

§ 290aa-5. Grants for the benefit of homeless individuals

(a) In general

The Secretary shall award grants, contracts and cooperative agreements to community-based public and private nonprofit entities for the purposes of providing mental health and substance use disorder services for homeless individuals. In carrying out this section, the Secretary shall consult with the Interagency Council on the Homeless¹, established under section 11311 of this title.

(b) Preferences

In awarding grants, contracts, and cooperative agreements under subsection (a), the Secretary shall give a preference to—

- (1) entities that provide integrated primary health, substance use disorder, and mental health services to homeless individuals;
- (2) entities that demonstrate effectiveness in serving runaway, homeless, and street youth;
- (3) entities that have experience in providing substance use disorder and mental health services to homeless individuals;
- (4) entities that demonstrate experience in providing housing for individuals in treatment for or in recovery from mental illness or a substance use disorder; and
- (5) entities that demonstrate effectiveness in serving homeless veterans.

(c) Services for certain individuals

In awarding grants, contracts, and cooperative agreements under subsection (a), the Secretary shall not—

- (1) prohibit the provision of services under such subsection to homeless individuals who are suffering from a substance use disorder and are not suffering from a mental health disorder; and
- (2) make payments under subsection (a) to any entity that has a policy of—
 - (A) excluding individuals from mental health services due to the existence or suspicion of a substance use disorder; or
 - (B) has a policy of excluding individuals from substance use disorder services due to the existence or suspicion of mental illness.

(d) Term of the awards

No entity may receive a grant, contract, or cooperative agreement under subsection (a) for more than 5 years.

(e) Authorization of appropriations

There is authorized to be appropriated to carry out this section \$41,304,000 for each of fiscal years 2023 through 2027.

(July 1, 1944, ch. 373, title V, § 506, formerly § 512, as added Pub. L. 98-509, title II, § 206(a), Oct. 19, 1984, 98 Stat. 2361; amended Pub. L. 100-77, title VI, § 613(a), (b), July 22, 1987, 101 Stat. 524; renumbered § 506 and amended Pub. L. 102-321, title I, § 106, July 10, 1992, 106 Stat. 334; Pub. L. 106-310, div. B, title XXXII, § 3202, Oct. 17, 2000, 114 Stat. 1190; Pub. L. 106-400, § 2, Oct. 30, 2000, 114 Stat. 1675; Pub. L. 114-255, div. B, title IX, § 9001, Dec. 13, 2016, 130 Stat. 1234; Pub. L. 117-328,

div. FF, title I, § 1211, Dec. 29, 2022, 136 Stat. 5661.)

Editorial Notes

CODIFICATION

Section was formerly classified to section 290bb-1a of this title prior to renumbering by Pub. L. 102-321.

PRIOR PROVISIONS

A prior section 290aa-5, act July 1, 1944, ch. 373, title V, § 507, formerly § 506, as added Apr. 26, 1983, Pub. L. 98-24, § 2(b)(7), 97 Stat. 178; amended Nov. 20, 1985, Pub. L. 99-158, § 3(c), 99 Stat. 879; renumbered § 507 and amended Oct. 27, 1986, Pub. L. 99-570, title IV, §§ 4004(a), 4007, 100 Stat. 3207-109, 3207-115, which related to peer review of biomedical and behavioral research and development grants, was renumbered section 504 of act July 1, 1944, by Pub. L. 102-321 and transferred to section 290aa-3 of this title.

A prior section 506 of act July 1, 1944, which was classified to section 224 of this title, was successively renumbered by subsequent acts, and transferred, see section 238c of this title.

AMENDMENTS

2022—Subsec. (e). Pub. L. 117-328 substituted “2023 through 2027” for “2018 through 2022”.

2016—Subsec. (a). Pub. L. 114-255, § 9001(1), substituted “substance use disorder” for “substance abuse”.

Subsec. (b)(1), (3). Pub. L. 114-255, § 9001(2)(A), substituted “substance use disorder” for “substance abuse”.

Subsec. (b)(4). Pub. L. 114-255, § 9001(2)(B), substituted “a substance use disorder” for “substance abuse”.

Subsec. (c)(1). Pub. L. 114-255, § 9001(3)(A), substituted “substance use disorder” for “substance abuse disorder”.

Subsec. (c)(2)(A). Pub. L. 114-255, § 9001(3)(B)(i), substituted “a substance use disorder” for “substance abuse”.

Subsec. (c)(2)(B). Pub. L. 114-255, § 9001(3)(B)(ii), substituted “substance use disorder” for “substance abuse”.

Subsec. (e). Pub. L. 114-255, § 9001(4), substituted “\$41,304,000 for each of fiscal years 2018 through 2022” for “\$, \$50,000,000 for fiscal year 2001, and such sums as may be necessary for each of the fiscal years 2002 and 2003”.

2000—Pub. L. 106-310 amended section catchline and text generally, substituting present provisions for provisions, in subsec. (a), authorizing Secretary to make grants for benefit of homeless individuals through the Administrator of Substance Abuse and Mental Health Services Administration, in subsec. (b), relating to preferences for grants to entities providing integrated primary health, substance abuse, and mental health services, in subsec. (c), relating to services for certain individuals, in subsec. (d), relating to 5-year grants with renewals, and in subsec. (e), authorizing appropriations for fiscal years 1993 and 1994.

Subsec. (a). Pub. L. 106-400 made technical amendment to reference in original act which appears in text as reference to section 11311 of this title.

