

675, 52 Stat. 1040, which is classified generally to chapter 9 (§301 et seq.) of Title 21, Food and Drugs. For complete classification of this Act to the Code, see section 301 of Title 21 and Tables.

Section 701 of the Comprehensive Addiction and Recovery Act of 2016, referred to in subsec. (b)(6), is section 701 of Pub. L. 114-198, which enacted sections 290aa-15 and 290aa-16 of this title, sections 10706 and 10707 of Title 34, Crime Control and Law Enforcement, and provisions set out as a note under section 290aa-15 of this title.

#### PRIOR PROVISIONS

A prior section 290ee-3, act July 1, 1944, ch. 373, title V, §548, formerly Pub. L. 92-255, title IV, §408, Mar. 21, 1972, 86 Stat. 79, as amended Pub. L. 93-282, title III, §303(a), (b), May 14, 1974, 88 Stat. 137, 138; Pub. L. 94-237, §4(c)(5)(A), Mar. 19, 1976, 90 Stat. 244; Pub. L. 94-581, title I, §111(c)(3), Oct. 21, 1976, 90 Stat. 2852; Pub. L. 97-35, title IX, §973(d), Aug. 13, 1981, 95 Stat. 598; renumbered §527 of act July 1, 1944, and amended Apr. 26, 1983, Pub. L. 98-24, §2(b)(16)(B), 97 Stat. 182; Aug. 27, 1986, Pub. L. 99-401, title I, §106(b), 100 Stat. 907; renumbered §548, July 22, 1987, Pub. L. 100-77, title VI, §611(2), 101 Stat. 516; June 13, 1991, Pub. L. 102-54, §13(q)(1)(A)(iii), (B)(ii), 105 Stat. 278, which related to confidentiality of patient records for drug abuse programs, was omitted in the general revision of this part by Pub. L. 102-321. See section 290dd-2 of this title.

#### ACCOUNT FOR THE STATE RESPONSE TO THE OPIOID ABUSE CRISIS

Pub. L. 114-255, div. A, title I, §1003, Dec. 13, 2016, 130 Stat. 1044, provided that:

“(a) IN GENERAL.—The Secretary of Health and Human Services (referred to in this section as the ‘Secretary’) shall use any funds appropriated pursuant to the authorization of appropriations under subsection (b) to carry out the grant program described in subsection (c) for purposes of addressing the opioid abuse crisis within the States.

“(b) ACCOUNT FOR THE STATE RESPONSE TO THE OPIOID ABUSE CRISIS.—

“(1) ESTABLISHMENT.—There is established in the Treasury an account, to be known as the ‘Account For the State Response to the Opioid Abuse Crisis’ (referred to in this subsection as the ‘Account’), to carry out the opioid grant program described in subsection (c).

“(2) TRANSFER OF DIRECT SPENDING SAVINGS.—

“(A) IN GENERAL.—The following amounts shall be transferred to the Account from the general fund of the Treasury:

“(i) For fiscal year 2017, \$500,000,000.

“(ii) For fiscal year 2018, \$500,000,000.

“(B) AMOUNTS DEPOSITED.—Any amounts transferred under subparagraph (A) shall remain unavailable in the Account until such amounts are appropriated pursuant to paragraph (3).

“(3) APPROPRIATIONS.—

“(A) AUTHORIZATION OF APPROPRIATIONS.—In each of the fiscal years 2017 and 2018, there is authorized to be appropriated from the Account to the Secretary, for the grant program described in subsection (c), an amount not to exceed the total amount transferred to the Account under paragraph (2)(A), to remain available until expended.

“(B) OFFSETTING FUTURE APPROPRIATIONS.—In each of fiscal years 2017 and 2018, for any discretionary appropriation under the heading ‘Account For the State Response to the Opioid Abuse Crisis’ for the grant program described in subsection (c), the total amount of such appropriations in the applicable fiscal year (not to exceed the total amount remaining in the Account) shall be subtracted from the estimate of discretionary budget authority and the resulting outlays for any estimate under the Congressional Budget and Impoundment Control Act of 1974 [Pub. L. 93-344, see Short Title note set

out under section 621 of Title 2, The Congress, and Tables] or the Balanced Budget and Emergency Deficit Control Act of 1985 [Pub. L. 99-177, title II, see Short Title note set out under section 900 of Title 2, The Congress, and Tables], and the amount transferred to the Account shall be reduced by the same amount.

“(c) OPIOID GRANT PROGRAM.—

“(1) STATE RESPONSE TO THE OPIOID ABUSE CRISIS.—Subject to the availability of appropriations, the Secretary shall award grants to States for the purpose of addressing the opioid abuse crisis within such States, in accordance with subparagraph (B). In awarding such grants, the Secretary shall give preference to States with an incidence or prevalence of opioid use disorders that is substantially higher relative to other States.

“(2) OPIOID GRANTS.—Grants awarded to a State under this subsection shall be used for carrying out activities that supplement activities pertaining to opioids undertaken by the State agency responsible for administering the substance abuse prevention and treatment block grant under subpart II of part B of title XIX of the Public Health Service Act (42 U.S.C. 300x-21 et seq.), which may include public health-related activities such as the following:

“(A) Improving State prescription drug monitoring programs.

“(B) Implementing prevention activities, and evaluating such activities to identify effective strategies to prevent opioid abuse.

“(C) Training for health care practitioners, such as best practices for prescribing opioids, pain management, recognizing potential cases of substance abuse, referral of patients to treatment programs, and overdose prevention.

