

119TH CONGRESS
1ST SESSION

S. _____

To improve mental health services of the Department of Veterans Affairs,
and for other purposes.

IN THE SENATE OF THE UNITED STATES

Mr. BLUMENTHAL introduced the following bill; which was read twice and
referred to the Committee on _____

A BILL

To improve mental health services of the Department of
Veterans Affairs, and for other purposes.

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

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

4 (a) SHORT TITLE.—This Act may be cited as the
5 “Building Resources and Access for Veterans’ Mental
6 Health Engagement Act of 2025” or the “BRAVE Act
7 of 2025”.

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

Sec. 1. Short title; table of contents.

2

TITLE I—IMPROVEMENT OF WORKFORCE IN SUPPORT OF
MENTAL HEALTH CARE

- Sec. 101. Report on market pay surveys for Readjustment Counseling Service positions.
- Sec. 102. Qualifications of appointees in occupations that support mental health programs.
- Sec. 103. Report on coordination of Veterans Health Administration with Readjustment Counseling Service.

TITLE II—IMPROVEMENT OF VET CENTER INFRASTRUCTURE
AND TECHNOLOGY

- Sec. 201. Vet Center defined.
- Sec. 202. Comptroller General report on Readjustment Counseling Service model for expansion of Vet Center footprint.
- Sec. 203. Improvement of guidance and information to improve veteran outreach efforts by Vet Centers.
- Sec. 204. Report on information technology system of Readjustment Counseling Service.

TITLE III—WOMEN VETERANS

- Sec. 301. Study on effectiveness of suicide prevention and mental health outreach programs of Department of Veterans Affairs for women veterans.
- Sec. 302. Requirement for Department of Veterans Affairs to modify the REACH VET program to incorporate risk factors weighted for women veterans.
- Sec. 303. Review of and report on reintegration and readjustment services for veterans and family members in group retreat settings.

TITLE IV—OTHER MATTERS

- Sec. 401. Extension of Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program.
- Sec. 402. Access to mental health residential rehabilitation treatment programs for veterans with spinal cord injury or disorder.
- Sec. 403. Mental health consultations and outreach on mental health services for veterans receiving compensation for disabilities relating to mental health diagnoses.
- Sec. 404. Joint report on effectiveness of programs of Department of Veterans Affairs and Department of Defense that promote access to mental health services for transitioning members of the Armed Forces.

1 **TITLE I—IMPROVEMENT OF**
2 **WORKFORCE IN SUPPORT OF**
3 **MENTAL HEALTH CARE**

4 **SEC. 101. REPORT ON MARKET PAY SURVEYS FOR READ-**
5 **JUSTMENT COUNSELING SERVICE POSI-**
6 **TIONS.**

7 (a) FINDINGS.—Congress finds that the Secretary of
8 Veterans Affairs, through the Chief Readjustment Coun-
9 seling Officer, reviews market pay surveys in each Read-
10 justment Counseling Service District to compare the sala-
11 ries of employees in the Readjustment Counseling Service
12 of the Department of Veterans Affairs, including licensed
13 professional mental health counselors, social workers, and
14 marriage and family therapists, to the salaries of similarly
15 situated employees within the Department and the private
16 sector.

17 (b) REPORT.—Not later than 180 days after the date
18 of the enactment of this Act, the Secretary shall submit
19 to the Committee on Veterans' Affairs of the Senate and
20 the Committee on Veterans' Affairs of the House of Rep-
21 resentatives a report on the findings specified in sub-
22 section (a), which shall—

23 (1) include an assessment of pay disparities be-
24 tween employees of the Readjustment Counseling
25 Service of the Department and similarly situated

1 employees within the Department and the private
2 sector; and

3 (2) identify if pay-related staffing challenges
4 exist, and if so, determine if each Readjustment
5 Counseling Service District has initiated a review of
6 third-party survey data for the identified occupa-
7 tions.

8 (c) DISTRICTS.—Each report submitted under sub-
9 section (b) shall include reports from all Readjustment
10 Counseling Service Districts of the Department, includ-
11 ing—

- 12 (1) areas that are geographically diverse;
- 13 (2) rural areas;
- 14 (3) highly rural areas;
- 15 (4) urban areas; and
- 16 (5) areas with health care shortages.