1992—Pub. L. 102-321 amended section generally, substituting provisions relating to grants for benefit of homeless individuals for provisions relating to alcohol abuse and alcoholism demonstration projects.

1987—Subsecs. (c), (d). Pub. L. 100-77 added subsec. (c), redesignated former subsec. (c) as (d), and substituted “subsection (a) or (c)” for “subsection (a)”.

Statutory Notes and Related Subsidiaries

CHANGE OF NAME

Interagency Council on the Homeless changed to United States Interagency Council on Homelessness by Pub. L. 108-199, div. G, title II, § 216, Jan. 23, 2004, 118 Stat. 394.

¹ See Change of Name note below.

EFFECTIVE DATE OF 1992 AMENDMENT

Amendment by Pub. L. 102-321 effective Oct. 1, 1992, with provision for programs providing financial assistance, see section 801(c), (d) of Pub. L. 102-321, set out as a note under section 236 of this title.

§ 290aa-5a. Behavioral health and substance use disorder resources for Native Americans

(a) Definitions

In this section:

(1) The term “eligible entity” means any health program administered directly by the Indian Health Service, a Tribal health program, an Indian Tribe, a Tribal organization, an Urban Indian organization, and a Native Hawaiian health organization.

(2) The terms “Indian Tribe”, “Tribal health program”, “Tribal organization”, and “Urban Indian organization” have the meanings given to the terms “Indian tribe”, “Tribal¹ health program”, “tribal organization”, and “Urban Indian organization” in section 1603 of title 25.

(3) The term “health program administered directly by the Indian Health Service” means a “health program administered by the Service”² as such term is used in section 1603(12)(A) of title 25.

(4) The term “Native Hawaiian health organization” means “Papa Ola Lokahi” as defined in section 11711 of this title.

(b) Grant program

(1) In general

The Secretary, acting through the Assistant Secretary for Mental Health and Substance Use, and in consultation with the Director of the Indian Health Service, as appropriate, shall award funds to eligible entities, in amounts developed in accordance with paragraph (2), to be used by the eligible entity to provide services for the prevention of, treatment of, and recovery from mental health and substance use disorders among American Indians, Alaska Natives, and Native Hawaiians.

(2) Formula

The Secretary, in consultation with the Director of the Indian Health Service, using the process described in subsection (d), shall develop a formula to determine the amount of an award under paragraph (1).

(3) Delivery of funds

On request from an Indian Tribe or Tribal organization, the Secretary, acting through the Assistant Secretary for Mental Health and Substance Use and in coordination with the Director of the Indian Health Service, may award funds under this section through a contract or compact under, as applicable, title I or V of the Indian Self-Determination and Education Assistance Act.

(c) Technical assistance and program evaluation

(1) In general

The Secretary shall—

(A) provide technical assistance to applicants and awardees under this section; and

(B) in consultation with Indian Tribes and Tribal organizations, conference with Urban Indian organizations, and engagement with a Native Hawaiian health organization, identify and establish appropriate mechanisms for Indian Tribes and Tribal organizations, Urban Indian organizations, and a Native Hawaiian health organization to demonstrate outcomes and report data as required for participation in the program under this section.

(2) Data submission and reporting

As a condition of receipt of funds under this section, an applicant shall agree to submit program evaluation data and reports consistent with the data submission and reporting requirements developed under this subsection.

(d) Consultation

The Secretary shall, using an accountable process, consult with Indian Tribes and Tribal organizations, confer with Urban Indian organizations, and engage with a Native Hawaiian health organization regarding the development of funding allocations pursuant to subsection (b)(2) and program evaluation and reporting requirements pursuant to subsection (c). In establishing such requirements, the Secretary shall seek to minimize administrative burden for eligible entities, as practicable.

(e) Application

An entity desiring an award under subsection (b) shall submit an application to the Secretary at such time, in such manner, and accompanied by such information as the Secretary may reasonably require.

(f) Report

Not later than 3 years after December 29, 2022, the Secretary shall prepare and submit, to the Committee on Health, Education, Labor, and Pensions of the Senate, and the Committee on Energy and Commerce of the House of Representatives, a report describing the services provided pursuant to this section.

(g) Authorization of appropriations

There are authorized to be appropriated to carry out this section, \$80,000,000 for each of fiscal years 2023 through 2027.

(July 1, 1944, ch. 373, title V, §506A, as added Pub. L. 106-310, div. B, title XXXIII, §3306, Oct. 17, 2000, 114 Stat. 1215; amended Pub. L. 117-328, div. FF, title I, §1201, Dec. 29, 2022, 136 Stat. 5659.)

Editorial Notes

REFERENCES IN TEXT

The Indian Self-Determination and Education Assistance Act, referred to in subsec. (b)(3), is Pub. L. 93-638, Jan. 4, 1975, 88 Stat. 2203. Title I of the Act, also known as the Indian Self-Determination Act, is classified principally to subchapter I (§5321 et seq.) of chapter 46 of Title 25, Indians. Title V of the Act is classified generally to subchapter V (§5381 et seq.) of such chapter. For complete classification of this Act to the Code, see section 1 of Pub. L. 93-638, set out as a Short Title note under section 5301 of Title 25 and Tables.

AMENDMENTS

2022—Pub. L. 117-328 amended section generally. Prior to amendment, section related to alcohol and drug pre-

¹ So in original. Probably should be “tribal”.

² So in original. Probably should be “health program administered directly by the Service”.