

Federal Funds – Substance Use Programs

H.493 Section B.313

Information for House Appropriations Committee regarding federal funding for substance use programs in the proposed fiscal year 2026 budget.

Sec. B.313 Health - substance use programs

General fund	\$4,795,477
Special funds	\$972,399
Tobacco fund	\$949,917
Federal funds	\$15,928,439
Global Commitment fund	\$39,395,917
Total	\$69,042,416

Sources of Federal funding for B.313

Federal Grant	Budget
1. Substance Abuse Block Grant	\$7,285,000
2. State Opioid Response	\$4,550,000
3. Overdose Data to Action	\$1,550,000
4. Medicaid Administrative Claiming	\$1,493,439
5. Partnership for Success	\$1,050,000
Total	\$15,928,439

\$7,285,000 - Substance Abuse Prevention, Treatment, and Recovery Services Block Grant (SUBG)

U.S. Department of Health and Human Services (HHS)

Substance Abuse and Mental Health Services Administration (SAMHSA)

Objective: Plan, implement, and evaluate activities that prevent and treat substance use.

This is a noncompetitive, formula grant awarded to all states, authorized in 1992.

Current award project period ends 9/29/2026.

\$4,550,000 - State Opioid Response Grant (SOR)

HHS, SAMHSA

Objective: Address the opioid overdose crisis by providing resources to states and territories for increasing access to FDA-approved medications for the treatment of opioid use disorder (MOUD), and for supporting the continuum of prevention, harm reduction, treatment, and recovery support services for opioid use disorder (OUD) and other concurrent substance use disorders.

This is a noncompetitive formula grant awarded to all states, authorized in 2018. Current award project period ends 9/29/2027.

\$1,550,000 - Overdose Data to Action in States (OD2A)

HHS, Centers for Disease Control and Prevention (CDC)

Objective: Expand drug overdose surveillance and prevention efforts.

This is a noncompetitive grant available to each state, begun in 2019.

Current award project period ends 8/31/2028.

\$1,493,439 – Medicaid Administrative Claiming

HHS, Centers for Medicaid and Medicare (CMS)

Objective: Expenditures necessary for the administration of an approved Medicaid state plan.

The state claims Medicaid administrative costs, with a federal participation rate of 50%, for the credentialing and monitoring of the state's substance use treatment providers.

Medicaid administration funding is not included in the Global Commitment waiver and is accounted for in the state budget as federal receipts.

\$1,050,000 - Strategic Prevention Framework-Partnership for Success for States (PFS)

HHS, SAMHSA

Objective: Build prevention capacity of states and strengthen the capacity of local community prevention providers.

This is a competitive grant program with new project period beginning 9/30/2025.

Vermont's application for a new 5 year project period is under review with final announcement expected in September.

Vermont has received two previous 5 year awards through this source.