

108TH CONGRESS  
2D SESSION

# H. R. 5244

To improve programs for the identification and treatment of Post-Traumatic Stress Disorder in veterans and members of the Armed Forces, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

OCTOBER 7, 2004

Mr. EVANS (for himself, Mr. FILNER, Mr. GUTIERREZ, Ms. CORRINE BROWN of Florida, Mr. RODRIGUEZ, Mr. MICHAUD, Ms. HOOLEY of Oregon, Mr. STRICKLAND, Mr. UDALL of New Mexico, Mrs. DAVIS of California, Ms. HERSETH, Mr. BAIRD, Mr. KENNEDY of Rhode Island, Mr. EMANUEL, Mr. STENHOLM, Ms. BORDALLO, Mr. LANGEVIN, Mr. FALEOMAVAEGA, Mr. ABERCROMBIE, and Mr. LARSON of Connecticut) introduced the following bill; which was referred to the Committee on Veterans' Affairs, and in addition to the Committee on Armed Services, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To improve programs for the identification and treatment of Post-Traumatic Stress Disorder in veterans and members of the Armed Forces, 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 “Comprehensive Assistance for Veterans Exposed to  
 4 Traumatic Stressors Act of 2004”.

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

Sec. 1. Short title; table of contents.

Sec. 2. Definition.

TITLE I—VETERANS OF PAST DEPLOYMENTS

Sec. 101. Extension of eligibility for readjustment counseling services for Vietnam-era veterans.

TITLE II—MILITARY ISSUES

Sec. 201. Department of Veterans Affairs-Department of Defense Health Care Sharing Incentive Fund.

Sec. 202. Collection of aggregate data from pre- and post-deployment health assessments.

Sec. 203. Telemedicine support for front-line Department of Defense providers.

TITLE III—PREVENTION, EARLY DETECTION, AND TREATMENT  
FOR RETURNING TROOPS

Sec. 301. Study to identify factors that decrease the likelihood of the development of chronic PTSD despite combat exposure.

Sec. 302. Extension of period of enhanced eligibility for VA health services for veterans who served in combat theater of operations.

Sec. 303. Department of Veterans Affairs to participate in all demobilizations and Transitional Assistance Program activities.

Sec. 304. Educational materials.

Sec. 305. Demonstration project to station Department of Veterans Affairs psychologists and psychiatrists at major demobilization sites and military treatment facilities.

Sec. 306. Model care plan for integrated mental health and a primary care model for PTSD practice.

Sec. 307. Performance measures for Department of Veterans Affairs health care administrators.

TITLE IV—DEPARTMENT OF DEFENSE/DEPARTMENT OF VETERANS AFFAIRS COUNCIL ON POST-DEPLOYMENT MENTAL HEALTH

Sec. 401. Establishment of Council.

Sec. 402. Duties of Council.

TITLE V—CAPACITY BUILDING IN DEPARTMENT OF VETERANS AFFAIRS

- Sec. 501. Plan for expansion of Department of Veterans Affairs system to expand access to specialized PTSD care.
- Sec. 502. Additional Department of Veterans Affairs resources.

#### TITLE VI—FAMILY THERAPY

- Sec. 601. Eligibility period for counseling and bereavement counseling.

#### TITLE VII—EDUCATIONAL INITIATIVES

- Sec. 701. Training program for health-care providers.
- Sec. 702. Curriculum and protocols for cross-training of Department of Veterans Affairs clinicians.
- Sec. 703. Publication of state-of-the-art PTSD diagnosis and treatment.
- Sec. 704. Protocols for pain management for PTSD and war-related pain.
- Sec. 705. Case management techniques for VA PTSD clinicians.

#### TITLE VIII—NATIONAL STEERING COMMITTEE ON PTSD EDUCATION

- Sec. 801. National Steering Committee.
- Sec. 802. Funding support for National Center for PTSD.
- Sec. 803. Continuing education to mental health providers.
- Sec. 804. Web-based curriculum to sponsor clinician training initiatives.

#### TITLE IX—BENEFITS

- Sec. 901. Identification of deficiencies in PTSD disability examinations.
- Sec. 902. Criteria for determining medical conditions associated with PTSD.

