

**Request for Applications (RFA) Announcement:
Substance Use Prevention Treatment Recovery Services (SUPTRS)**

The State of Nevada, through the Department of Health and Human Services (DHHS), Division of Public and Behavioral Health (DPBH), Bureau of Behavioral Health, Wellness and Prevention (BBHWP) is pleased to announce the availability of funding through the SUPTRS Block Grant and Nevada State General Funds to fund substance use prevention treatment recovery services in Nevada.

The SUPTRS Block Grant award period will run from October 1, 2025, through September 30, 2027. This will be divided into two budget periods:

- Budget Period #1: October 1, 2025-September 30, 2026.
- Budget Period #2: October 1, 2026-September 30, 2027.

This application will be used to fund both budget periods. Please use the budget template to create two budgets, one for Budget Period #1 and one for Budget Period #2.

The Nevada State General Funds award period will run from January 1, 2026, through June 30, 2027. This will be divided into two budget periods:

- Budget Period #1: January 1, 2026-June 30, 2026.
- Budget Period #2: July 1, 2026- June 30, 2027.

The Nevada State General Funds support the SUPTRS Block Grant through a Maintenance of Effort and the expectation is that all subrecipients of future funding must apply for the RFA.

Background:

The Substance Use Prevention Treatment Recovery Services (SUPTRS) section of the Bureau of Behavioral Health Wellness and Prevention (BBHWP) is funded by the SUPTRS Block Grant and Nevada State General Funds. The SUPTRS Block Grant is provided through the Substance Abuse and Mental Health Services Administration (SAMHSA). SUPTRS Block Grant provides funding for Substance Use Prevention Treatment Recovery Services (SUPTRS). It is available to all 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and 6 Pacific jurisdictions.

SUPTRS funding has a core objective to support grantees in carrying out substance use services. The SUPTRS Block Grant is authorized by Title 45 of the Code of Federal Regulations Part 96 Subpart L (45 CFR § 96.120 to 45 CFR § 96.137). SUPTRS Block Grant funds can be used for both new and innovative programs or be used to maintain current programs. The SUPTRS Block Grant programs will run on federal fiscal year from October 1, 2025, to September 30, 2026.

The State of Nevada General Funds help support the SUPTRS Block Grant through a Maintenance of Effort. The State General Funds that are used to provide the Maintenance of Effort for SUPTRS must be aligned with the State Fiscal Year. State General Funds will start January 1, 2026, and run until June 30, 2026.

By utilizing the latest SUPTRS funding, the State of Nevada DHHS DPBH BBHWP is seeking applications from community stakeholders to support the state's efforts to provide substance use prevention treatment recovery services to Nevadans, including the innovative programs, maintenance of programs, and services that fill service gaps.

Funding Priorities:

While SUPTRS funds are flexible for both new and innovative programs or to maintain current programs, per requirements by SAMHSA, they must be used for targeted populations.

Targeted Populations:

What application type are you applying for? (Select only one per an application. See next page for definitions.)*

- Primary Prevention
- Secondary / Tertiary Prevention
- Treatment Services
- Recovery / Harm Reduction

**Each type must be a separate application.*

*What geographical area of Nevada will the program serve**?*

- ☐ Nevada – Statewide.
- ☐ Carson City
- ☐ Churchill County
- ☐ Clark County
- ☐ Douglas County
- ☐ Elko County
- ☐ Esmeralda County
- ☐ Eureka County
- ☐ Humboldt County
- ☐ Lander County
- ☐ Lincoln County
- ☐ Lyon County
- ☐ Mineral County
- ☐ Nye County
- ☐ Pershing County
- ☐ Storey County
- ☐ Washoe County
- ☐ White Pine County

*** Must check at least one box.*

Definitions of Application Type:

- **Primary Prevention** is defined as the interventions that aim to prevent substance use disorders or mental health problems from ever developing. This includes strategies to reduce risk factors and strengthen protective factors at individual, relational, community, and societal level.
- **Secondary Prevention** is defined as interventions aimed at early identification and intervention for individuals who exhibit early signs or symptoms of substance misuse or who are at risk for developing substance use disorders. This level of prevention focuses on halting or slowing the progression of substance misuse and limiting potential negative consequences.
- **Tertiary prevention** is defined as focus on minimizing the negative impacts of an existing disease or injury. It aims to reduce disability, improve quality of life, and maximize life expectancy for individuals already affected by a condition. This involves strategies to manage chronic conditions, rehabilitate from injuries, and prevent complications.
- **Treatment** is for substance use disorders as any planned, intentional intervention designed to help an individual achieve and maintain sobriety, physical and mental health, and a maximum functional ability. This includes various components like physical and psychiatric evaluations, detoxification, counseling, self-help support, and medication-assisted therapy.
- **Recovery** is defined as a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential. It's not a singular event but a journey of continual growth, with occasional setbacks, and a focus on holistic wellness. Recovery is individualized, requiring a supportive community and access to resources. This includes Recovery Housing.
- **Harm Reduction** is defined as a practical and transformative approach that incorporates community-driven public health strategies — including prevention, risk reduction, and health promotion — to empower People Who Use Drugs (PWUD) and their families with the choice to live healthier, self-directed, and purpose-filled lives.

