



Substance Abuse and Mental Health Services Administration

The following tables are in millions of dollars.

Mental Health	2020 /2	2021 /3	2022	2022 +/- 2021
Community Mental Health Services Block Grant	723	758	1,583	+825
<i>PHS Evaluation Funds (non-add)</i>	21	21	21	--
Programs of Regional and National Significance	530	559	753	+194
<i>Prevention and Public Health Fund (non-add)</i>	12	12	12	--
Certified Community Behavioral Health Clinics	200	250	375	+125
Children's Mental Health Services	125	125	125	
Projects for Assistance in Transition from Homelessness	65	65	65	
Protection and Advocacy for Individuals with Mental Illness	36	36	36	
Subtotal, Mental Health	1,678	1,792	2,937	+1,144

Substance Abuse Prevention	2020 /2	2021 /3	2022	2022 +/- 2021
Programs of Regional and National Significance	206	208	217	+8
Subtotal, Substance Abuse Prevention	206	208	217	+8

Substance Abuse Treatment	2020 /2	2021 /3	2022	2022 +/- 2021
Substance Use Prevention, Treatment and Recovery Block Grant	1,858	1,858	3,508	+1,650
<i>PHS Evaluation Funds (non-add)</i>	79	79	79	--
Formula Grants to States to Address Opioids	1,500	1,500	2,250	+750
Programs of Regional and National Significance	480	497	651	+154
<i>PHS Evaluation Funds (non-add)</i>	2	2	2	--
Subtotal, Substance Abuse Treatment	3,838	3,855	6,409	+2,554

Health Surveillance and Program Support	2020 /2	2021 /3	2022	2022 +/- 2021
Program Support	79	79	83	+4
Health Surveillance	47	47	48	--
<i>PHS Evaluation Funds (non-add)</i>	30	30	30	--
Public Awareness and Support	13	13	13	--
Drug Abuse Warning Network	10	10	15	+5
<i>PHS Evaluation Funds (non-add)</i>	--	--	--	--
Performance and Quality Information Systems	10	10	10	--
Data Request and Publications, User Fees	2	2	2	--
Behavioral Health Workforce Data and Development, PHS Eval.	1	1	1	--
Subtotal, Health Surveillance and Program Support	162	162	172	+10

SAMHSA Budget Totals	2020 /2	2021 /3	2022	2022 +/- 2021
Total, Program Level	5,884	6,017	9,734	+3,717
Less Funds from Other Sources	-148	-148	-148	--
<i>Prevention and Public Health Fund (non-add)</i>	-12	-12	-12	--
<i>PHS Evaluation Funds (non-add)</i>	-134	-134	-134	--
<i>Data Request and Publications User Fees (non-add)</i>	-2	-2	-2	--
Total, Discretionary Budget Authority /4	5,737	5,870	9,587	+3,717
Full-Time Equivalents	452	484	615	--

1/ Totals may not add due to rounding.

2/ The FY 2020 column reflects final levels, including required and permissive transfers, but does not include \$425 million in COVID-19 supplemental resources.

3/ The FY 2021 column reflects enacted levels, including required transfers, but does not include \$7.8 billion in COVID-19 supplemental resources.

4/ The Budget Authority SAMHSA total funding level varies from the BIB Overview tables due to the exclusion of mandatory funding.

The Substance Abuse and Mental Health Services Administration leads public health efforts to advance the behavioral health of the nation and to reduce the impact of substance use and mental illness on America's communities.

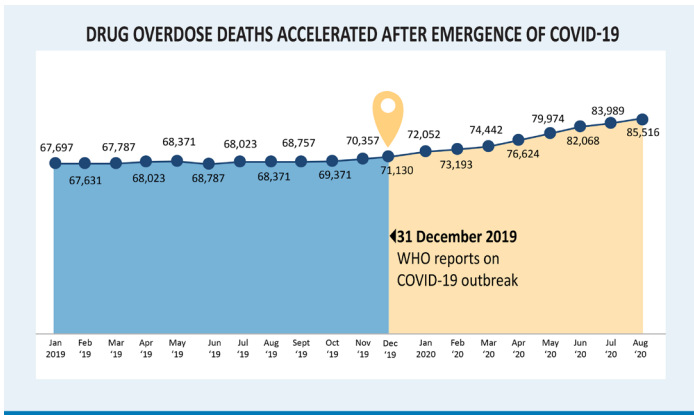
Mental health and substance use have been a rising public health crisis in the United States for decades. An estimated 19.3 million American adults had a substance use disorder in 2019, and approximately 841,000 people have died from a drug overdose between 2000 to 2019. Preliminary data suggest that overdose deaths accelerated during the pandemic. The Substance Abuse and Mental Health Services Administration (SAMHSA) plays a lead role in the public health response to the opioid and mental health crises and develops the nation's behavioral health infrastructure.

