

/* 42 USC 290bb follows- which provides for a Center for drug abuse treatment. This include many important grant provisions related to HIV. For example, section (33) includes funding for development of programs to assist those who test positive with HIV to deal with their diagnosis' adverse psychological effects.

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Section 290bb. Center for Substance Abuse Treatment

(a) Establishment. There is established in the Administration a Center for Substance Abuse Treatment (hereafter in this section referred to as the "Center"). The Center shall be headed by a Director (hereafter in this section referred to as the "Director") appointed by the Secretary from among individuals with extensive experience or academic qualifications in the treatment of substance abuse or in the evaluation of substance abuse treatment systems.

(b) Duties. The Director of the Center shall:

(1) administer the substance abuse treatment block grant program authorized in section 1921 [42 USC 300y];

(2) collaborate with the Director of the Center for Substance Abuse Prevention in order to provide outreach services to identify individuals in need of treatment services, with emphasis on the provision of such services to pregnant and postpartum women and their infants and to individuals who abuse drugs intravenously;

(3) collaborate with the Director of the National Institute on Drug Abuse, with the Director of the National Institute on Alcohol Abuse and Alcoholism, and with the States to promote the study, dissemination, and implementation of research findings that will improve the delivery and effectiveness of treatment services;

(4) collaborate with the Administrator of the Health Resources and Services Administration and the Administrator of the Health Care Financing Administration to promote the increased integration into the mainstream of the health care system of the United States of programs for providing treatment services;

(5) evaluate plans submitted by the States pursuant to section 1932(a)(6) [42 USC 300y-22(a)(6)] in order to determine whether the plans adequately provide for the availability, allocation, and effectiveness of treatment services, and monitor

the use of revolving loan funds pursuant to section 1925 [42 USC 300x-25];

(6) sponsor regional workshops on improving the quality and availability of treatment services;

(7) provide technical assistance to public and nonprofit private entities that provide treatment services, including technical assistance with respect to the process of submitting to the Director applications for any program of grants or contracts carried out by the Director;

(8) encourage the States to expand the availability (relative to fiscal year 1992) of programs providing treatment services through self-run, self-supported recovery based on the programs of housing operated pursuant to section 1925 [42 USC 300x-25];

(9) carry out activities to educate individuals on the need for establishing treatment facilities within their communities;

(10) encourage public and private entities that provide health insurance to provide benefits for outpatient treatment services and other nonhospital-based treatment services;

(11) evaluate treatment programs to determine the quality and appropriateness of various forms of treatment, including the effect of living in housing provided by programs established under section 1925 [42 USC 300x-25], which shall be carried out through grants, contracts, or cooperative agreements provided to public or nonprofit private entities; and

(12) in carrying out paragraph (11), assess the quality, appropriateness, and costs of various treatment forms for specific patient groups.

(c) Grants and contracts. In carrying out the duties established in subsection (b), the Director may make grants to and enter into contracts and cooperative agreements with public and nonprofit private entities.

(July 1, 1944, ch 373, Title V, Part B, Subpart 1, 507, as added July 10, 1992, P. L. 102-321, Title I, Subtitle A, 107(2), 106 Stat. 335.)

Section 290bb-1. Residential treatment programs for pregnant and postpartum women

(a) In general. The Director of the Center for Substance Abuse Treatment shall provide awards of grants, cooperative agreement, or contracts to public and nonprofit private entities for the purpose of providing to pregnant and postpartum women treatment for substance abuse through programs in which, during the course of receiving treatment:

(1) the women reside in facilities provided by the programs;

(2) the minor children of the women reside with the women in such facilities, if the women so request; and

(3) the services described in subsection (d) are available to or on behalf of the women.

(b) Availability of services for each participant. A funding agreement for an award under subsection (a) for an applicant is that, in the program operated pursuant to such subsection:

(1) treatment services and each supplemental service will be available through the applicant, either directly or through agreements with other public or nonprofit private entities; and

(2) the services will be made available to each woman admitted to the program.

(c) Individualized plan of services. A funding agreement for an award under subsection (a) for an applicant is that:

(1) in providing authorized services for an eligible woman pursuant to such subsection, the applicant will, in consultation with the women, prepare an individualized plan for the provision to the woman of the services; and

(2) treatment services under the plan will include:

(A) individual, group, and family counseling, as appropriate, regarding substance abuse; and

(B) follow-up services to assist the woman in preventing a relapse into such abuse.

(d) Required supplemental services. In the case of an eligible woman, the services referred to in subsection (a)(3) are as follows:

(1) Prenatal and postpartum health care.

(2) Referrals for necessary hospital services.

(3) For the infants and children of the woman:

(A) pediatric health care, including treatment for any perinatal effects of maternal substance abuse and including screenings regarding the physical and mental development of the infants and children;

(B) counseling and other mental health services, in the case of children; and

(C) comprehensive social services.

(4) Providing supervision of children during periods in which the woman is engaged in therapy or in other necessary health or rehabilitative activities.

(5) Training in parenting.

(6) Counseling on the human immunodeficiency virus and on acquired immune deficiency syndrome.