Targeted Programs:

Each SMART Goal must tie to a Strategic Plan Objective Priority Area.

What objective of the Strategic Plan is the SMART goal meeting?

- ☐ Integrating Primary Care, including Federally Qualified Health Centers, primary care physicians (early intervention). Promote Integrated Care Models: Embed screening brief intervention, and referral services into primary care to improve early detection and reduce fragmented care.
- ☐ Addressing Transportation Gaps. Expanding Local Access Points: increase the availability of substance use services in underserved areas through transportation support, mobile units and telehealth options.
- ☐ Increasing Access to Treatment with Mobile Units. Supporting Person-Centered Service Models. Encouraging flexible, individualized approaches to treatment that meet people where they are and reduce barriers to engagement.
- ☐ Expanding Substance Use Prevention Programming in Nevada Schools. Expanding Community Education Efforts. Investing in ongoing, accessible education campaigns that increase awareness of substance use risks, available services, and pathways to recovery-especially for youth and families.
- ☐ Enhancing Peer Workforce Pipelines and Utilization. Utilizing peers to address health equity in veterans, LGB, seniors, societal re-entry from incarceration. Strengthening Peer and Community-Based Supports. Supporting the growth and sustainability of peer-led programs, recovery-friendly spaces, and community outreach models that build trust in long-term engagement.
- ☐ Enhancing Recovery Friendly Supports for Employment including job training, second-chance hiring, and wraparound employment.
- ☐ Enhancing Homelessness outreach and programming.
- ☐ Addressing Alcohol Use.
- ☐ Enhancing Harm Reduction Strategies. Increasing Access to Harm Reduction Programs. Expanding Naloxone distribution, needle exchange programs, and overdose prevention education to rural and underserved communities to address the immediate risks of opioid and substance use. Each application must address this in one of the goals.
- ☐ Promoting and Disseminating of Standardized State Anti-Stigma Campaign. Each application must address this in one of the goals.

Unallowable Expenses and Activities***:

When applying for Nevada SUPTRS funding, it is important to ensure that the proposed budget and activities align with SAMHSA's guidelines for allowable expenses. The following is a list of unallowable expenses and activities that cannot be funded under this grant program:

- 1. Advertising And Public Relations:** Advertising and public relations costs are generally unallowable except under the instances allowed by federal regulations such as program outreach and other specific purposes necessary to meet the requirements of the federal award.

