

SUMMARY OF OPIOID-RELATED ACTIVITIES IN EACH APPROPRIATIONS BILL

Agriculture, Rural Development, FDA, and Related Agencies

The **National Institute of Food and Agriculture Rural Health and Safety Education Program** received \$3,000,000 to “address the opioid abuse epidemic and to combat opioid abuse in rural communities.” The **Food and Drug Administration** will allocate \$94,000,000 to expand efforts to address the opioid crisis, and \$52,000,000 will go to the **Department of Agriculture** for **Distance Learning and Telemedicine Grants**.

Commerce, Justice, Science, and Related Agencies

The **Department of Justice** (DOJ) will “combat the rising threat to public health and safety” with \$446,500,000 in grant funding to help state and local communities respond to the crisis.

To support state and local law enforcement efforts, DOJ’s **Comprehensive Addition and Recovery Act** (CARA) programs received \$330,000,000, including an increase of \$132,000,000 above FY 2017 for the **Comprehensive Opioid Abuse Program** (COAP).

Funding for the **Executive Office for United States Attorneys** includes \$2,500,000 to support criminal and civil drug diversion prosecution for opioid-related offenses.

Organized Crime and Drug Enforcement Task Forces received \$542,850,000. Of that amount, \$375,000,000 will be dedicated to investigations and \$167,850,000 for prosecutions: “The increase in resources is provided to enhance investigations and prosecutions of major drug trafficking organizations with a focus on reducing the availability of opioids.”

The agreement allocated an increase of \$17,000,000 to the **Paul Coverdell Forensic Science** program to “specifically target the challenges the opioid epidemic has brought to the forensics community,” including the significant backlog in State crime labs. The bill also includes \$12,000,000, an increase of \$3,000,000, for the **Court Appointed Special Advocates** (CASA) program.

Funding for **Juvenile Justice** programs includes an increase of \$8,000,000 for Title V: Delinquency Prevention grants and an increase \$14,000,000 for youth mentoring grants “to support States, local communities, and tribal jurisdictions in their efforts to develop and implement effective programs for children, youth, and at-risk juveniles and their families who have been impacted by the opioid crisis and drug addiction.”

Defense

The bill provided \$330,000,000 for a **peer-reviewed medical research program** “directed to select medical research projects of clear scientific merit and direct relevance to military health.” Non-opioid pain management and chronic pain management are among the dozens of research topics that can be funded by this program.

Financial Services and General Government

The **High Intensity Drug Trafficking Areas** (HIDTA) Program was provided \$280,000,000. With this funding, “ONDCP should solicit funding applications from HIDTAs in states with high levels

of drug addiction, including those with the highest opioid overdoses and death rates, and those participating in the Heroin Response Strategy.”

The **Federal Communications Commission** was directed to “create a map overlaying drug abuse statistics with the level of Internet access” using the Connect 2 Health tool in order to address challenges in rural areas.

Homeland Security

U.S. Customs and Border Protection Operations and Support received a total of \$11,485,164,000. Of this amount, \$30,500,000 is for opioid detection equipment and labs.

The bill provided up to \$6,000,000 within **Research, Development, and Innovation** “to explore technology and methods for detecting opioids and fentanyl, including advanced container scanning systems with three-dimensional views.”

Interior, Environment, and Related Agencies

The **Bureau of Indian Affairs’ Public Safety and Justice** programs received \$7,500,000 to “help people affected by opioid addiction.” In addition, the **Indian Health Service** was allocated \$227,788,000 for alcohol and substance abuse programs.

Labor, Health and Human Services, and Education

In the **Health Resources and Services Administration**, the **National Health Service Corps** received an increase of \$105,000,000 to “expand and improve access to quality opioid and substance use disorder treatment in rural and underserved areas nationwide, including loan repayment awards to support substance use disorder counselors, as well as the recruitment and retention of health professionals to support evidence-based substance abuse treatment and prevention in underserved areas.”

Of the funding to the National Health Service Corps, \$30,000,000 will be available for the new **Rural Communities Opioid Response Initiative** within the Office of Rural Health, as well as \$100,000,000 “to support treatment for and prevention of substance use disorder, with a focus on the 220 counties identified by the Centers for Disease Control and Prevention as being at risk.”

The agreement also includes funding for **Health Workforce** services, including \$75,000,000 for **Behavioral Health Workforce Education and Training**.

The **Centers for Disease Control and Prevention’s (CDC) Opioid Prescription Drug Overdose** prevention efforts received \$475,579,000 to advance research on the epidemic and “scale up prevention activities across all 50 states and Washington D.C.,” including “case-level syndromic surveillance data, improvements of interventions that monitor prescribing and dispensing practices, better timeliness and quality of morbidity and mortality data, as well as the enhancement of efforts with medical examiners and coroner offices.” The CDC will also support the implementation and use of **Prescription Drug Monitoring Programs (PDMPs)**. Additionally, \$10,000,000 of the funds will support an opioid nationwide awareness and education campaign.

