

BILL ANALYSIS

Senate Research Center
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C.S.S.B. 578
By: Lucio
Veteran Affairs & Border Security
3/20/2017
Committee Report (Substituted)

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

S.B. 578 originates from the findings of the Senate Committee on Veteran Affairs and Military Installations (VAMI) 2016 interim hearings and interim report. As documented in VAMI's interim report to the 85th Texas Legislature, "as Texas is home to nearly 1.7 million veterans, learning more about Texas-specific suicide risks, attempts, and completions is of great value to the state. According to the data compiled by the Texas Health and Human Services Commission that was presented to the Senate VAMI Committee, there have been 11,413 reported suicides from 2010 to 2013." The Interim Report documented that the new updated number of veteran suicides per day is 20. Additionally, "Veterans account for 18 percent of all suicide deaths among U.S. adults; veterans are at a 21 percent greater risk of suicide than civilian counterparts; since 2001, the rate of suicide by veterans using VA services increased by 8.8 percent, while the rate among those who did not use the VA increased by 38.6 percent..."

S.B. 578 attempts to strengthen the state's resolve in addressing veteran suicides by directing the development of a comprehensive action plan to increase access to and availability of professional veteran health services to prevent veteran suicides. S.B. 578 requires specific short-term and long-term recommendations to the legislature and the governor on policy initiatives and reforms necessary to implement the action plan. (Original Author's / Sponsor's Statement of Intent)

C.S.S.B. 578 amends current law relating to the creation by the Health and Human Services Commission of a veteran suicide prevention action plan.

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Subchapter B, Chapter 531, Government Code, by adding Section 531.0999, as follows:

Sec. 531.0999. VETERAN SUICIDE PREVENTION ACTION PLAN. (a) Requires the Health and Human Services Commission (HHSC), in collaboration with the Texas Coordinating Council for Veterans Services, the United States Department of Veterans Affairs, the Service Members, Veterans, and Their Families Technical Assistance Center Implementation Academy of the Substance Abuse and Mental Health Services Administration of the United States Department of Health and Human Services, veteran advocacy groups, medical providers, and any other organization or interested party HHSC considers appropriate, to develop a comprehensive action plan to increase access to and availability of professional veteran health services to prevent veteran suicides.

(b) Requires that the plan:

(1) identify opportunities for raising awareness of and providing resources for veteran suicide prevention;

- (2) identify opportunities to increase access to veteran mental health services;
- (3) identify funding resources to provide accessible, affordable veteran mental health services;
- (4) provide measures to expand public-private partnerships to ensure access to quality, timely mental health services;
- (5) provide for proactive outreach measures to reach veterans needing care;
- (6) provide for peer-to-peer service coordination, including training, certification, recertification, and continuing education for peer coordinators; and
- (7) address suicide prevention awareness, measures, and training regarding veterans involved in the justice system.

(c) Requires HHSC to make specific short-term and long-term statutory, administrative, and budget-related recommendations to the legislature and the governor regarding the policy initiatives and reforms necessary to implement the action plan developed. Requires that the short-term recommendations include a plan for state implementation beginning not later than September 1, 2019. Requires that the initiatives and reforms in the short-term plan be fully implemented by September 1, 2021. Requires the long-term recommendations to include a plan for state implementation beginning not later than September 1, 2021. Requires that the initiatives and reforms in the long-term plan be fully implemented by September 1, 2027.

(d) Requires HHSC to include in its strategic plan, under Chapter 2056 (Strategic Plans of Operation), the plans for implementation of the short-term and long-term recommendations under Subsection (c).

(e) Provides that this section expires September 1, 2027.

SECTION 2. Effective date: upon passage or September 1, 2017.