Office of Inspector General, the Indian Health Service, and the Centers for Medicare & Medicaid Services;''.

Subsec. (a)(2)(B). Pub. L. 117–328, §1232(2)(A)–(C), redesignated subpar. (C) as (B), substituted ''Tribal'' for ''tribal'', and struck out former subpar. (B) which read as follows: ''the Secretary of Housing and Urban Development;''.

Subsec. (a)(2)(C). Pub. L. 117–328, §1232(2)(B), redesignated subpar. (D) as (C). Former subpar. (C) redesignated (B).

Subsec. (a)(2)(D). Pub. L. 117–328, §1232(2)(B), (D), redesignated subpar. (E) as (D) and substituted ''Tribes, Tribal organizations, and Tribally'' for ''tribes, tribal organizations, and tribally''. Former subpar. (D) redesignated (C).

Subsec. (a)(2)(E) to (G). Pub. L. 117–328, §1232(2)(B), redesignated subpars. (F) and (G) as (E) and (F), respectively. Former subpar. (E) redesignated (D).

Subsec. (a)(3), (4). Pub. L. 117–328, §1232(3), added pars. (3) and (4).

Subsec. (c)(2). Pub. L. 117–328, §1233(2), substituted ''Indian Tribes, Tribal'' for ''Indian tribes, tribal''.

Subsec. (e). Pub. L. 117–328, §1233(4), added subsec. (e). Former subsec. (e) redesignated (g).

Subsec. (f). Pub. L. 117–328, §1235, added subsec. (f). Former subsec. (f) redesignated (h).

Subsec. (g). Pub. L. 117–328, §1233(1), redesignated subsec. (e) as (g). Former subsec. (g) redesignated (i).

Subsec. (h). Pub. L. 117–328, §1233(1), redesignated subsec. (f) as (h).

Subsec. (h)(2). Pub. L. 117–328, §1233(3), substituted ''Indian Tribe'' for ''Indian tribe'' and ''Tribal organization'' for ''tribal organization''.

Subsec. (i). Pub. L. 117–328, §1236, substituted ''$5,000,000 for the period of fiscal years 2023 through 2027'' for ''$3,000,000 for the period of fiscal years 2019 through 2021''.

Pub. L. 117–328, §1233(1), redesignated subsec. (g) as (i).

§ 290ee–5a. Sobriety treatment and recovery teams

(a) In general

The Secretary may make grants to States, units of local government, or tribal governments to establish or expand Sobriety Treatment And Recovery Team (referred to in this section as ''START'') or other similar programs to determine the effectiveness of pairing social workers or mentors with families that are struggling with a substance use disorder and child abuse or neglect in order to help provide peer support, intensive treatment, and child welfare services to such families.

(b) Allowable uses

A grant awarded under this section may be used for one or more of the following activities:

(1) Training eligible staff, including social workers, social services coordinators, child welfare specialists, substance use disorder treatment professionals, and mentors.

(2) Expanding access to substance use disorder treatment services and drug testing.

(3) Enhancing data sharing with law enforcement agencies, child welfare agencies, substance use disorder treatment providers, judges, and court personnel.

(4) Program evaluation and technical assistance.

(c) Program requirements

A State, unit of local government, or tribal government receiving a grant under this section shall—

(1) serve only families for which—

(A) there is an open record with the child welfare agency; and

(B) substance use disorder was a reason for the record or finding described in paragraph (1);[1] and

(2) coordinate any grants awarded under this section with any grant awarded under section 629g(f) of this title focused on improving outcomes for children affected by substance abuse.

(d) Technical assistance

The Secretary may reserve not more than 5 percent of funds provided under this section to provide technical assistance on the establishment or expansion of programs funded under this section from the National Center on Substance Abuse and Child Welfare.

(July 1, 1944, ch. 373, title V, §550A, formerly §550, as added Pub. L. 115–271, title VIII, §8214, Oct. 24, 2018, 132 Stat. 4116; renumbered §550A, Pub. L. 117–328, div. FF, title I, §1237, Dec. 29, 2022, 136 Stat. 5677.)

Editorial Notes

CODIFICATION

Section was formerly classified to section 290ee–10 of this title prior to renumbering by Pub. L. 117–328.

§ 290ee–6. Regional Centers of Excellence in Substance Use Disorder Education

(a) In general

The Secretary, in consultation with appropriate agencies, shall award cooperative agreements to eligible entities for the designation of such entities as Regional Centers of Excellence in Substance Use Disorder Education for purposes of improving health professional training resources with respect to substance use disorder prevention, treatment, and recovery.