(7) Counseling on domestic violence and sexual abuse.

(8) Counseling on obtaining employment, including the importance of graduating from a secondary school.

(9) Reasonable efforts to preserve and support the family units of the women, including promoting the appropriate involvement of parents and others, and counseling the children of the women.

(10) Planning for and counseling to assist reentry into society, both before and after discharge, including referrals to any public or nonprofit private entities in the community involved that provide services appropriate for the women and the children of the women.

(11) Case management services, including:

(A) assessing the extent to which authorized services are appropriate for the women and their children;

(B) in the case of the services that are appropriate, ensuring that the services are provided in a coordinated manner;

and

(C) assistance in establishing eligibility for assistance under Federal, State, and local programs providing health services, mental health services, housing services, employment services, educational services, or social services.

(e) Minimum qualifications for receipt of award. (1) Certification by relevant state agency. With respect to the principal agency of the State involved that administers programs relating to substance abuse, the Director may make an award under subsection (a) to an applicant only if the agency has certified to the Director that:

(A) the applicant has the capacity to carry out a program described in subsection (a);

(B) the plans of the applicant for such a program are consistent with the policies of such agency regarding the treatment of substance abuse; and

(C) the applicant, or any entity through which the applicant will provide authorized services, meets all applicable State licensure or certification requirements regarding the provision of the services involved.

(2) Status as medicaid provider. (A) Subject to subparagraphs (B) and (C), the Director may make an award under subsection (a) only if, in the case of any authorized service that is available pursuant to the State plan approved under title XIX of the Social Security Act [42 USC 1396 et seq.] for the State involved:

(i) the applicant for the award will provide the service directly, and the applicant has entered into a participation agreement under the State plan and is qualified to receive payments under such plan; or

(ii) the applicant will enter into an agreement with a public or nonprofit private entity under which the entity will provide the service, and the entity has entered into such a participation agreement plan and is qualified to receive such payments.

(B) (i) In the case of an entity making an agreement pursuant to subparagraph (A)(ii) regarding the provision of services, the requirement established in such subparagraph

regarding a participation agreement shall be waived by the Director if the entity does not, in providing health care services, impose a charge or accept reimbursement available from any third-party payor, including reimbursement under any insurance policy or under any Federal or State health benefits plan.

(ii) A determination by the Director of whether an entity referred to in clause (i) meets the criteria for a waiver under such clause shall be made without regard to whether the entity accepts voluntary donations regarding the provision of services to the public.

(C) With respect to any authorized service that is available pursuant to the State plan described in subparagraph (A), the requirements established in such subparagraph shall not apply to the provision of any such service by an institution for mental diseases to an individual who has attained 21 years of age and who has not attained 65 years of age. For purposes of the preceding sentence, the term "institution for mental diseases" has the meaning given such term in section 1905(i) of the Social Security Act [42 USC 1396d(i)].

(f) Requirement of matching funds.(1) In general. With respect to the costs of the program to be carried out by an applicant pursuant to subsection (a), a funding agreement for an award under such subsection is that the applicant will make available (directly or through donations from public or private entities) non-Federal contributions toward such costs in an amount that:

(A) for the first fiscal year for which the applicant receives payments under an award under such subsection, is not less than \$1 for each \$9 of Federal funds provided in the award;

(B) for any second such fiscal year, is not less than \$1 for each \$9 of Federal funds provided in the award; and

(C) for any subsequent such fiscal year, is not less than \$1 for each \$3 of Federal funds provided in the award.

(2) Determination of amount contributed. Non-Federal contributions required in paragraph (1) may be in cash or in kind, fairly evaluated, including plant, equipment, or services. Amounts provided by the Federal Government, or services assisted or subsidized to any significant extent by the Federal Government, may not be included in determining the amount of such non-Federal contributions.

(g) Outreach. A funding agreement for an award under subsection (a) for an applicant is that the applicant will provide outreach services in the community involved to identify women who are engaging in substance abuse and to encourage the women to undergo treatment for such abuse.

(h) Accessibility of program; cultural context of services. A funding agreement for an award under subsection (a) for an applicant is that:

(1) the program operated pursuant to such subsection will be operated at a location that is accessible to low-income pregnant and postpartum women; and

(2) authorized services will be provided in the language and the cultural context that is most appropriate.

(i) Continuing education. A funding agreement for an award under subsection (a) is that the applicant involved will provide for continuing education in treatment services for the individuals who will provide treatment in the program to be operated by the applicant pursuant to such subsection.

(j) Imposition of charges. A funding agreement for an award under subsection (a) for an applicant is that, if a charge is imposed for the provision of authorized services to on behalf of an eligible woman, such charge:

(1) will be made according to a schedule of charges that is made available to the public;

(2) will be adjusted to reflect the income of the woman involved; and

(3) will not be imposed on any such woman with an income of less than 185 percent of the official poverty line, as established by the Director of the Office for Management and Budget and revised by the Secretary in accordance with section 673(2) of the Omnibus Budget Reconciliation Act of 1981 [42 USC 9902(2)].