#### TITLE X—PUBLIC AWARENESS

- Sec. 1001. Public awareness program.
- Sec. 1002. Web site and materials for general campaign of awareness of PTSD.

### 1 **SEC. 2. DEFINITION.**

2       In this Act, the term “PTSD” means post-traumatic  
3 stress disorder.

## 4       **TITLE I—VETERANS OF PAST** 5       **DEPLOYMENTS**

### 6 **SEC. 101. EXTENSION OF ELIGIBILITY FOR READJUSTMENT** 7       **COUNSELING SERVICES FOR VIETNAM-ERA** 8       **VETERANS.**

9       Section 1712A(a)(1)(B)(ii) of title 38, United States  
10 Code, is amended by striking “January 1, 2004” and in-  
11 serting “January 1, 2009”.

1       **TITLE II—MILITARY ISSUES**

2       **SEC. 201. DEPARTMENT OF VETERANS AFFAIRS-DEPART-**  
3                   **MENT OF DEFENSE HEALTH CARE SHARING**  
4                   **INCENTIVE FUND.**

5           (a) IN GENERAL.—The Secretary of Veterans Affairs  
6 and the Secretary of Defense shall jointly take such steps  
7 as necessary to implement the proposal of the Center for  
8 the Study of Traumatic Stress at the Uniformed Services  
9 University of the Health Sciences for a Department of  
10 Veterans Affairs-Department of Defense Health Care  
11 Sharing Incentive Fund.

12          (b) TELECOMMUNICATIONS SUPPORT.—As part of  
13 the implementation of such proposal, the two Secretaries  
14 shall provide for a system of telecommunications to sup-  
15 port the following:

16               (1) Continuing education and support for front-  
17 line (forward-deployed) providers of health-care serv-  
18 ices.

19               (2) Enhanced treatment capacity for addressing  
20 acute episodes of PTSD.

21       **SEC. 202. COLLECTION OF AGGREGATE DATA FROM PRE-**  
22                   **AND POST-DEPLOYMENT HEALTH ASSESS-**  
23                   **MENTS.**

24           (a) DATA COLLECTION.—The Secretary of Defense  
25 shall take appropriate steps to assist the Secretary of Vet-

1 erans Affairs with the collection of data from pre- and  
2 post-deployment health assessments of members of the  
3 Armed Forces that may be relevant for identification and  
4 treatment of PTSD.

5 (b) CONSENT FORMS.—The Secretary of Defense  
6 shall develop forms to obtain the written consent of mem-  
7 bers of the Armed Forces to allow the Department of Vet-  
8 erans Affairs to collect data contained on pre-deployment  
9 and post-deployment health assessment forms with rel-  
10 evant treatment information concerning PTSD from those  
11 members of the Armed Forces to be discharged or demobi-  
12 lized within 90 days. Such forms shall be developed within  
13 60 days of the date of the enactment of this Act.

14 (c) PREVENTATIVE MAINTENANCE POST-DEPLOY-  
15 MENT INTERVENTION.—

16 (1) IN GENERAL.—The Secretary of Veterans  
17 Affairs shall conduct routine preventative mainte-  
18 nance intervention for all members of the Armed  
19 Forces returning from deployment in a combat the-  
20 ater. Such intervention shall be conducted between  
21 90 and 180 days after such members return from  
22 such deployment.

23 (2) PERSONNEL.—For purposes of such inter-  
24 vention, the Secretary of Veterans Affairs may use  
25 staff of the Department of Veterans Affairs, includ-

1 ing readjustment counseling staff, or persons trained  
2 by the Department of Veterans Affairs, including  
3 volunteers from military unit associations, veteran  
4 service organizations, or other nonprofit organiza-  
5 tions.

6 (3) SIZE.—Such intervention shall be conducted  
7 with no more than 6 returning servicemembers at a  
8 time.

9 (4) PURPOSE.—The purpose of such interven-  
10 tion shall be the following:

11 (A) To identify and distinguish symptoms  
12 of “common” acute stress reactions from those  
13 of chronic and severe post-traumatic stress dis-  
14 order.

15 (B) To discuss concerns of combat per-  
16 sonnel and those expressed by their family  
17 members.

