

# Legislative Analysis



## OFFICE OF MENTAL HEALTH AND SUICIDE PREVENTION

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<http://www.house.mi.gov/hfa>

**House Bill 5276 (proposed substitute H-1)**  
**Sponsor: Rep. Jennifer A. Conlin**

Analysis available at  
<http://www.legislature.mi.gov>

**House Bill 5277 (proposed substitute H-2)**  
**Sponsor: Rep. Christine Morse**

**House Bill 5279 (proposed substitute H-1)**  
**Sponsor: Rep. Felicia Brabec**

**House Bill 5280 (proposed substitute H-1)**  
**Sponsor: Rep. William Bruck**

**House Bill 5720 as introduced**  
**Sponsor: Rep. Robert J. Bezotte**

**Committee: Military, Veterans and Homeland Security**  
**Complete to 6-11-24**

### SUMMARY:

House Bills 5276 to 5280 and 5720 would address veteran mental health and substance use disorders as follows:

- House Bill 5276 would create a new act to create the Office of Mental Health and Suicide Prevention in the Michigan Veterans Affairs Agency (MVAA).
- House Bill 5277 would amend the Michigan Military Act to allow the Department of Health and Human Services (DHHS) to enter into an interagency agreement in cooperation with the MVAA to conduct statewide outreach on mental health and substance abuse support resources for service members and their families.
- House Bill 5279 would amend the Michigan Military Act to create a buddy-to-buddy program.
- House Bill 5280 would amend the Michigan Military Act to require the Department of Military and Veterans Affairs (DMVA) to develop a program called the Transition Bridge Program to help service members and veterans focus on mental health, well-being, and suicide prevention.
- House Bill 5720 would create a new act to require the DMVA to ensure that mental health and wellness resources are available to members of the National Guard and other military services.

None of the bills could take effect unless all of them were enacted.

**House Bill 5276** would create a new act, the Protecting Veterans Mental Health Act, which would create the Office of Mental Health and Suicide Prevention in the Michigan Veterans Affairs Agency. The director of the agency would have to appoint an individual with career experience in veterans' mental health and substance use disorders as the manager of the office. The director could assign responsibilities to the manager in addition to those provided in the act. The manager would report to any official designated by the director and would not be exempt from state classified civil service.

### Responsibilities of the manager

In addition to any other responsibilities granted to the office manager by the MVAA director, the manager would have to oversee and supervise the Transition Bridge program proposed by HB 5280 and, in conjunction with DHHS, the interagency agreement on mental health resources created under HB 5277.

The manager could, at their discretion and with the MVAA director's approval, delegate day-to-day administrative or operational functions of the programs to other MVAA or DMVA officials. However, the manager would retain the duties of supervising, data collecting, and reporting (as described below) and would have to give final approval for implementing and changing the programs and those assigned to the manager by the MVAA director.

The manager would serve as the public point of contact for service members, veterans, and the families of service members, veterans, and other stakeholders on mental health, suicide prevention, and related resources and information throughout Michigan's service member and veteran populations. The manager would also have to be a primary point of contact within the MVAA and DMVA to ensure that programs, resources, and outreach efforts by the MVAA or DMVA related to mental health and suicide prevention are designed and implemented in a way that ensures they can increase awareness and improve outcomes for service members, veterans, and their families.

### Data collecting

The bill would require the office to collect data on all of the following in Michigan:

- Veteran mental health and substance use disorders, including statistics related to post-traumatic stress disorder (PTSD), traumatic brain injuries, substance use disorder (SUD) and addiction, and suicide and suicidal ideation.
- Efforts by DMVA to address veteran mental health and substance use disorders described above.
- Efforts undertaken and data collected through the interagency agreement with DHHS under HB 5277.
- The yearly strategic goals of the office.
- Use of the buddy-to-buddy program proposed by HB 5279.

The office would have to ensure, to the best of its ability, that data collected under the act is timely and accurate, including data collected by the office for programs run by the office, the MVAA, or DMVA, or data aggregated by reputable sources outside those entities.

