

# United States Senate

WASHINGTON, DC 20510

March 10, 2017

The Honorable David Shulkin  
Secretary of Veterans Affairs  
810 Vermont Avenue, NW  
Washington, DC 20420

Dear Secretary Shulkin:

We write today to request further information related to your recent announcement that the Department of Veterans Affairs (VA) will provide mental health care services for veterans who have an other-than-honorable discharge characterization. We also welcome this intention to enable veterans who urgently need access to the Department of Veterans Affairs' world-class mental health providers to receive that care.

We urge you over the next few months to engage widely and frequently with all veterans' community stakeholders on your plan. Ensuring there is clarity on VA's course of action on this matter is essential to veterans and their loved ones understanding what services VA will provide and that individuals in crisis are not further disrupted by bureaucratic obstacles. To that end, we ask that you please provide us with your plan moving forward in implementing this initiative, to include your stakeholder engagement strategy and milestones, so that those with oversight responsibility will be able to follow VA's progress. We are sure you agree that including the broadest range of the veterans' community in this process will help ensure that VA employees will be able to compassionately care for these veterans and accurately provide information to all concerned parties. We urge you to ensure that all relevant Department procedures and policies are updated in timely fashion.

Identifying the specific population of eligible veterans is essential for Congress to understand the scope of your plan. We understand from your staff during a March 8, 2017 teleconference that this care will be provided for those veterans who are in a moment of crisis, but we note from your March 8, 2017 press release that the care will assist veterans "who are in mental health distress and may be at risk for suicide or other adverse behaviors." We also note your testimony on March 7, 2017 to the House Committee on Veterans' Affairs, "We are going to go and start providing mental health care for those that are other-than-honorably discharged for urgent mental health...we're going to start doing that now."

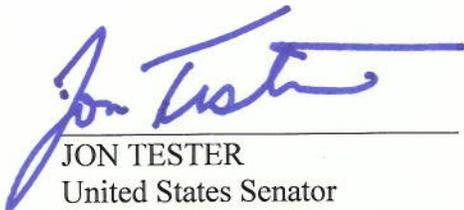
Previously, in your capacity as the Undersecretary of Health during questioning at a March 10, 2016 Senate Appropriations Committee Subcommittee on Military Construction and Veterans' Affairs hearing, you responded that VA was "prohibited by law from treating somebody [with] what we call bad-paper. . . ." In addition to clarifying the population you intend to serve and whether they can present for care today, please provide us with VA's

interpretation of its legal authority enabling you to provide such care, and by what administrative process VA will codify eligibility for this care. Some veterans potentially included in this announcement have been engaged with relevant authorities to obtain an upgrade of their discharge characterization, for the purpose of obtaining mental health care. Will this group of veterans be covered by your decision?

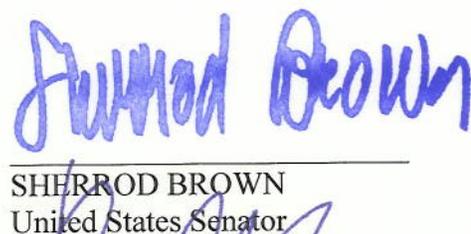
Finally, many of the veterans who could be eligible under this expansion are now seeking information and treatment after hearing your statements. These are veterans with elevated risks for substance use issues, homelessness, criminal court involvement, and suicide, and time is always crucial in connecting them to treatment options. While we are sure no VA employee would deny care to a veteran in crisis, it is important to clearly articulate the services that VA will be providing – will VA be providing mental health care with a goal of suicide prevention so that a crisis situation is never reached, or do you anticipate providing a service to only those veterans in urgent crisis, such as those who seek care through the Veterans Crisis Line? If the intent is to provide only crisis care, we look forward to seeing your plan to enhance staffing and reliability at the Veterans Crisis Line, as this overburdened avenue for service already exists for the veterans we believe you are addressing. If also providing them temporary care after an incident of crisis is the goal, we additionally are interested in what definitions will be used to determine what “temporary” means when transferring a veteran no longer in crisis out of VA and how VA will prioritize access to its scarce in and out-patient mental health assets. What additional authorities or resources does VA need to more completely deliver mental and behavioral health care to our nation’s veterans? These questions must be addressed quickly, and the answers must be communicated proactively to all veterans immediately.

We appreciate VA’s efforts to better serve veterans and your prompt response to these questions.

Sincerely,



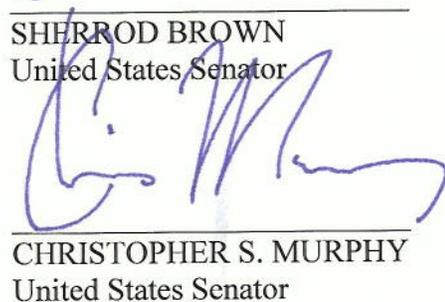
JON TESTER  
United States Senator



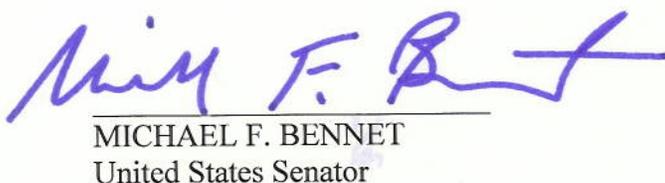
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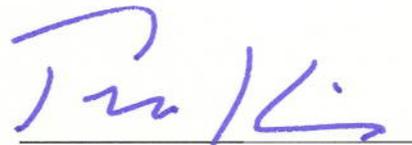


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United States Senator



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United States Senator