

1 this Committee and before the Senate, and I wanted to give
2 the opportunity to those veteran service organizations and
3 others the ability to tell us any thoughts they have in
4 regard to this legislation as we negotiate with the House in
5 its passage and its ability to be sent to the President.

6 Additionally, tomorrow, September 10th, is Worldwide
7 Suicide Prevention Day, and this hearing is our opportunity
8 to call attention to the tragedy of suicide impacting so
9 many Americans, and urge for swift passage of our
10 legislation that will provide lifesaving measures for
11 veterans who are at risk.

12 Just yesterday I was notified of yet another veteran
13 who died by suicide while on VA property. Despite years of
14 increased investment in mental health care at the VA, there
15 is a need for a new approach that places the veteran at the
16 center of the system and focuses on new connections and new
17 forms of outreach. This bill achieves those goals in many
18 ways, including bolstering outreach to veterans not yet
19 identified and organizations that are not yet serving them,
20 directing cutting-edge research and greater data-sharing,
21 exploring alternative suicide prevention programs, and to
22 make certain there is no wrong door to accessing mental
23 health care and suicide prevention services for our nation's
24 veterans.

25 As we know from VA data, 14 out of 20 veterans who die

1 by suicide each day are not enrolled in the VA system. This
2 bill will enable the VA to better work with and amplify the
3 efforts of organizations already serving veterans across the
4 country who are filling gaps, especially in rural and
5 medically underserved areas.

6 In our Committee's first markup, after I became
7 Chairman in January, we reported this bill favorably with a
8 17-0 vote. I was pleased to work with Ranking Member Tester
9 and our colleagues to pass this legislation out of the
10 Senate unanimously last month. Senator Tester has been a
11 leader in this legislation from the very beginning.

12 While our country has faced unprecedented and
13 unexpected challenges this year, we cannot lose focus on the
14 need of our nation's veterans. I look forward to testimony
15 from everyone who will be taking part in today's hearing
16 about your organization's reasons for supporting Commander
17 John Scott Hannon Veterans Mental Health Care Improvement
18 Act and your support for it becoming law, and how this bill
19 will make meaningful impact on the lives of veterans.

20 Let me now yield to the Ranking Member, Senator Tester.

21 OPENING STATEMENT OF SENATOR TESTER

22 Senator Tester. Thank you for the opportunity to
23 highlight the significance of the Commander John Scott
24 Hannon Veterans Mental Health Care Improvement Act that was
25 introduced, as the Chairman said, by the Chairman and myself

1 a little more than a year ago.

2 This bill is named for a former Navy SEAL who served
3 our nation honorably for 23 years. It would expand and
4 improve the services available to veterans struggling with
5 the invisible wounds of war.

6 After serving in combat, Scott returned to Helena,
7 Montana, and he was open about his journey to recovery,
8 getting involved in the Montana chapter of the National
9 Alliance on Mental Illness and animal therapy programs at
10 Montana Wild. Unfortunately, he died by suicide on February
11 25, 2018.

12 This bill honors his legacy by supporting the types of
13 programs that improved Commander Hannon's quality of life
14 and by expanding our understanding of mental health
15 conditions and their treatments, which may have made
16 diagnosing his conditions easier.

17 There are a lot of important provisions in this bill.
18 It represents compromise in a time when compromises are hard
19 to come by. This legislation prepares all VA hospitals to
20 employ at least one suicide prevention coordinator. It
21 bolsters VA's research efforts, particularly in identifying
22 and validating brain and mental health biomarkers and
23 studying the effects of high altitude on mental health and
24 the risk of suicide. It provides tools for effective VA
25 suicide prevention and mental health outreach. It helps

1 expand rural veterans' access to VA telehealth care. It
2 requires VA to take a hard look at its mental health
3 professional staffing levels.

4 It directs the VA to establish a scholarship program
5 for students pursuing a degree in psychology, social work,
6 marriage and family therapy, or mental health counseling.
7 Those students will enter into an agreement to work full-
8 time at a Vet Center for a period of time following
9 completion of their program of study.

10 It would allow the VA to award grants to community
11 organizations to provide suicide prevention services to
12 veterans and their families. And as part of this grant,
13 veterans will be able to receive necessary emergency care
14 when they are in crisis, and if they need ongoing care they
15 can get that care at the VA.

16 I encourage my colleagues in the House to support the
17 Commander John Scott Hannon Veterans Mental Health Care
18 Improvement Act so we can move this bill forward. And as
19 the Chairman has indicated, we are ready and eager to work
20 with our House counterparts to advance additional
21 legislation that could improve health outcomes for our
22 veterans. Our work can send a very important message, not
23 only to veterans but to the American public, that we can
24 come together during potentially turbulent times to do what
25 is right, in this case provide critical support to those who

1 have sacrificed so much, and to connect more of them to
2 lifesaving mental health care that they need.

3 In particular, I want to thank the Hannon family for
4 continuing to be a partner in this effort to improve the
5 services available to veterans who need some help in
6 improving their mental health. And I would like to
7 recognize a witness from Montana, Matt Kuntz, who remains
8 very close to the Hannon family and whose tireless advocacy
9 helped make this legislation possible.

10 Again, I want to thank you, Mr. Chairman. It has been
11 a pleasure working with you, and I appreciate your
12 dedication to getting things done. With that I yield.

13 Chairman Moran. Senator Tester, thank you for your
14 opening remarks, and you and I have been involved in many
15 pieces of legislation, many of them related to the care and
16 well-being of our nation's veterans. None should be
17 considered more important than the efforts that we are about
18 today, and I thank you for the way that we have been able to
19 come together, work together, and hopefully achieve an
20 outcome that is significantly beneficial to those who served
21 our nation.

22 Let me now introduce our witnesses. Ms. Katie Purswell
23 is the Deputy Director of Health Policy at The American
24 Legion. Mr. Jeremy Butler is the Chief Executive Officer of
25 Iraq and Afghanistan Veterans of America. Mr. Jim Lorraine

1 is President and CEO of America's Warrior Partnership. Mr.
2 Matt Kuntz is Executive Director of NAMI, the National
3 Alliance for Mental Health.

4 Thank you all for being with us in some form or another
5 today, and we will now being hearing from our witnesses.
6 Ms. Purswell, you are recognized for five minutes to deliver
7 your testimony.

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1 KATIE PURSWELL, DEPUTY DIRECTOR OF HEALTH POLICY,
2 THE AMERICAN LEGION

3 Ms. Purswell. A heartbreaking truth of veteran suicide
4 is that nearly every veteran has been touched by it in some
5 form or fashion. Many of us know someone who died by
6 suicide, attempted suicide, or had thoughts of suicide. If
7 you have never felt it, it is hard to comprehend what could
8 be so painful that ending your life would seem like the only
9 solution. Good or bad, the things that we have done and
10 seen are now a part of us and affect us in ways that we can
11 have trouble understanding. From complications with
12 assimilation into civilian life to reliving past traumatic
13 experiences, we struggle at times to find a way to cope.

14 It is crucial that veterans understand there are a
15 multitude of resources available to them. Even more
16 important, these resources must be thoughtful and
17 accessible. S. 785, the Commander John Scott Hannon
18 Veterans Mental Health Care Improvement Act of 2019
19 addresses these multifaceted issues by focusing on research
20 initiatives, health care modernization, oversight, and
21 adaptive suicide prevention programs.

22 Chairman Moran, Ranking Member Tester, and
23 distinguished members of the Committee, on behalf of
24 National Commander James "Bill" Oxford, and our nearly two
25 million members, thank you for inviting The American Legion

1 to testify on this critical piece of comprehensive
2 legislation.

3 Through transition assistance, prevention, research,
4 awareness, and appropriate mental health care services, we
5 feel this whole health cycle approach will be effective in
6 reducing veteran suicide. As a Legion member and as a
7 veteran who has been touched by this tragedy, I am proud to
8 say The American Legion supports this bill in its entirety.
9 For generations, veterans have struggled to reintegrate back
10 into civilian life. Through strengthening the Transition
11 Assistance Program, reviewing lessons learned, and expanding
12 VA services to eligible veterans, S. 785 ensures a safety
13 net is in place during this critical first year.

14 Through our own research we have found that many
15 servicemembers have difficulty enduring the emotional strain
16 associated with traditional, evidence-based psychotherapies.
17 As such, we support the use of complementary and integrated
18 health services endorsed by this bill. S. 785 creates and
19 expands access to diverse treatment options, including
20 animal therapy, agritherapy, and sports and recreation
21 therapy.

22 I think we can all agree that success of these programs
23 is dependent on proper staffing. Through our System Worth
24 Saving program we have found that staffing and retention are
25 often the culprit of delays in accessing mental health care.

1 These findings are in line with the VA's Office of Inspector
2 General report which determined mental health providers are
3 among the most critical in need. As recruitment and
4 retention have long been a major focus for The American
5 Legion, we are pleased to see legislation that addresses
6 this issue.