Data collected under the act could not include personally identifying information.

### Resource guide

The office would have to create and publish a mental health and wellness resource guide and make it available at no cost upon request. The resource guide would have to include all of the following:

- A self-assessment and scoring rubric (described below).
- Available mental health treatment resources and the following information for each listed organization or provider:
  - Its name, address, and phone number.
  - Its website and email address, if applicable.

- A brief summary of services and resources it provides.
- A mental health signs and symptoms checklist.

The office could list any resource it considers beneficial in the resource guide, but would have to include resources that are not connected directly or indirectly to the MVAA or DMVA. The office would have to update the guide at least once every three years, or more often as needed.

#### Self-assessment and scoring rubric

The office would have to adopt a mental health self-assessment and scoring rubric that includes questions allowing a military service member or veteran to have a basic and easy-to-understand view of their current mental health status. The self-assessment would also have to contain a disclaimer that it is for informational purposes only and is not a substitute for a full evaluation conducted by a licensed mental health or medical professional. The office could use an existing product as the self-assessment and scoring rubric if it meets the requirements of the bill, or it could design and create one that meets those requirements.

In addition to including the self-assessment and scoring rubric in the resource guide, the office could offer it as a stand-alone resource at no cost.

#### Annual report

By March 1 of each year, the office would have to submit a report to the MVAA director and the House and Senate standing committees on military and veterans affairs on the data it has collected. The office also would have to specify the number of resource guides it distributes each year and the types of organizations where the resource guides are distributed based on the following (or similar) categories:

- Veteran service organizations.
- Local units of government.
- Nonprofit organizations.
- State or federal departments or agencies.
- Department or agency sections.
- For-profit businesses or organizations.
- Other.

#### Other provisions

The office could, upon appropriation, administer grants to local units of government, nonprofit organizations, or other entities as per the MVAA director, in support of programs and resources for service members and veterans consistent with the act.

A writing prepared, owned, used, in the possession of or retained by the MVAA, DMVA, or office in the performance of an official function that contains information specific to an individual member or veteran would not be subject to disclosure under the Freedom of Information Act (FOIA).

**House Bill 5277** would amend the Michigan Military Act to allow DHHS to enter into an interagency agreement in cooperation with the MVAA to do all of the following:

- Conduct statewide outreach on mental health and substance use disorder support resources for service members, veterans, and their families.

- Develop resources and materials to help families identify changes in a service member's or veteran's mental health, including SUDs.
- Collect the information described in HB 5276.

DHHS would have to create and operate a program that provides resources and support for the families of service members and veterans on navigating mental health and substance use disorders for service members, veterans, and individuals affected by those mental health and substance use disorders.

The MVAA could use an electronic or mobile platform to connect veterans, service members, and their families to available services and resources under the interagency agreement described above.

A writing prepared, owned, used, possessed, or retained by the MVAA or DHHS in the performance of an official function that contains information specific to an individual member or veteran would not be subject to disclosure under FOIA.

Proposed MCL 32.822

**House Bill 5279** would amend the Michigan Military Act to require the MVAA to create and operate a buddy-to-buddy program to offer personal one-on-one mentorship and support to currently serving members of the military, including the Michigan National Guard or military reserves, and veterans residing in Michigan. The MVAA director would have to designate an official in the agency to oversee the program's implementation and operation. The program would have to include at least connecting individuals, through volunteer veteran mentors, to benefits and resources related to education, employment, family-related issues, financial matters and health care, as well as connecting them to advocates and veteran navigators who can help with mental health and substance use disorders.

The MVAA would have to make every reasonable effort to recruit veterans to serve as mentors for the program, but an individual who is not a veteran could serve in that role.

The MVAA could receive funding for the program from any source.

A writing prepared, owned, used, possessed, or retained by the MVAA or the Office of Mental Health and Suicide Prevention in the performance of an official function that contains information specific to an individual member or veteran would not be subject to disclosure under FOIA.

