

117TH CONGRESS
2D SESSION

H. R. 6411

To amend title 38, United States Code, to make certain improvements in the mental health care provided by the Department of Veterans Affairs, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

JANUARY 18, 2022

Mr. TAKANO (for himself and Mr. BOST) introduced the following bill; which was referred to the Committee on Veterans' Affairs

A BILL

To amend title 38, United States Code, to make certain improvements in the mental health care provided by 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 “Support The Resiliency of Our Nation’s Great Veterans
6 Act of 2022” or the “STRONG Veterans Act of 2022”.

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—TRAINING TO SUPPORT VETERANS' MENTAL HEALTH

- Sec. 101. Mental health and suicide prevention outreach to minority veterans and American Indian and Alaska Native veterans.
- Sec. 102. Expansion of Vet Center workforce.
- Sec. 103. Expansion of mental health training for Department of Veterans Affairs.
- Sec. 104. Expansion of scholarships and loan repayment programs for mental health providers.

TITLE II—VETERANS CRISIS LINE

- Sec. 201. Veterans Crisis Line.

Subtitle A—Veterans Crisis Line Training and Quality Management

- Sec. 211. Staff training.
- Sec. 212. Quality review and management.
- Sec. 213. Guidance for high-risk callers.
- Sec. 214. Oversight of training of social service assistants and clarification of job responsibilities.

Subtitle B—Pilot Programs and Research on Veterans Crisis Line

- Sec. 221. Pilot programs.
- Sec. 222. Authorization of appropriations for research on effectiveness and opportunities for improvement of Veterans Crisis Line.

Subtitle C—Transition of Crisis Line Number

- Sec. 231. Feedback on transition of crisis line number.

TITLE III—OUTREACH TO VETERANS

- Sec. 301. Solid Start program of the Department of Veterans Affairs.
- Sec. 302. Designation of Buddy Check Week by Secretary of Veterans Affairs.
- Sec. 303. Improvements to Veterans Justice Outreach Program.
- Sec. 304. Department of Veterans Affairs Governors Challenge Program.

TITLE IV—MENTAL HEALTH CARE DELIVERY

- Sec. 401. Expansion of peer specialist support program of Department of Veterans Affairs.
- Sec. 402. Expansion of Vet Center services.
- Sec. 403. Eligibility for mental health services.
- Sec. 404. Mental health consultations.

TITLE V—RESEARCH

- Sec. 501. Veterans integration to academic leadership program of the Department of Veterans Affairs.
- Sec. 502. Improvement of sleep disorder care furnished by Department of Veterans Affairs.
- Sec. 503. Study on inpatient mental health and substance use care from Department of Veterans Affairs.
- Sec. 504. Study on treatment from Department of Veterans Affairs for co-occurring mental health and substance use disorders.
- Sec. 505. Study on workload of suicide prevention teams of Department of Veterans Affairs.

Sec. 506. Expansion of suicide prevention and mental health research.

Sec. 507. Study on mental health and suicide prevention support for military families.

Sec. 508. Research on brain health.

Sec. 509. Study on efficacy of clinical and at-home resources for post-traumatic stress disorder.

1 **TITLE I—TRAINING TO SUPPORT** 2 **VETERANS' MENTAL HEALTH**

3 **SEC. 101. MENTAL HEALTH AND SUICIDE PREVENTION** 4 **OUTREACH TO MINORITY VETERANS AND** 5 **AMERICAN INDIAN AND ALASKA NATIVE VET-** 6 **ERANS.**

7 (a) **STAFFING REQUIREMENT.**—Beginning not later
8 than 90 days after the date of the enactment of this Act,
9 the Secretary of Veterans Affairs shall ensure that each
10 medical center of the Department of Veterans Affairs has
11 no fewer than one full-time employee whose responsibility
12 is serving as a minority veteran coordinator.

13 (b) **TRAINING.**—Not later than 180 days after the
14 date of the enactment of this Act, the Secretary, in con-
15 sultation with the Indian Health Service and the Director
16 of the Office of Mental Health and Suicide Prevention of
17 the Department of Veterans Affairs, shall ensure that all
18 minority veteran coordinators receive training in delivery
19 of culturally appropriate mental health and suicide preven-
20 tion services to American Indian and Alaska Native vet-
21 erans, especially with respect to the identified populations
22 and tribes within the coordinators' catchment areas.

1 (c) COORDINATION WITH SUICIDE PREVENTION CO-
2 ORDINATORS.—Not later than 180 days after the date of
3 the enactment of this Act, the Secretary, in consultation
4 with the Director of the Office of Mental Health and Sui-
5 cide Prevention, shall ensure that the suicide prevention
6 coordinator and minority veteran coordinator of each med-
7 ical center of the Department have developed and dissemi-
8 nated to the director of the medical center a written plan
9 for conducting mental health and suicide prevention out-
10 reach to all tribes and urban Indian health organizations
11 within the catchment area of the medical center. Each
12 such plan shall include for each tribe covered by the
13 plan—

14 (1) contact information for tribal leadership
15 and the tribal health facility or Indian Health Serv-
16 ice facility serving that tribe;

17 (2) a schedule for and list of outreach plans
18 (including addressing any barriers to accessing De-
19 partment mental health care);

20 (3) documentation of any conversation with
21 tribal leaders that may guide culturally appropriate
22 delivery of mental health care to American Indian or
23 Alaska Native veterans;

24 (4) documentation of any progress in incor-
25 porating traditional healing practices into mental

1 health and suicide prevention protocols and options
2 available for veterans who are members of such
3 tribe; and

4 (5) documentation of any coordination among
5 the Department, the Indian Health Service, urban
6 Indian health organizations, and the Substance
7 Abuse and Mental Health Services Administration
8 for the purpose of improving suicide prevention ef-
9 forts tailored to veterans who are members of such
10 tribe and the provision of culturally competent men-
11 tal health care to such veterans.

12 (d) REPORT.—Not later than one year after the en-
13 actment of this Act, the Secretary shall submit to the
14 Committee on Veterans' Affairs of the Senate and the
15 Committee on Veterans' Affairs of the House of Rep-
16 resentatives a report on outreach efforts to minority vet-
17 erans and American Indian and Alaska Native veterans.
18 Such report shall include each of the following:

19 (1) The number of minority veteran coordina-
20 tors within the Department.

21 (2) The number and percentage of minority vet-
22 eran coordinators who are women.

23 (3) The number and percentage of minority vet-
24 eran coordinators who are persons of color.

1 (4) The number and percentage of Department
2 medical centers with minority veteran coordinators.

3 (5) The number and percentage of Department
4 mental health providers who are enrolled members of
5 a federally recognized Indian tribe or self-identify as
6 Native American.

7 (6) The number and percentage of Department
8 mental health providers who speak a second lan-
9 guage.

10 (7) A review of the outreach plans developed
11 and submitted to all Department medical centers for
12 outreach to American Indian and Alaska Native vet-
13 erans.

14 (8) A review of mental health care provided an-
15 nually by the Department to American Indian and
16 Alaska Native veterans for the past three years, in-
17 cluding number of appointments, and an assessment
18 of any barriers to providing this care.

19 **SEC. 102. EXPANSION OF VET CENTER WORKFORCE.**

20 (a) IN GENERAL.—Not later than one year after the
21 date of the enactment of this Act, the Secretary of Vet-
22 erans Affairs shall hire an additional 100 full-time equiva-
23 lent employees for Vet Centers to bolster the workforce
24 of Vet Centers and to provide expanded mental health care
25 to veterans, members of the Armed Forces, and their fam-

1 ilies through outreach, community access points,
2 outstations, and Vet Centers.

