Substance Abuse and Mental Health Services Administration (SAMHSA)

Agency Background

The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services that leads public health efforts to advance the behavioral health of the nation. SAMHSA’s mission is to reduce the impact of substance abuse and mental illness on America's communities.

COVID-19 Response

SAMHSA created a 2019 novel coronavirus (COVID-19) landing page to provide guidance and resources to assist Tribes, states, individuals, providers and communities. SAMHSA is allowing flexibility during the emergency time period for grant recipients affected by the loss of operational capacity and increased costs due to the COVID-19 crisis. SAMHSA seeks to ensure that substance use disorder treatment services are uninterrupted during this public health emergency.

SAMHSA released a list of Frequently Asked Questions (FAQs) associated with award and management of SAMHSA discretionary grants that may arise in relation to COVID-19. (This information is not applicable to certain grants.) FAQs include:

- **Frequently Asked Questions (FAQs) Related to COVID-19 for SAMHSA Grant Recipients**
  
  **Question:** Can SAMHSA grant funds be used to purchase Personal Protective Equipment (PPE) so providers can continue to provide authorized activities under the grant?
  
  o **Answer:** Yes, SAMHSA grant funds can be used to purchase PPE for authorized grant personnel working in service of the grant. SAMHSA grant funds cannot be used to purchase PPE for unrelated grant activities.

  **Question:** Can SAMHSA grant funds be used to purchase equipment for the use of telehealth and technology to deliver grant services?

  o **Answer:** Yes, SAMHSA grant funds can be used to purchase laptops and other devices to deliver training and services specified under the grant. This includes the purchase of software to facilitate the delivery of services and training.

- **SAMHSA Opioid Treatment Program (OTP) Guidance**: Allows states with and without emergency declarations to allow Opioid Treatment Programs (OTPs) to provide 28 days of take-home medication to
stable patients and up to 14 days of medication for less stable patients whom the OTP believes can responsibly manage this amount of medication.

- **SAMHSA 42 CFR Part 2 Guidance**: Allows providers to share patient SUD diagnosis information that would normally be protected under 42 CFR Part 2 in instances of a bona fide medical emergency. Usage of the medical emergency exception must be documented by providers.

- **Virtual Recovery Resources**: Describes resources that can be used to virtually support recovery from mental/substance use disorders. It also provides resources to help local recovery programs create virtual meetings.

Many other guidance documents, such as the Use of Telemedicine While Providing Medication-Assisted Treatment, are available HERE.

**How does SAMHSA interact with Tribes?**

SAMHSA maintains contact with Tribes through its Office of Tribal Affairs. SAMHSA also coordinates a Tribal Technical Advisory Committee (STTAC). The STTAC provides a venue for Tribal officials to advise SAMHSA regarding the government-to-government consultation process. STTAC helps to increase agency accountability and ensure that activities or policies that impact Tribes are brought to the attention of all Tribal officials.

**COVID-19 Outreach to Indian Country**

In March 2020, SAMHSA’s Office of Tribal Affairs and Policy (OTAP) held Question and Answer sessions for Tribal discretionary grantees who may have questions as a result of COVID-19. More information will be disseminated through SAMHSA listservs. Sign up HERE.

**Agency Tribal Contact**

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