17 (d) ASSESSMENT OF PAY.—Each report submitted
18 under subsection (b) shall include an assessment of pay
19 based on the following factors:

- 20 (1) Third-party survey data.
- 21 (2) Geographic location.
- 22 (3) Equivalent qualifications (licensure, edu-
23 cation level, or experience).
- 24 (4) Short-term incentives.

1 **SEC. 102. QUALIFICATIONS OF APPOINTEES IN OCCUPA-**
2 **TIONS THAT SUPPORT MENTAL HEALTH PRO-**
3 **GRAMS.**

4 (a) PSYCHOLOGISTS.—Section 7402(b)(8)(C) of title
5 38, United States Code, is amended by striking “for a pe-
6 riod not to exceed” and all that follows through the period
7 at the end and inserting “for a reasonable period of time
8 recommended by the Under Secretary for Health.”.

9 (b) LICENSED PROFESSIONAL MENTAL HEALTH
10 COUNSELORS.—Section 7402(b)(11)(B) of title 38,
11 United States Code, is amended by striking the period at
12 the end and inserting “, except that the Secretary may
13 waive the requirement of licensure or certification for an
14 individual licensed professional mental health counselor
15 for a reasonable period of time recommended by the Under
16 Secretary for Health.”.

17 **SEC. 103. REPORT ON COORDINATION OF VETERANS**
18 **HEALTH ADMINISTRATION WITH READJUST-**
19 **MENT COUNSELING SERVICE.**

20 (a) IN GENERAL.—Not later than 60 days after the
21 date of the enactment of this Act, the Secretary of Vet-
22 erans Affairs shall submit to the Committee on Veterans’
23 Affairs of the Senate and the Committee on Veterans’ Af-
24 fairs of the House of Representatives a report regarding
25 coordination between the clinical care system of the Vet-

1 erans Health Administration and the Readjustment Coun-
2 seling Service of the Department of Veterans Affairs.

3 (b) ASSESSMENT.—The report required by subsection
4 (a) shall include an assessment of the adherence by each
5 Director of a Veterans Integrated Service Network to poli-
6 cies of the Veterans Health Administration, which require
7 each such Director to ensure that a support facility of the
8 Department of Veterans Affairs is aligned laterally with
9 each Vet Center to provide supportive administrative and
10 clinical collaboration to better serve veterans eligible for
11 services from Vet Centers, particularly those at high risk
12 for suicide.

13 (c) ANALYSIS.—The report required by subsection (a)
14 shall include an analysis of—

15 (1) whether staff at Vet Centers in the local
16 area of a medical facility of the Department have
17 the updated contact information for appropriate
18 staff at the medical facility to ensure proper coordi-
19 nation of care;

20 (2) whether the external clinical consultant and
21 suicide prevention coordinator of a medical facility of
22 the Department are providing counseling staff of
23 each Vet Center in the local area of the medical fa-
24 cility professional consultation not less frequently
25 than monthly through regularly scheduled peer case

1 presentations onsite at the Vet Center or via virtual
2 or telephone consultation as necessary to fully sup-
3 port the coordination of care of patients, particularly
4 those at high risk for suicide;

5 (3) whether the external clinical consultant and
6 suicide prevention coordinator are documenting any
7 consultation conducted under paragraph (2); and

8 (4) whether the Under Secretary for Health is
9 coordinating with the Outreach Specialist at each
10 Vet Center to ensure active duty members of the
11 Armed Forces who are participating in the Transi-
12 tion Assistance Program of the Department of De-
13 fense are provided information regarding Vet Cen-
14 ters and the services provided at Vet Centers.

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

18 **TITLE II—IMPROVEMENT OF**
19 **VET CENTER INFRASTRUC-**
20 **TURE AND TECHNOLOGY**

21 **SEC. 201. VET CENTER DEFINED.**

22 In this title, the term “Vet Center” has the meaning
23 given that term in section 1712A(h) of title 38, United
24 States Code.

1 **SEC. 202. COMPTROLLER GENERAL REPORT ON READJUST-**
2 **MENT COUNSELING SERVICE MODEL FOR EX-**
3 **PANSION OF VET CENTER FOOTPRINT.**

4 (a) IN GENERAL.—Not later than one year after the
5 date of the enactment of this Act, the Comptroller General
6 of the United States shall submit to the Committee on
7 Veterans' Affairs of the Senate and the Committee on Vet-
8 erans' Affairs of the House of Representatives a report
9 assessing the model used by the Readjustment Counseling
10 Service of the Department of Veterans Affairs to guide
11 the expansion of the real property footprint of Vet Cen-
12 ters.