18 (C) To refer returning servicemembers to  
19 appropriate services, as necessary.

20 (D) To disseminate educational materials  
21 about PTSD to servicemembers.

22 (E) To provide follow-up educational mate-  
23 rials by mail to family members.

24 (d) IDENTIFICATION OF SUBSTANCE USE DIS-  
25 ORDERS.—The Secretary of Defense shall add questions

1 to pre-deployment and post-deployment screens to assist  
2 in identification of existing or potential substance use dis-  
3 orders among members of the Armed Forces.

4 (e) SUBSTANCE USE DISORDER TREATMENT PROTO-  
5 COLS.—The Secretary of Defense shall develop appro-  
6 priate substance use disorder treatment protocols for as-  
7 sistance in combat areas of operations and on return to  
8 the United States.

9 **SEC. 203. TELEMEDICINE SUPPORT FOR FRONT-LINE DE-**  
10 **PARTMENT OF DEFENSE PROVIDERS.**

11 The Secretary of Defense shall, in conjunction with  
12 the Secretary of Veterans Affairs, establish a program to  
13 provide telemedicine support to Department of Defense  
14 health-care providers in combat theaters. Such telemedi-  
15 cine support shall include real-time access to clinical spe-  
16 cialty support, Web-based information on state-of-the-art  
17 protocols for the treatment and diagnosis of PTSD, and  
18 educational programs concerning PTSD.

1 **TITLE III—PREVENTION, EARLY**  
2 **DETECTION, AND TREAT-**  
3 **MENT FOR RETURNING**  
4 **TROOPS**

5 **SEC. 301. STUDY TO IDENTIFY FACTORS THAT DECREASE**  
6 **THE LIKELIHOOD OF THE DEVELOPMENT OF**  
7 **CHRONIC PTSD DESPITE COMBAT EXPOSURE.**

8 (a) STUDY.—The Secretary of Veterans Affairs shall  
9 provide for a study, to be conducted by an entity other  
10 than the Department of Veterans Affairs and the Depart-  
11 ment of Defense, to identify factors that decrease the like-  
12 lihood of the development of chronic post-traumatic stress  
13 disorder (PTSD) in servicemembers and veterans who  
14 have had combat exposure, including exposure to guerilla  
15 warfare.

16 (b) REPORT.—The Secretary shall provide for the en-  
17 tity conducting the study under subsection (a) to submit  
18 a report on the results of the study to the Secretary and  
19 the Congress not later than one year after the date of the  
20 enactment of this Act.



1 **SEC. 302. EXTENSION OF PERIOD OF ENHANCED ELIGI-**  
2 **BILITY FOR VA HEALTH SERVICES FOR VET-**  
3 **ERANS WHO SERVED IN COMBAT THEATER**  
4 **OF OPERATIONS.**

5 Section 1710(e)(3)(C) of title 38, United States  
6 Code, is amended by striking “2 years” and inserting “5  
7 years”.

8 **SEC. 303. DEPARTMENT OF VETERANS AFFAIRS TO PAR-**  
9 **TICIPATE IN ALL DEMOBILIZATIONS AND**  
10 **TRANSITIONAL ASSISTANCE PROGRAM AC-**  
11 **TIVITIES.**

12 (a) IN GENERAL.—The Secretary of Defense shall  
13 provide for the Secretary of Veterans Affairs to participate  
14 in all demobilization and Transitional Assistance Program  
15 activities conducted within the Department of Defense so  
16 as to enhance the capability of the Secretary of Veterans  
17 Affairs to identify risk factors for development of chronic  
18 PTSD.

19 (b) HOMELESSNESS RISK AWARENESS.—In any ac-  
20 tivity referred to in subsection (a), the Secretary of De-  
21 fense and the Secretary of Veterans Affairs shall provide  
22 information concerning homelessness, including risk fac-  
23 tors, awareness assessment, and contact information for  
24 preventative assistance associated with homelessness.

1 **SEC. 304. EDUCATIONAL MATERIALS.**

2       The Secretary of Veterans Affairs shall develop edu-  
3 cational materials concerning PTSD for members of the  
4 Armed Forces returning from deployments in combat the-  
5 aters and their family members. The Secretary of Defense  
6 shall assist in making those materials available to such  
7 members and family members.

