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# 42 U.S. Code § 290ee–3a

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## Grant program for State and Tribal response to opioid use disorders

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### **(a) In general**

The Secretary of Health and Human Services (referred to in this section as the “Secretary”) shall carry out the grant program described in subsection (b) for purposes of addressing opioid misuse and use disorders and, as applicable and appropriate, stimulant misuse and use disorders, within States, Indian Tribes, and populations served by Tribal organizations and Urban Indian organizations.

### **(b) Grants program**

#### **(1) In general**

Subject to the availability of appropriations, the Secretary shall award grants to the single State agency responsible for administering the substance use prevention, treatment, and recovery services block grant under subpart II of part B of title XIX of the Public Health Service Act (42 U.S.C. 300x–21 et seq.), Indian Tribes, and Tribal organizations for the purpose of addressing opioid misuse and use disorders, and as applicable and appropriate, stimulant misuse and use disorders, within such States, such Indian Tribes, and populations served by such Tribal organizations, in accordance with paragraph (2). Indian Tribes or Tribal organizations may also apply for an award as part of a consortia or may include in an application a partnership with an Urban Indian organization.

#### **(2) Minimum allocations**

Notwithstanding subsection (i)(3), in determining grant amounts for each recipient of a grant under paragraph (1), the Secretary shall ensure that each State and the District of Columbia receive not less than \$4,000,000 and ensure that each Territory receives not less than \$250,000.

#### **(3) Formula methodology**

##### **(A) In general**

At least 30 days before publishing a funding opportunity announcement with respect to grants under this section, the Secretary shall—

(i) develop a formula methodology to be followed in allocating grant funds awarded under this section among grantees, which, where applicable and appropriate based on populations being served by the relevant entity—

(I) with respect to allocations for States, gives preference to States whose populations have a prevalence of opioid misuse and use disorders or drug overdose deaths that is substantially higher relative to the populations of other States;

(II) with respect to allocations for Tribes and Tribal organizations, gives preferences to Tribes and Tribal organizations (including those applying in partnership with an Urban Indian organization) serving populations with demonstrated need with respect to opioid misuse and use disorders or drug overdose deaths;

(III) includes performance assessments for continuation awards; and

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(IV) ensures that the formula avoids a funding cliff between States with similar overdose mortality rates to prevent funding reductions when compared to prior year allocations, as determined by the Secretary; and

(ii) not later than 30 days after developing the formula methodology under clause (i), submit the formula methodology to—

(I) the Committee on Health, Education, Labor, and Pensions and the Committee on Appropriations of the Senate; and

(II) the Committee on Energy and Commerce and the Committee on Appropriations of the House of Representatives.

## **(B) Report**

Not later than two years after December 29, 2022, the Comptroller General of the United States shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives a report that—

(i) assesses how grant funding is allocated to States under this section and how such allocations have changed over time;

(ii) assesses how any changes in funding under this section have affected the efforts of States to address opioid misuse and use disorders and, as applicable and appropriate, stimulant misuse and use disorders; and

(iii) assesses the use of funding provided through the grant program under this section and other similar grant programs administered by the Substance Abuse and Mental Health Services Administration.

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