



May 23, 2022

## OpioiD Block Grants

Beginning in the late 1990s, the United States experienced a significant increase in opioid-related drug overdose deaths, which rose from 8,050 in 1999 to 49,860 in 2019. To address the rising rates of opioid use and overdose deaths, Congress created new opioid-specific block grant programs that provide funding to increase access to substance use disorder (SUD) treatment such as medication-assisted treatment (MAT) for opioid-use disorder.

### State Targeted Response (STR) Grants

In 2016, Congress enacted the 21<sup>st</sup> Century Cures Act (the Cures Act; P.L. 114-255). Section 1003 of the Cures Act established the “Account for the State Response to the Opioid Abuse Crisis” in the Treasury, to which \$500 million was transferred and deposited for each of FY2017 and FY2018. (Actual program funding was subject to appropriations.) The resulting grant—the State Targeted Response (STR) to the Opioid Crisis grant program—supplemented state activities related to the opioid crisis. The purpose of the grant program was to increase access to treatment, decrease unmet treatment need, and reduce overdose deaths through prevention, treatment, and recovery activities. Administered by the Substance Abuse and Mental Health Services Administration (SAMHSA), the STR grant was distributed to Single State Agencies with flexibilities to provide sub-awards and contracts to substance use treatment and prevention providers, opioid treatment programs (OTPs), and peer recovery networks, among others.

In FY2017 and FY2018, SAMHSA awarded grants to all 50 states, the District of Columbia, and several territories according to a formula. Formula variables were specified in statute, but the formula itself was determined by SAMHSA. Grantees received the same funding amount for both years.

According to the Department of Health and Human Services (HHS) Office of the Inspector General (OIG), 65% of the total STR funding spent nationwide was devoted to treatment, 17% was devoted to prevention, and 13% was devoted to recovery support during the first 18 months of the two-year grant program. HHS OIG reported wide variation in states’ funding allocations.

In 2018, the STR grant program was reauthorized by Section 7181 of the SUPPORT for Patients and Communities Act (P.L. 115-271). The provision authorized \$500 million to be appropriated for each of FY2019 through FY2021; however, the STR grant program did not receive funding after FY2018, when it was effectively replaced by the State Opioid Response grant program.

### State Opioid Response (SOR) Grants

Record-level drug overdose deaths continued through the 2010s, after which Congress provided \$1 billion to SAMHSA in FY2018 through a new State Opioid Response (SOR) grant program. The appropriation, located in the annual Department of Health and Human Services appropriations bill, included a \$50 million set-aside for Indian tribes and an additional 15% set-aside for states with the highest opioid-related mortality rates. Program goals were similar to the STR grants with an emphasis on expanding access to MAT. The SOR funding was distributed using a formula similar to the STR grant formula but determined entirely by SAMHSA (with a requirement that the formula be submitted to the House and Senate Appropriations Committees).

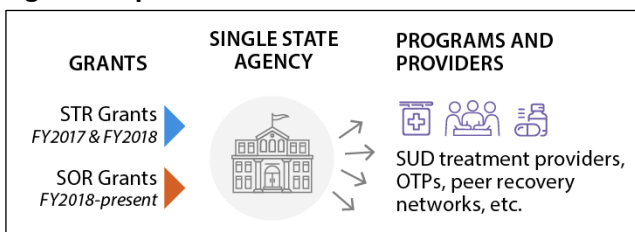
When the STR grant authorization expired in FY2018, Congress increased the SOR grant appropriation by \$500 million—the same amount as the STR grants—for a total of \$1.5 billion for FY2019. The SOR grants received \$1.5 billion in each of FY2020 and FY2021. In FY2022, Congress increased the SOR grant appropriation by \$25 million, for a total of \$1.525 billion.

The SOR grant program requirements and structure were similar to those for STR grants but were more explicitly focused on increasing access to MAT using the three FDA-approved medications for the treatment of opioid use disorder (methadone, buprenorphine, and naltrexone). Grants were distributed to states via the Single State Agency with state discretion for use or further distribution. The FY2020 appropriation language added “stimulants” to the grant purpose, allowing SOR funds to support activities related to methamphetamine and cocaine—substances increasingly involved in drug-related overdose deaths.

To safeguard funding for states with declining drug-related mortality rates—including those that no longer qualified for the additional set-aside funding—report language accompanying FY2021 appropriations directed SAMHSA to award \$3 million in supplemental grants to states whose year-over-year funding declined by more than 40%.

According to a 2020 SAMHSA report to Congress, SOR funding substantially increased the number and availability of treatment and recovery support systems—especially

**Figure 1. Opioid Block Grant Distribution**



Source: Congressional Research Service.

MAT—for individuals with SUD. SAMHSA reported positive outcomes related to abstinence from substance use, criminal justice involvement, housing stability, social connectedness, and employment for participants in SOR-funded programs.

