

110TH CONGRESS  
1ST SESSION

# H. R. 4053

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 HOUSE OF REPRESENTATIVES

NOVEMBER 1, 2007

Ms. BERKLEY (for herself, Ms. CORRINE BROWN of Florida, Mr. DELAHUNT, Mr. FILNER, Ms. WATSON, Mrs. NAPOLITANO, Mr. FALEOMAVAEGA, Mr. HALL of New York, Mr. HARE, Mr. BACA, Mr. MCNERNEY, and Mr. KAGEN) introduced the following bill; which was referred to the Committee on Veterans' Affairs

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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,*

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

4       (a) SHORT TITLE.—This Act may be cited as the  
5       “Mental Health Improvements Act of 2007”.

6       (b) TABLE OF CONTENTS.—The table of contents for  
7       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.

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

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

Congress makes the following findings:

- (1) More than 1,500,000 members of the Armed Forces have been deployed in Operation Iraqi Freedom and Operation Enduring Freedom. The

1       2005 Department of Defense Survey of Health Re-  
2       lated Behaviors Among Active Duty Personnel re-  
3       ports that 23 percent of members of the Armed  
4       Forces on active duty acknowledge a significant  
5       problem with alcohol use, with similar rates of ac-  
6       knowledgeed problems with alcohol use among mem-  
7       bers of the National Guard.

8           (2) The effects of substance abuse are wide  
9       ranging, including significantly increased risk of sui-  
10      cide, exacerbation of mental and physical health dis-  
11      orders, breakdown of family support, and increased  
12      risk of unemployment and homelessness.

13          (3) While veterans suffering from mental health  
14      conditions, chronic physical illness, and polytrauma  
15      may be at increased risk for development of a sub-  
16      stance use disorder, treatment for these veterans is  
17      complicated by the need to address adequately the  
18      physical and mental symptoms associated with these  
19      conditions through appropriate medical intervention.

20          (4) While the Veterans Health Administration  
21      has dramatically increased health services for vet-  
22      erans from 1996 through 2006, the number of vet-  
23      erans receiving specialized substance abuse treat-  
24      ment services decreased 18 percent during that time.

1 No comparable decrease in the national rate of sub-  
2 stance abuse has been observed during that time.

3 (5) While some facilities of the Veterans Health  
4 Administration provide exemplary substance use dis-  
5 order treatment services, the availability of such  
6 treatment services throughout the health care sys-  
7 tem of the Veterans Health Administration is incon-  
8 sistent.

9 (6) According to the Government Accountability  
10 Office, the Department of Veterans Affairs signifi-  
11 cantly reduced its substance use disorder treatment  
12 and rehabilitation services between 1996 and 2006,  
13 and has made little progress since in restoring these  
14 services to their pre-1996 levels.

15 **SEC. 102. EXPANSION OF SUBSTANCE USE DISORDER**  
16 **TREATMENT SERVICES AT DEPARTMENT OF**  
17 **VETERANS AFFAIRS MEDICAL CENTERS.**

18 (a) PROVISION OF SUBSTANCE USE DISORDER  
19 TREATMENT SERVICES.—The Secretary of Veterans Af-  
20 fairs shall ensure the provision, at each Department of  
21 Veterans Affairs medical center and community based out-  
22 patient clinic, of the following services and treatments  
23 with respect to substance use disorder for veterans:

24 (1) Short term motivational counseling services.

25 (2) Intensive outpatient care services.

1           (3) Relapse prevention services.

2           (4) Ongoing aftercare and outpatient counseling  
3 services.

4           (5) Opiate substitution therapy services.

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

7           (7) Detoxification and stabilization services.

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

10       (b) EXEMPTIONS.—

11           (1) IN GENERAL.—The Secretary may exempt  
12 an individual medical center or community based  
13 outpatient clinic from providing all of the services  
14 otherwise required by subsection (a).

15           (2) ANNUAL REPORT.—Each year, the Sec-  
16 retary shall submit to the Committee on Veterans'  
17 Affairs of the Senate and the Committee on Vet-  
18 erans' Affairs of the House of Representatives a re-  
19 port setting forth the exemptions made under para-  
20 graph (1) as of the date of the report and the rea-  
21 sons therefor.