7 As reflected in our System Worth Saving annual report,
8 staffing issues expand beyond mental health to other areas
9 like women veteran health care. While we understand the gap
10 analysis and report on women veteran utilizing of health
11 care sections have been moved back to the Deborah Sampson
12 Act, we are proud to say that we support both bills and
13 their focus on improving care for all eligible veterans in a
14 more inclusive manner.

15 The American Legion feels inclusivity also involves
16 minority and rural veterans who have remained underserved
17 for far too long. S. 785's expansion of telehealth services
18 in conjunction with The American Legion ATLAS Pilot Program
19 will bring services to these underserved populations in need
20 of comprehensive health care, to include mental health care
21 access.

22 Our organization understands mental health care does
23 not have a one-size-fits-all solution in preventing suicide.
24 It is a complex problem that needs to be treated at an
25 individual level, as each veteran situation is unique, for

1 example, Commander Hannon's unique battle was with PTSD,
2 TBI, severe depression, and bipolar disorder. He was a
3 decorated Navy SEAL, and while battling his own invisible
4 wounds he spoke candidly about his mental health journey and
5 advocated for mental health treatments and alternative
6 therapies. It is in his honor this legislation was
7 introduced.

8 While in the end we lost Commander Hannon to suicide,
9 we can learn from his story and from others to further the
10 conversation in awareness and prevention through action,
11 action like the passing of this bill. While we support S.
12 785 as currently written, we appreciate the House Veterans'
13 Affairs Committee's research-based additions surrounding
14 mental health, and are open to exploring those
15 recommendations in the future. We strongly urge that the
16 committees in both chambers of Congress move expeditiously
17 to reconcile their versions of S. 785 to ensure that this
18 important legislation is passed before the end of the 116th
19 Congress.

20 Thank you, Chairman Moran, Ranking Member Tester, and
21 distinguished members of the Committee for your commitment
22 to this difficult subject and for continually keeping
23 veterans at the core of your mission. It is my privilege to
24 represent The American Legion before this Committee and I
25 look forward to answering any questions you have.

1 [The prepared statement of Ms. Purswell follows:]
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1 Chairman Moran. Ms. Purswell, thank you very much for
2 your testimony and thank you to The American Legion.

3 I now recognize Mr. Butler.

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1 JEREMY BUTLER, CHIEF EXECUTIVE OFFICER, IRAQ AND
2 AFGHANISTAN VETERANS OF AMERICA

3 Mr. Butler. Chairman Moran, Ranking Member Tester, and
4 distinguished members of the Committee, on behalf of Iraq
5 and Afghanistan Veterans of America and our more than
6 425,000 members, I would like to thank you for the
7 opportunity to testify here today.

8 For nearly a decade, IAVA and the veteran community has
9 called for immediate action by our nation's leaders to
10 appropriately respond to the crisis of over 20 military and
11 veterans dying every day by suicide. Thanks to the courage
12 and leadership of veterans, military family members and our
13 allies, there has been progress, but the tragedy continues.

14 According to VA data, post-9/11 veterans aged 18 to 34
15 continue to have the highest rate of suicide. And while not
16 always an indicator of suicide, mental health injuries
17 continue to disproportionately impact the post-9/11
18 generation. In our latest Member Survey, 65 percent of IAVA
19 members reported service-connected PTSD and well over half
20 report anxiety or depression. Over 60 percent know a post-
21 9/11 veteran who attempted suicide or who died by suicide,
22 an alarming 22 percent increase rise since 2014.

23 Every day we are losing more of our brothers and
24 sisters to suicide. IAVA will continue to maintain our
25 leadership in fighting to bring these numbers down.

1 In March, I testified before a joint hearing of the
2 Senate and House Veterans Affairs Committees on IAVA's Big
3 Six priorities for 2020. The number one issue for IAVA was
4 and remains our Campaign to Combat Suicide and the
5 centerpiece of that campaign is the legislation we are
6 talking about today, the Commander John Scott Hannon
7 Veterans Mental Health Care Improvement Act. IAVA is
8 extremely proud to have worked with both Chairman Moran and
9 Ranking Member Tester on this landmark legislation, and we
10 thank them for their important leadership on this critical
11 issue.

12 In March, I applauded this Committee on its unanimous
13 passage of S. 785, urged your House colleagues to follow,
14 and for the President to sign it into law. I am here today
15 to reiterate our strong support for this legislation and to
16 thank the Committee again for your action which led to
17 unanimous passage out of the Senate a month ago.

18 The primary message I want to deliver today is to
19 reemphasize my belief that it would be completely
20 irresponsible if the 116th Congress ended its legislative
21 work this December without having at least passed the
22 Commander Hannon Act. There has been plenty of talk but not
23 nearly enough action to address the worsening crisis of
24 veteran and military suicide, and we are literally at a
25 crossroads. 2020 can be the year where we join together to

1 pass much-needed legislation to take the next big step to
2 combat this crisis.

3 However, IAVA is deeply concerned for the current path
4 forward for the Commander Hannon Act. While we appreciate
5 the House Committee's well-intentioned efforts to add new
6 provisions to the legislation, we have strong concerns that
7 given the limited number of legislative days and the
8 upcoming elections, there will likely not be enough time to
9 negotiate and pass this legislation by the end of the year.
10 We believe that the best and most responsible way forward
11 for our nation's veterans is for the House to take up S. 785
12 as passed unanimously by the Senate. Following enactment,
13 we strongly encourage the Committees to consider additional
14 provisions in a new package of legislation.

15 While passage of the Commander Hannon act will go a
16 long way in improving the delivery of mental health care to
17 our veteran community, we know that our job will still not
18 be done.

19 Thank you again for the opportunity to share IAVA's
20 views and to express the importance of passing the Commander
21 John Scott Hannon Veterans Mental Health Care Improvement
22 Act this year. I look forward to answering your questions
23 and continuing to work with the Committees. Thank you.

24 [The prepared statement of Mr. Butler follows:]

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1 Chairman Moran. Mr. Butler, thank you very much for
2 your clear testimony.

3 I now recognize Mr. Lorraine for his testimony for five
4 minutes.

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1 JIM LORRAINE, PRESIDENT AND CHIEF EXECUTIVE
2 OFFICER, AMERICA'S WARRIOR PARTNERSHIP

3 Mr. Lorraine. Chairman Moran, Ranking Member Tester,
4 and members of the Committee, thank you for the invitation
5 to testify today. I would like to ask that my written
6 testimony and our joint letter from August 18, 2020 be added
7 for the record.

8 Since the 116th Congress convened on January 3rd, 2019,
9 the President, the Department of Veterans Affairs, and both
10 the Senate and House VA Committees committed to addressing
11 the veteran suicide epidemic. In those 615 days,
12 approximately 12,300 veterans died by suicide, and despite
13 increasing the VA's suicide prevention budget to stem
14 veteran suicides, the number continues to rise.

15 In the last 18 months, the President signed an
16 Executive order to prevent veteran suicide, the VA
17 established the PREVENTS Task Force, and the Senate passed
18 one of the most impactful veteran suicide prevention bills
19 of the last 10 years, yet we continue to lack a
20 comprehensive, integrated law that can be implemented by the
21 VA to end veteran suicide.

22 In early August, America's Warrior Partnership and 30
23 of our community partners provided this Committee and the
24 House VA Committee a letter strongly supporting Senate bill
25 785, also known as the Commander John Scott Hannon Veterans

1 Mental Health Care Improvement Act of 2019.

2 Senate bill 785 is essential in both breadth and depth
3 to getting upstream of veteran suicide. Innovative is the
4 integration of community grants to proactively connect with
5 veterans before the crisis of suicide, combined with
6 community enablers such as research studies correlating
7 opioid related deaths; programs providing veteran access to
8 complementary and integrative health services through animal
9 therapy, agritherapy, sports, post-traumatic growth, and
10 recreation therapy; research on mental health biomarkers;
11 and increasing the capacity of VA and Vet Center counselors.

12 Solving the veteran suicide crisis requires a holistic
13 solution. Veterans, their families, and the nation are
14 losing hope that the government will act, especially during
15 these unknown times. You have done your job, and I hope the
16 House of Representatives will pass Senate bill 785
17 immediately.

18 The need is now and the need is great. America's
19 Warrior Partnership is leading a nationwide veteran suicide
20 study called Operation Deep Dive. In partnership with the
21 University of Alabama and funded by the Bristol Myers Squibb
22 Foundation, this four-year study is showing that some of the
23 states undercount veteran suicides by as much as 25 percent.
24 To date, we have learned that suicide amongst those
25 dishonorably discharged is far less than those honorably

1 discharged veterans, veterans younger than 64 die from all
2 causes of death at a rate four times greater than non-
3 veterans, and sadly, veterans between the ages of 18 and 34
4 die at a ten times greater rate than non-veterans.

5 I would like to publicly thank Karin Orvis and her
6 suicide prevention team at the Department of Defense for
7 partnering with us as we peel back another layer of the
8 suicide onion. Without DoD, these findings would not be
9 possible. Operation Deep Dive is currently working with
10 four state datasets, and we welcome incorporating the
11 Committee members' states in the future.