(k) Reports to Director. A funding agreement for an award under subsection (a) is that the applicant involved will submit to the Director a report:

(1) describing the utilization and costs of services provided under the award;

(2) specifying the number of women served, the number of infants served, and the type and costs of services provided; and

(3) providing such other information as the Director determines to be appropriate.

(l) Requirement of application. The Director may make an award under subsection (a) only if an application for the award is submitted to the Director containing such agreements, and the application is in such form, is made in such manner, and contains such other agreements and such assurances and information as the Director determines to be necessary to carry out this section.

(m) Equitable allocation of awards. In making awards under subsection (a), the Director shall ensure that the awards are equitably allocated among the principal geographic regions of the United States, subject to the availability of qualified applicants for the awards.

(n) Duration of award. The period during which payments are made to an entity from an award under subsection (a) may not exceed 5 years. The provision of such payments shall be subject to annual approval by the Director of the payments and subject to the availability of appropriations for the fiscal year involved to make the payments. This subsection may not be construed to establish a limitation on the number of awards under such subsection that may be made to an entity.

(o) Evaluations; dissemination of findings. The Director shall, directly or through contract, provide for the conduct of evaluations of programs carried out pursuant to subsection (a). The Director shall disseminate to the States the findings made as a result of the evaluations.

(p) Reports to Congress. Not later than October 1, 1994, the Director shall submit to the Committee on Energy and Commerce of the House of Representatives, and to the Committee on Labor and Human Resources of the Senate, a report describing programs carried out pursuant to this section. Every 2 years thereafter, the Director shall prepare a report describing such programs carried out during the preceding 2 years, and shall submit the report to the Administrator for inclusion in the biennial report under section 501(k) [42 USC 290aa(k)]. Each report under this subsection shall include a summary of any evaluations conducted under subsection (m) during the period with respect to which the report is prepared.

(q) Definitions. For purposes of this section:

(1) The term "authorized services" means treatment services and supplemental services.

(2) The term "eligible woman" means a woman who has been admitted to a program operated pursuant to subsection (a).

(3) The term "funding agreement under subsection (a)", with respect to an award under subsection (a), means that the Director may make the award only if the applicant makes the agreement involved.

(4) The term "treatment services" means treatment for substance abuse, including the counseling and services described in subsection (c)(2).

(5) The term "supplemental services" means the services described in subsection (d).

(r) Authorization of appropriations.(1) In general. For the purpose of carrying out this section and section 509 [42 USC 290bb-2], there are authorized to be appropriated \$100,000,000 for fiscal year 1993, and such sums as may be necessary for fiscal year 1994.

(2) Transfer. For the purpose described in paragraph (1), in addition to the amounts authorized in such paragraph to be appropriated for a fiscal year, there is authorized to be appropriated for the fiscal year from the special forfeiture fund of the Director of the Office of National Drug Control Policy such sums as may be necessary.

(3) Rule of construction. The amounts authorized in this subsection to be appropriated are in addition to any other amounts that are authorized to be appropriated and are available for the purpose described in paragraph (1).

(July 1, 1944, ch 373, Title V, Part B, Subpart 1, 508, as added July 10, 1992, P. L. 102-321, Title I, Subtitle A, 108(a), 106 Stat. 336.)

Section 290bb-1a. [Transferred]

Section 290bb-2. Outpatient treatment programs for pregnant and

postpartum women

(a) Grants. The Secretary, acting through the Director of the Treatment Center, shall make grants to establish projects for the outpatient treatment of substance abuse among pregnant and postpartum women, and in the case of conditions arising in the infants of such women as a result of such abuse by the women, the outpatient treatment of the infants for such conditions.

(b) Prevention. Entities receiving grants under this section shall engage in activities to prevent substance abuse among pregnant and postpartum women.

(c) Evaluation. The Secretary shall evaluate projects carried out under subsection (a) and shall disseminate to appropriate public and private entities information on effective projects.

(July 1, 1944, ch 373, Title V, Part B, Subpart 1, 509, as added July 10, 1992, P. L. 102-321, Title I, Subtitle A, 108(a), 106 Stat. 341.)

Section 290bb-3. Demonstration projects of national significance

(a) Grants for treatment improvement. The Director of the Center for Substance Abuse Treatment shall provide grants to public and nonprofit private entities for the purpose of establishing demonstration projects that will improve the provision of treatment services for substance abuse.