1 **SEC. 103. CARE FOR VETERANS WITH MENTAL HEALTH AND**  
2 **SUBSTANCE USE DISORDERS BY CLINICIAN**  
3 **TEAMS.**

4 (a) IN GENERAL.—In the event the Secretary of Vet-  
5 erans Affairs provides a veteran inpatient or outpatient  
6 care for a substance use disorder and a comorbid mental  
7 health disorder, the Secretary shall ensure that treatment  
8 for such disorders is provided concurrently by a team of  
9 clinicians with appropriate expertise.

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

14 (1) Clinicians and health professionals with ex-  
15 pertise in treatment of substance use disorders and  
16 mental health disorders.

17 (2) Such other professionals as the Secretary  
18 considers appropriate for the provision of treatment  
19 to veterans for substance use and mental health dis-  
20 orders.

21 **SEC. 104. PROGRAM FOR ENHANCED TREATMENT OF SUB-**  
22 **STANCE USE DISORDERS AND POST-TRAU-**  
23 **MATIC STRESS DISORDER IN VETERANS.**

24 (a) IN GENERAL.—The Secretary of Veterans Affairs  
25 shall carry out a program for the purpose of enhancing

1 the care and treatment for veterans with substance use  
2 disorders and post-traumatic stress disorder (PTSD).

3 (b) ALLOCATION OF FUNDS.—The Secretary of Vet-  
4 erans Affairs shall carry out the program through a com-  
5 petitive allocation of funds to facilities of the Department  
6 of Veterans Affairs for the provision of care and treatment  
7 to veterans described in subsection (a).

8 (c) APPLICATION.—A facility of the Department, in-  
9 cluding a medical center, a community based outpatient  
10 clinic, or a readjustment counseling center, seeking an al-  
11 location of funds under this section shall submit to the  
12 Secretary an application therefor in such form and in such  
13 manner as the Secretary considers appropriate.

14 (d) USE OF ALLOCATED FUNDS.—Each Department  
15 facility receiving an allocation of funds under this section  
16 shall use such funds for the purpose described in sub-  
17 section (a), including the establishment or improvement  
18 of the following:

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

23 (2) Programs that treat veterans with sub-  
24 stance use disorders through the development of  
25 substance use disorder intervention strategies, in-

cluding strategies developed in collaboration with the families of veterans.

(3) Peer outreach programs that—

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

(B) are conducted—

(i) through readjustment counseling centers;

(ii) in tandem with efforts of community-based outpatient clinics and post-traumatic stress disorder and substance use disorder treatment teams based in Department of Veterans Affairs medical centers; and

(iii) with appropriate regard for patient privacy.

(4) Collaboration between urgent care clinicians at Department of Veterans Affairs medical centers and substance use disorder and post-traumatic stress disorder treatment professionals to ensure expedited referral of veterans who are diagnosed with



1 post-traumatic stress disorder or a substance use  
2 disorder.

3 (5) Programs of treatment or services for vet-  
4 erans with substance use disorders and post-trau-  
5 matic stress disorder that utilize innovative and  
6 flexible scheduling of treatment and services by em-  
7 phasizing scheduling of group meetings or appoint-  
8 ments in the evening and on weekends.

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

11 (e) REPORT.—Not later than one year after the date  
12 of the enactment of this Act, the Secretary shall submit  
13 to the Committee on Veterans' Affairs of the Senate and  
14 the Committee on Veterans' Affairs of the House of Rep-  
15 resentatives a report setting forth the programs and facili-  
16 ties for which funds have been allocated under this section  
17 as of the date of the report.

18 (f) FUNDING.—

19 (1) IN GENERAL.—In carrying out the program  
20 described in this section, the Secretary shall allocate  
21 for each of fiscal years 2008, 2009, and 2010, from  
22 funds available to the Department for medical care  
23 in such fiscal year, an amount equal to not less than  
24 \$50,000,000 to carry out the program.

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

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

19   **SEC. 105. NATIONAL CENTERS OF EXCELLENCE ON POST-**  
20                   **TRAUMATIC STRESS DISORDER AND SUB-**  
21                   **STANCE USE DISORDERS.**

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

1   **“§ 7330A. National centers of excellence on post-trau-**  
2                   **matic stress disorder and substance use**  
3                   **disorders**

4           “(a) ESTABLISHMENT OF CENTERS.—(1) The Sec-  
5   retary shall establish not less than six national centers of  
6   excellence on post-traumatic stress disorder and substance  
7   use disorders.

