

Department of Legislative Services  
Maryland General Assembly  
2019 Session

FISCAL AND POLICY NOTE  
Third Reader

Senate Bill 521

(Senator Smith, *et al.*)

Finance

Health and Government Operations

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**Veteran Suicide Prevention - Comprehensive Action Plan**

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This bill requires the Maryland Department of Health (MDH) to develop a comprehensive action plan to increase access to and availability of professional veteran health services to prevent veteran suicides. By July 1, 2020, MDH must report to the Governor and the General Assembly on any statutory, administrative, and budgetary changes needed to implement the action plan. The action plan must include (1) short-term initiatives and reforms and a plan for implementation beginning no later than July 1, 2021, and (2) long-term initiatives and reforms and a plan for implementation beginning no later than July 1, 2023. **The bill takes effect July 1, 2019, and terminates June 30, 2029.**

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**Fiscal Summary**

**State Effect:** MDH can develop and report on the action plan with existing budgeted resources. However, general fund expenditures likely increase beginning in FY 2022 as the bill requires implementation of the plan; any such impact depends on the plan. Revenues are not affected.

**Local Effect:** None.

**Small Business Effect:** None.

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**Analysis**

**Bill Summary:** The action plan developed under the bill must:

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

MDH must collaborate with specified interested parties in developing the plan. MDH must implement the short-term initiatives and reforms in the plan by June 30, 2023, and must implement the long-term initiatives and reforms in the plan by June 30, 2029.

**Current Law/Background:** In August 2016, the U.S. Department of Veterans Affairs (VA) released a report titled *Suicide Among Veterans and Other Americans (2001-2014)*. The report was the largest analysis of veteran suicide rates in the United States to date. The report found that, nationally, in 2014:

- an average of 20 veterans died by suicide each day;
- veterans constituted 8.5% of the U.S. adult population (ages 18 and older), yet accounted for 18% of all deaths by suicide among U.S. adults;
- about 67% of all veteran deaths by suicide were caused by firearms;
- about 65% of all veterans who died by suicide were ages 50 and older;
- after adjusting for differences in age and sex, the risk for suicide was 22% higher among veterans compared with U.S. civilian adults;
- after adjusting for differences in age, the risk for suicide was 19% higher among male veterans compared with U.S. civilian adult men;
- after adjusting for differences in age, the risk for suicide was 2.5 times higher among female veterans compared with U.S. civilian adult women; and
- rates of suicide were highest among younger veterans (ages 18 to 29) and lowest among older veterans (ages 60 and older).

VA also reported state-specific information. According to VA, for Maryland in 2014:

- there were a total of 89 veteran suicides, resulting in a veteran suicide rate of 23.1 per 100,000 (compared to the national veteran suicide rate of 38.4 per 100,000 and a rate of 12.8 per 100,000 for the overall Maryland population);
- about 35% of veteran suicides were by adults ages 55 to 74; and
- about 70% of veteran suicides were caused by firearms.

#### *U.S. Department of Veterans Affairs Suicide Prevention Outreach*

The Maryland Department of Veterans Affairs (MDVA) advises that data from VA indicate that VA spends approximately \$7.30 per veteran on suicide prevention outreach annually. Thus, MDVA estimates that VA is spending approximately \$2.9 million per year in the State on suicide prevention outreach. This does not include mental health care treatment.

#### *Maryland Veterans Service Animal Program*

Chapter 416 of 2017 established the Maryland Veterans Service Animal Program. The program is designed to refer eligible veterans to selected nonprofit organizations to be paired with “service dogs” or “support dogs” and facilitate their training. MDVA must select at least one nonprofit program that meets specified qualifications to carry out elements of the program. One of the stated purposes of the program is to assist in the reduction of the Maryland veteran suicide rate.

#### *Legislation in Other States*

Several states have passed legislation related to veteran suicide prevention. In 2017, Texas passed legislation containing provisions similar to the bill requiring the state, in collaboration with several state and federal entities, to develop an action plan for preventing veteran suicide. The plan must include specific long- and short-term recommendations.

**Additional Comments:** This analysis assumes that MDH reports to the Governor and the General Assembly any statutory, administrative, and budgetary changes required to implement the initiatives and reforms included in the action plan developed under the bill by July 1, 2020. Accordingly, funding and any statutory changes necessary for implementation of the short-term initiatives and reforms are acted upon during the 2021 legislative session so that implementation of the first phase of the plan may begin, as required, by July 1, 2021. Those short-term initiatives must be fully implemented by June 30, 2023; on July 1, 2023, the long-term initiatives must be underway, with full implementation by June 30, 2029.

## **Additional Information**

**Prior Introductions:** SB 911 of 2018, a similar bill, passed the Senate and received a hearing in the House Health and Government Operations Committee, but no further action was taken.

**Cross File:** None.

**Information Source(s):** Maryland Department of Health; Department of Veterans Affairs; U.S. Department of Veterans Affairs; Department of Legislative Services

**Fiscal Note History:** First Reader - February 27, 2019  
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