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

6 **SEC. 103. EXPANSION OF MENTAL HEALTH TRAINING FOR**
7 **DEPARTMENT OF VETERANS AFFAIRS.**

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

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

21 **SEC. 104. EXPANSION OF SCHOLARSHIPS AND LOAN REPAY-**
22 **MENT PROGRAMS FOR MENTAL HEALTH PRO-**
23 **VIDERS.**

24 (a) EXPANSION OF HEALTH PROFESSIONAL SCHOL-
25 ARSHIP PROGRAM.—Beginning in academic year 2022,

1 the Secretary of Veterans Affairs shall include not fewer
2 than an additional (as compared to academic year 2021)
3 50 awards per academic year under the Department of
4 Veterans Affairs Health Professional Scholarship Pro-
5 gram under subchapter II of chapter 76 of title 38, United
6 States Code, for applicants otherwise eligible for such pro-
7 gram who are pursuing degrees or training in mental
8 health disciplines, including advanced practice nursing
9 (with a focus on mental health or substance use disorder),
10 psychology, and social work.

11 (b) EXPANSION OF EDUCATION DEBT REDUCTION
12 PROGRAM.—

13 (1) IN GENERAL.—Beginning in fiscal year
14 2022, the Secretary shall provide not fewer than an
15 additional (as compared to fiscal year 2021) 200
16 debt reduction awards per year under the Depart-
17 ment of Veterans Affairs Education Debt Reduction
18 Program under subchapter VII of chapter 76 of title
19 38, United States Code, to be used to recruit mental
20 health professionals to the Department of Veterans
21 Affairs in disciplines that include psychiatry, psy-
22 chology, advanced practice nursing (with a focus on
23 mental health or substance use disorder), and social
24 work.

1 (2) AUTHORIZATION OF APPROPRIATIONS.—

2 There is authorized to be appropriated to the Sec-
3 retary of Veterans Affairs \$8,000,000 per year to
4 carry out the additional awards under paragraph
5 (1).

6 (c) OUTREACH.—

7 (1) IN GENERAL.—Not later than one year
8 after the date of the enactment of this Act, the Sec-
9 retary shall develop a public awareness campaign to
10 encourage veterans and mental health professionals
11 to choose the Department for their mental health ca-
12 reer.

13 (2) ELEMENTS.—The campaign required under
14 paragraph (1)—

15 (A) shall advertise the paid trainee, schol-
16 arship, and loan repayment opportunities of-
17 fered by the Department; and

18 (B) may highlight the new graduate med-
19 ical education residencies available at the De-
20 partment for medical students entering resi-
21 dency.

1 **TITLE II—VETERANS CRISIS**
2 **LINE**

3 **SEC. 201. VETERANS CRISIS LINE.**

4 In this title, the term “Veterans Crisis Line” means
5 the toll-free hotline for veterans established under section
6 1720F(h) of title 38, United States Code.

7 **Subtitle A—Veterans Crisis Line**
8 **Training and Quality Management**

9 **SEC. 211. STAFF TRAINING.**

10 (a) REVIEW OF TRAINING FOR VETERANS CRISIS
11 LINE CALL RESPONDERS.—

12 (1) IN GENERAL.—The Secretary of Veterans
13 Affairs shall enter into an agreement with an orga-
14 nization outside the Department of Veterans Affairs
15 to review the training for Veterans Crisis Line call
16 responders on assisting callers in crisis.

17 (2) COMPLETION OF REVIEW.—The review con-
18 ducted under paragraph (1) shall be completed not
19 later than one year after the date of the enactment
20 of this Act.

21 (3) ELEMENTS OF REVIEW.—The review con-
22 ducted under paragraph (1) shall consist of a review
23 of the training provided by the Department on sub-
24 jects including risk assessment, lethal means assess-
25 ment, substance use and overdose risk assessment,

1 safety planning, referrals to care, supervisory con-
2 sultation, and emergency dispatch.

3 (4) UPDATE OF TRAINING.—If any deficiencies
4 in the training for Veterans Crisis Line call respon-
5 ders are found pursuant to the review under para-
6 graph (1), the Secretary shall update such training
7 and associated standards of practice to correct those
8 deficiencies not later than one year after the comple-
9 tion of the review.

10 (b) RETRAINING GUIDELINES FOR VETERANS CRISIS
11 LINE CALL RESPONDERS.—

12 (1) IN GENERAL.—Not later than one year
13 after the date of the enactment of this Act, the Sec-
14 retary shall develop guidelines on retraining and
15 quality management for when a Veterans Crisis Line
16 call responder has an adverse event or when a qual-
17 ity review check by a supervisor of such a call re-
18 sponder denotes that the call responder needs im-
19 provement.

20 (2) ELEMENTS OF GUIDELINES.—The guide-
21 lines developed under paragraph (1) shall specify the
22 subjects and quantity of retraining recommended
23 and how supervisors should implement increased use
24 of silent monitoring or other performance review
25 mechanisms.

1 **SEC. 212. QUALITY REVIEW AND MANAGEMENT.**

2 (a) MONITORING OF CALLS ON VETERANS CRISIS
3 LINE.—

4 (1) IN GENERAL.—The Secretary of Veterans
5 Affairs shall require that not fewer than two calls
6 per month for each Veterans Crisis Line call re-
7 sponder be subject to supervisory silent monitoring,
8 which is used to monitor the quality of conduct by
9 such call responder during the call.

10 (2) BENCHMARKS.—The Secretary shall estab-
11 lish benchmarks for requirements and performance
12 of Veterans Crisis Line call responders on super-
13 visory silent monitored calls.

14 (3) QUARTERLY REPORTS.—Not less frequently
15 than quarterly, the Secretary shall submit to the Of-
16 fice of Mental Health and Suicide Prevention of the
17 Department of Veterans Affairs a report on occur-
18 rence and outcomes of supervisory silent monitoring
19 of calls on the Veterans Crisis Line.

20 (b) QUALITY MANAGEMENT PROCESSES FOR VET-
21 ERANS CRISIS LINE.—Not later than one year after the
22 date of the enactment of this Act, the leadership for the
23 Veterans Crisis Line, in partnership with the Office of
24 Mental Health and Suicide Prevention of the Department
25 and the National Center for Patient Safety of the Depart-
26 ment, shall establish quality management processes and

1 expectations for staff of the Veterans Crisis Line, includ-
2 ing with respect to reporting of adverse events and close
3 calls.

4 (c) ANNUAL COMMON CAUSE ANALYSIS FOR CALL-
5 ERS TO VETERANS CRISIS LINE WHO DIE BY SUICIDE.—

6 (1) IN GENERAL.—Not less frequently than an-
7 nually, the Secretary shall perform a common cause
8 analysis for all identified callers to the Veterans Cri-
9 sis Line that died by suicide during the one-year pe-
10 riod preceding the conduct of the analysis before the
11 caller received contact with emergency services and
12 in which the Veterans Crisis Line was the last point
13 of contact.

14 (2) SUBMITTAL OF RESULTS.—The Secretary
15 shall submit to the Office of Mental Health and Sui-
16 cide Prevention of the Department the results of
17 each analysis conducted under paragraph (1).

