

# Calendar No. 632

110<sup>TH</sup> CONGRESS  
2<sup>D</sup> SESSION

# S. 2162

[Report No. 110-281]

To improve the treatment and services provided by the Department of Veterans Affairs to veterans with post-traumatic stress disorder and substance use disorders, and for other purposes.

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## IN THE SENATE OF THE UNITED STATES

OCTOBER 15, 2007

Mr. AKAKA (for himself, Mr. BURR, Ms. MIKULSKI, Mr. ENSIGN, and Mr. ROCKEFELLER) introduced the following bill; which was read twice and referred to the Committee on Veterans' Affairs

APRIL 8, 2008

Reported by Mr. AKAKA, with an amendment

[Strike out all after the enacting clause and insert the part printed in *italic*]

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## A BILL

To improve the treatment and services provided by the Department of Veterans Affairs to veterans with post-traumatic stress disorder and substance use disorders, 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,*

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

2 (a) **SHORT TITLE.**—This Act may be cited as the  
 3 “Veterans Mental Health Improvements Act of 2007”.

4 (b) **TABLE OF CONTENTS.**—The table of contents for  
 5 this Act is as follows:

Sec. 1. Short title; table of contents.

**TITLE I—SUBSTANCE USE DISORDERS AND MENTAL HEALTH CARE**

Sec. 101. Findings on substance use disorders and mental health.

Sec. 102. Expansion of substance use disorder treatment services at Department of Veterans Affairs Medical Centers.

Sec. 103. Care for veterans with mental health and substance use disorders by clinician teams.

Sec. 104. Program for enhanced treatment of substance use disorders and post-traumatic stress disorder in veterans.

Sec. 105. National centers of excellence on post-traumatic stress disorder and substance use disorders.

Sec. 106. Report on residential mental health care facilities of the Veterans Health Administration.

Sec. 107. Tribute to Justin Bailey.

**TITLE II—MENTAL HEALTH ACCESSIBILITY ENHANCEMENTS**

Sec. 201. Pilot program on peer outreach and support for veterans and use of community mental health centers and Indian Health Service facilities.

**TITLE III—RESEARCH**

Sec. 301. Research program on comorbid post-traumatic stress disorder and substance use disorders.

Sec. 302. Extension of authorization for Special Committee on Post-Traumatic Stress Disorder.

**TITLE IV—ASSISTANCE FOR FAMILIES OF VETERANS**

Sec. 401. Clarification of authority of Secretary of Veterans Affairs to provide mental health services to families of veterans.

Sec. 402. Pilot program on provision of readjustment and transition assistance to veterans and their families in cooperation with Vet Centers.

1 **TITLE I—SUBSTANCE USE DIS-**  
2 **ORDERS AND MENTAL**  
3 **HEALTH CARE**

4 **SEC. 101. FINDINGS ON SUBSTANCE USE DISORDERS AND**  
5 **MENTAL HEALTH.**

6 Congress makes the following findings:

7 (1) More than 1,500,000 members of the  
8 Armed Forces have been deployed in Operation Iraqi  
9 Freedom and Operation Enduring Freedom. The  
10 2005 Department of Defense Survey of Health Re-  
11 lated Behaviors Among Active Duty Personnel re-  
12 ports that 23 percent of members of the Armed  
13 Forces on active duty acknowledge a significant  
14 problem with alcohol use, with similar rates of ac-  
15 knowledged problems with alcohol use among mem-  
16 bers of the National Guard.

17 (2) The effects of substance abuse are wide  
18 ranging, including significantly increased risk of sui-  
19 cide, exacerbation of mental and physical health dis-  
20 orders, breakdown of family support, and increased  
21 risk of unemployment and homelessness.

22 (3) While veterans suffering from mental health  
23 conditions, chronic physical illness, and polytrauma  
24 may be at increased risk for development of a sub-  
25 stance use disorder, treatment for these veterans is

1 complicated by the need to address adequately the  
2 physical and mental symptoms associated with these  
3 conditions through appropriate medical intervention.

4 (4) While the Veterans Health Administration  
5 has dramatically increased health services for vet-  
6 erans from 1996 through 2006, the number of vet-  
7 erans receiving specialized substance abuse treat-  
8 ment services decreased 18 percent during that time.  
9 No comparable decrease in the national rate of sub-  
10 stance abuse has been observed during that time.

11 (5) While some facilities of the Veterans Health  
12 Administration provide exemplary substance use dis-  
13 order treatment services, the availability of such  
14 treatment services throughout the health care sys-  
15 tem of the Veterans Health Administration is incon-  
16 sistent.

17 (6) According to the Government Accountability  
18 Office, the Department of Veterans Affairs signifi-  
19 cantly reduced its substance use disorder treatment  
20 and rehabilitation services between 1996 and 2006,  
21 and has made little progress since in restoring these  
22 services to their pre-1996 levels.

1 **SEC. 102. EXPANSION OF SUBSTANCE USE DISORDER**  
2 **TREATMENT SERVICES AT DEPARTMENT OF**  
3 **VETERANS AFFAIRS MEDICAL CENTERS.**

4 (a) **PROVISION OF SUBSTANCE USE DISORDER**  
5 **TREATMENT SERVICES.**—The Secretary of Veterans Af-  
6 fairs shall ensure the provision, at each Department of  
7 Veterans Affairs medical center and community based out-  
8 patient clinic, of the following services and treatments  
9 with respect to substance use disorder for veterans:

10 (1) Short term motivational counseling services.

11 (2) Intensive outpatient care services.

12 (3) Relapse prevention services.

13 (4) Ongoing aftercare and outpatient counseling  
14 services.

15 (5) Opiate substitution therapy services.

16 (6) Pharmacological treatments aimed at reduc-  
17 ing craving for drugs and alcohol.

18 (7) Detoxification and stabilization services.

19 (8) Such other services as the Secretary con-  
20 siders appropriate.

21 (b) **EXEMPTIONS.**—

22 (1) **IN GENERAL.**—The Secretary may exempt  
23 an individual medical center or community based  
24 outpatient clinic from providing all of the services  
25 otherwise required by subsection (a).

1           (2) ANNUAL REPORT.—Each year, the Sec-  
 2           retary shall submit to the Committee on Veterans'  
 3           Affairs of the Senate and the Committee on Vet-  
 4           erans' Affairs of the House of Representatives a re-  
 5           port setting forth the exemptions made under para-  
 6           graph (1) as of the date of the report and the rea-  
 7           sons therefor.

8 **SEC. 103. CARE FOR VETERANS WITH MENTAL HEALTH AND**  
 9                                   **SUBSTANCE USE DISORDERS BY CLINICIAN**  
 10                                   **TEAMS.**

11           (a) IN GENERAL.—In the event the Secretary of Vet-  
 12           erans Affairs provides a veteran inpatient or outpatient  
 13           care for a substance use disorder and a comorbid mental  
 14           health disorder, the Secretary shall ensure that treatment  
 15           for such disorders is provided concurrently by a team of  
 16           clinicians with appropriate expertise.

17           (b) TEAM OF CLINICIANS WITH APPROPRIATE EX-  
 18           PERTISE DEFINED.—In this section, the term “team of  
 19           clinicians with appropriate expertise” means a team con-  
 20           sisting of the following:

21                   (1) Clinicians and health professionals with ex-  
 22                   pertise in treatment of substance use disorders and  
 23                   mental health disorders.

24                   (2) Such other professionals as the Secretary  
 25                   considers appropriate for the provision of treatment

1 to veterans for substance use and mental health dis-  
2 orders.

3 **SEC. 104. PROGRAM FOR ENHANCED TREATMENT OF SUB-**  
4 **STANCE USE DISORDERS AND POST-TRAU-**  
5 **MATIC STRESS DISORDER IN VETERANS.**

6 (a) **IN GENERAL.**—The Secretary of Veterans Affairs  
7 shall carry out a program for the purpose of enhancing  
8 the care and treatment for veterans with substance use  
9 disorders and post-traumatic stress disorder (PTSD).

10 (b) **ALLOCATION OF FUNDS.**—The Secretary of Vet-  
11 erans Affairs shall carry out the program through a com-  
12 petitive allocation of funds to facilities of the Department  
13 of Veterans Affairs for the provision of care and treatment  
14 to veterans described in subsection (a).