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

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

16                  “(1) provides inpatient care;

17                  “(2) is geographically situated in an area with  
18           a high number of veterans that have been diagnosed  
19           with both post-traumatic stress disorder and sub-  
20           stance use disorder; and

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

23          “(c) PROCESS OF REFERRAL AND TRANSITION TO  
24   STEP DOWN DIAGNOSIS REHABILITATION TREATMENT  
25   PROGRAMS.—The Secretary shall establish a process to  
26   refer and aid the transition of veterans from the national

1 centers of excellence on post-traumatic stress disorder and  
 2 substance use disorders established pursuant to subsection  
 3 (a) to programs that provide step down rehabilitation  
 4 treatment for individuals with post-traumatic stress dis-  
 5 order and substance use disorders.”.

6 (b) CLERICAL AMENDMENT.—The table of sections  
 7 at the beginning of chapter 73 of such title is amended  
 8 by inserting after the item relating to section 7330 the  
 9 following new item:

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

10 **SEC. 106. REPORT ON RESIDENTIAL MENTAL HEALTH CARE**  
 11 **FACILITIES OF THE VETERANS HEALTH AD-**  
 12 **MINISTRATION.**

13 (a) IN GENERAL.—Not later than six months after  
 14 the date of the enactment of this Act, the Secretary of  
 15 Veterans Affairs shall, acting through the Office of the  
 16 Medical Inspector of the Department of Veterans Af-  
 17 fairs—

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

21 (2) submit to the Committee on Veterans’ Af-  
 22 fairs of the Senate and the Committee on Veterans’  
 23 Affairs of the House of Representatives a report on  
 24 the review.

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

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

6 (2) An assessment of the supervision and sup-  
7 port provided in the residential mental health care  
8 facilities of the Veterans Health Administration.

9 (3) The ratio of staff members at each residen-  
10 tial mental health care facility to patients at such fa-  
11 cility.

12 (4) An assessment of the appropriateness of  
13 rules and procedures for the prescription and admin-  
14 istration of medications to patients in such residen-  
15 tial mental health care facilities.

16 (5) A description of the protocols at each resi-  
17 dential mental health care facility for handling  
18 missed appointments.

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

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

24 This title is enacted in tribute to Justin Bailey, who,  
25 after returning to the United States from service as a

1 member of the Armed Forces in Operation Iraqi Freedom,  
 2 died in a domiciliary facility of the Department of Vet-  
 3 erans Affairs while receiving care for post-traumatic stress  
 4 disorder and a substance use disorder.

## 5 **TITLE II—MENTAL HEALTH** 6 **ACCESSIBILITY ENHANCEMENTS**

### 7 **SEC. 201. PILOT PROGRAM ON PEER OUTREACH AND SUP-** 8 **PORT FOR VETERANS AND USE OF COMMU-** 9 **NITY MENTAL HEALTH CENTERS AND INDIAN** 10 **HEALTH SERVICE FACILITIES.**

11 (a) PILOT PROGRAM REQUIRED.—Commencing not  
 12 later than 180 days after the date of the enactment of  
 13 this Act, the Secretary of Veterans Affairs shall carry out  
 14 a pilot program to assess the feasibility and advisability  
 15 of providing to veterans of Operation Iraqi Freedom and  
 16 Operation Enduring Freedom, and, in particular, veterans  
 17 who served in such operations as a member of the Na-  
 18 tional Guard or Reserve, the following:

- 19 (1) Peer outreach services.
- 20 (2) Peer support services.
- 21 (3) Readjustment counseling services described  
 22 in section 1712A of title 38, United States Code.
- 23 (4) Other Mental health services.

24 (b) PROVISION OF CERTAIN SERVICES.—In providing  
 25 services described in paragraphs (3) and (4) of subsection

1 (a) under the pilot program to veterans who reside in rural  
2 areas and do not have adequate access through the De-  
3 partment of Veterans Affairs to the services described in  
4 such paragraphs, the Secretary shall, acting through the  
5 Office of Rural Health, provide such services as follows:

6 (1) Through community health centers under  
7 contracts or other agreements for the provision of  
8 such services that are entered into for purposes of  
9 the pilot program.

10 (2) Through the Indian Health Service pursu-  
11 ant to a memorandum of understanding entered into  
12 by the Secretary of Veterans Affairs and the Sec-  
13 retary of Health and Human Services for purposes  
14 of the pilot program.