18 (3) APPLICATION OF THEMES OR LESSONS.—
19 The Secretary shall apply any themes or lessons
20 learned under an analysis under paragraph (1) to
21 updating training and standards of practice for staff
22 of the Veterans Crisis Line.

23 **SEC. 213. GUIDANCE FOR HIGH-RISK CALLERS.**

24 (a) DEVELOPMENT OF ENHANCED GUIDANCE AND
25 PROCEDURES FOR RESPONSE TO CALLS RELATED TO

1 SUBSTANCE USE AND OVERDOSE RISK.—Not later than
2 one year after the date of the enactment of this Act, the
3 Secretary of Veterans Affairs, in consultation with na-
4 tional experts within the Department of Veterans Affairs
5 on substance use disorder and overdose, shall—

6 (1) develop enhanced guidance and procedures
7 to respond to calls to the Veterans Crisis Line re-
8 lated to substance use and overdose risk;

9 (2) update training materials for staff of the
10 Veterans Crisis Line in response to such enhanced
11 guidance and procedures; and

12 (3) update criteria for monitoring compliance
13 with such enhanced guidance and procedures.

14 (b) REVIEW AND IMPROVEMENT OF STANDARDS FOR
15 EMERGENCY DISPATCH.—

16 (1) IN GENERAL.—Not later than one year
17 after the date of the enactment of this Act, the Sec-
18 retary shall—

19 (A) review the current emergency dispatch
20 standard operating procedure of the Veterans
21 Crisis Line to identify any additions to such
22 procedure to strengthen communication regard-
23 ing—

24 (i) emergency dispatch for discon-
25 nected callers; and

1 (ii) the role of social service assistants
2 in requesting emergency dispatch and re-
3 cording such dispatches; and

4 (B) update such procedure to include the
5 additions identified under subparagraph (A).

6 (2) TRAINING.—The Secretary shall ensure
7 that all staff of the Veterans Crisis Line are trained
8 on all updates made under paragraph (1)(B) to the
9 emergency dispatch standard operating procedure of
10 the Veterans Crisis Line.

11 **SEC. 214. OVERSIGHT OF TRAINING OF SOCIAL SERVICE AS-**
12 **SISTANTS AND CLARIFICATION OF JOB RE-**
13 **SPONSIBILITIES.**

14 Not later than one year after the date of the enact-
15 ment of this Act, the Secretary of Veterans Affairs shall—

16 (1) establish oversight mechanisms to ensure
17 that social service assistants and supervisory social
18 service assistants working with the Veterans Crisis
19 Line are appropriately trained and implementing
20 guidance of the Department regarding the Veterans
21 Crisis Line; and

22 (2) refine standard operating procedures to de-
23 lineate roles and responsibilities for all levels of su-
24 pervisory social service assistants working with the
25 Veterans Crisis Line.

1 **Subtitle B—Pilot Programs and**
2 **Research on Veterans Crisis Line**

3 **SEC. 221. PILOT PROGRAMS.**

4 (a) EXTENDED SAFETY PLANNING PILOT PROGRAM
5 FOR VETERANS CRISIS LINE.—

6 (1) IN GENERAL.—Commencing not later than
7 180 days after the date of the enactment of this Act,
8 the Secretary of Veterans Affairs shall carry out a
9 pilot program to determine whether a lengthier,
10 templated safety plan used in clinical settings could
11 be applied in call centers for the Veterans Crisis
12 Line.

13 (2) BRIEFING.—Not later than two years after
14 the date of the enactment of this Act, the Secretary
15 shall provide to Congress a briefing on the findings
16 of the Secretary under the pilot program conducted
17 under paragraph (1), which shall include any rec-
18 ommendations of the Secretary with respect to the
19 continuation or discontinuation of the pilot program.

20 (b) CRISIS LINE FACILITATION PILOT PROGRAM.—

21 (1) IN GENERAL.—Commencing not later than
22 one year after the date of the enactment of this Act,
23 the Secretary shall carry out a pilot program on the
24 use of crisis line facilitation to increase use of the
25 Veterans Crisis Line among high-risk veterans.

1 (2) BRIEFING.—Not later than two years after
2 the date of the enactment of this Act, the Secretary
3 shall provide to Congress a briefing on the findings
4 of the Secretary under the pilot program under
5 paragraph (1), including any recommendations of
6 the Secretary with respect to the continuation or dis-
7 continuation of the pilot program.

8 (3) DEFINITIONS.—In this section:

9 (A) The term “crisis line facilitation”, with
10 respect to a high-risk veteran, means the pres-
11 entation by a therapist of psychoeducational in-
12 formation about the Veterans Crisis Line and a
13 discussion of the perceived barriers and
14 facilitators to future use of the Veterans Crisis
15 Line for the veteran, which culminates in the
16 veteran calling the Veterans Crisis Line with
17 the therapist to provide firsthand experiences
18 that may counter negative impressions of the
19 Veterans Crisis Line.

20 (B) The term “high-risk veteran” means a
21 veteran receiving inpatient mental health care
22 following a suicidal crisis.

1 **SEC. 222. AUTHORIZATION OF APPROPRIATIONS FOR RE-**
2 **SEARCH ON EFFECTIVENESS AND OPPORTU-**
3 **NITIES FOR IMPROVEMENT OF VETERANS**
4 **CRISIS LINE.**

5 There is authorized to be appropriated to the Sec-
6 retary of Veterans Affairs for fiscal years 2022 and 2023,
7 a total of \$5,000,000 for the Mental Illness Research,
8 Education, and Clinical Centers of the Department of Vet-
9 erans Affairs to conduct research on the effectiveness of
10 the Veterans Crisis Line and areas for improvement for
11 the Veterans Crisis Line. Amounts made available pursu-
12 ant to the authorization of appropriations under this sec-
13 tion shall remain available until September 30, 2024.

14 **Subtitle C—Transition of Crisis**
15 **Line Number**

16 **SEC. 231. FEEDBACK ON TRANSITION OF CRISIS LINE NUM-**
17 **BER.**

18 (a) IN GENERAL.—The Secretary of Veterans Affairs
19 shall solicit feedback from veterans service organizations
20 on how to conduct outreach to members of the Armed
21 Forces, veterans, their family members, and other mem-
22 bers of the military and veterans community on the move
23 to 988 as the new, national three-digit suicide and mental
24 health crisis hotline, which is expected to be implemented
25 by July 2022, to minimize confusion and ensure veterans

1 are aware of their options for reaching the Veterans Crisis
2 Line.

3 (b) NONAPPLICATION OF FACCA.—The Federal Advi-
4 sory Committee Act (5 U.S.C. App.) shall not apply to
5 any feedback solicited under subsection (a).

6 (c) VETERANS SERVICE ORGANIZATION DEFINED.—
7 In this section, the term “veterans service organization”
8 means an organization recognized by the Secretary for the
9 representation of veterans under section 5902 of title 38,
10 United States Code.

11 **TITLE III—OUTREACH TO** 12 **VETERANS**

13 **SEC. 301. SOLID START PROGRAM OF THE DEPARTMENT OF** 14 **VETERANS AFFAIRS.**

15 (a) IN GENERAL.—Chapter 63 of title 38, United
16 States Code, is amended by adding at the end the fol-
17 lowing new subchapter:

18 “SUBCHAPTER II—OTHER OUTREACH 19 PROGRAMS AND ACTIVITIES

20 “§ 6320. Solid Start program

21 “(a) IN GENERAL.—The Secretary shall carry out a
22 program, to be known as the ‘Solid Start program’, under
23 which the Secretary shall—

24 “(1) build the capacity of the Department to ef-
25 ficiently and effectively respond to the queries and

1 needs of veterans who have recently separated from
2 the Armed Forces; and

3 “(2) systemically integrate and coordinate ef-
4 forts to assist veterans, including efforts—

5 “(A) to proactively reach out to newly sep-
6 arated veterans to inform them of their eligi-
7 bility for programs of and benefits provided by
8 the Department; and

9 “(B) to connect veterans in crisis to re-
10 sources that address their immediate needs.

