THE UNDER SECRETARY OF DEFENSE

4000 DEFENSE PENTAGON WASHINGTON, DC 20301-4000

PERSONNEL AND READINESS

> The Honorable Howard P. "Buck" McKeon Chairman Committee on Armed Services U.S. House of Representatives Washington, DC 20515

JUL 3 0 2013

Dear Mr. Chairman:

Enclosed is the Department of Defense's (DoD) report to Congress on the implementation of the regulations as required by section 702 of the National Defense Authorization Act for Fiscal Year 2012 (Public Law 112-81). This report addresses the implementation of person-to-person mental health assessments for each member of the Armed Forces who deploys in connection with a contingency operation.

The Department published DoD Instruction 6490.12, "Mental Health Assessments for Members of the Armed Forces Deployed in Support of a Contingency Operation," on February 26, 2013. The assessments required by this Instruction are designed to identify posttraumatic stress disorder, suicidal tendencies, and other behavioral health conditions identified among members of the Armed Forces in order to determine which members are in need of additional care and treatment. All of the Military Services have fully implemented the requirements for these assessments, which are administered electronically, in conjunction with the deployment health assessment process. Additionally, the data from these assessments are sent to the Armed Forces Health Surveillance Center to facilitate surveillance and compliance monitoring.

Thank you for your interest in the health and well-being of our Service members, veterans, and their families. A similar letter is being sent to the Chairpersons of the other congressional defense committees.

Sincerely,

Enclosure: As stated

cc:

The Honorable Adam Smith Ranking Member

PERSONNEL AND

READINESS

THE UNDER SECRETARY OF DEFENSE

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JUL 3 0 2013

The Honorable Barbara A. Mikulski Chairwoman Committee on Appropriations United States Senate Washington, DC 20510

Dear Madam Chairwoman:

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The Honorable Richard C. Shelby Vice Chairman

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The Honorable James M. Inhofe Ranking Member

THE UNDER SECRETARY OF DEFENSE



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JUL 3 0 2013

The Honorable Harold Rogers Chairman Committee on Appropriations U.S. House of Representatives Washington, DC 20515

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Sincerely,

Jessica L. Wrigh

Acting

Enclosure: As stated

cc:

The Honorable Nita M. Lowey Ranking Member

	,	



Report to the Congressional Defense Committees in Response to section 702 of the National Defense Authorization Act for Fiscal Year 2012 (Public Law 112-81)

Mental Health Assessments for Members of the Armed Forces Deployed in Support of a Contingency Operation

The estimated cost of report for the Department of Defense is approximately \$3,860 for the 2013 Fiscal Year. This includes \$0 in expenses and \$3,860 in DoD labor.

Generated on 2013Jun21 RefID: 5-3AF5AB7

Mental Health Assessments for Members of the Armed Forces Deployed in Support of a Contingency Operation Report to the Congressional Defense Committees

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INTRODUCTION

Section 708 of the National Defense Authorization Act (NDAA) for Fiscal Year (FY) 2010, Reference (a), directed the Department of Defense (DoD) to administer person-to-person mental health assessments (MHA) for each member of the Armed Forces who deploys in connection with a contingency operation. The purpose of these assessments is to identify posttraumatic stress disorder (PTSD), suicidal tendencies, and other behavioral health conditions identified among members of the Armed Forces in order to determine which of these members is in need of additional care and treatment. These assessments are to be conducted at four distinct time points, once prior to deployment and three times following return from deployment, and in a consistent manner across the military Services. Most recently, section 703 of the NDAA for FY 2013, Reference (c), extended the timeframe for completion of the second post-deployment MHA allowing for greater flexibility in aligning the MHA with other assessment processes.

Section 702 of the NDAA for FY 2012, Reference (b), suspended section 708 of the NDAA for FY 2010, and provided additional guidance for these assessments and required that:

"(1) The Secretary of Defense, in consultation with the other administering Secretaries, shall prescribe regulations for the administration of this section; and (2) Not later than 270 days after the date of the issuance of the regulations prescribed under paragraph (1), the Secretary shall notify the congressional defense committees of the implementation of the regulations by the military departments."

This report is submitted in response to the FY 2012 NDAA requirement.