investment will drive funding to States and Tribes to increase community-level response to the opioid crisis, expand access to evidence-based treatment and recovery services, and provide targeted investment for prevention and recovery support services.

HHS requests \$10.7 billion across the Department to support activities that will help end the opioid and substance use crisis. Of that amount, \$6.6 billion is specifically for SAMHSA's substance use prevention and treatment programs and \$191 million for mental health activities, an increase of \$2.7 billion over FY 2021 enacted.

Expanding Access to Substance Use Treatment

The budget includes \$3.5 billion for the Substance Abuse Prevention and Treatment Block Grant (SABG)—an increase of \$1.7 billion over FY 2021 enacted—to expand implementation of evidence-based treatment and prevention programs for individuals, families, and communities across the nation. This funding will allow SAMHSA to serve 2.1 million people in FY 2022. The SABG program distributes funds to 60 eligible states, territories, one eligible tribe. The SABG funding provides recipients necessary flexibility to respond to regional issues impacted by opioid and substance use. This flexibility is critical as data show a changing overdose landscape, where overdose deaths associated with synthetic opioids and psychostimulants are significantly increasing over deaths associated with opioids or heroin. SAMHSA will work directly with state and local partners to ensure funding is targeted and available to community needs.

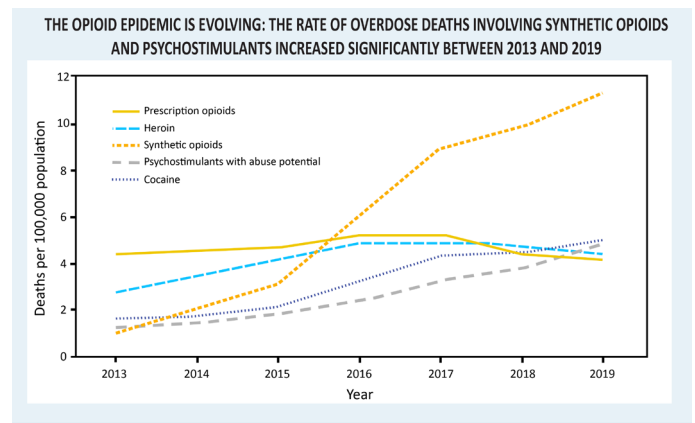


The FY 2022 President's Budget provides \$9.7 billion for SAMHSA, an increase of \$3.7 billion above FY 2021 enacted. With these critical investments, SAMHSA is poised to respond to the opioid and substance use epidemic by expanding programs targeting prevention and treatment; increasing access to mental health services to protect the health of children and communities; and growing SAMHSA's capacity to support the nation's behavioral health programs.

These investments will be a cornerstone in the Administration's efforts to respond to the significant behavioral health challenges facing the country in FY 2022.

ENDING THE OPIOID AND SUBSTANCE USE CRISIS

The budget provides \$6.6 billion for substance use prevention and treatment activities, an increase of \$2.6 billion over FY 2021 enacted. This critical



The budget also provides \$2.3 billion for the State Opioid Response (SOR) grant program, an increase of \$750 million over FY 2021 enacted. Since the SOR program began, approximately 646,854 patients have received treatment services for opioid use disorder, including 240,571 who have received medication-assisted treatment. This SOR funding will continue to increase access to important prevention and treatment services to respond to the opioid crisis. Within this total, SAMHSA will direct \$75 million to the Tribal Opioid Response grant program to specifically address the opioid substance use needs in tribal communities.