2. **Automobile Costs for Personal Use:** The portion of automobile costs furnished by the entity that relates to personal use by employees (including transportation to and from work) is unallowable as either fringe benefit or indirect costs.
3. **Contingency Funds:** Contingency funds or funds set aside for events whose occurrence cannot be foretold with certainty as to time, intensity, or assurance of their happening are unallowable under non-construction grants.
4. **Entertainment:** Costs of entertainment, including amusement, diversion, and social activities and any associated costs are unallowable, except where specific costs that might otherwise be considered entertainment have a programmatic purpose and are authorized either in the approved budget for the Federal award or with SAMHSA's prior written approval.
5. **Goods and Services for Personal Use by the non-Federal entity's employees:** Costs for these items are unallowable.
6. **Incentive Compensation:** Generally unallowable; however, allowable for employees only if based on cost reduction, or efficient performance, suggestion awards, safety awards, etc., to the extent that the overall compensation is reasonable and paid or accrued based on an agreement between the organization and the employees before the services were rendered, or based on an established plan followed by the organization so consistently as to imply an agreement to make such payment.
7. **Lobbying, Advocacy and Political Activities:** The costs of certain influencing activities (i.e., attempts to influence the enactment or modification of any pending legislation through communication with any member or employee of the state legislature, or with any government official or employee concerning a decision to sign or veto enrolled legislation) associated with obtaining grants, contracts, cooperative agreements, or loans is unallowable. Reference 45 CFR 93.
8. **Major Alteration and Renovation (A&R):** Payment for the purchase or construction of any building or structure to house any part of the program is unallowable. Minor A&R of existing facilities, if necessary and appropriate for the project, may be authorized for up to 25 percent of the total approved budget (direct and indirect costs) for a budget period, or \$150,000, whichever is less. Minor A&R may not include a structural change (e.g., to the foundation, roof, floor, or exterior or loadbearing walls of a facility, or extension of an existing facility) to achieve the following: Increase the floor area; and/ or, change the function and purpose of the facility. SAMSHA must approve all minor A&R.
9. **Meals, Food, and Beverages:** Meals are unallowable unless they are a part of per diem. Costs related to social activities with alcohol and unrelated meals or refreshments, are not allowable. This includes expenses related to food or beverages for meetings or events.
10. **Promotional Materials:** Funds must not be used to pay for promotional items and memorabilia including, but not limited to, gifts, souvenirs, clothing, and commemorative items such as pens, mugs/cups, folders/folios, lanyards, and conference bags.
11. **Marijuana Restriction:** Funds may not be used to purchase, prescribe, or provide marijuana or treatment using marijuana. See, e.g., 45 CFR 75.300(a) (requiring HHS to ensure that Federal funding is expended in full accordance with U.S. statutory and public policy requirements); 21 U.S.C. 812(c)(10) and 841 (prohibiting the possession, manufacture, sale, purchase or distribution of marijuana).
12. **The Trafficking Victims Protection Act of 2000 (22U.S.C. 7104(G)),** as amended, and 2 C.F.R. 175: The Trafficking Victims Protection Act of 2000 authorizes termination of financial assistance provided to a private entity, without penalty to the Federal government, if the recipient or subrecipient engages in certain activities related to trafficking in person.

Termination of the award, without penalty, will occur, if a private entity recipient, or a private entity subrecipient, or their employees:

- a) Engage in severe forms of trafficking in persons during the period of time that the award is in effect;
- b) Procure a commercial sex act during the period of time that the award is in effect; or,
- c) Use forced labor in the performance of the award or subawards under the award.

The text of the full award term is available at 2 C.F.R. 175.15(b).

- 13. Supplanting Existing Funds:** Funds must supplement, not replace, existing state or local funds. Using SUPTRS funds to replace state or local funds for ongoing activities that would otherwise be funded through those sources is strictly prohibited.
- 14. Construction and Major Capital Improvements:** Funds generally cannot be used for construction, renovations, or capital improvements of facilities. This includes the purchase of improvement of land, or the cost of equipment of systems intended to be capitalized.
- 15. Direct Payments to Recipients of Services:** Grant funds cannot be used for direct payments or cash incentives to individuals receiving services.
- 16. Expenses Related to Fines and Penalties:** Funds may not be used to cover fines, penalties, or legal fees resulting from the violation of, or failure to comply with, federal, state, or local laws and regulations.
- 17. Reimbursable Services Covered by Other Programs:** Services that are reimbursable through other sources such as Medicaid, Medicare, or private insurance cannot be covered by SUPTRS funds. It is the applicant's responsibility to understand Medicaid reimbursement opportunities and models. Medicaid-reimbursable activities are not allowed activities under the RFA and applications containing such activities may be disqualified.
- 18. Fundraising Activities:** Funds cannot be used for fundraising activities, including the production of promotional materials or events intended to raise additional funds.
- 19. Debt Retirement:** Funds cannot be used for the repayment of debts or the payment of interest or late fees on outstanding debts.

In addition, funding may not be used to pay staff salaries for any Medicaid-reimbursable services. If services are to be delivered to uninsured individuals, a fee for service model may be funded through this RFA.

***This list is not exhaustive.

Requirements for Data Collection and Reporting:

Data Collection and Reporting Requirements

Indicate in the application how data collection will be done and how reporting requirements will be met. All Data Sources must be cited.

Some examples of data collection include but are not limited to: WITS Reports, Treatment Episode Data System (TEDS) Reports, Quarterly Reports, Annual Reports, Requests for Reimbursements Supporting Documentation, Monthly Technical Assistance Call Reports.

Treatment Episode Data System (TEDS) Reporting

The subrecipient is required to regularly report Treatment Episode Data Set (TEDS) data to the State of Nevada in a complete and timely manner. The grantee is required to collect and report data on all Substance Use Disorder (SUD) treatment admissions and discharges, as a minimum, for all persons who received services in the programs or facilities funded by SUPTRS BG. The subrecipient is required to comply with all required reporting elements, including those used for annual monitoring of the grantee's National Outcome Measures (NOMs).