12 Operation Deep Dive seeks to provide communities
13 insight to help them get upstream of veteran suicide, to
14 increase the hope and quality of life for veterans and their
15 families. Getting upstream is reducing homelessness,
16 increasing access to reliable transportation, maximizing
17 educational opportunities, working in sustainable
18 employment, increasing volunteer opportunities, and having
19 access to 22nd century physical and mental health care.
20 Getting upstream is achieved when veterans look to the
21 future with hope. But again, on this issue, time is not our
22 friend.

23 Our nation's veterans and their families provided their
24 opinion through our program Mission Roll Call. When we
25 asked over 600,000 veterans and their families, we learned

1 that 95 percent do not believe our country is doing enough
2 for the mental health of our veterans; 77 percent do not
3 believe that dishonorably discharged servicemembers should
4 receive VA health care, and 86 percent feel that the VA must
5 partner with non-government organizations to prevent veteran
6 suicide.

7 In summary, the time to act is now. Senate bill 785 is
8 the right bill for right now. I join the leaders of our
9 country's largest veteran collaboratives in urging the House
10 of Representatives to adopt and pass 785 immediately.

11 I am hopeful, hopeful for our military, hopeful for our
12 veterans, and hopeful for our success in ending veteran
13 suicide. Thank you for the opportunity to present to the
14 Committee.

15 [The prepared statement of Mr. Lorraine follows:]

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1 Senator Sullivan. [Presiding.] Thank you, Mr.

2 Lorraine. I appreciate your passion on the issue.

3 Mr. Kuntz, you are now recognized for five minutes.

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1 MATTHEW KUNTZ, EXECUTIVE DIRECTOR, NAMI, THE
2 NATIONAL ALLIANCE ON MENTAL ILLNESS

3 Mr. Kuntz. Chairman Moran, Ranking Member Tester, and
4 distinguished members of the Committee, on behalf of NAMI,
5 the National Alliance on Mental Illness, I would like to
6 extend our gratitude for the opportunity to testify on the
7 Commander John Scott Hannon Veterans Mental Health Care
8 Improvement Act. NAMI is the nation's largest grassroots
9 mental health organization dedicated to building better
10 lives for the millions of Americans affected by mental
11 illness. NAMI applauds the Committee's dedication in
12 addressing the critical issues around veteran suicide.

13 I met Commander John Scott Hannon in the fall of 2013,
14 when he retired from his service with the Navy SEALs to live
15 on his family's homestead in Colorado Gulch, outside of
16 Helena, Montana. Commander Hannon's family and friends
17 called him by the name of "Scott." I will use that name
18 throughout this testimony.

19 Scott and I met for coffee that fall because his
20 mother, Gretchen, thought we might strike up a friendship.
21 Neither Scott or I were especially social, and we struggled
22 to find something to talk about. Thankfully, we realized
23 that we both loved designing custom outdoor adventure gear.
24 That mutual obsession formed the basis of what would become
25 a strong friendship in the following years.

1 Scott served in the SEALs from 1991 through 2012. He
2 accrued major awards during this service and more than his
3 fair share of hidden wounds that followed him back to his
4 family's idyllic mountain hideaway. His journey towards
5 recovery was courageous and it took years of persistent
6 work.

7 Scott was able to turn the tide against his post-
8 traumatic stress injuries and alcohol addiction. He had
9 amazing therapists and a broad traditional treatment team
10 both in and outside of the VA that provided for his care.
11 Scott benefitted from the experience helping heal injured
12 raptors at the Montana Wild rehabilitation center. He
13 teamed up with the Montana VA to incorporate this type of
14 experience into the inpatient, dual diagnosis treatment
15 program. He worked to help document the outcomes of this
16 important effort. I can imagine Scott's broad smile while
17 looking at Section 203 of this legislation, which provides a
18 pathway for research-proven complementary treatments.

19 Scott was adamant that the system for caring for
20 veterans' brain health issues needed to improve. Scott
21 volunteered with NAMI in our efforts to support, educate,
22 and advocate for Montanans who live with mental illness and
23 their families. Scott also talked about how NAMI's Family-
24 to-Family program helped his family better understand his
25 condition and support his journey towards recovery.

1 Through all the work to regain his health, Scott was
2 able to hit the point in his recovery where he rebuilt the
3 emotional bond with his daughter, Keira Vida Hannon White.
4 I can still remember the twinkle in those eyes when he
5 described how amazing it was to spend weeks of the summer of
6 2017 with her. Those wonderful weeks with Vida were the
7 best weeks of Scott's life.

8 Part of Scott's successful recovery after years of
9 struggling and care was that his clinicians were finally
10 able to diagnose and treat the bipolar disorder that was
11 hiding behind the post-traumatic stress and alcohol
12 addiction. Unfortunately, Scott's symptoms of bipolar
13 disorder reemerged hard in the fall of 2017. Scott, his
14 family, and his support system worked to help him overcome
15 the mania that began the episode and the deep depression
16 that followed, but we lost him in February of 2018.

17 Scott's family and I have cried and laughed together in
18 remembering him. One of those conversations remains with me
19 and is essential to understanding the Precision Medicine
20 Initiative in Section 305 of this bill. Scott's sister,
21 Kimberly Hannon Parrott, said, "I just wish that we had
22 known about the bipolar disorder earlier. Scott overcame
23 everything else. He just needed more time to work on that
24 one." I could not agree with her more.

25 Scott had spent more than half a decade in intensive

1 mental health and substance abuse treatment, both in the VA
2 and the Department of Defense. How much different would his
3 trajectory have been if Scott, his loved ones, and his care
4 team knew exactly which mental health conditions he had at
5 the beginning of his treatment, and what types of care they
6 would respond to. Instead, the care and his recovery
7 flailed for years with treatments that were not targeted
8 towards one of his key conditions.

9 I believe that Section 305 of this legislation will
10 help more veterans receive the right care at the right time,
11 helping to ensure that the hidden wounds of war will not
12 take them away from their life and the people who love them.
13 It will be a powerful and appropriate legacy to a dear
14 friend who served this country honorably.

15 Thank you again for the opportunity to testify in front
16 of this Committee. Your attention to this issue means a lot
17 to me, the Hannon family, and the NAMI organization. We
18 look forward to working with you to save the lives of
19 America's injured heroes, and I look forward to questions.
20 Thank you.

21 [The prepared statement of Mr. Kuntz follows:]

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1 Senator Sullivan. Well, I want to thank everybody. It
2 is Senator Sullivan. I am stepping in for Chairman Moran,
3 as he is voting right now. I want to thank Chairman Moran
4 and Ranking Member Tester for convening the hearing today.
5 I think everybody knows it is Suicide Awareness Prevention
6 Week, September 6 through September 12, and National Suicide
7 Prevention Awareness Month, which is the month of September.

8 You know, in my state, the great state of Alaska, we
9 have more veterans per capita than any state in the country,
10 but we also, unfortunately, have very, very high suicide
11 rates, particularly among our veterans, and it has certainly
12 been a priority of mine in the Senate to advance legislation
13 that brings greater awareness and services to the
14 devastation that too many of our finest fall sway to. As a
15 Marine, it is a personal issue to me. I have seen it,
16 unfortunately, up close and personal in some of my units,
17 and certainly one of the first bills that I focused on as a
18 new Senator was the Clay Hunt Suicide Prevention Act, which
19 was focused on these issues, but we still have much more
20 work to do.

21 I want to thank the witnesses today. I know this is
22 not an easy topic.

23 The good news is S. 785, the Commander John Scott
24 Hannon Veterans Mental Health Improvement Act of 2019, which
25 I have co-sponsored--actually, over half the U.S. Senate has

1 co-sponsored--was going to help us make progress. That
2 legislation includes a bill I introduced, the Veterans
3 Overmedication and Suicide Prevention Act. But this bill,
4 the broader bill, has very strong support in the U.S.
5 Senate, bipartisan support, because members recognize that
6 we must not relent in our fight against the scourge of
7 suicide among our military veterans and veteran populations,
8 and it builds on the Clay Hunt Suicide Prevention Act. That
9 was, I believe, the first bill I co-sponsored as a new
10 Senator.

11 So I think a lot of us, on both sides of the aisle,
12 view this as must-pass legislation. I certainly hope the
13 House leadership takes it up as soon as possible, and I urge
14 all my colleagues who have connections, and we all do in the
15 House, to make sure our House colleagues move on it, and we
16 can send it to the President's desk where it needs to be
17 signed into law.

18 So let me begin with a couple of questions for our
19 witnesses. Mr. Lorraine, can you please share with the
20 Committee about the data you referenced in your testimony in
21 regards to Operation Deep Dive, research progress, and how
22 do you believe S. 785 can assist you in your efforts?

23 Mr. Lorraine. Senator Sullivan, thank you, and thank
24 you for all you do in Alaska. We have a great partnership
25 with Alaska and we look forward to continuing it.

1 To your question, the data that we have, we have, as I
2 said, four datasets. The state of Minnesota and the state
3 of Florida provided us all of their death data for the last
4 five years, and through our partnership with the Department
5 of Defense we send all of the names and social security
6 numbers to DoD, who then provided us back with a
7 confirmation of who served in the military, and then a
8 little bit of a history of their service experience--their
9 characterization, their discharge, their dates of accession
10 and then their dates of discharge.