13 (b) ELEMENTS.—The report required by subsection
14 (a) shall assess—

15 (1) whether the model described in such sub-
16 section adequately accounts for the demand for Vet
17 Center services in rural areas;

18 (2) whether the frequency with which the Sec-
19 retary of Veterans Affairs is reassessing areas for
20 potential expansion of Vet Center services is often
21 enough to address any population shifts;

22 (3) whether such model adequately considers
23 the needs of veterans in areas with high rates of
24 calls to the Veterans Crisis Line or high rates of sui-
25 cide by veterans or members of the Armed Forces;

1 (4) whether such model adequately accounts for
2 trends in usage of mobile Vet Centers in a given
3 area; and

4 (5) whether such model takes into account the
5 unique needs of veterans and members of the Armed
6 Forces in areas being assessed.

7 (c) VETERANS CRISIS LINE.—In this section, the
8 term “Veterans Crisis Line” means the toll-free hotline
9 for veterans established under section 1720F(h) of title
10 38, United States Code.

11 **SEC. 203. IMPROVEMENT OF GUIDANCE AND INFORMATION**
12 **TO IMPROVE VETERAN OUTREACH EFFORTS**
13 **BY VET CENTERS.**

14 Not later than 180 days after the date of the enact-
15 ment of this Act, the Secretary of Veterans Affairs shall—

16 (1) ensure each Vet Center has demographic
17 data, such as age, gender, race, and ethnicity, for in-
18 dividuals eligible for Vet Center services in the serv-
19 ice area of such Vet Center to be used to tailor out-
20 reach activities, including data on veterans who have
21 recently transitioned from service in the Armed
22 Forces;

23 (2) provide Vet Centers with guidance for as-
24 sessing the effectiveness of outreach activities, in-
25 cluding guidance on metrics for those activities and

1 targets against which to assess those metrics to de-
2 termine effectiveness;

3 (3) develop and implement a process to periodi-
4 cally assess the extent to which veterans and mem-
5 bers of the Armed Forces who are eligible for serv-
6 ices from Vet Centers experience barriers to obtain-
7 ing such services, including a lack of awareness
8 about Vet Centers and challenges accessing Vet Cen-
9 ter services; and

10 (4) develop and implement a process to periodi-
11 cally assess the extent to which staff of Vet Centers
12 may encounter barriers to providing services.

13 **SEC. 204. REPORT ON INFORMATION TECHNOLOGY SYSTEM**
14 **OF READJUSTMENT COUNSELING SERVICE.**

15 Not later than 60 days after the date of the enact-
16 ment of this Act, the Secretary of Veterans Affairs,
17 through the Chief Readjustment Counseling Officer of the
18 Veterans Health Administration, shall submit to the Com-
19 mittee on Veterans' Affairs of the Senate and the Com-
20 mittee on Veterans' Affairs of the House of Representa-
21 tives a report identifying—

22 (1) whether the Department of Veterans Affairs
23 is retaining or replacing the current information
24 technology platform of the Department, commonly
25 referred to as “RCSNet”, which is currently used to

1 manage certain parts of the daily work of employees
2 of the Readjustment Counseling Service and oper-
3 ational data and management functions of the Read-
4 justment Counseling Service;

5 (2) if the Department intends to keep RCSNet,
6 the rationale for that decision and an identification
7 of the steps the Department is taking to maintain
8 or improve the functionality of RCSNet and the
9 timeline for those steps; and

10 (3) if the Department intends to replace
11 RCSNet, the rationale for that decision and an iden-
12 tification of the steps the Department is taking to
13 implement that replacement, including a timeline
14 and the estimated cost for that replacement.