(b) Nature of projects. Grants under subsection (a) shall be awarded to:

(1) projects that provide treatment to adolescents, female addicts and their children, racial and ethnic minorities, or individuals in rural areas, with preference given to such projects that provide treatment for substance abuse to women with dependent children, which treatment is provided in settings in which both primary health services for the women and pediatric care are available;

(2) projects that provide treatment in exchange for public service;

(3) projects that provide treatment services and which are operated by public and nonprofit private entities receiving grants under section 329, 330, 340, 340A [42 USC 254b, 254c, 256, 256a], or other public or nonprofit private entities that provide primary health services;

(4) "treatment campus" projects that:

(A) serve a significant number of individuals simultaneously;

(B) provide residential, non-community based drug treatment;

(C) provide patients with ancillary social services and referrals to community-based aftercare; and

(D) provide services on a voluntary basis;

(5) projects in large metropolitan areas to identify individuals in need of treatment services and to improve the availability and delivery of such services in the areas;

/* Note that treatment of drug abusers who are at risk of HIV infection is included in the priority list. */

(6) in the case of drug abusers who are at risk of HIV infection, projects to conduct outreach activities to the individuals regarding the prevention of exposure to and the transmission of the human immunodeficiency virus, and to encourage the individuals to seek treatment for such abuse; and

(7) projects to determine the long-term efficacy of the projects described in this section and to disseminate to appropriate public and private entities information on the projects that have been effective.

(c) Preferences in making grants. In awarding grants under subsection (a), the Director of the Treatment Center shall give preference to projects that:

(1) demonstrate a comprehensive approach to the problems associated with substance abuse and provide evidence of broad community involvement and support; or

(2) initiate and expand programs for the provision of treatment services (including renovation of facilities, but not construction) in localities in which, and among populations for which, there is a public health crisis as a result of the inadequate availability of such services and a substantial rate of substance abuse.

(d) Duration of grants. The period during which payments are made under a grant under subsection (a) may not exceed 5 years.

(e) Authorization of appropriations.(1) In general. For the purpose of carrying out this section, there are authorized to be appropriated \$175,000,000 for fiscal year 1993, and such sums as may be necessary for fiscal year 1994. The amounts so authorized are in addition to any other amounts that are authorized to be appropriated and available for such purpose.

(2) Allocation. Of the amounts appropriated under paragraph (1) for a fiscal year, the Director of the Treatment Center shall reserve not less than 5 percent for carrying out projects described in subsections (b)(2) and (b)(3).

(July 1, 1944, ch 373, Title V, Part B, Subpart 1, 510, as added July 10, 1992, P. L. 102-321, Title I, Subtitle A, 109, 106 Stat. 342.)

Section 290bb-4. Grants for substance abuse treatment in State and local criminal justice systems

(a) In general. The Director of the Center for Substance Abuse Treatment shall provide grants to public and nonprofit private entities that provide treatment for substance abuse to individuals under criminal justice supervision.

(b) Eligibility. In awarding grants under subsection (a), the Director shall ensure that the grants are reasonably distributed among:

(1) projects that provide treatment services to individuals who are incarcerated in prisons, jails, or community correctional settings; and

(2) projects that provide treatment services to individuals who are not incarcerated, but who are under criminal justice supervision because of their status as pretrial releasees, post-trial releasees, probationers, parolees, or supervised releasees.

(c) Priority. In awarding grants under subsection (a), the Director shall give priority to programs commensurate with the extent to which such programs provide, directly or in conjunction with other public or private nonprofit entities, one or more of the following:

(1) a continuum of offender management services as

individuals enter, proceed through, and leave the criminal justice system, including identification and assessment, substance abuse treatment, pre-release counseling and pre-release referrals with respect to housing, employment and treatment;

(2) comprehensive treatment services for juvenile offenders;

(3) comprehensive treatment services for female offenders, including related services such as violence counseling, parenting and child development classes, and perinatal care;

(4) outreach services to identify individuals under criminal justice supervision who would benefit from substance abuse treatment and to encourage such individuals to seek treatment; or

(5) treatment services that function as an alternative to incarceration for appropriate categories of offenders or that otherwise enable individuals to remain under criminal justice supervision in the least restrictive setting consistent with public safety.

(d) Authorization of appropriations. For the purpose of carrying out this section, there are authorized to be appropriated \$50,000,000 for fiscal year 1993, and such sums as may be necessary for fiscal year 1994.

(July 1, 1944, ch 373, Title V, Part B, Subpart 1, 511, as added July 10, 1992, P. L. 102-321, Title I, Subtitle A, 110, 106 Stat. 343.)

Section 290bb-5. Training in provision of treatment services

(a) In general. The Director of the Center for Substance Abuse Treatment shall develop programs to increase the number of substance abuse treatment professionals and the number of health professionals providing treatment services through the awarding of grants to appropriate public and nonprofit private entities, including agencies of State and local governments, hospitals, schools of medicine, schools of osteopathic medicine, schools of nursing, schools of social work, and graduate programs in marriage and family therapy.

(b) Priority. In awarding grants under subsection (a), the Director shall give priority to projects that train full-time substance abuse treatment professionals and projects that will receive financial support from public entities for carrying out the projects.

(c) Health professions education. In awarding grants under subsection (a), the Director may make grants:

(1) to train individuals in the diagnosis and treatment of alcohol abuse and other drug abuse; and

(2) to develop appropriate curricula and materials for the training described in paragraph (1).

(d) Authorization of appropriations. For the purpose of carrying out this section, there are authorized to be appropriated \$30,000,000 for fiscal year 1993, and such sums as may be necessary for fiscal year 1994.