Of the \$3,000,000,000 overall increase for the **National Institutes of Health**, \$500,000,000 is set aside for targeted research on opioid addiction; the **National Institute of Neurological Disorders and Stroke** (NINDS) and the **National Institute on Drug Abuse** (NIDA) each received \$250,000,000 for this purpose. The agreement also includes a general provision that gives the NIH Director authority to transfer these funds to other Institutes. Recommended research efforts include the development of opioid alternatives, pain management, and addiction treatment.

The **Substance Abuse and Mental Health Services Administration** (SAMHSA) received \$1,000,000,000 in new funding for State grants to support treatment efforts, including \$50,000,000 for grants to Indian tribes or tribal organizations, and is encouraged to provide States with additional flexibility to support prevention activities. Funding includes a 15 percent set-aside for States “with the highest age-adjusted mortality rate related to opioid use disorders.” This funding is in addition to the \$500,000,000 provided in the 21st Century Cures Act.

Moreover, SAMHSA will provide the **National Academy of Sciences** with \$2,000,000 to charter a review to “identify outcomes that are to be achieved by activities authorized in the Comprehensive Addiction and Recovery Act (P.L. 114-198).”

SAMHSA’s **Medication-Assisted Treatment for Prescription Drug and Opioid Addiction** program received \$84,000,000 to support medication-assisted treatment and “other clinically appropriate services to achieve and maintain abstinence from all opioids and heroin. SAMHSA is directed to give preference granting awards to treatment regimens that are less susceptible to diversion for illicit purposes.” Grants will target States with the highest age-adjusted rates of admissions, as well as States experiencing significant increases in admissions. Indian tribes, tribal organizations, or consortia will receive \$5,000,000.

The agreement also includes funding for mental health services, some of which may be used to address the opioid crisis.

Additional funding for SAMHSA’s **Center for Substance Abuse Treatment** includes \$29,931,000 for services for pregnant and postpartum women, \$29,605,000 for services for children and families, and \$89,000,000 for criminal justice activities, including drug courts.

The **Center for Substance Abuse Prevention** received \$47,000,000 for opioid-related activities, including \$36,000,000 for first responder training, \$10,000,000 for strategic prevention for prescription drugs, and \$1,000,000 to improve access to overdose treatment.

SAMHSA will also provide **Minority Fellowship Program** grantees with \$4,539,000 to “develop and implement fellowships in psychology, addiction psychiatry, and addiction medicine with a specific focus in addressing the needs of individuals with substance use disorders.”

In the **Administration for Children and Families**, the **Child Abuse Prevention and Treatment Act** (CAPTA)’s Infants Plans of Safe Care received an increase of \$60,000,000 to prioritize neonatal abstinence syndrome responses efforts, as well as “technical assistance, monitoring, and oversight to assist and evaluate State’s activities on plans of safe care.”

States and Indian tribes received \$20,000,000 to support **Kinship Navigator** programs, and ensure compliance with new requirements in the recently passed Family First Prevention Services Act.

Regional Partnership Grants received \$20,000,000 to fund “community collaborations among substance abuse treatment, courts, and child welfare agencies to provide the lives of children and families affected by opioids and other substance use disorders.”

Military Construction, Veterans Affairs, and Related Agencies

The agreement provided \$329,953,000 to spend on inpatient and outpatient treatment, methadone, and other pharmacy-related costs related to **opioid abuse**; \$55,821,000 to continue to implement opioid safety initiatives outlined as part of the **Comprehensive Addiction and Recovery Act**; and \$48,778,000 for the **Justice Outreach and Prevention** program. In addition to these amounts, the agreement includes \$270,000,000 for the **Office of Rural Health’s Rural Health Initiative**.

The agreement provides \$500,000 for the **National Academies of Sciences, Engineering, and Medicine** “to conduct an assessment of the potential overmedication of veterans during fiscal years 2010 to 2017 that led to suicides, deaths, mental disorders, and combat-related traumas.”

State, Foreign Operations, and Related Programs

Following the **Department of State’s** effort to combat the “production, trafficking, and sale of heroin, fentanyl, and other opioids,” the Secretary of State will submit a report that details how the Department has taken action, or plans to take action, against the “flow of opioids into the United States.”

In addition, the agreement allocates \$100,000,000 for **International Narcotics Control and Law Enforcement** for assistance for Mexico “to combat the production and trafficking of heroin, fentanyl, and other opioids into the United States.”