



S. 2162 – Veterans’ Mental Health and Other Care Improvements Act of 2008

FLOOR SITUATION

S. 2162 is being considered on the floor under suspension of the rules and will require a two-thirds majority vote for passage. This legislation was introduced by Senator Daniel Akaka (D-CT) on October 15, 2007. The Senate passed the bill, as amended, by unanimous consent on June 3, 2008.

S. 2162 is expected to be considered on the floor of the House on September 24, 2008.

SUMMARY

Substance Abuse Disorders and Mental Health: This bill requires each VA medical center to provide a full continuum of substance abuse disorder (SUD) care. S. 2162 also authorizes \$1.5 million for fiscal year 2010 and 2011 for an Internet pilot program for SUD treatment for veterans of Operation Iraqi Freedom and Operation Enduring Freedom.

The bill establishes a three year pilot program for peer support services, readjustment counseling, and other services for veterans with mental health issues in rural areas.

Mental Health Research: This legislation establishes a research program on Post Traumatic Stress Disorder and Substance Abuse Disorders to coordinate research and data collection efforts. \$2 million for each of the years 2009-2012 is authorized for this program.

S. 2162 extends the authorization for the Special Committee on Substance Abuse Disorders through 2012.

Assistance for Families of Veterans: The bill clarifies the VA's authority to provide marriage and family counseling services to veterans and family members as part of hospital care. \$1 million is authorized for each of the fiscal years 2009-2011 for the creation of a three year pilot program to provide readjustment and transition assistance for veterans and their families. Ten Veterans Centers will contract with private organizations, and the Department must report to Congress on the pilot program.

Health Care Matters: The bill requires the VA to provide the cost of emergency treatment for enrolled veterans until they are transferred to a VA or other Federal medical facility.

S. 2162 establishes a three year pilot program in five Veterans Integrated Service Networks (VISNs) for veterans in highly rural areas to receive healthcare from non-VA providers. This bill also establishes 4-6 epilepsy centers of excellence, and authorizes \$6 million for each of the years 2009-2013, as well as creates a National Coordinator for Epilepsy Programs.

Under this legislation, all hospice care provided by the VA is exempt from co-payment requirements.

Pain Care: This bill requires the VA to develop a comprehensive plan on pain management, to be periodically updated in consultation with experts. S. 2162 requires an annual report to Congress on the implementation of the pain care policy.

Homeless Veterans Matters: The bill increases the authorization for the homeless grant and per diem program from \$130 to \$150 million. The VA is required to ensure that domiciliary care programs for women veterans are adequate with respect to capacity and safety.



S. 2162 requires the VA to provide grants to very low-income families living in permanent housing for such services as outreach, case management, and assistance in obtaining VA benefits. The bill authorizes \$15 million in 2009, \$20 million in 2010, and \$25 million in 2011 for this purpose.

Medical Facilities: This bill authorizes the VA to carry out various medical facility projects and leasing, and authorizes funding for such. S. 2162 also requires the VA to annually submit a report to Congress regarding VA outpatient clinics.

Extension of Authorities: The bill extends certain authorities of the VA including:

- The authority to provide non-institutional extended care services;
- The authority to establish research corporations;
- The authority to conduct a pilot program to improve VA assistance for caregivers in home-based settings; and
- The authority to provide nursing care to veterans with 70 percent service-connected disability or those requiring such care through December 31, 2013.

BACKGROUND

The Department of Veterans' Affairs (VA) operates medical facilities to deliver health care benefits to our nation's veterans. Their health care system is made up of more than 153 medical centers, 732 community-based outpatient clinics, 135 nursing homes, 47 residential rehabilitation treatment programs, 232 Veterans Centers, and 121 comprehensive home-care programs. According to the most recent data released by the VA, approximately 5.5 million people received care in a VA health care facility during 2006. This represents a 29 percent increase in the number of patients treated since 2001. The Department of Veterans Affairs employs some 263,000 personnel.

According to the VA, there were over 24 million veterans in America in 2007, with over 3.58 million veterans and survivors receiving compensation and benefits under programs administered by the VA for 2006. This included more than 2.7 million veterans receiving service-related disability benefits and over 325,000 surviving relatives receiving service connected benefits.

The VA currently offers a range of benefits to the surviving spouse, dependent children and parents of deceased veteran's military service members. Benefits available for surviving spouses include a death pension, home loan guarantees, bereavement counseling, educational assistance, as well as certain medical and veteran burial benefits.

COST

The Congressional Budget Office (CBO) has not produced a cost estimate for S. 2162, as amended, as of September 23, 2008.

STAFF CONTACT

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