WASHINGTON — President Trump on Thursday will announce he is directing his Department of Health and Human Services to declare the opioid crisis a public health emergency, senior administration officials said, taking long-anticipated action to address a rapidly escalating epidemic of drug use in the United States.

The move falls short of Mr. Trump’s sweeping promise to declare a national emergency on opioids, which would have triggered the rapid allocation of federal funding to address the issue, and does not on its own release any money to deal with the drug abuse that claimed more than 59,000 lives in 2016.

But it would allow some grant money to be used for a broad array of efforts to combat opioid abuse, and would ease certain laws and regulations to address it.

Mr. Trump’s directive, to be announced in an address at the White House on Thursday afternoon before he signs a presidential memorandum on opioids, would fulfill a vow that he made when he assumed office to make tackling opioid abuse one of his top priorities. But he has so far taken limited action to carry that out.

The officials argued that a national emergency declaration was not necessary or helpful in the case of the opioid crisis, and that the powers associated with a
public health emergency were better suited to address the issue.

The Trump administration, they added, would work with Congress to secure money to combat opioids in a year-end spending package, including through the Public Health Emergency Fund. They outlined Mr. Trump’s announcement on condition of anonymity to avoid pre-empting his formal speech.

The president in August called the opioid crisis a “national emergency.” But he did not sign a formal declaration designating it as such, allowing the prospect to languish amid resistance in his administration about making an open-ended commitment of federal funds to deal with a crisis that has shown no signs of abating. The crisis has claimed tens of thousands of lives — a death rate that one administration official noted Thursday rivals the number of Americans killed during the Vietnam War.

Beyond the lack of funding, it is not clear how much impact the public health declaration will have in the short term, given that Mr. Trump has yet to name central players who would carry it out, including a drug czar to steer a broader strategy on opioids and a secretary of Health and Human Services who would tailor policies and identify funding streams.

Representative Tom Marino, the Pennsylvania Republican whom Mr. Trump had named to head his Office of National Drug Control Policy, withdrew last week after reports that he did the bidding of the pharmaceutical industry in weakening law enforcement’s ability to curb drug sales in efforts to block black-market sales of opioids. The White House has yet to announce a new candidate.

And Tom Price resigned last month as health secretary after it was revealed he was flying on private jets paid for with taxpayer dollars; a nominee has not been named for that post either.

But proponents, including some anti-addiction groups and physicians, argue Mr. Trump’s action is an important symbolic step that would raise awareness and spark a new sense of urgency to deal with the opioid scourge.

The administration officials said a public health emergency declaration would quickly lead to crucial changes, including the potential to secure federal grant
money and the expansion of access to telemedicine services, which would broaden the reach of medical treatment to rural areas ravaged by opioid use and where doctors are often in short supply.

Mr. Trump’s promises to focus on the opioid crisis helped propel him to victory in New Hampshire’s primary last year.

As president, he formed an opioid commission in March and installed at the helm Gov. Chris Christie of New Jersey, a rival for the Republican nomination who had championed the issue during the 2016 race. In July, the commission recommended that the president declare a national emergency — either under the Stafford Act, which would have prompted the allocation of Federal Emergency Management Agency funds, or the Public Health Service Act, the option Mr. Trump has chosen.

Mr. Price had ruled out the idea of a national emergency, in part because of concerns about the potentially exorbitant costs to the federal government. Still, Mr. Trump surprised his advisers by telling reporters soon after his commission’s report that he was ready to take just such a step.

There have been few major actions to match those words, even as administration officials have worked feverishly behind the scenes to come to agreement on an opioid policy that would reflect the president’s position.

In the meantime, members of Mr. Trump’s opioid commission and lawmakers in both parties had grown impatient for action. On Wednesday, a group of Democrats led by Senator Debbie Stabenow of Michigan released a letter they wrote to the president asking him to allow the government to negotiate lower prices for naloxone, a drug that quickly counteracts the effects of opioid overdoses. Declaring a state of emergency would give the secretary of Health and Human Services the power to seek such price reductions, they said.

Mr. Christie commended the president on Thursday for what he called “bold action” to address the opioid crisis, and said the commission would put forth a comprehensive plan next week.