“(D) Supporting access to health care services, including those services provided by Federally certified opioid treatment programs or other appropriate health care providers to treat substance use disorders.

“(E) Other public health-related activities, as the State determines appropriate, related to addressing the opioid abuse crisis within the State.

“(d) ACCOUNTABILITY AND OVERSIGHT.—A State receiving a grant under subsection (c) shall include in a report related to substance abuse submitted to the Secretary pursuant to section 1942 of the Public Health Service Act (42 U.S.C. 300x-52), a description of—

“(1) the purposes for which the grant funds received by the State under such subsection for the preceding fiscal year were expended and a description of the activities of the State under the program; and

“(2) the ultimate recipients of amounts provided to the State in the grant.

“(e) LIMITATIONS.—Any funds made available pursuant to the authorization of appropriations under subsection (b)—

“(1) notwithstanding any transfer authority in any appropriations Act, shall not be used for any purpose other than the grant program in subsection (c); and

“(2) shall be subject to the same requirements as substance abuse prevention and treatment programs under titles V and XIX of the Public Health Service Act (42 U.S.C. 290aa et seq., 300w et seq.).

“(f) SUNSET.—This section shall expire on September 30, 2026.”

#### § 290ee-4. Mental and behavioral health outreach and education on college campuses

##### (a) Purpose

It is the purpose of this section to increase access to, and reduce the stigma associated with, mental health services to ensure that students at institutions of higher education have the support necessary to successfully complete their studies.

##### (b) National public education campaign

The Secretary, acting through the Assistant Secretary and in collaboration with the Director

of the Centers for Disease Control and Prevention, shall convene an interagency, public-private sector working group to plan, establish, and begin coordinating and evaluating a targeted public education campaign that is designed to focus on mental and behavioral health on the campuses of institutions of higher education. Such campaign shall be designed to—

- (1) improve the general understanding of mental health and mental disorders;
- (2) encourage help-seeking behaviors relating to the promotion of mental health, prevention of mental disorders, and treatment of such disorders;
- (3) make the connection between mental and behavioral health and academic success; and
- (4) assist the general public in identifying the early warning signs and reducing the stigma of mental illness.

**(c) Composition**

The working group convened under subsection (b) shall include—

- (1) mental health consumers, including students and family members;
- (2) representatives of institutions of higher education;
- (3) representatives of national mental and behavioral health associations and associations of institutions of higher education;
- (4) representatives of health promotion and prevention organizations at institutions of higher education;
- (5) representatives of mental health providers, including community mental health centers; and
- (6) representatives of private-sector and public-sector groups with experience in the development of effective public health education campaigns.

**(d) Plan**

The working group under subsection (b) shall develop a plan that—

- (1) targets promotional and educational efforts to the age population of students at institutions of higher education and individuals who are employed in settings of institutions of higher education, including through the use of roundtables;
- (2) develops and proposes the implementation of research-based public health messages and activities;
- (3) provides support for local efforts to reduce stigma by using the National Health Information Center as a primary point of contact for information, publications, and service program referrals; and
- (4) develops and proposes the implementation of a social marketing campaign that is targeted at the population of students attending institutions of higher education and individuals who are employed in settings of institutions of higher education.

**(e) Definition**

In this section, the term “institution of higher education” has the meaning given such term in section 1001 of title 20.

**(f) Authorization of appropriations**

To carry out this section, there are authorized to be appropriated \$1,000,000 for the period of fiscal years 2018 through 2022.

(July 1, 1944, ch. 373, title V, § 549, as added Pub. L. 114-255, div. B, title IX, § 9033, Dec. 13, 2016, 130 Stat. 1261.)

PART E—CHILDREN WITH SERIOUS EMOTIONAL DISTURBANCES

**§ 290ff. Comprehensive community mental health services for children with serious emotional disturbances**

**(a) Grants to certain public entities**

**(1) In general**

The Secretary, acting through the Director of the Center for Mental Health Services, shall make grants to public entities for the purpose of providing comprehensive community mental health services to children with a serious emotional disturbance, which may include efforts to identify and serve children at risk.

**(2) “Public entity” defined**

For purposes of this part, the term “public entity” means any State, any political subdivision of a State, and any Indian tribe or tribal organization (as defined in section 5304(b) and section 5304(c)<sup>1</sup> of title 25).

**(b) Considerations in making grants**

**(1) Requirement of status as grantee under part B of subchapter XVII**

The Secretary may make a grant under subsection (a) to a public entity only if—

- (A) in the case of a public entity that is a State, the State is a grantee under section 300x of this title;
- (B) in the case of a public entity that is a political subdivision of a State, the State in which the political subdivision is located is such a grantee; and
- (C) in the case of a public entity that is an Indian tribe or tribal organization, the State in which the tribe or tribal organization is located is such a grantee.

**(2) Requirement of status as medicaid provider**

(A) Subject to subparagraph (B), the Secretary may make a grant under subsection (a) only if, in the case of any service under such subsection that is covered in the State plan approved under title XIX of the Social Security Act [42 U.S.C. 1396 et seq.] for the State involved—

- (i) the public entity involved will provide the service directly, and the entity has entered into a participation agreement under the State plan and is qualified to receive payments under such plan; or
- (ii) the public entity will enter into an agreement with an organization under which the organization will provide the service, and the organization has entered into such a participation agreement and is qualified to receive such payments.

(B)(i) In the case of an organization making an agreement under subparagraph (A)(ii) regarding the provision of services under subsection (a), the requirement established in such subparagraph regarding a participation

<sup>1</sup> See References in Text note below.