

# Florida

## UNIFORM APPLICATION

### FY 2026 SUPTRS Block Grant Report

## SUBSTANCE ABUSE PREVENTION AND TREATMENT BLOCK GRANT

OMB - Approved 05/28/2025 - Expires 01/31/2028  
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Center for Substance Abuse Prevention  
Division of Primary Prevention

Center for Substance Abuse Treatment  
Division of State and Community Systems (DSCS)

## A: State Information

### State Information

#### I. State Agency for the Block Grant

Agency Name Department of Children and Families  
Organizational Unit Office of Substance Abuse and Mental Health  
Mailing Address 2415 North Monroe St, Suite 400  
City Tallahassee, Florida  
Zip Code 32303-4190

#### II. Contact Person for the Block Grant

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#### III. Expenditure Period

##### State Expenditure Period

From 7/1/2024  
To 6/30/2025

##### Block Grant Expenditure Period

From 10/1/2022  
To 9/30/2024

#### IV. Date Submitted

Submission Date 12/1/2025 10:11:16 PM  
Revision Date 7/9/2026 9:45:23 AM

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## B: Annual Update

**Table 1 - Priority Area and Annual Performance Indicators - Progress Report**

**Priority #:** 1  
**Priority Area:** Primary Drug Prevention  
**Priority Type:** SUP  
**Population(s):** PP

**Goal of the priority area:**

Reduce accidental deaths caused by fentanyl and fentanyl analogs through prevention activities.

**Objective:**

Prevent nonmedical prescription drug misuse by increasing perceived risk of harm.

**Strategies to attain the goal:**

Collaborate with local prevention providers, coalitions, and other stakeholders to increase awareness of the dangers of taking prescription drugs without a doctor's orders.

**Edit Strategies to attain the objective here:**

*(if needed)*

**Annual Performance Indicators to measure goal success**

**Indicator #:** 1  
**Indicator:** The percentage of middle and high school students that perceive great risk of harm in taking a prescription drug without a doctor's orders.  
**Baseline Measurement:** In FY 22-23, 67.8% of middle and high school students in Florida perceived great risk of harm in taking a prescription drug without a doctor's orders.  
**First-year target/outcome measurement:** In FY 23-24, at least 69% of middle and high school students in Florida perceived great risk of harm in taking a prescription drug without a doctor's orders.  
**Second-year target/outcome measurement:** In FY 24-25, at least 70% of middle and high school students in Florida perceived great risk of harm in taking a prescription drug without a doctor's orders.

**New Second-year target/outcome measurement(if needed):**

**Data Source:**

Florida Youth Substance Abuse Survey (FYSAS)

**New Data Source(if needed):**

**Description of Data:**

The FYSAS is an annual survey administered to Florida's middle and high school students each spring. Surveys are administered to a statewide sample of students.

**New Description of Data:(if needed)**

**Data issues/caveats that affect outcome measures:**

None.

**New Data issues/caveats that affect outcome measures:**

### Report of Progress Toward Goal Attainment

First Year Target:  Achieved  Not Achieved *(if not achieved, explain why)*

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

The FY 23-24 actual is 67.4%, a slight drop from the baseline of 67.8%. While the target for this risk factor was not met, there were nonetheless continued improvements with respect to reductions in the ultimate outcome of the prevalence of prescription drug misuse.

Of the students surveyed in 2024, 1.7% used prescription pain relievers at least once in their lifetime, compared to 2.4 % of the students surveyed in 2023. For Past 30-Day Prevalence in 2024, .6% of surveyed Florida students reported the use of prescription pain relievers compared to .9% in 2023. There was a similar decrease in amphetamine use. Of the students surveyed in 2024, 1.8% used prescription amphetamines at least once in their lifetime, compared to 2.3 % of the students surveyed in 2023. For Past 30-Day Prevalence in 2024, .6% of surveyed Florida students reported the use of prescription amphetamines compared to .8% in 2023.

**How first year target was achieved (optional):**

Second Year Target:  Achieved  Not Achieved (if not achieved, explain why)

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

**How second year target was achieved:**

**Priority #:** 2

**Priority Area:** Mobile Response Team Diversions

**Priority Type:** BHCS

**Population(s):** BHCS

**Goal of the priority area:**

Ensure Mobile Response Teams maintain prompt response times for acute call responses.

**Objective:**

Increase number of MRT providers who meet response time target values for acute call responses.

**Strategies to attain the goal:**

The Department will monitor performance on an ongoing basis and offer training and technical assistance resources as needed to maintain performance standards.

**Edit Strategies to attain the objective here:**

*(if needed)*

**Annual Performance Indicators to measure goal success**

**Indicator #:** 1

**Indicator:** The percentage of MRT providers that meet the target values for average response time for calls requiring an acute response.

**Baseline Measurement:** In FY 22-23, 86.7% of MRT providers met the target value for acute call response time.

**First-year target/outcome measurement:** At least 87% of MRT providers met the target value for acute call response time.

**Second-year target/outcome measurement:** At least 88% of MRT providers met the target value for acute call response time.

**New Second-year target/outcome measurement(if needed):**

**Data Source:**

MRT Cumulative Data tracking spreadsheet.

**New Data Source(if needed):**

**Description of Data:**

The numerator is the number of providers meeting the target value for acute call response time, and the denominator is the number of providers responding to calls requiring an acute response.

**New Description of Data:(if needed)**

**Data issues/caveats that affect outcome measures:**

None.

**New Data issues/caveats that affect outcome measures:**

**Report of Progress Toward Goal Attainment**

First Year Target:  Achieved  Not Achieved (if not achieved, explain why)

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

**How first year target was achieved (optional):**

The first-year actual is 94.3% which exceeds the target of 87%. Thirty-three (33) of the thirty-five MRT providers met the target value for acute call response time. The Florida Legislature provided funding that allowed MRT providers to increase the number of teams and expand the number of existing teams. The average wait time statewide was 41 minutes.

Second Year Target:  Achieved  Not Achieved (if not achieved, explain why)

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

**How second year target was achieved:**

**Priority #:** 3

**Priority Area:** Intensive Team-Based Services

**Priority Type:** MHS

**Population(s):** SMI, SED

**Goal of the priority area:**

Expand intensive, team-based services to children with SED and adults with SMI.

**Objective:**

Increase the number of children served by Community Action Treatment (CAT) teams and adults served by Florida Assertive Community Treatment (FACT) teams.

**Strategies to attain the goal:**

Department representatives will educate various community partners on the eligibility, goals, approach to treatment, and location of current CAT teams to help generate more referrals. The Department recently implemented a statewide requirement for FACT teams to administer the Assertive Community Treatment Transition Readiness Scale (ATR). The ATR is a standardized measure developed to identify individuals receiving Assertive Community Treatment services who may be ready to transition to less intensive care. Use of the ATR could increase overall capacity for intensive services by transitioning individuals to community-based settings, when appropriate.

**Edit Strategies to attain the objective here:**

*(if needed)*

**Annual Performance Indicators to measure goal success**

**Indicator #:** 1

**Indicator:** The number of children served by Community Action Treatment (CAT) Teams

**Baseline Measurement:** In FY 22-23, 3,576 children were served by CAT teams.

**First-year target/outcome measurement:** The number of children served by CAT teams increased by 50 compared with the number served in FY 22-23.

**Second-year target/outcome measurement:** The number of children served by CAT teams increased by 50 compared with the number served in FY 23-24.

**New Second-year target/outcome measurement(if needed):**

**Data Source:**

The data source is the CAT team monthly supplemental data reports.

**New Data Source(if needed):**

**Description of Data:**

This is the total number of young people served, unduplicated across all CAT teams.

**New Description of Data:(if needed)**

**Data issues/caveats that affect outcome measures:**

None.

**New Data issues/caveats that affect outcome measures:**

**Report of Progress Toward Goal Attainment**

First Year Target:  Achieved  Not Achieved (if not achieved, explain why)

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

In FY 23-24, 3444 children were served by CAT Teams. The number served was short of the target (3626) and less than the previous fiscal year. Many of the providers reported that the inability to maintain full compliance for staffing affected the number of clients admitted for services. In an effort to address performance deficits, the state has implemented increased engagement with the Managing Entities to ensure that they receive regular updates on policy and procedures and that programmatic issues are addressed earlier.

**How first year target was achieved (optional):**

Second Year Target:  Achieved  Not Achieved (if not achieved, explain why)

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

**How second year target was achieved:**

**Indicator #:** 2

**Indicator:** The number of adults served by FACT teams.

**Baseline Measurement:** In FY 22-23, 3,627 adults were served by FACT teams

**First-year target/outcome measurement:** The number of adults served by FACT teams increased by 35 compared with the number served in FY 22-23.

**Second-year target/outcome measurement:** The number of adults served by FACT teams increased by 35 compared with the number served in FY 23-24.

**New Second-year target/outcome measurement(if needed):**

**Data Source:**

Quarterly contract reports.

**New Data Source(if needed):**

**Description of Data:**

The Department collects a quarterly contract report with a total number of individuals served, as well as performance data. The total served will be calculated on an annual basis, based on admissions per team.

**New Description of Data:(if needed)**

**Data issues/caveats that affect outcome measures:**

None.

**New Data issues/caveats that affect outcome measures:**

## Report of Progress Toward Goal Attainment

First Year Target:  Achieved  Not Achieved (if not achieved, explain why)

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

**How first year target was achieved (optional):**

The first-year actual is 3922 individuals served. This indicates that 295 additional individuals were served by FACT Teams. The target (3662) was exceeded due to the Florida Legislature increasing funding to the FACT program. With this funding, additional FACT teams were established to serve Florida counties based on regional need.

Second Year Target:  Achieved  Not Achieved (if not achieved, explain why)

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

**How second year target was achieved:**

**Priority #:** 4

**Priority Area:** Pregnant Women and Women with Dependent Children

**Priority Type:** SUT

**Population(s):** PWWDC

**Goal of the priority area:**

Improve services for pregnant women receiving substance use treatment services.

**Objective:**

Increase the rate of successful treatment.

**Strategies to attain the goal:**

The Department will monitor discharges on an ongoing basis in coordination with regional Department representatives, Managing Entities, and Neonatal Abstinence Syndrome/Substance Exposed Newborn (NAS/SEN) Care Coordinators, and headquarters subject matter experts. Obstacles to successful completion will be described and analyzed. The Department will also identify and promote relevant training materials designed to improve retention and completion rates. The Women’s Services Coordinator is responsible for reviewing data submitted by the Managing Entities, addressing discrepancies, completing quarterly reports, and sharing resources. Additionally, the Statewide NAS/SEN Care Coordinator is responsible for overseeing a statewide coordinated response across programs for families at risk of or with infants born substance exposed and for providing guidance to six regional NAS/SEN Care Coordinators. The Department also continues to contract with the Florida Association of Alcohol and Drug Abuse and the Florida Certification Board to provide online trainings and resources on evidence-based practices and treatment specific to pregnant women.

**Edit Strategies to attain the objective here:**

*(if needed)*

**Annual Performance Indicators to measure goal success**

**Indicator #:** 1

**Indicator:** The percent of successful discharges from substance use treatment services among pregnant women.

**Baseline Measurement:** In FY 22-23, 41.5% of discharges from substance use treatment services among pregnant women were successful.

**First-year target/outcome measurement:** In FY 23-24, the percentage of successful discharges from substance use treatment services among pregnant women increased by 2 points compared to the previous year.

**Second-year target/outcome measurement:** In FY 24-25, the percentage of successful discharges from substance use treatment services among pregnant women increased by 2 points compared to the previous year.

**New Second-year target/outcome measurement(if needed):**

**Data Source:**

The Department’s Financial and Services Accountability Management System (FASAMS)

**New Data Source(if needed):**

**Description of Data:**

The numerator is the number of pregnant women discharges reflecting successful completion of substance use services. The denominator is the total number of pregnant women discharges. The following discharge reasons are considered successful and included in the numerator: successfully completed treatment, successfully completed transfer to another program/facility. The following discharge reasons are excluded from the calculation of this performance indicator: death, changes of eligibility or funding source, agency closure, or client moved and transferred to another provider.

**New Description of Data:(if needed)**

**Data issues/caveats that affect outcome measures:**

None.

**New Data issues/caveats that affect outcome measures:**

**Report of Progress Toward Goal Attainment**

First Year Target:  Achieved  Not Achieved *(if not achieved,explain why)*

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

**How first year target was achieved (optional):**

The first-year actual is 48.2%, which exceeded the target of 43.5%. The Managing Entities and Providers have made several adjustments to serving the PPW population and accurately capturing the data. Some of the adjustments included providing outreach for individuals at risk for dropping out of treatment and offering technical assistance on data collection to providers.

Second Year Target:  Achieved  Not Achieved *(if not achieved,explain why)*

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

**How second year target was achieved:**

**Priority #:** 5  
**Priority Area:** Coordinated Specialty Care for Early Serious Mental Illness (CSC-ESMI) and First Episodes of Psychosis (FEP)  
**Priority Type:** ESMI  
**Population(s):** SED, ESMI

**Goal of the priority area:**

Improve functioning or symptom severity among individuals served by Coordinated Specialty Care for Early Serious Mental Illness programs.

**Objective:**

Achieve a high percent of individuals served that experience improvements in functioning or symptom severity.

**Strategies to attain the goal:**

The Department will monitor progress, periodically consult with the teams regarding obstacles, and secure any training/TA needed to address inadequate progress.

**Edit Strategies to attain the objective here:  
(if needed)**

**Annual Performance Indicators to measure goal success**

**Indicator #:** 1  
**Indicator:** The percent of individuals served by CSC-ESMI teams that experience improvements in functioning or symptom severity.  
**Baseline Measurement:** 77.9% of individuals served by CSC for ESMI programs experienced improvements in functioning or symptom severity (FY 22-23).  
**First-year target/outcome measurement:** At least 80% of individuals served by CSC for ESMI in FY 21-22 experience improvements in functioning or symptom severity.  
**Second-year target/outcome measurement:** At least 80% of individuals served by CSC for ESMI in FY 22-23 experience improvements in functioning or symptom severity.

**New Second-year target/outcome measurement(if needed):**

**Data Source:**

Data is reported by the CSC-ESMI teams and based on various instruments measuring functional improvement, including the Brief Psychiatric Rating Scale and Basis-32.

**New Data Source(if needed):**

**Description of Data:**

The numerator is the unduplicated number of the most recent subsequent assessments showing improvements in functioning or symptom severity. The denominator is total number of most recent subsequent assessments conducted during the time period.

**New Description of Data:(if needed)**

**Data issues/caveats that affect outcome measures:**

None.

**New Data issues/caveats that affect outcome measures:**

**Report of Progress Toward Goal Attainment**

First Year Target:  Achieved  Not Achieved (if not achieved, explain why)

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

**How first year target was achieved (optional):**

In FY 23-24, 81.6% of individuals served by CSC for ESMI experienced improvements in functioning or symptom severity. This exceeded the target of 80%. In FY 22-23 newly established teams struggled with staffing. In FY 23-24 the issue with staffing capacity was resolved, helping to bring the goal above the target level.

Second Year Target:  Achieved  Not Achieved (if not achieved, explain why)

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

**How second year target was achieved:**

**Priority #:** 6  
**Priority Area:** Infectious Disease Control  
**Priority Type:** SUT, MHS  
**Population(s):** EIS/HIV, TB

**Goal of the priority area:**

Ensure the cost-effectiveness of services and prevent the spread of infectious diseases through screening of individuals in substance use treatment at risk of contracting infectious diseases, such as HIV and tuberculosis.

**Objective:**

Ensure EIS/HIV funds are cost-effective by targeting service to maintain a minimum test positivity rate of at least 1%. Maintain a low TB case rate.

**Strategies to attain the goal:**

The Department analyzes historical provider-level variation in test positivity rates to identify factors associated with both high and low performance, and share findings and recommendations with any underperforming providers. The Department also collaborates with the Department of Health regarding opportunity to convey behavioral health resources and training opportunities.

**Edit Strategies to attain the objective here:**

*(if needed)*

**Annual Performance Indicators to measure goal success**

**Indicator #:** 1  
**Indicator:** The percent of HIV tests that are positive among providers reporting at least one positive test.  
**Baseline Measurement:** In FY 22-23, the percent of HIV-tests that were positive among providers reporting at least one positive test was 1.47%.  
**First-year target/outcome measurement:** In FY 23-24, the percent of HIV-tests that are positive among providers reporting at least one positive test is at least 0.10%.  
**Second-year target/outcome measurement:** In FY 24-25, the percent of HIV-tests that are positive among providers reporting at least one positive test is at least 0.10%.

**New Second-year target/outcome measurement(if needed):**

**Data Source:**

EIS/HIV service data reported on the Managing Entity Block Grant Data Reporting Template 2.

**New Data Source(if needed):**

**Description of Data:**

The numerator is the number of positive HIV tests, and the denominator is the total number of tests administered by providers reporting at least one positive test. Of the 14,897 tests conducted with EIS/HIV funds in FY 22-23 by providers reporting at least one positive test, 220 tests were positive, resulting in a 1.47% positivity rate for the baseline measurement.

**New Description of Data:(if needed)**

**Data issues/caveats that affect outcome measures:**

None.

**New Data issues/caveats that affect outcome measures:**

**Report of Progress Toward Goal Attainment**

First Year Target:  Achieved  Not Achieved *(if not achieved,explain why)*

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

**How first year target was achieved (optional):**

In FY 23-24, providers reported 103 positive HIV tests out of 15,120 tests conducted, resulting in a positivity rate of .68%. This exceeded the target of .10%.

Second Year Target:  Achieved  Not Achieved *(if not achieved,explain why)*

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

**How second year target was achieved:**

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**Indicator #:** 2

**Indicator:** The TB case rate per 100,000.

**Baseline Measurement:** In FY 22-23, Florida's TB case rate is 2.4 per 100,000.

**First-year target/outcome measurement:** In FY 23-24, Florida's TB case rate is 2.5 per 100,000 or lower.

**Second-year target/outcome measurement:** In FY 24-25, Florida's TB case rate is 2.5 per 100,000 or lower.

**New Second-year target/outcome measurement(if needed):**

**Data Source:**

Tuberculosis cases per 100,000 come from the Florida Department of Health and are published at [www.flhealthcharts.com](http://www.flhealthcharts.com).

**New Data Source(if needed):**

**Description of Data:**

The purpose of this indicator is to maintain a tuberculosis case rate at or below a specific threshold (i.e., 2.5 per 100,000). For the baseline (Calendar Year 2020), the numerator is 535 tuberculosis cases, and the denominator is 22,329,178 individuals, yielding a rate of 1.9 per 100,000.

**New Description of Data:(if needed)**

**Data issues/caveats that affect outcome measures:**

None.

**New Data issues/caveats that affect outcome measures:**

## Report of Progress Toward Goal Attainment

First Year Target:  Achieved  Not Achieved *(if not achieved, explain why)*

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

In calendar year 2023, the tuberculosis rate was 2.8 per 100,000. Although the tuberculosis rate increased slightly from the baseline of 2.4 per 100,000, the Department continues to ensure that providers follow the policies related to communicable diseases through contracts and independent peer review visits. The Department also continues to collaborate with the Florida Department of Health to convey behavioral health resources and training opportunities.

**How first year target was achieved (optional):**

Second Year Target:  Achieved  Not Achieved *(if not achieved, explain why)*

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

**How second year target was achieved:**

**Priority #:** 7

**Priority Area:** Recovery Support Services and Recovery Oriented Systems of Care

**Priority Type:** SUR, MHS

**Population(s):** SMI, SED, ESMI, PWWDC, PWID, Other

**Goal of the priority area:**

Establish an integrated, value-based Recovery Oriented System of Care where recovery is expected and achieved through meaningful partnerships and shared decision making.

**Objective:**

1) Develop and pilot a statewide provider-level tracking system for recovery domain scores obtained during Recovery-Oriented Quality Improvement monitoring visits. 2) Establish a baseline score for each of the following domains of recovery from a sample of direct service providers: Strengths-Based Approach, Customization and Choice, Opportunity to Engage in Self-Determination, Network Supports/Community Integration, and Recovery Focus. 3) Analyze and publish a report on the use of recovery support service data codes to identify variations in use among network service providers and ensure reliable, accurate use. 4) Evaluate the Recovery management Practices Guidance Document 35 and publish a report describing the document's effectiveness with a focus on challenges related to communication and integration of service requirements. 5) Provide training from NAS/SEN Care

**Strategies to attain the goal:**

The Department’s Statewide Coordinator of Integration and Recovery Services will collaborate with system partners on each of the objectives.

**Edit Strategies to attain the objective here:**

*(if needed)*

**Annual Performance Indicators to measure goal success**

**Indicator #:** 1

**Indicator:** The number of objectives achieved.

**Baseline Measurement:** In FY 22-23, zero objectives were achieved.

**First-year target/outcome measurement:** FY 23-24, at least 1 of the 5 objectives is achieved.

**Second-year target/outcome measurement:** In FY 24-25, at least 3 of the 5 objectives are achieved.

**New Second-year target/outcome measurement(if needed):**

**Data Source:**

All information regarding the completion of each objective will be reported by the Department’s Statewide Coordinator of Integration and Recovery Services.

**New Data Source(if needed):**

**Description of Data:**

The data vary from objective to objective, but it includes published reports, published analyses, and RCO development phase reports.

**New Description of Data:(if needed)**

**Data issues/caveats that affect outcome measures:**

None.

**New Data issues/caveats that affect outcome measures:**

**Report of Progress Toward Goal Attainment**

First Year Target:  Achieved  Not Achieved *(if not achieved,explain why)*

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

**How first year target was achieved (optional):**

The first-year target was achieved by completing objective 2 which is to establish a baseline score for each of the following domains of recovery from a sample of direct service providers: Strengths-Based Approach, Customization and Choice, Opportunity to Engage in Self-Determination, Network Supports/Community Integration, and Recovery Focus. Thirty-nine (39) Community Behavioral Health Providers were assessed using the Recovery Oriented Monitoring (ROM) protocol to establish baseline scores for five recovery domains. As part of evolving statewide ROSC initiatives, a unique opportunity emerged – Quality Improvement Monitoring for Recovery-Oriented Systems of Care. This innovative program uses evidence-based measures of recovery principles and applies these measures to service provider organizations. A recovery-oriented quality improvement component was added to the State’s traditional quality improvement monitoring practices for contracted mental health and substance use provider organizations. The desired end goal is a fully operationalized recovery-oriented system of care. Per the Department’s Recovery Management Guidance Document #35, community provider organizations are expected to score 4 or higher on a 5-point scale. Key findings: Strengths-Based Approach scored 3.67 (moderate integration of individual strengths, needs improvement); Customization and Choice scored 3.71 (substantial individualization efforts, but not consistent; Opportunity to Engage in Self-Determination scored 3.62 (reasonable involvement of individuals in planning, needs further encouragement); Network Supports and Community Integration scored 2.78 (minimal efforts to involve support networks, needs significant enhancement); Recovery Focus scored 2.88 (underperformance in long-term recovery planning, needs comprehensive recovery plans). Recommendations: Increase integration of individual strengths, ensure true individualization of services, enhance individual involvement in planning, strengthen support network involvement, and develop comprehensive recovery plans for long-term goals.

Second Year Target:  Achieved  Not Achieved *(if not achieved,explain why)*

**Reason why target/outcome was not achieved, and changes proposed to meet target/outcome:**

**How second year target was achieved:**

**Footnotes:**

**Center for Substance Abuse Treatment**

**Division of State and Community Systems**

**State Systems Partnership Branch**

**FY 21 SABG ARP COVID Testing and Mitigation Supplemental Funding:  
FY 25 Annual Report**

**Substance Use Prevention, Treatment, and Recovery Services Block Grant  
(SUPTRS BG)**

**Report Expenditure Period: October 1, 2024 - September 30, 2025**

**Report Submission Due Date: Wednesday, December 31, 2025**

**Name of SUBG Grantee:** FLORIDA  
*Name of State, DC, Territory, Associated State, or Tribe*

**Submitted By:** KELLY GERGEN, BG Coordinator  
*Name and Title of Individual Submitting Report*

**Date Submitted:** 12/17/2025

**Total FY 21 SABG ARP COVID Testing and Mitigation Supplemental Funding  
Amount Awarded to This Grantee in August, 2021:**

**\$ NOT APPLICABLE, DID NOT OPT IN.**

**Instructions:** For the FFY 2025, ending on 9/30/25, please complete this FY 25 Annual Report form for the FY 25 expenditures from the FY 21 SABG ARP COVID Testing and Mitigation Supplemental Funding. Please upload as a Word or PDF document in Table 1 of the 2026 SUPTRS BG Report that was submitted on or before 12/1/25. Please report on the FY 21 SABG ARP COVID Testing and Mitigation Supplemental Funding activities and expenditures by Wednesday, December 31, 2025. The period of performance for this report is October 1, 2024 through September 30, 2025. For further information, please feel free to contact your CSAT SPO.

**Details for SUPTRS BG Grantees:** After completing the table above, grantees are requested to upload this report document through a regular WebBGAS Revision Request that will be created by your CSAT SPO, as an Attachment to [Table 1 Priority Area and Annual Performance Indicators – Progress Report](#), of the 2026 SUPTRS BG Report Submitted, as a Word or PDF document. Please submit no later than 11:59 pm EST, on Wednesday, December 31, 2025.

For the expenditure period of October 1, 2024 through September 30, 2025, please include a complete listing of the expenditure of FY 21 SABG ARP COVID Testing and Mitigation Supplemental Funding, by expenditure dates, items and activities of expenditure, and amounts of expenditures. If no funds were expended during this period, please complete and upload this report document indicating "Not Applicable". Please feel free to address any questions or concerns to your CSAT SPO. Thank you.

<b>FY 21 SABG ARP COVID Testing and Mitigation Supplemental Funding: FY 25 Annual Report Table</b>			
#	FY 25 Date of Expenditure	FY 25 Item/Activity Description for Expenditure Period of 10/01/24 through 09/30/25	FY 25 Amount of Expenditure
1		<b>NOT APPLICABLE</b>	
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
		<b>Total</b>	

**Background and Description of Funding:** On August 10, 2021 SAMHSA released guidance on one-time funding for awards authorized under the American Rescue Plan (ARP) Act of 2021 (P.L. 117-2) and Section 711 of the Social Security Act (42 U.S.C. 711(c)) for the targeted support necessary for mental health and substance use disorder treatment providers to overcome barriers towards achieving and maintaining high COVID-19 testing rates (commonly referred to as COVID Testing and Mitigation funds). The total overall expenditure period performance period for this funding is September 1, 2021 – September 30, 2025, though the expenditure period for the report above is for FY 24 only, from 10/1/23 through 9/30/24.

As indicated in your SABG Notice of Award of August 10, 2021, States, DC, US Territories, Freely Associated States, and the Red Lake Band of Chippewa Indians are required to submit an Annual Report by December 31 of each year, until the funds expire. Grantees must upload a report including activities and expenditures to Table 1 of the 2025 Substance Use Block Grant Report filed on or before 12/2/24. A Revision Request will be sent to grantees by the CSAT SPO to upload the report.

**12/17/2025: SUPTRS BG Grantee WebBGAS Revision Request** will be created by the CSAT SPO for the grantee upload of the FY 25 SABG ARP COVID Testing and Mitigation Supplemental Funding Annual Report, for the FY 25 expenditure period of October 1, 2024 through September 30, 2025. Using the FY 25 Annual Report form provided to grantees by the CSAT SPO, grantees are requested to upload an Attachment to **Table 1 Priority Area and Annual Performance Indicators – Progress Report**, 2026 SUPTRS Report Submitted, as a Word or PDF document by 11:59 pm EST, on Wednesday, December 31, 2025. Please provide a complete list of the expenditure dates, items and activities of expenditure, and amounts of expenditures, between October 1, 2024 and September 30, 2025. If no activities were completed, please complete and upload the report document indicating “Not Applicable”.

### **Summary of the August 10, 2021 Guidance Letter:**

Excerpts from the August 10, 2021 guidance letter to Single State Authority Directors and State Mental Health Authority Commissioners from Miriam E. Delphin-Rittmon, Ph.D., Assistant Secretary for Mental Health and Substance Use, regarding the use of this funding in as follows:

“People with mental illness and substance use disorder are more likely to have co-morbid physical health issues like diabetes, cardiovascular disease, and obesity. Such chronic illnesses are associated with higher instances of contracting coronavirus disease (COVID-19) as well as higher risk of death or a poor outcome from an episode of COVID-19. To address this concern, the U.S. Department of Health and Human Services (HHS), through the Substance Abuse and Mental Health Services Administration (SAMHSA), will invest \$100 million dollars to expand dedicated testing and mitigation resources for people with mental health and substance use disorders.

As COVID-19 cases rise among unvaccinated people and where the more transmissible Delta virus variant is surging, this funding will expand activities to detect, diagnose, trace, and monitor infections and mitigate the spread of COVID-19 in homeless shelters, treatment and recovery facilities, domestic violence shelters and federal, state and local correctional facilities—some of the most impacted and highest risk communities across the country. These funds will provide resources

and flexibility for states to prevent, prepare for, and respond to the COVID-19 public health emergency and ensure the continuity of services to support individuals connected to the behavioral health system.

This one-time funding for awards was authorized under the American Rescue Plan (ARP) Act of 2021 (P.L. 117-2) and Section 711 of the Social Security Act (42 U.S.C. 711(c)). SAMHSA will supplement the ARP funding for state grantees. The performance period for this funding is September 1, 2021 – September 30, 2025.

Targeted support is necessary for mental health and substance use treatment providers to overcome barriers towards achieving and maintaining high COVID-19 testing rates. From the provider perspective, these barriers include limited financial and personnel resources to support ongoing testing efforts. Providers have limited staff and physical resources and COVID-19 testing activities must be balanced against COVID-19 vaccinations and other health care services. From the consumer perspective, these barriers include hesitancy in accepting vaccines and challenges with health care access. Recipients may allocate reasonable funds for the administrative management of these grants. SAMHSA envisions the maximum support possible for COVID-19 testing and mitigation; toward that goal, recipients are encouraged to expend a minimum of 85 percent of funding for allowable COVID-19 testing and mitigation activities.

The list below includes examples of allowable activities. While this list is not exhaustive, any activity not included on this list must be directly related to COVID-19 testing and mitigation. All recipients are strongly encouraged to work with state or local health departments to coordinate activities. The state must demonstrate that the related expense is directly and reasonably related to the provision of COVID-19 testing or COVID-19 mitigation activities. The related expense must be consistent with relevant clinical and public health guidance. For additional examples, you can visit the CDC Community Mitigation Framework website. Funding may not be used for any activity related to vaccine purchase or distribution.

SAMHSA, through this supplemental funding, allocates \$50 million each for Mental Health Block Grant (MHBG) and Substance Abuse Prevention and Treatment Block grants (SABG) to the states. States have until September 30, 2025, to expend these funds. SAMHSA asks that states consider the following in developing a COVID-19 Mitigation Funding Plan:

- Coordinate and partner with state and local health departments/agencies on how to better align the state/provider mental health and substance use COVID-19 mitigation efforts and activities; develop guidance for partnering with state/local health departments; disseminating sample training curriculums.
- Testing education, establishment of alternate testing sites, test result processing, arranging for the processing of test results, and engaging in other activities within the CDC Community Mitigation Framework to address COVID-19 in rural communities.
- Rapid onsite COVID-19 testing and for facilitating access to testing services. Training and technical assistance on implementing rapid onsite COVID-19 testing and facilitating access to behavioral health services, including the development of onsite testing confidentiality policies; and implementing model program practices.
- Behavioral health services for those in short-term housing for people who are at high risk for COVID-19.

- Testing for staff and consumers in shelters, group homes, residential treatment facilities, day programs, and room and board programs. Purchase of resources for testing-related operating and administrative costs otherwise borne by these housing programs. Hire workers to coordinate resources, develop strategies and support existing community partners to prevent infectious disease transmission in these settings. States may use this funding to procure COVID-19 tests and other mitigation supplies such as handwashing stations, hand sanitizer and masks for people experiencing homelessness and for those living in congregate settings.
- Funds may be used to relieve the burden of financial costs for the administration of tests and the purchasing of supplies necessary for administration such as personal protective equipment (PPE); supporting mobile health units, particularly in medically underserved areas; and expanding local or tribal programs workforce to implement COVID-response services for those connected to the behavioral health system.
- Utilize networks and partners to promote awareness of the availability of funds, assist providers/programs with accessing funding, and assist with operationalizing the intent of said funding to ensure resources to mitigate the COVID-19 health impacts and reach the most underserved, under-resourced, and marginalized communities in need.
- Expanding local or tribal programs workforce to implement COVID-response services for those connected to the behavioral health system.
- Provide subawards to eligible entities for programs within the state that are designed to reduce the impact of substance abuse and mental illness; funding could be used for operating and administrative expenses of the facilities to provide onsite testing and mobile health services; and may be used to provide prevention services to prevent the spread of COVID-19.
- Develop and implement strategies to address consumer hesitancy around testing. Ensure access for specific community populations to address long-standing systemic health and social inequities that have put some consumers at increased risk of getting COVID-19 or having severe illness.
- Installing temporary structures, leasing of properties, and retrofitting facilities as necessary to support COVID-19 testing and COVID-19 mitigation.
- Education, rehabilitation, prevention, treatment, and support services for symptoms occurring after recovery from acute COVID-19 infection, including, but not limited to, support for activities of daily living.
- Other activities to support COVID-19 testing including planning for implementation of a COVID-19 testing program, hiring staff, procuring supplies to provide testing, training providers and staff on COVID-19 testing procedures, and reporting data to HHS on COVID-19 testing activities.
- Promote behaviors that prevent the spread of COVID-19 and other infectious diseases (healthy hygiene practices, stay at home when sick, practice physical distancing to lower the risk of disease spread, cloth face coverings, getting vaccinated).
- Maintain healthy environments (clean and disinfect, ensure ventilation systems operate properly, install physical barriers and guides to support social distancing if appropriate).
- Behavioral health services to staff working as contact tracers and other members of the COVID-related workforce. Maintain health operations for staff, including building measures to cope with employee stress and burnout.

- Investigate COVID-19 cases; the process of working with a consumer who has been diagnosed with COVID-19 and includes, but is not limited to:

- Discuss test result or diagnosis with consumers;
- Assess patient symptom history and health status;
- Provide instructions and support for self-isolation and symptom monitoring; and
- Identify people (contacts) who may have been exposed to COVID-19.

- Conduct contact tracing: the process of notifying people (contacts) of their potential exposure to SARS-CoV-2, the virus that causes COVID-19 and includes, but is not limited to:

- Provide information about the virus;
- Discuss their symptom history and other relevant health information; and
- Provide instructions for self-quarantine and monitoring for symptoms.

The following are ineligible costs for the purposes of this funding:

- Costs already paid for by other federal or state programs, other federal or state COVID-19 funds, or prior COVID-19 supplemental funding.
- Any activity related to purchasing, disseminating, or administering COVID-19 vaccines.
- Construction projects.
- Support of lobbying/advocacy efforts.
- Facility or land purchases.
- COVID-19 mitigation activities conducted prior to 9/1/2021.
- Financial assistance to an entity other than a public or nonprofit private entity.

## C: Expenditure Reports

**Table 2 - State Agency Expenditure Report**

This table provides a report of SUPTRS BG and state expenditures by the SSA during the SFY immediately preceding the FFY for which the state is applying for funds for authorized activities for primary prevention of substance use, treatment of SUD, and recovery support services for individuals with SUD. For detailed instructions, refer to those in the WebBGAS. Please note that this expenditure period is different from the reporting period on SUPTRS BG Table 4. The 2027 Report will not include COVID-19 or ARP Supplemental Funding, which expired in March 2025.

Expenditure Period Start Date: 7/1/2024 Expenditure Period End Date: 6/30/2025

Activity	A. SUPTRS BG	B. MHBG	C. Medicaid (e.g., ACF (TANF), CDC, CMS (Medicare) SAMHSA, etc.)	D. Other Federal Funds (e.g., ACF, TANF, CDC, Medicare etc.)	E. State Funds	F. Local Funds (excluding local Medicaid)	G. Other	H. COVID-19 <sup>a</sup>	I. ARP <sup>b</sup>
1. Substance Use Disorder Prevention <sup>c</sup> & Treatment	\$68,404,835.00		\$0.00	\$100,113,611.00	\$137,442,870.00	\$0.00	\$25,603,281.00	\$0.00	\$8,174,424.00
a. Pregnant Women and Women with Dependent Children (PWWDC) <sup>d</sup>	\$1,711,907.00		\$0.00	\$0.00	\$9,815,707.00	\$0.00	\$0.00	\$0.00	\$0.00
b. All Other	\$66,692,928.00		\$0.00	\$100,113,611.00	\$127,627,163.00	\$0.00	\$25,603,281.00	\$0.00	\$8,174,424.00
2. Recovery Support Services <sup>e</sup>	\$13,656,095.00		\$0.00	\$15,241,754.00	\$7,906,403.00	\$0.00	\$11,307,711.00	\$0.00	\$0.00
3. Substance Use Primary Prevention <sup>f</sup>	\$31,841,177.00		\$0.00	\$7,997,641.00	\$648,186.00	\$0.00	\$0.00	\$0.00	\$2,550,792.00
4. Early Intervention Services Regarding the Human Immunodeficiency Virus (EIS/HIV) <sup>g</sup>	\$5,523,110.00		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5. Tuberculosis Services	\$0.00		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6. Other Capacity Building/Systems Development Activities	\$3,802,002.00		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7. State Hospital									
8. Other 24 Hour Care									
9. Ambulatory/Community Non-24 Hour Care									
10. Mental Health Primary Prevention									
11. Evidenced Based Practices for First Episode Psychosis (10% of the state's total MHBG award)									
12. Administration <sup>h</sup>	\$288,210.00		\$0.00	\$5,063,344.00	\$8,266,582.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>13. Total</b>	<b>\$123,515,429.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$128,416,350.00</b>	<b>\$154,264,041.00</b>	<b>\$0.00</b>	<b>\$36,910,992.00</b>	<b>\$0.00</b>	<b>\$10,725,216.00</b>

Please indicate the expenditures are actual or estimated.

Actual  Estimated

<sup>a</sup> Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG COVID-19 expenditures for the same one-year period. Note: COVID supplemental funds had an original award period of March 15, 2021 through March 14, 2023. States that were granted a second No Cost Extension (NCE) on March 14, 2024 had until March 14, 2025 to expend their COVID-19 supplemental funds. Those states expending supplemental funds under the second NCE are required to report expenditures made during SFY 2025, for most states that include expenditures between July 1, 2024 and March 14, 2025, in the COVID-19 designated column of the FY2026 Report.

<sup>b</sup> Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG ARP expenditures for the same one-year period. Note: ARP supplemental funds had an award period of September 1, 2021 through March 24, 2025. States are required to report expenditures made during SFY 2025, for most states this is July 1, 2024 through March 24, 2025, in the ARP designated column in the FY2026 Report.

<sup>c</sup> Prevention other than primary prevention.

<sup>d</sup> Grantees must expend for Pregnant Women and Women with Dependent Children in compliance Women's Maintenance of Effort (MOE) over the one-year reporting period.

<sup>e</sup> This expenditure category is mandated by Section 1243 of the Consolidated Appropriations Act, 2023 and includes an aggregate of expenditures allowable under The 2023 guidance, "Allowable Recovery Support Services (RSS) Expenditures through the SUBG and the MHBG." Only report RSS for those in need of RSS from substance use disorder. States are asked to begin reporting expenditures for RSS, previously reported under Row 1, Substance Use Disorder Prevention and Treatment, in the stand-alone Row 2. States are encouraged to begin reporting these expenditures in the 2026 SUPTRS BG Report, while required reporting will begin in 2027 and onward.

<sup>f</sup> Row 3 should account for the 20% minimum primary prevention set-aside of SUPTRS BG funds to be used for universal, selective, and indicated substance use prevention activities.

<sup>9</sup>The most recent AtlasPlus HIV data report published on or before October 1 of the federal fiscal year for which a state is applying for a grant is used to determine the states and jurisdictions that will be required to set-aside 5% of their respective SUPTRS BG allotments to establish one or more projects to provide early intervention services regarding the human immunodeficiency virus (EIS/HIV) at the sites at which individuals are receiving SUD treatment.

<sup>h</sup>Per 45 CFR § 96.135 Restrictions on expenditure of the SUPTRS BG, the state involved will not expend more than 5% of the BG to pay the costs of administering the SUPTRS BG.

<sup>i</sup>If expenditures are estimated at time of reporting, the state must provide in the footnotes a date when the final actual expenditures are expected. Actual amounts are required to meet compliance with SUPTRS BG reporting.

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**Footnotes:**

Table 2, Column E, Row 1b contains an unintentional error, as it includes an amount of \$9,110,486 that should not have been reported. Column E, Row 12 reflects the correct Administration total of \$8,266,502. Additionally, the difference of \$24,684,760 between Table 2 and Table 8a represents expenditures related to activities that are not subject to MOE requirements. KRG 4/8/2026

## C: Expenditure Reports

### Table 3a - Syringe Services Program (SSP) Expenditures by Program

States which have requested and been approved for expending SUPTRS BG and its supplemental funds on the support of Syringe Services Programs (SSP) must report the programs that are funded, including whether they provide treatment and the total expenditures spent by each program under the SUPTRS BG and its other supplemental funds. The 2027 Report will not include COVID-19 or ARP Supplemental Funding, which expired in March 2025.

Grantees approved for expending SUPTRS BG on SSPs are prohibited from using appropriated funds for the purchase of sterile needles or syringes for the hypodermic injection of any illegal drug as outlined in the Further Consolidated Appropriations Act, 2024, Title V, Sec. 526 (P.L. 118 - 47), March 23, 2024. In addition, states must note that no federal funding may be used directly or through subsequent reimbursement of grantees to purchase pipes in safer smoking kits. Grants include explicit prohibitions of federal funds to be used to purchase drug paraphernalia for administering any illegal drug. Grants also include explicit prohibitions of federal funds to be used to purchase drug paraphernalia used to administer any illegal drug.

Expenditure Start Date: 07/01/2024 Expenditure End Date: 06/30/2025

SSP Expenditures						
SSP Name	SSP Main Address	SUD Treatment Provider (Yes or No)	# Of locations (Include any mobile locations)	A. SUPTRS BG	B. COVID-19 <sup>a</sup>	C. ARP <sup>b</sup>
No Data Available						
<b>Total</b>						

<sup>a</sup>Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG COVID-19 expenditures for the same one-year period.

*Note: COVID supplemental funds had an original award period of March 15, 2021 through March 14, 2023. States that were granted a second No Cost Extension (NCE) on March 14, 2024 had until March 14, 2025 to expend their COVID-19 supplemental funds. Those states expending supplemental funds under the second NCE are required to report expenditures made during SFY 2025 (typically July 1, 2024–March 14, 2025) in the COVID-19 designated column of the FY2026 Report.*

<sup>b</sup>Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG ARP expenditures for the same one-year period.

**Note:** ARP supplemental funds had an award period of September 1, 2021 through March 24, 2025.

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#### Footnotes:

The Department of Children and Families does not fund Syringe Services. KRG

## C: Expenditure Reports

**Table 3b - Syringe Services Program (SSP) Number of Individuals Served**

States which have requested and been approved for expending SUPTRS BG and its supplemental funds on the support of Syringe Services Programs (SSP) must report the number of individuals served by service and activity type below. Grantees approved for expending SUPTRS BG on SSPs are prohibited from using appropriated funds for the purchase of sterile needles or syringes for the hypodermic injection of any illegal drug as outlined in the Further Consolidated Appropriations Act, 2024, Title V, Sec. 526 (P.L. 118-47), March 23, 2024. In addition, states must note that no federal funding may be used directly or through subsequent reimbursement of grantees to purchase pipes in safer smoking kits. Grants include explicit prohibitions of federal funds to be used to purchase drug paraphernalia for administering any illegal drug.

If a state does NOT use any SUPTRS BG and/or supplemental funds on SSP, indicate so in the footnote. The 2027 Report will not include COVID-19 or ARP Supplemental Funding, which expired in March 2025.

Expenditure Start Date: 07/01/2024 Expenditure End Date: 06/30/2025

SUPTRS BG							
Syringe Services Program Name	# of Unique Individuals Served		HIV Testing (Enter total number of individuals served)	Treatment for Substance Use Conditions (Enter total number of individuals served)	Treatment for Physical Health (Enter total number of individuals served)	STD Testing (Enter total number of individuals served)	Hep C (Enter total number of individuals served)
	0	ONSITE <sup>c</sup>	0	0	0	0	0
		REFERRAL OUT <sup>d</sup>	0	0	0	0	0
<b>Total</b>	0		0	0	0	0	0
COVID-19 <sup>a</sup>							
Syringe Services Program Name	# of Unique Individuals Served		HIV Testing (Enter total number of individuals served)	Treatment for Substance Use Conditions (Enter total number of individuals served)	Treatment for Physical Health (Enter total number of individuals served)	STD Testing (Enter total number of individuals served)	Hep C (Enter total number of individuals served)
	0	ONSITE <sup>c</sup>	0	0	0	0	0
		REFERRAL OUT <sup>d</sup>	0	0	0	0	0
<b>Total</b>	0		0	0	0	0	0
ARP <sup>b</sup>							
Syringe Services Program Name	# of Unique Individuals Served		HIV Testing (Enter total number of individuals served)	Treatment for Substance Use Conditions (Enter total number of individuals served)	Treatment for Physical Health (Enter total number of individuals served)	STD Testing (Enter total number of individuals served)	Hep C (Enter total number of individuals served)

		<i>served)</i>	<i>(Enter total number of individuals served)</i>	<i>number of individuals served)</i>	<i>served)</i>	<i>served)</i>	<i>served)</i>
	0	ONSITE <sup>c</sup>	0	0	0	0	0
		REFERRAL OUT <sup>d</sup>	0	0	0	0	0
<b>Total</b>	0		0	0	0	0	0

<sup>a</sup>Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG COVID-19 expenditures for the same one-year period. Note: COVID supplemental funds had an original award period of March 15, 2021 through March 14, 2023. States that were granted a second No Cost Extension (NCE) on March 14, 2024 had until March 14, 2025 to expend their COVID-19 supplemental funds. Those states expending supplemental funds under the second NCE are required to report expenditures made during SFY 2025, for most states that include expenditures between July 1, 2024 and March 14, 2025, in the COVID-19 designated column of the FY2026 Report.

<sup>b</sup>Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG ARP expenditures for the same one-year period. Note: ARP supplemental funds had an award period of September 1, 2021 through March 24, 2025. States are required to report expenditures made during SFY 2025, for most states this is July 1, 2024 through March 24, 2025, in the ARP designated column in the FY2026 Report.

<sup>c</sup>Onsite services are those conducted on premise of the SSP and are reimbursed through SUPTRS BG.

<sup>d</sup>In instances where the service is not provided directly onsite at the SSP, the SSP may refer individuals out to other providers. SSPs should document the number of referrals made out to other providers during the reporting period.

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**Footnotes:**

## C: Expenditure Reports

**Table 3c - Risk Reduction Activities & Expenditures**

States that use SUPTRS BG and/or its supplemental funds for the purchase and distribution of opioid overdose reversal kits and/or drug checking technologies, including test strips, must report the number purchased, distributed, and the related expenditures in the table below by provider/program. If a state does NOT use any SUPTRS BG and/or supplemental funds on Risk Reduction activities, please state so in the footnote. The 2027 Report will not include COVID-19 or ARP Supplemental Funding, which expired in March 2025.

Grantees approved for expending SUPTRS BG on SSPs are prohibited from using appropriated funds for the purchase of sterile needles or syringes for the hypodermic injection of any illegal drug as outlined in the Further Consolidated Appropriations Act, 2024, Title V, Sec. 526 (P.L. 118-47), March 23, 2024. In addition, states must note that no federal funding may be used directly or through subsequent reimbursement of grantees to purchase pipes in safer smoking kits. Grants include explicit prohibitions of federal funds to be used to purchase drug paraphernalia for administering any illegal drug.

Appropriations Act, 2024, Title V, Sec. 526 (P.L. 118-47), March 23, 2024. In addition, states must note that no federal funding may be used directly or through subsequent reimbursement of grantees to purchase pipes in safer smoking kits. Grants include explicit prohibitions of federal funds to be used to purchase drug paraphernalia for administering any illegal drug.

Expenditure Period Start Date: 07/01/2024 Expenditure Period End Date: 06/30/2025

Risk Reduction Activities								Expenditures		
Provider/Program Name	Main Address	SSP (Yes/No)	Number of Opioid Overdose Reversal Kits <sup>a</sup> Purchased	Number of Opioid Overdose Reversal Kits Distributed	Number of Overdose Reversals	Number of Drug Checking Technologies <sup>b</sup> Purchased	Number of Drug Checking Technologies Distributed	A. SUPTRS BG	B. COVID-19 <sup>c</sup>	C. ARP <sup>d</sup>
No Data Available										

<sup>a</sup>Opioid overdose Reversal Kits may include naloxone, nalmefene, and other FDA approved overdose reversal medications approved by the FDA as specified. The range of FDA-approved opioid overdose reversal medications are supported and recommendations are that grantees fully assess specific community characteristics, available resources, and interest in different products and delivery routes, when determining the FDA-approved opioid overdose reversal medications to purchase and distribute. In addition, the use of Block Grant funds for the purchase of syringes for the intramuscular administration of naloxone is considered an allowable expense.

<sup>b</sup>Drug checking technologies may include those technologies that are used to check for the presence of if certain chemicals or additives in one's personal supply of drugs. Examples of drug checking technologies includes fentanyl and xylazine test strips, among other drug checking technologies specified in federal guidance.

<sup>c</sup>Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG COVID-19 expenditures for the same one-year period. **Note:** COVID supplemental funds had an original award period of March 15, 2021 through March 14, 2023. States that were granted a second No Cost Extension (NCE) on March 14, 2024 had until March 14, 2025 to expend their COVID-19 supplemental funds. Those states expending supplemental funds under the second NCE are required to report expenditures made during SFY 2025, for most states that include expenditures between July 1, 2024 and March 14, 2025, in the COVID-19 designated column of the FY2026 Report.

<sup>d</sup>Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG ARP expenditures for the same one-year period. **Note:** ARP supplemental funds had an award period of September 1, 2021 through March 24, 2025. States are required to report expenditures made during SFY 2025, for most states this is July 1, 2024 through March 24, 2025, in the ARP designated column in the FY2026 Report.

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**Footnotes:**

## C: Expenditure Reports

**Table 4 - SUPTRS BG Expenditure Compliance Report**

This table provides a description of SUPTRS BG expenditures for authorized activities to prevent and treat SUDs.

Expenditure Period Start Date: 10/1/2022 Expenditure Period End Date: 9/30/2024

Expenditure Category	FFY SUPTRS BG Award
1. Substance Use Disorder Prevention <sup>a</sup> and Treatment	\$73,462,314.00
2. Recovery Support Services <sup>b</sup>	\$981,122.00
3. Primary Prevention of Substance Use <sup>c</sup>	\$28,262,631.00
4. Early Intervention Services for the Human Immunodeficiency Virus (EIS/HIV) <sup>d</sup>	\$121,373.00
5. Tuberculosis Services	\$0.00
6. Other Capacity Building/Systems Development <sup>e</sup>	\$7,241,565.00
7. Administration <sup>f</sup>	\$1,025,865.00
<b>8. Total<sup>g</sup></b>	<b>\$111,094,870.00</b>

<sup>a</sup>Prevention other than primary prevention. The amount reported in this row should reflect those expenditures made for direct services during the expenditure period, and otherwise reported on Table 7. Do not include expenditures made for other capacity building/systems development, those are required to be reported in Row 6 of this table.

<sup>b</sup>This expenditure category is mandated by Section 1243 of the Consolidated Appropriations Act, 2023 and includes an aggregate of expenditures allowable under The 2023 guidance, "Allowable Recovery Support Services (RSS) Expenditures through the SUBG and the MHBG." Only report RSS for those in need of RSS from substance use disorder. States are asked to begin reporting expenditures for RSS, previously reported under Row 1, Substance Use Disorder Prevention and Treatment, in the stand-alone Row 2. States are encouraged to begin reporting these expenditures as early as their 2026 SUPTRS BG Report, while required reporting will begin in 2027 and onward. States should use the footnotes to explain any challenges that contribute to their inability to report RSS expenditures separately.

<sup>c</sup>The amounts reported here should reflect direct delivery of primary prevention to the population and be consistent with the expenditures found on Tables 5a. Do not include expenditures for other capacity building/systems development, those are required to be reported in Row 6 of this table.

<sup>d</sup>The most recent AtlasPlus HIV data report published on or before October 1 of the federal fiscal year for which a state is applying for a grant is used to determine the states and jurisdictions that will be required to set-aside 5% of their respective SUPTRS BG award to establish one or more projects to provide early intervention services for the human immunodeficiency virus (EIS/HIV) at the sites at which individuals are receiving SUD treatment.

<sup>e</sup>Other capacity building/system development expenditures should reflect activities that support treatment, recovery support services, and primary prevention that are otherwise not direct services. The total found here should reflect the sum of expenditures found on Table 6 for treatment, recovery, and primary prevention.

<sup>f</sup>Per [45 CFR § 96.135](#) Restrictions on expenditure of grant, the State involved will not expend more than 5% of the BG to pay the costs of SSA administering the SUPTRS BG.

<sup>g</sup>The total of this table should be consistent the state's Federal Financial Report (FFR) submitted at closeout of the award for which the state is reporting. 0930-0168 Approved: 05/28/2025 Expires: 01/31/2028

**Footnotes:**

The state did not fully meet the 5% set-aside requirement for Early Intervention Services for the Human Immunodeficiency Virus (EIS/HIV) and therefore did not expend the full \$116,814,207 award. The expended award amount is \$111,094,870. KRG 12/11/2025

BE	CAT	OCA	Title L OCA	COBJ	TYPE	GRP
60900101	010000	BSAMH	SAMH - BUDGET SERVICES ADMIN	BSA23	G	ME
60900101	010000	FMMCM	CBC-ME FINANCIAL ACCOUNTABILITY	BSA23	G	ME
60900101	010000	SALHQ	SUBSTANCE ABUSE LICENSURE - HQ	BSA23	G	ME
60900101	010000	SALRG	SUBSTANCE ABUSE LICENSURE - REGIONS	BSA23	G	ME
60900101	010000	SAMHH	SAMH - HQ ADMIN & PROGRAM STAFF	BSA23	G	AA
60900101	010000	SAMHH	SAMH - HQ ADMIN & PROGRAM STAFF	BSA23	G	ME
60900101	010000	SAMHN	SAMH-HQ CONTRACTS	BSA23	G	ME
60900101	010000	SAMHR	SAMH - REGION ADMIN & PROGRAM STAFF	BSA23	G	ME
60900101	010000	SAMHS	SAMH-ASSISTANT SECRETARY	BSA23	G	ME
60900101	010000	SMBGA	SAMH HQ BLOCK GRANT ADMINISTRATION	BSA23	G	AA
60900101	030000	SALHQ	SUBSTANCE ABUSE LICENSURE - HQ	BSA23	G	ME
60900101	030000	SALRG	SUBSTANCE ABUSE LICENSURE - REGIONS	BSA23	G	ME
60900101	030000	SAMHH	SAMH - HQ ADMIN & PROGRAM STAFF	BSA23	G	AA
60900101	030000	SAMHH	SAMH - HQ ADMIN & PROGRAM STAFF	BSA23	G	ME
60900101	030000	SAMHN	SAMH-HQ CONTRACTS	BSA23	G	ME
60900101	030000	SAMHR	SAMH - REGION ADMIN & PROGRAM STAFF	BSA23	G	ME
60900101	040000	INDAJ	PRIOR YR. INDIRECT ADJUSTMENTS	BSA23	G	1I
60900101	040000	INDDP	PRIOR YR INDIRECT ADJUSTMNT-DP	BSA23	G	1I
60900101	040000	INDSW	PRIOR YR INDIRECT ADJUST-SWCAP	BSA23	G	1I
60900101	040000	SALHQ	SUBSTANCE ABUSE LICENSURE - HQ	BSA23	G	ME
60900101	040000	SALRG	SUBSTANCE ABUSE LICENSURE - REGIONS	BSA23	G	ME
60900101	040000	SAMHH	SAMH - HQ ADMIN & PROGRAM STAFF	BSA23	G	AA
60900101	040000	SAMHH	SAMH - HQ ADMIN & PROGRAM STAFF	BSA23	G	ME
60900101	040000	SAMHN	SAMH-HQ CONTRACTS	BSA23	G	ME
60900101	040000	SAMHR	SAMH - REGION ADMIN & PROGRAM STAFF	BSA23	G	ME
60910950	001800	MS000	ME SA SVCS & SUPPORT	BSA23	G	AA
60910950	001800	MS023	ME SA HIV SVCS	BSA23	G	AA
60910950	001800	MS025	ME SA PREVENTION SVCS	BSA23	G	AA
60910950	001800	MS091	ME SA FAMILY INTENSIVE TREATMENT (FIT)	BSA23	G	AA
60910950	001800	MS0CN	ME SA CARE COORDINATION DIRECT CLIENT S	BSA23	G	AA
60910950	001800	MS0PP	ME SA PREVENTION PARTNERSHIP PROG	BSA23	G	AA
60910950	001800	PRV00	SA PREVENTION SVCS	BSA23	G	AA
60910950	001800	SAMHH	SAMH - HQ ADMIN & PROGRAM STAFF	BSA23	G	AA
60910950	001800	TRT00	SA TREATMENT SVCS	BSA23	G	AA
60910950	001801	SAMHH	SAMH - HQ ADMIN & PROGRAM STAFF	BSA23	G	AA
60910950	010000	SAMHH	SAMH - HQ ADMIN & PROGRAM STAFF	BSA23	G	AA
60910950	010000	SMBGA	SAMH HQ BLOCK GRANT ADMINISTRATION	BSA23	G	AA
60910950	030000	SAMHH	SAMH - HQ ADMIN & PROGRAM STAFF	BSA23	G	AA
60910950	040000	SAMHH	SAMH - HQ ADMIN & PROGRAM STAFF	BSA23	G	AA
60910950	100618	MS000	ME SA SVCS & SUPPORT	BSA23	G	AA

60910950	100618	MS023	ME SA HIV SVCS	BSA23	G	AA
60910950	100618	MS025	ME SA PREVENTION SVCS	BSA23	G	AA
60910950	100618	MS091	ME SA FAMILY INTENSIVE TREATMENT (FIT)	BSA23	G	AA
60910950	100618	MS0CN	ME SA CARE COORDINATION DIRECT CLIENT S	BSA23	G	AA
60910950	100618	MS0PP	ME SA PREVENTION PARTNERSHIP PROG	BSA23	G	AA
60910950	100618	MSTRV	ME TRANSITIONS VOUCHERS SUBSTANCE ABL	BSA23	G	AA
60910950	100618	PRV00	SA PREVENTION SVCS	BSA23	G	AA
60910950	100618	SPJ00	SA SPECIAL PROJECTS	BSA23	G	AA
60910950	100618	TRT00	SA TREATMENT SVCS	BSA23	G	AA
60910950	100777	MS000	ME SA SVCS & SUPPORT	BSA23	G	AA
60910950	100777	SAMHH	SAMH - HQ ADMIN & PROGRAM STAFF	BSA23	G	AA
60910950	100778	MHSCD	ME CARE COORDINATION	BSA23	G	AA
60910950	100778	SAMHH	SAMH - HQ ADMIN & PROGRAM STAFF	BSA23	G	AA
60910950	105281	SAMHH	SAMH - HQ ADMIN & PROGRAM STAFF	BSA23	G	AA

**Grant Period 10/01/2022-09/30/2024**

**GRANT AWARD 116,814,207.00**

Set Asides/Admin Cap  
 Primary Prevention (MS025, MS0PP, PRV00)  
 HIV (MS023)  
 Administrative

Preg Women & Women w/dependent children (MS081 Expend)

*Florida must spend \$9,327,217 in federal and/or state funds*

BE	CAT	OCA	Title L OCA	COBJ	TYPE	GRP
60910950	001800	MS081	ME EXPAND SA SVCS PREG WOM, MOTHERS &	BSA23	G	ME
60910950	100618	MS081	ME EXPAND SA SVCS PREG WOM	BSA23	G	ME
60910950	100618	MS081	ME EXPAND SA SVCS PREG WOM, MOTHERS &	BSA23	G	ME

YTD_EARN_TOT_063 023Q_SUM	YTD_EARN_TOT_063 024Q_SUM	YTD_EARN_TOT_063 025Q_SUM	LTD EARNINGS
6,025.47	4,410.59	0.00	10,436.06
16,887.00	11,327.96	0.00	28,214.96
45,410.92	29,637.91	0.00	75,048.83
160,145.99	107,216.56	0.00	267,362.55
3,521.53	8,529.01	3,197.30	15,247.84
129,740.36	84,204.03	0.00	213,944.39
5,591.34	3,000.00	0.00	8,591.34
53,003.76	33,984.16	0.00	86,987.92
1,206.76	965.79	0.00	2,172.55
0.00	20,556.32	0.00	20,556.32
2,865.88	0.00	0.00	2,865.88
38,731.02	18,376.23	0.00	57,107.25
77.59	297.32	34.75	409.66
2,858.79	2,848.25	0.00	5,707.04
548.12	475.00	0.00	1,023.12
10,222.73	6,501.88	0.00	16,724.61
0.00	0.00	21,865.59	21,865.59
0.00	0.00	-7,129.02	-7,129.02
0.00	0.00	-14,736.58	-14,736.58
0.00	0.03	0.00	0.03
345.61	0.00	0.00	345.61
31.52	8.54	-10.59	29.47
1,161.50	84.24	0.00	1,245.74
0.00	0.01	0.00	0.01
0.00	51.04	0.00	51.04
-50,872.62	0.00	0.00	-50,872.62
-1,038,065.79	-1,003.30	-274,446.79	-1,313,515.88
-452,937.73	-174,219.50	174,719.50	-452,437.73
-108,444.83	0.00	108,444.83	0.00
-1,395.12	0.00	1,395.12	0.00
-65,555.52	0.00	-104,524.78	-170,080.30
-1,041.41	0.00	0.00	-1,041.41
-110.14	-3,185.35	2,669.58	-625.91
-86.24	0.00	0.00	-86.24
0.00	0.00	-2.91	-2.91
13,921.09	32,930.49	13,901.67	60,753.25
0.00	79,368.06	0.00	79,368.06
305.93	1,147.87	151.10	1,604.90
2,621.45	10,564.78	3,939.99	17,126.22
41,054,296.69	38,669,539.45	-2,265,534.38	77,458,301.76

4,044,041.37	3,367,708.69	-5,976,860.96	1,434,889.10
17,174,078.23	7,500,885.65	2,269,190.26	26,944,154.14
-171,575.95	0.00	171,575.95	0.00
328,623.46	0.00	-43,871.43	284,752.03
3,250,802.40	1,394,069.45	110,603.42	4,755,475.27
0.00	-9,031.46	9,031.46	0.00
390,590.46	194,311.47	41,221.94	626,123.87
36,467.50	19,081.67	3,845.84	59,395.01
41,851.74	-768.10	-14,377.91	26,705.73
244,898.07	185,035.91	37,308.24	467,242.22
7,132.05	26,320.29	2,453.86	35,906.20
122,670.77	-122,670.76	0.00	0.01
4,358.71	6,536.65	6,525.45	17,420.81
51.58	108.13	82.37	242.08
			<u>111,094,869.87</u>

				<u>Required/Capped</u>
20,295,936.43	8,915,047.07	2,491,210.34	31,702,193.84	20%
3,005,975.58	3,366,705.39	-6,251,307.75	121,373.22	5%
506,656.56	486,265.79	32,942.56	1,025,864.91	5%

YTD_EXPEND_TOT_0	YTD_EXPEND_TOT_0	YTD_EXPEND_TOT_0	YTD_EXPEND_TOT_1	LTD
63023Q_SUM	63024Q_SUM	63025Q_SUM	02725W_SUM	EXPENDITURES
-254,479.73	0.00	254,479.73	0.00	0.00
0.00	0.00	0.00	-846,449.34	-846,449.34
6,610,986.57	6,005,289.07	395,716.09	0.00	<u>13,011,991.73</u>
				12,165,542.39



Actual %	Required	unmet/unobligated balance
0.27	23,362,841.40	
0.00	5,840,710.35	5,719,337.13
0.01		

## C: Expenditure Reports

**Table 5a - Primary Prevention Expenditures by Strategy and Institute of Medicine (IOM) Categories**

This table is for the reporting of expenditures on primary prevention activities associated with the SUPTRS BG 2023 Award during the two-year award period. The state or jurisdiction must complete SUPTRS BG Report Table 5a. Expenditures within each of the six strategies or by Institute of Medicine Model (IOM) classification should be directly associated with the cost of completing the activities or tasks. If a state used strategies not covered by these six categories or the state is unable to calculate expenditures by strategy, please report them under "Other." For detailed instructions, refer to those in the WebBGAS.

Expenditure Period Start Date:  Expenditure Period End Date:

Strategy	IOM Classification	A. SUPTRS BG <sup>a</sup>	B. Other Federal	C. State	D. Local	E. Other	F. COVID-19 <sup>b</sup>	G. ARP <sup>c</sup>
Information Dissemination	Selective	\$339,152.00						
Information Dissemination	Indicated	\$113,051.00						
Information Dissemination	Universal	\$678,303.00						
Information Dissemination	Unspecified							
<b>Information Dissemination</b>	<b>Total</b>	<b>\$1,130,506.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Education	Selective	\$2,798,000.00						
Education	Indicated	\$932,667.00						
Education	Universal	\$5,596,000.00						
Education	Unspecified							
<b>Education</b>	<b>Total</b>	<b>\$9,326,667.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Alternatives	Selective	\$339,152.00						
Alternatives	Indicated	\$113,051.00						
Alternatives	Universal	\$678,303.00						
Alternatives	Unspecified							
<b>Alternatives</b>	<b>Total</b>	<b>\$1,130,506.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Problem Identification and Referral	Selective	\$1,356,606.00						
Problem Identification and Referral	Indicated	\$452,201.00						
Problem Identification and Referral	Universal	\$2,713,212.00						
Problem Identification and Referral	Unspecified							

<b>Problem Identification and Referral</b>	<b>Total</b>	<b>\$4,522,019.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Community-Based Process	Selective	\$3,476,303.00						
Community-Based Process	Indicated	\$1,158,768.00						
Community-Based Process	Universal	\$6,952,606.00						
Community-Based Process	Unspecified							
<b>Community-Based Process</b>	<b>Total</b>	<b>\$11,587,677.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Environmental	Selective	\$169,576.00						
Environmental	Indicated	\$56,525.00						
Environmental	Universal	\$339,152.00						
Environmental	Unspecified							
<b>Environmental</b>	<b>Total</b>	<b>\$565,253.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Section 1926 (Synar)-Tobacco	Selective	\$0.00						
Section 1926 (Synar)-Tobacco	Indicated	\$0.00						
Section 1926 (Synar)-Tobacco	Universal	\$0.00						
<b>Section 1926 (Synar)-Tobacco</b>	<b>Total</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Other	Universal Direct							
Other	Universal Indirect							
Other	Selective							
Other	Indicated							
<b>Other</b>	<b>Total</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
	<b>Grand Total</b>	<b>\$28,262,628.00</b>						

<sup>a</sup>The total SUPTRS BG Award expenditures should equal the amount reported on Table 4, Row 3 and not include any expenditures otherwise spent on other capacity building/systems development.

<sup>b</sup>Per the instructions, the reporting period is for the SUPTRS BG Award period. Enter SUPTRS BG COVID-19 expenditures for the same two-year period. **Note:** COVID supplemental funds had an original award period from March 15, 2021 through March 14, 2023. States that were granted a second No Cost Extension (NCE) on March 14, 2024 had until March 14, 2025 to expend their COVID-19 supplemental funds.

<sup>c</sup>Per the instructions, the reporting period is for the SUPTRS BG Award period. Enter SUPTRS BG ARP expenditures for the same two-year period. **Note:** ARP supplemental funds had award period from September 1, 2021 through March 24, 2025.

**Footnotes:**

## C: Expenditure Reports

**Table 5b - Primary Prevention Expenditures by Institute of Medicine (IOM) Categories**

The state or jurisdiction must complete SUPTRS Report Table 5b if it chooses to report primary prevention of substance use activities utilizing the Institute of Medicine Model (IOM) Model of Universal, Selective, and Indicated in SUPTRS Report Table 5a. Indicate how much funding supported each of the IOM classifications of Universal, Selective, or Indicated.

Expenditure Period Start Date: 10/1/2022      Expenditure Period End Date: 9/30/2024

Strategy	A. SUPTRS BG Award	B. COVID-19 <sup>a</sup>	C. ARP <sup>b</sup>
Universal Direct	\$8,987,516		
Universal Indirect	\$7,970,061		
Selective	\$8,478,788		
Indicated	\$2,826,263		
<b>Column Total</b>	<b>\$28,262,628</b>		
<b>Total SUPTRS BG Award<sup>c</sup></b>	<b>111094870.00</b>		
<b>Primary Prevention Expenditure Percentage<sup>d</sup></b>	<b>25.44%</b>		

<sup>a</sup>Per the instructions, the reporting period is for the SUPTRS BG Award period. Enter SUPTRS BG COVID-19 expenditures for the same two-year period. Note: COVID supplemental funds had an original award period from March 15, 2021 through March 14, 2023. States that were granted a second No Cost Extension (NCE) on March 14, 2024 had until March 14, 2025 to expend their COVID-19 supplemental funds.

<sup>b</sup>Per the instructions, the reporting period is for the SUPTRS BG Award period. Enter SUPTRS BG ARP expenditures for the same two-year period. Note: ARP supplemental funds had award period from September 1, 2021 through March 24, 2025.

<sup>c</sup>Total SUPTRS BG Award is populated from Report Table 4 SUPTRS BG Award Expenditure Compliance Report.

<sup>d</sup>The Primary Prevention Expenditure Percentage is the percentage amount the agency committed to for this reporting period.

0930-0168 Approved: 05/28/2025 Expires: 01/31/2028

**Footnotes:**

## C: Expenditure Reports

**Table 5c - Primary Prevention Priorities**

The purpose of the first table is for the state or jurisdiction to identify the substance and/or categories of substances it identified through its needs assessment and then addressed with primary prevention set-aside dollars from the SUPTRS BG 2023 Award during the two-year award period. The purpose of the bottom half of the table is to identify each special population the state or jurisdiction selected as a priority for primary prevention set-aside expenditures.

Expenditure Period Start Date: 10/1/2022 Expenditure Period End Date: 9/30/2024

Priority Substances	A. SUPTRS BG	B. COVID-19 <sup>a</sup>	C. ARP <sup>b</sup>
Alcohol	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Tobacco/Nicotine-Containing Products	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cannabis/Cannabinoids	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Prescription Medications	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cocaine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heroin	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Inhalants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Methamphetamine	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Fentanyl or Other Synthetic Opioids	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Priority Populations			
College Age Individuals (ages 18-26)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Older Adults (age 55 and above)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Military Families	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
American Indian/Alaska Native	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
African American	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hispanic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Persons Experiencing Homelessness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Native Hawaiian/Pacific Islander	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rural	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

<sup>a</sup>Per the instructions, the reporting period is for the SUPTRS BG Award period. Enter SUPTRS BG COVID-19 primary prevention priority areas for the same two-year period. **Note:** COVID supplemental funds had an original award period from March 15, 2021 through March 14, 2023. States that were granted a second No Cost Extension (NCE) on March 14, 2024 had until March 14, 2025 to expend their COVID-19 supplemental funds.

<sup>b</sup>Per the instructions, the reporting period is for the SUPTRS BG Award period. Enter SUPTRS BG ARP primary prevention priority areas for the same two-year period. **Note:** ARP supplemental funds had award period from September 1, 2021 through March 24, 2025.

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**Footnotes:**

## C: Expenditure Reports

**Table 6 - Other Capacity Building/Systems Development Activities**

Expenditures in the following categories of SSA activities and subrecipient activities funded by the SSA through contracts, grants, or agreements with subrecipients. Expenditures should not duplicate any reporting of allocations to subrecipients that are listed in Table 7. Please utilize the following categories to describe the types of expenditures your state supports with Block Grant funds, and if the preponderance of the activity fits within a category. Other capacity building/systems development activities may not be used to meet set-aside requirements for EIS/HIV. For additional definitions and instructions on how to complete this table, please see the 'Instruction' tab above.

Expenditure Period Start Date: 10/01/2022 Expenditure Period End Date: 09/30/2024

Activity	A. SUPTRS BG Prevention <sup>a</sup> & Treatment	B. SUPTRS BG Recovery Support Services <sup>b</sup>	C. SUPTRS BG Primary Prevention <sup>c</sup>
1. Information Systems	\$1,268,360.00	\$0.00	\$73,320.00
a. Single State Agency (SSA)	\$0.00	\$0.00	\$0.00
b. All other subrecipient contracts	\$1,268,360.00	\$0.00	\$73,320.00
2. Infrastructure Support	\$566,061.00	\$0.00	\$98,320.00
a. Single State Agency (SSA)	\$0.00	\$0.00	\$0.00
b. All other subrecipient contracts	\$566,061.00	\$0.00	\$98,320.00
3. Partnerships, community outreach, and needs assessment	\$1,690,746.00	\$0.00	\$2,638,940.00
a. Single State Agency (SSA)	\$0.00	\$0.00	\$0.00
b. All other subrecipient contracts	\$1,690,746.00	\$0.00	\$2,638,940.00
4. Planning Council Activities	\$0.00	\$0.00	\$0.00
a. Single State Agency (SSA)	\$0.00	\$0.00	\$0.00
b. All other subrecipient contracts	\$0.00	\$0.00	\$0.00
5. Quality Assurance and Improvement	\$102,619.00	\$0.00	\$63,443.00
a. Single State Agency (SSA)	\$0.00	\$0.00	\$0.00
b. All other subrecipient contracts	\$102,619.00	\$0.00	\$63,443.00
6. Research and Evaluation	\$84,210.00	\$0.00	\$56,672.00
a. Single State Agency (SSA)	\$0.00	\$0.00	\$0.00
b. All other subrecipient contracts	\$84,210.00	\$0.00	\$56,672.00
7. Training and Education	\$90,006.00	\$0.00	\$508,868.00
a. Single State Agency (SSA)	\$0.00	\$0.00	\$0.00
b. All other subrecipient contracts	\$90,006.00	\$0.00	\$508,868.00
<b>8. Total<sup>d</sup></b>	<b>\$3,802,002.00</b>	<b>\$0.00</b>	<b>\$3,439,563.00</b>

<sup>a</sup>Other than primary prevention.

<sup>b</sup>This expenditure category includes those other capacity building/systems development activities that support recovery support direct service activities outlined under The 2023 guidance, "Allowable Recovery Support Services (RSS) Expenditures through the SUBG and the MHBG." Only report RSS for those in need of RSS from substance use disorder. States are asked to begin reporting expenditures for RSS, previously reported under Column A, 'SUPTRS BG Prevention and Treatment,' in the stand-alone Column B, 'SUPTRS BG Recovery Support Services.' States are encouraged to begin reporting these expenditures as early as their 2026 SUPTRS BG Report, while required reporting will begin in 2027 and onward. States should use the footnotes to explain any challenges that contribute to their inability to report RSS expenditures separately.

<sup>c</sup>Expenditures for other capacity building/systems development activities related to primary prevention only.

<sup>d</sup>The sum of all three columns should be equal to the amount reported on Table 4, Row 6.

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**Footnotes:**

**C: Expenditure Reports**

**Table 7 - Statewide Entity Inventory**

This table provides a report of the sub-recipients of SUPTRS BG funds including community and faith-based organizations which provided SUD prevention, treatment and recovery support services, as well as intermediaries/administrative service organizations. Table 7 excludes other capacity building/systems development expenditures found on Table 6.

This table provides a report of the sub-recipients of SUPTRS BG funds including community and faith-based organizations which provided SUD prevention activities and treatment services, as well as intermediaries/administrative service organizations. Table 7 excludes system development/non-direct service expenditures.

Expenditure Period Start Date: 10/01/2022 Expenditure Period End Date: 09/30/2024

Source of Funds Substance Use Block Grant																
Entity Number	I-TF (formerly I-BHS)	i	Area Served (Statewide or SubState Planning Area)	Provider / Program Name	Street Address	City	State	Zip	A. All SUPTRS BG Funds	B. Prevention <sup>a</sup> and Treatment Services	C. Pregnant Women and Women with Dependent Children <sup>b</sup>	D. Opioid Treatment Programs (OTPs) <sup>c</sup>	E. Office-based opioid treatment (OBOTs) <sup>d</sup>	F. Recovery Support Services <sup>e</sup>	G. Primary Prevention <sup>f</sup>	H. Early Intervention Services for HIV <sup>g</sup>
510020177100	FL100954	✓	Northwest	211 Big Bend Inc	P.O. Box 10950	Tallahassee	FL	32302	\$4,598.00	\$4,598.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
593087085	FL108581	✓	Northeast	Ability Housing of NE Florida Inc	76 South Laura Street Suite 303	Jacksonville	FL	32202	\$28,361.00	\$23,557.00	\$0.00	\$0.00	\$0.00	\$4,804.00	\$0.00	\$0.00
591479658	FL112525	✓	Central	Advent Health Hope and Healing Center	212 Eslinger Way	Sanford	FL	32773	\$9,498.00	\$9,498.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
59-1622809	FL111592	✓	Southern	Advocate Program	1399 NW 17th Avenue 2nd Floor	Miami	FL	33125	\$34,852.00	\$34,852.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
591860626	FL902581	✓	Suncoast	Agency for Community Treatment Servs	4612 North 56th Street	Tampa	FL	33610 -7123	\$3,809,766.00	\$3,546,076.00	\$0.00	\$0.00	\$0.00	\$55,440.00	\$201,848.00	\$6,402.00
591162148	FL751459	✓	Northwest	Apalachee Center Inc	2634 Capital Circle NE P.O. Box 1782	Tallahassee	FL	32302 -1782	\$51,760.00	\$51,760.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
592341993	FL126009	✓	Southeast	Archways Inc	919 NE 13th Street	Fort Lauderdale	FL	33304	\$218,832.00	\$218,832.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
592301233	FL904041	✓	Central	Aspire Health Partners	1800 Mercy Drive	Orlando	FL	32808	\$3,565,632.00	\$2,638,051.00	\$0.00	\$26,441.00	\$0.00	\$11,183.00	\$903,277.00	\$13,121.00
59017877708	FL101393	✓	Southeast	Banyan Health Systems	3800 West Flagler Street	Miami	FL	33134	\$994,482.00	\$889,364.00	\$519.00	\$0.00	\$0.00	\$105,118.00	\$0.00	\$0.00
270316493463	FL108216	✓	Southern	Banyan Health Systems	6100 Blue Lagoon Suite 400	Miami	FL	33126	\$1,491,901.00	\$1,491,901.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
591371752	FL104968	✓	Suncoast	BayCare Behavioral Health	14527 7th Street	Dade City	FL	33523	\$1,726,077.00	\$1,431,508.00	\$0.00	\$0.00	\$0.00	\$39,249.00	\$250,534.00	\$4,786.00
591371752	FL102192	✓	Northeast	BayCare Behavioral Health	15311 Cortez Boulevard	Brooksville	FL	34613	\$808,378.00	\$654,719.00	\$0.00	\$0.00	\$0.00	\$37,643.00	\$116,016.00	\$0.00
59-1697458	FL111832	✓	Southern	Behavioral Counseling	8374 SW 8th Street	Miami	FL	33144	\$596,321.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$596,321.00	\$0.00
592462933	FL109039	✓	Southern	Better Way of Miami Inc	800 NW 28th Street	Miami	FL	33127	\$451,188.00	\$451,188.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
030042315600	FL103109	✓	Northwest	Big Bend Community Based Care	525 North Martin Luther King Jr Boulevard	Tallahassee	FL	32301	\$12,476.00	\$12,476.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
59-1278085	FL108268	✓	Northwest	Bridgeway Center Inc	205 Shell Avenue Building A	Fort Walton Beach	FL	32548	\$62,324.00	\$62,324.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
596000531	FL104337	✓	Southeast	Broward Addiction Recovery Center	1000 SW 2nd Street	Fort Lauderdale	FL	33312	\$1,658,891.00	\$1,658,891.00	\$260,805.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FL100500	FL100500	✓	Southeast	Broward Behavioral Health Coalition	1715 SE 4th Avenue	Fort Lauderdale	FL	33316	\$1,043,528.00	\$953,203.00	\$0.00	\$221.00	\$0.00	\$90,325.00	\$0.00	\$0.00
59624402	FL100761	✓	Southeast	Broward County Commission on SA	1300 South Andrews Avenue	Fort Lauderdale	FL	33316	\$2,475,191.00	\$208,731.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,266,460.00	\$0.00
596000524	FL100716	✓	Southeast	Broward County Sheriffs Office	1351 NW 27th Avenue	Pompano Beach	FL	33069	\$499,854.00	\$499,854.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FL113542	FL113542	✓	Southeast Region	Broward Health	1600 South Andrew Avenue	Fort Lauderdale	FL	33316	\$22,943.00	\$22,943.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

590291341600	FL112108	✓	Southeast	Broward House Inc	2800 North Andrews Avenue	Wilton Manors	FL	33311	\$147,945.00	\$142,564.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,381.00
590108649	FL100848	✓	Suncoast	C E Mendez Foundation Inc	600 North Willow Avenue Suite 301	Tampa	FL	33606	\$28,928.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$28,928.00	\$0.00
650032862	FL112238	✓	Southern	Camillus House	1603 NW 7th Avenue	Miami	FL	33136	\$149,214.00	\$149,214.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
590256419802	FL103908	✓	Southeast	Care Resource Comm Health Ctrs	3510 Biscayne Boulevard	Miami	FL	33137	\$90,331.00	\$86,648.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,683.00
591279497	FL100152	✓	Southern	Catholic Charities of Miami	7707 NW 2nd Avenue	Miami	FL	33150	\$488,596.00	\$488,596.00	\$325,011.00	\$14,454.00	\$0.00	\$0.00	\$0.00	\$0.00
590143525	FL109021	✓	Northeast	CDS Family/Behavioral Health Servs	3615 SW 13th Street Suite 4	Gainesville	FL	32608	\$987,340.00	\$95,274.00	\$0.00	\$0.00	\$0.00	\$0.00	\$892,066.00	\$0.00
590143525203	FL109021	✓	Northeast	CDS Family/Behavioral Health Servs	3615 SW 13th Street Suite 4	Gainesville	FL	32608	\$44,742.00	\$44,742.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
590100953	FL106985	✓	Suncoast	Centerstone of Florida Inc	P.O. Box 9478	Bradenton	FL	34206	\$1,040,332.00	\$854,170.00	\$0.00	\$0.00	\$0.00	\$10,173.00	\$175,645.00	\$344.00
FL106023	FL106023	✓	Suncoast	Central Florida Behavioral Health	719 U.S. Highway 301 South	Tampa	FL	33619	\$1,530,349.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,530,349.00	\$0.00
FL100609	FL100609	✓	Central	Central Florida Cares Health System	707 Mendham Boulevard Suite 104	Orlando	FL	32825	\$63,245.00	\$16,242.00	\$0.00	\$0.00	\$0.00	\$47,003.00	\$0.00	\$0.00
590123492200	FL751244	✓	Suncoast	Charlotte Behavioral Healthcare Inc	1700 Education Avenue	Punta Gorda	FL	33950	\$727,903.00	\$727,903.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
590291234501	FL106324	✓	Northwest	Chemical Addictions Recovery Effort	910 Harriston Avenue	Panama City	FL	32404	\$238,361.00	\$192,169.00	\$0.00	\$0.00	\$0.00	\$0.00	\$45,952.00	\$240.00
590019243000	FL000621	✓	Northeast	Childrens Home Society	3027 San Diego Road	Jacksonville	FL	32247-0097	\$87,016.00	\$87,016.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
591101553	FL102697	✓	Central	Circles of Care Inc	400 East Sheridan Road	Melbourne	FL	32901	\$1,197,933.00	\$786,027.00	\$0.00	\$0.00	\$0.00	\$21,385.00	\$385,142.00	\$5,379.00
591865751	FL904231	✓	Southern	Citrus Health Network Inc	4175 West 20th Avenue	Hialeah	FL	33012	\$1,586,032.00	\$569,903.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,016,129.00	\$0.00
592219317	FL110564	✓	Northeast	Clay Behavioral Health Center	1726 Kingsley Avenue Suite 2	Orange Park	FL	32073	\$953,680.00	\$603,982.00	\$0.00	\$0.00	\$0.00	\$1,652.00	\$348,046.00	\$0.00
FL113545	FL113545	✓	Suncoast	Community Assisted and Supported Livin	2911 Fruitville Road	Sarasota	FL	34237	\$18,041.00	\$18,041.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
260402611	FL108837	✓	Northeast	Community Coalition Alliance Inc	435 Citrona Drive	Fernandina Beach	FL	32034	\$2,857,946.00	\$28,301.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,829,645.00	\$0.00
591380927	FL110805	✓	Northwest	Community Drug and Alcohol Council	803 North Palafox Street	Pensacola	FL	32501	\$219,888.00	\$4,173.00	\$0.00	\$0.00	\$0.00	\$19,335.00	\$196,270.00	\$110.00
591372690	FL750907	✓	Southern	Community Health of South Florida Inc	10300 SW 216th Street	Miami	FL	33190	\$276,250.00	\$51,742.00	\$0.00	\$0.00	\$0.00	\$0.00	\$224,508.00	\$0.00
230706381000	FL100178	✓	Southern	Concept Health Systems Inc	170 NE 49th Street	Miami	FL	33137	\$1,857,091.00	\$752,358.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,101,229.00	\$3,504.00
650988051	FL000581	✓	Southeast	Counseling and Recovery Center Inc	P.O. Box 1257	Fort Pierce	FL	34954	\$148,294.00	\$147,732.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$562.00
591514993	FL100566	✓	Suncoast	Cove Behavioral Health	4422 East Columbus Drive	Tampa	FL	33605	\$2,354,749.00	\$1,493,240.00	\$0.00	\$724,972.00	\$0.00	\$4,823.00	\$854,714.00	\$1,972.00
592323607	FL102117	✓	Southeast	Covenant House Florida	733 Breakers Avenue	Fort Lauderdale	FL	33304	\$15,450.00	\$15,388.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$62.00
59-1785265	FL100149	✓	Suncoast	Crisis Center of Tampa Bay	One Crisis Center Plaza	Tampa	FL	33613	\$193,652.00	\$193,652.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
592206025	FL112637	✓	Suncoast	David Lawrence Center	6075 Bathey Lane	Naples	FL	34116	\$1,210,160.00	\$859,604.00	\$0.00	\$0.00	\$0.00	\$0.00	\$350,556.00	\$0.00
46093829500	FL111815	✓	Northeast	DBWPC Inc	40 East Adams Street Suite 130	Jacksonville	FL	32202	\$29,628.00	\$29,628.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
592092715	FL124673	✓	Suncoast	Directions for Living	1437 South Belcher Road	Clearwater	FL	33764	\$2,542.00	\$2,542.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

591491338	FL112744	✓	Northwest	DISC Village Inc	3333 West Pensacola Street Building 300	Tallahassee	FL	32304	\$206,059.00	\$105,515.00	\$0.00	\$0.00	\$0.00	\$0.00	\$100,544.00	\$0.00
230707462	FL108844	✓	Southeast	Drug Abuse Foundation of Palm Beach Co	400 South Swinton Avenue	Delray Beach	FL	33444	\$1,494,332.00	\$1,492,458.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,874.00
591363887	FL105814	✓	Southeast	Drug Abuse Treatment Association Inc	1016 North Clemons Street Suite 300	Jupiter	FL	33477	\$3,790,275.00	\$2,382,250.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,404,415.00	\$3,610.00
200345519700	FL105325	✓	Suncoast Region	Drug Free Collier	P.O. Box 770759	Naples	FL	34109	\$88,860.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$88,860.00	\$0.00
47-3817677	FL106170	✓	Suncoast	Drug Free DeSoto Coalition	530 LaSolona Avenue	Arcadia	FL	34266	\$64,884.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$64,884.00	\$0.00
592844663	FL103139	✓	Suncoast	Drug Prevention Resource Center	621 South Florida Avenue	Lakeland	FL	33801	\$499,604.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$499,604.00	\$0.00
592551416	FL123568	✓	Central	Eckerd Youth Alternatives Inc	201 Culbreath Road	Brooksville	FL	34602	\$1,333,177.00	\$312,053.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,021,124.00	\$0.00
590255141	FL123568	✓	Northeast	Eckerd Youth Alternatives Inc	201 Culbreath Road	Brooksville	FL	34602	\$559,577.00	\$413,781.00	\$0.00	\$0.00	\$0.00	\$0.00	\$145,796.00	\$0.00
371445610	FL102630	✓	Southern	Elijah Network Family and Community AI	10658 SW 186th Street	Miami	FL	33157	\$394,741.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$394,741.00	\$0.00
590150258200	FL100806	✓	Northeast	EPIC Community Services Inc	1400 Old Dixie Highway	Saint Augustine	FL	32084	\$2,013,839.00	\$1,786,227.00	\$0.00	\$0.00	\$0.00	\$2,239.00	\$225,373.00	\$0.00
591304472	FL105581	✓	Suncoast	First Step of Sarasota Inc	4613 North Washington Boulevard	Sarasota	FL	34234	\$2,302,794.00	\$1,621,459.00	\$0.00	\$0.00	\$0.00	\$0.00	\$679,346.00	\$1,989.00
FL113549	FL113549	✓	Northeast	Fresh Ministries	616 A Philip Randolph Boulevard	Jacksonville	FL	32202	\$891,682.00	\$261,273.00	\$0.00	\$0.00	\$0.00	\$0.00	\$630,409.00	\$0.00
202630595	FL105315	✓	Southern	Gang Alternative	12000 Biscayne Boulevard	North Miami	FL	33181	\$926,869.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$926,869.00	\$0.00
591881828	FL110457	✓	Northeast	Gateway Community Services Inc	555 Stockton Street	Jacksonville	FL	32204	\$5,266,288.00	\$4,830,996.00	\$0.00	\$70,389.00	\$0.00	\$11,822.00	\$421,833.00	\$1,637.00
591458324	FL108258	✓	Southern	Guidance Care Center Inc	3000 41st Ocean	Marathon	FL	33050	\$1,148,374.00	\$736,575.00	\$0.00	\$0.00	\$0.00	\$0.00	\$411,799.00	\$0.00
59-1205079	FL104475	✓	Southeast	Gulf Coast Jewish Fam/Comm Servs	201 NE 40th Court	Oakland Park	FL	33334	\$20,012.00	\$20,012.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
591229354	FL102747	✓	Suncoast	Gulf Coast Jewish Family Services Inc	14041 Icot Boulevard	Clearwater	FL	33760	\$116,477.00	\$41,643.00	\$0.00	\$0.00	\$0.00	\$0.00	\$74,834.00	\$0.00
202871945	FL108894	✓	Suncoast	Hanley Center Foundation Inc	900 54th Street	West Palm Beach	FL	33407	\$798,208.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$798,208.00	\$0.00
202871945	FL108894	✓	Southeast	Hanley Center Foundation Inc	900 54th Street	West Palm Beach	FL	33407	\$476,041.00	\$1,164.00	\$0.00	\$0.00	\$0.00	\$0.00	\$474,877.00	\$0.00
200287194	FL108894	✓	Northeast	Hanley Center Foundation Inc	900 54th Street	West Palm Beach	FL	33407	\$1,062,489.00	\$327,150.00	\$0.00	\$0.00	\$0.00	\$0.00	\$735,339.00	\$0.00
FL65110273600	FL113884	✓	Southern	Healthy Start Coalition of Miami Dade	7205 NW 19th Street Suite 500	Miami	FL	33126	\$205,670.00	\$205,670.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
59-0711167	FL103327	✓	Southeast	Henderson Behavioral Health	4700 North State Road 7 Building A	Fort Lauderdale	FL	33319	\$312,502.00	\$312,502.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
591298067	FL100236	✓	Southeast	Heres Help Inc	15100 NW 27th Avenue	Opa Locka	FL	33054	\$69,906.00	\$69,906.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
590129806	FL902763	✓	Southern	Heres Help Inc	9016 SW 152nd Street	Miami	FL	33157	\$635,356.00	\$635,356.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
475135700	FL112742	✓	Southern	Hialeah Community Coalition	4708 East 9th Lane	Hialeah	FL	33013	\$136,270.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$136,270.00	\$0.00
710950579	FL751483	✓	Suncoast	Hillsborough County Crisis Center Inc	2214 East Henry Avenue	Tampa	FL	33610-4497	\$173,533.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$173,533.00	\$0.00
591675284	FL108806	✓	Northeast	House Next Door	804 North Woodland Boulevard	Deland	FL	32720	\$228,848.00	\$164,432.00	\$0.00	\$0.00	\$0.00	\$0.00	\$64,416.00	\$0.00
593084953	FL123584	✓	Central	House of Freedom Inc	P.O. Box 42-3202	Kissimmee	FL	34744	\$18,150.00	\$18,150.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
237014595	FL902946	✓	Southeast	House of Hope	908 SW 1st Street	Fort Lauderdale	FL	33312	\$313,459.00	\$313,459.00	\$34,617.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

592704597	FL102707	✓	Southeast	Housing Partnership Inc	2001 Blue Heron Boulevard	Riviera Beach	FL	33404	\$91,193.00	\$91,193.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FL59322989800	FL113885	✓	Northeast	IM Sulzbacher Center for Homeless	611 East Adams Street	Jacksonville	FL	32202	\$125,330.00	\$125,330.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
65-0439778	FL110573	✓	Central	IMPOWER	2290 North Ronald Reagan Boulevard Suite 116	Longwood	FL	32750	\$660,421.00	\$209,723.00	\$0.00	\$0.00	\$0.00	\$0.00	\$450,698.00	\$0.00
592231894	FL105462	✓	Central	Informed Families	2490 Coral Way	Miami	FL	33145	\$173,085.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$173,085.00	\$0.00
592231894	FL105462	✓	Southern	Informed Families	2490 Coral Way	Miami	FL	33145	\$161,321.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$161,321.00	\$0.00
83-1762729	FL113037	✓	Northeast	Inspire to Rise Inc	5927 Old Timuquana Road	Jacksonville	FL	32210	\$167,635.00	\$163,137.00	\$0.00	\$0.00	\$0.00	\$4,498.00	\$0.00	\$0.00
591713947	FL110446	✓	Southern	Jackson Memorial Hospital	15055 NW 27th Avenue	Opa Locka	FL	33054	\$147,191.00	\$147,191.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
591235617	FL115275	✓	Southern	Jessie Trice Community Health Ctr	2985 NW 54th Street	Miami	FL	33142	\$227,419.00	\$225,390.00	\$225,390.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,029.00
590063786701	FL106928	✓	Southern	Jewish Community Services of	12000 Biscayne Boulevard Suite 303	Miami	FL	33181	\$88,588.00	\$88,588.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FL103732	FL103732	✓	Northwest Region	Lakeview Center	1800 North Palafox Street	Pensacola	FL	32501	\$235,473.00	\$220,575.00	\$0.00	\$0.00	\$0.00	\$0.00	\$14,898.00	\$0.00
FL103580	FL103580	✓	Suncoast	Lee County Coalition Drug Free SW FL	P.O. Box 61688	Fort Myers	FL	33901	\$96,629.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$96,629.00	\$0.00
590156150	FL113940	✓	Central	Lifestream Behavioral Center	300 Huey Street	Wildwood	FL	34785	\$60,635.00	\$60,635.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
591561501	FL110456	✓	Northeast	LifeStream Behavioral Center Inc	P.O. Box 491000	Leesburg	FL	34749	\$2,792,811.00	\$2,792,811.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
590219891100	FL107103	✓	Northeast	Lutheran Services Florida	9428 Baymeadows Road Building 3, Suite 320	Jacksonville	FL	32256	\$7,815,276.00	\$7,501,883.00	\$0.00	\$0.00	\$0.00	\$0.00	\$313,391.00	\$2.00
590816448	FL112741	✓	Southeast	Mental Health America of Southeast FL	7145 West Oakland Park Boulevard	Lauderhill	FL	33313	\$58,502.00	\$47,184.00	\$0.00	\$0.00	\$0.00	\$11,318.00	\$0.00	\$0.00
591906214	FL114070	✓	Northeast	Meridian Behavioral Healthcare Inc	4300 SW 13th Street	Gainesville	FL	32608-4006	\$2,843,338.00	\$2,839,107.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,751.00	\$1,480.00
590600050100	FL300612	✓	Northeast	Metamorphosis	4201 SW 21st Place	Gainesville	FL	32607	\$327,474.00	\$327,163.00	\$0.00	\$0.00	\$0.00	\$311.00	\$0.00	\$0.00
596000573	FL107793	✓	Southern	Miami Dade CAHSD	3140 NW 76th Street	Miami	FL	33147	\$761,521.00	\$761,521.00	\$10,508.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
596000573	FL112743	✓	Southern	Miami Dade County	701 NW 1st Court 10th Floor	Miami	FL	33136	\$106,013.00	\$106,013.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
263021098	FL114138	✓	Southern	Monroe County	5855 College Road	Key West	FL	33040	\$372,238.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$372,238.00	\$0.00
FL93122349500	FL113886	✓	Southeast	NAMI Broward County	4161 NW 5th Street Suite 203	Plantation	FL	33317	\$42,585.00	\$42,585.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
650440678	FL114245	✓	Southern	New Hope CORPS	1020 North Krome Avenue	Homestead	FL	33030	\$519,591.00	\$496,142.00	\$0.00	\$337.00	\$0.00	\$0.00	\$0.00	\$23,449.00
592055751	FL104709	✓	Southern	New Horizons Community MH Ctr	1469 NW 36th Street	Miami	FL	33142	\$165,407.00	\$165,407.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
596153749	FL114351	✓	Southeast	New Horizons of the Treasure Coast Inc	4500 West Midway Road	Fort Pierce	FL	34981	\$1,043,209.00	\$943,211.00	\$0.00	\$0.00	\$0.00	\$0.00	\$98,611.00	\$1,387.00
591349234	FL110223	✓	Suncoast	Operation Par Inc	6720 54th Avenue North	Saint Petersburg	FL	33709	\$2,887,108.00	\$2,653,190.00	\$0.00	\$186,105.00	\$0.00	\$0.00	\$224,820.00	\$9,098.00
591349234	FL102900	✓	Northeast	Operation PAR Inc	6150 150th Avenue North Suite Maps	Clearwater	FL	33760	\$1,449.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,449.00

FL591677912	FL112533	✓	Northeast	Osceola Mental Health Inc	206 Park Place Boulevard	Kissimmee	FL	34741	\$539,998.00	\$536,402.00	\$0.00	\$0.00	\$0.00	\$3,553.00	\$0.00	\$43.00
592897172	FL112650	✓	Northeast	Outreach Community Care Network	240 North Frederick Avenue	Daytona Beach	FL	32114	\$72,702.00	\$67,338.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,364.00
FL45230109700	FL113887	✓	Southeast	Parent Academy	546 NW University Boulevard Suite 203	Port Saint Lucie	FL	34986	\$7,463.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$7,463.00	\$0.00
591677912	FL102631	✓	Central	Park Place Behavioral Healthcare	206 Park Place Boulevard	Kissimmee	FL	34741	\$457,885.00	\$371,796.00	\$0.00	\$0.00	\$0.00	\$83,343.00	\$0.00	\$2,746.00
590818924	FL102528	✓	Suncoast	Peace River Center	P.O. Box 1559	Bartow	FL	33831	\$67,030.00	\$67,030.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
593153549	FL110448	✓	Suncoast	Personal Enrichment Through MH Servs	11254 58th Street North	Pinellas Park	FL	33782	\$34,563.00	\$34,563.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
593172948	FL111239	✓	Suncoast	Phoenix Houses of Florida	510 Vonderburg Drive Suite 301	Brandon	FL	33511	\$277,822.00	\$277,822.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
593172948	FL111239	✓	Northeast	Phoenix Houses of Florida	510 Vonderburg Drive Suite 301	Brandon	FL	33511	\$1,600,248.00	\$1,600,248.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
59600809	FL101181	✓	Suncoast	Polk County Drug Court Treatment Prog	P.O. Box 9000 Drawer J-138	Bartow	FL	33831	\$50,575.00	\$50,575.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
815190566	FL108840	✓	Southeast	Rebel Recovery Lake Worth	1893 Prairie Road	West Palm Beach	FL	33406	\$250,581.00	\$107,920.00	\$0.00	\$0.00	\$0.00	\$140,347.00	\$0.00	\$2,314.00
FL109035	FL109035	✓	Southeast	Recovery Research Network Foundation	110 John F Kennedy Drive Suite 118	Atlantis	FL	33462	\$8,169.00	\$7,689.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$480.00
FL113550	FL113550	✓	Southeast	RiteLife Services	6646 South Federal Highway	Port Saint Lucie	FL	34952	\$103,531.00	\$37,420.00	\$0.00	\$0.00	\$0.00	\$66,111.00	\$0.00	\$0.00
591952727	FL102142	✓	Northeast	River Region Human Services Inc	2055 Reyko Road Building 4700 Suite 101	Jacksonville	FL	32207	\$236,190.00	\$236,169.00	\$0.00	\$36,250.00	\$0.00	\$0.00	\$0.00	\$21.00
591287693	FL102538	✓	Suncoast	SalusCare	3763 Evans Avenue	Fort Myers	FL	33901	\$1,701,385.00	\$1,694,996.00	\$0.00	\$0.00	\$0.00	\$6,389.00	\$0.00	\$0.00
591519622	FL903258	✓	Southeast	South County Mental Health Center	16158 South Military Trail	Delray Beach	FL	33484	\$11,500.00	\$11,500.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
592471230	FL000311	✓	Southern	South Florida Jail Ministries	22790 SW 112th Avenue	Miami	FL	33170	\$982,460.00	\$982,460.00	\$106,628.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
596014973	FL111179	✓	Southeast	South Florida Wellness Center	4100 South Hospital Drive Suite 102	Plantation	FL	33317	\$388,206.00	\$387,084.00	\$0.00	\$0.00	\$0.00	\$1,122.00	\$0.00	\$0.00
851103815	FL106251	✓	Southern	South Miami Recovery Inc	7520 SW 57th Avenue Suite K	South Miami	FL	33143-5330	\$102,253.00	\$102,253.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FL27187186900	FL113892	✓	Southeast	Southeast Florida Behav Health Network	8895 North Military Trail Suite E-102	Palm Beach Gardens	FL	33410	\$502,772.00	\$328,794.00	\$0.00	\$0.00	\$0.00	\$0.00	\$173,978.00	\$0.00
230706196	FL750196	✓	Central	Space Coast Recovery Inc	1215 Lake Drive	Cocoa	FL	32922	\$65,386.00	\$65,386.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
593029469	FL101869	✓	Northeast	Starting Point Behavioral Healthcare	463142 State Road 200	Yulee	FL	32097	\$549,218.00	\$264,250.00	\$0.00	\$0.00	\$0.00	\$16,291.00	\$268,670.00	\$7.00
FL102656	FL102656	✓	Central	STEPS	1033 North Pine Hills Road Suite 300	Orlando	FL	32808	\$237,413.00	\$232,587.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,826.00
650202835	FL101169	✓	Southeast	Substance Abuse Council of IRC	2501 27th Avenue Suite A-7	Vero Beach	FL	32960	\$472,214.00	\$200,559.00	\$0.00	\$0.00	\$0.00	\$20,970.00	\$249,580.00	\$1,105.00
650695313	FL118832	✓	Southeast	Sunset House Inc	8800 Sunset Drive	Palm Beach Gardens	FL	33410	\$85,632.00	\$85,541.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$91.00
371445612	FL111807	✓	Southeast	Sunshine Social Services Inc	2312 Wilton Drive Suite 3	Wilton Manors	FL	33305	\$48,828.00	\$43,829.00	\$0.00	\$0.00	\$0.00	\$1,188.00	\$0.00	\$3,811.00
593208913	FL110095	✓	Central	Transition House Inc	3501 West Vine Street Suite 319	Kissimmee	FL	34741	\$222,571.00	\$222,571.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

	FL113547	FL113547	✓	Southeast	Transpire Help	909 North Dixie Highway	West Palm Beach	FL	33401	\$100,240.00	\$100,213.00	\$0.00	\$5,283.00	\$0.00	\$27.00	\$0.00	\$0.00
	591708182	FL124426	✓	Suncoast	Tri County Human Services Inc	4683 East County Road 540 A	Lakeland	FL	33813	\$2,778,553.00	\$2,295,828.00	\$0.00	\$0.00	\$0.00	\$160.00	\$478,392.00	\$4,173.00
	590214747200	FL903100	✓	Northwest	Turn About Inc of Tallahassee	1113 East Paul Russell Road	Tallahassee	FL	32301	\$5,795.00	\$5,795.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	1203372	FL104327	✓	Southeast	Tykes and Teens Inc	900 SE Ocean Boulevard Suite E-340	Stuart	FL	34994	\$140,205.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$140,205.00	\$0.00
	590145273600	FL300307	✓	Southeast	Village South Inc	P.O. Box 94738	Las Vegas	NV	89193	\$750,607.00	\$745,198.00	\$743,933.00	\$0.00	\$0.00	\$5,409.00	\$0.00	\$0.00
	FL103664	FL103664	✓	Southern	Village South Inc	5200 Blue Lagoon Drive Suite 445	Miami	FL	33126	\$2,650,286.00	\$1,995,857.00	\$4,496.00	\$0.00	\$0.00	\$0.00	\$654,429.00	\$0.00
	591590644	FL752291	✓	Southeast	Wayside House Inc	378 NE 6th Avenue	Delray Beach	FL	33483	\$856,011.00	\$837,654.00	\$0.00	\$2,673.00	\$0.00	\$18,150.00	\$0.00	\$207.00
	593714627	FL106403	✓	Suncoast	Westcare Gulfcoast Florida Inc	2525 South First Avenue	Saint Petersburg	FL	33712	\$338,700.00	\$99,800.00	\$0.00	\$0.00	\$0.00	\$139,741.00	\$96,524.00	\$2,635.00
	591545990	FL124608	✓	Suncoast	Youth and Family Alternatives Inc	5126 School Road	Land O Lakes	FL	34639	\$498,239.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$498,239.00	\$0.00
Total										\$102,827,440.00	\$73,462,314.00	\$1,711,907.00	\$1,067,125.00	\$0.00	\$981,122.00	\$28,262,631.00	\$121,373.00

\* Indicates the imported record has an error.

<sup>a</sup>Other than primary prevention. The amount reported in this row should reflect those expenditures made for direct services during the expenditure period, and otherwise reported on Table 4, Row 1. Do not include expenditures made for other capacity building/systems development.

<sup>b</sup>Expenditures reported in the column are subcategory of expenditures reported for 'Prevention and Treatment Services' reported in Column B and meet the requirements of specialized services for pregnant women and women with dependent children.

<sup>c</sup>Includes 42 CFR 8.12: Federal Opioid Treatment Program (OTP) providers only. Expenditures reported in this column are a subcategory of total expenditures for 'Prevention and Treatment Services' reported in Column B.

<sup>d</sup>Includes all practitioners who have a current DEA registration that includes Schedule III authority and may prescribe buprenorphine for opioid use disorder in their practice if permitted under applicable state law. Expenditures reported in this column are a subcategory of total expenditures for 'Prevention and Treatment Services' reported in Column B.

<sup>e</sup>This expenditure category is mandated by Section 1243 of the Consolidated Appropriations Act, 2023 and includes an aggregate of expenditures allowable under The 2023 guidance, "Allowable Recovery Support Services (RSS) Expenditures through the SUBG and the MHBG." Only report RSS for those in need of RSS from substance use disorder. States are asked to begin reporting entity level expenditures for RSS, previously reported under Column B, 'Prevention and Treatment Services', in the stand-alone Column F. States are encouraged to begin reporting these expenditures as early as their 2026 SUPTRS BG Report, while required reporting will begin in 2027 and onward. States should use the footnotes to explain any challenges that that contribute to their inability to report RSS expenditures separately. The total of this column should be equal to that report on Table 4, Row 2 and should not include expenditures made for other capacity building/systems development.

<sup>f</sup>The amounts reported here should reflect direct delivery of primary prevention to the population and be consistent with the expenditures found on Table 4, Row 3, as well as Table 5a. Do not include expenditures for other capacity building/systems development.

<sup>g</sup>The most recent AtlasPlus HIV data report published on or before October 1 of the federal fiscal year for which a state is applying for a grant is used to determine the states and jurisdictions that will be required to set-aside 5% of their respective SUPTRS BG award to establish one or more projects to provide early intervention services for the human immunodeficiency virus (EIS/HIV) at the sites at which individuals are receiving SUD treatment.

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**Footnotes:**

## C: Expenditure Reports

**Table 8a - Maintenance of Effort (MOE) for State Expenditures for Substance Use Disorder Prevention, Treatment, and Recovery Support Services**

This Maintenance of Effort table provides a description of non-federal state expenditures for authorized activities to prevent and treat substance use and provide recovery services flowing through the Single State Agency (SSA) during the state fiscal year immediately preceding the federal fiscal year for which the state is applying for funds.

Expenditure Period Start Date: 07/01/2024 Expenditure Period End Date: 06/30/2025

Total Single State Agency (SSA) Expenditures for Substance Abuse Prevention and Treatment		
Period	SSA State Expenditures (A)	<u>A1(2023) + A2(2024)</u> 2 (C)
SFY 2023	\$110,339,193.00	
SFY 2024	\$109,773,982.00	\$110,056,588
SFY 2025	\$112,202,213.00	

Are the expenditure amounts reported in Column B "actual" expenditures for the State fiscal years involved?

SFY 2023	Yes	<input checked="" type="checkbox"/>	No
SFY 2024	Yes	<input checked="" type="checkbox"/>	No
SFY 2025	Yes	<input checked="" type="checkbox"/>	No

Did the state or jurisdiction have any non-recurring expenditures as described in 42 U.S.C. § 300x-30(b) for a specific purpose which were not included in the MOE calculation?

Yes No

If yes, specify the amount and the State fiscal year:

If yes, SFY:

Did the state or jurisdiction include these funds in previous year MOE calculations?

Yes No

When did the State or Jurisdiction submit an official request to SAMHSA to exclude these funds from the MOE calculations?

If estimated expenditures are provided, please indicate when actual expenditure data will be submitted to SAMHSA:

Please provide a description of the amounts and methods used to calculate the total Single State Agency (SSA) expenditures for substance use disorder prevention and treatment 42 U.S.C. §300x-30.

2024/25 SAPT MOE Summary

Funding Source - State General Revenue

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### Footnotes:

Table 2, Column E, Row 1b contains an unintentional error, as it includes an amount of \$9,110,486 that should not have been reported. Column E, Row 12 reflects the correct Administration total of \$8,266,502. Additionally, the difference of \$24,684,760 between Table 2 and Table 8a represents expenditures related to activities that are not subject to MOE requirements. See textbox for additional details. KRG



## C: Expenditure Reports

**Table 8b – Base on Maintenance of Effort (MOE) for Expenditures for Services to Pregnant Women and Women with Dependent Children**

This table provides a report of all state and SUPTRS BG funds expended on specialized SUD treatment and related services which meet the SUPTRS BG requirements for pregnant women and women with dependent children during the state fiscal year immediately preceding the FFY for which the state is applying for funds. Dates given are for the FY 2026 SUPTRS BG Report. For the FY 2027 SUPTRS BG Report, increase each year (other than the base year) by one.

Expenditure Period Start Date:

07/01/2024

Expenditure Period End Date:

06/30/2025

### Base

Period	Total Women's Base (A)
SFY 1994	\$ 9,327,217.00

### Maintenance

Period	A. Total Women's Base	B. Total Expenditures	Expense Type
SFY 2023		\$ 10,801,387.00	Actual
SFY 2024		\$ 11,934,555.00	Actual
SFY 2025		\$ 11,527,614.00	<input checked="" type="radio"/> Actual <input type="radio"/> Estimated

Enter the amount the State plans to expend in SFY 2026 for services for pregnant women and women with dependent children (amount entered must be not less than amount entered in Section III: Table 8b – Expenditures for Services to Pregnant Women and Women with Dependent Children, Base, Total Women's Base (A) for Period of (SFY 1994)): \$ 10,000,000.00;

Are the expenditure amounts reported in Column B "actual" expenditures for the fiscal years involved?

If any estimated expenditures are provided, please indicate when actual expenditure data will be submitted:

Please provide a description of the amounts and methods used to calculate the base and, for 1994 and subsequent fiscal years, report the Federal and State expenditures for such services for services to pregnant women and women with dependent children as required by 42 U.S.C. &sect;300x-22(b)(1).

Table 8b MOE & PWWDC Methodology Narrative

Explanation; Both the total amount of state funding and the total amount federal amounts are tracked and calculated through specific OCA's (Other Cost Accumulators) for PWWDC services. Each year the state budgets \$10,000,000 in state general revenue towards services for pregnant and parenting women and their dependents. All expenditures for this special population above and beyond the budgeted state funds are paid through federal block grant funding. The federal expenditures are based on real-time service needs. The base amount of \$9,327,217 is the total expenditures toward PWWDC from 1994. This amount was established by SAMHSA and is prepopulated in BGAS. KRG 12/16/2025

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**Footnotes:**

<b>Pregnant and Parenting Women Expenditures</b>		
State Fiscal Year 2024/25		
<b>SFY Quarter</b>	<b>Reporting Period</b>	<b>MS027 (Federal)</b>
1st	July 1 - Sept 30	<b>\$323,305</b>
2nd	Oct 1 - Dec 31	<b>\$453,990</b>
3rd	Jan 1 - March 31	<b>\$431,858</b>
4th	April 01 - June 30	<b>\$502,754</b>
YTD Total Federal		\$1,711,907
State General Revenue for Pregnant and Parenting Women under OCA MS081 YTD Total		\$9,815,707
<b>Total State and Federal for PWWDC:</b>		<b>\$11,527,614</b>

## D: Population and Services Reports

**Table 9 - Prevention Strategy Report**

This table requires additional information about the primary prevention activities conducted by the entities listed on SUPTRS BG Table 7.

Expenditure Period Start Date: 10/1/2022      Expenditure Period End Date: 9/30/2024

Risks	A. Strategies	B. Providers
<b>Substance use</b>	<b>1. Information Dissemination</b>	
	1. Clearinghouse/information resources centers	5
	2. Resources directories	8
	3. Media campaigns	21
	4. Brochures	25
	5. Radio and TV public service announcements	16
	6. Speaking engagements	47
	7. Health fairs and other health promotion, e.g., conferences, meetings, seminars	53
	8. Information lines/Hot lines	6
	9. Trainings, Meetings and Marketing	51
	<b>2. Education</b>	
	1. Parenting and family management	35
	2. Ongoing classroom and/or small group sessions	57
	3. Peer leader/helper programs	7
	4. Education programs for youth groups	53
	5. Mentors	11
	6. Preschool ATOD prevention programs	2
	7. Lessons, Webinars, and Problem ID and Referrals	29
	<b>3. Alternatives</b>	
	1. Drug free dances and parties	20
	2. Youth/adult leadership activities	16
	3. Community drop-in centers	1
	4. Community service activities	11
	5. Outward Bound	20
	6. Recreation activities	10
	7. Meetings with clients, Preparation for groups	10
	<b>4. Problem Identification and Referral</b>	

1. Employee Assistance Programs	1
2. Student Assistance Programs	16
3. Driving while under the influence/driving while intoxicated education programs	4
4. Referrals to programs, Collaborations with community entities	16
<b>5. Community-Based Process</b>	
1. Community and volunteer training, e.g., neighborhood action training, impactor-training, staff/officials training	75
2. Systematic planning	48
3. Multi-agency coordination and collaboration/coalition	61
4. Community team-building	40
5. Accessing services and funding	19
6. Virtual meetings, Trainings, Preparation, Collaboration with community entities	33
<b>6. Environmental</b>	
1. Promoting the establishment or review of alcohol, tobacco, and drug use policies in schools	5
2. Guidance and technical assistance on monitoring enforcement governing availability and distribution of alcohol, tobacco, and other drugs	5
3. Modifying alcohol and tobacco advertising practices	2
5. Travel, Preparation, Distribution of materials	24
<b>7. Other</b>	
1. Environmental Strategies-RX, Alcohol, Illegal Drugs, Tobacco	35

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**Footnotes:**

## D: Population and Services Reports

**Table 10a - Treatment Utilization Matrix for Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Substance Use Disorder in the Preceding 12-months by Level of Care**

Table 10a is based on the required SSA reporting of data on SUD client treatment admissions and subsequent admissions to an episode of care that occur during the most recently completed SFY. Grantees must report data for SUD client treatment admissions and subsequent admissions to an episode of care during the period that were funded, in full or in part, with SUPTRS BG funding. Grantees are encouraged to use TEDS data when completing this table. If the SSA is unable to report SUD client treatment admissions that are limited to SUPTRS BG, COVID-19, or ARP funds, please briefly explain in Footnote below.

Expenditure Period Start Date: 7/1/2024 Expenditure Period End Date: 6/30/2025

Level of Care	SUPTRS BG Number of Admissions > Number of Persons Served		COVID-19 <sup>a</sup> Number of Admissions > Number of Persons Served		ARP <sup>b</sup> Number of Admissions > Number of Persons Served		SUPTRS BG Service Costs			COVID-19 Costs <sup>a</sup>			ARP Costs <sup>b</sup>		
	Number of Admissions (A)	Number of Persons Served (B)	Number of Admissions (C)	Number of Persons Served (D)	Number of Admissions (E)	Number of Persons Served (F)	Mean (G)	Median (H)	Standard Deviation (I)	Mean Cost (J)	Median Cost (K)	Standard Deviation (L)	Mean Cost (M)	Median Cost (N)	Standard Deviation (O)
<b>Withdrawal Management (24-HOUR CARE)<sup>c</sup></b>															
1. Hospital Inpatient															
2. Free-Standing Residential	11,691	10,078			23	23									
<b>REHABILITATION/RESIDENTIAL<sup>c</sup></b>															
3. Hospital Inpatient															
4. Short-term (up to 30 days)	1,317	1,289			2	2									
5. Long-term (over 30 days)	8,705	8,081			108	108									
<b>AMBULATORY (OUTPATIENT)<sup>c</sup></b>															
6. Outpatient	28,495	27,379			183	183									
7. Intensive Outpatient	34	34													
8. Withdrawal Management	176	175													
<b>Medication for Opioid Use Disorder (MOUD) Treatment<sup>c</sup></b>															
9. Withdrawal Management with Opioid Agonist Medications	7,226	6,921			1	1									
10. Continuous MOUD and Other Services in Outpatient Settings	1,831	1,816													

<sup>a</sup>Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG COVID-19 admissions, persons served, and expenditures for the same one-year period. Note: COVID supplemental funds had an original award period of March 15, 2021 through March 14, 2023. States that were granted a second No Cost Extension (NCE) on March 14, 2024 had until March 14, 2025 to expend their COVID-19 supplemental funds. Those states expending supplemental funds under the second NCE are required to report on admissions, persons served, and expenditures made during SFY 2025, for most states that include expenditures between July 1, 2024 and March 14, 2025, in the COVID-19 designated column of the FY2026 Report.

<sup>b</sup>Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG ARP admissions, persons served, and expenditures for the same one-year period. Note: ARP supplemental funds had an award period of September 1, 2021 through March 24, 2025. States are required to report ARP admissions, persons served, and expenditures made during SFY 2025, for most states this is July 1, 2024 through March 24, 2025, in the ARP designated column in the FY2026 Report

<sup>c</sup>In FY2020 modifications were made to "Level of Care" (LOC) and "Type of Treatment Service/Setting" to "Medication-Assisted Treatment" and "Medication for Opioid Use Disorder" respectively. In prior SUPTRS BG Reports, the LOC was entitled "Opioid Replacement Therapy" and the Type of Treatment Service/Setting included "Opioid Replacement Therapy," Row 9 and "ORT Outpatient," Row 10. The changes inadvertently created a barrier for data analysis as one-to-one mapping of the data submitted in the FY 2020 Table 10 to the data submitted in prior Reports is not possible. In the current and future SUPTRS BG Reports, the LOC is "MOUD & Medication Assisted Treatment" and the Types of Treatment Service/Setting will include "MOUD Withdrawal Management," Row 9 and "MOUD Treatment Outpatient," Row 10. MOUD Withdrawal Management includes hospital withdrawal management, residential withdrawal management, or ambulatory withdrawal management services/settings AND Medications for Opioid Use Disorder Treatment. MOUD Treatment Outpatient includes outpatient services/settings AND MOUD Treatment. The change was made to better align with language that reflects that medications for opioid use disorder is a category of medications that are often provided in conjunction with other services in outpatient settings and more importantly convey those medications do not substitute one drug for another

**Please explain why Column A (SUPTRS BG and COVID-19 Number of Admissions) are less than Column B (SUPTRS BG and COVID-19 Number of Persons Served)**

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**Footnotes:**  
All data reported were retrieved from FASAMS, the Department's official database for behavioral health records. The data provided includes services to individuals under blended state and federal funds. The Department is currently in the process of developing a new database for behavioral health records that will be capable of separating out blended funding for the associated data. Please note that the Department's financial systems are designed with coding that ties funding to eligible programs and services but not specific individuals.

**D: Population and Services Reports**

**Table 10b - Number of Persons Served (Unduplicated Count) Who Received Recovery Support Services for Substance Use Disorder by Age and Sex**

This table provides an aggregate profile of the unduplicated persons that received recovery support services funded through the SUPTRS BG by age and sex. Grantees are requested to include data on Table 10b for individuals with SUD who received recovery support services that were funded, in full or in part, with SUPTRS BG funding. If data reported also includes data on SUD persons served in recovery support services that are funded with other sources of funding, please briefly explain in footnote below.

Expenditure Period Start Date: 07/01/2024 Expenditure Period End Date: 06/30/2025

	Age 0-5 <sup>a</sup>			Age 6-12		
	Female	Male	Not Available <sup>b</sup>	Female	Male	Not Available <sup>b</sup>
1. Peer-to-Peer Support Individual	0	0	0	0	1	0
2. Peer-Led Support Group	0	0	0	0	0	0
3. Peer-Led Training or Peer Certification Activity	0	0	0	0	0	0
4. Recovery Housing	0	0	0	0	0	0
5. Recovery Support Service Childcare Fee or Family Caregiver Fee	0	0	0	0	0	0
6. Recovery Support Service Transportation	0	0	0	0	0	0
7. Secondary School, High School, or Collegiate Recovery Program Service or Activity	0	0	0	0	0	0
8. Recovery Social Support or Social Inclusion Activity	0	0	0	0	0	0
9. Other Approved Recovery Support Event or Activity <sup>c</sup>	0	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>

<sup>a</sup>Age category 0-5 years is not applicable.

	Age 13-17			Age 18-20		
	Female	Male	Not Available <sup>b</sup>	Female	Male	Not Available <sup>b</sup>
1. Peer-to-Peer Support Individual	9	9	0	44	45	0
2. Peer-Led Support Group	2	8	0	5	7	0
3. Peer-Led Training or Peer Certification Activity	0	0	0	0	0	0
4. Recovery Housing	0	0	0	0	0	0
5. Recovery Support Service Childcare Fee or Family Caregiver Fee	0	0	0	0	0	0
6. Recovery Support Service Transportation	0	0	0	0	0	0
7. Secondary School, High School, or Collegiate Recovery Program Service or Activity	0	0	0	0	0	0
8. Recovery Social Support or Social Inclusion Activity	0	0	0	0	0	0
9. Other Approved Recovery Support Event or Activity <sup>c</sup>	5	14	0	13	21	0
<b>Total</b>	<b>16</b>	<b>31</b>	<b>0</b>	<b>62</b>	<b>73</b>	<b>0</b>

	Age 21-24			Age 25-44		
	Female	Male	Not Available <sup>b</sup>	Female	Male	Not Available <sup>b</sup>
1. Peer-to-Peer Support Individual	152	129	0	2015	1933	0
2. Peer-Led Support Group	23	26	0	457	495	0
3. Peer-Led Training or Peer Certification Activity	0	0	0	0	0	0
4. Recovery Housing	0	0	0	0	0	0

5. Recovery Support Service Childcare Fee or Family Caregiver Fee	0	0	0	0	0	0
6. Recovery Support Service Transportation	0	0	0	0	0	0
7. Secondary School, High School, or Collegiate Recovery Program Service or Activity	0	0	0	0	0	0
8. Recovery Social Support or Social Inclusion Activity	0	0	0	0	0	0
9. Other Approved Recovery Support Event or Activity <sup>c</sup>	64	47	0	1299	1286	0
<b>Total</b>	<b>239</b>	<b>202</b>	<b>0</b>	<b>3,771</b>	<b>3,714</b>	<b>0</b>

	Age 45-64			Age 65-74		
	Female	Male	Not Available <sup>b</sup>	Female	Male	Not Available <sup>b</sup>
1. Peer-to-Peer Support Individual	755	1283	0	59	129	0
2. Peer-Led Support Group	133	243	0	14	19	0
3. Peer-Led Training or Peer Certification Activity	0	0	0	0	0	0
4. Recovery Housing	0	0	0	0	0	0
5. Recovery Support Service Childcare Fee or Family Caregiver Fee	0	0	0	0	0	0
6. Recovery Support Service Transportation	0	0	0	0	0	0
7. Secondary School, High School, or Collegiate Recovery Program Service or Activity	0	0	0	0	0	0
8. Recovery Social Support or Social Inclusion Activity	0	0	0	0	0	0
9. Other Approved Recovery Support Event or Activity <sup>c</sup>	515	897	0	39	103	0
<b>Total</b>	<b>1,403</b>	<b>2,423</b>	<b>0</b>	<b>112</b>	<b>251</b>	<b>0</b>

	Age 75+			Age Not Available		
	Female	Male	Not Available <sup>b</sup>	Female	Male	Not Available <sup>b</sup>
1. Peer-to-Peer Support Individual	6	10	0	0	0	0
2. Peer-Led Support Group	1	1	0	0	0	0
3. Peer-Led Training or Peer Certification Activity	0	0	0	0	0	0
4. Recovery Housing	0	0	0	0	0	0
5. Recovery Support Service Childcare Fee or Family Caregiver Fee	0	0	0	0	0	0
6. Recovery Support Service Transportation	0	0	0	0	0	0
7. Secondary School, High School, or Collegiate Recovery Program Service or Activity	0	0	0	0	0	0
8. Recovery Social Support or Social Inclusion Activity	0	0	0	0	0	0
9. Other Approved Recovery Support Event or Activity <sup>c</sup>	1	4	0	0	0	0
<b>Total</b>	<b>8</b>	<b>15</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

	Total		
	Female	Male	Not Available <sup>b</sup>
1. Peer-to-Peer Support Individual	3,040	3,539	0
2. Peer-Led Support Group	635	799	0
3. Peer-Led Training or Peer Certification Activity	0	0	0

4. Recovery Housing	0	0	0
5. Recovery Support Service Childcare Fee or Family Caregiver Fee	0	0	0
6. Recovery Support Service Transportation	0	0	0
7. Secondary School, High School, or Collegiate Recovery Program Service or Activity	0	0	0
8. Recovery Social Support or Social Inclusion Activity	0	0	0
9. Other Approved Recovery Support Event or Activity <sup>c</sup>	1,936	2,372	0
<b>Total</b>	<b>5,611</b>	<b>6,710</b>	<b>0</b>
Comments on Data (Age):			
Comments on Data (Sex):			
Comments on Data (Overall):			

<sup>a</sup>Age category 0-5 years is not applicable. (Continued below).

<sup>b</sup>The 'Not Available' category is to be used only for cases where the requested field in state data systems is null or blank, an invalid value is added.

<sup>c</sup>'Other' includes:

- Recovery Health and Wellness Educational Event or Activity
- Peer-Led Recovery Educational Workshop or Event
- Culturally Based Recovery Practice or Creative and Expressive Arts Recovery Activity
- Peer-Led Recovery Educational Workshop or Event; Recovery Friendly Workplace (RFW) Initiative, Activity, or Supportive Employment Service;
- Recovery Friendly Workplace (RFW) Initiative, Activity, or Supportive Employment Service;
- Recovery Community Organization (RCO) or Recovery Community Center (RCC) Service or Activity; as well as all
- Other approved SUD RSS Events or Activities through consultation with respective state SUPTRS BG Project Officer.

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**Footnotes:**

**D: Population and Services Reports**

**Table 11a – Number of Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Substance Use Disorders in the Proceeding 12-months by Age, Sex, Race and Ethnicity – SUPTRS BG Expenditures Only**

Table 11a is based on the required SSA reporting of data on SUD client treatment admissions and subsequent admissions to an episode of care during the period that occur during the most recently completed SFY. In Table 11a, each client admitted to treatment during the immediately prior completed SFY is to be reported. Grantees are requested to include data on Table 11a for those SUD client treatment admissions that were funded, in full or in part, with SUPTRS BG funds. If Table 11a includes additional data reporting on SUD client treatment admissions which are funded with other sources of funding, please briefly explain in the footnote below.

Expenditure Period Start Date: 07/01/2024 Expenditure Period End Date: 06/30/2025

**SUPTRS BG Table 11a - Number of Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Substance Use Disorders in the Proceeding 12-months by Age, Sex, Race and Ethnicity – SUPTRS BG Expenditures Only**

	Total of Race				American Indian or Alaska Native		
	Female	Male	Not Available <sup>b</sup>	Total	Female	Male	Not Available <sup>b</sup>
0-5 years <sup>a</sup>	0	0	0	0	0	0	0
6-12 years	284	370	0	654	0	1	0
13-17 years	2,696	4,008	0	6,704	7	6	0
18-20 years	865	1,510	0	2,375	1	4	0
21-24 years	1,267	1,537	0	2,804	6	4	0
25-44 years	16,692	20,475	0	37,167	53	51	0
45-64 years	7,432	13,193	0	20,625	36	58	0
65-74 years	864	1,822	0	2,686	0	7	0
75+ years	92	164	0	256	0	0	0
Not Available	0	0	0	0	0	0	0
<b>Total</b>	<b>30,192</b>	<b>43,079</b>	<b>0</b>	<b>73,271</b>	<b>103</b>	<b>131</b>	<b>0</b>
<b>Pregnant Women</b>	<b>721</b>				<b>2</b>		
Number of Persons Served who were admitted in a Period Prior to the 12-month reporting Period							27966
Number of Persons Served outside of the levels of care described on SUPTRS BG Table 10							40811

Are the values reported in this table generated from a client-based system with unique identifiers?

Yes  No

Comments on Data (Race and Ethnicity)	
Comments on Data (Sex)	
Comments on Data (Overall)	

<sup>a</sup>Age category 0-5 years is not applicable.

<sup>b</sup>The 'Not Available' category is to be used only for cases where the requested field in state data systems is null or blank, an invalid value is added, or if the state does not collect the requested information in the state data system.

**SUPTRS BG Table 11a - Number of Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Substance Use Disorders in the Proceeding 12-months by Age, Sex, Race and Ethnicity – SUPTRS BG Expenditures Only**

	Asian			Black or African American		
	Female	Male	Not Available <sup>b</sup>	Female	Male	Not Available <sup>b</sup>
0-5 years <sup>a</sup>	0	0	0	0	0	0
6-12 years	3	1	0	75	118	0
13-17 years	19	30	0	916	1,669	0
18-20 years	5	7	0	278	581	0
21-24 years	7	4	0	312	410	0
25-44 years	60	74	0	2,751	3,988	0
45-64 years	32	43	0	1,021	2,764	0

65-74 years	1	6	0	130	468	0
75+ years	0	1	0	3	38	0
Not Available	0	0	0	0	0	0
<b>Total</b>	<b>127</b>	<b>166</b>	<b>0</b>	<b>5,486</b>	<b>10,036</b>	<b>0</b>
<b>Pregnant Women</b>	2			186		

<sup>a</sup>Age category 0-5 years is not applicable.

<sup>b</sup>The 'Not Available' category is to be used only for cases where the requested field in state data systems is null or blank, an invalid value is added, or if the state does not collect the requested information in the state data system.

**SUPTRS BG Table 11a - Number of Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Substance Use Disorders in the Proceeding 12-months by Age, Sex, Race and Ethnicity – SUPTRS BG Expenditures Only**

	Native Hawaiian or Other Pacific Islander			White		
	Female	Male	Not Available <sup>b</sup>	Female	Male	Not Available <sup>b</sup>
0-5 years <sup>a</sup>	0	0	0	0	0	0
6-12 years	0	0	0	176	191	0
13-17 years	7	6	0	1,339	1,704	0
18-20 years	2	3	0	445	691	0
21-24 years	3	3	0	786	855	0
25-44 years	35	49	0	12,423	13,922	0
45-64 years	18	47	0	5,828	9,142	0
65-74 years	3	3	0	678	1,217	0
75+ years	0	0	0	83	114	0
Not Available	0	0	0	0	0	0
<b>Total</b>	<b>68</b>	<b>111</b>	<b>0</b>	<b>21,758</b>	<b>27,836</b>	<b>0</b>
<b>Pregnant Women</b>	0			478		

<sup>a</sup>Age category 0-5 years is not applicable.

<sup>b</sup>The 'Not Available' category is to be used only for cases where the requested field in state data systems is null or blank, an invalid value is added, or if the state does not collect the requested information in the state data system.

**SUPTRS BG Table 11a - Number of Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Substance Use Disorders in the Proceeding 12-months by Age, Sex, Race and Ethnicity – SUPTRS BG Expenditures Only**

	Some Other Race			More than One Race Reported		
	Female	Male	Not Available <sup>b</sup>	Female	Male	Not Available <sup>b</sup>
0-5 years <sup>a</sup>	0	0	0	0	0	0
6-12 years	15	29	0	15	30	0
13-17 years	200	358	0	208	235	0
18-20 years	89	132	0	45	92	0
21-24 years	94	159	0	59	102	0
25-44 years	884	1,533	0	486	858	0
45-64 years	344	749	0	153	390	0
65-74 years	38	80	0	14	41	0
75+ years	4	10	0	2	1	0
Not Available	0	0	0	0	0	0
<b>Total</b>	<b>1,668</b>	<b>3,050</b>	<b>0</b>	<b>982</b>	<b>1,749</b>	<b>0</b>
<b>Pregnant Women</b>	24			29		

<sup>a</sup>Age category 0-5 years is not applicable.

<sup>b</sup>The 'Not Available' category is to be used only for cases where the requested field in state data systems is null or blank, an invalid value is added, or if the state does not collect the requested information in the state data system.

**SUPTRS BG Table 11a - Number of Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Substance Use Disorders in the Proceeding 12-months by Age, Sex, Race and Ethnicity – SUPTRS BG Expenditures Only**

	Race Not Available			Not Hispanic or Latino		
	Female	Male	Not Available <sup>b</sup>	Female	Male	Not Available <sup>b</sup>
0-5 years <sup>a</sup>	0	0	0	0	0	0
6-12 years	0	0	0	222	299	0
13-17 years	0	0	0	1,998	3,000	0
18-20 years	0	0	0	668	1,167	0
21-24 years	0	0	0	1,089	1,177	0
25-44 years	0	0	0	14,741	16,759	0
45-64 years	0	0	0	6,734	11,248	0
65-74 years	0	0	0	776	1,554	0
75+ years	0	0	0	78	143	0
Not Available	0	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>26,306</b>	<b>35,347</b>	<b>0</b>
<b>Pregnant Women</b>	0			637		

<sup>a</sup>Age category 0-5 years is not applicable.

<sup>b</sup>The 'Not Available' category is to be used only for cases where the requested field in state data systems is null or blank, an invalid value is added, or if the state does not collect the requested information in the state data system.

**SUPTRS BG Table 11a - Number of Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Substance Use Disorders in the Proceeding 12-months by Age, Sex, Race and Ethnicity – SUPTRS BG Expenditures Only**

	Hispanic or Latino			Hispanic or Latino Origin Not Available		
	Female	Male	Not Available <sup>b</sup>	Female	Male	Not Available <sup>b</sup>
0-5 years <sup>a</sup>	0	0	0	0	0	0
6-12 years	62	71	0	0	0	0
13-17 years	698	1,008	0	0	0	0
18-20 years	197	343	0	0	0	0
21-24 years	178	360	0	0	0	0
25-44 years	1,951	3,716	0	0	0	0
45-64 years	698	1,945	0	0	0	0
65-74 years	88	268	0	0	0	0
75+ years	14	21	0	0	0	0
Not Available	0	0	0	0	0	0
<b>Total</b>	<b>3,886</b>	<b>7,732</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Pregnant Women</b>	84			0		

<sup>a</sup>Age category 0-5 years is not applicable.

<sup>b</sup>The 'Not Available' category is to be used only for cases where the requested field in state data systems is null or blank, an invalid value is added, or if the state does not collect the requested information in the state data system.

**SUPTRS BG Table 11a - Number of Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Substance Use Disorders in the Proceeding 12-months by Age, Sex, Race and Ethnicity – SUPTRS BG Expenditures Only**

Total of Ethnicity				
	Female	Male	Not Available <sup>b</sup>	Total

0-5 years <sup>a</sup>	0	0	0	0
6-12 years	284	370	0	654
13-17 years	2,696	4,008	0	6,704
18-20 years	865	1,510	0	2,375
21-24 years	1,267	1,537	0	2,804
25-44 years	16,692	20,475	0	37,167
45-64 years	7,432	13,193	0	20,625
65-74 years	864	1,822	0	2,686
75+ years	92	164	0	256
Not Available	0	0	0	0
<b>Total</b>	<b>30,192</b>	<b>43,079</b>	<b>0</b>	<b>73,271</b>
<b>Pregnant Women</b>	<b>721</b>			

<sup>a</sup>Age category 0-5 years is not applicable.

<sup>b</sup>The 'Not Available' category is to be used only for cases where the requested field in state data systems is null or blank, an invalid value is added, or if the state does not collect the requested information in the state data system.

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**Footnotes:**

**D: Population and Services Reports**

**Table 11b - Number of Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Drug Use Disorders by Ages, Sex, Race and Ethnicity – COVID19<sup>a</sup>**

**Supplemental Funding**

This table provides an aggregate profile of the unduplicated number of admissions and persons for services funded using COVID-19 Relief Supplemental Funding. States that were granted a second No Cost Extension (NCE) on March 14, 2024 had until March 14, 2025 to expend their COVID-19 supplemental funds. Those expending supplemental funds under the second NCE are required to report individuals served from the start of SFY 2025 through March 14, 2025 in COVID-19 designated table (11b) for the SUPTRS BG 2026 Report.

Expenditure Period Start Date: 07/01/2024 Expenditure Period End Date: 06/30/2025

**SUPTRS BG Table 11b - Number of Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Drug Use Disorders by Ages, Sex, Race and Ethnicity – COVID19<sup>a</sup> Supplemental Funding**

	Total of Race				American Indian or Alaska Native		
	Female	Male	Not Available <sup>c</sup>	Total	Female	Male	Not Available <sup>c</sup>
0-5 years <sup>b</sup>	0	0	0	0	0	0	0
6-12 years	0	0	0	0	0	0	0
13-17 years	0	0	0	0	0	0	0
18-20 years	0	0	0	0	0	0	0
21-24 years	0	0	0	0	0	0	0
25-44 years	0	0	0	0	0	0	0
45-64 years	0	0	0	0	0	0	0
65-74 years	0	0	0	0	0	0	0
75+ years	0	0	0	0	0	0	0
Not Available	0	0	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Pregnant Women</b>	0				0		

Are the values reported in this table generated from a client-based system with unique identifiers?

Yes  No

Comments on Data (Race)	
Comments on Data (Gender)	
Comments on Data (Overall)	

<sup>a</sup>Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG COVID-19 admissions for the same one-year period. Note: COVID supplemental funds had an original award period of March 15, 2021 through March 14, 2023. States that were granted a second No Cost Extension (NCE) on March 14, 2024 had until March 14, 2025 to expend their COVID-19 supplemental funds. Those states expending supplemental funds under the second NCE are required to report on admissions made during SFY 2025, for most states that include admissions between July 1, 2024 and March 14, 2025, in the COVID-19 designated table (11b) of the FY2026 Report.

<sup>b</sup>Age category 0-5 years is not applicable.

<sup>c</sup>The 'Not Available' category is to be used only for cases where the requested field in state data systems is null or blank, an invalid value is added, or if the state does not collect the requested information in the state data system.

**SUPTRS BG Table 11b - Number of Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Drug Use Disorders by Ages, Sex, Race and Ethnicity – COVID19<sup>a</sup> Supplemental Funding**

	Asian			Black or African American		
	Female	Male	Not Available <sup>c</sup>	Female	Male	Not Available <sup>c</sup>
0-5 years <sup>b</sup>	0	0	0	0	0	0
6-12 years	0	0	0	0	0	0
13-17 years	0	0	0	0	0	0
18-20 years	0	0	0	0	0	0
21-24 years	0	0	0	0	0	0
25-44 years	0	0	0	0	0	0
45-64 years	0	0	0	0	0	0
65-74 years	0	0	0	0	0	0
75+ years	0	0	0	0	0	0

Not Available	0	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Pregnant Women</b>	0			0		

<sup>a</sup>Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG COVID-19 admissions for the same one-year period. Note: COVID supplemental funds had an original award period of March 15, 2021 through March 14, 2023. States that were granted a second No Cost Extension (NCE) on March 14, 2024 had until March 14, 2025 to expend their COVID-19 supplemental funds. Those states expending supplemental funds under the second NCE are required to report on admissions made during SFY 2025, for most states that include admissions between July 1, 2024 and March 14, 2025, in the COVID-19 designated table (11b) of the FY2026 Report.

<sup>b</sup>Age category 0-5 years is not applicable.

<sup>c</sup>The 'Not Available' category is to be used only for cases where the requested field in state data systems is null or blank, an invalid value is added, or if the state does not collect the requested information in the state data system.

**SUPTRS BG Table 11b - Number of Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Drug Use Disorders by Ages, Sex, Race and Ethnicity – COVID19<sup>a</sup> Supplemental Funding**

	Native Hawaiian or Other Pacific Islander			White		
	Female	Male	Not Available <sup>c</sup>	Female	Male	Not Available <sup>c</sup>
0-5 years <sup>b</sup>	0	0	0	0	0	0
6-12 years	0	0	0	0	0	0
13-17 years	0	0	0	0	0	0
18-20 years	0	0	0	0	0	0
21-24 years	0	0	0	0	0	0
25-44 years	0	0	0	0	0	0
45-64 years	0	0	0	0	0	0
65-74 years	0	0	0	0	0	0
75+ years	0	0	0	0	0	0
Not Available	0	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Pregnant Women</b>	0			0		

<sup>a</sup>Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG COVID-19 admissions for the same one-year period. Note: COVID supplemental funds had an original award period of March 15, 2021 through March 14, 2023. States that were granted a second No Cost Extension (NCE) on March 14, 2024 had until March 14, 2025 to expend their COVID-19 supplemental funds. Those states expending supplemental funds under the second NCE are required to report on admissions made during SFY 2025, for most states that include admissions between July 1, 2024 and March 14, 2025, in the COVID-19 designated table (11b) of the FY2026 Report.

<sup>b</sup>Age category 0-5 years is not applicable.

<sup>c</sup>The 'Not Available' category is to be used only for cases where the requested field in state data systems is null or blank, an invalid value is added, or if the state does not collect the requested information in the state data system.

**SUPTRS BG Table 11b - Number of Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Drug Use Disorders by Ages, Sex, Race and Ethnicity – COVID19<sup>a</sup> Supplemental Funding**

	Some Other Race			More than One Race Reported		
	Female	Male	Not Available <sup>c</sup>	Female	Male	Not Available <sup>c</sup>
0-5 years <sup>b</sup>	0	0	0	0	0	0
6-12 years	0	0	0	0	0	0
13-17 years	0	0	0	0	0	0
18-20 years	0	0	0	0	0	0
21-24 years	0	0	0	0	0	0
25-44 years	0	0	0	0	0	0
45-64 years	0	0	0	0	0	0
65-74 years	0	0	0	0	0	0
75+ years	0	0	0	0	0	0
Not Available	0	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Pregnant Women</b>	0			0		

<sup>a</sup>Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG COVID-19 admissions for the same one-year period. Note: COVID supplemental funds had an original award period of March 15, 2021 through March 14, 2023. States that were granted a second No Cost Extension (NCE) on March 14, 2024 had until March 14, 2025 to expend their COVID-19 supplemental funds. Those states expending supplemental funds under the second NCE are required to report on admissions made during SFY 2025, for most states that include admissions between July 1, 2024 and March 14, 2025, in the COVID-19 designated table (11b) of the FY2026 Report.

<sup>b</sup>Age category 0-5 years is not applicable.

<sup>c</sup>The 'Not Available' category is to be used only for cases where the requested field in state data systems is null or blank, an invalid value is added, or if the state does not collect the requested information in the state data system.

**SUPTRS BG Table 11b - Number of Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Drug Use Disorders by Ages, Sex, Race and Ethnicity – COVID19<sup>a</sup> Supplemental Funding**

	Race Not Available			Not Hispanic or Latino		
	Female	Male	Not Available <sup>c</sup>	Female	Male	Not Available <sup>c</sup>
0-5 years <sup>b</sup>	0	0	0	0	0	0
6-12 years	0	0	0	0	0	0
13-17 years	0	0	0	0	0	0
18-20 years	0	0	0	0	0	0
21-24 years	0	0	0	0	0	0
25-44 years	0	0	0	0	0	0
45-64 years	0	0	0	0	0	0
65-74 years	0	0	0	0	0	0
75+ years	0	0	0	0	0	0
Not Available	0	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Pregnant Women</b>	0			0		

<sup>a</sup>Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG COVID-19 admissions for the same one-year period. Note: COVID supplemental funds had an original award period of March 15, 2021 through March 14, 2023. States that were granted a second No Cost Extension (NCE) on March 14, 2024 had until March 14, 2025 to expend their COVID-19 supplemental funds. Those states expending supplemental funds under the second NCE are required to report on admissions made during SFY 2025, for most states that include admissions between July 1, 2024 and March 14, 2025, in the COVID-19 designated table (11b) of the FY2026 Report.

<sup>b</sup>Age category 0-5 years is not applicable.

<sup>c</sup>The 'Not Available' category is to be used only for cases where the requested field in state data systems is null or blank, an invalid value is added, or if the state does not collect the requested information in the state data system.

**SUPTRS BG Table 11b - Number of Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Drug Use Disorders by Ages, Sex, Race and Ethnicity – COVID19<sup>a</sup> Supplemental Funding**

	Hispanic or Latino			Hispanic or Latino Origin Not Available		
	Female	Male	Not Available <sup>c</sup>	Female	Male	Not Available <sup>c</sup>
0-5 years <sup>b</sup>	0	0	0	0	0	0
6-12 years	0	0	0	0	0	0
13-17 years	0	0	0	0	0	0
18-20 years	0	0	0	0	0	0
21-24 years	0	0	0	0	0	0
25-44 years	0	0	0	0	0	0
45-64 years	0	0	0	0	0	0
65-74 years	0	0	0	0	0	0
75+ years	0	0	0	0	0	0
Not Available	0	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Pregnant Women</b>	0			0		

<sup>a</sup>Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG COVID-19 admissions for the same one-year period. Note: COVID supplemental funds had an original award period of March 15, 2021 through March 14, 2023. States that were granted a second No Cost Extension (NCE) on March 14, 2024 had until March 14, 2025 to expend their COVID-19 supplemental funds. Those states

expending supplemental funds under the second NCE are required to report on admissions made during SFY 2025, for most states that include admissions between July 1, 2024 and March 14, 2025, in the COVID-19 designated table (11b) of the FY2026 Report.

<sup>b</sup>Age category 0-5 years is not applicable.

<sup>c</sup>The 'Not Available' category is to be used only for cases where the requested field in state data systems is null or blank, an invalid value is added, or if the state does not collect the requested information in the state data system.

**SUPTRS BG Table 11b - Number of Persons (Unduplicated Count) Admitted to Treatment for Alcohol and Other Drug Use Disorders by Ages, Sex, Race and Ethnicity – COVID19<sup>a</sup> Supplemental Funding**

Total of Ethnicity				
	Female	Male	Not Available <sup>c</sup>	Total
0-5 years <sup>b</sup>	0	0	0	0
6-12 years	0	0	0	0
13-17 years	0	0	0	0
18-20 years	0	0	0	0
21-24 years	0	0	0	0
25-44 years	0	0	0	0
45-64 years	0	0	0	0
65-74 years	0	0	0	0
75+ years	0	0	0	0
Not Available	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Pregnant Women</b>	<b>0</b>			

<sup>a</sup>Per the instructions, the reporting period is for the preceding 12-month period of the most recently completed SFY. Enter SUPTRS BG COVID-19 admissions for the same one-year period. Note: COVID supplemental funds had an original award period of March 15, 2021 through March 14, 2023. States that were granted a second No Cost Extension (NCE) on March 14, 2024 had until March 14, 2025 to expend their COVID-19 supplemental funds. Those states expending supplemental funds under the second NCE are required to report on admissions made during SFY 2025, for most states that include admissions between July 1, 2024 and March 14, 2025, in the COVID-19 designated table (11b) of the FY2026 Report.

<sup>b</sup>Age category 0-5 years is not applicable.

<sup>c</sup>The 'Not Available' category is to be used only for cases where the requested field in state data systems is null or blank, an invalid value is added, or if the state does not collect the requested information in the state data system.

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**Footnotes:**

## D: Population and Services Reports

**Table 12 - Early Intervention Services for the Human Immunodeficiency Virus (EIS/HIV) in Designated States**

This table requires designated states, as defined in section 1924(b) of Title XIX, Part B, Subpart II of the PHS Act (42 U.S.C. § 300x-24(b)), to provide information on Early Intervention Services for HIV including pre-test counseling, testing, post-test counseling, and the provision of therapeutic measures to diagnose the extent of deficiency in the immune system, to prevent and treat the deterioration of immune system, and to prevent and treat conditions arising from HIV/AIDS funded with SUPTRS BG funds.

Expenditure Period Start Date: 7/1/2024      Expenditure Period End Date: 6/30/2025

1.	Number of EIS/HIV projects among SUPTRS BG sub-recipients in the state	A. Statewide <u>  39  </u>	B. Rural <u>  5  </u>
2.	Total number of individuals tested through SUPTRS BG sub-recipient EIS/HIV projects:	12,256	
3.	Total number of HIV tests conducted with SUPTRS BG EIS/HIV funds:	13,081	
4.	Total number of tests that were positive for HIV:	182	
5.	Total number of individuals who prior to the reporting period were unaware of their HIV infection:	80	
6.	Total number of HIV infected individuals who were diagnosed and referred into treatment and care during the reporting period:	97	
7.	Total number of persons at risk for HIV/AIDS referred for PrEP services?	0	

Identify barriers, including State laws and regulations, that exist in carrying out HIV testing services:

The barriers to carrying out HIV testing services reported for the previous grant cycle included cultural beliefs, transportation, housing, and access to safely store medication. Previously reported barriers such as stigma continue to be a challenge.

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**Footnotes:**

## D: Population and Services Reports

### Table 13 - Charitable Choice – Required

Under Charitable Choice Provisions; Final Rule (42 CFR Part 54), states, local governments, and religious organizations must: (1) ensure that religious organizations that are providers provide to all potential and actual program beneficiaries (services recipients) notice of their right to alternative services; (2) ensure that religious organizations that are providers refer program beneficiaries to alternative services; and (3) fund and/or provide alternative services. The term “alternative services” means services determined by the state to be accessible and comparable and provided within a reasonable period of time from another substance use disorder provider (“alternative provider”) to which the program beneficiary (services recipient) has no religious objection. The purpose of this table is to document how the state is complying with these provisions.

Expenditure Period Start Date: 7/1/2024 Expenditure Period End Date: 6/30/2025

#### Notice to Program Beneficiaries - Check all that apply:

- Used model notice provided in final regulation.
- Used notice developed by State (please attach a copy to the Report).
- State has disseminated notice to religious organizations that are providers.
- State requires these religious organizations to give notice to all potential beneficiaries.

#### Referrals to Alternative Services - Check all that apply:

- State has developed specific referral system for this requirement.
- State has incorporated this requirement into existing referral system(s).
- Federal Behavioral Health Treatment Locator is used to help identify providers.
- Other networks and information systems are used to help identify providers.
- State maintains record of referrals made by religious organizations that are providers.

0 Enter the total number of referrals to other substance use disorder providers (“alternative providers”) necessitated by religious objection, as defined above, made during the state fiscal year immediately preceding the federal fiscal year for which the state is applying for funds. Provide the total only. No information on specific referrals is required. If no alternative referrals were made, enter zero.

#### Provide a brief description (one paragraph) of any training for local governments and/or faith-based and/or community organizations that are providers on these requirements.

One Managing Entity (Central Florida Cares Health Systems, Inc.) reports that patients and staff are informed of rights to be transferred or referred to other programs due to religious objection.

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#### Footnotes:

## E: Performance Data and Outcomes

**Table 14 - Treatment Performance Measure: Employment/Education Status (From Admission to Discharge)**

### Short-term Residential(SR)

**Employment/Education Status – Clients employed or student (full-time and part-time) (prior 30 days) at admission vs. discharge**

	At Admission(T1)	At Discharge(T2)
Number of clients employed or student (full-time and part-time) [numerator]	0	0
Total number of clients with non-missing values on employment/student status [denominator]	0	0
Percent of clients employed or student (full-time and part-time)	0.0%	0.0%
<b>Notes (for this level of care):</b>		
Number of CY 2024 admissions submitted:		0
Number of CY 2024 discharges submitted:		0
Number of CY 2024 discharges linked to an admission:		0
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):		0
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):		0

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2  
[Records received through 3/19/2026]

### Long-term Residential(LR)

**Employment/Education Status – Clients employed or student (full-time and part-time) (prior 30 days) at admission vs. discharge**

	At Admission(T1)	At Discharge(T2)
Number of clients employed or student (full-time and part-time) [numerator]	839	789
Total number of clients with non-missing values on employment/student status [denominator]	6,595	6,595
Percent of clients employed or student (full-time and part-time)	12.7%	12.0%
<b>Notes (for this level of care):</b>		
Number of CY 2024 admissions submitted:		4,436
Number of CY 2024 discharges submitted:		7,453
Number of CY 2024 discharges linked to an admission:		7,353

Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	7,309
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	6,595

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2  
[Records received through 3/19/2026]

### Outpatient (OP)

#### Employment/Education Status – Clients employed or student (full-time and part-time) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients employed or student (full-time and part-time) [numerator]	11,194	7,374
Total number of clients with non-missing values on employment/student status [denominator]	25,270	25,270
Percent of clients employed or student (full-time and part-time)	44.3%	29.2%
<b>Notes (for this level of care):</b>		
Number of CY 2024 admissions submitted:		34,282
Number of CY 2024 discharges submitted:		29,765
Number of CY 2024 discharges linked to an admission:		29,393
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):		27,461
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):		25,270

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2  
[Records received through 3/19/2026]

### Intensive Outpatient (IO)

#### Employment/Education Status – Clients employed or student (full-time and part-time) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients employed or student (full-time and part-time) [numerator]	503	545
Total number of clients with non-missing values on employment/student status [denominator]	1,774	1,774
Percent of clients employed or student (full-time and part-time)	28.4%	30.7%
<b>Notes (for this level of care):</b>		
Number of CY 2024 admissions submitted:		1,353
Number of CY 2024 discharges submitted:		1,926
Number of CY 2024 discharges linked to an admission:		1,917

Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	1,860
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	1,774

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2  
[Records received through 3/19/2026]

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**Footnotes:**

## E: Performance Data and Outcomes

**Table 15 - Treatment Performance Measure: Stability of Housing (From Admission to Discharge)**

### Short-term Residential(SR)

Clients living in a stable living situation (prior 30 days) at admission vs. discharge

	At Admission (T1)	At Discharge (T2)
Number of clients living in a stable situation [numerator]	0	0
Total number of clients with non-missing values on living arrangements [denominator]	0	0
Percent of clients in stable living situation	0.0%	0.0%
<b>Notes (for this level of care):</b>		
Number of CY 2024 admissions submitted:		0
Number of CY 2024 discharges submitted:		0
Number of CY 2024 discharges linked to an admission:		0
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):		0
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):		0

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2  
[Records received through 3/19/2026]

### Long-term Residential(LR)

Clients living in a stable living situation (prior 30 days) at admission vs. discharge

	At Admission (T1)	At Discharge (T2)
Number of clients living in a stable situation [numerator]	3,628	4,170
Total number of clients with non-missing values on living arrangements [denominator]	5,747	5,747
Percent of clients in stable living situation	63.1%	72.6%
<b>Notes (for this level of care):</b>		
Number of CY 2024 admissions submitted:		4,436
Number of CY 2024 discharges submitted:		7,453
Number of CY 2024 discharges linked to an admission:		7,353
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):		7,309

Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	5,747
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Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2  
[Records received through 3/19/2026]

### Outpatient (OP)

#### Clients living in a stable living situation (prior 30 days) at admission vs. discharge

	At Admission (T1)	At Discharge (T2)
Number of clients living in a stable situation [numerator]	19,741	20,316
Total number of clients with non-missing values on living arrangements [denominator]	22,435	22,435
Percent of clients in stable living situation	88.0%	90.6%

#### Notes (for this level of care):

Number of CY 2024 admissions submitted:	34,282
Number of CY 2024 discharges submitted:	29,765
Number of CY 2024 discharges linked to an admission:	29,393
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	27,461
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	22,435

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2  
[Records received through 3/19/2026]

### Intensive Outpatient (IO)

#### Clients living in a stable living situation (prior 30 days) at admission vs. discharge

	At Admission (T1)	At Discharge (T2)
Number of clients living in a stable situation [numerator]	1,280	1,302
Total number of clients with non-missing values on living arrangements [denominator]	1,685	1,685
Percent of clients in stable living situation	76.0%	77.3%

#### Notes (for this level of care):

Number of CY 2024 admissions submitted:	1,353
Number of CY 2024 discharges submitted:	1,926
Number of CY 2024 discharges linked to an admission:	1,917
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	1,860
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	1,685

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**Footnotes:**

## E: Performance Data and Outcomes

**Table 16 - Treatment Performance Measure: Criminal Justice Involvement (From Admission to Discharge)**

### Short-term Residential(SR)

**Clients without arrests (any charge) (prior 30 days) at admission vs. discharge**

	At Admission(T1)	At Discharge(T2)
Number of Clients without arrests [numerator]	0	0
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	0	0
Percent of clients without arrests	0.0%	0.0%
<b>Notes (for this level of care):</b>		
Number of CY 2024 admissions submitted:		0
Number of CY 2024 discharges submitted:		0
Number of CY 2024 discharges linked to an admission:		0
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):		0
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):		0

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2  
[Records received through 3/19/2026]

### Long-term Residential(LR)

**Clients without arrests (any charge) (prior 30 days) at admission vs. discharge**

	At Admission(T1)	At Discharge(T2)
Number of Clients without arrests [numerator]	6,322	6,540
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	6,900	6,900
Percent of clients without arrests	91.6%	94.8%
<b>Notes (for this level of care):</b>		
Number of CY 2024 admissions submitted:		4,436
Number of CY 2024 discharges submitted:		7,453
Number of CY 2024 discharges linked to an admission:		7,353

Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	7,343
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	6,900

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2  
[Records received through 3/19/2026]

## Outpatient (OP)

### Clients without arrests (any charge) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of Clients without arrests [numerator]	23,347	24,162
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	26,370	26,370
Percent of clients without arrests	88.5%	91.6%
<b>Notes (for this level of care):</b>		
Number of CY 2024 admissions submitted:		34,282
Number of CY 2024 discharges submitted:		29,765
Number of CY 2024 discharges linked to an admission:		29,393
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):		27,928
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):		26,370

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2  
[Records received through 3/19/2026]

## Intensive Outpatient (IO)

### Clients without arrests (any charge) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of Clients without arrests [numerator]	1,647	1,661
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	1,820	1,820
Percent of clients without arrests	90.5%	91.3%
<b>Notes (for this level of care):</b>		
Number of CY 2024 admissions submitted:		1,353
Number of CY 2024 discharges submitted:		1,926
Number of CY 2024 discharges linked to an admission:		1,917

Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	1,888
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	1,820

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2  
[Records received through 3/19/2026]

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**Footnotes:**

## E: Performance Data and Outcomes

**Table 17 - Treatment Performance Measure: Change in Abstinence - Alcohol Use (From Admission to Discharge)**

### Short-term Residential(SR)

#### A. ALCOHOL ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Alcohol Abstinence – Clients with no alcohol use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol [numerator]	0	0
All clients with non-missing values on at least one substance/frequency of use [denominator]	0	0
Percent of clients abstinent from alcohol	0.0%	0.0%

#### B. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL USERS AT ADMISSION

Clients abstinent from alcohol at discharge among clients using alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients using alcohol at admission [numerator]		0
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	0	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		0.0%

#### C. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL ABSTINENT AT ADMISSION

Clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [numerator]		0
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	0	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		0.0%

#### Notes (for this level of care):

Number of CY 2024 admissions submitted:	0
Number of CY 2024 discharges submitted:	0
Number of CY 2024 discharges linked to an admission:	0
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	0
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	0

**Long-term Residential(LR)**

**A. ALCOHOL ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)**

Alcohol Abstinence – Clients with no alcohol use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol [numerator]	5,098	5,643
All clients with non-missing values on at least one substance/frequency of use [denominator]	7,237	7,237
Percent of clients abstinent from alcohol	70.4%	78.0%

**B. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL USERS AT ADMISSION**

Clients abstinent from alcohol at discharge among clients using alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients using alcohol at admission [numerator]		693
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	2,139	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		32.4%

**C. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL ABSTINENT AT ADMISSION**

Clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [numerator]		4,950
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	5,098	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		97.1%

**Notes (for this level of care):**

Number of CY 2024 admissions submitted:	4,436
Number of CY 2024 discharges submitted:	7,453
Number of CY 2024 discharges linked to an admission:	7,353
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	7,343
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	7,237

## Outpatient (OP)

### A. ALCOHOL ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Alcohol Abstinence – Clients with no alcohol use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol [numerator]	22,192	23,472
All clients with non-missing values on at least one substance/frequency of use [denominator]	27,290	27,290
Percent of clients abstinent from alcohol	81.3%	86.0%

### B. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL USERS AT ADMISSION

Clients abstinent from alcohol at discharge among clients using alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients using alcohol at admission [numerator]		1,763
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	5,098	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		34.6%

### C. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL ABSTINENT AT ADMISSION

Clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [numerator]		21,709
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	22,192	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		97.8%

#### Notes (for this level of care):

Number of CY 2024 admissions submitted:	34,282
Number of CY 2024 discharges submitted:	29,765
Number of CY 2024 discharges linked to an admission:	29,393
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	27,928
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	27,290

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2  
[Records received through 3/19/2026]

## Intensive Outpatient (IO)

### A. ALCOHOL ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Alcohol Abstinence – Clients with no alcohol use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol [numerator]	1,272	1,310
All clients with non-missing values on at least one substance/frequency of use [denominator]	1,848	1,848
Percent of clients abstinent from alcohol	68.8%	70.9%

**B. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL USERS AT ADMISSION**

Clients abstinent from alcohol at discharge among clients using alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients using alcohol at admission [numerator]		69
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	576	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		12.0%

**C. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL ABSTINENT AT ADMISSION**

Clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [numerator]		1,241
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	1,272	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		97.6%

**Notes (for this level of care):**

Number of CY 2024 admissions submitted:	1,353
Number of CY 2024 discharges submitted:	1,926
Number of CY 2024 discharges linked to an admission:	1,917
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	1,888
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	1,848

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2 [Records received through 3/19/2026]

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**Footnotes:**

## E: Performance Data and Outcomes

**Table 18 - Treatment Performance Measure: Change in Abstinence - Other Drug Use (From Admission to Discharge)**

### Short-term Residential(SR)

#### A. DRUG ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Drug Abstinence – Clients with no Drug use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs [numerator]	0	0
All clients with non-missing values on at least one substance/frequency of use [denominator]	0	0
Percent of clients abstinent from drugs	0.0%	0.0%

#### B. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG USERS AT ADMISSION

Clients abstinent from Drug at discharge among clients using Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients using drugs at admission [numerator]		0
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	0	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		0.0%

#### C. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG ABSTINENT AT ADMISSION

Clients abstinent from Drug at discharge among clients abstinent from Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients abstinent from drugs at admission [numerator]		0
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	0	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		0.0%

#### Notes (for this level of care):

Number of CY 2024 admissions submitted:	0
Number of CY 2024 discharges submitted:	0
Number of CY 2024 discharges linked to an admission:	0
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	0
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	0

**Long-term Residential(LR)**

**A. DRUG ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)**

Drug Abstinence – Clients with no Drug use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs [numerator]	3,320	4,493
All clients with non-missing values on at least one substance/frequency of use [denominator]	7,237	7,237
Percent of clients abstinent from drugs	45.9%	62.1%

**B. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG USERS AT ADMISSION**

Clients abstinent from Drug at discharge among clients using Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients using drugs at admission [numerator]		1,397
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	3,917	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		35.7%

**C. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG ABSTINENT AT ADMISSION**

Clients abstinent from Drug at discharge among clients abstinent from Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients abstinent from drugs at admission [numerator]		3,096
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	3,320	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		93.3%

**Notes (for this level of care):**

Number of CY 2024 admissions submitted:	4,436
Number of CY 2024 discharges submitted:	7,453
Number of CY 2024 discharges linked to an admission:	7,353
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	7,343
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	7,237

**A. DRUG ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)**

Drug Abstinence – Clients with no Drug use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs [numerator]	17,310	20,008
All clients with non-missing values on at least one substance/frequency of use [denominator]	27,290	27,290
Percent of clients abstinent from drugs	63.4%	73.3%

**B. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG USERS AT ADMISSION**

Clients abstinent from Drug at discharge among clients using Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients using drugs at admission [numerator]		3,569
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	9,980	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		35.8%

**C. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG ABSTINENT AT ADMISSION**

Clients abstinent from Drug at discharge among clients abstinent from Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients abstinent from drugs at admission [numerator]		16,439
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	17,310	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		95.0%

**Notes (for this level of care):**

Number of CY 2024 admissions submitted:	34,282
Number of CY 2024 discharges submitted:	29,765
Number of CY 2024 discharges linked to an admission:	29,393
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	27,928
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	27,290

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2 [Records received through 3/19/2026]

**Intensive Outpatient (IO)**

**A. DRUG ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)**

Drug Abstinence – Clients with no Drug use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs [numerator]	985	1,050
All clients with non-missing values on at least one substance/frequency of use [denominator]	1,848	1,848
Percent of clients abstinent from drugs	53.3%	56.8%

**B. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG USERS AT ADMISSION**

Clients abstinent from Drug at discharge among clients using Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients using drugs at admission [numerator]		140
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	863	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		16.2%

**C. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG ABSTINENT AT ADMISSION**

Clients abstinent from Drug at discharge among clients abstinent from Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients abstinent from drugs at admission [numerator]		910
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	985	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		92.4%

**Notes (for this level of care):**

Number of CY 2024 admissions submitted:	1,353
Number of CY 2024 discharges submitted:	1,926
Number of CY 2024 discharges linked to an admission:	1,917
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	1,888
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	1,848

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2 [Records received through 3/19/2026]

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**Footnotes:**

## E: Performance Data and Outcomes

**Table 19 – State Description of Social Support of Recovery Data Collection**

### Short-term Residential(SR)

**Social Support of Recovery - Clients participating in self-help groups (e.g., AA, NA, etc.) (prior 30 days) at admission vs. discharge**

	At Admission (T1)	At Discharge (T2)
Number of clients participating in self-help groups (AA NA meetings attended, etc.) [numerator]	0	0
Total number of Admission and Discharge clients with non-missing values on participation in self-help groups [denominator]	0	0
Percent of clients participating in self-help groups	0.0%	0.0%
Percent of clients with participation in self-help groups at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	0.0%	
<b>Notes (for this level of care):</b>		
Number of CY 2024 admissions submitted:		0
Number of CY 2024 discharges submitted:		0
Number of CY 2024 discharges linked to an admission:		0
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):		0
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):		0

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2 [Records received through 3/19/2026]

### Long-term Residential(LR)

**Social Support of Recovery - Clients participating in self-help groups (e.g., AA, NA, etc.) (prior 30 days) at admission vs. discharge**

	At Admission (T1)	At Discharge (T2)
Number of clients participating in self-help groups (AA NA meetings attended, etc.) [numerator]	1,709	3,576
Total number of Admission and Discharge clients with non-missing values on participation in self-help groups [denominator]	6,095	6,095
Percent of clients participating in self-help groups	28.0%	58.7%
Percent of clients with participation in self-help groups at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	30.6%	
<b>Notes (for this level of care):</b>		
Number of CY 2024 admissions submitted:		4,436
Number of CY 2024 discharges submitted:		7,453

Number of CY 2024 discharges linked to an admission:	7,353
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	7,343
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	6,095

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2  
[Records received through 3/19/2026]

### Outpatient (OP)

#### Social Support of Recovery - Clients participating in self-help groups (e.g., AA, NA, etc.) (prior 30 days) at admission vs. discharge

	At Admission (T1)	At Discharge (T2)
Number of clients participating in self-help groups (AA NA meetings attended, etc.) [numerator]	4,419	7,641
Total number of Admission and Discharge clients with non-missing values on participation in self-help groups [denominator]	21,767	21,767
Percent of clients participating in self-help groups	20.3%	35.1%
Percent of clients with participation in self-help groups at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	14.8%	

#### Notes (for this level of care):

Number of CY 2024 admissions submitted:	34,282
Number of CY 2024 discharges submitted:	29,765
Number of CY 2024 discharges linked to an admission:	29,393
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	27,928
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	21,767

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2  
[Records received through 3/19/2026]

### Intensive Outpatient (IO)

#### Social Support of Recovery - Clients participating in self-help groups (e.g., AA, NA, etc.) (prior 30 days) at admission vs. discharge

	At Admission (T1)	At Discharge (T2)
Number of clients participating in self-help groups (AA NA meetings attended, etc.) [numerator]	236	358
Total number of Admission and Discharge clients with non-missing values on participation in self-help groups [denominator]	1,677	1,677
Percent of clients participating in self-help groups	14.1%	21.3%
Percent of clients with participation in self-help groups at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	7.3%	

#### Notes (for this level of care):

Number of CY 2024 admissions submitted:	1,353
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Number of CY 2024 discharges submitted:	1,926
Number of CY 2024 discharges linked to an admission:	1,917
Number of linked discharges after exclusions (excludes: withdrawal management, rehabilitation/residential hospital, MOUD clients; deaths; incarcerated):	1,888
Number of CY 2024 linked discharges eligible for this calculation (non-missing values):	1,677

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2  
[Records received through 3/19/2026]

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**Footnotes:**

## E: Performance Data and Outcomes

**Table 20 - Retention - Length of Stay (in Days) of Clients Completing Treatment**

Level of Care	Average (Mean)	25 <sup>th</sup> Percentile	50 <sup>th</sup> Percentile (Median)	75 <sup>th</sup> Percentile
<b>Withdrawal Management (24-HOUR CARE)</b>				
1. Hospital Inpatient	0	0	0	0
2. Free-Standing Residential	8	2	3	5
<b>REHABILITATION/RESIDENTIAL</b>				
3. Hospital Inpatient	78	1	100	133
4. Short-term (up to 30 days)	0	0	0	0
5. Long-term (over 30 days)	91	17	49	99
<b>AMBULATORY (OUTPATIENT)</b>				
6. Outpatient	117	21	60	139
7. Intensive Outpatient	114	2	10	157
8. Withdrawal Management	131	5	48	120
<b>Medication for Opioid Use Disorder (MOUD) Treatment</b>				
9. Withdrawal Management with Opioid Agonist Medications	0	0	0	0
10. Continuous MOUD and Other Services in Outpatient Settings	284	61	171	371