8 **SEC. 305. DEMONSTRATION PROJECT TO STATION DEPART-**  
9 **MENT OF VETERANS AFFAIRS PSYCHOLO-**  
10 **GISTS AND PSYCHIATRISTS AT MAJOR DEMO-**  
11 **BILIZATION SITES AND MILITARY TREAT-**  
12 **MENT FACILITIES.**

13       (a) DEMONSTRATION PROJECT.—The Secretary of  
14 Defense and the Secretary of Veterans Affairs shall jointly  
15 provide for the conduct of a demonstration project under  
16 which Department of Veterans Affairs psychologists and  
17 psychiatrists are stationed at major demobilization sites  
18 and military treatment facilities.

19       (b) PURPOSE.—The purposes of the demonstration  
20 project shall be as follows:

21           (1) Identify, on an aggregate level, need for  
22 mental health services among active-duty, Reserve,  
23 and National Guard members.

24           (2) Provide such services or refer members for  
25 necessary services.

1           (3) Advise servicemembers of the need for con-  
2           tinuous services.

3           (4) Identify the obstacles servicemembers have  
4           in seeking appropriate mental health care.

5           (c) FUNDING.—There is authorized to be appro-  
6           priated such sums as may be necessary for each of fiscal  
7           years 2005, 2006, and 2007 for the conduct of the dem-  
8           onstration project. Amounts for the conduct of the project  
9           shall be provided equally by the Secretary of Veterans Af-  
10          fairs and the Secretary of Defense.

11          (d) REPORT.—The Secretary of Veterans Affairs  
12          shall submit to the Committees on Veterans' Affairs of  
13          the Senate and House of Representatives a report pro-  
14          viding the results of the demonstration project. The report  
15          shall be submitted not later than 18 months after the date  
16          of the enactment of this Act.

17      **SEC. 306. MODEL CARE PLAN FOR INTEGRATED MENTAL**  
18                              **HEALTH AND A PRIMARY CARE MODEL FOR**  
19                              **PTSD PRACTICE.**

20          (a) MODEL CARE PLAN.—The Secretary of Veterans  
21          Affairs shall develop and implement a “model care” plan  
22          for integrated mental health and primary care model for  
23          PTSD practice. The plan shall be implemented at three  
24          sites selected by the Secretary.

1 (b) PURPOSE.—The purpose of the model care plan  
2 shall be as follows:

3 (1) Develop training protocols for involved clini-  
4 cians.

5 (2) Identify medical conditions which may be  
6 associated with PTSD.

7 (3) Identify “best practices” for treatment of  
8 PTSD.

9 (4) Disseminate results to the Veterans Health  
10 Administration and the Veterans Benefits Adminis-  
11 tration of the Department of Veterans Affairs.

12 (c) AUTHORIZATION.—There is authorized to be ap-  
13 propriated for the purposes of subsection (a) the amount  
14 of \$1,000,000 for each of fiscal years 2005, 2006, and  
15 2007.

16 **SEC. 307. PERFORMANCE MEASURES FOR DEPARTMENT OF**  
17 **VETERANS AFFAIRS HEALTH CARE ADMINIS-**  
18 **TRATORS.**

19 (a) PERFORMANCE MEASURES.—The Secretary of  
20 Defense and the Secretary of Veterans Affairs, acting  
21 through the Department of Defense/Department of Vet-  
22 erans Affairs Council on Post-Deployment Mental Health  
23 established under section 401, shall develop performance  
24 measures for Department of Veterans Affairs regional  
25 health-care directors (referred to as VISN directors) and

1 Department of Defense TRICARE regional managers to  
2 ensure the appropriate deployment of resources to imple-  
3 ment the Iraq war clinical practice guidelines.

4 (b) USE OF PERFORMANCE MEASURES.—The per-  
5 formance measures under subsection (a) shall be designed  
6 to assess—

7 (1) access and availability of PTSD treatment  
8 for servicemembers returned from deployment in a  
9 combat theater; and

10 (2) implementation of the Iraq War Clinical  
11 Practice Guidelines.

12 **TITLE IV—DEPARTMENT OF DE-**  
13 **FENSE/DEPARTMENT OF VET-**  
14 **ERANS AFFAIRS COUNCIL ON**  
15 **POST-DEPLOYMENT MENTAL**  
16 **HEALTH**

17 **SEC. 401. ESTABLISHMENT OF COUNCIL.**

18 The Secretary of Defense and the Secretary of Vet-  
19 erans Affairs shall jointly establish a council to be known  
20 as the Department of Defense/Department of Veterans Af-  
21 fairs Council on Post-Deployment Mental Health. The  
22 council shall be composed of leadership of the two depart-  
23 ments in the areas of mental health, PTSD, substance  
24 abuse, and military sexual trauma. The council shall be

1 established not later than 120 days after the date of the  
2 enactment of this Act.

3 **SEC. 402. DUTIES OF COUNCIL.**

4 (a) DUTIES.—The Department of Defense/Depart-  
5 ment of Veterans Affairs Council on Post-Deployment  
6 Mental Health shall have the following duties:

7 (1) Review of the continuum of care between  
8 the Department of Defense and the Department of  
9 Veterans Affairs for mental health, PTSD, sub-  
10 stance abuse, and military sexual trauma.

11 (2) Identification of gaps in the treatment capa-  
12 bility of the health-care systems of the Department  
13 of Defense and Department of Veterans Affairs for  
14 mental health, PTSD, substance abuse, and military  
15 sexual trauma and expected gaps in such continuum,  
16 with emphasis on access to services in rural areas,  
17 to meet the expected demand from current users and  
18 servicemembers returning from Operation Iraqi  
19 Freedom and Operation Enduring Freedom and  
20 other deployments.

21 (3) Promotion, within both systems, of an edu-  
22 cational program to implement the jointly developed  
23 Iraq War Clinical Practice Guidelines.

24 (4) Development of outcome monitors and qual-  
25 ity improvement instruments to ensure that internal

1 policy regarding PTSD is implemented (including  
2 TRICARE and VISN directors' performance meas-  
3 ures under section 307).

4 (5) Recommendation of policies to reduce the  
5 stigma associated with the seeking of mental health  
6 care by active-duty, Reserve, and National Guard  
7 members.

8 (6) Identification of the highest post-deploy-  
9 ment mental health research priorities for the two  
10 departments.

11 (7) Communications to inform active-duty  
12 servicemembers and veterans of matters relating to  
13 PTSD.

14 (8) Meet at least annually with stakeholder  
15 groups comprised of veterans, veterans service orga-  
16 nizations, and family members of veterans receiving  
17 care from the Department of Veterans Affairs men-  
18 tal health programs, and mental health associations.

19 (b) REPORT.—The Council shall prepare a report  
20 based on the reviews under paragraphs (1) and (2) of sub-  
21 section (a) to identify the necessary resources to create  
22 or enhance PTSD treatment capabilities. The report shall  
23 be made available to the Secretary of both Departments  
24 for comment. The Secretaries shall indicate recommenda-  
25 tions in which they concur or disagree and include specific

1 plans for implementation of any recommendations accept-  
 2 ed. The report, with the comments and recommendations  
 3 of the two Secretaries shall be submitted to the Commit-  
 4 tees on Veterans' Affairs and the Committees on Armed  
 5 Services of the Senate and House of Representatives not  
 6 later than one year after the date of the enactment of this  
 7 Act. The report shall include priority listing of sites which  
 8 require investments according to the greatest perceived  
 9 need for PTSD services.

10 **TITLE V—CAPACITY BUILDING**  
 11 **IN DEPARTMENT OF VET-**  
 12 **ERANS AFFAIRS**

13 **SEC. 501. PLAN FOR EXPANSION OF DEPARTMENT OF VET-**  
 14 **ERANS AFFAIRS SYSTEM TO EXPAND ACCESS**  
 15 **TO SPECIALIZED PTSD CARE.**

16 Based upon the report under section 402(b), the Sec-  
 17 retary of Veterans Affairs shall develop a plan for the De-  
 18 partment of Veterans Affairs to expand access to special-  
 19 ized PTSD care through—

- 20 (1) Readjustment Counseling Service centers
- 21 operated under section 1712A of title 38, United
- 22 States Code;
- 23 (2) community-based outpatient clinics; and
- 24 (3) telemedicine.



