

117TH CONGRESS
1ST SESSION

S. 3293

To expand access of veterans to mental health care from the Department of Veterans Affairs, and for other purposes.

IN THE SENATE OF THE UNITED STATES

DECEMBER 1, 2021

Mr. TESTER (for himself and Mr. MORAN) introduced the following bill; which was read twice and referred to the Committee on Veterans' Affairs

A BILL

To expand access of veterans to mental health care from the Department of Veterans Affairs, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

4 (a) SHORT TITLE.—This Act may be cited as the
5 “Post-9/11 Veterans’ Mental Health Care Improvement
6 Act of 2021”.

7 (b) TABLE OF CONTENTS.—The table of contents for
8 this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—ACCESS TO CARE

- Sec. 101. Improvement of sleep disorder care furnished by Department of Veterans Affairs.
- Sec. 102. Mental health consultations.
- Sec. 103. Study on inpatient mental health and substance use care from Department of Veterans Affairs.
- Sec. 104. Study on treatment from Department of Veterans Affairs for co-occurring mental health and substance use disorders.

TITLE II—MENTAL HEALTH WORKFORCE

- Sec. 201. Expansion of Vet Center workforce.
- Sec. 202. Expansion of mental health training for Department of Veterans Affairs.
- Sec. 203. Expansion of scholarships and loan repayment programs for mental health providers.
- Sec. 204. Study on workload of suicide prevention teams of Department of Veterans Affairs.

TITLE III—MENTAL HEALTH RESEARCH

- Sec. 301. Expansion of suicide prevention and mental health research.
- Sec. 302. Study on mental health and suicide prevention support for military families.
- Sec. 303. Research on brain health.
- Sec. 304. Study on efficacy of clinical and at-home resources for post-traumatic stress disorder.

1 **TITLE I—ACCESS TO CARE**

2 **SEC. 101. IMPROVEMENT OF SLEEP DISORDER CARE FUR-** 3 **NISHED BY DEPARTMENT OF VETERANS AF-** 4 **FAIRS.**

5 (a) IN GENERAL.—Pursuant to the analysis con-
6 ducted under subsection (b), the Secretary of Veterans Af-
7 fairs shall take such action as the Secretary considers ap-
8 propriate to improve the assessment and treatment of vet-
9 erans with sleep disorders, including by conducting in-
10 home sleep studies for veterans.

11 (b) ANALYSIS.—The Secretary shall conduct an anal-
12 ysis of the ability of the Department of Veterans Affairs
13 to treat sleep disorders among veterans, including—

1 (1) assessment and treatment options for such
2 disorders;

3 (2) barriers to care for such disorders, such as
4 wait time, travel time, and lack of staffing;

5 (3) the efficacy of the clinical practice guide-
6 lines of the Department of Veterans Affairs and the
7 Department of Defense for such disorders; and

8 (4) the availability of and efficacy of the use by
9 the Department of Veterans Affairs of cognitive be-
10 havioral therapy for insomnia.

11 (c) REPORT.—Not later than two years after the date
12 of the enactment of this Act, the Secretary shall submit
13 to the Committee on Veterans' Affairs of the Senate and
14 the Committee on Veterans' Affairs of the House of Rep-
15 resentatives a report on—

16 (1) the findings from the analysis conducted
17 under subsection (b); and

18 (2) any actions taken under subsection (a) to
19 improve the assessment and treatment of veterans
20 with sleep disorders.

21 (d) AUTHORIZATION OF APPROPRIATIONS FOR IN-
22 HOME SLEEP STUDIES.—There is authorized to be appro-
23 priated to the Secretary of Veterans Affairs \$5,000,000
24 to be used to conduct in-home sleep studies for veterans,

1 as part of sleep disorder assessment and treatment con-
 2 ducted by the Department of Veterans Affairs.

3 **SEC. 102. MENTAL HEALTH CONSULTATIONS.**

4 (a) MENTAL HEALTH CONSULTATIONS FOR VET-
 5 ERANS FILING FOR COMPENSATION.—

6 (1) IN GENERAL.—Subchapter VI of chapter 11
 7 of title 38, United States Code, is amended by add-
 8 ing at the end the following new section:

9 **“§ 1167. Mental health consultations**

10 “(a) IN GENERAL.—Not later than 30 days after the
 11 date on which a veteran submits to the Secretary a claim
 12 for compensation under this chapter for service-connected
 13 disability relating to a mental health diagnosis, the Sec-
 14 retary shall offer the veteran a mental health consultation
 15 to assess the mental health needs of and care options for
 16 the veteran.

