

**10A NCAC 27A .0216 SUBSTANCE ABUSE PREVENTION AND TREATMENT BLOCK GRANT**

(a) The Division shall administer a grant program for the federal Substance Abuse Prevention and Treatment Block Grant which is made available to the Division under the authority of Public Law 102-321 Subpart II.

(b) The appropriate portion of funds in the block grant which are made available to the Division for substance abuse treatment and prevention services shall be used to make grants to eligible programs for the provision of comprehensive services.

(c) To be eligible to receive block grant funds, an area program shall provide the following services:

- (1) outpatient services, including outpatient services for children and adults who have substance abuse disorders or who are at risk for substance abuse and residents of its service area;
- (2) 24 hour-a-day emergency care services;
- (3) day treatment or other partial hospitalization services;
- (4) screening for patients being considered for admission to state facilities to determine the appropriateness of such admission;
- (5) consultation, education, and primary prevention services;
- (6) TB screening and referral in accordance with federal requirements; and
- (7) substance abuse services for pregnant and parenting women and adolescents.

(d) On a statewide basis, block grant funds for alcohol and drug services shall be expended in accordance with the following:

- (1) At least 35 percent of the funds for alcohol and drug services shall be expended for programs and activities related to alcoholism and alcohol abuse;
- (2) At least 35 percent of the funds for alcohol and drug services shall be expended for programs and activities relating to drug abuse;
- (3) At least 20 percent of the amount used for alcohol and drug abuse services shall be expended for primary prevention and early intervention programs designed to discourage the abuse of alcohol, tobacco and other drugs. In order to ensure compliance with this requirement, each area program must expend no less than 20 percent of its allocation of SAPT-BG funds on primary prevention activities as outlined in the Memorandum of Agreement and Summary of Significant Federal Requirements;
- (4) The state must spend at least five percent of the annual SAPT-BG amount to provide outreach intervention services for IV Drug Users using one of the following three models developed by the National Institute Drug Abuse Narcotic Addiction Treatment, incorporated by reference to include any subsequent amendments and deletions, and available from the Food and Drug Administration, 5600 Fishers Lane, Rockville, Maryland 20857 at no cost:
  - (A) Standard Intervention Model for Injecting Drug Users (NIDA);
  - (B) Health Education Model;
  - (C) Indigenous Leader Outreach Model;(Section 1924 - Requirements Regarding Tuberculosis and Human Immunodeficiency Virus)
- (5) Treatment services designed for pregnant women and women with dependent children shall be increased at a rate not less than five percent for FY 1993. The base for FY 1993 shall be the FY 1992 alcohol and drug services block grant expenditures and State expenditures for pregnant women and women with dependent children and to this base shall be added the five percent of the FY 1993 grant amount for alcohol and drug treatment services. For FY 1994, the State shall spend five percent more than the FY 1993 total expenditure for pregnant women and women with dependent children. For grants beyond FY 1994, the State shall expend no less than the amount equal to the amount expended by the State for FY 1994. States shall report their methods to calculate their base for FY 1992 expenditures on treatment for pregnant women and women with children;

(Section 1922 Set Aside for Women With Dependent Children)

The Division shall review expenditures and if the percentage requirements for services and prevention specified in Subparagraphs (d)(1), (2), (3) and (4) of this Rule are not met, the Division shall require changes in area program expenditure patterns to meet these federally mandated requirements.

(e) Non-Eligible Expenditures Funds shall not be expended for any of the following purposes:

- (1) to provide inpatient hospital services, unless a physician has certified that the clients primary diagnosis is substance abuse, the individual cannot be safely treated in a non-hospital setting, the daily rate charged does not exceed the rate charged by a comparable non-hospital service, and the service is medically necessary;
- (2) to make cash payments to clients;

- (3) to purchase or improve land; purchase, construct or permanently improve any building or other facility; or purchase major medical equipment;
  - (4) to satisfy any requirement for the expenditure of non-federal funds as a condition for the receipt of federal funds;
  - (5) to provide assistance to any entity other than a public or non-profit private entity;
  - (6) to provide individuals with hypodermic needles or syringes so that such individuals may use illegal drugs; or
  - (7) to support any individual salary in excess of one hundred twenty five thousand dollars (\$125,000).
- (f) The Division Director shall allocate annually funds to the area programs. The funds shall be included in the Annual Service Plan and Memorandum of Agreement.
- (g) Block grant funds allocated shall be used to supplement and increase the level of state, local, and other non-federal funds and shall, in no event, supplant such state, local, and other non-federal funds. The Division shall monitor compliance by comparing total budgeted revenues for the current fiscal year with those budgeted for the prior fiscal year for each area program exclusive of block grant funds. If block grant funds are reduced, the area program may reduce its participation in a proportionate manner.

*History Note: Authority G.S. 122C-150; P.L. 102-321, Subpart II;  
Eff. February 1, 1996;  
Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. June 25, 2016.*