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

IN THE SENATE OF THE UNITED STATES

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

A BILL

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

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) Short Title.—This Act may be cited as the “Post-9/11 Veterans’ Mental Health Care Improvement Act of 2021”.

(b) Table of Contents.—The table of contents for this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—ACCESS TO CARE
Sec. 101. Improvement of sleep disorder care furnished by Department of Veterans Affairs.

Sec. 102. Mental health consultations.

Sec. 103. Study on inpatient mental health and substance use care from Department of Veterans Affairs.

Sec. 104. Study on treatment from Department of Veterans Affairs for co-occurring mental health and substance use disorders.

TITLE II—MENTAL HEALTH WORKFORCE

Sec. 201. Expansion of Vet Center workforce.

Sec. 202. Expansion of mental health training for Department of Veterans Affairs.

Sec. 203. Expansion of scholarships and loan repayment programs for mental health providers.

Sec. 204. Study on workload of suicide prevention teams of Department of Veterans Affairs.

TITLE III—MENTAL HEALTH RESEARCH

Sec. 301. Expansion of suicide prevention and mental health research.

Sec. 302. Study on mental health and suicide prevention support for military families.

Sec. 303. Research on brain health.

Sec. 304. Study on efficacy of clinical and at-home resources for post-traumatic stress disorder.

TITLE I—ACCESS TO CARE

SEC. 101. IMPROVEMENT OF SLEEP DISORDER CARE FURNISHED BY DEPARTMENT OF VETERANS AFFAIRS.

(a) In General.—Pursuant to the analysis conducted under subsection (b), the Secretary of Veterans Affairs shall take such action as the Secretary considers appropriate to improve the assessment and treatment of veterans with sleep disorders, including by conducting in-home sleep studies for veterans.

(b) Analysis.—The Secretary shall conduct an analysis of the ability of the Department of Veterans Affairs to treat sleep disorders among veterans, including—
(1) assessment and treatment options for such disorders;
(2) barriers to care for such disorders, such as wait time, travel time, and lack of staffing;
(3) the efficacy of the clinical practice guidelines of the Department of Veterans Affairs and the Department of Defense for such disorders; and
(4) the availability of and efficacy of the use by the Department of Veterans Affairs of cognitive behavioral therapy for insomnia.

(e) REPORT.—Not later than two years after the date of the enactment of this Act, the Secretary shall submit to the Committee on Veterans’ Affairs of the Senate and the Committee on Veterans’ Affairs of the House of Representatives a report on—

(1) the findings from the analysis conducted under subsection (b); and
(2) any actions taken under subsection (a) to improve the assessment and treatment of veterans with sleep disorders.

(d) AUTHORIZATION OF APPROPRIATIONS FOR IN-HOME SLEEP STUDIES.—There is authorized to be appropriated to the Secretary of Veterans Affairs $5,000,000 to be used to conduct in-home sleep studies for veterans,
as part of sleep disorder assessment and treatment conducted by the Department of Veterans Affairs.

SEC. 102. MENTAL HEALTH CONSULTATIONS.

(a) Mental Health Consultations for Veterans Filing for Compensation.—

(1) In General.—Subchapter VI of chapter 11 of title 38, United States Code, is amended by adding at the end the following new section:

“§ 1167. Mental health consultations

“(a) In General.—Not later than 30 days after the date on which a veteran submits to the Secretary a claim for compensation under this chapter for service-connected disability relating to a mental health diagnosis, the Secretary shall offer the veteran a mental health consultation to assess the mental health needs of and care options for the veteran.

“(b) Availability.—The Secretary shall ensure that a veteran offered a mental health consultation under subsection (a) may elect to receive such consultation during the one-year period beginning on the date on which the consultation is offered or during such longer period beginning on such date as the Secretary considers appropriate.”.

(2) Clerical Amendment.—The table of sections at the beginning of chapter 11 of such title is
amended by adding at the end the following new item:

“1167. Mental health consultations.”.

(b) Mental Health Consultations for Veterans Entering Homeless Programs Office Programs.—

(1) In general.—Subchapter VII of chapter 20 of title 38, United States Code, is amended by adding at the end the following new section:

“§ 2068. Mental health consultations

“(a) In general.—Not later than two weeks after the date on which a veteran described in subsection (b) enters into a program administered by the Homeless Programs Office of the Department, the Secretary shall offer the veteran a mental health consultation to assess the health needs of and care options for the veteran.

