

**HOUSE OF REPRESENTATIVES  
COMPILATION OF PUBLIC COMMENTS**

Submitted to the Committee on Defense & Veterans' Affairs  
For HB 4972

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Hearing Date: April 13, 2023 10:30 AM - or upon final adjourn./recess or bill referral if permission granted

James Cunningham, Chairman  
MOAA and TCVO  
NEW BRAUNFELS, TX

This is a logical and needed study that should be done. It would expand on existing resources and we see it as an enhancement to help veterans and their families. Highly recommend passage.

Richard Grady, Hon.  
Collin County Veterans' Coalition  
Plano, TX

The Collin County Veterans' Coalition, a network of over 100 veteran-related service organizations that help collaborate on service delivery to veterans, their families and to military personnel, fully supports this study to broaden services to our veterans. Within our metroplex there are nearly 400,000 veterans and military personnel. Some, who have participated in actual combat, have residual issues from those experiences. Others, who have experienced traumatic situations while in service, also have residual issues. There are, however, not enough trained personnel to care for these veterans. Any expansion of the service will be a welcomed relief to our personnel.

Virginia Simonson, LTC, US, Army - Retired

Texas Council of Chapters, Military Officers Association of America

Flower Mound, TX

The Texas Council of Chapters, Military Officers Association of America strongly endorses a favorable report by this committee and rapid passage on the House floor of this bill. We are grateful that Rep. Garcia introduced the bill to direct a long overdue study on mental health services provided to veterans. The only concern we'd like to voice is that Health and Human Services should have co-responsibility for the execution of the study and lead a public participation component to allow input from the 1.562 million Veterans and countless family members who are beneficiaries of the Military Veteran Peer Network and have a direct stake in the effective provision of peer counseling and peer group facilitation services. In fact, it is reasonable to ask why neither HHSC, nor TVC have not previously undertaken such a study by agency rule - in view of significant turnover rates among Peer Services Coordinators and the declining numbers of peer service interactions beginning in 2019. The Texas Legislature established the Texas Veterans Mental Health Program in 2009 under SB 1325, championed by former Senator Jane Nelson. Peer to Peer Counseling was a pillar of the first bill as it became general knowledge that Veterans were struggling with serious mental health challenges but were extremely reluctant to engage with professional mental health professionals within the Veterans Administration or in the private sector. Cutting edge research proved the efficacy of the Veteran Peer Support concept and the Texas Veterans Mental health program provided exceptional results despite being run on a small budget with very few Military peers. In 2011, through additional Texas Legislative funding support, the program was expanded to provide more full-time Volunteer Peer Coordinators and a Statewide Coordinator. This was the genesis of the Military Veteran Peer Network (MVPN). Volunteer Coordinators (now known as MVPN Peer Service Coordinators - PSCs) recruited Service Members, Veterans, and their Family members (SMVF) for training and together they provided peer support to the SMVF community - establishing peer support groups and making referrals to appropriate agencies for additional resource needs. HB 2392, 83rd Texas Legislature increased the number of Peer Service Coordinators from twenty-two (22) to thirty-five (35). The bill also expanded the scope of PSC services to provide direct peer services to justice involved veterans and participate in justice involved veteran programs (including jail diversion programs, veteran treatment courts and re-entry programs). The bill also required HHSC and TVC to provide an annual report that summarized peer services. These subsequent reports demonstrated the growth in peer services provided from 53,566 interactions (by 22 PSCs) in 2013 to a high of 168,947 interactions (by 37 PSCs and 5 part-time PSCs) in 2018. Subsequently, that number has dropped each year as follows: 2019/133,14; 2020/118,406; 2021/90,802; 2022/90,093.