15 (c) **APPLICATION.**—A facility of the Department, in-  
16 cluding a medical center, a community based outpatient  
17 clinic, or a readjustment counseling center, seeking an al-  
18 location of funds under this section shall submit to the  
19 Secretary an application therefor in such form and in such  
20 manner as the Secretary considers appropriate.

21 (d) **USE OF ALLOCATED FUNDS.**—Each Department  
22 facility receiving an allocation of funds under this section  
23 shall use such funds for the purpose described in sub-  
24 section (a), including the establishment or improvement  
25 of the following:

1           (1) Programs that treat veterans with post-  
2           traumatic stress disorder and a substance use dis-  
3           order through a systematic integration of treatment  
4           for such disorders.

5           (2) Programs that treat veterans with sub-  
6           stance use disorders through the development of  
7           substance use disorder intervention strategies, in-  
8           cluding strategies developed in collaboration with the  
9           families of veterans.

10          (3) Peer outreach programs that—

11                (A) re-engage veterans of Operation Iraqi  
12                Freedom and Operation Enduring Freedom  
13                who miss multiple appointments for treatment  
14                of post-traumatic stress disorder or a substance  
15                use disorder; and

16                (B) are conducted—

17                   (i) through readjustment counseling  
18                   centers;

19                   (ii) in tandem with efforts of commu-  
20                   nity-based outpatient clinics and post-trau-  
21                   matic stress disorder and substance use  
22                   disorder treatment teams based in Depart-  
23                   ment of Veterans Affairs medical centers;  
24                   and



1                   (iii) with appropriate regard for pa-  
2                   tient privacy.

3                   (4) Collaboration between urgent care clinicians  
4                   at Department of Veterans Affairs medical centers  
5                   and substance use disorder and post-traumatic  
6                   stress disorder treatment professionals to ensure ex-  
7                   pedited referral of veterans who are diagnosed with  
8                   post-traumatic stress disorder or a substance use  
9                   disorder.

10                  (5) Programs of treatment or services for vet-  
11                  erans with substance use disorders and post-trau-  
12                  matic stress disorder that utilize innovative and  
13                  flexible scheduling of treatment and services by em-  
14                  phasizing scheduling of group meetings or appoint-  
15                  ments in the evening and on weekends.

16                  (6) Evidence-based treatment of post-traumatic  
17                  stress disorder and substance use disorders.

18                  (c) REPORT.—Not later than one year after the date  
19                  of the enactment of this Act, the Secretary shall submit  
20                  to the Committee on Veterans' Affairs of the Senate and  
21                  the Committee on Veterans' Affairs of the House of Rep-  
22                  resentatives a report setting forth the programs and facili-  
23                  ties for which funds have been allocated under this section  
24                  as of the date of the report.

25                  (f) FUNDING.—

1           (1) IN GENERAL.—In carrying out the program  
2 described in this section, the Secretary shall allocate  
3 for each of fiscal years 2008, 2009, and 2010, from  
4 funds available to the Department for medical care  
5 in such fiscal year, an amount equal to not less than  
6 \$50,000,000 to carry out the program.

7           (2) MINIMUM FUNDING.—In allocating amounts  
8 under paragraph (1), the Secretary shall ensure  
9 that, after funds are allocated under this section for  
10 a fiscal year, the total expenditure for programs of  
11 the Department relating to the treatment of post-  
12 traumatic stress disorder and substance use dis-  
13 orders is not less than \$50,000,000 in excess of the  
14 baseline amount in that fiscal year.

15           (3) BASELINE.—For purposes of paragraph  
16 (2), the baseline amount is the amount of the total  
17 expenditures on programs of the Department relat-  
18 ing to the treatment of post-traumatic stress dis-  
19 order and substance use disorders for the most re-  
20 cent fiscal year for which final expenditure amounts  
21 are known (except for amounts made available to  
22 carry out this section), adjusted to reflect any subse-  
23 quent increase in applicable costs to deliver such  
24 programs.

1 **SEC. 105. NATIONAL CENTERS OF EXCELLENCE ON POST-**  
 2 **TRAUMATIC STRESS DISORDER AND SUB-**  
 3 **STANCE USE DISORDERS.**

4 (a) **IN GENERAL.**—Subchapter H of chapter 73 of  
 5 title 38, United States Code, is amended by adding at the  
 6 end the following new section:

7 **“§ 7330A. National centers of excellence on post-trau-**  
 8 **matic stress disorder and substance use**  
 9 **disorders**

10 **“(a) ESTABLISHMENT OF CENTERS.**—(1) The Sec-  
 11 retary shall establish not less than six national centers of  
 12 excellence on post-traumatic stress disorder and substance  
 13 use disorders.

14 **“(2)** The purpose of the centers established under  
 15 this section is to serve as Department facilities that pro-  
 16 vide comprehensive inpatient treatment and recovery serv-  
 17 ices for veterans newly diagnosed with both post-traumatic  
 18 stress disorder and a substance use disorder.

19 **“(b) LOCATION.**—Each center established in accord-  
 20 ance with subsection (a) shall be located at a medical cen-  
 21 ter of the Department that—

22 **“(1)** provides inpatient care;

23 **“(2)** is geographically situated in an area with  
 24 a high number of veterans that have been diagnosed  
 25 with both post-traumatic stress disorder and sub-  
 26 stance use disorder; and

1           “(3) is capable of treating post-traumatic stress  
2           disorder and substance use disorders.

3           “(e) ~~PROCESS OF REFERRAL AND TRANSITION TO~~  
4 ~~STEP DOWN DIAGNOSIS REHABILITATION TREATMENT~~  
5 ~~PROGRAMS.~~—The Secretary shall establish a process to  
6 refer and aid the transition of veterans from the national  
7 centers of excellence on post-traumatic stress disorder and  
8 substance use disorders established pursuant to subsection  
9 (a) to programs that provide step down rehabilitation  
10 treatment for individuals with post-traumatic stress dis-  
11 order and substance use disorders.”.

12           (b) ~~CLERICAL AMENDMENT.~~—The table of sections  
13 at the beginning of chapter 73 of such title is amended  
14 by inserting after the item relating to section 7330 the  
15 following new item:

“7330A. National centers of excellence on post-traumatic stress disorder and  
substance use disorders.”.

16 **SEC. 106. REPORT ON RESIDENTIAL MENTAL HEALTH CARE**  
17 **FACILITIES OF THE VETERANS HEALTH AD-**  
18 **MINISTRATION.**

19           (a) ~~IN GENERAL.~~—Not later than six months after  
20 the date of the enactment of this Act, the Secretary of  
21 Veterans Affairs shall, acting through the Office of the  
22 Medical Inspector of the Department of Veterans Af-  
23 fairs—

1           (1) conduct a review of all residential mental  
2 health care facilities, including domiciliary facilities,  
3 of the Veterans Health Administration; and

4           (2) submit to the Committee on Veterans' Af-  
5 fairs of the Senate and the Committee on Veterans'  
6 Affairs of the House of Representatives a report on  
7 the review.

8           (b) ELEMENTS.—The report required by subsection  
9 (a)(2) shall include the following:

10           (1) A description of the availability of care in  
11 residential mental health care facilities in each Vet-  
12 erans Integrated Service Network (VISN).

13           (2) An assessment of the supervision and sup-  
14 port provided in the residential mental health care  
15 facilities of the Veterans Health Administration.

16           (3) The ratio of staff members at each residen-  
17 tial mental health care facility to patients at such fa-  
18 cility.

19           (4) An assessment of the appropriateness of  
20 rules and procedures for the prescription and admin-  
21 istration of medications to patients in such residen-  
22 tial mental health care facilities.

23           (5) A description of the protocols at each resi-  
24 dential mental health care facility for handling  
25 missed appointments.

1           (6) Any recommendations the Secretary con-  
 2           siders appropriate for improvements to such residen-  
 3           tial mental health care facilities and the care pro-  
 4           vided in such facilities.

5 **SEC. 107. TRIBUTE TO JUSTIN BAILEY.**

6           This title is enacted in tribute to Justin Bailey, who,  
 7           after returning to the United States from service as a  
 8           member of the Armed Forces in Operation Iraqi Freedom,  
 9           died in a domiciliary facility of the Department of Vet-  
 10          erans Affairs while receiving care for post-traumatic stress  
 11          disorder and a substance use disorder.