11 What we have been able to do with that data, with the
12 study, is to really get to not an aggregate data, aggregate
13 records provided by the states, but individual records. So
14 we know the person who died, when they died, how they died,
15 and their causes, around suicide. But then we can also
16 correlate it to their military service. That is how I am
17 able to say, so in the state of Minnesota, where over the
18 last five years they have only had three veterans with a
19 dishonorable discharge who passed away, and none of them
20 were from suicide. In Florida there was five in five years,
21 and one was from suicide.

22 We were fortunate to go through this. The next two
23 datasets that we are looking at are Massachusetts and
24 Alabama, and then teed up we have North Carolina, Wisconsin,
25 Wyoming, Montana, Senator Tester, and Tennessee.

1 How the 785, so I think your section, which is Section
2 102, about the opioid, what we see is because we can see all
3 deaths, we can see not only those that were classified as
4 suicide, we can see those that were classified as overdoses,
5 and what the opioid impact is that are not counted as
6 suicides. So opioid deaths from overdose that are not
7 categorized by the coroner or medical examiner as suicide.

8 I think it is important for us to get there. I think
9 it is important for us to get to the impact of suicide
10 shortly after transition from the military. One of the data
11 points we are looking at right now is of those 18- to 34-
12 year-olds who died within the last five years of discharge,
13 25 percent were by suicide. So I think one of the sections
14 that you talked about is critical to that.

15 Senator Sullivan. Well, I appreciate that, and that is
16 the kind of data we need. Again, this Committee has been
17 very focused on it, but those are sobering statistics that
18 you just highlighted, that we all need to be aware of, so we
19 can continue to focus our efforts in the Senate and in the
20 Congress on this issue that really unites members here.

21 I will now turn the questioning over to Senator Tester.

22 Senator Tester. Thank you, Senator Sullivan. I know
23 that Senator Brown has a hard stop in about 15 minutes so I
24 will yield to him for his questions and I will follow him
25 for the next Republican question. Thank you, Senator

1 Sullivan.

2 Senator Sullivan. Senator Brown.

3 Senator Brown. Thank you, Senator Tester, for your
4 important work, all of you on this Committee.

5 Over the years we have worked in a bipartisan way, as a
6 number of people have said, to help improve access to mental
7 health services. When the Senate passed the Commander John
8 Scott Hannon Veterans Mental Health bill it is a step in the
9 right direction. We should continue to push forward until
10 that bill becomes law, as my colleagues have said.

11 I wanted to ask the witnesses about veterans' health
12 and mental health, especially during the COVID-19. My first
13 question is to Deputy Director Purswell. Thank you for your
14 testimony. You discussed Project ATLAS. In my state of
15 Ohio there has been a push to have our county VSOs--we have
16 a counter veteran service officer and an organization office
17 in every single of the 88 counties--to use them as
18 connection points for veterans and their families as they
19 attempt to access VA care and benefits.

20 Has VA asked you or others in the VSO community
21 involved with Project ATLAS how VA can better connect to
22 veterans during the pandemic by leveraging other
23 organizations like county VSOs?

24 Ms. Purswell. Thank you, Senator Brown. Yes, VA has
25 been very forthcoming with contacting us and trying to help

1 us in any way that we can, trying to identify locations that
2 would best serve the veteran population. We have mostly
3 been looking into the most underserved areas, rural areas,
4 where we know our veterans struggle to find care or have
5 difficulty getting to those locations that are very far
6 away.

7 So yes, VA has been in touch with us. We are
8 continuing that conversation weekly. We are also speaking
9 with Phillips and the ATLAS program providers that are
10 helping us identify those locations, helping us identify
11 what our needs are, what our infrastructure needs are, how
12 we set up those locations, and really trying to get this
13 pilot program underway, really as quickly as we possibly
14 can, so that we can really blow this up and help as many
15 rural veterans as we possibly can.

16 Senator Brown. Thank you. Mr. Kuntz, thank you for
17 your work with NAMI. As you know, in your home state of
18 Montana you have one of the best advocates for veterans'
19 mental health in the U.S. Senate, so you should be proud of
20 that.

21 During the pandemic we know that veterans have faced
22 even more challenges, whether it is waiting because
23 prescriptions are delayed. I talked to a disabled vet, a
24 woman in Dayton, the other day, who for 15 years has gotten
25 her VA prescriptions on the day she expected. She is given

1 a tracing number by the Postal Service and the VA. Because
2 of the change in the Postal Service, that seems to have been
3 disrupted. She is not getting what she has needed. So
4 those are some of the sort of unforced errors that veterans
5 have faced.

6 Each of those kinds of issues could be an additional
7 mental health stressor for a veteran. What advice would you
8 give veterans who are facing additional mental health
9 stresses during the pandemic? How can the Department better
10 meet veterans' mental health challenges at this time?

11 Mr. Kuntz. Senator Brown, thank you so much for your
12 question and for highlighting Senator Tester's work. We
13 have worked together for years and I am really grateful for
14 that.

15 When we talk to people that are really struggling right
16 now, and there are so many, we just say, "Don't give up."
17 You know, the main thing is we will get through this, and
18 there are places that will help. And then it is really
19 important, no wrong door. You go to the VA, you go to the
20 Vet Center, you go to that FQHC or the Rural Health Center,
21 but you find a place to go. And if it is that emergency
22 department, find something to engage in. There are online
23 apps. This is a tremendous struggle, but there are options.
24 And I just tell people, try to engage. Try to keep going.
25 And the reality is sometimes they cannot, but I do think

1 that there is still a lot of work to do.

2 Senator Brown. Thank you, Mr. Kuntz. I just want to
3 thank you again, Senator Tester, for yielding the time. I
4 want to close by saying I hope we can join together as
5 members of this Committee in expressing outrage and disgust
6 at the comments by the President that were confirmed by
7 multiple news outlets last week. I look at this Committee
8 and you cannot tell the Democrats from the Republicans of
9 this Committee, whether it is Senator Manchin or Tester or
10 Rounds or Sullivan or Moran.

11 There has always been, in the Committee, and in the
12 Senate, a deep reverence for servicemembers who made the
13 ultimate sacrifice, and that is what makes the President's
14 comments particularly outrageous. These are Americans who
15 have laid down their lives because they love what this
16 country stands for, and they understanding something this
17 President never has, the idea of service, of giving your
18 all, something greater than yourself.

19 So they were moms and dads and sons and daughters and
20 aunts and uncles and colleagues to some of us. Senator
21 Inouye and Senator McCain stand out. Senator Duckworth
22 today, but so many others. Our veterans deserve better than
23 those comments from the President.

24 So I yield back time. Thank you, Senator Tester.

25 Chairman Moran. [Presiding.] Senator Brown, thank you

1 very much. I recognize Senator Boozman.

2 Senator Boozman. Thank you, Mr. Chairman. Mr.
3 Lorraine, in your experience with community collaborative
4 programs, how helpful would grants be to community
5 organizations when it comes to outreach, to servicemembers,
6 veterans, and their families? How have some of your
7 community organizations used grants successfully in the SSVF
8 program to address veteran homelessness, and do you believe
9 the grant program in S. 785 can replicate the SSVF program's
10 success to reduce and prevent veteran suicide?

11 Mr. Lorraine. Senator Boozman, thank you so much for
12 the question. It is great.

13 When we were started--by the way, we are based out of
14 Augusta, Georgia--but when we were started one of our key
15 successes was the SSVF grant. The SSVF grant not only
16 provided us with the funding from the VA to plus up our
17 manpower to do outreach and engagement, and at the time when
18 we started in Augusta, Georgia there were 157 homeless
19 veterans. But really what the grant provided was the
20 authority to work in collaboration with the VA. So the
21 funding was important but that authority was key, because
22 now our teams, our staff, could work in conjunction hand-in-
23 hand with the VA staff.

24 I will tell you that within two years we had the
25 homeless number in Augusta, Georgia, down to 7. So we went

1 from 157 homeless veterans down to 7 in 24 months, and it
2 was because of the SSVF grant, the funding that it provided,
3 but more importantly, the authority it gave us, as a
4 nonprofit, to work with a government agency such as the VA.

5 Senator Boozman. Very good. That is remarkable. We
6 had a similar situation in Arkansas, which just shows the
7 importance.

8 Mr. Lorraine. Yes, sir.

9 Senator Boozman. Your Operation Deep Dive, getting the
10 data that you mentioned, for example, 25 percent of newly
11 transitioned veterans who die within five years of discharge
12 die by suicide, and some of the other statistics that you
13 mentioned. Can you explain your work with DoD and how you
14 capture the data and provide the Committee recommendations
15 on how we may be able to work better with DoD and VA in the
16 future regarding the challenges facing transitioning
17 servicemembers?

