

118TH CONGRESS
1ST SESSION

S. _____

To require the Secretary of Veterans Affairs to prepare an annual report on suicide prevention, and for other purposes.

IN THE SENATE OF THE UNITED STATES

Mr. TESTER (for himself and Mr. BOOZMAN) introduced the following bill; which was read twice and referred to the Committee on

A BILL

To require the Secretary of Veterans Affairs to prepare an annual report on suicide prevention, 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 “Not Just a Number
5 Act”.

6 **SEC. 2. NATIONAL VETERAN SUICIDE PREVENTION AN-**
7 **NUAL REPORT.**

8 (a) IN GENERAL.—Not later than 18 months after
9 the date of the enactment of this Act, and not later than
10 September 30 of each year thereafter, the Secretary of

1 Veterans Affairs shall submit to the appropriate commit-
2 tees of Congress and publish on a publicly available
3 website of the Department of Veterans Affairs a report
4 to be known as the “National Veteran Suicide Prevention
5 Annual Report”.

6 (b) EXTENSION.—

7 (1) IN GENERAL.—If the Secretary requires an
8 extension of the deadline for a report under sub-
9 section (a), the Secretary shall submit to the appro-
10 priate committees of Congress a written request for
11 such an extension.

12 (2) ELEMENTS.—Each written request under
13 paragraph (1) for an extension for a report shall in-
14 clude the following:

15 (A) The rationale for the delay in submit-
16 ting the report.

17 (B) An explanation of the need for an ex-
18 tension.

19 (C) A proposed amended date for the sub-
20 mittal and publication of the report.

21 (c) BRIEFING.—Before submitting a report under
22 subsection (a), the Secretary shall brief the appropriate
23 committees of Congress on the report.

24 (d) ELEMENTS OF REPORT.—

1 (1) IN GENERAL.—Each report under sub-
2 section (a) shall include the findings of the national
3 analysis of veteran suicide rates for the latest year
4 data is available and shall include trends and com-
5 parisons to previous years.

6 (2) ADDITIONAL ELEMENTS.—Each report
7 under subsection (a) shall include, for the year cov-
8 ered by the report, the following:

9 (A) Suicide rates of veterans disaggregated
10 by age, gender, and race or ethnicity.

11 (B) Trends in suicide rates of veterans
12 compared to engagement of those veterans with
13 health care from the Veterans Health Adminis-
14 tration, including an examination of trends in
15 suicide rates or deaths among—

16 (i) veterans who have recently received
17 health care from the Veterans Health Ad-
18 ministration as compared to veterans who
19 have never received health care from the
20 Veterans Health Administration;

21 (ii) veterans who are enrolled in the
22 patient enrollment system of the Depart-
23 ment of Veterans Affairs under section
24 1705(a) of title 38, United States Code, as

1 compared to veterans who have never en-
2 rolled in such system;

3 (iii) veterans who have recently used
4 services from a Vet Center as compared to
5 veterans who have never used such serv-
6 ices;

7 (iv) veterans who have a diagnosis of
8 substance use disorder; and

9 (v) other groups of veterans relating
10 to engagement with health care from the
11 Veterans Health Administration, as the
12 Secretary considers practicable.

13 (C) Trends in suicide rates of veterans
14 compared to engagement of those veterans with
15 benefits from the Veterans Benefits Administra-
16 tion, including an examination of trends in sui-
17 cide rates or deaths among—

18 (i) veterans who are currently using,
19 have previously used, or have never used
20 educational assistance under the laws ad-
21 ministered by the Secretary;

22 (ii) veterans who are currently receiv-
23 ing, have previously received, or have never
24 received services or assistance under chap-
25 ter 31 of title 38, United States Code;

1 (iii) with respect to compensation
2 under chapter 11 of such title—

3 (I) veterans who were recipients
4 of such compensation as compared to
5 veterans who never applied for such
6 compensation prior to death;

7 (II) veterans who had a claim de-
8 nied for such compensation prior to
9 death;

10 (III) veterans who had a pending
11 claim for such compensation at time
12 of death; and

13 (IV) veterans who had an entitle-
14 ment for such compensation reduced
15 prior to death;

16 (iv) veterans who are currently receiv-
17 ing or have never received pension under
18 chapter 15 of title 38, United States Code;

19 (v) veterans who are currently using,
20 have previously used, or have never used
21 programs or services provided by the
22 Homeless Programs Office of the Depart-
23 ment, including an examination of trends
24 in suicide rates or deaths among veterans
25 who made contact with such office but

