H. R. 115TH CONGRESS
1ST SESSION

To amend title 38, United States Code, to direct the Secretary of Veterans Affairs to furnish mental health care to veterans at community or non-profit mental health providers participating in the Veterans Choice Program, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

Mr. GALLAGHER introduced the following bill; which was referred to the Committee on ________________

A BILL

To amend title 38, United States Code, to direct the Secretary of Veterans Affairs to furnish mental health care to veterans at community or non-profit mental health providers participating in the Veterans Choice Program, 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.
4 This Act may be cited as the “__________ Act of
5 2017”. 
SEC. 2. PROVISION OF MENTAL HEALTH CARE TO VETERANS BY CERTAIN MENTAL HEALTH PROVIDERS PARTICIPATING IN THE VETERANS CHOICE PROGRAM.

(a) In general.—Section 1720F of title 38, United States Code, is amended—

(1) by redesignating subsection (k) as subsection (l); and

(2) by inserting after subsection (j) the following new subsection (k):

“(k) ACCESS TO SAME-DAY NON-DEPARTMENT MENTAL HEALTH CARE.—(1) The Secretary shall furnish to an eligible veteran experiencing a mental health condition covered medical services at a community or non-profit mental health provider pursuant to agreements entered into under section 101 of the Veterans Access, Choice, and Accountability Act of 2014 (Public Law 113–146; 38 U.S.C. 1701 note), or such successor authority.

“(2) The Secretary may not require that a veteran receive a referral before receiving covered medical services under this subsection.

“(3)(A) An eligible veteran experiencing a mental health condition who receives covered medical services under this subsection may not receive more than eight treatment sessions as part of a single episode of care. The Secretary may approve additional treatment sessions for
such veteran pursuant to a treatment plan approved by the Secretary.

“(B) In providing covered medical services to a veteran under this subsection, a community or non-profit mental health provider may not prescribe opioids to the veteran.

“(4)(A) The Secretary shall administer this subsection through an entity to which the Secretary has entered into a contract for the purposes of managing the operations of networks and for the delivery of care pursuant to section 101 of the Veterans Access, Choice, and Accountability Act of 2014 (Public Law 113–146; 38 U.S.C. 1701 note), or such successor authority.

“(B) The Secretary shall ensure that a community or non-profit mental health provider that provides covered medical services to a veteran under this subsection is managed and credentialed by the entity specified in subparagraph (A).

“(C) The Secretary shall pay a community or non-profit mental health provider for covered medical services provided to a veteran under this subsection pursuant to agreements entered into under section 101 of the Veterans Access, Choice, and Accountability Act of 2014 (Public Law 113–146; 38 U.S.C. 1701 note), or such successor authority. The community or non-profit mental health
provider may not charge the veteran for such covered medical services, regardless of the actions of the Secretary.

“(D) A community or non-profit mental health provider shall determine the eligibility of a veteran to receive covered medical services under this subsection.

“(E) The Secretary shall maintain a toll-free hotline to direct an eligible veteran experiencing a mental health condition to a community or non-profit mental health provider that provides covered medical services under this subsection.

“(5) The authority to carry out this subsection shall terminate on January 1, 2022.

“(6) In this subsection:

“(A) The term ‘covered medical services’ means evidence-based, outpatient mental health care services provided on the same day such services are requested.

“(B) The term ‘eligible veteran experiencing a mental health condition’ means a veteran who—

“(i) is enrolled in the patient enrollment system under section 1705 of title 38, United States Code; and

“(ii) is experiencing a mental health condition that the Secretary determines appropriate to be covered by this subsection.”.
(c) Reports.—

(1) Initial Report.—Not later than one year after the date of the enactment of this Act, the Secretary of Veterans Affairs shall submit to the Committees on Veterans’ Affairs of the House of Representatives and the Senate an initial report on the implementation of subsection (k) of section 1720F of title 38, United States Code, as added by subsection (a). Such report shall include—

(A) the name of each community or non-profit mental health provider that provides covered medical services under such subsection;

(B) the number of veterans who received covered medical services under such subsection during the period covered by the report;

(C) the average number of treatment sessions each such veteran received as part of the episode of care for which the veteran sought such medical services; and

(D) how many such veterans received more than eight treatment sessions pursuant to a treatment plan approved by the Secretary.

(2) Final Report.—Not later than June 1, 2021, the Secretary shall submit to the Committees on Veterans’ Affairs of the House of Representatives
and the Senate a final report on the implementation of subsection (k) of section 1720F of title 38, United States Code, as added by subsection (a). Such report shall include—

(A) updates to the report submitted under paragraph (1); and

(B) the recommendations of the Secretary with respect to extending or making permanent the authority under such subsection.