12                   **TITLE II—MENTAL HEALTH**  
 13                   **ACCESSIBILITY ENHANCEMENTS**

14 **SEC. 201. PILOT PROGRAM ON PEER OUTREACH AND SUP-**  
 15                   **PORT FOR VETERANS AND USE OF COMMU-**  
 16                   **NITY MENTAL HEALTH CENTERS AND INDIAN**  
 17                   **HEALTH SERVICE FACILITIES.**

18          (a) **PILOT PROGRAM REQUIRED.**—Commencing not  
 19          later than 180 days after the date of the enactment of  
 20          this Act, the Secretary of Veterans Affairs shall carry out  
 21          a pilot program to assess the feasibility and advisability  
 22          of providing to veterans of Operation Iraqi Freedom and  
 23          Operation Enduring Freedom, and, in particular, veterans  
 24          who served in such operations as a member of the Na-  
 25          tional Guard or Reserve, the following:

1 (1) Peer outreach services.

2 (2) Peer support services.

3 (3) Readjustment counseling services described  
4 in section 1712A of title 38, United States Code.

5 (4) Other Mental health services.

6 (b) PROVISION OF CERTAIN SERVICES.—In providing  
7 services described in paragraphs (3) and (4) of subsection  
8 (a) under the pilot program to veterans who reside in rural  
9 areas and do not have adequate access through the De-  
10 partment of Veterans Affairs to the services described in  
11 such paragraphs, the Secretary shall, acting through the  
12 Office of Rural Health, provide such services as follows:

13 (1) Through community health centers under  
14 contracts or other agreements for the provision of  
15 such services that are entered into for purposes of  
16 the pilot program.

17 (2) Through the Indian Health Service pursu-  
18 ant to a memorandum of understanding entered into  
19 by the Secretary of Veterans Affairs and the Sec-  
20 retary of Health and Human Services for purposes  
21 of the pilot program.

22 (c) DURATION.—The pilot program shall be carried  
23 out during the three-year period beginning on the date of  
24 the commencement of the pilot program.

25 (d) PROGRAM LOCATIONS.—

1           (1) ~~IN GENERAL.~~—The pilot program shall be  
2 carried out in at least two Veterans Integrated Serv-  
3 ice Networks (VISN) selected by the Secretary for  
4 purposes of the pilot program.

5           (2) ~~RURAL GEOGRAPHIC LOCATIONS.~~—At least  
6 two of the locations selected shall be in rural geo-  
7 graphic locations that lack access to comprehensive  
8 mental health services through the Department of  
9 Veterans Affairs.

10          (c) ~~PARTICIPATION IN PROGRAM.~~—Each community  
11 mental health center or facility of the Indian Health Serv-  
12 ice participating in the pilot program under subsection (b)  
13 shall—

14           (1) provide the services described in paragraphs  
15 (3) and (4) of subsection (a) to eligible veterans, in-  
16 cluding, to the extent practicable, through the utili-  
17 zation of telehealth services for the provision of such  
18 services;

19           (2) utilize best practices and technologies; and

20           (3) meet such other requirements as the Sec-  
21 retary shall require.

22          (f) ~~COMPLIANCE WITH DEPARTMENT PROTOCOLS.~~—  
23 Each community mental health center or facility of the  
24 Indian Health Service participating in the pilot program  
25 under subsection (b) shall comply with applicable protocols



1 of the Department before incurring any liability on behalf  
2 of the Department for the provision of services as part  
3 of the pilot program.

4 (g) PROVISION OF CLINICAL INFORMATION.—Each  
5 community mental health center or facility of the Indian  
6 Health Service participating in the pilot program under  
7 subsection (b) shall provide the Secretary with such clin-  
8 ical information on each veteran for whom such health  
9 center or facility provides mental health services under the  
10 pilot program as the Secretary shall require.

11 (h) TRAINING.—

12 (1) TRAINING OF VETERANS.—As part of the  
13 pilot program, the Secretary shall carry out a na-  
14 tional program of training for veterans described in  
15 subsection (a) to provide the services described in  
16 paragraphs (1) and (2) of such subsection.

17 (2) TRAINING OF CLINICIANS.—

18 (A) IN GENERAL.—The Secretary shall  
19 conduct a training program for clinicians of  
20 community mental health centers or Indian  
21 Health Service facilities participating in the  
22 pilot program under subsection (b) to ensure  
23 that such clinicians can provide the services de-  
24 scribed in paragraphs (3) and (4) of subsection  
25 (a) in a manner that accounts for factors that

1 are unique to the experiences of veterans who  
2 served on active duty in Operation Iraqi Free-  
3 dom or Operation Enduring Freedom (including  
4 their combat and military training experiences).

5 (B) PARTICIPATION IN TRAINING.—Each  
6 community mental health center or facility of  
7 the Indian Health Service participating in the  
8 pilot program under subsection (b) shall partici-  
9 pate in the training program conducted pursu-  
10 ant to subparagraph (A).

11 (i) ANNUAL REPORTS.—Each community mental  
12 health center or facility of the Indian Health Service par-  
13 ticipating in the pilot program under subsection (b) shall  
14 submit to the Secretary on an annual basis a report con-  
15 taining, with respect to the provision of services under  
16 subsection (b) and for the last full calendar year ending  
17 before the submission of such report—

18 (1) the number of—

19 (A) veterans served; and

20 (B) courses of treatment provided; and

21 (2) demographic information for such services;  
22 diagnoses; and courses of treatment.

23 (j) DEFINITIONS.—In this section:

24 (1) The term “community mental health cen-  
25 ter” has the meaning given such term in section

1 410.2 of title 42, Code of Federal Regulations (as  
 2 in effect on the day before the date of the enactment  
 3 of this Act).

4 (2) The term “eligible veteran” means a vet-  
 5 eran in need of mental health services who—

6 (A) is enrolled in the Department of Vet-  
 7 erans Affairs health care system; and

8 (B) has received a referral from a health  
 9 professional of the Veterans Health Administra-  
 10 tion to a community mental health center or to  
 11 a facility of the Indian Health Service for pur-  
 12 poses of the pilot program.

13 (3) The term “Indian Health Service” means  
 14 the organization established by section 601(a) of the  
 15 Indian Health Care Improvement Act (25 U.S.C.  
 16 1661(a)).

17 (k) AUTHORIZATION OF APPROPRIATIONS.—There is  
 18 authorized to be appropriated such sums as may be nec-  
 19 essary to carry out the provisions of this section.

## 20 **TITLE III—RESEARCH**

### 21 **SEC. 301. RESEARCH PROGRAM ON COMORBID POST-TRAU- 22 MATIC STRESS DISORDER AND SUBSTANCE 23 USE DISORDERS.**

24 (a) PROGRAM REQUIRED.—The Secretary of Vet-  
 25 erans Affairs shall carry out a program of research into

1 comorbid post-traumatic stress disorder (PTSD) and sub-  
2 stance use disorder.

3 (b) DISCHARGE THROUGH NATIONAL CENTER FOR  
4 POSTTRAUMATIC STRESS DISORDER.—The research pro-  
5 gram required by subsection (a) shall be carried out and  
6 overseen by the National Center for Posttraumatic Stress  
7 Disorder. In carrying out the program, the Center shall—

8 (1) develop protocols and goals with respect to  
9 research under the program; and

10 (2) coordinate research, data collection, and  
11 data dissemination under the program.

12 (c) RESEARCH.—The program of research required  
13 by subsection (a) shall address the following:

14 (1) Comorbid post-traumatic stress disorder  
15 and substance use disorder.

16 (2) The systematic integration of treatment for  
17 post-traumatic stress disorder with treatment for  
18 substance use disorder.

19 (3) The development of protocols to evaluate  
20 care of veterans with comorbid post-traumatic stress  
21 disorder and substance use disorder and to facilitate  
22 cumulative clinical progress of such veterans over  
23 time.

24 (d) FUNDING.—

1           (1) AUTHORIZATION OF APPROPRIATIONS.—  
2           There is authorized to be appropriated for the De-  
3           partment of Veterans Affairs for each of fiscal years  
4           2008 through 2011, \$2,000,000 to carry out this  
5           section.