The budget provides \$105 million for the drug court program to serve 10,247 clients. Drug courts play an integral role in diverting people from the criminal justice system and into treatment. In 2020 approximately 7,200 people received services through the SAMHSA drug court program. This investment will increase access to direct treatment services; wraparound and recovery support services; and other direct services for diverse populations, and support diversion away from the criminal justice system.

The budget invests in direct treatment by providing \$137 million for SAMHSA's Medication Assisted Treatment for Prescription and Drug Addiction program (MAT-PDOA), which is an increase of \$46 million over FY 2021 enacted. Increasing availability of MAT is imperative as overdose deaths associated with synthetic opioids, including fentanyl, continue to rise.

Investing in Recovery Support Services

The FY 2022 budget emphasizes recovery support services to provide a comprehensive response to the opioid and substance use crisis. Recovery support programs provide community-level resources for people with substance use disorder beyond treatment. The budget includes a new 10 percent set-aside for the SABG to direct funds to states for recovery support services. Currently, there is no dedicated source of funding of community recovery resources. As a result, only 140 communities have a recovery community organization. This funding set-aside would provide a sustainable source of funding directly to community organizations to support development of a community-level recovery infrastructure and will be available for a wide variety of recovery support programs.

The budget also includes \$20 million for the Building Communities of Recovery program, double the amount provided in FY 2021 enacted. Building Communities

of Recovery supports linkages between recovery networks and a variety of organizations, including primary care, other recovery networks, the child welfare system, the criminal justice system, housing services, and education/employment systems. This increase in funding will support further mobilization of resources within and outside the recovery community to increase the prevalence and quality of long-term recovery support from drug and alcohol addiction.

Expanding Access to Treatment for Pregnant and Postpartum Women

The Pregnant and Postpartum Women (PPW) program expands the accessibility and availability of services for pregnant women with substance use disorder by providing outpatient and intensive outpatient services, residential treatment services, and family-based services. The PPW program also develops continuums of care and directs funding to states to develop coordinated, effective state systems of care. The budget invests \$49 million in the PPW program, an increase of \$17 million above FY 2021 enacted.

EXPANDING ACCESS TO MENTAL HEALTH SERVICES

Americans are experiencing increased mental health challenges and greater barriers to receiving necessary behavioral health care. Prior to the COVID-19 pandemic, Americans were experiencing growing rates of mental illness. In 2019, 51.5 million adults had a diagnosable mental illness, an 18 percent increase over 2008. These mental health challenges have accelerated during the COVID-19 pandemic, particularly for our vulnerable populations. In June 2020, adults reported anxiety disorder symptoms at 3 times the level reported in 2019 and depressive disorder at 4 times the level reported in 2019. Younger adults, racial minorities, essential workers, unpaid caregivers, and people receiving treatment for preexisting psychiatric conditions are disproportionately impacted by rising mental health concerns.

The FY 2022 budget provides \$2.9 billion for SAMHSA's mental health activities, an increase of \$1.1 billion over FY 2021 enacted. These investments will develop the behavioral health infrastructure, expand suicide prevention activities, address children's mental health, and increase community-based mental health programs that provide services to the nation's most vulnerable populations.

Respond to Systemic Strain on the Mental Health Care System

Calls to mental health helplines have increased across the country as Americans deal with increased anxiety, depression, risk of suicide, and trauma-related disorders.

The budget invests \$1.6 billion into the Community Mental Health Block Grant to respond to the systemic strain on our Nation’s mental health care system. This is an historic investment which will be more than double the 2021 funding level.

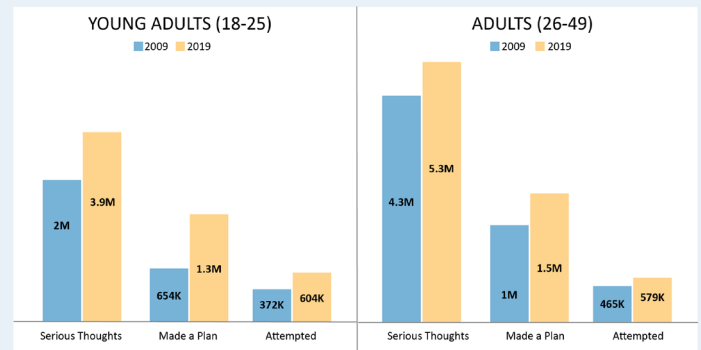
Since 1992, the Mental Health Block Grant (MHBG) has distributed funds for community-based behavioral health services to 59 eligible states and territories and freely associated states. The MHBG is the foundation of the nation’s behavioral health infrastructure, particularly for some of the most at-risk populations across the country. States rely on the MHBG to provide non-clinical coordination and support services that are not covered by Medicaid or other third-party insurance. This funding has improved outcomes for millions of Americans. In 2019, the MHBG served 8.1 million clients. Seventy-five percent of clients reported improved functioning as a direct result of the mental health care services they received.