“(b) Veteran described.—A veteran described in this subsection is a veteran to whom a mental health consultation is not offered or provided through the case management services of the program of the Homeless Programs Office into which the veteran enters.”.

(2) Clerical amendment.—The table of sections at the beginning of chapter 20 of such title is amended by adding at the end the following new item:

“2068. Mental health consultations.”.
SEC. 103. STUDY ON INPATIENT MENTAL HEALTH AND SUBSTANCE USE CARE FROM DEPARTMENT OF VETERANS AFFAIRS.

(a) IN GENERAL.—Not later than one year after the date of the enactment of this Act, the Secretary of Veterans Affairs shall complete the conduct of a study on access of veterans to care under the residential rehabilitation treatment programs of the Department of Veterans Affairs to determine—

(1) if there are sufficient geographic offerings of inpatient mental health care, especially for veterans in rural and remote communities;

(2) if there are sufficient bed spaces at each location, based on demand and drive time from the homes of veterans;

(3) if there are any workforce-related capacity limitations at each location, including if beds are unable to be used because there are not enough providers to care for additional patients;

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

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

(A) Veterans Integrated Service Network;

(B) rural or urban area;

(C) sex; and
(D) specialty (general program, substance use disorder program, military sexual trauma program, etc.).

(b) **Recommendations for Modifications to Treatment Programs.**—Using the results from the study conducted under subsection (a), the Secretary shall make recommendations for—

1. new locations for opening facilities to participate in the residential rehabilitation treatment programs of the Department;
2. facilities under such programs at which new beds can be added; and
3. any additional specialty tracks to be added to such programs, such as substance use disorder or military sexual trauma, in order to meet veteran need and demand.

(c) **Report.**—Not later than 180 days after completion of the study under subsection (a), the Secretary shall submit to the Committee on Veterans’ Affairs of the Senate and the Committee on Veterans’ Affairs of the House of Representatives a report on the findings of the study conducted under subsection (a) and the recommendations made by the Secretary under subsection (b).
SEC. 104. STUDY ON TREATMENT FROM DEPARTMENT OF VETERANS AFFAIRS FOR CO-OCCURRING MENTAL HEALTH AND SUBSTANCE USE DISORDERS.

(a) IN GENERAL.—Not later than one year after the date of the enactment of this Act, the Secretary of Veterans Affairs shall conduct a study examining—

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

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

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

(b) REPORT.—

(1) IN GENERAL.—Not later than two years after the date of the enactment of this Act, the Secretary shall submit to the Committee on Veterans’ Affairs of the Senate and the Committee on Veterans’ Affairs of the House of Representatives a report on the findings of the study conducted under subsection (a).

(2) ELEMENTS.—The report required by paragraph (1) shall include—
(A) any recommendations resulting from the study conducted under subsection (a) with respect to improving timeliness and quality of care and meeting treatment preferences for veterans with co-occurring mental health and substance use disorders; and

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

TITLE II—MENTAL HEALTH WORKFORCE

SEC. 201. EXPANSION OF VET CENTER WORKFORCE.

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

(b) Vet Center Defined.—In this section, the term “Vet Center” has the meaning given that term in section 1712A(h) of title 38, United States Code.
SEC. 202. EXPANSION OF MENTAL HEALTH TRAINING FOR DEPARTMENT OF VETERANS AFFAIRS.

(a) IN GENERAL.—Not later than three years after the date of the enactment of this Act, the Secretary of Veterans Affairs, in collaboration with the Office of Mental Health and Suicide Prevention and the Office of Academic Affiliations, shall add an additional 500 paid trainee slots in covered mental health disciplines to the workforce of the Department of Veterans Affairs.

(b) COVERED MENTAL HEALTH DISCIPLINES DEFINED.—In this section, the term “covered mental health disciplines” means psychiatry, psychology, advanced practice nursing (with a focus on mental health or substance use disorder), social work, licensed professional mental health counseling, and marriage and family therapy.

SEC. 203. EXPANSION OF SCHOLARSHIPS AND LOAN REPAYMENT PROGRAMS FOR MENTAL HEALTH PROVIDERS.

(a) EXPANSION OF HEALTH PROFESSIONAL SCHOLARSHIP PROGRAM.—Beginning in academic year 2022, the Secretary of Veterans Affairs shall include not fewer than an additional (as compared to academic year 2021) 50 awards per academic year under the Department of Veterans Affairs Health Professional Scholarship Program under subchapter II of chapter 76 of title 38, United States Code, for applicants otherwise eligible for such pro-
gram who are pursuing degrees or training in mental health disciplines, including advanced practice nursing (with a focus on mental health or substance use disorder), psychology, and social work.