15 **TITLE III—WOMEN VETERANS**

16 **SEC. 301. STUDY ON EFFECTIVENESS OF SUICIDE PREVEN-** 17 **TION AND MENTAL HEALTH OUTREACH PRO-** 18 **GRAMS OF DEPARTMENT OF VETERANS AF-** 19 **FAIRS FOR WOMEN VETERANS.**

20 (a) IN GENERAL.—Not later than 240 days after the
21 date of the enactment of this Act, the Secretary of Vet-
22 erans Affairs shall conduct surveys and host listening ses-
23 sions with women veterans to determine the extent to
24 which—

1 (1) suicide prevention, lethal-means safety, and
2 mental health resources and messaging campaigns of
3 the Department of Veterans Affairs are perceived
4 and accepted by women veterans;

5 (2) women veterans find those resources and
6 messaging campaigns effective and sufficiently tai-
7 lored to women veterans;

8 (3) the integration into those resources and
9 messaging campaigns of information pertaining to
10 military sexual trauma, intimate partner violence,
11 and trauma-informed health care would make those
12 resources and messaging campaigns more effective
13 for women veterans;

14 (4) the Department could make additional im-
15 provements to those resources and messaging cam-
16 paigns, including the Women's Health Transition
17 Training Program, to make those resources and
18 messaging campaigns more effective for women vet-
19 erans; and

20 (5) programs and services of the Department
21 are targeted at women veterans of different ages and
22 eras of services, racial and ethnic backgrounds, and
23 geographical areas.

24 (b) POPULATION STUDIED.—The Secretary shall
25 conduct the surveys and listening sessions required under

1 subsection (a) in urban and rural areas and shall ensure
2 such surveys and listening sessions are targeted at dif-
3 ferent demographics.

4 (c) REPORT.—Not later than one year after the sur-
5 veys and listening sessions required under subsection (a)
6 are complete, the Secretary shall submit to the Committee
7 on Veterans’ Affairs of the Senate and the Committee on
8 Veterans’ Affairs of the House of Representatives a report
9 on the findings of such surveys and listening sessions,
10 which shall document the steps the Secretary intends to
11 take to refine the suicide prevention, lethal-means safety,
12 and mental health resources and messaging campaigns of
13 the Department based on the feedback from such surveys
14 and listening sessions to ensure the Secretary is utilizing
15 the most effective strategies.

16 **SEC. 302. REQUIREMENT FOR DEPARTMENT OF VETERANS**
17 **AFFAIRS TO MODIFY THE REACH VET PRO-**
18 **GRAM TO INCORPORATE RISK FACTORS**
19 **WEIGHTED FOR WOMEN VETERANS.**

20 Not later than 60 days after the date of the enact-
21 ment of this Act, the Secretary of Veterans Affairs shall
22 initiate efforts to modify the Recovery Engagement and
23 Coordination for Health—Veterans Enhanced Treatment
24 program (“REACH VET”) to incorporate into such pro-

1 gram risk factors weighted for women, such as military
2 sexual trauma and intimate partner violence.

3 **SEC. 303. REVIEW OF AND REPORT ON REINTEGRATION**
4 **AND READJUSTMENT SERVICES FOR VET-**
5 **ERANS AND FAMILY MEMBERS IN GROUP RE-**
6 **TREAT SETTINGS.**

7 (a) REVIEW.—Not later than 60 days after the date
8 of the enactment of this Act, the Secretary of Veterans
9 Affairs shall review all requests for reintegration and read-
10 justment services for veterans and family members of vet-
11 erans in group retreat program settings under section
12 1712A(a)(1)(B)(ii) of title 38, United States Code, to de-
13 termine if current retreat programming meets demand,
14 specifically requests for—

15 (1) women only retreats;

16 (2) disabled access retreats, particularly wheel-
17 chair accessible retreats; and

18 (3) retreats for veterans with specific medical
19 needs.

20 (b) REPORT.—Not later than 120 days after the date
21 of the enactment of this Act, the Secretary shall submit
22 to the Committee on Veterans' Affairs of the Senate and
23 the Committee on Veterans' Affairs of the House of Rep-
24 resentatives a report on whether the provision by the Sec-
25 retary of reintegration and readjustment services for vet-

1 erans and family members of veterans in group retreat
2 program settings should be increased and made perma-
3 nent, including—

- 4 (1) women only retreats;
5 (2) disabled access retreats, particularly wheel-
6 chair accessible retreats; and
7 (3) retreats for veterans with specific medical
8 needs.

