Using Substance Abuse Block Grant Funds

Program intent

The federal Substance Abuse Block Grant (SABG) program provides funds to states to plan, implement, and evaluate activities to prevent and treat substance use disorder. It is the largest federal program dedicated to improving publicly funded substance use disorder prevention and treatment systems.

In Wisconsin, all counties receive SABG funds in the form of community aids as part of the Wisconsin Department of Health Services state/county contract. Below are some general guidelines for spending SABG funds; however, agencies should read Title 45 Code of Federal Regulations, Part 96, Subpart L for more requirements regarding expenditures of these funds.

Important requirements for spending SABG funds

• At least 20 percent of the SABG community aids a county receives must be spent on primary prevention.
• At least 10 percent of the SABG community aids a county receives must be spent on women’s treatment services.
• The remainder of the SABG community aids a county receives can be spent for substance use disorder prevention, early intervention, treatment, and recovery support services.
• Pregnant women must be given priority in treatment admissions.
• SABG-funded treatment programs must directly (or through arrangements) make tuberculosis services available to everyone who receives treatment.
• SABG funds must be used as the payment of last resort for services for pregnant women, women with dependent children, tuberculosis services, and HIV services.

Restrictions on spending SABG funds

• Funds cannot be used to provide inpatient hospital services (there are limited exceptions).
• Funds cannot be used to make cash payments to intended recipients of health services.
• Funds cannot be used to buy or improve land; purchase, construct, or permanently improve any building; or buy major medical equipment.
• Funds cannot be used for the expenditure of non-federal funds as a condition for the receipt of federal funds.
• Funds cannot be used to provide financial assistance to an entity other than a public or nonprofit private entity.
• Funds cannot be used to provide individuals with hypodermic needles or syringes so that such individuals may use illegal drugs.
• Funds cannot be used to provide treatment services in penal or correctional institutions.
• Funds cannot be used to provide early intervention services for HIV.

Contact the substance abuse block grant coordinator with questions at 608-267-7704 or michael.derr@dhs.wisconsin.gov.

WISCONSIN DEPARTMENT of HEALTH SERVICES
Division of Care and Treatment Services
Bureau of Prevention Treatment and Recovery
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| 20% primary prevention  | • At least 20 percent of the community aids SABG funds must be spent on evidence-based, primary prevention initiatives.  
• Guidance on evidence-based initiatives can be found here: https://www.dhs.wisconsin.gov/aoda/sapsis/index.htm  
• SBIRT is not primary prevention.  
• Naloxone and related training cannot be purchased with primary prevention funds, but it can be purchased with treatment funds.  
• Primary prevention funds cannot be used to fund the enforcement of alcohol, tobacco, or drug laws.  
• Funds can be used for overdose prevention education and training. |
| Inpatient hospitalization | Funds cannot be used for inpatient hospitalization unless ALL of the following are met:  
• The individual cannot be effectively treated in a community-based, non-hospital, residential program.  
• The daily rate of payment provided to the hospital for providing the services does not exceed the comparable daily rate provided by a community-based, non-hospital, residential treatment program.  
• A physician makes a determination that the following four conditions have been met:  
  o The primary diagnosis of the individual is a substance use disorder and the physician certifies that fact.  
  o The individual cannot be safely treated in a community-based, non-hospital, residential treatment program.  
  o The service can reasonably be expected to improve the person’s condition or level of functioning.  
  o The hospital-based substance use disorder program follows national standards of substance use disorder professional practice.  
• The service is provided only to the extent that it is medically necessary (for example, only for those days that the patient cannot be safely treated in a residential, community-based program). |
| No cash payments         | • No funds can be used for housing assistance (rent, mortgage, security deposit, etc.).  
• Funds can be used for transportation, including gas cards. If used for gas cards, it must be documented in the treatment plan, and the amount must be based on the number of treatment appointments and mileage.  
• Funds can be used for incentives as part of an evidence-based treatment program. This requires detailed information of how the incentives will be used.  
• Funds can be used for insurance co-pays and deductibles only if directly related to alcohol and other drug abuse (AODA) treatment. Funds cannot cover co-pays or deductibles for broken arms or non-AODA-related conditions. For deductibles, only that portion related to AODA can be paid with SABG funds, so this requires the provider to keep careful records and the contract administrator to closely monitor. |
| No financial assistance to for-profit entities | Funds can be used to purchase services from for-profit entities, but cannot be used to award grants to for-profit entities. |
| Penal/correctional institutions | Funds cannot be used for treatment services for incarcerated people. |
| HIV early intervention services | • Funds cannot be used for pretest HIV or AIDS counseling.  
• Funds cannot be used for testing.  
• Funds cannot be used for post-test counseling.  
• Funds cannot be used to provide therapeutic measures based on the testing for preventing and treating the deterioration of the immune system or for preventing and treatment conditions arising from the disease. |