

(3) Funding contingency

Paragraph (2) shall not apply to a fiscal year unless the amount made available to carry out this section for such fiscal year exceeds the amount appropriated to carry out this section (as in effect before December 29, 2022) for fiscal year 2022.

(July 1, 1944, ch.373, title V, §520K, as added Pub. L. 111-148, title V, §5604, Mar. 23, 2010, 124 Stat. 679; amended Pub. L. 114-255, div. B, title IX, §9003, Dec. 13, 2016, 130 Stat. 1235; Pub. L. 117-328, div. FF, title I, §1301, Dec. 29, 2022, 136 Stat. 5692.)

Editorial Notes

REFERENCES IN TEXT

Section 223 of the Protecting Access to Medicare Act of 2014, referred to in subsec. (g)(2), is section 223 of Pub. L. 113-93, which is set out as a note under section 1396a of this title.

AMENDMENTS

2022—Pub. L. 117-328 amended section generally. Prior to amendment, section authorized Secretary to award grants and cooperative agreements to eligible entities to support improvement of integrated care for primary care and behavioral health care.

2016—Pub. L. 114-255 amended section generally. Prior to amendment, section related to awards for co-locating primary and specialty care in community-based mental health settings.

§ 290bb-43. Adult suicide prevention**(a) Grants****(1) In general**

The Assistant Secretary shall award grants to eligible entities described in paragraph (2) to implement suicide prevention and intervention programs, for adult individuals, that are designed to raise awareness of suicide prevention, establish referral processes, and improve care and outcomes for such individuals who are at risk of suicide.

(2) Eligible entities

To be eligible to receive a grant under this section, an entity shall be a community-based primary care or behavioral health care setting, an emergency department, a State mental health agency (or State health agency with mental or behavioral health functions), public health agency, a territory of the United States, or an Indian Tribe or Tribal organization (as the terms “Indian Tribe” and “Tribal organization” are defined in section 5304 of title 25).

(3) Use of funds

The grants awarded under paragraph (1) shall be used to implement programs, in accordance with such paragraph, that include one or more of the following components:

(A) Screening for suicide risk, suicide intervention services, and services for referral for treatment for individuals at risk for suicide.

(B) Implementing evidence-based practices to provide treatment for individuals at risk for suicide, including appropriate followup services.

(C) Raising awareness of suicide prevention resources and promoting help seeking among those at risk for suicide.

(b) Evaluations and technical assistance

The Assistant Secretary shall—

(1) evaluate the activities supported by grants awarded under subsection (a), and disseminate, as appropriate, the findings from the evaluation;

(2) provide appropriate information, training, and technical assistance, as appropriate, to eligible entities that receive a grant under this section, in order to help such entities to meet the requirements of this section, including assistance with selection and implementation of evidence-based interventions and frameworks to prevent suicide; and

(3) identify best practices, as applicable, to improve the identification, assessment, treatment, and timely transition, as appropriate, to additional or follow-up care for individuals in emergency departments who are at risk for suicide and enhance the coordination of care for such individuals during and after discharge, in support of activities under subsection (a).

(c) Duration

A grant under this section shall be for a period of not more than 5 years.

(d) Authorization of appropriations

There are authorized to be appropriated to carry out this section \$30,000,000 for each of fiscal years 2023 through 2027.

(July 1, 1944, ch. 373, title V, §520L, as added Pub. L. 114-255, div. B, title IX, §9009, Dec. 13, 2016, 130 Stat. 1243; amended Pub. L. 117-328, div. FF, title I, §1122(c), Dec. 29, 2022, 136 Stat. 5652.)

Editorial Notes

AMENDMENTS

2022—Subsec. (a)(1). Pub. L. 117-328, §1122(c)(1)(A), substituted “adult individuals” for “individuals who are 25 years of age or older” and inserted “prevention” after “raise awareness of suicide”.

Subsec. (a)(2). Pub. L. 117-328, §1122(c)(1)(B), in two places, substituted “Indian Tribe” for “Indian tribe” and “Tribal organization” for “tribal organization”.

Subsec. (a)(3)(C). Pub. L. 117-328, §1122(c)(1)(C), amended subpar. (C) generally. Prior to amendment, subpar. (C) read as follows: “Raising awareness and reducing stigma of suicide.”

Subsec. (b)(3). Pub. L. 117-328, §1122(c)(2), added par. (3).

Subsec. (d). Pub. L. 117-328, §1122(c)(3), substituted “\$30,000,000 for each of fiscal years 2023 through 2027” for “\$30,000,000 for the period of fiscal years 2018 through 2022”.

§ 290bb-44. Assertive community treatment grant program**(a) In general**

The Assistant Secretary shall award grants to eligible entities—

(1) to establish assertive community treatment programs for adults with a serious mental illness; or

(2) to maintain or expand such programs.

(b) Eligible entities

To be eligible to receive a grant under this section, an entity shall be a State, political sub-