17 “(b) AVAILABILITY.—The Secretary shall ensure that
 18 a veteran offered a mental health consultation under sub-
 19 section (a) may elect to receive such consultation during
 20 the one-year period beginning on the date on which the
 21 consultation is offered or during such longer period begin-
 22 ning on such date as the Secretary considers appro-
 23 priate.”.

24 (2) CLERICAL AMENDMENT.—The table of sec-
 25 tions at the beginning of chapter 11 of such title is

1 amended by adding at the end the following new
2 item:

“1167. Mental health consultations.”.

3 (b) MENTAL HEALTH CONSULTATIONS FOR VET-
4 ERANS ENTERING HOMELESS PROGRAMS OFFICE PRO-
5 GRAMS.—

6 (1) IN GENERAL.—Subchapter VII of chapter
7 20 of title 38, United States Code, is amended by
8 adding at the end the following new section:

9 **“§ 2068. Mental health consultations**

10 “(a) IN GENERAL.—Not later than two weeks after
11 the date on which a veteran described in subsection (b)
12 enters into a program administered by the Homeless Pro-
13 grams Office of the Department, the Secretary shall offer
14 the veteran a mental health consultation to assess the
15 health needs of and care options for the veteran.

16 “(b) VETERAN DESCRIBED.—A veteran described in
17 this subsection is a veteran to whom a mental health con-
18 sultation is not offered or provided through the case man-
19 agement services of the program of the Homeless Pro-
20 grams Office into which the veteran enters.”.

21 (2) CLERICAL AMENDMENT.—The table of sec-
22 tions at the beginning of chapter 20 of such title is
23 amended by adding at the end the following new
24 item:

“2068. Mental health consultations.”.

1 **SEC. 103. STUDY ON INPATIENT MENTAL HEALTH AND SUB-**
 2 **STANCE USE CARE FROM DEPARTMENT OF**
 3 **VETERANS AFFAIRS.**

4 (a) IN GENERAL.—Not later than one year after the
 5 date of the enactment of this Act, the Secretary of Vet-
 6 erans Affairs shall complete the conduct of a study on ac-
 7 cess of veterans to care under the residential rehabilitation
 8 treatment programs of the Department of Veterans Af-
 9 fairs to determine—

10 (1) if there are sufficient geographic offerings
 11 of inpatient mental health care, especially for vet-
 12 erans in rural and remote communities;

13 (2) if there are sufficient bed spaces at each lo-
 14 cation, based on demand and drive time from the
 15 homes of veterans;

16 (3) if there are any workforce-related capacity
 17 limitations at each location, including if beds are un-
 18 able to be used because there are not enough pro-
 19 viders to care for additional patients;

20 (4) if there are diagnosis-specific or sex-specific
 21 barriers to accessing care under such programs; and

22 (5) the average wait time for a bed in such a
 23 program, broken out by—

24 (A) Veterans Integrated Service Network;

25 (B) rural or urban area;

26 (C) sex; and

1 (D) specialty (general program, substance
2 use disorder program, military sexual trauma
3 program, etc.).

4 (b) RECOMMENDATIONS FOR MODIFICATIONS TO
5 TREATMENT PROGRAMS.—Using the results from the
6 study conducted under subsection (a), the Secretary shall
7 make recommendations for—

8 (1) new locations for opening facilities to par-
9 ticipate in the residential rehabilitation treatment
10 programs of the Department;

11 (2) facilities under such programs at which new
12 beds can be added; and

13 (3) any additional specialty tracks to be added
14 to such programs, such as substance use disorder or
15 military sexual trauma, in order to meet veteran
16 need and demand.

17 (c) REPORT.—Not later than 180 days after comple-
18 tion of the study under subsection (a), the Secretary shall
19 submit to the Committee on Veterans' Affairs of the Sen-
20 ate and the Committee on Veterans' Affairs of the House
21 of Representatives a report on the findings of the study
22 conducted under subsection (a) and the recommendations
23 made by the Secretary under subsection (b).

1 **SEC. 104. STUDY ON TREATMENT FROM DEPARTMENT OF**
2 **VETERANS AFFAIRS FOR CO-OCCURRING**
3 **MENTAL HEALTH AND SUBSTANCE USE DIS-**
4 **ORDERS.**

5 (a) IN GENERAL.—Not later than one year after the
6 date of the enactment of this Act, the Secretary of Vet-
7 erans Affairs shall conduct a study examining—

8 (1) the availability of treatment programs for
9 veterans with co-occurring mental health and sub-
10 stance use disorders (including both inpatient and
11 outpatient care);

12 (2) any geographic disparities in access to such
13 programs, such as for rural and remote veterans;
14 and

15 (3) the average wait times for care under such
16 programs.

