



Breaking News: Senate Releases Fiscal Year 2026 Labor, Health and Human Services, Education and Related Agencies Appropriations Bill

August 1, 2025

This week, the Senate released its Fiscal Year (FY) 2026 Labor, Health and Human Services, Education and Related Agencies (LHHS) appropriations bill. The bill rejects proposals from the President's Budget Request (PBR), which sought to:

- Eliminate the **Strategic Prevention Framework/Partnership for Success (SPF/PFS)** grant program.
- Eliminate the **Sober Truth on Preventing Underage Drinking (STOP) Act** programs.
- Combine the **Substance Use Prevention, Treatment and Recovery Services (SUPTRS)** block grant with the **State Opioid Response (SOR)** program and the **Community Mental Health Services (CMHS)** block grant into a new **Behavioral Health Innovation Block Grant**.
- Eliminate the **CDC's Office on Smoking and Health**.
- Reorganize the **National Institutes of Health (NIH)** into 8 new centers, including merging the **National Institute on Alcohol Abuse and Alcoholism (NIAAA)**, **National Institute on Drug Abuse (NIDA)**, and **National Institute of Mental Health (NIMH)** into a new **National Institute on Behavioral Health**.

It is important to note that the numbers in the FY 2026 Senate LHHS appropriations bill are **not final**. The House still must release its version of the bill, a conference committee must eventually resolve differences between the House and Senate versions, and the President must sign the bills into law.

SAMHSA

Center for Substance Abuse Prevention (CSAP)

- **No funding was cut in CSAP.**

- **CSAP Programs of Regional and National Significance (PRNS): \$236.8 million** (level with FY 2025).
 - **Sober Truth on Preventing Underage Drinking (STOP) Act: \$14.5 million** (level with FY 2025), including:
 - \$11 million for the STOP Act Enhancement Grant Program
 - \$2.5 million for the Adult-Oriented National Media Campaign
 - \$1 million for the Interagency Coordinating Committee for the Prevention of Underage Drinking (ICCPUD)
 - **Strategic Prevention Framework/Partnership for Success (SPF/PFS) Programs: \$135.484 million** (level with FY 2025), including:
 - \$125.484 million for the SPF/PFS Grant Program
 - \$10 million for the SPF-RX Program

Report Language:

- On CSAP & SUPTRS prevention set-aside: *“The Committee continues to instruct SAMHSA to ensure that all the funding provided to CSAP, as well as the 20 percent prevention set aside in the Substance Use Prevention, Treatment and Recovery Services Block Grant, be used only for evidence-based substance use prevention activities.”*
- On Strategic Prevention Framework: *“The Committee recognizes that substance use prevention is underutilized relative to its ability to prevent and delay substance use initiation, as well as slow the pathways to addiction and overdose, and that demand for community-based primary prevention resources far outpaces available funding.”*

Center for Substance Abuse Treatment (CSAT)

- **PRNS: \$561.2 million** (\$15 million cut from FY 2025).
- **SOR Grants: \$1.595 billion** (+\$20 million above FY 2025).
- **SUPTRS Block Grant: \$2.028 billion** (+\$20 million above FY 2025).

Report Language:

“The Committee also notes the importance of the block grant’s 20 percent prevention set-aside, which is a vital source of primary prevention funding.”

Center for Mental Health Services (CMHS)

- **Topline: \$2.8 billion** (+\$24.9 million over FY 2025).
 - **CMHS Block Grant: \$1.007 billion** (level funding).
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Centers for Disease Control and Prevention (CDC)

- **Office of Smoking and Health:** \$246.5 million (level with FY 2025).
 - **Excessive Alcohol Use:** \$4 million (\$2 million less than FY 2025).
 - **Opioid Overdose Prevention & Surveillance (DFC program operations):** \$505.579 million (level with FY 2025).
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National Institutes of Health (NIH)

- Senate **did not accept PBR's proposed NIH reorganization.**
 - **NIDA:** \$1.662 billion (level with FY 2025).
 - **NIAAA:** \$595.3 million (level with FY 2025).
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Health Resources and Services Administration (HRSA)


- **Rural Communities Opioid Response Program:** \$145 million (level with FY 2025).
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Conclusion

The Senate's FY 2026 LHHS appropriations bill represents an important step in the appropriations process. It demonstrates a commitment to protecting funding and agencies central to substance use prevention, treatment, and recovery across SAMHSA, CDC, NIH, and HRSA.

While this progress is encouraging, these numbers are **not final**. The House must release its version, negotiations must reconcile differences, and the President must sign the final bill. CADCA will continue to **advocate strongly** and keep the field informed as the FY 2026 process moves forward.

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