
- ▶ Cash payments to intended recipients of health services
- ▶ Purchase or improvement of land, buildings or other facilities
- ▶ Purchase of major medical equipment
- ▶ To satisfy any matching requirements
- ▶ Purchase of treatment services in penal or correctional institutions
- ▶ SUPTRS BG funds cannot be used for anything that cannot be tied directly to a treatment or prevention activities. Examples include:
 - ▶ Rent
 - ▶ Utilities, cell phones, internet/cable, car payments
 - ▶ Personal items