17 (b) REPORT.—

18 (1) IN GENERAL.—Not later than two years
19 after the date of the enactment of this Act, the Sec-
20 retary shall submit to the Committee on Veterans'
21 Affairs of the Senate and the Committee on Vet-
22 erans' Affairs of the House of Representatives a re-
23 port on the findings of the study conducted under
24 subsection (a).

25 (2) ELEMENTS.—The report required by para-
26 graph (1) shall include—

(A) any recommendations resulting from the study conducted under subsection (a) with respect to improving timeliness and quality of care and meeting treatment preferences for veterans with co-occurring mental health and substance use disorders; and

(B) a description of any actions taken by the Secretary to improve care for such veterans.

TITLE II—MENTAL HEALTH WORKFORCE

SEC. 201. EXPANSION OF VET CENTER WORKFORCE.

(a) IN GENERAL.—Not later than one year after the date of the enactment of this Act, the Secretary of Veterans Affairs shall hire an additional 100 full-time equivalent employees for Vet Centers to bolster the workforce of Vet Centers and to provide expanded mental health care to veterans, members of the Armed Forces, and their families through outreach, community access points, outstations, and Vet Centers.

(b) VET CENTER DEFINED.—In this section, the term “Vet Center” has the meaning given that term in section 1712A(h) of title 38, United States Code.

1 **SEC. 202. EXPANSION OF MENTAL HEALTH TRAINING FOR**
2 **DEPARTMENT OF VETERANS AFFAIRS.**

3 (a) IN GENERAL.—Not later than three years after
4 the date of the enactment of this Act, the Secretary of
5 Veterans Affairs, in collaboration with the Office of Men-
6 tal Health and Suicide Prevention and the Office of Aca-
7 demic Affiliations, shall add an additional 500 paid trainee
8 slots in covered mental health disciplines to the workforce
9 of the Department of Veterans Affairs.

10 (b) COVERED MENTAL HEALTH DISCIPLINES DE-
11 FINED.—In this section, the term “covered mental health
12 disciplines” means psychiatry, psychology, advanced prac-
13 tice nursing (with a focus on mental health or substance
14 use disorder), social work, licensed professional mental
15 health counseling, and marriage and family therapy.

16 **SEC. 203. EXPANSION OF SCHOLARSHIPS AND LOAN REPAY-**
17 **MENT PROGRAMS FOR MENTAL HEALTH PRO-**
18 **VIDERS.**

19 (a) EXPANSION OF HEALTH PROFESSIONAL SCHOL-
20 ARSHIP PROGRAM.—Beginning in academic year 2022,
21 the Secretary of Veterans Affairs shall include not fewer
22 than an additional (as compared to academic year 2021)
23 50 awards per academic year under the Department of
24 Veterans Affairs Health Professional Scholarship Pro-
25 gram under subchapter II of chapter 76 of title 38, United
26 States Code, for applicants otherwise eligible for such pro-

1 gram who are pursuing degrees or training in mental
2 health disciplines, including advanced practice nursing
3 (with a focus on mental health or substance use disorder),
4 psychology, and social work.

5 (b) EXPANSION OF EDUCATION DEBT REDUCTION
6 PROGRAM.—

7 (1) IN GENERAL.—Beginning in fiscal year
8 2022, the Secretary shall provide not fewer than an
9 additional (as compared to fiscal year 2021) 200
10 debt reduction awards per year under the Depart-
11 ment of Veterans Affairs Education Debt Reduction
12 Program under subchapter VII of chapter 76 of title
13 38, United States Code, to be used to recruit mental
14 health professionals to the Department of Veterans
15 Affairs in disciplines that include psychiatry, psy-
16 chology, advanced practice nursing (with a focus on
17 mental health or substance use disorder), and social
18 work.

19 (2) AUTHORIZATION OF APPROPRIATIONS.—
20 There is authorized to be appropriated to the Sec-
21 retary of Veterans Affairs \$8,000,000 per year to
22 carry out the additional awards under paragraph
23 (1).

24 (c) OUTREACH.—

1 (1) IN GENERAL.—Not later than one year
 2 after the date of the enactment of this Act, the Sec-
 3 retary shall develop a public awareness campaign to
 4 encourage veterans and mental health professionals
 5 to choose the Department for their mental health ca-
 6 reer.

7 (2) ELEMENTS.—The campaign required under
 8 paragraph (1)—

9 (A) shall advertise the paid trainee, schol-
 10 arship, and loan repayment opportunities of-
 11 fered by the Department; and

12 (B) may highlight the new graduate med-
 13 ical education residencies available at the De-
 14 partment for medical students entering resi-
 15 dency.

