



HOUSE BILL 572: Veterans/eTMS Pilot Program.

2025-2026 General Assembly

Committee:	House Health. If favorable, re-refer to Rules, Calendar, and Operations of the House	Date:	April 30, 2025
Introduced by:	Reps. Willis, B. Jones, Campbell, Chesser	Prepared by:	Stewart Sturkie
Analysis of:	First Edition		Committee Co-Counsel

OVERVIEW: *House Bill 572 would require the Department of Military and Veterans Affairs (Department) to select a provider to establish a statewide pilot program that would provide Electroencephalogram combined Transcranial Magnetic Stimulation Treatment (eTMS) to veterans, first responders, and their immediate family members.*

BILL ANALYSIS: The bill would require the Department to select a provider to create a statewide pilot program that would make eTMS available to veterans, first responders, and their immediate family members who are experiencing one or more of the following conditions:

- Substance use disorders.
- Mental illness.
- Sleep disorders.
- Traumatic brain injuries.
- Sexual trauma.
- Posttraumatic stress disorder and accompanying comorbidities.
- Concussions.
- Other brain trauma.
- Quality of life issues affecting human performance, including issues related to or resulting from problems with cognition and problems maintaining attention, concentration, or focus.

The bill would establish definitions for "Electroencephalogram combined Transcranial Magnetic Stimulation Treatment (eTMS)", "Immediate family", and "Veteran".

The bill would require the Department to select a provider with a history of serving veterans and first responders on a statewide level. The provider would be allowed to use a nonmedical portable magnetic stimulation device to improve access to underserved populations in remote areas or to be used as a device for pre-post treatment or as a stand-alone device.

The pilot program would be required to include the following:

- Establishment by the provider of a peer-to-peer support network available to anyone receiving treatment under the program.
- Neurophysiological monitoring, monitoring for symptoms of substance use and other mental health disorders, and access to counseling and wellness programming for individuals treated under

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the program. Individuals who receive treatment under the program would be required to participate in the peer-to-peer support network.

- Establishment of protocols that include use of adopted stimulation frequency and intensity modulation done on days 0, 10, and 20, motor threshold testing, clinical symptoms, signs, and biometrics.
- Collection and reporting of protocols and treatment outcomes provided by the clinical practice to the Department, the Joint Legislative Oversight Committee on General Government, and the Fiscal Research Division, no later than September 15, 2026. The report would be required to include bio-data metrics and all expenditures that are made with State funds.

The bill would authorize the Department to adopt rules to implement its requirements.

EFFECTIVE DATE: This act would become effective when it becomes law.