The MHBG also provides targeted funding to ensure individuals having a mental health crisis have access to timely and quality care. The budget more than doubles the MHBG set-aside for crisis systems to \$75 million. This increase will direct funding to states to build much needed crisis systems that will provide high quality, expeditious mental health care. This crisis system funding increase will also support the partnering of law enforcement with mental health providers.

Invest in Suicide Prevention

Suicide and suicidal ideation are a growing public health concern—in 2019, suicide was the tenth leading cause of death. Recent reports show a steady increase in suicide deaths over the last 20 years. The COVID-19 pandemic has been associated with mental health challenges, including suicidal ideation. In June 2020, about 11 percent of CDC survey respondents reported seriously considering suicide in the prior 30 days. This rate was significantly higher among young adults, minority racial/ethnic groups, Black respondents, unpaid caregivers, and essential workers. It is essential we take action to support American’s mental health and invest in suicide prevention.

SUICIDAL THOUGHTS, PLANS, AND ATTEMPTS INCREASED FOR ADULTS AND YOUNG ADULTS



In FY 2022, SAMHSA will dedicate \$180 million for SAMHSA’s suicide prevention programs, an increase of \$78 million over FY 2021 enacted. American Indian and Alaskan Native communities have strikingly higher suicide rates compared to the overall U.S. population.

In July 2022, the National Suicide Lifeline will transition from a 10-digit number to a 3-digit hotline (9-8-8). The Lifeline call center network needs adequate funding to respond to the expected increase in call volume accompanying the move to a 3-digit hotline. To ensure the Lifeline is prepared for the transition, the FY 2022 budget invests \$102 million in the Suicide Lifeline program, an increase of \$78 million over FY 2021 enacted.

Responding to Children’s Mental Health Needs

Mental health concerns have been rising among youth since before the COVID-19 pandemic. Impacts of the COVID-19 pandemic, such as isolation, disruption to daily life, and anxiety about illness, have also hit children hard. Children aged 12 to 17 accounted for the majority of mental health-related emergency department visits in 2019 and 2020. To respond to the mental health needs of children, the FY 2022 budget includes \$155 million for Project AWARE, an increase of \$49 million above FY 2021 enacted. The budget also provides \$12 million for the Mental Health Awareness Training program, which provides training to law enforcement personnel and other stakeholders to recognize the signs and symptoms of mental disorders.

Child traumatic stress is a pervasive and potentially life changing experience that affects tens of thousands of children each year. The budget invests \$82 million in the National Child Traumatic Stress Network—an increase of \$10 million over FY 2021 enacted—to target funding to trauma-informed services and

interventions for children. This funding will also support the delivery of trauma-informed training and information to service providers.

The number of children that experience a serious mental health concern, such as a major depressive episode, have increased to 3.8 million children in 2019 from 2.2 million in 2004. The budget provides \$125 million for Children’s Mental Health Services (CMHS). The program provides funding to states, tribes, and communities to support development, implementation, expansion, and sustainability of comprehensive, community-based services for children and youth with serious mental disorders. The CMHS program promotes clear and culturally competent strategies to provide services to racial and ethnic minorities. The budget also maintains that grantees may use 10 percent of the funds to assess if community-based interventions directed to youth and young adults can prevent development of psychosis.