6           (2) AVAILABILITY.—Amounts authorized to be  
7           appropriated by paragraph (1) shall be made avail-  
8           able to the National Center on Posttraumatic Stress  
9           Disorder for the purpose specified in that para-  
10          graph.

11          (3) SUPPLEMENT NOT SUPPLANT.—Any  
12          amount made available to the National Center on  
13          Posttraumatic Stress Disorder for a fiscal year  
14          under paragraph (2) is in addition to any other  
15          amounts made available to the National Center on  
16          Posttraumatic Stress Disorder for such year under  
17          any other provision of law.

18 **SEC. 302. EXTENSION OF AUTHORIZATION FOR SPECIAL**  
19                                   **COMMITTEE ON POST-TRAUMATIC STRESS**  
20                                   **DISORDER.**

21          Section 110(e)(2) of the Veterans' Health Care Act  
22          of 1984 (38 U.S.C. 1712A note) is amended by striking  
23          “through 2008” and inserting “through 2012”.

1           **TITLE IV—ASSISTANCE FOR**  
2                   **FAMILIES OF VETERANS**

3   **SEC. 401. CLARIFICATION OF AUTHORITY OF SECRETARY**  
4                   **OF VETERANS AFFAIRS TO PROVIDE MENTAL**  
5                   **HEALTH SERVICES TO FAMILIES OF VET-**  
6                   **ERANS.**

7           (a) **IN GENERAL.**—Section 1701(5)(B) of title 38,  
8 United States Code, is amended—

9                   (1) by inserting “marriage and family coun-  
10                   seling,” after “professional counseling;” and

11                   (2) by striking “as may be essential to” and in-  
12                   serting “as the Secretary considers appropriate for”.

13           (b) **LOCATION.**—Paragraph (5) of section 1701 of  
14 title 38, United States Code, shall not be construed to pre-  
15 vent the Secretary of Veterans Affairs from providing  
16 services described in subparagraph (B) of such paragraph  
17 to individuals described in such subparagraph in Readjust-  
18 ment Counseling Centers, Department of Veterans Affairs  
19 medical centers, community-based outpatient clinics, or in  
20 such other facilities of the Department of Veterans Affairs  
21 as the Secretary considers necessary.

1 **SEC. 402. PILOT PROGRAM ON PROVISION OF READJUST-**  
 2 **MENT AND TRANSITION ASSISTANCE TO VET-**  
 3 **ERANS AND THEIR FAMILIES IN COOPERA-**  
 4 **TION WITH VET CENTERS.**

5 (a) **PILOT PROGRAM.**—The Secretary of Veterans Af-  
 6 fairs shall carry out, through a non-Department of Vet-  
 7 erans Affairs entity, a pilot program to assess the  
 8 feasibility and advisability of providing readjustment and  
 9 transition assistance described in subsection (b) to vet-  
 10 erans and their families in cooperation with centers under  
 11 section 1712A of title 38, United States Code (commonly  
 12 referred to as “Vet Centers”).

13 (b) **READJUSTMENT AND TRANSITION ASSIST-**  
 14 **ANCE.**—Readjustment and transition assistance described  
 15 in this subsection is assistance as follows:

16 (1) Readjustment and transition assistance that  
 17 is preemptive, proactive, and principle-centered.

18 (2) Assistance and training for veterans and  
 19 their families in coping with the challenges associ-  
 20 ated with making the transition from military to ei-  
 21 vilian life.

22 (c) **NON-DEPARTMENT OF VETERANS AFFAIRS EN-**  
 23 **TITY.**—

24 (1) **IN GENERAL.**—The Secretary shall carry  
 25 out the pilot program through any for-profit or non-  
 26 profit organization selected by the Secretary for pur-

1 poses of the pilot program that has demonstrated  
2 expertise and experience in the provision of assist-  
3 ance and training described in subsection (b).

4 (2) CONTRACT OR AGREEMENT.—The Secretary  
5 shall carry out the pilot program through a non-De-  
6 partment entity described in paragraph (1) pursuant  
7 to a contract or other agreement entered into by the  
8 Secretary and the entity for purposes of the pilot  
9 program.

10 (d) DURATION OF PILOT PROGRAM.—The pilot pro-  
11 gram shall be carried out during the three-year period be-  
12 ginning on the date of the enactment of this Act, and may  
13 be carried out for additional one-year periods thereafter.

14 (e) LOCATION OF PILOT PROGRAM.—

15 (1) IN GENERAL.—The Secretary of Veterans  
16 Affairs shall provide assistance under the pilot pro-  
17 gram in cooperation with 10 centers described in  
18 subsection (a) designated by the Secretary for pur-  
19 poses of the pilot program.

20 (2) DESIGNATIONS.—In designating centers de-  
21 scribed in subsection (a) for purposes of the pilot  
22 program, the Secretary shall designate centers so as  
23 to provide a balanced geographical representation of  
24 such centers throughout the United States, including  
25 the District of Columbia, the Commonwealth of



1 Puerto Rico, tribal lands, and other territories and  
2 possessions of the United States.

3 (f) PARTICIPATION OF CENTERS.—A center de-  
4 scribed in subsection (a) that is designated under sub-  
5 section (e) for participation in the pilot program shall par-  
6 ticipate in the pilot program by promoting awareness of  
7 the assistance and training available to veterans and their  
8 families through—

9 (1) the facilities and other resources of such  
10 center;

11 (2) the non-Department of Veterans Affairs en-  
12 tity selected pursuant to subsection (e); and

13 (3) other appropriate mechanisms.

14 (g) ADDITIONAL SUPPORT.—In carrying out the pilot  
15 program, the Secretary of Veterans Affairs may enter into  
16 contracts or other agreements, in addition to the contract  
17 or agreement described in subsection (e), with such other  
18 non-Department of Veterans Affairs entities meeting the  
19 requirements of subsection (e) as the Secretary considers  
20 appropriate for purposes of the pilot program.

21 (h) REPORT ON PILOT PROGRAM.—

22 (1) REPORT REQUIRED.—Not later than six  
23 months after the date of the conclusion of the pilot  
24 program, the Secretary shall submit to the congress-

1 sional veterans affairs committees a report on the  
2 pilot program.

3 ~~(2) ELEMENTS.—~~Each report under paragraph  
4 ~~(1)~~ shall include the following:

5 (A) A description of the activities under  
6 the pilot program as of the date of such report,  
7 including the number of veterans and families  
8 provided assistance under the pilot program  
9 and the scope and nature of the assistance so  
10 provided.

11 (B) A current assessment of the effective-  
12 ness of the pilot program.

13 (C) Any recommendations that the Sec-  
14 retary considers appropriate for the extension  
15 or expansion of the pilot program.

16 ~~(3) CONGRESSIONAL VETERANS AFFAIRS COM-~~  
17 ~~MITTEES DEFINED.—~~In this subsection, the term  
18 “congressional veterans affairs committees”  
19 means—

20 (A) the Committees on Veterans’ Affairs  
21 and Appropriations of the Senate; and

22 (B) the Committees on Veterans’ Affairs  
23 and Appropriations of the House of Representa-  
24 tives.

25 (i) AUTHORIZATION OF APPROPRIATIONS.—

1           (1) ~~IN GENERAL.~~—There is authorized to be  
 2           appropriated for the Department of Veterans Affairs  
 3           for each of fiscal years 2008 through 2010  
 4           \$1,000,000 to carry out this section.

5           (2) ~~AVAILABILITY.~~—Amounts authorized to be  
 6           appropriated by paragraph (1) shall remain available  
 7           until expended.

