SUBJECT: Making revisions to the mental health program for veterans

COMMITTEE: Public Health — favorable, without amendment

VOTE: 9 ayes — Price, Sheffield, Arévalo, Coleman, Collier, Cortez, Guerra,

Klick, Oliverson

0 nays

2 absent — Burkett, Zedler

SENATE VOTE: On final passage, March 28 — 31-0

WITNESSES: For — (*Registered, but did not testify*: Dennis Borel, Coalition of Texans

with Disabilities; Eric Woomer, Federation of Texas Psychiatry; Gyl Switzer, Mental Health America of Texas; Sebastien Laroche, Methodist

Healthcare Ministries of South Texas, Inc.; Greg Hansch, National Alliance on Mental Illness (NAMI) Texas; Albert Gest, Marita Rafael, and Judy Vanderheiden, Neuces County Medical Society; Jim Brennan, Texas Coalition of Veterans Organizations; Lee Johnson, Texas Council

of Community Centers; Joel Ballew, Texas Health Resources; Sara

Gonzalez, Texas Hospital Association; David White, Texas Psychological Association; Aidan Utzman, United Ways of Texas; Romana Harding;

Bill Kelberlau; Aman Patel; David Vanderheiden)

Against — None

On — Tim Keesling, Texas Veterans Commission; (Registered, but did

not testify: Trina Ita, Health and Human Services Commission)

BACKGROUND: Health and Safety Code, ch. 1001, subch. I establishes the mental health

program for veterans. The program must provide certain services, including access to licensed mental health professionals for volunteer coordinators and peers, training approved by the Department of State Health Services (DSHS) for peers, and recruitment, retention, and

screening of community-based therapists.

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A volunteer coordinator is a person who recruits and retains veterans, peers, and volunteers to participate in the mental health program for veterans and related activities.

Government Code, ch. 434, subch. H requires the Texas Veterans Commission and DSHS to coordinate to administer the mental health program for veterans. For the program, the commission is required to recruit, train, and communicate with community-based therapists, community-based organizations, and faith-based organizations, among other services.

DIGEST:

SB 27 would require the Texas Veterans Commission and Department of State Health Services (DSHS) to identify, rather than recruit, community-based licensed mental health professionals, rather than therapists, for the mental health program for veterans. The commission also would have to identify, rather than recruit, community-based organizations and faith-based organizations.

The bill would replace "volunteer coordinator" with "peer service coordinator" in provisions that relate to the program in the Health and Safety and Government codes. A "peer service coordinator" would mean a person who recruited and retained veterans, peers, and volunteers to participate in the mental health program for veterans and related activities.

The program would have to include DSHS-approved training and technical assistance for peer service coordinators and licensed mental health professionals.

The bill would repeal provisions that established a grant program through which DSHS could award grants to regional and local organizations for the delivery of programs or services related to the program.

The bill would take effect September 1, 2017.

SUPPORTERS

SB 27 would increase access to essential mental health services and

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SAY:

support to veterans. Currently, too few communities have dedicated professionals with the appropriate knowledge or licensure to provide mental health services to veterans. By providing for the addition and training of community-based licensed mental health professionals, the bill would broaden who could provide services in the mental health program, allowing for clinical interventions for more Texas veterans and their families. By increasing access to preventive care the bill would reduce the number of veterans who seek more costly care in the emergency department of a hospital, decreasing the overall cost associated with military-related traumas.

OPPONENTS

No apparent opposition.

SAY: