



State of California—Health and Human Services Agency  
Department of Health Care Services



GAVIN NEWSOM  
GOVERNOR

DATE: January 22, 2021

Behavioral Health Information Notice No: 21-007

TO: California Alliance of Child and Family Services  
California Association for Alcohol/Drug Educators  
California Association of Alcohol & Drug Program Executives, Inc.  
California Association of DUI Treatment Programs  
California Association of Social Rehabilitation Agencies  
California Consortium of Addiction Programs and Professionals  
California Council of Community Behavioral Health Agencies  
California Hospital Association  
California Opioid Maintenance Providers  
California State Association of Counties  
Coalition of Alcohol and Drug Associations  
County Behavioral Health Directors  
County Behavioral Health Directors Association of California  
County Drug & Alcohol Administrators

SUBJECT: Use of Substance Use Prevention And Treatment Block Grant (SABG)  
Funds for certain Human Immunodeficiency Virus (HIV) Early  
Intervention Services (EIS).

PURPOSE: To communicate that SABG funds may be used for HIV EIS, as  
outlined in this Behavioral Health Information Notice

REFERENCE: Assistant Secretary Elinore McCance-Katz's ["Dear Colleague" letter](#)  
March 2020 request letter July 2020 approval letter; 45 Code of  
Federal Regulations (CFR) Part 75; 45 CFR Part 96

**BACKGROUND:**

Behavioral health treatment communities have long been aware of the intersection between substance misuse, mental disorders, and diseases such as tuberculosis and HIV. HIV is a top leading cause of death in the U.S. for people aged 25-44, and the Substance Abuse and Mental Health Services Administration's (SAMHSA) National Survey on Drug Use and Health reports that people living with HIV were two times more likely to have a substance use disorder (SUD) than the general population.

States that receive funds from the SABG can be "designated states" if their rate of cases of acquired immune deficiency syndrome (AIDS) is 10 or more such cases per

100,000 individuals. In this case, “designated states” are allowed to expend SABG funds on HIV early intervention treatments and programs. In Federal Fiscal Year 2016, the SAMHSA Center for Substance Abuse Treatment notified DHCS that California no longer met the threshold as defined in Title 42 United States Code, Section 300x-24(b)(2).

In 2019, SAMHSA urged their grantees to address the HIV epidemic in populations affected by SUD by integrating new, oral fluid HIV testing with on-site treatment. In response, DHCS requested permission to use SABG funds for these tests, and received approval from SAMHSA in June 2020. No additional SABG funding has been granted to California for these activities.

**POLICY:**

Beginning in State Fiscal Year (SFY) 2021-22, California will allow counties to use up to five percent of their total SFY SABG allocation for oral fluid rapid HIV testing as well as HIV pre- and post-test counseling. The five percent limit is federally imposed, and counties that exceed this limitation will be noncompliant with this federal requirement.

Instead of a traditional set-aside, in which a portion of the county’s total SFY SABG allocation is earmarked to be spent only on certain services and activities, DHCS will establish an annual HIV EIS allowance for each county. Counties may use their Discretionary SABG funds for HIV EIS activities up to the predetermined allowance amount. The HIV EIS allowance amount will be conveyed to counties in their annual SABG County Application package, as well as in the annual preliminary and final DHCS SABG Allocation Information Notices.

County use of SABG funds for HIV EIS will be voluntary and ultimately conducted only with the informed consent of the individual. Additionally, HIV EIS will not be a requisite to receiving treatment services for SUD or any other services for individuals.

Participating counties must comply with all relevant block grant laws and regulations.

**Claiming Reimbursement for HIV EIS**

DHCS will provide counties with new service codes for HIV EIS upon release of the first SABG quarterly invoices for SFY 2021-22. Counties must use HIV EIS service codes to record all such expenditures in their quarterly invoices throughout the SFY. As with other SABG service codes used in quarterly invoices, the HIV EIS service codes must also be used in the SUD Cost Reporting System for final settlement of county SABG costs.

Additional details regarding cost reimbursement and invoice submittal policies and procedures are included in the annual SABG County Application.

### **Oversight**

DHCS will continue to monitor counties and participating programs to ensure compliance with block grant laws and regulations. These laws and regulations are inclusive of 45 CFR §96.128, 45 CFR §96.135 regarding restrictions on grant expenditures, and 45 CFR §96.137 regarding payment. Any county that exceeds their five percent HIV EIS allowance will not receive reimbursement with SABG funds for costs that exceed their allowance. Counties will be responsible for all costs exceeding the five percent HIV EIS allowance.

### **Definitions**

**Oral Fluid Rapid HIV Test:** An oral-based test in which medical professionals test at-risk individuals for HIV, the virus that causes AIDS, with results within minutes.

### **Pre- and Post-Test Counseling:**

Persons who test positive for HIV should be counseled, either on-site or through referral, concerning the behavioral, psychosocial, and medical implications of HIV infection. Health care providers should assess the need for immediate medical care and psychosocial support. Providers should link persons with newly diagnosed HIV infection to services provided by healthcare personnel experienced in the management of HIV infection. Additional services that might be needed include reproductive counseling, risk-reduction counseling, and case management. Providers should follow up to ensure that patients have received services for any identified needs. Persons with HIV infection should be educated about the importance of ongoing medical care and what to expect from these services.<sup>1</sup>

The provisions of this notice are not intended to abrogate any provisions of law or regulations, or any standards existing or enacted during the current block grant funding agreements with counties.

Questions regarding this BHIN may be directed to [SABG@dhcs.ca.gov](mailto:SABG@dhcs.ca.gov).

Sincerely,

Original signed by

Marlies Perez, Chief  
Community Services Division

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<sup>1</sup> Workowski, Kimberly A, and Gail A Bolan. "HIV Infection: Detection, Counseling, and Referral-2015 STD Treatment Guidelines." *Centers for Disease Control and Prevention*, Centers for Disease Control and Prevention, 4 June 2015, [www.cdc.gov/std/tg2015/hiv.htm](http://www.cdc.gov/std/tg2015/hiv.htm).