1 **SEC. 502. ADDITIONAL DEPARTMENT OF VETERANS AF-**  
2 **FAIRS RESOURCES.**

3 In order to improve access to mental health services,  
4 the Secretary of Veterans Affairs shall provide the fol-  
5 lowing:

6 (1) 100 additional full-time equivalent employ-  
7 ees to Readjustment Counseling Service outstations.

8 (2) A PTSD Clinical Team at every medical  
9 center of the Veterans Health Administration.

10 (3) A family therapist at each Vet Center.

11 (4) A PTSD Coordinator in each regional net-  
12 work referred to as a Veterans Integrated Service  
13 Network (VISN ) whose duties shall include—

14 (A) development of plans for meeting  
15 PTSD treatment needs consistent with the re-  
16 port under section 402(b);

17 (B) assurance of implementation of clinical  
18 practice guidelines throughout the VISN;

19 (C) liaison among all health-care sites in  
20 the VISN and the Department Central Office  
21 on matters relating to PTSD.

22 (5) A PTSD coordinator in each regional office  
23 of the Readjustment Counseling Service whose du-  
24 ties shall include liaison with regional office staff  
25 and medical centers for veterans seeking service-con-  
26 nection for PTSD.

1       **TITLE VI—FAMILY THERAPY**

2       **SEC. 601. ELIGIBILITY PERIOD FOR COUNSELING AND BE-**  
3                   **REAVEMENT COUNSELING.**

4           The Secretary of Veterans Affairs may provide coun-  
5       seling to the immediate family members of veterans with  
6       service-connected disabilities and bereavement counseling  
7       to the immediate family members of members of the  
8       Armed Forces who are killed in action for up to one year  
9       after the initial services are delivered to eligible family  
10      members.

11       **TITLE VII—EDUCATIONAL**  
12                   **INITIATIVES**

13       **SEC. 701. TRAINING PROGRAM FOR HEALTH-CARE PRO-**  
14                   **VIDERS.**

15          The Secretary of Veterans Affairs and the Secretary  
16      of Defense shall jointly develop a broad training program  
17      for all health-care providers in the Department of Vet-  
18      erans Affairs and the Department of Defense to famil-  
19      iarize those providers with mental health-care issues that  
20      are likely to arise among persons deployed to combat thea-  
21      ters during the five years after such a deployment.

1 **SEC. 702. CURRICULUM AND PROTOCOLS FOR CROSS-**  
2 **TRAINING OF DEPARTMENT OF VETERANS**  
3 **AFFAIRS CLINICIANS.**

4 The Secretary of Veterans Affairs shall develop a cur-  
5 riculum and required protocols for cross-training to allow  
6 the following clinicians of the Department of Veterans Af-  
7 fairs to screen for PTSD and, as appropriate, provide in-  
8 formation and appropriate referral:

9 (1) Primary care providers.

10 (2) Practitioners assigned as Gulf War points-  
11 of-contact.

12 (3) Clinicians assigned as case managers.

13 **SEC. 703. PUBLICATION OF STATE-OF-THE-ART PTSD DIAG-**  
14 **NOSIS AND TREATMENT.**

15 The Secretary of Veterans Affairs and the Secretary  
16 of Defense shall jointly develop a plan for the production  
17 and dissemination of publications to advise clinicians on  
18 state-of-the-art PTSD diagnosis and treatment, including  
19 any medical conditions associated with PTSD.

20 **SEC. 704. PROTOCOLS FOR PAIN MANAGEMENT FOR PTSD**  
21 **AND WAR-RELATED PAIN.**

22 The Secretary of Veterans Affairs and the Secretary  
23 of Defense shall jointly develop protocols for pain manage-  
24 ment for PTSD and war-related pain.

1 **SEC. 705. CASE MANAGEMENT TECHNIQUES FOR VA PTSD**  
2 **CLINICIANS.**

3 The Secretary of Veterans Affairs shall assist in de-  
4 velopment of case management techniques for PTSD clini-  
5 cians of the Department of Veterans Affairs.

