AMENDMENT TO
RULES COMMITTEE PRINT 118–10
OFFERED BY MR. LYNCH OF MASSACHUSETTS

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

SEC. 604. PROGRAM TO ASSIST SERVICE MEMBERS AT RISK
OF SUICIDE.

(a) Program Required.—Not later than 90 days
after the date of the enactment of this Act, the Secretary
of Defense, in consultation with the Director of the De-
fense Health Agency, shall develop and implement a cen-
tralized program to monitor and provide assistance to
members of the Armed Forces at risk of suicide who have
been recently discharged from health care, as outlined in
Recommendation 6.29 of the final report issued by the
Suicide Prevention and Response Independent Review
Committee.

(b) Matters to Be Included.—The centralized
program referred to in subsection (a) shall specify:

(1) The individual and agency responsible for
conducting service member follow up.

(2) The time when initial follow-up will occur.
(3) The times when subsequent follow-ups will occur.

(4) The manner in which patients will be contacted.

(5) The process for documentation of follow-up attempts.

(6) The procedures for ensuring patient safety where patient is unreachable.

(7) The processes for medical treatment facilities to link mortality data to health care delivery data in order to better identify settings and patients at higher risk of suicide, further inform local suicide prevention strategies for targeted high-risk groups, and ensure compliance with reporting and investigating suicides occurring within 72 hours of discharge from a hospital.

(c) MEMBERS OF THE ARMED FORCES AT RISK OF SUICIDE.—For purposes of this section, the term “members of the Armed Forces at risk of suicide” includes members of the Armed Forces who have attempted suicide and members of the Armed Forces who have been discharged as patients and who have been clinically assessed as benefitting from follow-up support related to suicide prevention.