EXECUTIVE SUMMARY

The Department established regulations for person-to-person mental health assessments for each member of the Military Services who deploys in connection with a contingency operation, as required by section 1074m of title 10, U.S.C., Reference (d). A standardized set of assessment questions was incorporated into the pre- and post-deployment health assessment processes and forms in order to streamline administration and facilitate referral of Service members requiring additional evaluation or treatment. All of the military Services have fully implemented the requirements for deployment MHAs. Most MHAs are administered electronically using the new deployment health assessment forms. The data are sent to the Armed Forces Health Surveillance Center (AFHSC) to enable surveillance and compliance monitoring.

REGULATIONS

Directive-Type Memorandum (DTM) 11-011, "Mental Health Assessments for Members of the Military Services Deployed in Connection with a Contingency Operation," August 20, 2011, Reference (e), established interim guidance for the implementation of person-to-person deployment MHAs. This guidance was subsequently revised to incorporate the

changes required by section 702 of the NDAA for FY 2012, Reference (b). DoD Instruction (DoDI) 6490.12, "Mental Health Assessments for Service Members Deployed in Connection with a Contingency Operation," February 26, 2013, Reference (f), cancelled DTM 11-011, Reference (c), and established the Department's regulation for implementing the requirements of both section 702 of the NDAA for FY 2012, Reference (b), and section 703 of the NDAA for FY 2013, Reference (c), which extended the timeframe for completion of the second post-deployment MHA to 180 days to 18 months following return from deployment.

IMPLEMENTATION

The Office of the Assistant Secretary of Defense for Health Affairs, in collaboration with subject matter experts from the Services, established a work group to develop the question set that would comprise the deployment. On July 19, 2010, a memo, Reference (g), was sent to the Services that provided guidelines for implementation of the deployment MHAs and the question set developed by that work group. Concurrently, a deployment health assessment work group revised the Pre-Deployment Health Assessment (Pre-DHA) and the Post-Deployment Health Re-Assessment (PDHRA) forms to include the required deployment MHA questions. The revised Pre-DHA and PDHRA forms were released in September 2012, and were designed for electronic administration to streamline delivery and reporting of data to the AFHSC.

Specific Service efforts to implement the deployment MHA requirements are as follows:

Army: In 2010, the Army implemented a process to administer the deployment MHA questions using paper and pencil forms and, on March 30, 2011, the Army fielded the deployment MHA question set as a part of the Comprehensive Behavioral Health System of Care for both the Active and Reserve Components. Due to the pending release of the revised health assessments, the Army Medical Department elected to wait until the new Pre-DHA and PDHRA forms were available before expending resources to develop a process for electronic administration of the deployment MHA questions. The Army fully implemented electronic capture of the deployment MHA questions, along with the revised deployment health assessment forms, in February 2013. However, because the Army utilizes annual Periodic Health Assessments (PHAs) to comply with MHA requirements at 18 and 30 months, paper forms are still used until the equivalent of the PDHRA is encoded into the Army PHA process. The Army expects to be fully automated by the end of 2013. Utilizing PHAs will allow the Army to comply with NDAA-directed MHAs, and provide annual assessments for all soldiers through their lifecycle, regardless of deployment status, exceeding NDAA-directed requirements. To the extent that the criteria and timeframes correspond, administration of the deployment MHA in the Army is aligned with the Pre-DHA, PDHRA, and the annual PHA.

The Army began capturing data electronically in February 2013. From February 2013, until May 29, 2013, the Army completed 90,743 deployment MHAs.

Navy and Marine Corps: The Navy and Marine Corps Active and Reserve Components began implementing the requirements of the MHA on April 16, 2012. The Navy Marine Corps Public Health Center electronic application, the Electronic Deployment Health Assessment (EDHA) and the Medical Readiness Reporting System (MRRS) databases were

modified to facilitate documentation and tracking of the requirement. All deployment MHAs are completed electronically.