(July 1, 1944, ch 373, Title V, Part B, Subpart 1, 512, as added July 10, 1992, P. L. 102-321, Title I, Subtitle A, 111, 106 Stat. 344.)

Section 290bb-6. Action by Center for Substance Abuse Treatment and States concerning military facilities

(a) Center for Substance Abuse Treatment. The Director of the Center for Substance Abuse Treatment shall:

(1) coordinate with the agencies represented on the Commission on Alternative Utilization of Military Facilities the utilization of military facilities or parts thereof, as identified by such Commission, established under the National Defense Authorization Act of 1989, that could be utilized or renovated to house nonviolent persons for drug treatment purposes;

(2) notify State agencies responsible for the oversight of drug abuse treatment entities and programs of the availability of space at the installations identified in paragraph (1); and

(3) assist State agencies responsible for the oversight of drug abuse treatment entities and programs in developing methods for adapting the installations described in paragraph (1) into residential treatment centers.

(b) States. With regard to military facilities or parts thereof, as identified by the Commission on Alternative Utilization of Military Facilities established under section 3042 of the Comprehensive Alcohol Abuse, Drug Abuse, and Mental Health Amendments Act of 1988, that could be utilized or renovated to house nonviolent persons for drug treatment purposes, State

agencies responsible for the oversight of drug abuse treatment entities and programs shall:

(1) establish eligibility criteria for the treatment of individuals at such facilities;

(2) select treatment providers to provide drug abuse treatment at such facilities;

(3) provide assistance to treatment providers selected under paragraph (2) to assist such providers in securing financing to fund the cost of the programs at such facilities; and

(4) establish, regulate, and coordinate with the military official in charge of the facility, work programs for individuals receiving treatment at such facilities.

(c) Reservation of space. Prior to notifying States of the availability of space at military facilities under subsection (a)(2), the Director may reserve space at such facilities to conduct research or demonstration projects.

(July 1, 1944, ch 373, Title V, Part B[E], 513[561], as added Nov. 18, 1988, P. L. 100-690, Title II, Subtitle A, Ch 4, 2081(a), 102 Stat. 4215; July 10, 1992, P. L. 102-321, Title I, Subtitle A, 112(a), (b)(1), 106 Stat. 345, 346.)

Center for Substance Abuse Prevention

Section 290bb-21. Office for Substance Abuse Prevention

(a) There is established in the Administration an Office for Substance Abuse Prevention (hereafter referred to in this part [42 USC 290bb et seq.] as the "Prevention Center"). The Office shall be headed by a Director appointed by the Secretary from individuals with extensive experience or academic qualifications in the prevention of drug or alcohol abuse.

(b) The Director of the Prevention Center shall:

(1) sponsor regional workshops on the prevention of drug and alcohol abuse;

(2) coordinate the findings of research sponsored by agencies of the Service on the prevention of drug and alcohol abuse;

(3) develop effective drug and alcohol abuse prevention literature (including literature on the adverse effects of cocaine free base (known as "crack"));

(4) in cooperation with the Secretary of Education, assure the widespread dissemination of prevention materials among States, political subdivisions, and school systems;

(5) support clinical training programs for substance abuse counselors and other health professionals involved in drug abuse education, prevention[,];

/* Another place where HIV prevention among drug abusers is important. */

(6) in cooperation with the Director of the Centers for Disease Control and Prevention, develop educational materials to reduce the risks of acquired immune deficiency syndrome among intravenous drug abusers;

(7) conduct training, technical assistance, data collection, and evaluation activities of programs supported under the Drug Free Schools and Communities Act of 1986;

(8) support the development of model, innovative, community-based programs to discourage alcohol and drug abuse among young people;

(9) prepare for distribution documentary films and public service announcements for television and radio to educate the public concerning the dangers to health resulting from the consumption of alcohol and drugs and, to the extent feasible, use appropriate private organizations and business concerns in the preparation of such announcements; and

(10) develop and support innovative demonstration programs designed to identify and deter the improper use or abuse of anabolic steroids by students, especially students in secondary schools.

(11) [Deleted]

(12) [Redesignated]

(c) The Director may make grants and enter into contracts and cooperative agreements in carrying out subsection (b).

(d) The Director of the Prevention Center shall establish a national data base providing information on programs for the prevention of substance abuse. The data base shall contain information appropriate for use by public entities and information appropriate for use by nonprofit private entities. (July 1, 1944, ch 373, Title V, Part B[A], Subpart 2, 515[508], as added Oct. 27, 1986, P. L. 99-570, Title IV, Subtitle A, 4005(a), 100 Stat. 3207-112; Nov. 18, 1988, P. L. 100-690, Title II, Subtitle A, Ch 2, 2051(a)D(c), 102 Stat. 4206; Sept. 16, 1989, P. L. 101-93, 3(a), 103 Stat. 609; Nov. 29, 1990, P. L. 101-647, Title XIX, 1906, 104 Stat. 4854; July 10, 1992, P. L. 102-321, Title I, Subtitle A, 113(b)D(e), 106 Stat. 345; Oct. 27, 1992, P. L. 102-531, Title III, 312(d)(10), 106 Stat. 3505.)