Training and Technical Assistance:

Upon award and throughout the subgrant period, subgrantees will receive technical assistance and training, as needed, from a BBHWP staff, to effectively implement and monitor the program.

Eligibility:

SUPTRS funding is designed to support a wide range of entities committed to combating substance use across the state. To ensure that funded programs are effective and sustainable, SUPTRS funding is available to various types of organizations that have demonstrated the capacity to deliver impactful services. This includes:

Nevada-Based Government Agencies: County health departments, city governments, state agencies, and other local government entities may apply for SUPTRS funding to support prevention, treatment, and recovery efforts at the community level. These entities often work closely with healthcare providers, law enforcement, and community-based organizations to implement programs and services.

Community-Based Organizations: Nonprofit organizations, community health centers, substance use treatment providers, tribal entities, and other community-based organizations may apply for SUPTRS funding to expand access to services, provide education and outreach, and support individuals affected by substance use disorders.

Healthcare Providers: Hospitals, clinics, and healthcare systems may apply for SUPTRS funding to combat substance use disorders through prevention, treatment, and recovery services. These entities play a crucial role in delivering healthcare services and addressing the needs of individuals with substance use disorder.

Coalitions and Partnerships: Collaborative efforts involving multiple stakeholders, including government agencies, healthcare providers, community organizations, and advocacy groups, may apply for SUPTRS funding to implement comprehensive strategies to address substance use disorder. These partnerships leverage diverse expertise and resources to maximize impact.

Experience Requirement: SAMHSA requires that each mental health/substance use disorder prevention, treatment, recovery support and harm reduction organization must have at least two years of experience providing relevant services as of July 1, 2024. This ensures that the organizations have established a track record in delivering services before they can receive SUPTRS funding.

It is the applicant's responsibility to understand Medicaid reimbursement opportunities and models. **Medicaid-reimbursable activities are not allowed activities** under the RFA and applications containing such activities may be disqualified.

The Behavioral Health Certifications for Excellence in Nevada (BHCEN) Certification (previously SAPTA Certification) is required at time of application or within 6 months. This applies to Substance Use Prevention and Treatment activities, as outlined with **NAC 458.103 Certification required to receive funding from Division. (NRS 439.200, 458.025)** A program administered by the Division must adhere to [Chapter 458](#) of NRS for the prevention or treatment of substance-related disorders.

Informational Webinar:

An informational webinar will be held on May 7, 2025, at 2 PM PST to provide an overview of the SUPTRS RFA application requirements. This webinar will offer potential applicants an opportunity to learn more about the funding process, key application components, and eligibility criteria. Additionally, there will be a Q&A session to address any questions. We encourage all interested applicants to attend this webinar to ensure a thorough understanding of the application process.

Details on how to join the Webinar for RFA Nevada Substance Use Prevention Treatment Recovery Services (SUPTRS) are as follows:

- **Microsoft Teams:** Meeting ID: 213 065 664 398 Passcode: MJ6qV2xN
- **Dial in by phone** +1 775-321-6111, 860303742# Phone conference ID: 860 303 742#

Letters of Interest and Application Deadlines:

Letter of Interest

Although not mandatory, entities interested in applying for funding are asked to submit a short Letter of Interest (LOI) to the Substance Use Prevention Treatment Recovery Services (SUPTRS) section ahead of submitting the full application by May 15, 2025, at 11:59 PM PST. The LOI should include:

- Name of Organization
- Contact Information
- Identify which targeted population/program your project addresses
- Project Period Dates
- Estimated Funding Request

The Letter of Interest (LOI) is submitted electronically via [Smartsheets LOI Form](#) by May 15, 2025 at 11:59 PM PST.

Application

Applications must be submitted electronically via [Smartsheets Application Form](#) by May 31, 2025, at 11:59 PM PST.

A complete application packet for submission includes the following:

- Attachment #1: [Application](#) (required)
- Attachment #2: [Scope Template](#) (required)
- Attachment #3: [Budget Template](#) (required)
- Attachment #4: [Funding Acknowledgement Form](#) (required)
- Attachment #5: Resumes of Key Personnel (required)
- Attachment #6: Organizational Chart (required)

If any required document is missing from the submission of the application packet, then the Bureau of Behavioral Health Wellness and Prevention has the right to deny the application.

Late applications are not guaranteed funding during this budget period. However, they may be considered for inclusion in an application pool for potential funding opportunities at a later date, subject to the availability of funds and the priorities of the program.

Contact Information:

For any questions regarding the application process, please submit your question to [FAQ](#).