9 **TITLE IV—OTHER MATTERS**

10 **SEC. 401. EXTENSION OF STAFF SERGEANT PARKER GOR-** 11 **DON FOX SUICIDE PREVENTION GRANT PRO-** 12 **GRAM.**

13 Section 201 of the Commander John Scott Hannon
14 Veterans Mental Health Care Improvement Act of 2019
15 (Public Law 116–171; 38 U.S.C. 1720F note) is amend-
16 ed—

- 17 (1) in subsection (c)(2)(A), by striking
18 “\$750,000” and inserting “\$1,000,000”; and
19 (2) in subsection (j), by striking “three years”
20 and inserting “six years”.

21 **SEC. 402. ACCESS TO MENTAL HEALTH RESIDENTIAL REHA-** 22 **BILITATION TREATMENT PROGRAMS FOR** 23 **VETERANS WITH SPINAL CORD INJURY OR** 24 **DISORDER.**

25 (a) PLAN.—

1 (1) IN GENERAL.—Not later than 60 days after
2 the date of the enactment of this Act, the Secretary
3 of Veterans Affairs shall submit to the Committee
4 on Veterans' Affairs of the Senate and the Com-
5 mittee on Veterans' Affairs of the House of Rep-
6 resentatives a plan to ensure access to mental health
7 residential treatment programs of the Department of
8 Veterans Affairs for veterans with a spinal cord in-
9 jury or disorder.

10 (2) ELEMENTS.—The plan required under
11 paragraph (1) shall include—

12 (A) a staffing plan, which shall include a
13 plan for how the Department will—

14 (i) incorporate staff from other facili-
15 ties to support the pilot program required
16 under subsection (b); and

17 (ii) ensure adequate staffing to sup-
18 port the needs of veterans with a spinal
19 cord injury or disorder;

20 (B) an assessment of medical equipment
21 needs; and

22 (C) an assessment of the best location to
23 deliver treatment and health care under the
24 mental health residential treatment programs of
25 the Department, including through the use of

1 spinal cord injury or disorder centers and spinal
2 cord injury or disorder spokes.

3 (b) PILOT PROGRAM.—Commencing not later than
4 120 days after the date of the enactment of this Act, the
5 Secretary shall carry out a pilot program to provide access
6 to mental health residential treatment programs of the
7 Department for veterans with a spinal cord injury or dis-
8 order at not fewer than three medical facilities of the De-
9 partment.

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

15 (1) the implementation of the plan required
16 under subsection (a);

17 (2) the initial results from the pilot program
18 under subsection (b); and

19 (3) plans to expand the mental health residen-
20 tial treatment programs of the Department to addi-
21 tional medical facilities of the Department to ad-
22 dress demand for the highly specialized treatment
23 provided under such programs for veterans with a
24 spinal cord injury or disorder.

1 **SEC. 403. MENTAL HEALTH CONSULTATIONS AND OUT-**
2 **REACH ON MENTAL HEALTH SERVICES FOR**
3 **VETERANS RECEIVING COMPENSATION FOR**
4 **DISABILITIES RELATING TO MENTAL HEALTH**
5 **DIAGNOSES.**

6 (a) TECHNICAL CORRECTIONS.—

7 (1) IN GENERAL.—The section 1167 of title 38,
8 United States Code, relating to mental health con-
9 sultations, is redesignated as section 1169.

10 (2) CLERICAL AMENDMENTS.—The table of sec-
11 tions at the beginning of chapter 11 is amended—

12 (A) by striking the item relating to the sec-
13 tion 1167 relating to mental health consulta-
14 tions; and

15 (B) adding after the item relating to sec-
16 tion 1168 the following new item:

“1169. Mental health consultations.”.

17 (b) IMPROVEMENTS.—Section 1169 of such title, as
18 redesignated by subsection (a), is amended—

19 (1) in subsection (a), in the subsection heading,
20 by striking “IN GENERAL” and inserting “INITIAL
21 MENTAL HEALTH CONSULTATIONS”;

22 (2) by redesignating subsection (b) and (c) as
23 subsections (c) and (d), respectively;

24 (3) by inserting after subsection (a) the fol-
25 lowing new subsection (b):

1 “(b) ANNUAL MENTAL HEALTH CONSULTATIONS
2 AND OUTREACH.—Not less frequently than once each
3 year, the Secretary shall—

4 “(1) offer to each veteran who is receiving com-
5 pensation under this chapter for a service-connected
6 disability relating to a mental health diagnosis a
7 mental health consultation to assess the mental
8 health needs of, and discuss other mental health
9 care options for, the veteran; and

10 “(2) conduct outreach to each veteran described
11 in paragraph (1) regarding the availability of con-
12 sultations described in such paragraph and other
13 mental health services from the Department.”.

