

HR 2652

Veteran Overmedication Prevention Act of 2017

Congress: 115 (2017–2019, Ended)

Chamber: House

Policy Area: Armed Forces and National Security

Introduced: May 25, 2017

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (May 25, 2017)

Official Text: <https://www.congress.gov/bill/115th-congress/house-bill/2652>

Sponsor

Name: Rep. Coffman, Mike [R-CO-6]

Party: Republican • **State:** CO • **Chamber:** House

Cosponsors (34 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Bergman, Jack [R-MI-1]	R · MI		May 25, 2017
Rep. Bost, Mike [R-IL-12]	R · IL		May 25, 2017
Rep. Moulton, Seth [D-MA-6]	D · MA		May 25, 2017
Rep. O'Rourke, Beto [D-TX-16]	D · TX		May 25, 2017
Rep. Polis, Jared [D-CO-2]	D · CO		May 25, 2017
Rep. Lamborn, Doug [R-CO-5]	R · CO		Jun 2, 2017
Rep. Brownley, Julia [D-CA-26]	D · CA		Jun 8, 2017
Rep. Franks, Trent [R-AZ-8]	R · AZ		Jun 12, 2017
Rep. Kuster, Ann M. [D-NH-2]	D · NH		Jun 12, 2017
Rep. Takano, Mark [D-CA-41]	D · CA		Jun 13, 2017
Rep. Poliquin, Bruce [R-ME-2]	R · ME		Jun 16, 2017
Rep. Cole, Tom [R-OK-4]	R · OK		Jul 20, 2017
Rep. DeFazio, Peter A. [D-OR-4]	D · OR		Sep 18, 2017
Rep. Buchanan, Vern [R-FL-16]	R · FL		Dec 11, 2017
Rep. DeSantis, Ron [R-FL-6]	R · FL		Dec 12, 2017
Rep. Bilirakis, Gus M. [R-FL-12]	R · FL		Dec 21, 2017
Rep. Stefanik, Elise M. [R-NY-21]	R · NY		Jan 19, 2018
Rep. Comstock, Barbara [R-VA-10]	R · VA		Jan 22, 2018
Rep. Shea-Porter, Carol [D-NH-1]	D · NH		Jan 25, 2018
Rep. Wilson, Frederica S. [D-FL-24]	D · FL		Feb 2, 2018
Rep. Heck, Denny [D-WA-10]	D · WA		Feb 20, 2018
Rep. Johnson, Mike [R-LA-4]	R · LA		Feb 23, 2018
Rep. Peters, Scott H. [D-CA-52]	D · CA		Feb 27, 2018
Rep. Jones, Walter B., Jr. [R-NC-3]	R · NC		Mar 13, 2018
Rep. Velazquez, Nydia M. [D-NY-7]	D · NY		Mar 13, 2018
Rep. Smith, Christopher H. [R-NJ-4]	R · NJ		Mar 21, 2018
Rep. Capuano, Michael E. [D-MA-7]	D · MA		Apr 2, 2018
Rep. Marshall, Roger [R-KS-1]	R · KS		Apr 2, 2018
Rep. Chu, Judy [D-CA-27]	D · CA		Apr 16, 2018
Rep. Himes, James A. [D-CT-4]	D · CT		Apr 16, 2018
Resident Commissioner González-Colón, Jenniffer [R-PR-At Large]	R · PR		Apr 23, 2018
Rep. Kelly, Mike [R-PA-3]	R · PA		May 9, 2018
Rep. Suozzi, Thomas R. [D-NY-3]	D · NY		Jun 8, 2018
Rep. Norcross, Donald [D-NJ-1]	D · NJ		Jun 12, 2018

Committee Activity

Committee	Chamber	Activity	Date
Veterans' Affairs Committee	House	Referred to	May 25, 2017

Subjects & Policy Tags

Policy Area:

Armed Forces and National Security

Related Bills

Bill	Relationship	Last Action
115 HR 5531	Related bill	May 22, 2018: Referred to the Subcommittee on Crime, Terrorism, Homeland Security, and Investigations.
115 S 992	Identical bill	May 1, 2017: Read twice and referred to the Committee on Veterans' Affairs.
115 S 788	Related bill	Mar 30, 2017: Read twice and referred to the Committee on Veterans' Affairs.

Veteran Overmedication Prevention Act of 2017

This bill requires the Department of Veterans Affairs (VA) to contract with the National Academies of Sciences, Engineering, and Medicine to review the deaths of all covered veterans who died by suicide during the last five years, regardless of whether information relating to such deaths has been reported by the Centers for Disease Control and Prevention. A "covered veteran" is any veteran who received VA hospital care or medical services during the five-year period preceding the veteran's death.

The review shall include:

- the total numbers of veterans who died by suicide, violent death, or accidental death;
- the percentage of such veterans with combat experience or related trauma;
- each veteran's age, gender, race, and ethnicity;
- a list of medications and substances prescribed to such veterans;
- a summary of medical diagnoses that led to such prescriptions in cases of anxiety and depressive disorders;
- the number of instances in which such a veteran was concurrently on multiple prescribed medications;
- the number of such veterans who were not taking any prescribed medication;
- the percentage of such veterans treated for anxiety or depressive disorders who received a non-medication first-line treatment compared to the percentage who received medication only;
- descriptions of how the VA determines and updates clinical practice guidelines for prescribing medications and of VA efforts to maintain appropriate staffing levels for mental health professionals;
- an analysis of VA's use of systematically measuring pain scores during clinical encounters and how that relates to the number of veterans concurrently on multiple prescribed medications;
- identification of VA medical facilities with markedly high prescription rates and suicide rates for treated veterans;
- an analysis of VA programs that collaborate with state Medicaid agencies and the Centers for Medicare and Medicaid Services;
- an analysis of VA medical center collaboration with medical examiners' offices or local jurisdictions to determine veteran mortality and cause of death;
- identification of a best practice model to collect and share veteran death certificate data;
- a description of how data relating to death certificates of veterans is collected, determined, and reported by the VA;
- an assessment of any apparent patterns based on the review; and
- recommendations to improve the safety and well-being of veterans.

The VA shall ensure that such data is compiled in a manner that allows it to be analyzed across all data fields for purposes of informing and updating VA clinical practice guidelines.

Actions Timeline

- **May 25, 2017:** Introduced in House
- **May 25, 2017:** Referred to the House Committee on Veterans' Affairs.
- **May 25, 2017:** Referred to the Subcommittee on Health.