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

9           (a) *SHORT TITLE.*—*This Act may be cited as the “Vet-*  
 10          *erans Mental Health Improvements Act of 2008”.*

11          (b) *TABLE OF CONTENTS.*—*The table of contents for*  
 12          *this Act is as follows:*

*Sec. 1. Short title; table of contents.*

*TITLE I—SUBSTANCE USE DISORDERS AND MENTAL HEALTH  
 CARE*

*Sec. 101. Findings on substance use disorders and mental health.*

*Sec. 102. Expansion of substance use disorder treatment services provided by De-  
 partment of Veterans Affairs.*

*Sec. 103. Care for veterans with mental health and substance use disorders.*

*Sec. 104. National centers of excellence on post-traumatic stress disorder and sub-  
 stance use disorders.*

*Sec. 105. Report on residential mental health care facilities of the Veterans  
 Health Administration.*

*Sec. 106. Tribute to Justin Bailey.*

*TITLE II—MENTAL HEALTH ACCESSIBILITY ENHANCEMENTS*

*Sec. 201. Pilot program on peer outreach and support for veterans and use of  
 community mental health centers and Indian Health Service fa-  
 cilities.*

*TITLE III—RESEARCH*

*Sec. 301. Research program on comorbid post-traumatic stress disorder and sub-  
 stance use disorders.*

*Sec. 302. Extension of authorization for Special Committee on Post-Traumatic  
 Stress Disorder.*

## TITLE IV—ASSISTANCE FOR FAMILIES OF VETERANS

*Sec. 401. Clarification of authority of Secretary of Veterans Affairs to provide mental health services to families of veterans.*

*Sec. 402. Pilot program on provision of readjustment and transition assistance to veterans and their families in cooperation with Vet Centers.*

1 **TITLE I—SUBSTANCE USE DIS-**  
 2 **ORDERS AND MENTAL**  
 3 **HEALTH CARE**

4 **SEC. 101. FINDINGS ON SUBSTANCE USE DISORDERS AND**  
 5 **MENTAL HEALTH.**

6 *Congress makes the following findings:*

7 (1) *More than 1,500,000 members of the Armed*  
 8 *Forces have been deployed in Operation Iraqi Free-*  
 9 *dom and Operation Enduring Freedom. The 2005 De-*  
 10 *partment of Defense Survey of Health Related Behav-*  
 11 *iors Among Active Duty Personnel reports that 23*  
 12 *percent of members of the Armed Forces on active*  
 13 *duty acknowledge a significant problem with alcohol*  
 14 *use, with similar rates of acknowledged problems with*  
 15 *alcohol use among members of the National Guard.*

16 (2) *The effects of substance abuse are wide rang-*  
 17 *ing, including significantly increased risk of suicide,*  
 18 *exacerbation of mental and physical health disorders,*  
 19 *breakdown of family support, and increased risk of*  
 20 *unemployment and homelessness.*

21 (3) *While veterans suffering from mental health*  
 22 *conditions, chronic physical illness, and polytrauma*

1        *may be at increased risk for development of a sub-*  
2        *stance use disorder, treatment for these veterans is*  
3        *complicated by the need to address adequately the*  
4        *physical and mental symptoms associated with these*  
5        *conditions through appropriate medical intervention.*

6            *(4) While the Veterans Health Administration*  
7        *has dramatically increased health services for vet-*  
8        *erans from 1996 through 2006, the number of veterans*  
9        *receiving specialized substance abuse treatment serv-*  
10       *ices decreased 18 percent during that time. No com-*  
11       *parable decrease in the national rate of substance*  
12       *abuse has been observed during that time.*

13           *(5) While some facilities of the Veterans Health*  
14       *Administration provide exemplary substance use dis-*  
15       *order treatment services, the availability of such*  
16       *treatment services throughout the health care system*  
17       *of the Veterans Health Administration is inconsistent.*

18           *(6) According to the Government Accountability*  
19       *Office, the Department of Veterans Affairs signifi-*  
20       *cantly reduced its substance use disorder treatment*  
21       *and rehabilitation services between 1996 and 2006,*  
22       *and has made little progress since in restoring these*  
23       *services to their pre-1996 levels.*

1 **SEC. 102. EXPANSION OF SUBSTANCE USE DISORDER**  
2 **TREATMENT SERVICES PROVIDED BY DE-**  
3 **PARTMENT OF VETERANS AFFAIRS.**

4 (a) *IN GENERAL.*—*The Secretary of Veterans Affairs*  
5 *shall ensure the provision of such services and treatment*  
6 *to each veteran enrolled in the health care system of the*  
7 *Department of Veterans Affairs who is in need of services*  
8 *and treatments for a substance use disorder as follows:*

9 (1) *Short term motivational counseling services.*

10 (2) *Intensive outpatient or residential care serv-*  
11 *ices.*

12 (3) *Relapse prevention services.*

13 (4) *Ongoing aftercare and outpatient counseling*  
14 *services.*

15 (5) *Opiate substitution therapy services.*

16 (6) *Pharmacological treatments aimed at reduc-*  
17 *ing craving for drugs and alcohol.*

18 (7) *Detoxification and stabilization services.*

19 (8) *Such other services as the Secretary considers*  
20 *appropriate.*

21 (b) *PROVISION OF SERVICES.*—*The services and treat-*  
22 *ments described in subsection (a) may be provided to a vet-*  
23 *eran described in such subsection—*

24 (1) *at Department of Veterans Affairs medical*  
25 *centers or clinics;*

1           (2) *by referral to other facilities of the Depart-*  
2           *ment that are accessible to such veteran; or*

3           (3) *by contract or fee-form service payments with*  
4           *community-based organizations for the provision of*  
5           *such services and treatments.*

6           (c) *ALTERNATIVES IN CASE OF SERVICES DENIED*  
7           *DUE TO CLINICAL NECESSITY.—If the Secretary denies the*  
8           *provision to a veteran of services or treatment for a sub-*  
9           *stance use disorder due to clinical necessity, the Secretary*  
10          *shall provide the veteran such other services or treatments*  
11          *as are medically appropriate.*

12          (d) *REPORT.—Not later than one year after the date*  
13          *of the enactment of this Act, the Secretary shall submit to*  
14          *the Committee on Veterans' Affairs of the Senate and the*  
15          *Committee on Veterans' Affairs of the House of Representa-*  
16          *tives a report setting forth, for each medical facility of the*  
17          *Department, the availability of the following:*

18               (1) *Medically supervised withdrawal manage-*  
19               *ment.*

20               (2) *Programs for treatment of alcohol and other*  
21               *substance use disorders that are—*

22                       (A) *integrated with primary health care*  
23                       *services; or*

24                       (B) *available as specialty substance use dis-*  
25                       *order services.*

1           (3) *Specialty programs for the treatment of post-*  
2           *traumatic stress disorder.*

3           (4) *Programs to treat veterans who are diag-*  
4           *nosed with both a substance use disorder and a men-*  
5           *tal health disorder.*

6   **SEC. 103. CARE FOR VETERANS WITH MENTAL HEALTH AND**  
7                                   **SUBSTANCE USE DISORDERS.**

8           (a) *IN GENERAL.—If the Secretary of Veterans Affairs*  
9           *provides a veteran inpatient or outpatient care for a sub-*  
10          *stance use disorder and a comorbid mental health disorder,*  
11          *the Secretary shall ensure that treatment for such disorders*  
12          *is provided concurrently—*

13                  (1) *through a service provided by a clinician or*  
14          *health professional who has training and expertise in*  
15          *treatment of substance use disorders and mental*  
16          *health disorders;*

17                  (2) *by separate substance use disorder and men-*  
18          *tal health disorder treatment services when there is*  
19          *appropriate coordination, collaboration, and care*  
20          *management between such treatment services; or*

21                  (3) *by a team of clinicians with appropriate ex-*  
22          *pertise.*

23          (b) *TEAM OF CLINICIANS WITH APPROPRIATE EXPER-*  
24          *TISE DEFINED.—In this section, the term “team of clini-*



1 *cians with appropriate expertise” means a team consisting*  
 2 *of the following:*

3           (1) *Clinicians and health professionals with ex-*  
 4 *pertise in treatment of substance use disorders and*  
 5 *mental health disorders who act in coordination and*  
 6 *collaboration with each other.*

7           (2) *Such other professionals as the Secretary*  
 8 *considers appropriate for the provision of treatment*  
 9 *to veterans for substance use and mental health dis-*  
 10 *orders.*

11 **SEC. 104. NATIONAL CENTERS OF EXCELLENCE ON POST-**  
 12 **TRAUMATIC STRESS DISORDER AND SUB-**  
 13 **STANCE USE DISORDERS.**

14           (a) *IN GENERAL.*—*Subchapter II of chapter 73 of title*  
 15 *38, United States Code, is amended by adding at the end*  
 16 *the following new section:*

