

**AMENDMENT TO H.R. 9237**  
**OFFERED BY MR. HUIZENGA OF MICHIGAN**

At the end of subtitle A of title VI, add the following  
new section:

1 **SEC. 6\_\_\_ . ESTABLISHMENT OF PREFERRED PROVIDER**  
2 **LIST FOR VETERANS COMMUNITY CARE PRO-**  
3 **GRAM OF THE DEPARTMENT OF VETERANS**  
4 **AFFAIRS.**

5 (a) IN GENERAL.—Not later than 180 days after the  
6 date of the enactment of this Act, the Secretary of Vet-  
7 erans Affairs shall make available to covered providers an-  
8 nual, evidence-based training on the prevention of suicide  
9 among veterans.

10 (b) PREFERRED PROVIDER LIST.—

11 (1) IN GENERAL.—The Secretary shall—

12 (A) establish and maintain a list (to be  
13 known as the “preferred provider list”) of each  
14 covered provider that completes the training  
15 under subsection (a); and

16 (B) make such list publicly available to  
17 veterans eligible for health care under the laws  
18 administered by the Secretary.

1           (2) NON-DEPARTMENT TRAINING.—The Sec-  
2           retary shall include on the preferred provider list  
3           any covered provider that the Secretary determines  
4           has completed training that—

5                   (A) is substantially similar to the training  
6                   required by such subsection; and

7                   (B) meets the applicable competency  
8                   standard for military health care professionals.

9           (3) OPT-OUT.—A covered provider desiring to  
10          be removed from the preferred provider list may sub-  
11          mit to the Secretary a request in such form, at such  
12          time, and containing such information as the Sec-  
13          retary determines appropriate.

14          (4) ANNUAL REVIEW.—The Secretary shall, on  
15          an annual basis, review the preferred provider list to  
16          ensure each covered provider included on such list  
17          has completed such training.

18          (c) REPORT.—Not later than 180 days after the day  
19          of enactment of this Act, and annually thereafter, the Sec-  
20          retary of Veterans Affairs shall submit to the appropriate  
21          congressional committees a report on the following:

22                   (1) The number of providers who completed the  
23                   VA-offered suicide prevention training prior to the  
24                   implementation of the preferred provider list.

1           (2) The number of Community Care Network  
2 providers who completed a different suicide preven-  
3 tion training not offered by the Secretary prior to  
4 the implementation of the preferred provider list.

5           (3) The number of providers currently on the  
6 preferred provider list, disaggregated by those who  
7 used the suicide prevention training under sub-  
8 section (a) and those providers who opted out under  
9 subsection (b)(3).

10          (4) The likelihood of veterans utilizing providers  
11 on the preferred provider list rather than a provider  
12 not found on the preferred provider list.

13          (5) Any patterns apparent to the Secretary  
14 based on the review of the implementation of the  
15 preferred provider list.

16          (6) Any recommendations for further action  
17 that would improve and enhance the preferred pro-  
18 vider list with the objective of increasing access to  
19 care for veterans.

20       (d) DEFINITIONS.—In this section:

21           (1) The term “covered provider” means—

22               (A) a health care provider specified in sub-  
23 section (c) of section 1703 of title 38, United  
24 States Code; and

1 (B) an eligible entity or medical provider  
2 that has entered into a Veterans Care Agree-  
3 ment under section 1703A of such title.

4 (2) The term “appropriate congressional com-  
5 mittees” means—

6 (A) the Committee on Veterans’ Affairs of  
7 the House of Representatives; and

8 (B) the Committee on Veterans’ Affairs of  
9 the Senate.