Level of Care	2024 TEDS discharge record count	
	Discharges submitted	Discharges linked to an admission
<b>Withdrawal Management (24-HOUR CARE)</b>		
1. Hospital Inpatient	0	0
2. Free-Standing Residential	11291	11126
<b>REHABILITATION/RESIDENTIAL</b>		
3. Hospital Inpatient	3	3
4. Short-term (up to 30 days)	0	0

5. Long-term (over 30 days)	7453	7353
<b>AMBULATORY (OUTPATIENT)</b>		
6. Outpatient	29765	27993
7. Intensive Outpatient	1926	1917
8. Withdrawal Management	40	40
<b>Medication for Opioid Use Disorder (MOUD) Treatment</b>		
9. Withdrawal Management with Opioid Agonist Medications	0	0
10. Continuous MOUD and Other Services in Outpatient Settings	0	1400

Source: SAMHSA/CBHSQ TEDS CY 2024 admissions file and CY 2

[Records received through 3/19/2026]

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**Footnotes:**

## E: Performance Data and Outcomes

**Table 21 – Substance Use Disorder Primary Prevention NOMs Domain: Reduced Morbidity – Drug Use/Alcohol Use Measure: 30-Day Use**

A. Measure	B. Question/Response	C. Pre-populated Data	D. Supplemental Data, if any
1. 30-day Alcohol Use	<p><b>Source Survey Item:</b> NSDUH Questionnaire. "Think specifically about the past 30 days, that is, from [DATEFILL] through today. During the past 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?[Response option: Write in a number between 0 and 30.]"</p> <p><b>Outcome Reported:</b> Percent who reported having used alcohol during the past 30 days.</p>		
	Age 12 - 20 - CY 2023		
	Age 21+ - CY 2023		
2. 30-day Cigarette Use	<p><b>Source Survey Item:</b> NSDUH Questionnaire. "During the past 30 days, that is, since [DATEFILL], on how many days did you smoke part or all of a cigarette?[Response option: Write in a number between 0 and 30.]"</p> <p><b>Outcome Reported:</b> Percent who reported having smoked a cigarette during the past 30 days.</p>		
	Age 12 - 17 - CY 2023		
	Age 18+ - CY 2023		
3. 30-day Use of Other Tobacco Products	<p><b>Survey Item: NSDUH Questionnaire:</b> "During the past 30 days, that is, since [DATEFILL], on how many days did you use [other tobacco products]<sup>[a]</sup>?[Response option: Write in a number between 0 and 30.]"</p> <p><b>Outcome Reported:</b> Percent who reported having used a tobacco product other than cigarettes during the past 30 days, calculated by combining responses to questions about individual tobacco products (cigars, smokeless tobacco, pipe tobacco).</p>		
	Age 12 - 17 - CY 2023		
	Age 18+ - CY 2023		
4. 30-day Use of Marijuana	<p><b>Source Survey Item: NSDUH Questionnaire:</b> "Think specifically about the past 30 days, from [DATEFILL] up to and including today. During the past 30 days, on how many days did you use marijuana or hashish?[Response option: Write in a number between 0 and 30.]"</p> <p><b>Outcome Reported:</b> Percent who reported having used marijuana or hashish during the past 30 days.</p>		
	Age 12 - 17 - CY 2023		
	Age 18+ - CY 2023		
5. 30-day Use of Illicit Drugs Other Than Marijuana	<p><b>Source Survey Item: NSDUH Questionnaire:</b> "Think specifically about the past 30 days, from [DATEFILL] up to and including today. During the past 30 days, on how many days did you use [any other illicit drug]<sup>[b]</sup>?"</p> <p><b>Outcome Reported:</b> Percent who reported having used illicit drugs other than marijuana or hashish during the past 30 days, calculated by combining responses to questions about individual drugs (heroin, cocaine, hallucinogens, inhalants, methamphetamine, and misuse of prescription drugs).</p>		
	Age 12 - 17 - CY 2023		

	Age 18+ - CY 2023		
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[a]NSDUH asks separate questions for each tobacco product. The number provided combines responses to all questions about tobacco products other than cigarettes.

[b]NSDUH asks separate questions for each illegal drug. The number provided combines responses to all questions about illegal drugs other than marijuana or hashish.

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**Footnotes:**

## E: Performance Data and Outcomes

**Table 22 – Substance Use Disorder Primary Prevention NOMs Domain: Reduced Morbidity – Drug Use/Alcohol Use Measure: Perception of Risk/Harm of Use**

A. Measure	B. Question/Response	C. Pre-populated Data	D. Supplemental Data, if any
1. Perception of Risk From Alcohol	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "How much do people risk harming themselves physically and in other ways when they have five or more drinks of an alcoholic beverage once or twice a week?[Response options: No risk, slight risk, moderate risk, great risk]"</p> <p><b>Outcome Reported:</b> Percent reporting moderate or great risk.</p>		
	Age 12 - 20 - CY 2023		
	Age 21+ - CY 2023		
2. Perception of Risk From Cigarettes	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "How much do people risk harming themselves physically and in other ways when they smoke one or more packs of cigarettes per day? [Response options: No risk, slight risk, moderate risk, great risk]"</p> <p><b>Outcome Reported:</b> Percent reporting moderate or great risk.</p>		
	Age 12 - 17 - CY 2023		
	Age 18+ - CY 2023		
3. Perception of Risk From Marijuana	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "How much do people risk harming themselves physically and in other ways when they smoke marijuana once or twice a week?[Response options: No risk, slight risk, moderate risk, great risk]"</p> <p><b>Outcome Reported:</b> Percent reporting moderate or great risk.</p>		
	Age 12 - 17 - CY 2023		
	Age 18+ - CY 2023		

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**Footnotes:**

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**Table 23 – Substance Use Disorder Primary Prevention NOMs Domain: Reduced Morbidity – Drug Use/Alcohol Use Measure: Age of First Use**

A. Measure	B. Question/Response	C. Pre-populated Data	D. Supplemental Data, if any
1. Age at First Use of Alcohol	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "Think about the first time you had a drink of an alcoholic beverage. How old were you the first time you had a drink of an alcoholic beverage? Please do not include any time when you only had a sip or two from a drink. [Response option: Write in age at first use.]"</p> <p><b>Outcome Reported:</b> Average age at first use of alcohol.</p>		
	Age 12 - 20 - CY 2023		
	Age 21+ - CY 2023		
2. Age at First Use of Cigarettes	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "How old were you the first time you smoked part or all of a cigarette?[Response option: Write in age at first use.]"</p> <p><b>Outcome Reported:</b> Average age at first use of cigarettes.</p>		
	Age 12 - 17 - CY 2023		
	Age 18+ - CY 2023		
3. Age at First Use of Tobacco Products Other Than Cigarettes	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "How old were you the first time you used [any other tobacco product]<sup>[a]</sup>?[Response option: Write in age at first use.]"</p> <p><b>Outcome Reported:</b> Average age at first use of tobacco products other than cigarettes.</p>		
	Age 12 - 17 - CY 2023		
	Age 18+ - CY 2023		
4. Age at First Use of Marijuana or Hashish	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "How old were you the first time you used marijuana or hashish?[Response option: Write in age at first use.]"</p> <p><b>Outcome Reported:</b> Average age at first use of marijuana or hashish.</p>		
	Age 12 - 17 - CY 2023		
	Age 18+ - CY 2023		
5. Age at First Misuse of Prescription Pain Relievers Among Past Year Initiates	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "How old were you the first time you used [specific pain reliever]<sup>[b]</sup> in a way a doctor did not direct you to use it?"[Response option: Write in age at first use.]"</p> <p><b>Outcome Reported:</b> Average age at first misuse of prescription pain relievers among those who first misused prescription pain relievers in the last 12 months.</p>		
	Age 12 - 17 - CY 2023		
	Age 18+ - CY 2023		

[a]The question was asked about each tobacco product separately, and the youngest age at first use was taken as the measure.

[b]The question was asked about each drug in this category separately, and the youngest age at first use was taken as the measure.

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**Footnotes:**

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**Table 24 – Substance Use Disorder Primary Prevention NOMs Domain: Reduced Morbidity – Drug Use/Alcohol Use Measure: Perception of Disapproval/Attitudes**

A. Measure	B. Question/Response	C. Pre-populated Data	D. Supplemental Data, if any
1. Disapproval of Cigarettes	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "How do you feel about someone your age smoking one or more packs of cigarettes a day?[Response options: Neither approve nor disapprove, somewhat disapprove, strongly disapprove]"</p> <p><b>Outcome Reported:</b> Percent somewhat or strongly disapproving.</p>		
	Age 12 - 17 - CY 2023		
2. Perception of Peer Disapproval of Cigarettes	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "How do you think your close friends would feel about you smoking one or more packs of cigarettes a day?[Response options: Neither approve nor disapprove, somewhat disapprove, strongly disapprove]"</p> <p><b>Outcome Reported:</b> Percent reporting that their friends would somewhat or strongly disapprove.</p>		
	Age 12 - 17 - CY 2023		
3. Disapproval of Using Marijuana Experimentally	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "How do you feel about someone your age trying marijuana or hashish once or twice?[Response options: Neither approve nor disapprove, somewhat disapprove, strongly disapprove]"</p> <p><b>Outcome Reported:</b> Percent somewhat or strongly disapproving.</p>		
	Age 12 - 17 - CY 2023		
4. Disapproval of Using Marijuana Regularly	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "How do you feel about someone your age using marijuana once a month or more?[Response options: Neither approve nor disapprove, somewhat disapprove, strongly disapprove]"</p> <p><b>Outcome Reported:</b> Percent somewhat or strongly disapproving.</p>		
	Age 12 - 17 - CY 2023		
5. Disapproval of Alcohol	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "How do you feel about someone your age having one or two drinks of an alcoholic beverage nearly every day?[Response options: Neither approve nor disapprove, somewhat disapprove, strongly disapprove]"</p> <p><b>Outcome Reported:</b> Percent somewhat or strongly disapproving.</p>		
	Age 12 - 20 - CY 2023		

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**Footnotes:**

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**Table 25 – Substance Use Disorder Prevention NOMs Domain: Employment/Education Measure: Perception of Workplace Policy**

A. Measure	B. Question/Response	C. Pre-populated Data	D. Supplemental Data, if any
Perception of Workplace Policy	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "Would you be more or less likely to want to work for an employer that tests its employees for drug or alcohol use on a random basis? Would you say more likely, less likely, or would it make no difference to you?[Response options: More likely, less likely, would make no difference]"</p> <p><b>Outcome Reported:</b> Percent reporting that they would be more likely to work for an employer conducting random drug and alcohol tests.</p>		
	Age 15 - 17 - CY 2023		
	Age 18+ - CY 2023		

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**Footnotes:**

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**Table 26 – Substance Use Disorder Prevention NOMs Domain: Employment/Education Measure: Average Daily School Attendance Rate**

A. Measure	B. Question/Response	C. Pre-populated Data	D. Supplemental Data, if any
Average Daily School Attendance Rate	<p><b>Source:</b> National Center for Education Statistics, Common Core of Data: <i>The National Public Education Finance Survey</i> available for download at <a href="http://nces.ed.gov/ccd/stfis.asp">http://nces.ed.gov/ccd/stfis.asp</a>.</p> <p><b>Measure calculation:</b> Average daily attendance (NCES defined) divided by total enrollment and multiplied by 100.</p>		
	School Year 2024		

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**Footnotes:**

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**Table 27 – Substance Use Disorder Primary Prevention NOMs Domain: Crime and Criminal Justice Measure: Alcohol Related Traffic Fatalities**

A. Measure	B. Question/Response	C. Pre-populated Data	D. Supplemental Data, if any
Alcohol-Related Traffic Fatalities	<p><b>Source:</b> National Highway Traffic Safety Administration Fatality Analysis Reporting System</p> <p><b>Measure calculation:</b> The number of alcohol-related traffic fatalities divided by the total number of traffic fatalities and multiplied by 100.</p>		
	CY 2024		

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**Footnotes:**

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**Table 28 – Substance Use Disorder Primary Prevention NOMs Domain: Crime and Criminal Justice Measure: Alcohol and Drug-Related Arrests**

A. Measure	B. Question/Response	C. Pre-populated Data	D. Supplemental Data, if any
Alcohol- and Drug-Related Arrests	<p><b>Source:</b> Federal Bureau of Investigation National Incident-Based Reporting System</p> <p><b>Measure calculation:</b> The number of alcohol- and drug-related arrests divided by the total number of arrests and multiplied by 100.</p>		
	CY 2024		

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**Footnotes:**

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**Table 29 – Substance Use Disorder Primary Prevention NOMs Domain: Social Connectedness Measure: Family Communications Around Drug and Alcohol Use**

A. Measure	B. Question/Response	C. Pre-populated Data	D. Supplemental Data, if any
1. Family Communications Around Drug and Alcohol Use (Youth)	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "Now think about the past 12 months, that is, from [DATEFILL] through today. During the past 12 months, have you talked with at least one of your parents about the dangers of tobacco, alcohol, or drug use? By parents, we mean either your biological parents, adoptive parents, stepparents, or adult guardians, whether or not they live with you." [Response options: Yes, No]</p> <p><b>Outcome Reported:</b> Percent reporting having talked with a parent.</p>		
	Age 12 - 17 - CY 2023		
2. Family Communications Around Drug and Alcohol Use (Parents of children aged 12-17)	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "During the past 12 months, how many times have you talked with your child about the dangers or problems associated with the use of tobacco, alcohol, or other drugs?" <sup>[a]</sup>[Response options: 0 times, 1 to 2 times, a few times, many times]</p> <p><b>Outcome Reported:</b> Percent of parents reporting that they have talked to their child.</p>		
	Age 18+ - CY 2023		

[a]NSDUH does not ask this question of all sampled parents. It is a validation question posed to parents of 12- to 17-year-old survey respondents. Therefore, the responses are not representative of the population of parents in a State. The sample sizes are often too small for valid reporting.  
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**Table 30 – Substance Use Disorder Primary Prevention NOMs Domain: Retention Measure: Percentage of Youth Seeing, or Listening to a Prevention Message**

A. Measure	B. Question/Response	C. Pre-populated Data	D. Supplemental Data, if any
Exposure to Prevention Messages	<p><b>Source Survey Item:</b> NSDUH Questionnaire: "During the past 12 months, do you recall [hearing, reading, or watching an advertisement about the prevention of substance use]<sup>[a]</sup>?"</p> <p><b>Outcome Reported:</b> Percent reporting having been exposed to prevention message.</p>		
	Age 12 - 17 - CY 2023		

[a]This is a summary of four separate NSDUH questions each asking about a specific type of prevention message delivered within a specific context  
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### Reporting Period Start and End Dates for Information Reported on SUPTRS BG Tables 31, 32, 33, 34

#### Reporting Period Start and End Dates for Information Reported on Tables 31, 32, 33, 34

Please indicate the reporting period for each of the following NOMS.

	Tables	A. Reporting Period Start Date	B. Reporting Period End Date
1.	Table 31 – Substance Use Disorder Primary Prevention Individual- and Population-Based Programs and Strategies – Number of Persons Served by Age, Sex, Race, and Ethnicity	1/1/2023	12/31/2023
2.	Table 32 - Substance Use Disorder Primary Prevention Number of Persons Served by Type of Intervention	12/31/2023	12/31/2023
3.	Table 33 - Number of Programs and Strategies by Type of Intervention	1/1/2023	12/31/2023
4.	Table 34 - Total Substance Use Disorder Primary Prevention Number of Evidence Based Programs/Strategies and Total SUPTRS BG Dollars Spent on Substance Use Disorder Primary Prevention Evidence-Based Programs/Strategies	10/1/2022	9/30/2024

### General Questions Regarding Prevention NOMS Reporting

**Question 1:** Describe the data collection system you used to collect the NOMs data (e.g., MDS, DbB, KIT Solutions, manual process).

Providers and coalitions who provide prevention services using SUPTRS funds are required to enter their services information into the Department's Performance Based Prevention System (PBPS). The data submitted into PBPS includes demographics, types of services, outcomes, group sizes, program descriptions and activities, and strategic planning materials. These submitted data are used to track and monitor utilization and performance of prevention services, as well as to compile Block Grant reports which describe the services being provided throughout the state. The Department contracts with Collaborative Planning Group Systems, Inc. for the maintenance of the system.

**Question 2:** Describe how your State's data collection and reporting processes record a participant's race, specifically for participants who are more than one race.

Indicate whether the State added those participants to the number for each applicable racial category or whether the State added all those participants to the More Than One Race subcategory.

Providers must select one of the racial categories identified in Table 31 when entering data into Florida's Performance Based Prevention System (PBPS). One of the categories available in PBPS is "More Than One Race". When the data is retrieved from the system, individuals submitted under "More Than One Race" are only counted under that category.

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**Table 31 – Substance Use Disorder Primary Prevention Individual- and Population-Based Programs and Strategies – Number of Persons Served by Age, Sex, Race, and Ethnicity**

The reporting period for Tables 31 is Calendar Year (CY) 2023 which coincides with the reporting period for the pre-populated prevention NOMs in Tables 21-30. We understand that some states have reported on the state fiscal year (SFY) or federal fiscal year (FFY) for these tables in past SUPTRS BG Reports. If your state is unable to report on the calendar year, please indicate in this footnote why you are unable to report on the calendar year and the steps the state intends to take to make calendar year reporting possible in future years.

	Individual-Based Programs and Strategies-Number of Persons Served	Population-Based Programs and Strategies-Number of Persons Reached
<b>A. Age</b>	<b>1,415,461</b>	<b>179,217,041</b>
0-5		
6-12		
13-17		
18-20	32,686	8,024,635
21-24	27,586	9,467,905
25-44	175,408	40,535,799
45-64	141,018	47,797,291
65-74		
75+		
Age Not Available <sup>a</sup>	1,038,763	73,391,411
<b>B. Sex</b>	<b>1,415,461</b>	<b>179,217,041</b>
Male	562,298	87,776,573
Female	755,163	91,430,382
Sex Not Available	98,000	10,086
<b>C. Ethnicity</b>	<b>1,415,461</b>	<b>179,217,041</b>
Hispanic or Latino	519,067	37,172,957
Not Hispanic or Latino	788,057	142,009,678
Ethnicity Not Available	108,337	34,406
<b>D. Race</b>	<b>1,415,461</b>	<b>179,217,041</b>
White	683,445	141,394,988
Black or African American	438,335	19,212,552
Native Hawaiian/Other Pacific Islander	2,475	110,749
Asian	18,240	2,888,324
American Indian/Alaska Native	5,109	654,131
More Than One Race	137,421	12,746,971

Some other Race		2,209,326
Race Not Available	130,436	

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**Footnotes:**

Florida's Performance Based Prevention System (PBPS) collects age demographics using age categories that are different than required by this report. For the purpose of completing the table, data that fell outside of the identified age categories were added to the "age not known" category. The complete data set as reported out of the PBPS system is listed below.

- 0-4: 6,390
- 5-11: 268,066
- 12-14: 473,318
- 15-17: 200,805
- 18-20: 32,686
- 21-24: 27,586
- 25-44: 175,408
- 45-64: 141,018
- 65+: 84,848
- Unknown: 5,336

## E: Performance Data and Outcomes

**Table 32 - Substance Use Disorder Primary Prevention Number of Persons Served by Type of Intervention**

The reporting period for Tables 32 is Calendar Year (CY) 2023 which coincides with the reporting period for the pre-populated prevention NOMs in Tables 21-30. We understand that some states have reported on the state fiscal year (SFY) or federal fiscal year (FFY) for these tables in past SUPTRS BG Reports. If your state is unable to report on the calendar year, please indicate in this footnote why you are unable to report on the calendar year and the steps the state intends to take to make calendar year reporting possible in future years.

### Number of Persons Served by Individual- or Population-Based Program or Strategy

Intervention Type	A. Individual-Based Programs and Strategies	B. Population-Based Programs and Strategies
1. Universal Direct		N/A
2. Universal Indirect	N/A	
3. Selective		N/A
4. Indicated		N/A
<b>5. Total</b>	<b>0</b>	<b>\$0.00</b>

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**Footnotes:**

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**Table 33 - Number of Programs and Strategies by Type of Intervention**

The reporting period for Tables 33 is Calendar Year (CY) 2023 which coincides with the reporting period for the pre-populated prevention NOMs in Tables 21-30. We understand that some states have reported on the state fiscal year (SFY) or federal fiscal year (FFY) for these tables in past SUPTRS BG Reports. If your state is unable to report on the calendar year, please indicate in this footnote why you are unable to report on the calendar year and the steps the state intends to take to make calendar year reporting possible in future years.

**Definition of Evidence-Based Programs and Strategies:** Evidence-Based Prevention Programs (EBPs) are designed to prevent substance use and related negative outcomes. Most strategies are designed to be delivered in specific settings, to specific age groups, and to specific population. EBPs are prevention strategies that were reported as effective for your substance and population of focus. EBPs should be identified by one of three ways:

1. Inclusion in a formal registry of evidence-based interventions such as federal, state or foundation registries
2. Being Reported (with positive effects) in a peer-reviewed journal
3. Documentation of effectiveness based on one or more of the following guidelines:
  - **Guideline 1:**  
The intervention is connected to a theory of change based upon a clear logic or conceptual model. The intervention should be informed by risk and protective factors research.
  - **Guideline 2:**  
The intervention is similar in content and structure to interventions that appear in registries and/or the peer-reviewed literature.
  - **Guideline 3:**  
The intervention is supported by documentation that it has been effectively implemented multiple times with results that show a consistent pattern of credible and positive effects.
  - **Guideline 4:**  
The intervention is reviewed and deemed appropriate by a panel of informed prevention experts that may include: well-qualified prevention researchers who are experienced in evaluating prevention interventions similar to those under review; local prevention practitioners; or key community leaders as appropriate, e.g., officials from law enforcement and education sectors or elders within indigenous cultures.

1. Describe the process the State will use to implement the guidelines included in the above definition.

The Department is committed to implementing SAMHSA's guidelines to identify evidenced-based practices. SAMHSA's EBP guidelines are included in the Department's Guidance Document 1 (Evidence-Based Guidelines). This guidance document is provided to each Managing Entity (ME) to be shared with Network Service Providers and identifies SAMHSA's Evidence-Based Practices Resource Center, Blueprints for Healthy Youth Development, OJJDP's Model Programs, the California Evidence-Based Clearinghouse for Child Welfare, and the University of Washington Alcohol and Drug Abuse Institute's EBP Substance Use Database, as approved registries for identifying and selecting EBPs. Providers who wish to implement a program that is not in one of these registries must provide documentation required by the Department and receive approval.

2. Describe how the state collected data on the number of programs and strategies. What is the source of these data?

Data used to populate this report is collected in Contract Template 2 and provided to the Department by each ME.

	A. Universal Direct	B. Universal Indirect	C. Universal Total	D. Selective	E. Indicated	F. Total
1. Number of Evidence-Based Programs and Strategies Funded	64,830	5,683	70,513	8,407	24,122	103,042
2. Total number of Programs and Strategies Funded	71,423	12,432	83,855	9,241	24,527	117,623
3. Percent of Evidence-Based Programs and Strategies	90.77%	45.71%	84.09%	90.98%	98.35%	87.60%

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**Footnotes:**

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**Table 34 - Total Substance Use Disorder Primary Prevention Number of Evidence Based Programs/Strategies and Total SUPTRS BG Dollars Spent on Substance Use Disorder Primary Prevention Evidence-Based Programs/Strategies**

The reporting period for table 34 is the 24-month expenditure period of the FFY 2023 SUPTRS BG award.

	<b>Total Number of Evidence-Based Programs/Strategies for IOM Category Below</b>	<b>Total Substance Use Block Grant Dollars Spent on evidence-based Programs/Strategies</b>
Universal Direct	Total # 64,830	\$7,429,383.00
Universal Indirect	Total # 5,683	\$6,588,321.00
Selective	Total # 8,407	\$7,008,852.00
Indicated	Total # 24,122	\$2,336,284.00
Unspecified	Total # 0	\$0.00
	<b>Total EBPs: 103,042</b>	<b>Total Dollars Spent: \$23,362,840.00</b>

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**Footnotes:**

## E: Performance Data and Outcomes

### Prevention Attachments

#### Submission Uploads

FFY 2026 Prevention Attachment Category A:		
File	Version	Date Added

FFY 2026 Prevention Attachment Category B:		
File	Version	Date Added

FFY 2026 Prevention Attachment Category C:		
File	Version	Date Added

FFY 2026 Prevention Attachment Category D:		
File	Version	Date Added

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**Footnotes:**