Section 290bb-22. Alcohol and drug abuse information clearinghouse

(a) In general. The Secretary, acting through the Director of the Prevention Center, shall:

(1) provide assistance to communities to develop comprehensive long-term strategies for the prevention of substance abuse; and

(2) evaluate the success of different community approaches toward the prevention of such abuse.

(b) Strategies for reducing use. The Director of the Prevention Center shall ensure that strategies developed under subsection (a)(1) include strategies for reducing the use of alcoholic beverages and tobacco products by individuals to whom it is unlawful to sell or distribute such beverages or products.

(c) Authorization of appropriations. For the purpose of carrying out subsection (a), there are authorized to be appropriated \$120,000,000 for fiscal year 1993, such sums as may be necessary for fiscal year 1994.

(July 1, 1944, ch 373, Title V, Part B[A], Subpart 2, 516[509], as added Oct. 27, 1986, P. L. 99-570, Title IV, Subtitle A, 4005(a), 100 Stat. 3207-112; July 10, 1992, P. L. 102-321, Title I, Subtitle A, 113(f), 106 Stat. 345.)

Section 290bb-23. Prevention, treatment, and rehabilitation model projects for high risk youth

(a) The Secretary, through the Director of the Prevention Center, shall make grants to public and nonprofit private entities for projects to demonstrate effective models for the prevention, treatment, and rehabilitation of drug abuse and alcohol abuse among high risk youth.

(b) (1) In making grants for drug abuse and alcohol abuse prevention projects under this section, the Secretary shall give priority to applications for projects directed at children of substance abusers, latchkey children, children at risk of abuse or neglect, preschool children eligible for services under the Head Start Act, children at risk of dropping out of school, children at risk of becoming adolescent parents, and children who do not attend school and who are at risk of being unemployed.

(2) In making grants for drug abuse and alcohol abuse treatment and rehabilitation projects under this section, the Secretary shall give priority to projects which address the relationship between drug abuse or alcohol abuse and physical child abuse, sexual child abuse, emotional child abuse, dropping out of school, unemployment, delinquency, pregnancy, violence, suicide, or mental health problems.

(3) In making grants under this section, the Secretary shall give priority to applications from community based organizations for projects to develop innovative models with multiple, coordinated services for the prevention or for the treatment and rehabilitation of drug abuse or alcohol abuse by high risk youth.

(4) In making grants under this section, the Secretary shall give priority to applications for projects to demonstrate effective models with multiple, coordinated services which may be replicated and which are for the prevention or for the treatment and rehabilitation of drug abuse or alcohol abuse by high risk youth.

(5) In making grants under this section, the Secretary shall give priority to applications that employ research designs adequate for evaluating the effectiveness of the program.

(c) The Secretary shall ensure that projects under subsection (a) include strategies for reducing the use of alcoholic beverages and tobacco products by individuals to whom it is unlawful to sell or distribute such beverages or products.

(d) To the extent feasible, the Secretary shall make grants under this section in all regions of the United States, and shall ensure the distribution of grants under this section among urban

and rural areas.

(e) In order to receive a grant for a project under this section for a fiscal year, a public or nonprofit private entity shall submit an application to the Secretary, acting through the Prevention Center. The Secretary may provide to the Governor of the State the opportunity to review and comment on such application. Such application shall be in such form, shall contain such information, and shall be submitted at such time as the Secretary may by regulation prescribe.

(f) The Director of the Prevention Center shall evaluate projects conducted with grants under this section.

(g) For purposes of this section, the term "high risk youth" means an individual who has not attained the age of 21 years, who is at high risk of becoming, or who has become, a drug abuser or an alcohol abuser, and who:

- (1) is identified as a child of a substance abuser;
- (2) is a victim of physical, sexual, or psychological abuse;
- (3) has dropped out of school;
- (4) has become pregnant;
- (5) is economically disadvantaged;
- (6) has committed a violent or delinquent act;
- (7) has experienced mental health problems;
- (8) has attempted suicide;
- (9) has experienced long-term physical pain due to injury;

or

- (10) has experienced chronic failure in school.

(h) For the purpose of carrying out this section, there are authorized to be appropriated \$70,000,000 for fiscal year 1993, and such sums as may be necessary for fiscal year 1994.

(July 1, 1944, ch 373, Title V, Part B[A], Subpart 2, 517[509A], as added Oct. 27, 1986, P. L. 99-570, Title IV, Subtitle A, 4005(a), 100 Stat. 3207-113; Nov. 18, 1988, P. L. 100-690, Title II, Subtitle A, Ch 2, 2051(d), 102 Stat. 4206; July 10, 1992, P.

L. 102-321, Title I, Subtitle A, 114, 106 Stat. 346.)

Section 290bb-24. Employee assistance programs

(a) In general. The Director of the Prevention Center may make grants to public and nonprofit private entities for the purpose of assisting business organizations in establishing employee assistance programs to provide appropriate services for employees of the organizations regarding substance abuse, including education and prevention services and referrals for treatment.

