

**SUBSTANCE ABUSE PREVENTION AND TREATMENT (SAPT) BLOCK GRANT
AUTHORIZED AND RESTRICTED EXPENDITURES**

Thursday, November 8, 2012

Authorized Expenditures

42 USC 300x-21

Subject to 300x-31 (restrictions on expenditure of grant), the State will expend the grant only for the purpose of planning, carrying out, and evaluating activities to prevent and treat substance abuse and related activities authorized in 42 USC 300x-24, which are requirements regarding tuberculosis and human immunodeficiency.

Restrictions on Expenditures

42 USC 300x-31

The State shall not expend the Block Grant on the following activities:

- a) To provide inpatient hospital services;
- b) To make cash payments to intended recipients of health services;
- c) To purchase or improve land, purchase, construct, or permanently improve (other than minor remodeling) any building or other facility, or purchase major medical equipment;
- d) To satisfy any requirement for the expenditure of non-Federal funds as a condition for the receipt of Federal funds;
- e) To provide financial assistance to any entity other than a public or nonprofit private entity;
- f) 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;
- g) 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, and;
- h) To purchase treatment services in penal or correctional institutions of the State of California.
- i) To supplant state funding of programs to prevent and treat substance abuse and related activities.

Required Expenditures (Set-Asides)

Primary Prevention

42 USC 300x-22(a)

45 CFR 96.124(b)(1)

45 CFR 96.125

The State shall spend not less than 20 percent of a SAPT Block Grant award for primary prevention programs for individuals who do not require treatment for substance abuse, specifying activities proposed for each of the six strategies:

- 1) Information Dissemination
- 2) Education
- 3) Alternatives

- 4) Problem Identification & Referral
- 5) Community-Based Process
- 6) Environmental

Women's Services

42 USC 300x-22(c)

45 CFR 96.122(f)(1)(viii)

45 CFR 96.124(c)(e)

The State shall spend not less than 5 percent of the FFY 1994 block grant to establish new programs, expand the capacity of existing programs, and to increase the availability of treatment services designed for pregnant women and women with dependent children; and, directly or through arrangements with other public or nonprofit entities, to make available prenatal care.

State shall ensure that, at a minimum, treatment programs receiving funding for such services also provide or arrange for the provision of the following services to pregnant women and women with dependent children, including women who are attempting to regain custody of their children:

- 1) Primary medical care for women, including referral for prenatal care and, while the women are receiving such services, child care;
- 2) Primary pediatric care, including immunization, for their children;
- 3) Gender specific substance abuse treatment and other therapeutic interventions for women which may address issues of relationships, sexual and physical abuse and parenting, and child care while the women are receiving these services;
- 4) Therapeutic interventions for children in custody of women in treatment which may, among other things, address their developmental needs, their issues of sexual and physical abuse, and neglect; and
- 5) Sufficient case management and transportation to ensure that women and their children have access to services provided.

For more information, these services are outlined in the Perinatal Service Network Guidelines: http://www.adp.ca.gov/Perinatal/pdf/Guidelines_09.pdf

At least \$26,349,134 (\$16,864,134 SAPT Block Grant funds plus \$9,485,000 Local Revenue Funds – formerly State General Funds) must be expended by the State each fiscal year for programs for services to pregnant women and women with dependent children.

HIV Early Intervention Services

42 USC 300x-24(b)

45 CFR 96.128

The State shall spend a minimum and maximum of 5 percent of the SAPT Block Grant award to provide treatment for persons with substance abuse problems with an emphasis on making available within existing programs early intervention services for HIV in areas of the State that have the greatest need and to monitor service delivery.

The State will:

- 1) Make available early intervention services for HIV disease at the sites where individuals are undergoing treatment.
- 2) A minimum and maximum of 5% must be set-aside and expended for services for HIV Early Intervention

Other Requirements

Intravenous Drug User (IVDU) Services

42 USC 300x-23

45 CFR 96.126

The State shall provide treatment to intravenous drug abusers that fulfills the 90 percent capacity reporting, 14-120 day performance requirement, interim services, outreach activities and monitoring requirements.

The State will ensure:

- 1) Programs receiving funds under the grant must be required to notify the State, within seven days, of reaching 90 percent capacity to admit individuals.
- 2) A capacity management program is established enabling programs to meet above requirement and ensure maintenance of such reports.
- 3) Each individual who requests and is in need of treatment is admitted to a program of such treatment within the 14-120 day performance requirement time period.
- 4) Interim services are made available (to include prenatal care) within 48 hours of request if IVDU treatment services are not available.
- 5) A waiting list management program is implemented.
- 6) Programs carry out activities encouraging individuals in need of treatment to undergo treatment.
- 7) Develop effective strategies for monitoring.