11 “(b) ACTIVITIES OF THE SOLID START PROGRAM.—

12 (1) The Secretary, in coordination with the Secretary of
13 Defense, shall carry out the Solid Start program of the
14 Department by—

15 “(A) collecting up-to-date contact information
16 during transition classes or separation counseling for
17 all members of the Armed Forces who are sepa-
18 rating from the Armed Forces, while explaining the
19 existence and purpose of the Solid Start program;

20 “(B) calling each veteran, regardless of separa-
21 tion type or characterization of service, three times
22 within the first year after separation of the veteran
23 from the Armed Forces;

24 “(C) providing information about the Solid
25 Start program on the website of the Department

1 and in materials of the Department, especially tran-
2 sition booklets and other resources;

3 “(D) ensuring calls are truly tailored to the
4 needs of each veteran’s unique situation by con-
5 ducting quality assurance tests;

6 “(E) prioritizing outreach to veterans who have
7 accessed mental health resources prior to separation
8 from the Armed Forces;

9 “(F) providing women veterans with informa-
10 tion that is tailored to their specific health care and
11 benefit needs;

12 “(G) as feasible, providing information on ac-
13 cess to State and local resources, including Vet Cen-
14 ters and veterans service organizations; and

15 “(H) gathering and analyzing data assessing
16 the effectiveness of the Solid Start program.

17 “(2) The Secretary, in coordination with the Sec-
18 retary of Defense, may carry out the Solid Start program
19 by—

20 “(A) encouraging members of the Armed
21 Forces who are transitioning to civilian life to au-
22 thorize alternate points of contact who can be
23 reached should the member be unavailable during
24 the first year following the separation of the member
25 from the Armed Forces;

1 “(B) following up missed phone calls with tai-
2 lored mailings to ensure the veteran still receives
3 similar information; and

4 “(C) striving to reach out to veterans who sepa-
5 rated prior to the initiation of the Solid Start pro-
6 gram to provide similar services to those veterans, as
7 feasible.

8 “(3) In this subsection:

9 “(A) The term ‘Vet Center’ has the meaning
10 given that term in section 1712A(h) of this title.

11 “(B) The term ‘veterans service organization’
12 means an organization recognized by the Secretary
13 for the representation of veterans under section
14 5902 of this title.

15 “(c) OBLIGATIONS OF AMOUNTS.—Subject to the
16 availability of appropriations, the Secretary may not, in
17 a fiscal year, obligate an amount to carry out the Solid
18 Start program that is less than the total amount obligated
19 in the previous fiscal year to carry out the program, unless
20 the Secretary determines that increased efficiencies of the
21 program warrant the obligation of a lesser amount.”.

22 (b) CONFORMING AMENDMENTS.—Chapter 63 of
23 such title, as amended by subsection (a), is further amend-
24 ed—

1 (1) by inserting before section 6301 the fol-
2 lowing:

3 **“Subchapter I—Outreach Services Program”;**

4 and

5 (2) in sections 6301, 6303, 6304, 6305, 6306,
6 and 6307, by striking “this chapter” each place it
7 appears and inserting “this subchapter”.

8 (c) CLERICAL AMENDMENTS.—The table of sections
9 at the beginning of chapter 63 of such title is amended—

10 (1) by inserting before the item relating to sec-
11 tion 6301 the following new item:

“SUBCHAPTER I—OUTREACH SERVICES PROGRAM”;

12 and

13 (2) by adding at the end the following new
14 items:

“SUBCHAPTER II—OTHER OUTREACH PROGRAMS AND ACTIVITIES

“6320. Solid Start program.”.

15 **SEC. 302. DESIGNATION OF BUDDY CHECK WEEK BY SEC-**
16 **RETARY OF VETERANS AFFAIRS.**

17 (a) IN GENERAL.—The Secretary of Veterans Affairs
18 shall designate one week each year to organize outreach
19 events and educate veterans on how to conduct peer
20 wellness checks, which shall be known as “Buddy Check
21 Week”.

22 (b) EDUCATIONAL OPPORTUNITIES.—

1 (1) IN GENERAL.—During Buddy Check Week,
2 the Secretary, in consultation with organizations
3 that represent veterans, nonprofits that serve vet-
4 erans, mental health experts, members of the Armed
5 Forces, and such other entities and individuals as
6 the Secretary considers appropriate, shall collaborate
7 with organizations that represent veterans to provide
8 educational opportunities for veterans to learn how
9 to conduct peer wellness checks.

10 (2) TRAINING MATTERS.—As part of the edu-
11 cational opportunities provided under paragraph (1),
12 the Secretary shall provide the following:

13 (A) A script for veterans to use to conduct
14 peer wellness checks that includes information
15 on appropriate referrals to resources veterans
16 might need.

17 (B) Online and in-person training, as ap-
18 propriate, on how to conduct a peer wellness
19 check.

20 (C) Opportunities for members of organi-
21 zations that represent veterans to learn how to
22 train individuals to conduct peer wellness
23 checks.

1 (D) Training for veterans participating in
2 Buddy Check Week on how to transfer a phone
3 call directly to the Veterans Crisis Line.

4 (E) Resiliency training for veterans partici-
5 pating in Buddy Check Week on handling a vet-
6 eran in crisis.

7 (3) ONLINE MATERIALS.—All training materials
8 provided under the educational opportunities under
9 paragraph (1) shall be made publicly available on a
10 website of the Department of Veterans Affairs.

11 (c) OUTREACH.—The Secretary, in collaboration with
12 organizations that represent veterans, may conduct out-
13 reach regarding educational opportunities under sub-
14 section (b) at—

15 (1) public events where many veterans are ex-
16 pected to congregate;

17 (2) meetings of organizations that represent
18 veterans;

19 (3) facilities of the Department; and

20 (4) such other locations as the Secretary, in col-
21 laboration with organizations that represent vet-
22 erans, considers appropriate.

23 (d) VETERANS CRISIS LINE PLAN.—

24 (1) IN GENERAL.—The Secretary shall ensure
25 that a plan exists for handling the potential increase

1 in the number of calls into the Veterans Crisis Line
2 that may occur during Buddy Check Week.

3 (2) SUBMITTAL OF PLAN.—The head of the
4 Veterans Crisis Line shall submit to the Secretary a
5 plan for how to handle excess calls during Buddy
6 Check Week, which may include the following:

7 (A) Additional hours for staff.

8 (B) The use of a backup call center.

9 (C) Any other plan to ensure that calls
10 from veterans in crisis are being answered in a
11 timely manner by an individual trained at the
12 same level as a Veterans Crisis Line responder.

13 (e) DEFINITIONS.—In this section:

14 (1) The term “organization that represents vet-
15 erans” means an organization recognized by the Sec-
16 retary for the representation of veterans under sec-
17 tion 5902 of title 38, United States Code.

18 (2) The term “veteran” has the meaning given
19 that term in section 101 of such title.