(b) Certain requirements. A business organization may not be assisted under subsection (a) if the organization has an employee assistance program in operation. The organization may receive such assistance only if the organization lacks the financial resources for operating such a program.

(c) Special consideration for certain small businesses. In making grants under subsection (a), the Director of the Prevention Office shall give special consideration to business organizations with 50 or fewer employers.

(d) Consultation and technical assistance. In the case of small businesses being assisted under subsection (a), the Secretary shall consult with the entities and organizations involved and provide technical assistance and training with respect to establishing and operating employee assistance programs in accordance with this subtitle. Such assistance shall include technical assistance in establishing workplace substance abuse programs.

(e) Authorization of appropriations. For the purpose of carrying out this section, there are authorized to be appropriated \$3,000,000 for fiscal year 1993, and such sums as may be necessary for fiscal year 1994.

(July 1, 1944, ch 373, Title V, Part B, Subpart 2, 518, as added July 10, 1992, P. L. 102-321, Title I, Subtitle F, 171, 106 Stat. 377.)

Center for Mental Health Services

Section 290bb-31. Center for Mental Health Services

(a) Establishment. There is established in the Administration a Center for Mental Health Services (hereafter in this section

referred to as the "Center"). The Center shall be headed by a Director (hereafter in this section referred to as the "Director") appointed by the Secretary from among individuals with extensive experience or academic qualifications in the provision of mental health services or in the evaluation of mental health service systems.

(b) Duties. The Director of the Center shall:

(1) design national goals and establish national priorities for:

(A) the prevention of mental illness; and

(B) the promotion of mental health;

(2) encourage and assist local entities and State agencies to achieve the goals and priorities described in paragraph (1);

(3) develop and coordinate Federal prevention policies and programs and to assure increased focus on the prevention of mental illness and the promotion of mental health;

(4) develop improved methods of treating individuals with mental health problems and improved methods of assisting the families of such individuals;

(5) administer the mental health services block grant program authorized in section 1911 [42 USC 300x];

(6) promote policies and programs at Federal, State, and local levels and in the private sector that foster independence and protect the legal rights of persons with mental illness, including carrying out the provisions of the Protection and Advocacy of Mentally Ill Individuals Act [42 USC 10801 et seq.];

(7) carry out the programs authorized under sections 520A and 521 [42 USC 290bb-32, 290cc-21], including the Community Support Program and the Child and Adolescent Service System Programs;

(8) carry out responsibilities for the Human Resource Development program, and programs of clinical training for professional and paraprofessional personnel pursuant to section 303 [42 USC 242a];

(9) conduct services-related assessments, including

evaluations of the organization and financing of care, self-help and consumer-run programs, mental health economics, mental health service systems, rural mental health, and improve the capacity of State to conduct evaluations of publicly funded mental health programs;

(10) establish a clearinghouse for mental health information to assure the widespread dissemination of such information to States, political subdivisions, educational agencies and institutions, treatment and prevention service providers, and the general public, including information concerning the practical application of research supported by the National Institute of Mental Health that is applicable to improving the delivery of services;

(11) provide technical assistance to public and private entities that are providers of mental health services;

(12) monitor and enforce obligations incurred by community mental health centers pursuant to the Community Mental Health Centers Act [former 42 USC 2689D2689e] (as in effect prior to the repeal of such Act on August 13, 1981, by section 902(e)(2)(B) of Public Law 97-35 (95 Stat. 560));

(13) conduct surveys with respect to mental health, such as the National Reporting Program; and

(14) assist States in improving their mental health data collection.

(c) Grants and contracts. In carrying out the duties established in subsection (b), the Director may make grants to and enter into contracts and cooperative agreements with public and nonprofit private entities.

(July 1, 1944, ch 373, Title V, Part B, Subpart 3, 520, as added July 10, 1992, P. L. 102-321, Title I, Subtitle A, 115(a), 106 Stat. 346.)

Section 290bb-32. Establishment of grant program for demonstration projects

(a) Seriously mentally ill individuals, and children and adolescents with serious emotional and mental disturbances.(1) In general. The Secretary, acting through the Director of the Center for Mental Health Services, may make grants to States, political subdivisions of States, and nonprofit private agencies for:

(A) mental health services demonstration projects for the planning, coordination and improvement of community services (including outreach and consumer-run self-help services) for seriously mentally ill individuals and their families, seriously emotionally and mentally disturbed children and youth and their families, and seriously mentally ill homeless and elderly individuals;

(B) demonstration projects for the prevention of youth suicide;

(C) demonstration projects for the improvement of the recognition, assessment, treatment and clinical management of depressive disorders;

(D) demonstration projects for programs to prevent the occurrence of sex offenses, and for the provision of treatment and psychological assistance to the victims of sex offenses; and

(E) demonstration projects for programs to provide mental health services to victims of family violence.

(2) Mental health services. Mental health services provided under paragraph (1)(A) should encompass a range of delivery systems designed to permit individuals to receive treatment in the most therapeutically appropriate, least restrictive setting. Grants shall be awarded under such paragraph for:

(A) research demonstration programs concerning such services; and

(B) systems improvements to assist States and local entities to develop appropriate comprehensive mental health systems for adults with serious long-term mental illness and children and adolescents with serious emotional and mental disturbance.