18 Mr. Lorraine. Yes, sir. Thank you. So, you know, I
19 have to thank Florida and Minnesota for starting us off.
20 Florida and Minnesota provided us, as I said, the full
21 dataset for all their deaths in the last five years. With
22 that, DoD was able to confirm who actually served and who
23 did not. We were more interested in--our goal was veterans,
24 but what we looked at was what former servicemembers died in
25 those states in those five years, and then we drilled in

1 from there.

2 I think DoD is key. We have never been able to do
3 this, and from what we have seen it has not been done
4 before. Without them we could not have done it.

5 But the next piece that we have is the VA. And so one
6 of the things that we are seeking to work with the VA on is
7 a data-sharing, is to confirm of those former servicemembers
8 who died, how many of them were enrolled in VHA, VBA, or
9 both, so that we can come back and say, all right, let's
10 look at what we have been talking about, of the 20, 16 are
11 not in the VA. We just wanted to be more exacting in the
12 work that we do, and I think this helps us get there.

13 Again, one of the big pieces in the big successes that
14 we have seen in Operation Deep Dive is the fact that we are
15 sharing data securely, through research entities, to get to
16 a better understanding of veteran suicide.

17 Senator Boozman. Yeah, and that is so important, and
18 congratulations and thank you for the great work that you
19 are doing in that regard. To solve a problem you have to
20 have the information as to what the extent of the problem is
21 to begin with, so that is very, very helpful.

22 I just want to thank the rest of the panel for the
23 great work that they are doing, and thank you, Mr. Chairman
24 and Senator Tester, for getting this great group together
25 with such an important subject.

1 Chairman Moran. Senator Boozman, thank you very much.
2 Thank you for your leadership chairing MilCon/VA, and we
3 look forward to continuing to find the right results for
4 those who served our country, in this arena and others.

5 Senator Tester, I believe you yielded your time. It is
6 your turn.

7 Senator Tester. Chairman Moran, I am going to yield to
8 Manchin and go after the next Republican. So Joe Manchin.

9 Senator Boozman. Such a servant leader.

10 Chairman Moran. Senator Manchin.

11 Senator Manchin. He is our leader. That is for sure.
12 And thank you, Senator Tester. I appreciate it very much.

13 This is to everyone on the panel. On average, one West
14 Virginian dies by suicide every 24 hours. In a recent
15 report by the Centers for Disease Control and Prevention,
16 the Mountain State has experienced a 37 percent increase in
17 suicide deaths since 1999, and there is no group more
18 impacted than our military veterans.

19 The Department of Veterans Affairs estimates that more
20 than 17 veterans die by suicide every single day across the
21 United States, 20 a day if you include military members.
22 That means that the suicide rate among veterans is nearly
23 twice that of the general population, and for some groups
24 like the 18- to 34-year-old groups it is increasing rapidly.

25 It is a national tragedy. I think we all agree on

1 that. The brave men and women who have fought for our
2 country and have served, risked their lives for our nation
3 deserve nothing less than the very best we can offer. So I
4 am proud to be an original co-sponsor of Senate bill 785,
5 which would give a new approach, and I join our colleagues
6 in calling for the House to pass the bill also.

7 My question would be, what do you think, or why do you
8 think the VA's efforts to date have not reduced the 17
9 suicides per day? I know that we have all seen it and we
10 have all acknowledged it, but nothing has worked to date.
11 Can you give me any reasons, if anyone wants to speak up, of
12 what we have not accomplished and what we could do better?

13 Mr. Lorraine. Senator Manchin, if you do not mind me
14 stepping in, and my other panelists.

15 Senator Manchin. Please.

16 Mr. Lorraine. This is Jim Lorraine from America's
17 Warrior Partnership. I think that the key is knowing who
18 the veteran is, first and imperative, the relationship. I
19 think suicide prevention is holistic. It is relationship
20 based. The fact that in the most recent study 16 of the 20
21 were not enrolled in the VA. Those are veterans who are
22 outside the VA system, they are not seeking assistance, they
23 are not asking for help, and it takes getting into the
24 community, getting to know who the veterans are.

25 To Senator Brown's point, in Ohio, the county VSOs are

1 key. I think county VSOs are important. I think the big
2 VSOs are important. I think all of us working together to
3 get to know who the veterans are, build a relationship,
4 connect them to the services that they need, and then help
5 them move forward in their life.

6 Senator Manchin. Let me say one more thing if I can,
7 and anybody can jump in on this also. One of the first
8 lines of defense that we have preventing veteran suicide is
9 the Veterans Crisis Line and the National Suicide Prevention
10 Lifeline. That number is 1-800-273-8255. How many veterans
11 or family members or caregivers do you think have that
12 number memorized? How many do you actually think could have
13 that number ready to dial during a time of crisis? I would
14 hate to say that I do not think many do, or know that number
15 by heart, which is why I have advocated, with my colleagues,
16 for a three-digit dialing code for hotline.

17 I am pleased that the FCC followed our calls and
18 approved 988--I repeat, 988--as the three-digit dialing code
19 for the Veterans Crisis Line and National Suicide Prevention
20 Lifeline. Again, that number will be 988. It will go into
21 effect on July 16, 2022.

22 What does the VA and the Veterans Crisis Line need to
23 do to prepare to launch 988? It might be the first time
24 some of you have heard. I do not know how well it has been
25 publicized. But it is something that we desperately need,

1 and we are hoping that you all would jump right in.

2 Mr. Butler. I am happy to add to that, Senator
3 Manchin. I completely agree and would support that
4 lifeline, absolutely.

5 I think one of the things that we at IAVA find is that
6 many veterans, and especially veteran family members, do not
7 know who to reach out to in a time of crisis. I think more
8 often than not we get people that realize that a family
9 member, a friend, maybe the veteran himself, is in a time of
10 crisis, but they do not know where to turn to. They do not
11 know how to turn to that.

12 We have program called the Quick Reaction Force, and
13 since its foundation in 2012, one of the top reasons why
14 veterans and their family members reach out to us is for
15 help connecting to mental health options that they can turn
16 to. Sometimes it is because they do not want to use the VA.
17 Maybe they have had a bad experience. So S. 785, we really
18 support the grants option to that, because I think it can
19 get community support services where local people can
20 realize where they can turn to and get veterans help in a
21 quick and timely manner. Thank you.

22 Senator Manchin. I thank all you panelists for what
23 you do. I mean, we are all so patriotic in our state and
24 every state, and we are, as Americans, very patriotic. But
25 there are somewhere close to 40,000 nonprofits that work for

1 veterans in some way, shape, or form. That is in addition
2 to what the VA and all the other public organization that
3 deal with veterans' issues.

4 So I would say, what have we found, whether it be a
5 program, an intervention, treatment, therapy, et cetera,
6 that is actually proven to prevent veteran suicide? What do
7 we know that works, and what evidence-based research is out
8 there that shows links between intervention and lower
9 veteran suicide? So anybody that would have any comments on
10 that, that will be the end of my questions. Again, I want
11 to thank you, Senator Tester, for being so kind, and I would
12 like to hear anybody have any thoughts on what we can do to
13 make the system we have working. Forty nonprofits are
14 concerned about this.

15 Mr. Kuntz. Senator Manchin, one of the things that I
16 think is really exciting about this bill is that emergency
17 department measure, and that is a research-proven program
18 that has been worked on for 10 years. It has now become one
19 of the top two clinical priorities for the VA. That is a
20 place where we can connect with veterans who are in need of
21 suicide, there is no question why they are there, and
22 deliver that intervention. It cannot be delivered through
23 telehealth. This bill has a report to help support that.

24 Right now the VA has the goal of expanding that out to
25 94 percent of VA emergency rooms. Personally, I believe

1 that needs to be in every emergency room in the country,
2 because it is a proven intervention, and with what we can do
3 with telehealth right now there is no reason it should not
4 be right there and accessible every time a man or woman
5 walks into the emergency department in crisis. Thank you,
6 sir.

7 Senator Manchin. Thank you all so much. I appreciate
8 your service. Thank you.

9 Chairman Moran. Thank you, Senator Manchin. Senator
10 Rounds.

11 Senator Rounds. Thank you, Mr. Chairman. First of all
12 I want to just say thank you to everybody on this panel.
13 This is a very important issue and I thank the Chairman and
14 the Ranking Member for them bringing it to our attention and
15 also to try to promote the passage of this in the House of
16 Representatives before the end of the year.

17 My first question is for Ms. Purswell. First of all, I
18 want to thank you for your service in the United States Army
19 and for being here today to represent The American Legion.
20 In your written testimony and your remarks you talked about
21 the importance of Project ATLAS. This is where the Legion
22 is partnering with the VA to install technology at Legion
23 posts in rural areas to make sure veterans have access to
24 telehealth.

25 Based on your expertise, if S. 785 does not get passed

1 in the House and then sent to the President's desk, what
2 kind of an impact will this have on access to mental health
3 care for our rural veterans?