1 were denied or deemed ineligible for any
2 such program or service;

3 (vi) with respect to housing loans
4 guaranteed by the Secretary under chapter
5 37 of title 38, United States Code—

6 (I) veterans who applied for such
7 a loan, whether their application was
8 accepted or not;

9 (II) veterans who are current re-
10 cipients of, were previously recipients
11 of, or have never received such a loan;
12 and

13 (III) veterans who were turned
14 down for such a loan by a lender;

15 (vii) with respect to financial hard-
16 ships—

17 (I) veterans facing health care
18 debts;

19 (II) veterans owing debts to the
20 Department;

21 (III) veterans owing debts to for-
22 profit businesses assisting veterans
23 with claims for benefits under the
24 laws administered by the Secretary;
25 and

1 (IV) veterans facing foreclosure
2 or bankruptcy;

3 (viii) veterans who were involved in a
4 veterans treatment court program, whether
5 they graduated successfully or not; and

6 (ix) veterans who were successfully
7 contacted, unsuccessfully contacted, or
8 never contacted by the Department
9 through the Solid Start program under
10 section 6320 of title 38, United States
11 Code.

12 (3) STRATEGY AND RECOMMENDATIONS.—

13 (A) INITIAL REPORT.—The initial report
14 under subsection (a) shall include a strategy
15 and recommendations developed by the Sec-
16 retary of Veterans Affairs, in collaboration with
17 the Director of the Centers for Disease Control
18 and Prevention and the Secretary of Defense,
19 for—

20 (i) improving data collection at the
21 State and local levels to accurately capture
22 suicide deaths of veterans;

23 (ii) improving the timeliness, efficacy,
24 and standardization of data reporting on
25 suicide deaths of veterans at the Federal

1 level, including by the Centers for Disease
2 Control and Prevention, the Department of
3 Defense, and the Department of Veterans
4 Affairs;

5 (iii) improving the timeliness of identi-
6 fication and analysis of suicide deaths of
7 veterans by Federal agencies, including the
8 Centers for Disease Control and Preven-
9 tion, the Department of Defense, and the
10 Department of Veterans Affairs; and

11 (iv) any other necessary process im-
12 provements for improving the timeliness,
13 efficacy, and standardization of reporting
14 of data relating to suicide deaths of vet-
15 erans, particularly with respect to the an-
16 nual report under this section.

17 (B) SUBSEQUENT REPORTS.—Each report
18 after the initial report under subsection (a)
19 shall include updates on actions taken to meet
20 the strategy and recommendations developed
21 under subparagraph (A).

22 (e) DEFINITIONS.—In this section:

23 (1) APPROPRIATE COMMITTEES OF CON-
24 GRESS.—The term “appropriate committees of Con-
25 gress” means the Committee on Veterans’ Affairs of

1 the Senate and the Committee on Veterans' Affairs
2 of the House of Representatives.

3 (2) VET CENTER.—The term “Vet Center”
4 means a center for readjustment counseling and re-
5 lated mental health services for veterans under sec-
6 tion 1712A of title 38, United States Code.

7 **SEC. 3. REPORT ON ADDITIONAL BENEFITS AND SERVICES**
8 **FROM DEPARTMENT OF VETERANS AFFAIRS**
9 **TO PREVENT VETERAN SUICIDE.**

10 (a) IN GENERAL.—Not later than three years after
11 the date of the enactment of this Act, the Secretary of
12 Veterans Affairs shall submit to the Committee on Vet-
13 erans' Affairs of the Senate and the Committee on Vet-
14 erans' Affairs of the House of Representatives and publish
15 on a publicly available website of the Department of Vet-
16 erans Affairs a report that analyzes which benefits and
17 services from the Department, including the Veterans
18 Benefits Administration, have the greatest impact on pre-
19 vention of suicide among veterans, including recommenda-
20 tions for potential expansion of services and benefits to
21 reduce the number of veteran suicides.

22 (b) ASSESSMENT OF SOLID START PROGRAM.—The
23 report required by subsection (a) shall include an analysis
24 of the effectiveness of the Solid Start program under sec-

1 tion 6320 of title 38, United States Code, on prevention
2 of suicide among veterans.

