

**AMENDMENT IN THE NATURE OF A SUBSTITUTE  
TO H.R. 5619  
OFFERED BY M . \_\_\_\_\_**

Strike all after the enacting clause and insert the following:

**1 SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Suicide Prevention  
3 Act”.

**4 SEC. 2. SYNDROMIC SURVEILLANCE OF SELF-HARM BEHAV-  
5 IORS PROGRAM.**

6 Title III of the Public Health Service Act is amended  
7 by inserting after section 317T of such Act (42 U.S.C.  
8 247b–22) the following:

**9 “SEC. 317U. SYNDROMIC SURVEILLANCE OF SELF-HARM BE-  
10 HAVIORS PROGRAM.**

11 “(a) IN GENERAL.—The Secretary shall award  
12 grants to State, local, Tribal, and territorial public health  
13 departments for the expansion of surveillance of self-harm.

14 “(b) DATA SHARING BY GRANTEES.—As a condition  
15 of receipt of such grant under subsection (a), each grantee  
16 shall agree to share with the Centers for Disease Control  
17 and Prevention in real time, to the extent feasible and as

1 specified in the grant agreement, data on suicides and self-  
2 harm for purposes of—

3 “(1) tracking and monitoring self-harm to in-  
4 form response activities to suicide clusters;

5 “(2) informing prevention programming for  
6 identified at-risk populations; and

7 “(3) conducting or supporting research.

8 “(c) DISAGGREGATION OF DATA.—The Secretary  
9 shall provide for the data collected through surveillance  
10 of self-harm under subsection (b) to be disaggregated by  
11 the following categories:

12 “(1) Nonfatal self-harm data of any intent.

13 “(2) Data on suicidal ideation.

14 “(3) Data on self-harm where there is no evi-  
15 dence, whether implicit or explicit, of suicidal intent.

16 “(4) Data on self-harm where there is evidence,  
17 whether implicit or explicit, of suicidal intent.

18 “(5) Data on self-harm where suicidal intent is  
19 unclear based on the available evidence.

20 “(d) PRIORITY.—In making awards under subsection  
21 (a), the Secretary shall give priority to eligible entities that  
22 are—

23 “(1) located in a State with an age-adjusted  
24 rate of nonfatal suicidal behavior that is above the  
25 national rate of nonfatal suicidal behavior, as deter-

1       mined by the Director of the Centers for Disease  
2       Control and Prevention;

3           “(2) serving an Indian Tribe (as defined in sec-  
4       tion 4 of the Indian Self-Determination and Edu-  
5       cation Assistance Act) with an age-adjusted rate of  
6       nonfatal suicidal behavior that is above the national  
7       rate of nonfatal suicidal behavior, as determined  
8       through appropriate mechanisms determined by the  
9       Secretary in consultation with Indian Tribes; or

10          “(3) located in a State with a high rate of cov-  
11       erage of statewide (or Tribal) emergency department  
12       visits, as determined by the Director of the Centers  
13       for Disease Control and Prevention.

14          “(e) GEOGRAPHIC DISTRIBUTION.—In making  
15       grants under this section, the Secretary shall make an ef-  
16       fort to ensure geographic distribution, taking into account  
17       the unique needs of rural communities, including—

18           “(1) communities with an incidence of individ-  
19       uals with serious mental illness, demonstrated suici-  
20       dal ideation or behavior, or suicide rates that are  
21       above the national average, as determined by the As-  
22       sistant Secretary for Mental Health and Substance  
23       Use;

24           “(2) communities with a shortage of prevention  
25       and treatment services, as determined by the Assist-

1       ant Secretary for Mental Health and Substance Use  
2       and the Administrator of the Health Resources and  
3       Services Administration; and

4               “(3) other appropriate community-level factors  
5       and social determinants of health such as income,  
6       employment, and education.

7       “(f) PERIOD OF PARTICIPATION.—To be selected as  
8       a grant recipient under this section, a State, local, Tribal,  
9       or territorial public health department shall agree to par-  
10      ticipate in the program for a period of not less than 4  
11      years.

12       “(g) TECHNICAL ASSISTANCE.—The Secretary shall  
13      provide technical assistance and training to grantees for  
14      collecting and sharing the data under subsection (b).

15       “(h) DATA SHARING BY HHS.—Subject to sub-  
16      section (b), the Secretary shall, with respect to data on  
17      self-harm that is collected pursuant to this section, share  
18      and integrate such data through—

19               “(1) the National Syndromic Surveillance Pro-  
20      gram’s Early Notification of Community Epidemics  
21      (ESSENCE) platform (or any successor platform);

22               “(2) the National Violent Death Reporting Sys-  
23      tem, as appropriate; or

24               “(3) another appropriate surveillance program,  
25      including such a program that collects data on sui-

1       icides and self-harm among special populations, such  
2       as members of the military and veterans.

3       “(i) RULE OF CONSTRUCTION REGARDING APPLICA-  
4 BILITY OF PRIVACY PROTECTIONS.—Nothing in this sec-  
5 tion shall be construed to limit or alter the application  
6 of Federal or State law relating to the privacy of informa-  
7 tion to data or information that is collected or created  
8 under this section.

9       “(j) REPORT.—

10           “(1) SUBMISSION.—Not later than 3 years  
11 after the date of enactment of this Act, the Sec-  
12 retary shall evaluate the suicide and self-harm  
13 syndromic surveillance systems at the Federal,  
14 State, and local levels and submit a report to Con-  
15 gress on the data collected under subsections (b) and  
16 (c) in a manner that prevents the disclosure of indi-  
17 vidually identifiable information, at a minimum, con-  
18 sistent with all applicable privacy laws and regula-  
19 tions.