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

18 (d) PROGRAM LOCATIONS.—

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

23 (2) RURAL GEOGRAPHIC LOCATIONS.—At least  
24 two of the locations selected shall be in rural geo-  
25 graphic locations that lack access to comprehensive

1        mental health services through the Department of  
2        Veterans Affairs.

3        (e) PARTICIPATION IN PROGRAM.—Each community  
4        mental health center or facility of the Indian Health Serv-  
5        ice participating in the pilot program under subsection (b)  
6        shall—

7                (1) provide the services described in paragraphs  
8        (3) and (4) of subsection (a) to eligible veterans, in-  
9        cluding, to the extent practicable, through the utili-  
10       zation of telehealth services for the provision of such  
11       services;

12                (2) utilize best practices and technologies; and

13                (3) meet such other requirements as the Sec-  
14       retary shall require.

15        (f) COMPLIANCE WITH DEPARTMENT PROTOCOLS.—  
16        Each community mental health center or facility of the  
17        Indian Health Service participating in the pilot program  
18        under subsection (b) shall comply with applicable protocols  
19        of the Department before incurring any liability on behalf  
20        of the Department for the provision of services as part  
21        of the pilot program.

22        (g) PROVISION OF CLINICAL INFORMATION.—Each  
23        community mental health center or facility of the Indian  
24        Health Service participating in the pilot program under  
25        subsection (b) shall provide the Secretary with such clin-



1 ical information on each veteran for whom such health  
2 center or facility provides mental health services under the  
3 pilot program as the Secretary shall require.

4 (h) TRAINING.—

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

10 (2) TRAINING OF CLINICIANS.—

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

23 (B) PARTICIPATION IN TRAINING.—Each  
24 community mental health center or facility of  
25 the Indian Health Service participating in the

1 pilot program under subsection (b) shall partici-  
2 pate in the training program conducted pursu-  
3 ant to subparagraph (A).

4 (i) ANNUAL REPORTS.—Each community mental  
5 health center or facility of the Indian Health Service par-  
6 ticipating in the pilot program under subsection (b) shall  
7 submit to the Secretary on an annual basis a report con-  
8 taining, with respect to the provision of services under  
9 subsection (b) and for the last full calendar year ending  
10 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) DEFINITIONS.—In this section:

17 (1) The term “community mental health cen-  
18 ter” has the meaning given such term in section  
19 410.2 of title 42, Code of Federal Regulations (as  
20 in effect on the day before the date of the enactment  
21 of this Act).

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

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

1 (B) has received a referral from a health  
 2 professional of the Veterans Health Administra-  
 3 tion to a community mental health center or to  
 4 a facility of the Indian Health Service for pur-  
 5 poses of the pilot program.

6 (3) The term “Indian Health Service” means  
 7 the organization established by section 601(a) of the  
 8 Indian Health Care Improvement Act (25 U.S.C.  
 9 1661(a)).

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

## 13 **TITLE III—RESEARCH**

### 14 **SEC. 301. RESEARCH PROGRAM ON COMORBID POST-TRAU-** 15 **MATIC STRESS DISORDER AND SUBSTANCE** 16 **USE DISORDERS.**

17 (a) PROGRAM REQUIRED.—The Secretary of Vet-  
 18 erans Affairs shall carry out a program of research into  
 19 comorbid post-traumatic stress disorder (PTSD) and sub-  
 20 stance use disorder.

21 (b) DISCHARGE THROUGH NATIONAL CENTER FOR  
 22 POSTTRAUMATIC STRESS DISORDER.—The research pro-  
 23 gram required by subsection (a) shall be carried out and  
 24 overseen by the National Center for Posttraumatic Stress  
 25 Disorder. In carrying out the program, the Center shall—

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

3           (2) coordinate research, data collection, and  
4       data dissemination under the program.

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

7           (1) Comorbid post-traumatic stress disorder  
8       and substance use disorder.

9           (2) The systematic integration of treatment for  
10   post-traumatic stress disorder with treatment for  
11   substance use disorder.

12          (3) The development of protocols to evaluate  
13   care of veterans with comorbid post-traumatic stress  
14   disorder and substance use disorder and to facilitate  
15   cumulative clinical progress of such veterans over  
16   time.