(b) EXPANSION OF EDUCATION DEBT REDUCTION PROGRAM.—

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

(2) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to the Secretary of Veterans Affairs $8,000,000 per year to carry out the additional awards under paragraph (1).

(c) OUTREACH.—
(1) **IN GENERAL.**—Not later than one year after the date of the enactment of this Act, the Secretary shall develop a public awareness campaign to encourage veterans and mental health professionals to choose the Department for their mental health career.

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

(A) shall advertise the paid trainee, scholarship, and loan repayment opportunities offered by the Department; and

(B) may highlight the new graduate medical education residencies available at the Department for medical students entering residency.

**SEC. 204. STUDY ON WORKLOAD OF SUICIDE PREVENTION TEAMS OF DEPARTMENT OF VETERANS AFFAIRS.**

(a) **IN GENERAL.**—The Secretary of Veterans Affairs, acting through the Under Secretary for Health and the Office of Mental Health and Suicide Prevention, shall conduct a study evaluating the workload of local suicide prevention teams of the Department of Veterans Affairs.

(b) **ELEMENTS.**—The study conducted under subsection (a) shall—
(1) identify the effects of the growth of the suicide prevention program of the Department on the workload of suicide prevention teams;

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

(3) determine which facilities of the Department need increased suicide prevention coordinator staffing to meet the needs of veterans, with an emphasis placed on facilities with high patient volume and facilities located in States with high rates of veteran suicide.

(e) Report.—Not later than one year after the date of the enactment of this Act, the Secretary shall submit to the Committee on Veterans’ Affairs of the Senate and the Committee on Veterans’ Affairs of the House of Representatives a report—

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

(2) indicating any changes made to the staffing of suicide prevention teams of the Department resulting from the determinations made under subsection (b)(3), including a list of facilities of the Department where staffing was adjusted.
TITLE III—MENTAL HEALTH RESEARCH

SEC. 301. EXPANSION OF SUICIDE PREVENTION AND MENTAL HEALTH RESEARCH.

There is authorized to be appropriated to the Department of Veterans Affairs an additional $10,000,000 to be used by the Center of Excellence for Suicide Prevention of the Department and the Rocky Mountain Mental Illness Research Education and Clinical Center for purposes of conducting research on the factors impacting veteran suicide and best practices for early intervention and support.

SEC. 302. STUDY ON MENTAL HEALTH AND SUICIDE PREVENTION SUPPORT FOR MILITARY FAMILIES.

(a) In General.—The Secretary of Veterans Affairs, in collaboration with the Secretary of Defense, shall conduct a study on secondary post-traumatic stress disorder and depression and its impact on spouses, children, and caregivers of members of the Armed Forces.

(b) Report.—

(1) In General.—Not later than three years after the date of the enactment of this Act, the Secretary of Veterans Affairs, in collaboration with the Secretary of Defense, shall submit to Congress, veterans service organizations, and military support or-
ganizations a report on the findings of the study conducted under subsection (a).

(2) DEFINITIONS.—In this subsection:

(A) MILITARY SUPPORT ORGANIZATION.—
The term “military support organization” has the meaning given that term by the Secretary of Defense.

(B) VETERANS SERVICE ORGANIZATION.—
The term “veterans service organization” means an organization recognized by the Secretary of Veterans Affairs for the representation of veterans under section 5902 of title 38, United States Code.

SEC. 303. RESEARCH ON BRAIN HEALTH.

There is authorized to be appropriated to the Department of Veterans Affairs an additional $5,000,000 for ongoing and future research at the Translational Research Center of the Department of Veterans Affairs for traumatic brain injury and stress disorders to provide better understanding of and improved treatment options for post-9/11 veterans with traumatic brain injury or post-traumatic stress disorder.
SEC. 304. STUDY ON EFFICACY OF CLINICAL AND AT-HOME RESOURCES FOR POST-TRAUMATIC STRESS DISORDER.

Not later than two years after the date of the enactment of this Act, the Secretary of Veterans Affairs, through the Office of Research and Development of the Department of Veterans Affairs, shall conduct a study on—

(1) the efficacy of clinical and at-home resources, such as mobile applications like COVID Coach, for providers, veterans, caregivers, and family members to use for dealing with stressors;

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

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

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