20           “(2) CONTENTS.—In addition to the data col-  
21 lected under subsections (b) and (c), the report  
22 under paragraph (1) shall include—

23                   “(A) challenges and gaps in data collection  
24                   and reporting;

1           “(B) recommendations to address such  
2           gaps and challenges; and

3           “(C) a description of any public health re-  
4           sponses initiated at the Federal, State, or local  
5           level in response to the data collected.

6           “(k) AUTHORIZATION OF APPROPRIATIONS.—To  
7           carry out this section, there are authorized to be appro-  
8           priated \$20,000,000 for each of fiscal years 2021 through  
9           2025.”.

10 **SEC. 3. GRANTS TO PROVIDE SELF-HARM AND SUICIDE**  
11 **PREVENTION SERVICES.**

12           Part B of title V of the Public Health Service Act  
13           (42 U.S.C. 290aa et seq.) is amended by adding at the  
14           end the following:

15 **“SEC. 520N. GRANTS TO PROVIDE SELF-HARM AND SUICIDE**  
16 **PREVENTION SERVICES.**

17           “(a) IN GENERAL.—The Secretary of Health and  
18           Human Services shall award grants to hospital emergency  
19           departments to provide self-harm and suicide prevention  
20           services.

21           “(b) ACTIVITIES SUPPORTED.—

22           “(1) IN GENERAL.—A hospital emergency de-  
23           partment awarded a grant under subsection (a) shall  
24           use amounts under the grant to implement a pro-  
25           gram or protocol to better prevent suicide attempts

1 among hospital patients after discharge, which may  
2 include—

3 “(A) screening patients for self-harm and  
4 suicide in accordance with the standards of  
5 practice described in subsection (e)(1) and  
6 standards of care established by appropriate  
7 medical and advocacy organizations;

8 “(B) providing patients short-term self-  
9 harm and suicide prevention services in accord-  
10 ance with the results of the screenings de-  
11 scribed in subparagraph (A); and

12 “(C) referring patients, as appropriate, to  
13 a health care facility or provider for purposes of  
14 receiving long-term self-harm and suicide pre-  
15 vention services, and providing any additional  
16 follow up services and care identified as appro-  
17 priate as a result of the screenings and short-  
18 term self-harm and suicide prevention services  
19 described in subparagraphs (A) and (B).

20 “(2) USE OF FUNDS TO HIRE AND TRAIN  
21 STAFF.—Amounts awarded under subsection (a)  
22 may be used to hire clinical social workers, mental  
23 and behavioral health care professionals, and sup-  
24 port staff as appropriate, and to train existing staff

1 and newly hired staff to carry out the activities de-  
2 scribed in paragraph (1).

3 “(c) GRANT TERMS.—A grant awarded under sub-  
4 section (a)—

5 “(1) shall be for a period of 3 years; and

6 “(2) may be renewed subject to the require-  
7 ments of this section.

8 “(d) APPLICATIONS.—A hospital emergency depart-  
9 ment seeking a grant under subsection (a) shall submit  
10 an application to the Secretary at such time, in such man-  
11 ner, and accompanied by such information as the Sec-  
12 retary may require.

13 “(e) STANDARDS OF PRACTICE.—

14 “(1) IN GENERAL.—Not later than 180 days  
15 after the date of the enactment of this section, the  
16 Secretary shall develop standards of practice for  
17 screening patients for self-harm and suicide for pur-  
18 poses of carrying out subsection (b)(1)(C).

19 “(2) CONSULTATION.—The Secretary shall de-  
20 velop the standards of practice described in para-  
21 graph (1) in consultation with individuals and enti-  
22 ties with expertise in self-harm and suicide preven-  
23 tion, including public, private, and non-profit enti-  
24 ties.

25 “(f) REPORTING.—



1           “(1) REPORTS TO THE SECRETARY.—

2                   “(A) IN GENERAL.—A hospital emergency  
3 department awarded a grant under subsection  
4 (a) shall, at least quarterly for the duration of  
5 the grant, submit to the Secretary a report  
6 evaluating the activities supported by the grant.

7                   “(B) MATTERS TO BE INCLUDED.—The  
8 report required under subparagraph (A) shall  
9 include—

10                           “(i) the number of patients receiv-  
11 ing—

12                                   “(I) screenings carried out at the  
13 hospital emergency department;

14                                   “(II) short-term self-harm and  
15 suicide prevention services at the hos-  
16 pital emergency department; and

17                                   “(III) referrals to health care fa-  
18 cilities for the purposes of receiving  
19 long-term self-harm and suicide pre-  
20 vention;

21                                   “(ii) information on the adherence of  
22 the hospital emergency department to the  
23 standards of practice described in sub-  
24 section (f)(1); and

1                   “(iii) other information as the Sec-  
2                   retary determines appropriate to evaluate  
3                   the use of grant funds.

4                   “(2) REPORTS TO CONGRESS.—Not later than  
5                   2 years after the date of the enactment of the Sui-  
6                   cide Prevention Act, and biennially thereafter, the  
7                   Secretary shall submit to the Committee on Health,  
8                   Education, Labor and Pensions of the Senate and  
9                   the Committee on Energy and Commerce of the  
10                  House of Representatives a report on the grant pro-  
11                  gram under this section, including—

12                   “(A) a summary of reports received by the  
13                   Secretary under paragraph (1); and

14                   “(B) an evaluation of the program by the  
15                   Secretary.

16                  “(g) AUTHORIZATION OF APPROPRIATIONS.—To  
17                  carry out this section, there are authorized to be appro-  
18                  priated \$30,000,000 for each of fiscal years 2021 through  
19                  2025.”.