4 Ms. Purswell. Thank you for your question, Senator
5 Rounds. If this bill does not go forward I would like to
6 say that we will strongly pursue every method that we can to
7 make sure that ATLAS and our service with VA is continued
8 and pushed and expanded as much as we can. However, without
9 this bill and without the help of grant money dedicated to
10 expanding that program, it will slow. It will slow. We
11 will not be able to get the infrastructure in. We will not
12 be able to get all of the things that we need to get in,
13 whether it is the ADA compliance needs, the broadband
14 infrastructure, the tablets that are needed, the staffing
15 that is needed. All of those things take money. And while
16 The American Legion was happy to give our own grant to get
17 the Springfield, Virginia, location up and running, we do
18 not have the ability to continue to do that for other
19 locations.

20 So it is vital that this bill get passed so that we can
21 have those funds allocated, to make sure that our rural
22 servicemembers can get the care that they need, whether it
23 is mental health care or any other kind of comprehensive
24 medical care that they need. We are really pulling for it.

25 Senator Rounds. Well thank you, and I could not agree

1 with you more. I think this is really important. In so
2 many parts of our country, the rural parts of our country,
3 telehealth is not only accepted, it has now become the norm,
4 in many cases. And so this would be very beneficial, I
5 believe, to our rural communities in South Dakota as well as
6 the Great Plains region.

7 My second question is for Mr. Butler. Mr. Butler,
8 thank you, first of all, for your 20-plus years of service
9 in the Navy and Naval Reserve. You called attention to a
10 sobering fact that veterans aged 18 to 34 have the highest
11 rate of suicide. That really struck me because in South
12 Dakota we have over 11,000 veterans under the age of 40.

13 So I would like to know, what are a couple of the
14 provisions in S. 785 that you find most helpful to
15 preventing suicide among our younger veterans?

16 Mr. Butler. Thank you, sir, for the question. Yeah,
17 as I mentioned earlier, I think, briefly, I think one of the
18 biggest provisions that we support is the grants going to
19 community and local providers. I think that is one of the
20 biggest ways in which we can bring this number of 20 a day
21 down, by providing resources in the local community where
22 veterans and their family members and their friends will
23 know about them. When the veteran gets to a time of crisis
24 they are not going to have to struggle to find where they
25 can turn for help.

1 I think one of the other issues, and why, perhaps, the
2 number is so high for the younger cohort of veterans, and
3 the provision that would help that, is the work to connect
4 and research the possible connection between TBI, PTSD, and
5 mental health problems. As we know, TBIs are a signature
6 wound of war from the last 20 years, and I think better
7 understanding the connection to mental health problems,
8 potentially to suicide and things like that, would really go
9 a long way to helping us solve this problem.

10 Senator Rounds. Thank you, and I think you hit it on
11 the head, and I think that it is very important that we draw
12 attention to TBI and the possible connections with the
13 mental health challenges and with the attempted suicides and
14 suicides with this younger generation. So I thank you for
15 your service and I thank you for the insight that you bring
16 to the Committee today.

17 Mr. Chairman, thank you.

18 Chairman Moran. We will see if Senator Tester wants to
19 be gracious one more time. Senator Tester?

20 Senator Tester. No, I have got a hard stop too so I am
21 sorry. But I do want to say thank you, Mr. Chairman. And
22 listen, I have listened to the folks who have given
23 testimony. Veterans are very, very lucky to have the four
24 people who gave testimony today on their side. I cannot
25 think of four better advocates for veterans than the folks

1 who have testified in front of this Committee today. And I
2 just want to say thank you all very, very much for not only
3 your testimony but what you do every day to try to solve
4 problems for veterans, and in this case, a very, very
5 important problem, maybe the most important problem that we
6 are facing right now amongst our veterans.

7 Matt Kuntz, who I have known for a good long time now,
8 is somebody that I think the people on this Committee need
9 to know, that every time he is hit with adversity he turns
10 it into a net positive. And I have seen it time and time
11 and time again, and the suicide of John Scott Hannon is
12 another prime example of Matt Kuntz going to work and trying
13 to make the best out of a really, really bad situation.

14 And so I am going to start with some questions for you,
15 Matt. I know we need to continue to make improvements to
16 quality and timeliness in mental health provided by the VA,
17 and I do believe this bill, through your good work, I might
18 add, hits that mark. And I want to thank you and NAMI for
19 urging the House to seize this opportunity to get S. 785
20 passed. Scott, as you have already referenced, was a friend
21 of yours, and you have already shed a lot of light on it.
22 But I just want to have you talk a little bit about Scott's
23 involvement in community mental health organizations and how
24 the provisions of this legislation would further those
25 efforts of mental health organizations to help fellow

1 veterans.

2 Mr. Kuntz. Okay, sir. Thank you. And I could say,
3 you know, Scott's work with us, we were a community health
4 organization. We were exactly the kind of nonprofit that
5 these kind of funds could go to. Our relationship got
6 really--went beyond the professional pretty quick. I know
7 he really did engage with his local AA group.

8 You know, there were a lot of different folks that were
9 there for him, and even like the non-traditional support
10 through his involvement with Lewis and Clark County Search
11 and Rescue. Two weeks before he died, Scott saved the life
12 of a young college kid that jumped in at the Passion Plunge,
13 wearing a banana suit. And, you know, it was just one of
14 those things that even at his worst times he was able to
15 help others, and those community organizations allow our
16 veterans to do that.

17 Senator Tester. Thank you, Matt. I have a question
18 for Mr. Lorraine, and it goes back to the conversation that
19 you had with Senator Sullivan, and I do not know that we
20 have ever heard it in this Committee before. But I think
21 the answers to his questions would indicate--and the
22 testimony too--would indicate that we are undercounting the
23 number of suicides, maybe pretty significantly.

24 I just want you to kind of flesh that out. Am I
25 reading what you said wrong, or do you believe that the

1 suicide rate is much higher than we are counting?

2 Mr. Lorraine. Senator, thanks. Great question. I
3 think that based on the data that we have collected to date,
4 it indicates that the suicide rate is higher than we think
5 it is. What we are doing is as we are aggregating more
6 states together, you know, you get a bigger numerator and it
7 sort of balances out so that you can say yes in the country.

8 But the third-largest state for veterans in the United
9 States was 20 percent undercount, and Minnesota, which is
10 one of those smaller states, was 25 percent overcount.
11 Alabama looks like it is going to be an undercount also, in
12 the 20 percent mark.

13 So the point is, yes, I think it is higher than we
14 think it is. I think we do not know as much about veteran
15 suicide as we think we do, and I think that we need to dive
16 deeper into understanding the community factors of veteran
17 suicide and how they relate to the outcomes. So to Matt's
18 point, Scott had a great community wrapped around, but what
19 was the last year of his life? What did it look like and
20 how could we have intervened somewhere in that? That is
21 another part of Operation Deep Dive.

22 Senator Tester. Well, I think that point further
23 exemplifies the fact that we need to get the House to move
24 on this bill, and we want it quickly. The more tools we
25 have out there in people's hands who can utilize them to

1 help veterans, the better off we are going to be. And I
2 think if nothing else has happened today, it just shows that
3 we have no time to wait here. We have got to get this done.

4 Katie and Jeremy, I just want to say thank you. I have
5 got a bunch of questions but there are other people on this
6 Committee that want to ask them. But I just once again want
7 to thank you all for your advocacy. It is stellar. Thank
8 you.

9 Chairman Moran. Senator Tester, thank you very much.
10 I recognize Senator Tillis.

11 Senator Tillis. Thank you, Mr. Chair and Ranking
12 Member Tester, and I thank the panel for being here. If I
13 had time I was going to ask this question on the end but it
14 touches on what Senator Tester finished on. I understand
15 that we are going to have a markup in the House this
16 Thursday, I believe. I also understand that the Chairman of
17 the House Committee is going to introduce or allow the
18 introduction of some 35 amendments.

19 And I would like to know, to the extent that you all
20 have done the research, if there are any of those amendments
21 that you think are particularly helpful or particularly
22 harmful to getting this to the President's desk. And we
23 will start with Mr. Butler.

24 Mr. Butler. Thanks, Senator. Yeah, I would say kind
25 of quickly, and to give the others time, we are not against

1 what the House is trying to do. Our concern is that we are
2 running out of time. We have been working on this for so
3 long. You know that. We appreciate what the Senate has
4 done. We, and so many VSOs, have been and are behind
5 passage of the Commander Hannon Act.

6 Senator Tillis. Mr. Butler, that is the reason for my
7 question. There are very few things that go through this
8 Committee that I ever have an objection to. I am worried
9 about runway at the end of Congress, and also whether or not
10 the amendments can be viewed as being additive to the core
11 of what we are trying to do with Senate bill 785. If there
12 are other good ideas then I would not necessarily want to
13 attached it, you know, as a vehicle for getting something
14 done at the expense of getting nothing done.

15 Anyone else on the panel have any comments?

16 Ms. Purswell. Yes, sir. This is Katie from The
17 American Legion. The American Legion, we are really
18 passionate about research, and we really strive to identify
19 the gaps in care in order to be able to confidently support
20 legislation like S. 785. We did extensive reviews of the
21 House 35 additional sections, or sections that were pulled
22 out that they did, and we are very much in support of all of
23 the efforts that they have put in there for research, and we
24 really want to be able to partner with them in the future to
25 be able to get those passed.