17       (d) FUNDING.—

18          (1) AUTHORIZATION OF APPROPRIATIONS.—  
19   There is authorized to be appropriated for the De-  
20   partment of Veterans Affairs for each of fiscal years  
21   2008 through 2011, \$2,000,000 to carry out this  
22   section.

23          (2) AVAILABILITY.—Amounts authorized to be  
24   appropriated by paragraph (1) shall be made avail-  
25   able to the National Center on Posttraumatic Stress

1 Disorder for the purpose specified in that para-  
2 graph.

3 (3) SUPPLEMENT NOT SUPPLANT.—Any  
4 amount made available to the National Center on  
5 Posttraumatic Stress Disorder for a fiscal year  
6 under paragraph (2) is in addition to any other  
7 amounts made available to the National Center on  
8 Posttraumatic Stress Disorder for such year under  
9 any other provision of law.

10 **SEC. 302. EXTENSION OF AUTHORIZATION FOR SPECIAL**  
11 **COMMITTEE ON POST-TRAUMATIC STRESS**  
12 **DISORDER.**

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

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

18 **SEC. 401. CLARIFICATION OF AUTHORITY OF SECRETARY**  
19 **OF VETERANS AFFAIRS TO PROVIDE MENTAL**  
20 **HEALTH SERVICES TO FAMILIES OF VET-**  
21 **ERANS.**

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

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

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

3           (b) LOCATION.—Paragraph (5) of section 1701 of  
4 title 38, United States Code, shall not be construed to pre-  
5 vent the Secretary of Veterans Affairs from providing  
6 services described in subparagraph (B) of such paragraph  
7 to individuals described in such subparagraph in Readjust-  
8 ment Counseling Centers, Department of Veterans Affairs  
9 medical centers, community-based outpatient clinics, or in  
10 such other facilities of the Department of Veterans Affairs  
11 as the Secretary considers necessary.

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

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

1       (b) READJUSTMENT AND TRANSITION ASSIST-  
2 ANCE.—Readjustment and transition assistance described  
3 in this 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 associ-  
8 ated with making the transition from military to ci-  
9 vilian life.

10       (c) NON-DEPARTMENT OF VETERANS AFFAIRS EN-  
11 TITY.—

12           (1) IN GENERAL.—The Secretary shall carry  
13 out the pilot program through any for-profit or non-  
14 profit organization selected by the Secretary for pur-  
15 poses of the pilot program that has demonstrated  
16 expertise and experience in the provision of assist-  
17 ance and 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  
23 program.

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  
5   Affairs shall provide assistance under the pilot pro-  
6   gram in cooperation with 10 centers described in  
7   subsection (a) designated by the Secretary for pur-  
8   poses of the pilot program.

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

17       (f) PARTICIPATION OF CENTERS.—A center de-  
18   scribed in subsection (a) that is designated under sub-  
19   section (e) for participation in the pilot program shall par-  
20   ticipate in the pilot program by promoting awareness of  
21   the assistance and training available to veterans and their  
22   families through—

23           (1) the facilities and other resources of such  
24   center;



1           (2) the non-Department of Veterans Affairs en-  
2           tity selected pursuant to subsection (c); and

3           (3) other appropriate mechanisms.

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

11          (h) REPORT ON PILOT PROGRAM.—

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

17           (2) ELEMENTS.—Each report under paragraph  
18           (1) shall include the following:

19           (A) A description of the activities under  
20           the pilot program as of the date of such report,  
21           including the number of veterans and families  
22           provided assistance under the pilot program  
23           and the scope and nature of the assistance so  
24           provided.

1 (B) A current assessment of the effective-  
2 ness of the pilot program.

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

6 (3) CONGRESSIONAL VETERANS AFFAIRS COM-  
7 MITTEES DEFINED.—In this subsection, the term  
8 “congressional veterans affairs committees”  
9 means—

10 (A) the Committees on Veterans’ Affairs  
11 and Appropriations of the Senate; and

12 (B) the Committees on Veterans’ Affairs  
13 and Appropriations of the House of Representa-  
14 tives.

15 (i) AUTHORIZATION OF APPROPRIATIONS.—

16 (1) IN GENERAL.—There is authorized to be  
17 appropriated for the Department of Veterans Affairs  
18 for each of fiscal years 2008 through 2010  
19 \$1,000,000 to carry out this section.

20 (2) AVAILABILITY.—Amounts authorized to be  
21 appropriated by paragraph (1) shall remain available  
22 until expended.

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