17 **“§ 7330A. National centers of excellence on post-trau-**  
 18 **matic stress disorder and substance use**  
 19 **disorders**

20           “(a) *ESTABLISHMENT OF CENTERS.*—(1) *The Sec-*  
 21 *retary shall establish not less than six national centers of*  
 22 *excellence on post-traumatic stress disorder and substance*  
 23 *use disorders.*

24           “(2) *The purpose of the centers established under this*  
 25 *section is to serve as Department facilities that provide*

1 *comprehensive inpatient or residential treatment and recov-*  
 2 *ery services for veterans diagnosed with both post-traumatic*  
 3 *stress disorder and a substance use disorder.*

4       “(b) *LOCATION.—Each center established in accord-*  
 5 *ance with subsection (a) shall be located at a medical center*  
 6 *of the Department that—*

7               “(1) *provides specialized care for veterans with*  
 8 *post-traumatic stress disorder and a substance use*  
 9 *disorder; and*

10              “(2) *is geographically situated in an area with*  
 11 *a high number of veterans that have been diagnosed*  
 12 *with both post-traumatic stress disorder and sub-*  
 13 *stance use disorder.*

14       “(c) *PROCESS OF REFERRAL AND TRANSITION TO*  
 15 *STEP DOWN DIAGNOSIS REHABILITATION TREATMENT*  
 16 *PROGRAMS.—The Secretary shall establish a process to refer*  
 17 *and aid the transition of veterans from the national centers*  
 18 *of excellence on post-traumatic stress disorder and substance*  
 19 *use disorders established pursuant to subsection (a) to pro-*  
 20 *grams that provide step down rehabilitation treatment for*  
 21 *individuals with post-traumatic stress disorder and sub-*  
 22 *stance use disorders.*

23       “(d) *COLLABORATION WITH THE NATIONAL CENTER*  
 24 *FOR POST-TRAUMATIC STRESS DISORDER.—The centers es-*  
 25 *tablished under this section shall collaborate in the research*

1 of the National Center for Post-Traumatic Stress Dis-  
2 order.”.

3 (b) *CLERICAL AMENDMENT.*—*The table of sections at*  
4 *the beginning of chapter 73 of such title is amended by in-*  
5 *serting after the item relating to section 7330 the following*  
6 *new item:*

“7330A. *National centers of excellence on post-traumatic stress disorder and sub-*  
*stance use disorders.*”.

7 **SEC. 105. REPORT ON RESIDENTIAL MENTAL HEALTH CARE**  
8 **FACILITIES OF THE VETERANS HEALTH AD-**  
9 **MINISTRATION.**

10 (a) *REVIEWS.*—*The Secretary of Veterans Affairs*  
11 *shall, acting through the Office of Mental Health Services*  
12 *of the Department of Veterans Affairs—*

13 (1) *not later than six months after the date of*  
14 *the enactment of this Act, conduct a review of all resi-*  
15 *dential mental health care facilities, including domi-*  
16 *ciliary facilities, of the Veterans Health Administra-*  
17 *tion; and*

18 (2) *not later than two years after the date of the*  
19 *completion of the review required by paragraph (1),*  
20 *conduct a follow-up review of such facilities to evalu-*  
21 *ate any improvements made or problems remaining*  
22 *since the review under paragraph (1) was completed.*

23 (b) *REPORT.*—*Not later than 90 days after the comple-*  
24 *tion of the review required by subsection (a)(1), the Sec-*

1 *retary shall submit to the Committee on Veterans' Affairs*  
2 *of the Senate and the Committee on Veterans' Affairs of*  
3 *the House of Representatives a report on such review. The*  
4 *report shall include the following:*

5           (1) *A description of the availability of care in*  
6 *residential mental health care facilities in each Vet-*  
7 *erans Integrated Service Network (VISN).*

8           (2) *An assessment of the supervision and support*  
9 *provided in the residential mental health care facili-*  
10 *ties of the Veterans Health Administration.*

11           (3) *The ratio of staff members at each residential*  
12 *mental health care facility to patients at such facil-*  
13 *ity.*

14           (4) *An assessment of the appropriateness of rules*  
15 *and procedures for the prescription and administra-*  
16 *tion of medications to patients in such residential*  
17 *mental health care facilities.*

18           (5) *A description of the protocols at each residen-*  
19 *tial mental health care facility for handling missed*  
20 *appointments.*

21           (6) *Any recommendations the Secretary con-*  
22 *siders appropriate for improvements to such residen-*  
23 *tial mental health care facilities and the care pro-*  
24 *vided in such facilities.*

1 **SEC. 106. TRIBUTE TO JUSTIN BAILEY.**

2 *This title is enacted in tribute to Justin Bailey, who,*  
3 *after returning to the United States from service as a mem-*  
4 *ber of the Armed Forces in Operation Iraqi Freedom, died*  
5 *in a domiciliary facility of the Department of Veterans Af-*  
6 *fairs while receiving care for post-traumatic stress disorder*  
7 *and a substance use disorder.*

8 **TITLE II—MENTAL HEALTH**  
9 **ACCESSIBILITY ENHANCEMENTS**

10 **SEC. 201. PILOT PROGRAM ON PEER OUTREACH AND SUP-**  
11 **PORT FOR VETERANS AND USE OF COMMU-**  
12 **NITY MENTAL HEALTH CENTERS AND INDIAN**  
13 **HEALTH SERVICE FACILITIES.**

14 *(a) PILOT PROGRAM REQUIRED.—Commencing not*  
15 *later than 180 days after the date of the enactment of this*  
16 *Act, the Secretary of Veterans Affairs shall carry out a pilot*  
17 *program to assess the feasibility and advisability of pro-*  
18 *viding to veterans of Operation Iraqi Freedom and Oper-*  
19 *ation Enduring Freedom, and, in particular, veterans who*  
20 *served in such operations as a member of the National*  
21 *Guard or Reserve, the following:*

22 *(1) Peer outreach services.*

23 *(2) Peer support services provided by licensed*  
24 *providers of peer support services or veterans who*  
25 *have personal experience with mental illness.*

1           (3) *Readjustment counseling services described in*  
2           *section 1712A of title 38, United States Code.*

3           (4) *Other mental health services.*

4           (b) *PROVISION OF CERTAIN SERVICES.—In providing*  
5           *services described in paragraphs (3) and (4) of subsection*  
6           *(a) under the pilot program to veterans who reside in rural*  
7           *areas and do not have adequate access through the Depart-*  
8           *ment of Veterans Affairs to the services described in such*  
9           *paragraphs, the Secretary shall, acting through the Office*  
10          *of Mental Health Services and the Office of Rural Health,*  
11          *provide such services as follows:*

12           (1) *Through community mental health centers or*  
13           *other entities under contracts or other agreements for*  
14           *the provision of such services that are entered into for*  
15           *purposes of the pilot program.*

16           (2) *Through the Indian Health Service pursuant*  
17           *to a memorandum of understanding entered into by*  
18           *the Secretary of Veterans Affairs and the Secretary of*  
19           *Health and Human Services for purposes of the pilot*  
20           *program.*

21           (c) *DURATION.—The pilot program shall be carried*  
22           *out during the three-year period beginning on the date of*  
23           *the commencement of the pilot program.*

24           (d) *PROGRAM LOCATIONS.—*

1           (1) *IN GENERAL.*—*The pilot program shall be*  
2           *carried out within areas selected by the Secretary for*  
3           *the purpose of the pilot program in at least two Vet-*  
4           *erans Integrated Service Networks (VISN).*

5           (2) *RURAL GEOGRAPHIC LOCATIONS.*—*The loca-*  
6           *tions selected shall be in rural geographic locations*  
7           *that, as determined by the Secretary, lack access to*  
8           *comprehensive mental health services through the De-*  
9           *partment of Veterans Affairs.*

10          (3) *QUALIFIED PROVIDERS.*—*In selecting loca-*  
11          *tions for the pilot program, the Secretary shall select*  
12          *locations in which an adequate number of licensed*  
13          *mental health care providers with credentials equiva-*  
14          *lent to those of Department mental health care pro-*  
15          *viders are available in Indian Health Service facili-*  
16          *ties, community mental health centers, and other enti-*  
17          *ties are available for participation in the pilot pro-*  
18          *gram.*