3 **SEC. 4. TOOLKIT FOR STATE AND LOCAL CORONERS AND**
4 **MEDICAL EXAMINERS ON BEST PRACTICES**
5 **FOR IDENTIFYING AND REPORTING ON SUI-**
6 **CIDE DEATHS OF VETERANS.**

7 (a) IN GENERAL.—The Secretary of Veterans Af-
8 fairs, in collaboration with the Director of the Centers for
9 Disease Control and Prevention, shall develop a toolkit for
10 State and local coroners and medical examiners that con-
11 tains best practices for—

12 (1) accurately identifying and reporting suicide
13 deaths of veterans, including how to identify veteran
14 status; and

15 (2) reporting such deaths to the Centers for
16 Disease Control and Prevention and other applicable
17 entities.

18 (b) AVAILABILITY.—Not later than two years after
19 the date of the enactment of this Act, the Secretary shall
20 make the toolkit developed under subsection (a) available
21 on a publicly available website of the Department of Vet-
22 erans Affairs.

23 (c) OUTREACH.—The Secretary, in collaboration with
24 the Director of the Centers for Disease Control and Pre-
25 vention, shall conduct outreach to appropriate State and

1 local agencies to promote the availability and use of the
2 toolkit developed under subsection (a).

3 **SEC. 5. STUDY ON FEASIBILITY AND ADVISABILITY OF CRE-**
4 **ATING A SUICIDE PREVENTION OFFICE OF**
5 **THE DEPARTMENT OF VETERANS AFFAIRS.**

6 (a) IN GENERAL.—After the submittal by the Comp-
7 troller General of the United States to the Committee on
8 Veterans’ Affairs of the Senate and the Committee on Vet-
9 erans’ Affairs of the House of Representatives of the man-
10 agement review required under section 403 of the Com-
11 mander John Scott Hannon Veterans Mental Health Care
12 Improvement Act of 2019 (Public Law 116–171; 134
13 Stat. 810), which required a management review of the
14 mental health and suicide prevention services provided by
15 the Department of Veterans Affairs, the Secretary of Vet-
16 erans Affairs shall—

17 (1) review the findings and recommendations of
18 the management review; and

19 (2) conduct a study on the feasibility and advis-
20 ability of creating a suicide prevention office of the
21 Department of Veterans Affairs at the level of the
22 Office of the Secretary that would elevate suicide
23 prevention as a top priority across the entire De-
24 partment, including with respect to the work and
25 programs of the Veterans Benefits Administration

1 and under partnerships with other entities, including
2 other Federal agencies and non-governmental part-
3 ners.

4 (b) REPORT TO CONGRESS.—

5 (1) IN GENERAL.—Not later than two years
6 after the submittal by the Comptroller General of
7 the management review described in subsection (a),
8 the Secretary shall submit to the Committee on Vet-
9 erans' Affairs of the Senate and the Committee on
10 Veterans' Affairs of the House of Representatives a
11 report summarizing—

12 (A) any actions planned or taken, includ-
13 ing reorganizations or changes to reporting or
14 governance structures, in response to the man-
15 agement review, including any completion dates
16 or targeted completion dates for any such ac-
17 tions; and

18 (B) the results of the study required under
19 subsection (a)(2), which shall include an exam-
20 ination of the considerations for creating a sui-
21 cide prevention office of the Department of Vet-
22 erans Affairs at the level of the Office of the
23 Secretary, including—

24 (i) benefits and potential drawbacks;

1 (ii) projected costs and staffing needs,
2 including new full-time equivalent employ-
3 ees and transferred full-time equivalent
4 employees; and

5 (iii) suggested organizational and
6 leadership structure and principal activities
7 and functions of the suicide prevention of-
8 fice.

9 (2) RECOMMENDATIONS REGARDING ORGANIZA-
10 TION AND LEADERSHIP STRUCTURE.—In providing
11 suggestions for organizational and leadership struc-
12 ture under the report under paragraph (1)(B)(iii),
13 the Secretary shall—

14 (A) assess whether the suicide prevention
15 office of the Department should be led by a po-
16 litical appointee, a career employee in a Senior
17 Executive Service position (as defined in section
18 3132 of title 5, United States Code) or equiva-
19 lent, or another position type; and

20 (B) detail which functions would remain in
21 the current Office of Mental Health and Suicide
22 Prevention of the Veterans Health Administra-
23 tion, including an assessment of where manage-
24 ment of the Veterans Crisis Line under section

1 1720F(h) of title 38, United States Code,
2 should reside.