20 (3) The term “Veterans Crisis Line” means the
21 toll-free hotline for veterans provided by the Sec-
22 retary under section 1720F(h) of such title.

1 **SEC. 303. IMPROVEMENTS TO VETERANS JUSTICE OUT-**
2 **REACH PROGRAM.**

3 (a) **OUTREACH REQUIREMENT.**—The Secretary of
4 Veterans Affairs shall conduct outreach regarding the Vet-
5 erans Justice Outreach Program to justice-involved vet-
6 erans, military and veterans service organizations, and rel-
7 evant stakeholders in the criminal justice community, in-
8 cluding officials from local law enforcement, court, and jail
9 systems and others as determined appropriate by the Sec-
10 retary. Such outreach—

11 (1) shall be designed—

12 (A) to spread awareness and under-
13 standing of the Program;

14 (B) to spread awareness and under-
15 standing of veteran eligibility for the Program,
16 including the eligibility of veterans who were
17 discharged from service in the Armed Forces
18 under conditions other than honorable; and

19 (C) to improve the identification of justice-
20 involved veterans; and

21 (2) may be conducted in person, virtually, or
22 through other means, including by the dissemination
23 of informational materials and contact information.

24 (b) **STRATEGIC PLAN.**—The Secretary of Veterans
25 Affairs shall develop a strategic plan for the Veterans Jus-

1 tice Outreach Program. In developing such plan, the Sec-
2 retary shall conduct—

3 (1) an assessment of barriers to working with
4 justice-involved veterans in rural, remote, and under-
5 served areas, including potential steps to address
6 such barriers; and

7 (2) a workforce gap analysis for the Program.

8 (c) INCREASE IN NUMBER OF VJO SPECIALISTS.—

9 (1) INCREASE.—The Secretary of Veterans Af-
10 fairs shall increase the number of Veterans Justice
11 Outreach specialists responsible for supporting jus-
12 tice-involved veterans in rural, remote, or under-
13 served areas, including areas located far from De-
14 partment of Veterans Affairs medical centers, as de-
15 termined by the Secretary, through—

16 (A) the hiring of additional Veterans Jus-
17 tice Outreach specialists;

18 (B) the reallocation of existing Veterans
19 Justice Outreach specialists; or

20 (C) such other means as may be deter-
21 mined appropriate by the Secretary.

22 (2) DETERMINATION.—The Secretary shall de-
23 termine the number of Veterans Justice Outreach
24 specialists required, and the locations of such spe-

1 cialists, under paragraph (1) by taking into ac-
2 count—

3 (A) such number and locations needed to
4 achieve the mission and strategic goals of the
5 Veterans Justice Outreach Program;

6 (B) any gaps in the workforce of the Pro-
7 gram, including such gaps identified pursuant
8 to subsection (b)(2); and

9 (C) strategies to address such gaps.

10 (3) USE OF TECHNOLOGY.—In carrying out
11 paragraph (1), the Secretary shall consider the use
12 of virtual technology.

13 (d) PERFORMANCE GOALS AND IMPLEMENTATION
14 PLANS.—

15 (1) ESTABLISHMENT.—The Secretary of Vet-
16 erans Affairs shall establish performance goals and
17 implementation plans for—

18 (A) the Veterans Justice Outreach Pro-
19 gram;

20 (B) Veterans Justice Outreach Specialists;
21 and

22 (C) providing support for research regard-
23 ing justice-involved veterans.

24 (2) CONSISTENCY WITH STRATEGIC PLAN.—

25 The Secretary shall ensure that the performance

1 goals and implementation plans under paragraph (1)
2 are consistent with the strategic plan under sub-
3 section (b) and include—

4 (A) qualitative and quantitative milestones,
5 measures, and metrics, and associated timelines
6 for completion of the plans under paragraph (1)
7 and barriers to such completion;

8 (B) an identification of relevant staff; and

9 (C) an estimate of resource needs and
10 sources.

11 (3) PERFORMANCE DATA.—The Secretary shall
12 establish a process to regularly collect and analyze
13 performance data to assess the efficiency and effec-
14 tiveness of implementing the plans under paragraph
15 (1).

16 (e) TRAINING REQUIREMENT.—The Secretary shall
17 ensure that all Veterans Justice Outreach Specialists re-
18 ceive training not less frequently than annually on—

19 (1) best practices for identifying and con-
20 ducting outreach to justice-involved veterans and rel-
21 evant stakeholders in the criminal justice commu-
22 nity; and

23 (2) veteran eligibility for the Veterans Justice
24 Outreach Program, including with respect to consist-
25 ently communicating changes regarding eligibility

1 (including through the use of a script or other ref-
2 erence materials).

3 (f) REPORTS ON IMPLEMENTATION.—

4 (1) FIRST REPORT.—Not later than one year
5 after the date of the enactment of this Act, the Sec-
6 retary shall submit to Congress a report on the fol-
7 lowing:

8 (A) An assessment of implementing sub-
9 section (c), including—

10 (i) strategies to increase Veterans
11 Justice Outreach specialists responsible for
12 supporting justice-involved veterans in
13 rural, remote, or underserved areas; and

14 (ii) the progress of the Secretary in
15 addressing gaps in the workforce of the
16 Veterans Justice Outreach Program identi-
17 fied pursuant to paragraph (2) of such
18 subsection.

19 (B) The performance goals and implemen-
20 tation plans established under subsection
21 (d)(1).

22 (2) SUBSEQUENT REPORT.—Not later than
23 three years after the date on which the first report
24 is submitted under paragraph (1), the Secretary
25 shall submit to Congress a report on the progress of

1 the Secretary in meeting the performance goals and
2 carrying out activities under the implementation
3 plans established under subsection (d)(1).

4 (g) REPORT ON VETERANS TREATMENT COURTS.—

5 Not later than one year after the date of the enactment
6 of this Act, the Secretary, in consultation with the Attor-
7 ney General, shall submit to Congress a report on the en-
8 gagement of the Department of Veterans Affairs with vet-
9 erans treatment courts, including—

10 (1) the availability and efficacy of veterans
11 treatment courts in meeting the needs of justice-in-
12 volved veterans;

13 (2) best practices for Department of Veterans
14 Affairs staff and justice-involved veterans in working
15 with veterans treatment courts; and

16 (3) the ability of justice-involved veterans to ac-
17 cess veterans treatment courts, including any bar-
18 riers that exist to increasing such access.

19 (h) DEFINITIONS.—In this section:

20 (1) The term “justice-involved veteran” means
21 a veteran with active, ongoing, or recent contact
22 with some component of a local criminal justice sys-
23 tem.

24 (2) The term “Veterans Justice Outreach Pro-
25 gram” means the program through which the De-

1 department of Veterans Affairs identifies justice-in-
2 volved veterans and provides such veterans with ac-
3 cess to Department services.

4 (3) The term “Veterans Justice Outreach Spe-
5 cialist” means an employee of the Department of
6 Veterans Affairs who serves as a liaison between the
7 Department and the local criminal justice system on
8 behalf of a justice-involved veteran.

9 (4) The term “veterans treatment court” means
10 a State or local court that is participating in the vet-
11 erans treatment court program (as defined in section
12 2991(i)(1) of the Omnibus Crime Control and Safe
13 Streets Act of 1968 (42 U.S.C. 3797aa(i)(1))).