Increase Mental Health Resources for People Involved in the Criminal Justice System

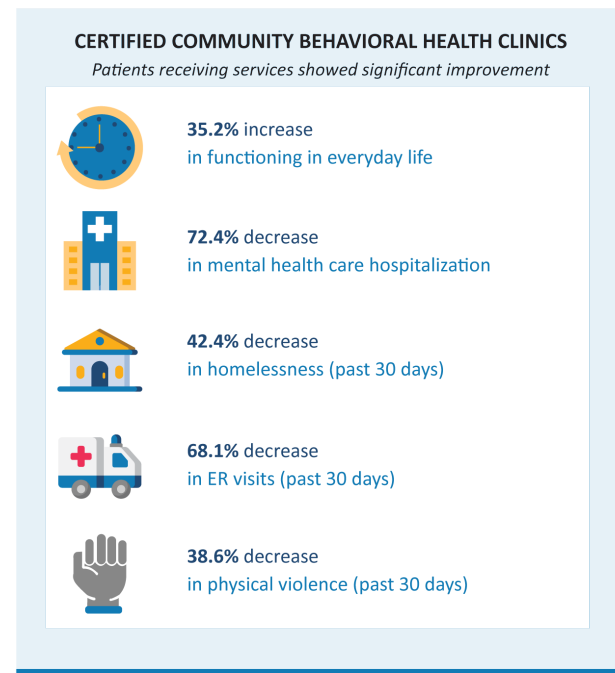
The connection between the criminal justice system and mental health cannot be ignored. Too often, people in need of mental health care or treatment do not get the care they need, and instead have interactions with law enforcement that lead to incarceration. Individuals with a mental illness and/or a substance use disorder involved in the criminal or juvenile justice system face higher rates of incarceration, longer lengths incarceration, and higher rates of recidivism.

To address the mental health needs of people involved in the criminal justice system, the FY 2022 budget invests \$51 million in SAMHSA’s Criminal and Juvenile Justice programs, an increase of \$45 million over FY 2021 enacted. This funding will increase access to mental health services post-incarceration and direct funding to grants that partner mental health providers with key stakeholders to respond to individuals in crisis.

Expand the Certified Community Behavioral Health Clinics Expansion Program

To expand access to behavioral health care, it is critical to invest in high quality, community-based behavioral health services. The budget includes \$375 million in the Certified Community Behavioral Health Clinics (CCBHC) grant program, an increase of \$125 million

over FY 2021 enacted. This investment will drive funding to community-based organizations that provide comprehensive, coordinated, high quality state-certified behavioral health services at the local level.



Since the inception of the CCBHC program in FY 2018, CCBHC grantees have served over 54,000 individuals. CCBHC participants showed a 72 percent decrease in mental health care hospitalization in the past 30 days and a 63.2 percent decrease in emergency room visits. Participation in the CCBHC program is also a significant asset to providers. Eighty-four percent of these organizations made changes to the range of services they provide as a result of program participation. The budget’s increase for CCBHCs will further expand access to these critically important behavioral health services to 180 grantees in FY 2022.

BUILDING CAPACITY TO IMPROVE NATION’S BEHAVIORAL HEALTH

SAMHSA is a leader in the national response to the country’s substance use and mental health needs across the country. The FY 2022 budget invests in SAMHSA’s institutional capacity and in developing a diverse behavioral workforce.

Developing a Diverse Behavioral Health Workforce

The budget includes \$17 million for SAMHSA’s Minority Fellowship Programs. Since the Fellowship’s start in

1973, the program has enhanced services for racial and ethnic minority communities through specialized training of mental health professionals in psychiatry, nursing, social work, marriage and family therapy, mental health counseling, psychology, and substance use and addiction counseling. The Fellowship seeks to improve behavioral health care outcomes for racial and ethnic populations by growing the number of racial and ethnic minorities in the nation's behavioral health workforce. The program also seeks to train and better prepare behavioral health practitioners to more effectively treat and serve people of different cultural and ethnic backgrounds.

Health Surveillance and Program Administration

In FY 2022, SAMHSA will invest \$172 million in Health Surveillance and Program Support, an increase of \$10 million over FY 2021 enacted. The budget includes \$83 million for Program Support, a \$4 million increase over FY 2021 enacted. This investment in program support will increase available staff by 131 FTEs to effectively manage and implement SAMHSA programs. The budget also invests \$15 million in the Drug Abuse Warning Network—a \$5 million increase over FY 2021 enacted—to support surveillance efforts tied to the opioid and substance use epidemic. These key programs will allow SAMHSA to effectively conduct oversight over SAMHSA programs and to support nationwide Health Surveillance efforts.