

# United States Senate

WASHINGTON, DC 20510

October 22, 2020

The Honorable Robert Wilkie  
Secretary of Veterans Affairs  
810 Vermont Ave, NW  
Washington, DC 20420

Dear Secretary Wilkie,

The signage of S. 785, the Commander John Scott Hannon Veterans Mental Health Care Improvement Act, into law is an important step in addressing veterans' mental health and preventing suicide. We were proud to write and pass this law, with Chairman Jerry Moran and colleagues in the Senate and House of Representatives, to honor the legacy of a former Navy SEAL and Montanan who lost his life to the invisible wounds of war. On the heels of its signage, as the Department of Veterans Affairs (VA) takes action to implement its critical provisions and new authorities, VA must in parallel take a more aggressive, all-hands-on-deck approach towards getting veterans the mental health resources they need and ending the veteran suicide epidemic.

Veterans are at the highest risk for suicide during the first 12 months of their separation from the military. On January 9, 2018, the President signed Executive Order (EO) 13822 entitled "Supporting our Veterans During Their Transition from Uniformed Service to Civilian Life." The Trump Administration made significant promises to improve the transition experience and connect servicemembers to mental health resources. However, almost three years after the EO was signed, VA has not made meaningful progress towards improving mental health care access and preventing veteran suicide, or even completing the tasks assigned in the EO by the President.

At the January 2018 signing of EO 13822, then-Secretary Shulkin announced that under the President's leadership, "with this executive order, we're taking an unprecedented action today in that we will be covering all separating military members who are transitioning into civilian life — 100 percent of them — with the mental health benefit for 12 months."<sup>[1]</sup> The VA's EO 13822 fact sheet<sup>[2]</sup> also shows that the EO was intended to direct VA and its Federal partners to provide transitioning servicemembers with one year of mental health care access.

At the EO signing, Secretary Shulkin stated this expanded mental health care benefit would be available by March 9, 2018. However, almost three years later, the Department has not increased access to mental health care, leaving up to 60 percent of newly transitioned servicemembers without access to life-saving care. Also troubling, the Joint Action Plan for implementing EO 13822 contains no references or commitments to providing transitioning servicemembers with this one year of mental health care. When can veterans expect to receive access to the essential mental health care promised to them by the Trump Administration?

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<sup>[1]</sup> <https://www.whitehouse.gov/briefings-statements/remarks-president-trump-signing-executive-order-supporting-veterans-transition-uniformed-service-civilian-life/>

<sup>[2]</sup> [https://www.mentalhealth.va.gov/transitioning-service/docs/FINAL\\_EO\\_Fact\\_Sheet\\_508.pdf](https://www.mentalhealth.va.gov/transitioning-service/docs/FINAL_EO_Fact_Sheet_508.pdf)

Further, the Joint Action Plan laid out several goals for enrolling transitioning servicemembers into VA health care, and the Department's progress to-date is unclear. For example, in Task 1.2, VA and DOD are charged with developing a method for servicemembers to pre-register for VA health care online during the Transition Assistance Program (TAP). Committee staff inquired as to the status and metrics for this effort with the Department in June of this year. Three and a half months later, VA provided a presentation with statistics that were last updated in January 2020 and indicated it was the most accurate information available. How is it possible to only have data that is nine months old for an initiative tied to the Department's top clinical priority and a national epidemic? VA must redouble its attention to executing pre-registration for VA health care during TAP. Lack of progress in this area is a broken promise by the Administration to make serious efforts at connecting transitioning servicemembers to care.

Similarly, Task 2.2 was intended to screen transitioning servicemembers for mental health risks, refer them to care, and enroll them in VA health care if eligible and they desired to do so. The January 2020 progress report provided to the Committee on EO 13822 implementation completely removes the original goal of VA health care enrollment, and reports that a funding request for an IT tool to facilitate DOD-VA data sharing on mental health screening and referral to care was "denied." When will this streamlined process of screening, referral to care, and enrollment into VA health care be ready, and why has the Department not prioritized creating or funding IT solutions to bring it to fruition?

Applying for VA health care is often a confusing and burdensome task for transitioning servicemembers. Task 3.1 was intended to create an "easy button" for recently transitioned servicemembers to contact VA about mental health care options and then schedule care and/or enroll in VA health care in a way that cuts through some of the red tape. Originally planned for December 2018 implementation, VA still has nothing to show for this action item. What is the current implementation status and when does the Department expect to unveil the VA health care "easy button"? Those who served our nation deserve to have streamlined access to the care and benefits they earned, and connections to life-saving mental health care are especially paramount.

Warm hand-offs to care for transitioning servicemembers are also a significant concern for the implementation of this EO. The January 2020 progress report shows there has been limited progress made to-date. For example, on Task 2.3, VA committed to developing a career readiness tool and facilitating warm hand-offs to peer support and for clinical care, with a target completion date of July 2018. Has VA deployed this tool and how many warm hand-offs have been made to-date? Reaching veterans in need and providing connections to resources are some of the simplest, yet most effective, tools we have for reducing suicide risk.

Sustained attention and guidance from leadership is an essential component of successful implementation of any major initiative. For EO 13822, how regularly are you briefed on its progress? What changes have you directed to the EO's implementation and Joint Action Plan? How often does VA engage with the Departments of Defense and Homeland Security on implementation? And, when can servicemembers and veterans expect tangible changes resulting from this EO? Please provide a detailed breakdown of the current status of every task, current metrics, date tasks were completed, remaining tasks that are open, and concrete data to show the

impact of each line of effort in the EO and Joint Action Plan on veterans' and servicemembers' lives.

More than 6,000 veterans die by suicide annually, and each loss of life is immeasurable. Congress has done its part by providing consistent and robust resources for VA's mental health budget and developing and passing comprehensive veterans' mental health care legislation, most recently the Commander John Scott Hannon Veterans Mental Health Care Improvement Act. Hopefully the issuance of EO 13822 was more than a hollow press opportunity by the Administration, and we can expect it to do right by our nation's military and veterans by fully implementing the EO and all laws passed by Congress focused on mental health and suicide prevention.

Sincerely,

\_\_\_\_\_/s/  
Jon Tester  
United States Senator

\_\_\_\_\_/s/  
Richard Blumenthal  
United States Senator

\_\_\_\_\_/s/  
Robert Menendez  
United States Senator

\_\_\_\_\_/s/  
Christopher A. Coons  
United States Senator

\_\_\_\_\_/s/  
Kirsten Gillibrand  
United States Senator

\_\_\_\_\_/s/  
Margaret Wood Hassan  
United States Senator

\_\_\_\_\_/s/  
Tina Smith  
United States Senator

\_\_\_\_\_/s/  
Robert P. Casey, Jr.  
United States Senator

\_\_\_\_\_/s/  
Tammy Duckworth  
United States Senator

\_\_\_\_\_/s/  
Cory A. Booker  
United States Senator

\_\_\_\_\_/s/  
Jacky Rosen  
United States Senator

\_\_\_\_\_/s/  
Patty Murray  
United States Senator

\_\_\_\_\_/s/  
Jack Reed  
United States Senator

\_\_\_\_\_/s/  
Jeffrey A. Merkley  
United States Senator

\_\_\_\_\_/s/  
Debbie Stabenow  
United States Senator

\_\_\_\_\_/s/  
Christopher S. Murphy  
United States Senator

\_\_\_\_\_/s/  
Bernard Sanders  
United States Senator

\_\_\_\_\_/s/  
Patrick Leahy  
United States Senator

\_\_\_\_\_/s/  
Sherrod Brown  
United States Senator

\_\_\_\_\_/s/  
Jeanne Shaheen  
United States Senator

\_\_\_\_\_/s/  
Tammy Baldwin  
United States Senator

\_\_\_\_\_/s/  
Richard J. Durbin  
United States Senator

/s/

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Ron Wyden  
United States Senator

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Mazie K. Hirono  
United States Senator

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Amy Klobuchar  
United States Senator

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Martin Heinrich  
United States Senator

/s/

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Tom Udall  
United States Senator

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Michael F. Bennet  
United States Senator

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Angus S. King, Jr.  
United States Senator

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Mark R. Warner  
United States Senator

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Catherine Cortez Masto  
United States Senator