14 **SEC. 304. DEPARTMENT OF VETERANS AFFAIRS GOV-**
15 **ERNORS CHALLENGE PROGRAM.**

16 The Secretary of Veterans Affairs may enter into
17 agreements with States, territories, and American Indian
18 and Alaska Native tribes for the development and imple-
19 mentation of veteran suicide prevention proposals through
20 the Governors Challenge Program.

1 **TITLE IV—MENTAL HEALTH**
2 **CARE DELIVERY**

3 **SEC. 401. EXPANSION OF PEER SPECIALIST SUPPORT PRO-**
4 **GRAM OF DEPARTMENT OF VETERANS AF-**
5 **FAIRS.**

6 (a) **EXPANSION.**—Section 506 of the VA MISSION
7 Act of 2018 (Public Law 115–182; 38 U.S.C. 1701 note)
8 is amended—

9 (1) by redesignating subsections (d) through (f)
10 as subsections (e) through (g);

11 (2) in subsection (a), by adding at the end the
12 following new sentence: “Each such peer specialist
13 shall be a full-time employee whose primary function
14 is to serve as a peer specialist and shall be in addi-
15 tion to all other employees of such medical center.”;

16 (3) in the heading of subsection (b), by striking
17 “TIMEFRAME” and inserting “INITIAL TIME-
18 FRAME”;

19 (4) in subsection (c)—

20 (A) in the heading, by striking “SELEC-
21 TION” and inserting “INITIAL SELECTION”; and

22 (B) in paragraph (1), by striking “The
23 Secretary shall” and inserting “In establishing
24 the program at initial locations, the Secretary
25 shall”;

1 (5) by inserting after subsection (c) the fol-
2 lowing new subsection:

3 “(d) TIMEFRAME FOR EXPANSION OF PROGRAM; SE-
4 LECTION OF ADDITIONAL LOCATIONS.—

5 “(1) TIMEFRAME FOR EXPANSION.—The Sec-
6 retary shall make permanent and expand the pro-
7 gram to additional medical centers of the Depart-
8 ment as follows:

9 “(A) As of the date of the enactment of
10 the STRONG Veterans Act of 2021, the Sec-
11 retary shall make such program permanent at
12 each medical center participating in the pro-
13 gram on the day before such date of enactment.

14 “(B) During the seven-year period fol-
15 lowing such date of enactment, the Secretary
16 shall expand the program to an additional 25
17 medical centers per year until the program is
18 carried out at each medical center of the De-
19 partment.

20 “(2) SELECTION OF ADDITIONAL LOCATIONS.—

21 In selecting medical centers for the expansion of the
22 program under paragraph (1)(B), until such time as
23 each medical center of the Department is partici-
24 pating in the program by establishing not fewer than
25 two peer specialists at the medical center, the Sec-

1 retary shall prioritize medical centers in the fol-
2 lowing areas:

3 “(A) Rural areas and other areas that are
4 underserved by the Department.

5 “(B) Areas that are not in close proximity
6 to an active duty military installation.

7 “(C) Areas representing different geo-
8 graphic locations, such as census tracts estab-
9 lished by the Bureau of the Census.”;

10 (6) in subsection (e), as redesignated by para-
11 graph (1)—

12 (A) in the heading, by striking “GENDER-
13 SPECIFIC SERVICES” and inserting “CONSIDER-
14 ATIONS FOR HIRING PEER SPECIALISTS”;

15 (B) in the matter preceding paragraph (1),
16 by striking “location selected under subsection
17 (c)” and inserting “medical center”;

18 (C) in paragraph (1), by striking “and” at
19 the end; and

20 (D) by striking paragraph (2) and insert-
21 ing the following new paragraphs:

22 “(2) female peer specialists are hired and made
23 available to support female veterans who are treated
24 at each medical center; and

1 “(3) to the extent practical, peer specialists are
2 hired in demographic percentages that reflect the ra-
3 cial and ethnic demographic percentages of the over-
4 all veterans population.”; and

5 (7) by amending subsection (g), as redesignated
6 by paragraph (1), to read as follows:

7 “(g) REPORTS.—

8 “(1) PERIODIC REPORTS.—

9 “(A) IN GENERAL.—Not later than one
10 year after the date of the enactment of the
11 STRONG Veterans Act of 2021, and annually
12 thereafter for five years, the Secretary shall
13 submit to the Committees on Veterans’ Affairs
14 of the House of Representatives and the Senate
15 a report on the program, including the expan-
16 sion of the program under subsection (d)(1).

17 “(B) ELEMENTS.—Each report under sub-
18 paragraph (A) shall include, with respect to the
19 one-year period preceding the submission of the
20 report, the following:

21 “(i) The findings and conclusions of
22 the Secretary with respect to the program.

23 “(ii) An assessment of the benefits of
24 the program to veterans and family mem-
25 bers of veterans.

1 “(iii) An assessment of the effective-
2 ness of peer specialists in engaging under
3 subsection (f) with health care providers in
4 the community and veterans served by
5 such providers.

6 “(iv) The name and location of each
7 medical center where new peer specialists
8 were hired.

9 “(v) The number of new peer special-
10 ists hired at each medical center pursuant
11 to this section and the total number of
12 peer specialists within the Department
13 hired pursuant to this section.

14 “(vi) An assessment of any barriers
15 confronting the recruitment, training, or
16 retention of peer specialists.

17 “(2) FINAL REPORT.—Not later than one year
18 after the Secretary determines that the program is
19 being carried out at each medical center of the De-
20 partment, the Secretary shall submit to the Commit-
21 tees on Veterans’ Affairs of the House of Represent-
22 atives and the Senate a report notifying such com-
23 mittees of such determination.”.

24 (b) AUTHORIZATION OF APPROPRIATIONS.—There is
25 authorized to be appropriated to the Department of Vet-

1 erans Affairs to implement section 506 of the VA MIS-
2 SION Act of 2018 (Public Law 115–182; 38 U.S.C. 1701
3 note), as amended by subsection (a), the following
4 amounts:

- 5 (1) \$3,600,000 for fiscal year 2022.
- 6 (2) \$7,200,000 for fiscal year 2023.
- 7 (3) \$10,800,000 for fiscal year 2024.
- 8 (4) \$14,400,000 for fiscal year 2025.
- 9 (5) \$18,000,000 for fiscal year 2026.
- 10 (6) \$21,600,000 for fiscal year 2027.
- 11 (7) \$25,000,000 for fiscal year 2028.

12 **SEC. 402. EXPANSION OF VET CENTER SERVICES.**

13 (a) VETERANS AND MEMBERS USING EDUCATIONAL
14 ASSISTANCE BENEFITS.—Section 1712A of title 38,
15 United States Code, is amended—

16 (1) by striking “clauses (i) through (vi)” both
17 places it appears and inserting “clauses (i) through
18 (vii)”;

19 (2) by striking “in clause (vii)” both places it
20 appears and inserting “in clause (viii)”;

21 (3) in subsection (a)(1)(C)—

22 (A) by redesignating clause (vii) as clause
23 (viii); and

24 (B) by inserting after clause (vi) the fol-
25 lowing new clause:

1 “(vii) Any veteran or member of the Armed
2 Forces pursuing a course of education using covered
3 educational assistance benefits.”; and

4 (4) in subsection (h), by adding at the end the
5 following new paragraph:

6 “(6) The term ‘covered educational assistance
7 benefits’ means educational assistance benefits pro-
8 vided pursuant to—

9 “(A) chapter 30, 31, 32, or 33 of this title;

10 “(B) chapter 1606 or 1607 of title 10;

11 “(C) section 116 of the Harry W. Colmery
12 Veterans Educational Assistance Act of 2017
13 (Public Law 115–48; 38 U.S.C. 3001 note); or

14 “(D) section 8006 of the American Rescue
15 Plan Act of 2021 (Public Law 117–2; 38
16 U.S.C. 3001 note prec.).”.

