Why OIG Did This Audit
In 2017, HHS declared the opioid epidemic in the United States a public health emergency. The misuse of and addiction to opioids—including prescription pain relievers, heroin, and synthetic opioids such as fentanyl—is a serious national crisis that affects public health as well as social and economic welfare. In 2018 alone, there were more than 46,000 opioid-related overdose deaths in the United States. As part of its efforts to combat the opioid crisis, the Health Resources and Services Administration (HRSA) awarded $200.5 million in Access Increases in Mental Health and Substance Abuse Services (AIMS) grants to health centers nation-wide. OIG audited HRSA’s oversight of AIMS supplemental grant funding as part of our oversight on the integrity and proper stewardship of Federal funds used to combat the opioid crisis.

Our objective was to determine whether HRSA followed its policies and procedures for awarding and monitoring AIMS grants.

How OIG Did This Audit
HRSA awarded AIMS supplemental grant funds totaling $200.5 million to 1,178 health centers for the period September 1, 2017, through August 31, 2018. From the 1,178 health centers, we selected a nonstatistical sample of 30 health centers to determine whether HRSA followed its policies and procedures for awarding and monitoring AIMS grants.

HRSA’s Monitoring Did Not Always Ensure Health Centers’ Compliance With Federal Requirements for HRSA’s Access Increases In Mental Health and Substance Abuse Services Supplemental Grant Funding

What OIG Found
HRSA followed its policies and procedures for awarding AIMS grants but did not always follow its policies and procedures when monitoring health centers’ compliance with supplemental funding requirements. Specifically, HRSA did not follow its policies and procedures when monitoring health centers’ progress toward meeting AIMS grant award conditions related to ongoing and one-time funding and did not always respond timely to health centers’ requests to carry over grant funds. HRSA officials stated that monitoring of health centers’ progress toward meeting AIMS supplemental funding requirements is done in conjunction with its general monitoring of health centers through annual reviews. According to HRSA officials, HRSA did not always respond timely to health centers’ requests to carry over grant funds because of other priorities, such as awarding other grants to health centers.

What OIG Recommends and HRSA Comments
We recommend that HRSA (1) assess health centers’ progress toward meeting AIMS grant award conditions to increase personnel and patients’ access to care and follow up with appropriate corrective action, such as providing technical assistance or discontinuing or reducing future AIMS grant funds; (2) review Budget Period Progress Reports to identify health centers that did not report progress toward meeting their health information technology or training goals; and (3) ensure that it follows its policy for timely responding to health centers’ requests to carry over grant funds.

In written comments on our draft report, HRSA partially concurred with our findings and recommendations and described actions that it has taken or plans to take to address them. This includes reducing or discontinuing ongoing AIMS funding for certain health centers, developing electronic systems to collect interim progress reports (e.g., tri-annual reporting) to support more timely monitoring of AIMS funding, and monitoring its responsiveness to prior approval requests.

The full report can be found at https://oig.hhs.gov/oas/reports/region2/21802010.asp.