1 However, we really do feel the need, as everybody else,
2 that this bill gets passed in the 116th Congress. But
3 again, we really do appreciate the work that they put into
4 those additional pieces of legislation, and we really hope
5 that they stick with it for the next Congress so that we can
6 revisit those.

7 Mr. Lorraine. This is Jim Lorraine. You know, just to
8 answer your question, Senator Tillis, you know, we asked
9 600,000 veterans and their families, and 77 percent do not
10 believe that dishonorably discharged should have access to
11 VA health care. I do not know if everyone understands what
12 a dishonorable or a bad conduct discharge entails in terms
13 of punitive action and court martials and the extent of
14 murder, rape, pedophilia, et cetera. But they are pretty
15 serious crimes and I think when you open that up, that is in
16 one of the bills that the House is proposing.

17 For us, we also look at Senate 785 allows communities
18 to identify the best way that they should approach doing
19 community-based care. The House companion mandates its
20 collective impact, which works in some areas but does not
21 work in rural areas. That has been well documented.

22 So if there are two things that we would focus on it
23 would be those two. But to go to what my colleagues have
24 said, my fellow panelists, 785 is a fully packaged,
25 integrated bill. What I like is that it is built on each

1 other. And I just do not see that on the other side.

2 And then I think most American people are not sure what
3 is going to happen in Washington, D.C. within the next month
4 to two months, and what they are interested in is let's get
5 a bill passed while we know where we stand, before we get
6 into a point post-election where it may be delayed out--a
7 vote may be delayed out and get us past the 116th Congress.
8 And then we have to start from scratch again.

9 This is the right bill for right now. That is the
10 reason why we support it.

11 Senator Tillis. Thank you. Any other comments from
12 the panel, the virtual panel?

13 Mr. Chairman, I used all my time on that one question,
14 but, you know, when you have thousands of veterans dying
15 every year, losing their lives to suicide, I believe there
16 are a lot of great ideas that we should work on. But just
17 exactly what Jim said there towards the end, this is an
18 integrated bill. If there are amendments that make it
19 better, that focus on the core objectives of this bill I
20 think that they would be welcomed. They would probably make
21 it through conference fairly quickly. But if this becomes a
22 vehicle for other matters that are very important, you can
23 take a very impressive list of VSOs that support bill and
24 have it fragment, and then thousands more lives may be lost
25 because we are not getting this core bill through.

1 So I just encourage my House colleagues and all the
2 VSOs to go in and think about how does this make this
3 foundation, this bill foundation better, and then let's work
4 on all the other things. We will never fully repay the
5 debt. We are making installments every time we do something
6 here. I think this would be a major installment if we could
7 move it through quickly in this Congress.

8 Thank you, Mr. Chair.

9 Chairman Moran. Senator Tillis, thank you very much,
10 and perhaps even more importantly, thank you for teeing up
11 our witnesses and the comments they made in response to your
12 question. Those comments were very helpful and needed.

13 Perhaps this is a point in which I should say that we
14 have ongoing conversations with the House Veterans' Affairs
15 Committee. My absence from time to time is an attempt to
16 visit with Chairman Takano today. But on a staff level we
17 have reached an understanding that the House will take up
18 this bill on September 21st or 22nd, and pass it, presumably
19 with the attempt to pass without any amendment. That is
20 exactly what we are looking for.

21 While Senator Tillis mentioned the concept of a
22 conference committee, the delay that could occur as a result
23 of any amendment to the bill in the short time that we have.
24 We are at a stage in which we--it is our understanding that
25 this is a bill that would be signed by the President and so

1 would become law, and any delay in getting us to that
2 position, in my view, costs those who served our country the
3 potential loss of life.

4 And we want our VSOs and community organizations, our
5 research efforts, to have the tools that this bill, the John
6 Hannon bill, provides. And so it is, again, my
7 understanding that in return for that expeditious effort by
8 Chairman Takano and the Ranking Member, Congressman Roe,
9 that we will then make every effort to pass, by unanimous
10 consent, a number of bills that are priorities of Chairman
11 Takano related to this topic. Meaning that there are those
12 that can pass by unanimous consent, and in addition to that
13 we will work on ones that are less capable of being passed
14 by unanimous consent, to be put in a package and considered
15 by the Senate, all with the goal of passage, not just with
16 the goal of consideration.

17 So I do not know that Chairman Takano would be
18 listening to this conversation at the moment, but I would
19 convey to him, again, my commitment to see that there is a
20 victory, not for the Senate Veterans' Affairs Committee, not
21 for the House Veterans' Affairs Committee, but a victory for
22 those who served our country, our veterans, and the
23 organizations that are attempting to save their lives and
24 provide mental health care and treatment, and to accomplish
25 a goal that both Committees, both House and Senate, have in

1 mind.

2 There is no reason that whatever appreciation that
3 comes from the passage of this legislation cannot be shared
4 by those who serve on the Veterans' Committee in the House,
5 and I will work in every way to accommodate the priorities
6 that our staff have talked about today's, yesterday's, this
7 week's conversations, of legislation that the Chairman of
8 the House Committee is most interested in, and do what I can
9 do in working with Senator McConnell, Republicans and
10 Democrats, on this Committee, to see that there is a success
11 in the items that that success could be achieved and avoid
12 any kind of time delay in what we might be able to do in the
13 Senate.

14 I do know what the Senate's schedule is going to be,
15 but a continuing resolution is in the works, and elections
16 are pending. Nothing ought to stand in our way of
17 protecting those who served--protect the lives of those who
18 served our country. And again, I would reiterate to
19 Chairman Takano, my goal is not a victory for the Senate
20 Committee in passage of a bill that we passed, but to
21 utilize this opportunity where a bill that passes, as rarely
22 happens, 19-0 in this Committee and by unanimous consent of
23 the United States Senate, to use that momentum to get us to
24 a point that has long been awaited.

25 So again, there are developments that appear to be

1 concluded or concluding today, and I thank Chairman Takano
2 for his willingness to work with us in accomplishing a goal
3 that our witnesses and many other veteran service
4 organizations find desirable.

5 So thank you for your question, Senator Tillis, and
6 thank you for the responses and the testimony of the
7 witnesses here today, and many others in veteran service
8 organizations around the country who are advocating for this
9 opportunity to see this to final conclusion.

10 I would recognize Senator Blumenthal.

11 Senator Blumenthal. Thanks, Mr. Chairman. I
12 appreciate those remarks, and if I can sort of encapsulate
13 them in five sentences or less, we are going to get the job
14 done, whatever the steps necessary to do it, counting on
15 your leadership, which has been really admirable, on this
16 bill. And I appreciate it both on your part and the Ranking
17 Member's. We are going to get it done, and hopefully we
18 will have the good faith efforts by the House, on
19 amendments, if necessary, that are in accordance with the
20 purposes of the bill.

21 So I very much appreciate that statement, and it
22 eliminates a number of the questions I was going to ask.

23 Chairman Moran. Senator Blumenthal, that was my goal.

24 Senator Blumenthal. We have worked together so well
25 that you now read my mind.

1 Chairman Moran. I allowed you to encapsulate my
2 thoughts.

3 Senator Blumenthal. Anyway, I really do appreciate
4 your leadership.

5 Let me just say that this exchange and the conversation
6 we have been having with the witnesses here I think
7 demonstrate the very strong bipartisan tradition of this
8 Committee, our approach to these issues, which is to hold
9 our veterans as heroes in the highest regard.

10 Unfortunately, there have been statements by the
11 President that I think belie that spirit. My recounting
12 them is unnecessary for members of this Committee. I am
13 sure you are aware of them. And I am also sure that you
14 never would have called fallen heroes in cemeteries abroad
15 "losers" or "suckers," that you never would have precluded
16 amputees from marching in any of our parades, and that you
17 never would have called John McCain a loser.

18 Nor am I in any way doubtful that you would have given
19 the highest regard to John Scott Hannon, whose name is on
20 this bill, and he, among all the members of our military who
21 are driven by these invisible wounds, whether it is post-
22 traumatic stress or traumatic brain injury or, as he did,
23 suffer from bipolar disorder, to take their own lives.
24 Still, 20 veterans a day do so.

25 I authored a veterans' protection measure with John

1 McCain. It was passed by this Committee a number of years.
2 It was signed by then President Obama, with John McCain at
3 his side as he signed the bill. I stood next to both of
4 them. Think of it for a moment--two presidential opponents,
5 side by side. President Obama elected, Senator McCain the
6 loser in that race. But the bigness and stature of his
7 spirit, John McCain's spirit, I think was so powerful in the
8 East Room on that day, and it is the spirit that should
9 bring us together here. Unfortunately, it has not with the
10 President.

11 So I want to say that the Senate should be proud of
12 this measure. We should be proud that we worked together on
13 a bipartisan basis and that every member of the Senate
14 deserves credit for it.

15 I want to ask the witnesses a question about the Postal
16 Service, which I understand my colleague, Senator Brown,
17 asked as well, whether you have heard that there are delays
18 in delivery of veterans' prescriptions. Eighty percent of
19 all veterans' prescriptions are delivered by mail. Are you
20 aware of these prescriptions being delayed by delays in the
21 mail that may have occurred? And we can just go right down
22 the line.