17 (b) GAO REPORT.—Not later than one year after the
18 date of the enactment of this Act, the Comptroller General
19 of the United States shall submit to the Committees on
20 Veterans’ Affairs of the House of Representatives and the
21 Senate a report assessing—

22 (1) the mental health needs of veterans pur-
23 suing a course of education using covered edu-
24 cational assistance benefits (as defined in section

1 1712A(h)(6) of title 38, United States Code, as
2 added by subsection (a)); and

3 (2) the efforts of the Department of Veterans
4 Affairs to address such mental health needs.

5 **SEC. 403. ELIGIBILITY FOR MENTAL HEALTH SERVICES.**

6 (a) IN GENERAL.—Section 1712A(a)(1) of title 38,
7 United States Code, as amended by section 402, is further
8 amended—

9 (1) in subparagraph (A)(ii)—

10 (A) in subclause (I), by striking “and”;

11 (B) in subclause (II), by striking the pe-
12 riod at the end and inserting “; and”; and

13 (C) by adding at the end the following:

14 “(III) in the case of a veteran or member
15 who died by suicide, to the degree that coun-
16 seling furnished to such individual is found to
17 aid in coping with the effects of such suicide.”;

18 (2) in subparagraph (B)(i)(II)—

19 (A) in item (aa), by striking “or”;

20 (B) in item (bb), by striking the period at
21 the end and inserting “; or”; and

22 (C) by adding at the end the following;

23 “(cc) coping with the effects of a sui-
24 cide described in subclause (III) of such
25 clause.”; and

1 (3) in subparagraph (C)(vii)—

2 (A) in subclause (I), by striking “or” at
3 the end;

4 (B) in subclause (II), by striking the pe-
5 riod at the end and inserting “; or”; and

6 (C) by adding at the end the following:

7 “(III) veteran or member of the Armed
8 Forces who died by suicide.”.

9 (b) EFFECTIVE DATE.—The amendments made by
10 subsection (a) shall apply with respect to family members
11 of a member or veteran who died by suicide before, on,
12 or after the date of the enactment of this Act.

13 **SEC. 404. MENTAL HEALTH CONSULTATIONS.**

14 (a) MENTAL HEALTH CONSULTATIONS FOR VET-
15 ERANS FILING FOR COMPENSATION.—

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

19 **“§ 1167. Mental health consultations**

20 “(a) IN GENERAL.—Not later than 30 days after the
21 date on which a veteran submits to the Secretary a claim
22 for compensation under this chapter for a service-con-
23 nected disability relating to a mental health diagnosis, the
24 Secretary shall offer the veteran a mental health consulta-

1 tion to assess the mental health needs of, and care options
2 for, the veteran.

3 “(b) AVAILABILITY.—The Secretary shall—

4 “(1) offer a veteran a consultation under sub-
5 section (a) without regard to any previous denial or
6 approval of a claim of that veteran for a service-con-
7 nected disability relating to a mental health diag-
8 nosis; and

9 “(2) ensure that a veteran offered a mental
10 health consultation under subsection (a) may elect to
11 receive such consultation during the one-year period
12 beginning on the date on which the consultation is
13 offered or during such longer period beginning on
14 such date as the Secretary considers appropriate.

15 “(c) RULE OF CONSTRUCTION.—A consultation pro-
16 vided to a veteran under this section shall not be construed
17 as a determination that any disability of such veteran is
18 service-connected for the purposes of any benefit under the
19 laws administered by the Secretary.”.

20 (2) CLERICAL AMENDMENT.—The table of sec-
21 tions at the beginning of chapter 11 of such title is
22 amended by adding at the end the following new
23 item:

“1167. Mental health consultations.”.

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

4 (1) IN GENERAL.—Subchapter VII of chapter
5 20 of title 38, United States Code, is amended by
6 adding at the end the following new section:

7 **“§ 2068. Mental health consultations**

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

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

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

“2068. Mental health consultations.”.

TITLE V—RESEARCH

1
2 **SEC. 501. VETERANS INTEGRATION TO ACADEMIC LEADER-**
3 **SHIP PROGRAM OF THE DEPARTMENT OF**
4 **VETERANS AFFAIRS.**

5 (a) REPORT.—Not later than one year after the date
6 of the enactment of this Act, the Secretary of Veterans
7 Affairs shall submit to the Committees on Veterans' Af-
8 fairs of the House of Representatives and the Senate a
9 report on the Veterans Integration to Academic Leader-
10 ship program of the Department of Veterans Affairs. The
11 report shall include the following:

12 (1) The number of medical centers of the De-
13 partment, institutions of higher learning, non-college
14 degree programs, and student veterans supported by
15 the program, and relevant trends since the program
16 began.

17 (2) The staff and resources allocated to the
18 program, and relevant trends since the program
19 began.

20 (3) An assessment of the outcomes and effec-
21 tiveness of the program in—

22 (A) supporting student veterans;

23 (B) connecting student veterans to needed
24 services of the Department or services provided
25 by non-Department entities;

1 (C) addressing the mental health needs of
2 student veterans;

3 (D) lowering the suicide risk of student
4 veterans; and

5 (E) helping student veterans achieve edu-
6 cational goals.

7 (4) An assessment of barriers to expanding the
8 program and how the Secretary intends to address
9 such barriers.

10 (5) An assessment of whether the program
11 should be expanded outside of the Office of Mental
12 Health and Suicide Prevention to support students
13 veterans with needs unrelated to mental health or
14 suicide.

15 (b) UNIFORM BEST PRACTICES, GOALS, AND MEAS-
16 URES.—The Secretary shall establish best practices, goals,
17 and measures for the Veterans Integration to Academic
18 Leadership program of the Department that are uniform
19 among the medical centers of the Department.

20 (c) OUTREACH.—The Secretary shall conduct out-
21 reach among the Armed Forces, veterans service organiza-
22 tions, institutions of higher learning, and non-college de-
23 gree programs with respect to the Veterans Integration
24 to Academic Leadership program of the Department.

1 (d) ASSESSMENT.—The Secretary shall assess the
2 feasibility and advisability of including the suicide rate for
3 student veterans in the National Veteran Suicide Preven-
4 tion Annual Report of the Office of Mental Health and
5 Suicide Prevention of the Department.

6 (e) DEFINITIONS.—In this section:

7 (1) The term “institution of higher learning”
8 has the meaning given that term in section 3452 of
9 title 38, United States Code.

10 (2) The term “student veteran” means the fol-
11 lowing:

12 (A) A veteran or member of the Armed
13 Forces using educational assistance under any
14 of the following provisions of law:

15 (i) Chapter 30, 31, 32, or 33 of title
16 38, United States Code, or chapter 1606
17 or 1607 of title 10, United States Code.

18 (ii) Section 116 of the Harry W.
19 Colmery Veterans Educational Assistance
20 Act of 2017 (Public Law 115–48; 38
21 U.S.C. 3001 note).

22 (iii) Section 8006 of the American
23 Rescue Plan Act of 2021 (Public Law
24 117–2; 38 U.S.C. 3001 note prec.).

