



# FY2022 NDAA: Mental Health Care

November 18, 2021

## Background

Congress authorizes, through the annual National Defense Authorization Act (NDAA), Department of Defense (DOD) [mental health programs and services](#) that support servicemembers, military retirees, and their families. DOD administers many mental health programs that offer education; awareness; crisis prevention resources; clinical treatment; nonclinical support and counseling services; and research and development.

DOD has [estimated](#) that, from 2016 through 2020, 456,293 active duty servicemembers were diagnosed with at least one mental health disorder. Mental health disorders also accounted for the highest number of hospital bed days and were the second most common reason for outpatient visits among servicemembers. During the same time period, the majority (64%) of mental health diagnoses were attributed to [adjustment disorders](#), [anxiety disorders](#), and [depressive disorders](#).

DOD has made numerous efforts to address the wide range of mental health issues, and potential opportunities for improvement have been highlighted by the [Government Accountability Office \(GAO\)](#), [DOD Inspector General \(DODIG\)](#), and other [observers](#) of military health. **Table 1** lists the mental health-related provisions included in the proposed House and Senate versions of the FY2022 NDAA.

**Table 1. FY2022 NDAA Legislative Proposals**

House-Passed H.R. 4350	Senate Armed Services Committee-Reported S. 2792
Section 702 would require the TRICARE program to cover certain inpatient and outpatient health care services to treat eating disorders among servicemembers or their dependents. The provision would also require DOD to periodically screen servicemembers for eating disorders.	No related provisions.
Section 714 would amend 10 U.S.C. §1090a to establish an additional process using a trigger phrase, by which a commanding officer or supervisor confidentially refers a servicemember for a mental health evaluation.	

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House-Passed H.R. 4350	Senate Armed Services Committee-Reported S. 2792
Section 731 would require DOD, in collaboration with the Department of State, to award grants to certain entities for collaborative research with Israeli institutions on post-traumatic stress disorder.	
Section 734 would require DOD to conduct a one-year pilot program that provides “direct assistance” with scheduling mental health appointments at certain military treatment facilities (MTFs).	
Section 736 would authorize DOD to conduct a pilot program, by September 1, 2023, that surveys certain active duty servicemembers on perceptions of access to mental health care and related stigma.	
Section 739 would require the Secretary of Defense to establish a committee to conduct an independent review of DOD’s suicide prevention and response programs.	
Section 6480 would require the Military Services to submit a report to Congress on substance abuse disorder treatment concerns among servicemembers and their dependents. The provision would also require a report to Congress on the use of substance abuse disorder treatment programs on or near military installations.	

## Discussion

### Mental Health Screening and Treatment

In August 2020, [GAO found](#) that while DOD does not generally screen servicemembers for eating disorders during the [annual periodic health assessment](#), “DOD is examining ways to improve its screening of eating disorders in the military as well as identify possible ways to prevent such conditions in the military.” Section 702 of the House-passed bill would require DOD to periodically screen for, and treat, eating disorders among servicemembers. The provision would also require the TRICARE program to cover certain outpatient and inpatient treatment services (e.g., residential services or partial-hospitalization programs) for eating disorders among servicemembers and their dependents.

[DOD policy](#) allows servicemembers to obtain a mental health evaluation on a voluntary (i.e., self-referral) or involuntarily (i.e., command-directed) basis. Section 714 of the House-passed bill would require DOD to establish a new process that triggers a [command-directed mental health evaluation](#). The new process would allow a servicemember to disclose a certain phrase that then initiates an automatic, confidential referral for an evaluation.

A 2020 [DOD Inspector General report](#) found that the Department “did not consistently meet outpatient mental health access to care standards for active duty service members and their families, in accordance with law and applicable [DOD] policies.” Section 734 of the House-passed bill would require DOD to conduct a one-year pilot program that provides “direct assistance” to beneficiaries scheduling mental health appointments at certain military treatment facilities. The provision would also require DOD to assess the program and provide a report to Congress, within 90 days after the pilot program ends, on the effectiveness and barriers of accessing mental health appointments.

## Mental Health Research

Section 731 of the House-passed bill would direct the Secretary of Defense, in coordination with the Secretary of State, to award grants for a period of no more than seven years to academic or nonprofit entities for collaborative research between the United States and Israel on [post-traumatic stress disorder](#). The provision would also require DOD to provide a report to Congress, within 180 days after each grant-funded project is completed, that describes how funds were used and an evaluation on the project's success.

## Program Assessments

The House-passed bill includes three provisions that would authorize or require DOD to assess certain aspects of its mental health programs and services. Section 736 of the House-passed bill would provide DOD an authority, through September 1, 2023, to survey servicemember perceptions of access and stigma related to mental health care in the Military Health System. Servicemembers' input would be collected through the [Defense Organizational Climate Survey](#).

Section 739 of the House-passed bill would require the Secretary of Defense to establish an independent committee to conduct a review of [DOD's suicide prevention and response](#) programs, factors that contribute to military suicides, and provide an initial (270 days after the committee is established) and final report (330 days after the committee is established) to Congress on their findings.

Section 6480 of the House-passed bill would require the Military Service Secretaries to, within 180 days after enactment, submit two reports to Congress relating to [substance abuse in the military](#): (1) a report on substance abuse treatment concerns of servicemembers and their families; and (2) a report on substance abuse treatment programs located on or near military installations.

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