The Navy began capturing data electronically on April 16, 2012. From April 16, 2012, until May 29, 2013, the Navy and the Marine Corps completed 117,537 deployment MHAs,

Air Force: The Air Force achieved full compliance with the deployment MHA implementation policy, per the NDAA for FY 2010, on January 1, 2011, for Active Duty, and April 1, 2011, for the Reserve Components. The Air Force revised their deployment MHA policy changes to meet the requirements of the NDAA for FY 2012, in concert with its implementation of the revised deployment health assessment forms beginning in October 2012. The Air Force fully implemented the new forms for all components by January 1, 2013.

The Air Force began capturing data electronically on January 1, 2011. From January 1, 2011, until May 29, 2013, the Air Force completed 362,735 deployment MHAs.

Coast Guard: The Coast Guard initially implemented deployment MHAs using a paper-based method on November 15, 2010. After the Navy modified MRRS and the EDHA database, the Coast Guard began electronic implementation on April 16, 2012. In addition, the Coast Guard is using the Reserve Health Readiness Program to assist with completion of deployed MHAs for Reservists and remotely located Active Duty members.

The Coast Guard began capturing data electronically on April 16, 2012. From April 16, 2012, until May 29, 2013, the Coast Guard completed 1,640 deployment MHAs.

TRAINING

DoDI 6490.12 requires that the Services ensure all health care providers are trained and certified to perform deployment MHAs. To ensure consistency across the military Services, a Web-based training module was developed in 2011, which includes the following topics: (a) analysis of self-report mental health screening questions; (b) detailed follow-up on positive responses to past mental health diagnoses and medication use; and (c) identification of symptoms of depression, PTSD, alcohol misuse, and other emotional, life stress, and mental health concerns. More than 8,600 providers who support the DoD deployment MHA process have successfully completed this training as of June 5, 2013. Access to review and certify the deployment MHA is granted only after documentation of completed training has been added to the provider's profile in the electronic deployment health database. Table 1 shows the number of providers trained by Service or organization:

Table 1: Providers Trained to Administer the Deployment Mental Health Assessment

Service	Number Trained
Army	2,449
Navy	2,153
Air Force	2,839
Marine Corps	11
Coast Guard	206
Reserve Health	621
Readiness Program	
Other	372
Total	8,651

SUMMARY

All Services have fully implemented the requirements of section 702 of the FY 2012 NDAA, and section 703 of the FY 2013 NDAA. As of March 2013, all Services administer the MHA electronically as part of the new Pre-DHA and PDHRA process, and the data are sent to the AFHSC. In addition, the Navy and Air Force transferred data on MHAs administered prior to the addition of the MHA questions into the new deployment health assessment forms. The total number of deployment MHAs received by the AFHSC as of May 29, 2013, is 557,516. This number does not include Army and Coast Guard MHAs that were administered by paper-based forms prior to implementation of the electronic forms, as these have yet to be transferred to the AFHSC.

ACRONYMS, TERMS, AND REFERENCES

Acronym	Term
AFHSC	Armed Forces Health Surveillance Center
DoD	Department of Defense
DoDI	Department of Defense Instruction
DTM	Directive-Type Memorandum
EDHA	Electronic Deployment Health Assessment
FY	Fiscal Year
MHA	Mental Health Assessment
MRRS	Medical Readiness Reporting System
NDAA	National Defense Authorization Act
PDHA	Post-Deployment Health Assessment (DD Form 2796)
PDHRA	Post-Deployment Health Reassessment (DD Form 2900)
PHA	Periodic Health Assessment
Pre-DHA	Pre-Deployment Health Assessment (DD Form 2795)
PTSD	Posttraumatic Stress Disorder

References

- (a) National Defense Authorization Act for Fiscal Year 2010
- (b) National Defense Authorization Act for Fiscal Year 2012
- (c) National Defense Authorization Act for Fiscal Year 2013
- (d) Section 1074m of Title 10, United States Code
- (e) Directive-Type Memorandum 11-011, "Mental Health Assessments for Members of the Military Services Deployed in Connection with a Contingency Operation," August 12, 2011 (hereby cancelled)
- (f) DoD Directive 6490.12, "Mental Health Assessments for Service Members Deployed in Connection with a Contingency Operation," February 26, 2013
- (g) Assistant Secretary of Defense for Health Affairs Memorandum, "Mental Health Assessments for Members of the Armed Forces Deployed in Connection with a Contingency Operation," July 19, 2010