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Blunt's Bipartisan Veteran PEER Act Signed Into Law

JUNE 14TH 2018 BY DEE LOFLIN

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WASHINGTON, D.C. - U.S. Senator Roy Blunt (Mo.) today announced that his bipartisan Veteran Partners' Efforts to Enhance Reintegration (Veteran PEER) Act was signed into law as part of the VA Mission Act, which passed the Senate last month with overwhelming support. The Veteran PEER Act expands veterans' access to peer counseling specialists to better combat the risks of suicide and treat associated mental health conditions.

“Making sure veterans have access to timely, quality mental and behavioral health treatment is a top priority of mine,” said Blunt. “Given their shared experience, peer specialists are uniquely qualified to help veterans overcome the challenges they face when seeking mental health treatment, navigating the VA health system, and more. I’m glad to see this bill become law and I’ll continue working to improve mental health treatment for our nation’s veterans.”

Blunt introduced the bill with Senator Richard Blumenthal (Conn.) in September 2017. Blunt discussed the legislation on the Senate floor last month.

The U.S. Department of Veterans Affairs (VA) currently employs peer specialists to assist veterans in treatment for mental health and substance abuse disorders. The VA was instructed by a 2012 Executive Order to hire and train 800 peer counselors by December 31, 2013, to treat the estimated 1.5 million veterans requiring mental health services.

The Veteran PEER Act expands veterans' access to peer specialist services by specifically targeting shortcomings in the current program, including peer specialists' restricted participation in primary care services; persistent stigma attached to seeking treatment for mental health disorders; and under-promoted proven successes of the peer specialist program in veteran reintegration.

The Veteran PEER Act:

Authorizes the VA to establish peer specialists in Patient Aligned Care Teams within VA medical centers to promote the use and integration of mental health and substance use treatment services in the primary care setting.

Implements the program in 30 locations across the nation over two years, with required consideration of rural and underserved areas when selecting program locations.

Requires regular reports to Congress with information on the benefits to veterans and their families derived from use of peer specialists.

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