

AMENDMENT TO RULES COMMITTEE PRINT

118–10

OFFERED BY MR. NEGUSE OF COLORADO

Add at the end of subtitle C of title VII the following:

1 **SEC. 7___ . STUDY ON ACCESSIBILITY OF OFF-BASE MEN-**
2 **TAL HEALTH CARE PROVIDERS.**

3 (a) STUDY AND REPORT.—

4 (1) Not later than 180 days after the date of
5 the enactment of this Act, the Assistant Secretary of
6 Defense for Health Affairs shall seek to conduct a
7 comprehensive study and report on the accessibility
8 of off-base mental health care providers and how
9 those services work to reduce the stigma of receiving
10 care, and provide recommendations for their imple-
11 mentation.

12 (2) In this section, the term “off-base mental
13 health care providers” refers to non-military treat-
14 ment facilities and mental health professionals oper-
15 ating outside of military installations.

16 (b) STUDY.—The study shall include, but not be lim-
17 ited to, the following:

1 (1) GEOGRAPHIC AVAILABILITY.—Evaluate the
2 distribution of off-base mental health care providers
3 relative to military installations and identify any
4 gaps in accessibility.

5 (2) APPOINTMENT WAIT TIMES.—Assess the av-
6 erage wait times for appointments with off-base
7 mental health care providers and identify any factors
8 contributing to delays.

9 (3) COST CONSIDERATIONS.—Examine the af-
10 fordability and insurance coverage options for off-
11 base mental health care services.

12 (4) OUTREACH AND EDUCATION.—Evaluate the
13 effectiveness of outreach programs aimed at reduc-
14 ing the stigma of seeking mental health care and in-
15 creasing awareness of off-base resources.

16 (5) COLLABORATION AND COORDINATION.—As-
17 sess the extent of collaboration and coordination be-
18 tween military treatment facilities and off-base men-
19 tal health care providers.

20 (6) BEST PRACTICES.—Identify successful
21 strategies employed by off-base mental health care
22 providers to improve accessibility and reduce stigma.
23 This will include:

1 (A) An assessment of existing off-base
2 mental health care providers within the Depart-
3 ment of Defense and their effectiveness.

4 (B) An evaluation of the potential benefits,
5 challenges, and limitations associated with ex-
6 panding off-base mental health care providers
7 for active service members.

8 (C) An analysis of the potential impact on
9 military readiness, retention, and overall force
10 resilience resulting from increased utilization
11 off-base mental health support services.

12 (e) STUDY REQUIREMENTS.—The Assistant Sec-
13 retary shall initiate a study, in consultation with relevant
14 stakeholders, to assess the accessibility of off-base mental
15 health care providers for military personnel and their de-
16 pendants.

17 (1) PARTICIPANTS.—The participants in the
18 roundtable shall include the following:

19 (A) The Under Secretary for Under Sec-
20 retary of Defense for Personnel and Readiness.

21 (B) The Assistant Secretary for Defense
22 Health.

23 (C) The Director of the Defense Human
24 Resources Activity.

1 (D) Other officials of the Department of
2 Defense or the Secretary of Defense determines
3 appropriate.

4 (E) Private entities that elect to partici-
5 pate.

6 (2) NOTICE.—The Assistant Secretary shall
7 publish notice of the roundtable in multiple private
8 sector forums and the Federal Register to encourage
9 participation in the roundtable by private entities
10 and entities interested in supporting the improve-
11 ment of the accessibility of off-base mental health
12 care providers for military personnel and their de-
13 pendants.

14 (d) REPORT.—

15 (1) Not later than one year after the initiation
16 of the study, the Assistant Secretary of Defense
17 shall submit a report to the Committee on Armed
18 Services of the House of Representatives and the
19 Committee on Armed Services of the Senate detail-
20 ing the findings, conclusions, and recommendations
21 resulting from the study and report.

22 (2) The report shall include a comprehensive
23 plan of action, including proposed timelines, mile-
24 stones, and resource requirements, for the actionable
25 recommendations for improving the accessibility of

1 off-base mental health care providers and reducing
2 the stigma associated with seeking care.

3 (3) The recommendations shall consider legisla-
4 tive, regulatory, and programmatic changes that
5 may be necessary to implement the proposed im-
6 provements.