1 (B) A veteran who is enrolled in an institu-
2 tion of higher learning or other training pro-
3 gram, without regard to whether the veteran is
4 using educational assistance specified in sub-
5 paragraph (A).

6 **SEC. 502. IMPROVEMENT OF SLEEP DISORDER CARE FUR-**
7 **NISHED BY DEPARTMENT OF VETERANS AF-**
8 **FAIRS.**

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

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

18 (1) assessment and treatment options for such
19 disorders;

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

22 (3) the efficacy of the clinical practice guide-
23 lines of the Department of Veterans Affairs and the
24 Department of Defense for such disorders; and

1 cess of veterans to care under the residential rehabilitation
2 treatment programs of the Department of Veterans Af-
3 fairs to determine—

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

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

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

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

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

18 (A) Veterans Integrated Service Network;

19 (B) rural or urban area;

20 (C) sex; and

21 (D) specialty (general program, substance
22 use disorder program, military sexual trauma
23 program, etc.).

24 (b) RECOMMENDATIONS FOR MODIFICATIONS TO
25 TREATMENT PROGRAMS.—Using the results from the

1 study conducted under subsection (a), the Secretary shall
2 make recommendations for—

3 (1) new locations for opening facilities to par-
4 ticipate in the residential rehabilitation treatment
5 programs of the Department;

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

8 (3) any additional specialty tracks to be added
9 to such programs, such as substance use disorder or
10 military sexual trauma, in order to meet veteran
11 need and demand.

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

19 **SEC. 504. STUDY ON TREATMENT FROM DEPARTMENT OF**
20 **VETERANS AFFAIRS FOR CO-OCCURRING**
21 **MENTAL HEALTH AND SUBSTANCE USE DIS-**
22 **ORDERS.**

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

1 (1) the availability of treatment programs for
2 veterans with co-occurring mental health and sub-
3 stance use disorders (including both inpatient and
4 outpatient care);

5 (2) any geographic disparities in access to such
6 programs, such as for rural and remote veterans;
7 and

8 (3) the average wait times for care under such
9 programs.

10 (b) REPORT.—

11 (1) IN GENERAL.—Not later than two years
12 after the date of the enactment of this Act, the Sec-
13 retary shall submit to the Committee on Veterans’
14 Affairs of the Senate and the Committee on Vet-
15 erans’ Affairs of the House of Representatives a re-
16 port on the findings of the study conducted under
17 subsection (a).

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

20 (A) any recommendations resulting from
21 the study conducted under subsection (a) with
22 respect to improving timeliness and quality of
23 care and meeting treatment preferences for vet-
24 erans with co-occurring mental health and sub-
25 stance use disorders; and

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

3 **SEC. 505. STUDY ON WORKLOAD OF SUICIDE PREVENTION**
4 **TEAMS OF DEPARTMENT OF VETERANS AF-**
5 **FAIRS.**

6 (a) IN GENERAL.—The Secretary of Veterans Af-
7 fairs, acting through the Under Secretary for Health and
8 the Office of Mental Health and Suicide Prevention, shall
9 conduct a study evaluating the workload of local suicide
10 prevention teams of the Department of Veterans Affairs.

11 (b) ELEMENTS.—The study conducted under sub-
12 section (a) shall—

13 (1) identify the effects of the growth of the sui-
14 cide prevention program of the Department on the
15 workload of suicide prevention teams;

16 (2) incorporate key practices for staffing model
17 design in determining suicide prevention staffing
18 needs; and

19 (3) determine which facilities of the Depart-
20 ment need increased suicide prevention coordinator
21 staffing to meet the needs of veterans, with an em-
22 phasis placed on facilities with high patient volume
23 and facilities located in States with high rates of vet-
24 eran suicide.

1 (c) REPORT.—Not later than one year after the date
2 of the enactment of this Act, the Secretary shall submit
3 to the Committee on Veterans' Affairs of the Senate and
4 the Committee on Veterans' Affairs of the House of Rep-
5 resentatives a report—

6 (1) on the findings of the study conducted
7 under subsection (a); and

8 (2) indicating any changes made to the staffing
9 of suicide prevention teams of the Department re-
10 sulting from the determinations made under sub-
11 section (b)(3), including a list of facilities of the De-
12 partment where staffing was adjusted.

13 **SEC. 506. EXPANSION OF SUICIDE PREVENTION AND MEN-**
14 **TAL HEALTH RESEARCH.**

15 (a) RESEARCH ON MORAL INJURY.—The Secretary
16 of Veterans Affairs, acting through the Office of Research
17 and Development of the Department of Veterans Affairs,
18 shall conduct suicide prevention and mental health care
19 improvement research on how moral injury relates to the
20 mental health needs of veterans who served in the Armed
21 Forces after September 11, 2001, and best practices for
22 mental health treatment for such veterans.

23 (b) AUTHORIZATION OF APPROPRIATIONS.—There is
24 authorized to be appropriated to the Department of Vet-
25 erans Affairs an additional \$10,000,000 to be used by the

1 Center of Excellence for Suicide Prevention of the Depart-
2 ment and the Rocky Mountain Mental Illness Research
3 Education and Clinical Center for purposes of conducting
4 research on the factors impacting veteran suicide and best
5 practices for early intervention and support.

6 **SEC. 507. STUDY ON MENTAL HEALTH AND SUICIDE PRE-**
7 **VENTION SUPPORT FOR MILITARY FAMILIES.**

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

13 (b) REPORT.—

14 (1) IN GENERAL.—Not later than three years
15 after the date of the enactment of this Act, the Sec-
16 retary of Veterans Affairs, in collaboration with the
17 Secretary of Defense, shall submit to Congress, vet-
18 erans service organizations, and military support or-
19 ganizations a report on the findings of the study
20 conducted under subsection (a).

21 (2) DEFINITIONS.—In this subsection:

22 (A) The term “military support organiza-
23 tion” has the meaning given that term by the
24 Secretary of Defense.

1 (B) The term “veterans service organiza-
2 tion” means an organization recognized by the
3 Secretary of Veterans Affairs for the represen-
4 tation of veterans under section 5902 of title
5 38, United States Code.

6 **SEC. 508. RESEARCH ON BRAIN HEALTH.**

7 There is authorized to be appropriated to the Depart-
8 ment of Veterans Affairs an additional \$5,000,000 for on-
9 going and future research at the Translational Research
10 Center of the Department of Veterans Affairs for trau-
11 matic brain injury and stress disorders to provide better
12 understanding of, and improved treatment options for,
13 veterans who served in the Armed Forces after September
14 11, 2001, and who have traumatic brain injury or post-
15 traumatic stress disorder.

16 **SEC. 509. STUDY ON EFFICACY OF CLINICAL AND AT-HOME**
17 **RESOURCES FOR POST-TRAUMATIC STRESS**
18 **DISORDER.**

19 Not later than two years after the date of the enact-
20 ment of this Act, the Secretary of Veterans Affairs, acting
21 through the Office of Research and Development of the
22 Department of Veterans Affairs, shall conduct a study
23 on—

24 (1) the efficacy of clinical and at-home re-
25 sources, such as mobile applications like COVID

1 Coach, for providers, veterans, caregivers, and fam-
2 ily members to use for dealing with stressors;
3 (2) the feasibility and advisability of developing
4 more such resources;
5 (3) strategies for improving mental health care
6 and outcomes for veterans with post-traumatic stress
7 disorder; and
8 (4) best practices for helping family members of
9 veterans deal with secondary post-traumatic stress
10 disorder or mental health concerns.

○