23 Mr. Butler. Yes, sir. I will very quickly respond.
24 We did an informal survey, admittedly, on Facebook, and got
25 mixed responses. We certainly heard from veterans who said

1 that their prescriptions were delayed but we also heard from
2 many who said that they have not had any trouble whatsoever.
3 My kind of takeaway, very briefly, is that I think in many
4 respects it is regional, the results that you are finding.

5 Senator Blumenthal. Thank you. Others?

6 Mr. Lorraine. This is Jim Lorraine. America's Warrior
7 Partnership runs a network that is connected to 302
8 communities throughout the United States. We have heard
9 nothing from the communities nor from veterans about a delay
10 in medicine.

11 Senator Blumenthal. Thank you.

12 Ms. Purswell. This is Katie from The American Legion.
13 I just wanted to say that we have not, here at the national
14 level, had any reports of our local levels stating that our
15 members have been having delay in service with their
16 medications. I can speak personally that my husband and I
17 have both been receiving our medications on time. In fact,
18 one that was supposed to be delayed ended up being shipped,
19 I believe, UPS, which we were not expecting, and actually
20 arrived earlier than we had expected. So for any issues
21 that may be occurring I do believe they are trying to find
22 ways around any types of delays.

23 Senator Blumenthal. Why was it shipped by UPS?

24 Ms. Purswell. I am not sure why it was shipped by UPS.
25 It was something that he needed, and that they did not tell

1 us why. They said there might be a delay. I am not sure if
2 that was--they did not have it in stock, you know, at the
3 local VA pharmacy. But we did receive it well ahead of
4 time.

5 Senator Blumenthal. Thank you.

6 Mr. Kuntz. Senator, I have not personally worked with
7 any veterans that have delays. I certainly have seen that
8 in some of our Facebook conversations as well, but it is not
9 something I can personally vouch for.

10 Senator Blumenthal. Thank you. Thanks, Mr. Chairman.
11 I just want to say that, you know, on the bill that we are
12 considering, all of us know someone who has been affected.
13 My State of the Union guest was the uncle of a young Marine
14 named Tyler Reeb, who was a sniper deployed twice, took his
15 own life, and he was certainly a hero, and his memory, I
16 think, will be all of us who knew him in Connecticut. Thank
17 you.

18 Chairman Moran. Thank you, Senator Blumenthal.

19 Senator Tester, anything further from you?

20 Let me ask my usual question then. Do any of our
21 witnesses have anything they would like to add, augment what
22 they said, correct what they said, tell us something that we
23 failed to ask them? Anything that you would like to make
24 sure we hear before I conclude this hearing?

25 Mr. Butler. I will just very quickly say on behalf of

1 IAVA, thank you, sir. I think it would be incredible if we
2 could come to that bipartisan result that you discussed,
3 especially in this Congress, I think not only passing the
4 Commander Hannon Act but if there are additional things that
5 can be done, as I said in my testimony. We know that the
6 Commander Hannon Act will not solve the problem of veteran
7 suicide. It will make great progress in getting us there.
8 But if we can do even more this congressional cycle I think
9 that would be incredible. So thank you for your work.

10 Chairman Moran. Thank you, Mr. Butler. Anyone else?

11 Mr. Lorraine. Jim Lorraine.

12 Chairman Moran. Yes, sir.

13 Mr. Lorraine. Mr. Chairman, Jim Lorraine here. I
14 wanted to thank you for the opportunity to speak. I wanted
15 to thank you also for working with the House to hopefully
16 reach a solid conclusion to pass this bill immediately.

17 I think, you know, all of us working together have a
18 big collaboration, but all of us working together--IAVA,
19 American Legion, America's Warrior Partnership, our
20 communities--and everyone else out there who wants to serve
21 veterans is critically important. I think the addition in
22 the bill of post-traumatic growth of equine therapy, of
23 recreational therapy, and the importance in recognizing
24 that. We do a survey every year and the top three things
25 that veterans are seeking is sports and recreational

1 activities, connection to other veterans, and volunteer
2 opportunities. If this bill can help us get there, which it
3 will, that would go a long way.

4 Thank you, sir.

5 Chairman Moran. Senator Tillis.

6 Senator Tillis. Mr. Chairman, again I appreciate the
7 work you are doing with the House Chair, and you can count
8 me in to support these other measures that have merit but
9 could slow down Senate bill 785. And I also just wanted to
10 thank the minority staff. I hear that we are making great
11 progress on the TEAM Act, which is something that I look
12 forward to having the same outcome, with 30 veteran service
13 organizations also behind that. So I just want to thank the
14 staff for working together over the recess, and look forward
15 to bringing that before the Committee. Thank you.

16 Chairman Moran. Senator Tillis, thanks for your
17 consistent dedication to that issue and all these veterans
18 affairs issues.

19 Any of our other witnesses?

20 Mr. Kuntz. Yes, sir. This is Matt Kuntz and I just
21 want to say one last thank you to everyone that was involved
22 to help name this bill after Scott. I know it really means
23 a lot to his family, especially to his daughter, Vida. And
24 I also just want to say that both the majority and the
25 minority staff have been remarkable to work with on this

1 bill. I cannot say how just professional and in-depth they
2 have went in on every single section. It is just an honor
3 to work with them. Thank you, sir.

4 Chairman Moran. I appreciate you saying both of those
5 things. Thank you very much. I met Commander Hannon's
6 family when this bill was introduced, with Senator Tester,
7 and every suicide has a story. Every suicide involves a
8 human being, and their moms and dads and brothers and
9 sisters and sons and daughter, all are worthy of our
10 recognition. And it was an honor to utilize this bill to
11 recognize Commander John Hannon, and I appreciate the
12 opportunity I had to get acquainted with his loved ones.

13 Let me do just a couple of more things. First of all,
14 in regard to the efforts to resolve the opportunity to pass
15 the bill in the House, to our witnesses and other veteran
16 service organizations, to NAMI and community organizations,
17 our ability to do that has been helped immensely by your
18 efforts and your work with the House Chairman and Ranking
19 Member, and I thank you for that.

20 I would also indicate to my colleagues that, first of
21 all to the House, maybe, that we need the Senate bill 785 to
22 pass as is, and I will work hard to get--excuse me, let me
23 say it differently. I will get a list of those House bills
24 that have been discussed as ones that can move initially by
25 unanimous consent and others grouped to be packaged together

1 for consideration by the Senate. I will work to get that
2 list to colleagues on this Committee so that you can
3 understand the direction that we are going.

4 My assurance has been these bills that we have agreed
5 to move are one that would have support of all four corners,
6 Senator Tester and I as well as the House Chairman and
7 Ranking Member, Mr. Roe.

8 And then finally, let me take a moment. I am a House
9 member. I was a House member. I remember--I smiled a
10 moment ago because I remember thinking that when I was a
11 member of the House Veterans' Committee we sent bills to the
12 Senate where they died. I am not interested in that. I am
13 interested in results.

14 And it is especially a remembrance for me today, and
15 maybe Senator Boozman will remember this, but the passing
16 occurred this week of John Bradley, who was a Vietnam
17 veteran, an advocate for veterans in a tireless way. He,
18 when I chaired the House Veterans' Affairs Health
19 Subcommittee, was my staff director. He has battled cancer
20 for a long time. When he returned from Vietnam he went to
21 work for the Department of Veterans Affairs, he worked for
22 the Senate Veterans' Affairs Committee, and he was the House
23 Veterans' Committee staff director as well. And I would use
24 this moment to express my gratitude for this veteran who
25 served other veterans.

1 There is no one that I hold in higher regard than those
2 who serve us in uniform, perhaps other than those who served
3 in uniform and then served other veterans as well. And John
4 Bradley did that in innumerable ways and in a consistent
5 manner until his health prevented him from doing so. And so
6 I use this moment to--probably unlikely that there will be
7 another opportunity to express my gratitude to him for his
8 service to our nation, for his service to other veterans,
9 and to pay my respects to him and to honor his family now,
10 at the time of his death.

11 Senator Boozman. Can I say, Mr. Chairman, that I--

12 Chairman Moran. Senator Boozman.

13 Senator Boozman. --second that, and having served with
14 you on the House Veterans' Affairs Committee and again
15 getting to know him very, very well, you know, it is just a
16 very sad thing. But we do appreciate his service in so many
17 different ways, seeing his finger in so many different bills
18 throughout the years. He had a profound impact for our
19 nation's veterans. It is big deal.

20 Chairman Moran. I appreciate you recognizing John
21 Bradley. Thank you, Senator Boozman.

22 I thank all the organizations who delivered their
23 comments today in regard to Senate bill 785. I appreciate
24 the important work you do each and every day in your
25 partnership in serving those who served our nation. I would

1 ask unanimous consent that members be given five days to
2 revise and extend their remarks and include any extraneous
3 material. And with that our hearing is now concluded,
4 adjourned.

5 [Whereupon, at 5:05 p.m., the Committee was adjourned.]

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