Proposed MCL 32.823

**House Bill 5280** would amend the Michigan Military Act to require DMVA to develop a program called the Transition Bridge program for service members and veterans focused on mental health, well-being, and suicide prevention. The manager of the Office of Mental Health and Suicide Prevention would oversee and supervise the program.

DMVA could develop the program in conjunction with one or more government agencies or appropriate nonprofit organization that have the primary mission of providing a holistic,

individualized approach to mental health and well-being through traditional and nontraditional means. DMVA could also work with any stakeholders it considers necessary for the successful design and launch of the program and contract with an appropriate government agency or nonprofit organization to operate the program.

The following would apply to the program:

- The program would have to include information on at least all of the following:
  - Warning signs for PTSD, depression, SUD, and suicide and suicidal ideation.
  - Traditional mental health treatment resources offered to veterans.
  - Alternative treatment options offered by federally licensed research centers.
  - Additional alternative forms of treatment.
  - Bridging the divide between military and civilian life and finding purpose in civilian life.
- The program would have to be offered no fewer than four times a year and in a manner similar to other military transition programs under federal law.
- Any individual who is an **eligible member** could participate. An eligible member would have to enroll and complete the program within one year after their separation from military service. (The manager of the office could waive this requirement.)
- The manager of the office would have to make every effort to ensure that the program is available to each eligible member within two months before, and two months after, their separation date from military service.

**Eligible member** would mean an individual who resides in Michigan and is serving in or a veteran of any of the following:

- The Michigan National Guard.
- The U.S. Army, Navy, Air Force, Marine Corps, Space Force, or Coast Guard, including the reserve components, as an active duty or reserve member.
- The National Oceanic and Atmospheric Administration Commissioned Officer Corps or the United States Public Health Service Commissioned Corps, as a commissioned officer.

DMVA would have to conduct outreach to offer the program to all members of the Michigan National Guard who are exiting military service into civilian life.

DMVA would have to make the mental health and wellness resource guide created under House Bill 5276 available to enrolled participants in the program.

Data collected under the bill could not include personally identifying information.

A writing prepared, owned, used, possessed, or retained by the DMVA or the Office of Mental Health and Suicide Prevention in performance of official function that contains information specific to an individual service member would not be subject to disclosure under FOIA.

Proposed MCL 32.821

**House Bill 5720** would create a new act, the Michigan National Guard Access to Resources Act, to require DMVA to ensure that mental health and wellness resources are available to members of the National Guard and other military services.

Specifically, DMVA would have to ensure that members of the Michigan National Guard, and other military service members residing in Michigan, have access to the mental health and wellness resources guide created under House Bill 5276 at no cost in either or both of the following formats:

- Print, in an easily accessible location or upon request.
- Electronically, on the department's website.

#### **FISCAL IMPACT:**

The bills would result in new annual costs to the Michigan Veterans Affairs Agency under the Department of Military and Veterans Affairs. The additional costs would not be able to be supported by existing ongoing appropriations. The primary costs of the bills would be related to hiring staff, including the manager, to administer the responsibilities of the Office of Mental Health and Suicide Prevention. Personnel costs are estimated at approximately \$500,000. Actual final costs would depend on personnel needs as determined by the agency. There would be additional personnel costs related to administering any new grant programs, upon appropriation, in addition to the agency's existing suicide prevention grant programs, if new grant programs are created as authorized under HB 5276.

There would also be additional ongoing costs under HB 5277 if the MVAA chose to utilize the authorized electronic or mobile platform to connect eligible individuals with services and resources. Costs to contract with a vendor to provide these technology services is not yet known. There would also be likely additional costs under HB 5280 to contract with a public or private organization for the Transition Bridge program.

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■ This analysis was prepared by nonpartisan House Fiscal Agency staff for use by House members in their deliberations and does not constitute an official statement of legislative intent.