14 (4) in subsection (c), as redesignated by para-
15 graph (2), by inserting “or (b)” after “under sub-
16 section (a)” both places it appears; and

17 (5) in subsection (d), as redesignated by para-
18 graph (2), by inserting “or as requiring reevaluation
19 of any entitlement of the veteran to compensation
20 under this chapter” before the period at the end.

21 (c) BIENNIAL REPORTS.—Such section, as amended
22 by subsection (b), is further amended by adding at the
23 end the following new subsection:

24 “(e) BIENNIAL REVIEWS AND REPORTS.—(1) Not
25 later than one year after the date of the enactment of the

1 BRAVE Act of 2025, and not less frequently than once
2 every two years thereafter, the Secretary shall—

3 “(A) review the efficacy of the outreach of the
4 Department with respect to consultations offered
5 under this section; and

6 “(B) submit to the Committee on Veterans’ Af-
7 fairs of the Senate and the Committee on Veterans’
8 Affairs of the House of Representatives a report
9 on—

10 “(i) the findings of the Secretary with re-
11 spect to the most recent review conducted pur-
12 suant to subparagraph (A); and

13 “(ii) the plans of the Secretary to address
14 the findings described in clause (i).

15 “(2) In order to facilitate reviews conducted under
16 paragraph (1)(A), the Secretary shall—

17 “(A) ensure veterans can provide feedback to
18 the Secretary on outreach described in paragraph
19 (1) and the consultations offered under this section;
20 and

21 “(B) analyze the feedback described in subpara-
22 graph (A) that is provided to the Secretary.

23 “(3) Each review conducted pursuant to paragraph
24 (1)(A) shall cover the following:

1 “(A) The feedback collected under paragraph
2 (2).

3 “(B) Consultations sought pursuant to offers
4 under this section.

5 “(C) Matters that deter veterans from seeking
6 consultations offered under this section.”.

7 **SEC. 404. JOINT REPORT ON EFFECTIVENESS OF PRO-**
8 **GRAMS OF DEPARTMENT OF VETERANS AF-**
9 **FAIRS AND DEPARTMENT OF DEFENSE THAT**
10 **PROMOTE ACCESS TO MENTAL HEALTH**
11 **SERVICES FOR TRANSITIONING MEMBERS OF**
12 **THE ARMED FORCES.**

13 (a) IN GENERAL.—Not later than 180 days after the
14 date of the enactment of this Act, the Secretary of Vet-
15 erans Affairs and the Secretary of Defense shall jointly
16 submit to the Committee on Veterans’ Affairs of the Sen-
17 ate and the Committee on Veterans’ Affairs of the House
18 of Representatives a report on the actions taken or that
19 will be taken by each such Secretary, either independently
20 or jointly, to improve the effectiveness of programs of the
21 Department of Veterans Affairs and the Department of
22 Defense that promote access to mental health services for
23 members of the Armed Forces transitioning from service
24 in the Armed Forces to civilian life.

1 (b) STATUS OF RESPONSE TO COMPTROLLER GEN-
2 ERAL RECOMMENDATIONS.—The report required under
3 subsection (a) shall include an assessment of the status
4 of the response by the Secretary of Veterans Affairs and
5 the Secretary of Defense to the recommendations of the
6 Comptroller General of the United States set forth in the
7 July 2024 report entitled “DOD AND VA HEALTH
8 CARE: Actions Needed to Better Facilitate Access to
9 Mental Health Services During Military to Civilian Tran-
10 sitions” (GAO–24–106189).

11 (c) IDENTIFICATION OF DUPLICATIVE EFFORTS.—
12 The report required under subsection (a) shall identify any
13 duplicative efforts or gaps in services and recommend
14 changes to programs of the Department of Veterans Af-
15 fairs or the Department of Defense to address such dupli-
16 cative efforts or gaps, including recommendations for leg-
17 islative action.