Tuberculosis (TB) Services

42 USC 300x-24(a)

45 CFR 96.127

The State shall directly or through arrangements with other public or nonprofit private entities routinely make available tuberculosis services to each individual receiving treatment for substance abuse and to monitor such service delivery.

The State will require entities receiving grant funds to follow procedures addressing how the program will:

- 1) Make available TB services to each individual receiving treatment
- 2) Refer individuals to another provider of TB services if individual is denied treatment for SA due to lack of capacity.
- 3) Implement infection control procedures designed to prevent the transmission of TB.
- 4) Conduct case management activities

Charitable Choice

42 USC 300x-65

42, CFR Part 54

45, CFR 96.122

The State shall comply with Public Law 106-310 the amended Public Health Service Act by adding requirements to:

- 1) Prohibit discrimination against nongovernmental organizations and certain individuals on the basis of religion in the distribution of government funds to provide substance abuse services; and
- 2) Allow organizations to accept the funds to provide services to individuals without impairing the religious character of the organization or the religious freedom of the individuals.

Under Part 54 counties are required to:

- a) Identify religious providers.
- b) Incorporate the applicable Part 54 requirements into county/provider contracts, including a notice to clients.
- c) Monitor religious providers for compliance with Part 54.
- d) Establish a referral process, to a reasonably accessible program, for clients who may object to the religious nature of the program. Such process must include a notice to the county and the funding of alternative services.

Process for Referring

42 USC 300X-28

45 CFR 96.132(a)

The State shall take measures to improve the process in the State for referring individuals to the treatment modality that is most appropriate for the individual.

Examples of how this may be accomplished:

- 1) The development and implementation of a capacity management/waiting list management system.
- 2) The utilization of a toll-free number for programs to report available capacity and wait list data
- 3) Utilizing standardized assessment procedures to facilitate the referral process

Continuing Education

42 USC 300X-28(b)

45 CFR 96.132(b)

The State shall provide continuing education for the employees of facilities which provide prevention activities and treatment services.

Coordinate Services

42 USC 300x-28(c)

45 CFR 96.13(C)

The State shall coordinate prevention activities and treatment services with the provision of other appropriate services.

In evaluating compliance, the Secretary will consider the existence of a "Memoranda of Understanding" between the various services providers/agencies and evidence the State has included prevention and treatment services in its grants and contracts.

Disclosure of Patient Records

42 USC 300x-53(b)

45 CFR 96.132(e)

The State shall ensure that the State has in effect a system to protect from inappropriate disclosure of patient records.

This system shall include provisions for employee education on the confidentiality requirements and the fact that disciplinary action may occur upon inappropriate disclosures. This requirement can not be waived.

Pregnant Women Preferences

42 USC 300x-27

45 CFR 96.131

The State shall ensure that each pregnant woman be given preference in admission to treatment facilities: and, when the facility has insufficient capacity, to ensure that the pregnant woman be referred to the State, which will refer the woman to a facility that does have capacity to admit the woman, or if no such facility has the capacity to admit the woman, will make available interim services within 48 hours, including a referral for prenatal care.

The State shall require all entities serving an injecting drug abuse population and receive block grant funds shall give preference as follows:

- 1) Pregnant injecting drug users;
- 2) Pregnant substance abusers;
- 3) Injecting drug users, and
- 4) All others.

The State will publicize the availability of such services and the preference given to pregnant women from the facilities in accordance with the statute.

Funding of Last Resort

45 CFR 96.137

The SAPT Block Grant must be the funding of last resort for services authorized under 42 USC 300x-22(b), Allocations Regarding Women, and 300x-24, Requirements Regarding Tuberculosis and Human Immunodeficiency Virus.

Entities that receive funding under the Block Grant and provides services required by the above-referenced sections shall make every reasonable effort, including the establishment of systems for eligibility determination, billing, and collection, to:

- 1) 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 (Medicare) and Title XIX (Medicaid), any State compensation program, any other public assistance program for medical expenses, any grant program, any private health insurance, or any other benefit program; and
- 2) Secure from patients or clients payments for services in accordance with their ability to pay.