19          (e) *PARTICIPATION IN PROGRAM.*—*Each community*  
20          *mental health center, facility of the Indian Health Service,*  
21          *or other entity participating in the pilot program under*  
22          *subsection (b) shall—*

23                 (1) *provide the services described in paragraphs*  
24                 (3) and (4) of subsection (a) to eligible veterans, in-

25                 *cluding, to the extent practicable, telehealth services*

1       *that link the center or facility with Department of*  
2       *Veterans Affairs clinicians;*

3             (2) *use the clinical practice guidelines of the Vet-*  
4       *erans Health Administration or the Department of*  
5       *Defense in the provision of such services; and*

6             (3) *meet such other requirements as the Sec-*  
7       *retary shall require.*

8       (f) *COMPLIANCE WITH DEPARTMENT PROTOCOLS.—*  
9       *Each community mental health center, facility of the In-*  
10      *dian Health Service, or other entity participating in the*  
11      *pilot program under subsection (b) shall comply with—*

12            (1) *applicable protocols of the Department before*  
13      *incurring any liability on behalf of the Department*  
14      *for the provision of services as part of the pilot pro-*  
15      *gram; and*

16            (2) *access and quality standards of the Depart-*  
17      *ment relevant to the provision of services as part of*  
18      *the pilot program.*

19       (g) *PROVISION OF CLINICAL INFORMATION.—Each*  
20      *community mental health center, facility of the Indian*  
21      *Health Service, or other entity participating in the pilot*  
22      *program under subsection (b) shall, in a timely fashion,*  
23      *provide the Secretary with such clinical information on*  
24      *each veteran for whom such health center or facility pro-*



1 *vides mental health services under the pilot program as the*  
2 *Secretary shall require.*

3 *(h) TRAINING.—*

4 *(1) TRAINING OF VETERANS.—As part of the*  
5 *pilot program, the Secretary shall carry out a pro-*  
6 *gram of training for veterans described in subsection*  
7 *(a) to provide the services described in paragraphs (1)*  
8 *and (2) of such subsection.*

9 *(2) TRAINING OF CLINICIANS.—*

10 *(A) IN GENERAL.—The Secretary shall con-*  
11 *duct a training program for clinicians of com-*  
12 *munity mental health centers, Indian Health*  
13 *Service facilities, or other entities participating*  
14 *in the pilot program under subsection (b) to en-*  
15 *sure that such clinicians can provide the services*  
16 *described in paragraphs (3) and (4) of subsection*  
17 *(a) in a manner that accounts for factors that*  
18 *are unique to the experiences of veterans who*  
19 *served on active duty in Operation Iraqi Free-*  
20 *dom or Operation Enduring Freedom (including*  
21 *their combat and military training experiences).*

22 *(B) PARTICIPATION IN TRAINING.—Per-*  
23 *sonnel of each community mental health center,*  
24 *facility of the Indian Health Service, or other*  
25 *entity participating in the pilot program under*

1            *subsection (b) shall participate in the training*  
2            *program conducted pursuant to subparagraph*  
3            *(A).*

4            *(i) ANNUAL REPORTS.—Each community mental*  
5            *health center, facility of the Indian Health Service, or other*  
6            *entity participating in the pilot program under subsection*  
7            *(b) shall submit to the Secretary on an annual basis a re-*  
8            *port containing, with respect to the provision of services*  
9            *under subsection (b) and for the last full calendar year end-*  
10           *ing before the submission of such report—*

11                 *(1) the number of—*

12                         *(A) veterans served; and*

13                         *(B) courses of treatment provided; and*

14                 *(2) demographic information for such services,*  
15                 *diagnoses, and courses of treatment.*

16            *(j) PROGRAM EVALUATION.—*

17                 *(1) IN GENERAL.—The Secretary shall, through*  
18                 *Department of Veterans Affairs Mental Health Serv-*  
19                 *ices investigators and in collaboration with relevant*  
20                 *program offices of the Department, design and imple-*  
21                 *ment a strategy for evaluating the pilot program.*

22                 *(2) ELEMENTS.—The strategy implemented*  
23                 *under paragraph (1) shall assess the impact that con-*  
24                 *tracting with community mental health centers, the*  
25                 *Indian Health Service, and other entities partici-*

1        *pating in the pilot program under subsection (b) has*  
2        *on the following:*

3                *(A) Access to mental health care by veterans*  
4                *in need of such care.*

5                *(B) The use of telehealth services by vet-*  
6                *erans for mental health care needs.*

7                *(C) The quality of mental health care and*  
8                *substance use disorder treatment services pro-*  
9                *vided to veterans in need of such care and serv-*  
10                *ices.*

11                *(D) The coordination of mental health care*  
12                *and other medical services provided to veterans.*

13        *(k) DEFINITIONS.—In this section:*

14                *(1) The term “community mental health center”*  
15                *has the meaning given such term in section 410.2 of*  
16                *title 42, Code of Federal Regulations (as in effect on*  
17                *the day before the date of the enactment of this Act).*

18                *(2) The term “eligible veteran” means a veteran*  
19                *in need of mental health services who—*

20                *(A) is enrolled in the Department of Vet-*  
21                *erans Affairs health care system; and*

22                *(B) has received a referral from a health*  
23                *professional of the Veterans Health Administra-*  
24                *tion to a community mental health center, a fa-*

1           *cility of the Indian Health Service, or other enti-*  
 2           *ty for purposes of the pilot program.*

3           *(3) The term “Indian Health Service” means the*  
 4           *organization established by section 601(a) of the In-*  
 5           *dian Health Care Improvement Act (25 U.S.C.*  
 6           *1661(a)).*

7           *(l) AUTHORIZATION OF APPROPRIATIONS.—There is*  
 8           *authorized to be appropriated such sums as may be nec-*  
 9           *essary to carry out the provisions of this section.*

## 10                                   **TITLE III—RESEARCH**

### 11   **SEC. 301. RESEARCH PROGRAM ON COMORBID POST-TRAU-** 12                                   **MATIC STRESS DISORDER AND SUBSTANCE** 13                                   **USE DISORDERS.**

14           *(a) PROGRAM REQUIRED.—The Secretary of Veterans*  
 15           *Affairs shall carry out a program of research into comorbid*  
 16           *post-traumatic stress disorder (PTSD) and substance use*  
 17           *disorder.*

18           *(b) DISCHARGE THROUGH NATIONAL CENTER FOR*  
 19           *POSTTRAUMATIC STRESS DISORDER.—The research pro-*  
 20           *gram required by subsection (a) shall be carried out by the*  
 21           *National Center for Posttraumatic Stress Disorder. In car-*  
 22           *rying out the program, the Center shall—*

23                           *(1) develop protocols and goals with respect to*  
 24                           *research under the program; and*

1           (2) *coordinate research, data collection, and data*  
2           *dissemination under the program.*

3           (c) *RESEARCH.—The program of research required by*  
4           *subsection (a) shall address the following:*

5           (1) *Comorbid post-traumatic stress disorder and*  
6           *substance use disorder.*

7           (2) *The systematic integration of treatment for*  
8           *post-traumatic stress disorder with treatment for sub-*  
9           *stance use disorder.*

10          (3) *The development of protocols to evaluate care*  
11          *of veterans with comorbid post-traumatic stress dis-*  
12          *order and substance use disorder and to facilitate cu-*  
13          *mulative clinical progress of such veterans over time.*

14          (d) *FUNDING.—*

15          (1) *AUTHORIZATION OF APPROPRIATIONS.—*  
16          *There is authorized to be appropriated for the Depart-*  
17          *ment of Veterans Affairs for each of fiscal years 2008*  
18          *through 2011, \$2,000,000 to carry out this section.*

19          (2) *AVAILABILITY.—Amounts authorized to be*  
20          *appropriated by paragraph (1) shall be made avail-*  
21          *able to the National Center on Posttraumatic Stress*  
22          *Disorder for the purpose specified in that paragraph.*

23          (3) *SUPPLEMENT NOT SUPPLANT.—Any amount*  
24          *made available to the National Center on*  
25          *Posttraumatic Stress Disorder for a fiscal year under*

1 paragraph (2) is in addition to any other amounts  
 2 made available to the National Center on  
 3 Posttraumatic Stress Disorder for such year under  
 4 any other provision of law.