6 **TITLE VIII—NATIONAL STEER-**  
7 **ING COMMITTEE ON PTSD**  
8 **EDUCATION**

9 **SEC. 801. NATIONAL STEERING COMMITTEE.**

10 (a) ESTABLISHMENT.—There is a National Steering  
11 Committee on PTSD Education, to be appointed by the  
12 joint council established under title IV. The committee  
13 shall be comprised of mental health and other health pro-  
14 fessionals and health educators involved in the care of vet-  
15 erans of current deployments.

16 (b) PURPOSE.—The committee shall review training  
17 protocols for health-care providers and plans for dissemi-  
18 nation of educational materials to veterans, their families,  
19 and other relevant parties and shall identify the resources  
20 available to provide for these purposes.

21 (c) MEETINGS.—The committee shall meet at least  
22 once annually.

23 **SEC. 802. FUNDING SUPPORT FOR NATIONAL CENTER FOR**  
24 **PTSD.**

25 There is authorized to be appropriated to the Sec-  
26 retary of Veterans Affairs for the National Center for

1 PTSD to assist in carrying out a joint educational initia-  
2 tive with the Uniformed Services University of the Health  
3 Sciences the amount of \$5,000,000 for each of the fiscal  
4 years 2005 through 2014.

5 **SEC. 803. CONTINUING EDUCATION TO MENTAL HEALTH**  
6 **PROVIDERS.**

7 The National Steering Committee established under  
8 section 801 shall provide continuing education to mental  
9 health providers in the Department of Veterans Affairs  
10 and the Department of Defense.

11 **SEC. 804. WEB-BASED CURRICULUM TO SPONSOR CLINI-**  
12 **CIAN TRAINING INITIATIVES.**

13 The National Steering Committee established under  
14 section 801 shall develop a Web-based curriculum to spon-  
15 sor clinician training initiatives.

16 **TITLE IX—BENEFITS**

17 **SEC. 901. IDENTIFICATION OF DEFICIENCIES IN PTSD DIS-**  
18 **ABILITY EXAMINATIONS.**

19 (a) IDENTIFICATION OF DEFICIENCIES.—The Sec-  
20 retary of Veterans Affairs shall establish a protocol to  
21 identify deficiencies in compensation and pension exami-  
22 nations conducted by the Secretary to determine if a vet-  
23 eran has PTSD and, if the veteran is determined to have  
24 PTSD, the degree of disability associated with that diag-  
25 nosis.

1 (b) PLAN.—Based upon the identification of defi-  
2 ciencies pursuant to subsection (a), the Secretary shall es-  
3 tablish and implement a plan for addressing those defi-  
4 ciencies.

5 **SEC. 902. CRITERIA FOR DETERMINING MEDICAL CONDI-**  
6 **TIONS ASSOCIATED WITH PTSD.**

7 The Secretary of Veterans Affairs shall develop—

8 (1) criteria for determining which medical con-  
9 ditions are as likely as not to be associated with  
10 PTSD; and

11 (2) standards for determining when secondary  
12 service-connection should be granted for those condi-  
13 tions.

14 **TITLE X—PUBLIC AWARENESS**

15 **SEC. 1001. PUBLIC AWARENESS PROGRAM.**

16 The Secretary of Veterans Affairs shall conduct an  
17 aggressive, comprehensive outreach program to enhance  
18 the awareness of veterans, and the public in general, of  
19 the symptoms of PTSD and of the services available for  
20 veterans with those symptoms. The Secretary of Defense  
21 shall provide the Secretary of Veterans Affairs with such  
22 assistance as may be required for the purposes of such  
23 program. To the extent practicable, the program shall be  
24 conducted through the joint council established under title  
25 IV.

1 **SEC. 1002. WEB SITE AND MATERIALS FOR GENERAL CAM-**  
2 **PAIGN OF AWARENESS OF PTSD.**

3       As part of the program under this title, the Secretary  
4 of Veterans Affairs shall develop and continually update  
5 a Web site and materials, including pamphlets, news re-  
6 leases, fact sheets, and other materials, for the purposes  
7 of a general campaign of awareness of post-traumatic  
8 stress disorder.

○