

**Department of Planning and Budget**  
**2026 General Assembly Session**  
**State Fiscal Impact Statement**

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**PUBLISHED: 2/25/2026 10:47 AM**

**ORIGINAL**

**Bill Number:** HB529E

**Patron:** Thornton

**Bill Title:** Suicide Prevention Program created; deaths by suicide of veterans or military service members; inquiry by State Registrar of Vital Records; Department of Veterans Services annual report.

**Bill Summary:** Removes the position of Suicide Prevention Coordinator within the Department of Veterans Services, transfers the duties of such position to the Suicide Prevention Program, established in the Department by the bill, and adds the following to such duties: (i) gather data on substance abuse challenges experienced by military service members, veterans, and their families that may lead to suicide; (ii) collaborate with federal, state, and local partners to increase substance use screenings and refer military service members, veterans, and their family members to the appropriate professionals or services; (iii) provide opioid addiction and substance use resources, training, and support to federal, state, and local agencies; and (iv) compile and analyze data relating to the suicides of veterans and military service members pursuant to death certificates filed with the State Registrar of Vital Records, with such data to be included in the Department's annual report. The bill provides that in any case where the death certificate of a veteran or military service member lists suicide as the manner of death, the State Registrar of Vital Records shall provide such information concerning the suicide to the Department. Finally, the bill requires a copy of any autopsy report concerning the suicide of a veteran or military service member to be furnished upon request to the Commissioner of the Department of Veterans Services.

**Budget Amendment Necessary:** No

**Items Impacted:** None

**Explanation:** Not applicable

**Fiscal Summary:** There is no anticipated impact on the state as a result of this proposal.

**Fiscal Analysis:** The Department of Veterans Services (DVS) indicated that existing programs and funding could be utilized to meet the intent and requirements of this proposal.

The Department of Health (VDH) does not anticipate a fiscal impact as a result of this proposal.

**Other:** None.