United States Senate

WASHINGTON, DC 20510

April 4, 2022

Dr. David J. Smith Acting Assistant Secretary of Defense for Health Affairs 1200 Defense, Pentagon Room 3E1070 Washington, DC 20301

LTG Ronald J. Place, USA Director, Defense Health Agency, Department of Defense 1200 Defense, Pentagon Room 3D886 Washington, DC 20301

Dear Assistant Secretary Smith and Director LTG Place:

We write to you with concern over the impact of eating disorders on active-duty and retired military families. Eating disorders are a serious mental illness that affect almost 30 million Americans and have the second-highest mortality rate of any psychiatric condition, accounting for one death every 52 minutes. When left untreated, eating disorders can lead to heart and kidney failure, osteoporosis, Type II diabetes, stroke, gastric rupture, hypoglycemia, and other medical injuries, sometimes causing death.

As you know, servicemembers and military families are affected by eating disorders at elevated rates compared to the civilian population due to risk factors unique to their military experience. Studies show that diagnoses of eating disorders among military personnel rose 26 percent from 2013 to 2016. Moreover, 21 percent of children and 26 percent of spouses of servicemembers are symptomatic of an eating disorder. Additionally, the suicide rate for those affected by eating disorders is 23 times higher than the rate for the general population, which is particularly concerning given that servicemembers already experience heightened rates of suicide. The problem is accelerating as recent studies have shown that 16 percent of female veterans have an eating disorder, and a 2020 report from the Defense Health Board revealed that active-duty servicewomen are disproportionately affected by eating disorders, impacting their readiness and health.

Title VII Section 701 of the Fiscal Year 2022 (FY22) National Defense Authorization Act (NDAA) authorized the Secretary of Defense to expand and build infrastructure to identify, treat, and rehabilitate servicemembers and military families affected by eating disorders. Today, we write to urge the Department of Defense (DOD), including the Defense Health Agency (DHA), to take actions to implement these provisions to expand eating disorders treatment coverage under TRICARE. While the FY22 NDAA expands eating disorder treatment coverage for active-duty military families, we urge

DOD to expand this coverage to retiree families. The Congressional Budget Office estimates that this expansion would cost just \$2 million over ten years. Given the nation's current mental health crisis, this will undoubtedly provide significant cost savings to DOD and our health care system in the long run.

Therefore, we ask you to use your existing authorities to expand eating disorder coverage to retiree families and improve DOD's infrastructure around eating disorders accordingly. We request a timely written response on the actions DOD can take to expand eating disorder treatment coverage. Thank you for your attention to this request.

Sincerely,

Jeanne Shaheen

United States Senator

Thom Tillis

United States Senator

Dianne Feinstein

United States Senator

Shelley Moore Capito United States Senator

Patty Murray

United States Senator

Amy Klobuchar

United States Senator

Tammy Baldwin United States Senator Tina Smith

United States Senator