16 **SEC. 204. STUDY ON WORKLOAD OF SUICIDE PREVENTION**
 17 **TEAMS OF DEPARTMENT OF VETERANS AF-**
 18 **FAIRS.**

19 (a) IN GENERAL.—The Secretary of Veterans Af-
 20 fairs, acting through the Under Secretary for Health and
 21 the Office of Mental Health and Suicide Prevention, shall
 22 conduct a study evaluating the workload of local suicide
 23 prevention teams of the Department of Veterans Affairs.

24 (b) ELEMENTS.—The study conducted under sub-
 25 section (a) shall—

1 (1) identify the effects of the growth of the sui-
2 cide prevention program of the Department on the
3 workload of suicide prevention teams;

4 (2) incorporate key practices for staffing model
5 design in determining suicide prevention staffing
6 needs; and

7 (3) determine which facilities of the Depart-
8 ment need increased suicide prevention coordinator
9 staffing to meet the needs of veterans, with an em-
10 phasis placed on facilities with high patient volume
11 and facilities located in States with high rates of vet-
12 eran suicide.

13 (c) REPORT.—Not later than one year after the date
14 of the enactment of this Act, the Secretary shall submit
15 to the Committee on Veterans' Affairs of the Senate and
16 the Committee on Veterans' Affairs of the House of Rep-
17 resentatives a report—

18 (1) on the findings of the study conducted
19 under subsection (a); and

20 (2) indicating any changes made to the staffing
21 of suicide prevention teams of the Department re-
22 sulting from the determinations made under sub-
23 section (b)(3), including a list of facilities of the De-
24 partment where staffing was adjusted.

1 **TITLE III—MENTAL HEALTH**
2 **RESEARCH**

3 **SEC. 301. EXPANSION OF SUICIDE PREVENTION AND MEN-**
4 **TAL HEALTH RESEARCH.**

5 There is authorized to be appropriated to the Depart-
6 ment of Veterans Affairs an additional \$10,000,000 to be
7 used by the Center of Excellence for Suicide Prevention
8 of the Department and the Rocky Mountain Mental Illness
9 Research Education and Clinical Center for purposes of
10 conducting research on the factors impacting veteran sui-
11 cide and best practices for early intervention and support.

12 **SEC. 302. STUDY ON MENTAL HEALTH AND SUICIDE PRE-**
13 **VENTION SUPPORT FOR MILITARY FAMILIES.**

14 (a) IN GENERAL.—The Secretary of Veterans Af-
15 fairs, in collaboration with the Secretary of Defense, shall
16 conduct a study on secondary post-traumatic stress dis-
17 order and depression and its impact on spouses, children,
18 and caregivers of members of the Armed Forces.

19 (b) REPORT.—

20 (1) IN GENERAL.—Not later than three years
21 after the date of the enactment of this Act, the Sec-
22 retary of Veterans Affairs, in collaboration with the
23 Secretary of Defense, shall submit to Congress, vet-
24 erans service organizations, and military support or-

ganizations a report on the findings of the study
conducted under subsection (a).

(2) DEFINITIONS.—In this subsection:

(A) MILITARY SUPPORT ORGANIZATION.—

The term “military support organization” has
the meaning given that term by the Secretary
of Defense.

(B) VETERANS SERVICE ORGANIZATION.—

The term “veterans service organization”
means an organization recognized by the Sec-
retary of Veterans Affairs for the representa-
tion of veterans under section 5902 of title 38,
United States Code.

SEC. 303. RESEARCH ON BRAIN HEALTH.

There is authorized to be appropriated to the Depart-
ment of Veterans Affairs an additional \$5,000,000 for on-
going and future research at the Translational Research
Center of the Department of Veterans Affairs for trau-
matic brain injury and stress disorders to provide better
understanding of and improved treatment options for
post-9/11 veterans with traumatic brain injury or post-
traumatic stress disorder.

1 **SEC. 304. STUDY ON EFFICACY OF CLINICAL AND AT-HOME**
2 **RESOURCES FOR POST-TRAUMATIC STRESS**
3 **DISORDER.**

4 Not later than two years after the date of the enact-
5 ment of this Act, the Secretary of Veterans Affairs,
6 through the Office of Research and Development of the
7 Department of Veterans Affairs, shall conduct a study
8 on—

9 (1) the efficacy of clinical and at-home re-
10 sources, such as mobile applications like COVID
11 Coach, for providers, veterans, caregivers, and fam-
12 ily members to use for dealing with stressors;

13 (2) the feasibility and advisability of developing
14 more such resources;

15 (3) strategies for improving mental health care
16 and outcomes for veterans with post-traumatic stress
17 disorder; and

18 (4) best practices for helping family members of
19 veterans deal with secondary post-traumatic stress
20 disorder or mental health concerns.

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