(b) Individuals at risk of mental illness.(1) The Secretary, acting through the Director, may make grants to States, political subdivisions of States, and private nonprofit agencies for prevention services demonstration projects for the provision of prevention services for individuals who, in the determination of the Secretary, are at risk of developing mental illness.

(2) Demonstration projects under paragraph (1) may include:

(A) prevention services for populations at risk of developing mental illness, particularly displaced workers, young children, and adolescents;

(B) the development and dissemination of education materials;

(C) the sponsoring of local, regional, or national workshops or conferences;

(D) the conducting of training programs with respect to the provision of mental health services to individuals described in paragraph (1); and

(E) the provision of technical assistance to providers of such services.

(c) Limitation on duration of grant. The Secretary may make a grant under subsection (a) or (b) for not more than five consecutive one-year periods.

(d) Limitation on administrative expenses. The Secretary may not make a grant under subsection (a) or (b) to an applicant unless the applicant agrees that not more than 10 percent of such a grant will be expended for administrative expenses.

(e) Authorizations of appropriations.(1) For the purposes of carrying out this section, there are authorized to be appropriated \$50,000,000 for fiscal year 1993, and such sums as may be necessary for fiscal year 1994.

(2) Of the amounts appropriated pursuant to paragraph (1), the Secretary shall make available 15 percent for demonstration projects to carry out the purpose of this section in rural areas.

(July 1, 1944, ch 373, Title V[VI], Part B, Subpart 3, 520A[520][520A], as added Nov. 18, 1988, P. L. 100-690, Title II, Subtitle A, Ch 2, 2057(3), 102 Stat. 4212; Sept. 16, 1989, P. L. 101-93, 3(e), (g), 103 Stat. 610, 611; Nov. 28, 1990, P. L. 101-639, 2, 104 Stat. 4600; July 10, 1992, P. L. 102-321, Title I, Subtitle A, 116, 106 Stat. 348.)

Section 290bb-33. Demonstration projects for individuals with positive test results

(a) In general. The Secretary, acting through the Director of the Center for Mental Health Services, may make grants to public and nonprofit private entities for demonstration projects for the

development, establishment, or expansion of programs to provide counseling and mental health treatment:

(1) for individuals who experience serious psychological reactions as a result of being informed that the results of testing for the etiologic agent for acquired immune deficiency syndrome indicate that the individuals are infected with such etiologic agent; and

(2) for the families of such individuals, and for others, who experience serious psychological reactions as a result of being informed of the results of such testing of such individuals.

(b) Preferences in making grants. In making grants under subsection (a), the Secretary shall give preference to applicants that are based at, or have relationships with, entities providing comprehensive health services to individuals who are infected with the etiologic agent for acquired immune deficiency syndrome.

(c) Requirement of provision of information on prevention. The Secretary may not make a grant under subsection (a) unless the applicant for the grant agrees that counseling provided pursuant to such subsection will include counseling relating to measures for the prevention of exposure to, and the transmission of, the etiologic agent for acquired immune deficiency syndrome.

(d) Authority for training. A grantee under subsection (a) may expend the grant to train individuals to provide the services described in such subsection.

(e) Requirement of identification of needs and objectives. The Secretary may not make a grant under subsection (a) unless the applicant for the grant submits to the Secretary:

(1) information demonstrating that the applicant has, with respect to mental health treatment related to the etiologic agent for acquired immune deficiency syndrome, identified the need for such treatment in the area in which the program will be developed, established, or expanded; and

(2) a description of:

(A) the objectives established by the applicant for the conduct of the program; and

(B) the method the applicant will use to evaluate the activities conducted under the program and to determine the extent to which such objectives have been met.

(f) Requirement of application. The Secretary may not make a grant under subsection (a) unless:

(1) an application for the grant is submitted to the Secretary;

(2) with respect to carrying out the purpose for which the grant is to be made, the application provides assurances of compliance satisfactory to the Secretary;

(3) the application contains the information required to be submitted under subsection (e); and

(4) the application otherwise is in such form, is made in such manner, and contains such agreements, assurances, and information as the Secretary determines to be necessary to carry out this section.

(g) Requirement of minimum number of grants for fiscal year 1989. Subject to the extent of amounts made available in appropriations Acts, the Secretary shall, for fiscal year 1989, make not less than 6 grants under subsection (a).

(h) Technical assistance and administrative support. The Secretary, acting through the Director of the National Institute of Mental Health, may provide technical assistance and administrative support to grantees under subsection (a).

(i) "Mental health treatment" defined. For purposes of this section, the term "mental health treatment" means individual, family or group services designed to alleviate distress, improve functional ability, or assist in changing dysfunctional behavior patterns.

(j) Authorization of appropriations. For the purpose of carrying out this section, there are authorized to be appropriated such sums as may be necessary for each of the fiscal years 1989 through 1994.