(b) Eligibility

To be eligible to receive a cooperative agreement under subsection (a), an entity shall—

(1) be an accredited entity that offers education to students in various health professions, which may include—

(A) a teaching hospital;

(B) a medical school;

(C) a certified behavioral health clinic; or

(D) any other health professions school, school of public health, or Cooperative Extension Program at institutions of higher education, as defined in section 1001 of title 20, engaged in the prevention, treatment, or recovery of substance use disorders;

(2) demonstrate community engagement and partnerships with community stakeholders, including entities that train health professionals, mental health counselors, social workers, peer recovery specialists, substance use treatment programs, community health centers, physician offices, certified behavioral health clinics, research institutions, and law enforcement; and

(3) submit to the Secretary an application containing such information, at such time,

[1] So in original. Probably should be ''subparagraph (A)''.

and in such manner, as the Secretary may require.

(c) Activities

An entity receiving an award under this section shall develop, evaluate, and distribute evidence-based resources regarding the prevention and treatment of, and recovery from, substance use disorders. Such resources may include information on—

(1) the neurology and pathology of substance use disorders;

(2) advancements in the treatment of substance use disorders;

(3) techniques and best practices to support recovery from substance use disorders;

(4) strategies for the prevention and treatment of, and recovery from substance use disorders across patient populations; and

(5) other topic areas that are relevant to the objectives described in subsection (a).

(d) Geographic distribution

In awarding cooperative agreements under subsection (a), the Secretary shall take into account regional differences among eligible entities and shall make an effort to ensure geographic distribution.

(e) Evaluation

The Secretary shall evaluate each project carried out by an entity receiving an award under this section and shall disseminate the findings with respect to each such evaluation to appropriate public and private entities.

(f) Funding

There is authorized to be appropriated to carry out this section, $4,000,000 for each of fiscal years 2019 through 2023.

(July 1, 1944, ch. 373, title V, § 551, as added Pub. L. 115–271, title VII, § 7101, Oct. 24, 2018, 132 Stat. 4037.)

§ 290ee–7. Comprehensive opioid recovery centers

(a) In general

The Secretary shall award grants on a competitive basis to eligible entities to establish or operate a comprehensive opioid recovery center (referred to in this section as a ''Center''). A Center may be a single entity or an integrated delivery network.

(b) Grant period

(1) In general

A grant awarded under subsection (a) shall be for a period of not less than 3 years and not more than 5 years.

(2) Renewal

A grant awarded under subsection (a) may be renewed, on a competitive basis, for additional periods of time, as determined by the Secretary. In determining whether to renew a grant under this paragraph, the Secretary shall consider the data submitted under subsection (h).

(c) Minimum number of Centers

The Secretary shall allocate the amounts made available under subsection (j) such that not fewer than 10 grants may be awarded. Not more than one grant shall be made to entities in a single State for any one period.

(d) Application

(1) Eligible entity

An entity is eligible for a grant under this section if the entity offers treatment and other services for individuals with a substance use disorder.

(2) Submission of application

In order to be eligible for a grant under subsection (a), an entity shall submit an application to the Secretary at such time and in such manner as the Secretary may require. Such application shall include—

(A) evidence that such entity carries out, or is capable of coordinating with other entities to carry out, the activities described in subsection (g); and

(B) such other information as the Secretary may require.

(e) Priority

In awarding grants under subsection (a), the Secretary shall give priority to eligible entities—

(1) located in a State with an age-adjusted rate of drug overdose deaths that is above the national overdose mortality rate, as determined by the Director of the Centers for Disease Control and Prevention; or

(2) serving an Indian Tribe (as defined in section 5304 of title 25) with an age-adjusted rate of drug overdose deaths that is above the national overdose mortality rate, as determined through appropriate mechanisms determined by the Secretary in consultation with Indian Tribes.

(f) Preference

In awarding grants under subsection (a), the Secretary may give preference to eligible entities utilizing technology-enabled collaborative learning and capacity building models, including such models as defined in section 2 of the Expanding Capacity for Health Outcomes Act (Public Law 114–270; 130 Stat. 1395), to conduct the activities described in this section.

(g) Center activities

Each Center shall, at a minimum, carry out the following activities directly, through referral, or through contractual arrangements, which may include carrying out such activities through technology-enabled collaborative learning and capacity building models described in subsection (f):

(1) Treatment and recovery services

Each Center shall—

(A) Ensure that intake, evaluations, and periodic patient assessments meet the individualized clinical needs of patients, including by reviewing patient placement in treatment settings to support meaningful recovery.

(B) Provide the full continuum of treatment services, including—

(i) all drugs and devices approved or cleared under the Federal Food, Drug, and Cosmetic Act and all biological products