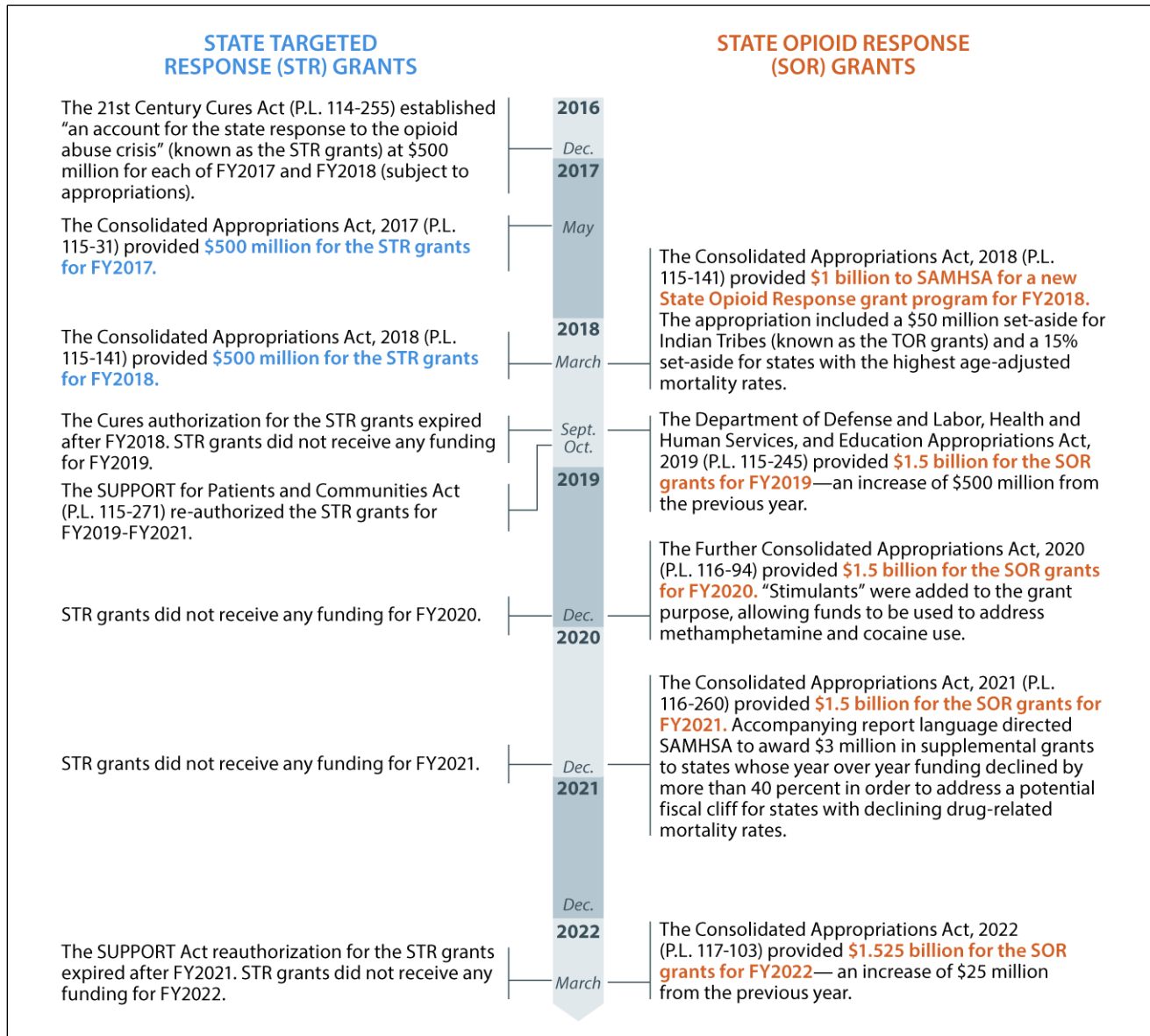
### Tribal Opioid Response (TOR) Grants

From FY2018 to FY2021, the SOR grant appropriation included a \$50 million set-aside for Indian tribes and tribal organizations—known as the TOR grants. TOR grants are not distributed by a formula. Instead, tribes and tribal organizations apply individually, as a consortia, or in

partnership with an urban Indian organization. Funds are distributed noncompetitively based on tribal population. Tribes were instructed to use a needs assessment or strategic plan to identify gaps from which to build substance use disorder prevention, treatment, and recovery services. Other grant requirements are similar to the SOR grant program. Since the TOR program began, SAMHSA has awarded grants to over 100 tribes and tribal organizations, with several receiving continuation grants in subsequent years. In FY2022, Congress increased the TOR set-aside from \$50 million to \$55 million.

**Figure 2. Opioid Block Grant Timeline**

Authorizing Legislation and Appropriations Levels over Time for the STR, SOR, and TOR Grants



**Source:** Congressional Research Service.

**Notes:** For more information about SAMHSA-administered grant programs, see <https://www.samhsa.gov/grants> and CRS Report R46426, *Substance Abuse and Mental Health Services Administration (SAMHSA): Overview of the Agency and Major Programs*.

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