5 **SEC. 302. EXTENSION OF AUTHORIZATION FOR SPECIAL**  
 6 **COMMITTEE ON POST-TRAUMATIC STRESS**  
 7 **DISORDER.**

8 Section 110(e)(2) of the Veterans' Health Care Act of  
 9 1984 (38 U.S.C. 1712A note; Public Law 98-528) is  
 10 amended by striking "through 2008" and inserting  
 11 "through 2012".

12 **TITLE IV—ASSISTANCE FOR**  
 13 **FAMILIES OF VETERANS**

14 **SEC. 401. CLARIFICATION OF AUTHORITY OF SECRETARY**  
 15 **OF VETERANS AFFAIRS TO PROVIDE MENTAL**  
 16 **HEALTH SERVICES TO FAMILIES OF VET-**  
 17 **ERANS.**

18 (a) *IN GENERAL.*—Chapter 17 of title 38, United  
 19 States Code, is amended—

20 (1) in section 1701(5)(B)—

21 (A) by inserting "marriage and family  
 22 counseling," after "professional counseling,"; and

23 (B) by striking "as may be essential to"  
 24 and inserting "as the Secretary considers appro-  
 25 priate for"; and

1           (2) *in subsections (a) and (b) of section 1782, by*  
2           *inserting “marriage and family counseling,” after*  
3           *“professional counseling,”.*

4           **(b) LOCATION.**—*Paragraph (5) of section 1701 of title*  
5 *38, United States Code, shall not be construed to prevent*  
6 *the Secretary of Veterans Affairs from providing services*  
7 *described in subparagraph (B) of such paragraph to indi-*  
8 *viduals described in such subparagraph in centers under*  
9 *section 1712A of such title (commonly referred to as “Vet*  
10 *Centers”), Department of Veterans Affairs medical centers,*  
11 *community-based outpatient clinics, or in such other facili-*  
12 *ties of the Department of Veterans Affairs as the Secretary*  
13 *considers necessary.*

14 **SEC. 402. PILOT PROGRAM ON PROVISION OF READJUST-**  
15                           **MENT AND TRANSITION ASSISTANCE TO VET-**  
16                           **ERANS AND THEIR FAMILIES IN COOPERA-**  
17                           **TION WITH VET CENTERS.**

18           **(a) PILOT PROGRAM.**—*The Secretary of Veterans Af-*  
19 *airs shall carry out, through a non-Department of Veterans*  
20 *Affairs entity, a pilot program to assess the feasibility and*  
21 *advisability of providing readjustment and transition as-*  
22 *sistance described in subsection (b) to veterans and their*  
23 *families in cooperation with centers under section 1712A*  
24 *of title 38, United States Code (commonly referred to as*  
25 *“Vet Centers”).*

1       (b) *READJUSTMENT AND TRANSITION ASSISTANCE.*—  
2 *Readjustment and transition assistance described in this*  
3 *subsection is assistance as follows:*

4           (1) *Readjustment and transition assistance that*  
5 *is preemptive, proactive, and principle-centered.*

6           (2) *Assistance and training for veterans and*  
7 *their families in coping with the challenges associated*  
8 *with making the transition from military to civilian*  
9 *life.*

10       (c) *NON-DEPARTMENT OF VETERANS AFFAIRS ENTI-*  
11 *TY.*—

12           (1) *IN GENERAL.*—*The Secretary shall carry out*  
13 *the pilot program through any for-profit or non-profit*  
14 *organization selected by the Secretary for purposes of*  
15 *the pilot program that has demonstrated expertise*  
16 *and experience in the provision of assistance and*  
17 *training described in subsection (b).*

18           (2) *CONTRACT OR AGREEMENT.*—*The Secretary*  
19 *shall carry out the pilot program through a non-De-*  
20 *partment entity described in paragraph (1) pursuant*  
21 *to a contract or other agreement entered into by the*  
22 *Secretary and the entity for purposes of the pilot pro-*  
23 *gram.*

24       (d) *DURATION OF PILOT PROGRAM.*—*The pilot pro-*  
25 *gram shall be carried out during the three-year period be-*



1 *ginning on the date of the enactment of this Act, and may*  
2 *be carried out for additional one-year periods thereafter.*

3 *(e) LOCATION OF PILOT PROGRAM.—*

4 *(1) IN GENERAL.—The Secretary of Veterans Af-*  
5 *fairs shall provide assistance under the pilot program*  
6 *in cooperation with 10 centers described in subsection*  
7 *(a) designated by the Secretary for purposes of the*  
8 *pilot program.*

9 *(2) DESIGNATIONS.—In designating centers de-*  
10 *scribed in subsection (a) for purposes of the pilot pro-*  
11 *gram, the Secretary shall designate centers so as to*  
12 *provide a balanced geographical representation of*  
13 *such centers throughout the United States, including*  
14 *the District of Columbia, the Commonwealth of Puer-*  
15 *to Rico, tribal lands, and other territories and posses-*  
16 *sions of the United States.*

17 *(f) PARTICIPATION OF CENTERS.—A center described*  
18 *in subsection (a) that is designated under subsection (e) for*  
19 *participation in the pilot program shall participate in the*  
20 *pilot program by promoting awareness of the assistance and*  
21 *training available to veterans and their families through—*

22 *(1) the facilities and other resources of such cen-*  
23 *ter;*

24 *(2) the non-Department of Veterans Affairs enti-*  
25 *ty selected pursuant to subsection (c); and*

1           (3) *other appropriate mechanisms.*

2           (g) *ADDITIONAL SUPPORT.—In carrying out the pilot*  
3 *program, the Secretary of Veterans Affairs may enter into*  
4 *contracts or other agreements, in addition to the contract*  
5 *or agreement described in subsection (c), with such other*  
6 *non-Department of Veterans Affairs entities meeting the re-*  
7 *quirements of subsection (c) as the Secretary considers ap-*  
8 *propriate for purposes of the pilot program.*

9           (h) *REPORT ON PILOT PROGRAM.—*

10           (1) *REPORT REQUIRED.—Not later than six*  
11 *months after the date of the conclusion of the pilot*  
12 *program, the Secretary shall submit to the congress-*  
13 *sional veterans affairs committees a report on the*  
14 *pilot program.*

15           (2) *ELEMENTS.—Each report under paragraph*  
16 *(1) shall include the following:*

17                   (A) *A description of the activities under the*  
18 *pilot program as of the date of such report, in-*  
19 *cluding the number of veterans and families pro-*  
20 *vided assistance under the pilot program and the*  
21 *scope and nature of the assistance so provided.*

22                   (B) *A current assessment of the effectiveness*  
23 *of the pilot program.*

1           (C) *Any recommendations that the Sec-*  
2           *retary considers appropriate for the extension or*  
3           *expansion of the pilot program.*

4           (3) *CONGRESSIONAL VETERANS AFFAIRS COMMIT-*  
5           *TEES DEFINED.—In this subsection, the term “con-*  
6           *gressional veterans affairs committees” means—*

7                   (A) *the Committees on Veterans’ Affairs and*  
8                   *Appropriations of the Senate; and*

9                   (B) *the Committees on Veterans’ Affairs*  
10                  *and Appropriations of the House of Representa-*  
11                  *tives.*

12          (i) *AUTHORIZATION OF APPROPRIATIONS.—*

13                  (1) *IN GENERAL.—There is authorized to be ap-*  
14                  *propriated for the Department of Veterans Affairs for*  
15                  *each of fiscal years 2008 through 2010 \$1,000,000 to*  
16                  *carry out this section.*

17                  (2) *AVAILABILITY.—Amounts authorized to be*  
18                  *appropriated by paragraph (1) shall remain available*  
19                  *until expended.*

Calendar No. 632

110<sup>TH</sup> CONGRESS  
2<sup>D</sup> SESSION

**S. 2162**

[Report No. 110-281]

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## **A BILL**

To improve the treatment and services provided by the Department of Veterans Affairs to veterans with post-traumatic stress disorder and substance use disorders, and for other purposes.

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APRIL 8, 2008

Reported with an amendment