

116TH CONGRESS  
1ST SESSION

# H. R. 2767

To amend title 10, United States Code, to provide for eating disorders treatment for members and certain former members of the uniformed services, and dependents of such members, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

MAY 15, 2019

Mr. MOULTON (for himself and Mr. MAST) introduced the following bill; which was referred to the Committee on Armed Services

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## A BILL

To amend title 10, United States Code, to provide for eating disorders treatment for members and certain former members of the uniformed services, and dependents of such members, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Supporting Eating dis-  
5 orders Recovery through Vital Expansion Act” or the  
6 “SERVE Act”.

7 **SEC. 2. FINDINGS.**

8 Congress finds the following:

1           (1) Eating disorders affect approximately  
2           30,000,000 Americans, including individuals from  
3           every age, gender, body size, race, and socioeconomic  
4           status.

5           (2) Eating disorders include anorexia nervosa,  
6           bulimia nervosa, binge-eating disorder, avoidant/re-  
7           strictive intake disorder, and Other Specified Feed-  
8           ing or Eating Disorders.

9           (3) Eating disorders result in the highest mor-  
10          tality rate of any psychiatric illness, and the suicide  
11          rate for individuals with such disorders is 23 percent  
12          higher than the suicide rate for the general popu-  
13          lation.

14          (4) Research demonstrates that—

15                (A) eating disorders often co-occur with  
16                complex medical conditions, mental illnesses,  
17                and substance use disorders; and

18                (B) up to 35 percent of individuals with a  
19                substance use disorder have a co-occurring eat-  
20                ing disorder.

21          (5) Studies indicate that there is a higher prev-  
22          alence of eating disorders among members of the  
23          Armed Forces and veterans than among the general  
24          population.

1           (6) Family members of members of the Armed  
2 Forces have a higher prevalence of eating disorders  
3 than the general population, with 20 percent of chil-  
4 dren of members of the Armed Forces found at risk  
5 of developing an eating disorder.

6           (7) Research has found a significant relation-  
7 ship between eating disorders and members of the  
8 Armed Forces and veterans with a history of post-  
9 traumatic stress and sexual trauma.

10           (8) Female members of the Armed Forces have  
11 a particularly high risk for an eating disorder, as  
12 studies have found that 16 percent of such members  
13 have an eating disorder and 34 percent of such  
14 members are at risk of developing an eating dis-  
15 order.

16 **SEC. 3. EATING DISORDERS TREATMENT FOR DEPEND-**  
17 **ENTS.**

18           Section 1077 of title 10, United States Code, is  
19 amended—

20           (1) in subsection (a)(5), by inserting “, includ-  
21 ing, in accordance with subsection (i), eating dis-  
22 orders” after “chronic conditions”; and

23           (2) by adding at the end the following new sub-  
24 section:

1 “(i)(1) The provision of health care services for an  
2 eating disorder under subsection (a)(5) shall include treat-  
3 ment at facilities providing the following hospital-based or  
4 freestanding services:

5 “(A) Inpatient services.

6 “(B) Residential services.

7 “(C) Partial hospitalization services.

8 “(D) Intensive outpatient services.

9 “(E) Outpatient services.

10 “(2) A dependent may be provided health care serv-  
11 ices for an eating disorder under subsection (a)(5) without  
12 regard to—

13 “(A) the age of the dependent; and

14 “(B) whether the dependent has a primary di-  
15 agnosis of such disorder.

16 “(3) In this section, the term ‘eating disorder’ has  
17 the meaning given that term in the Diagnostic and Statis-  
18 tical Manual of Mental Disorders, 5th Edition (or suc-  
19 cessor edition), published by the American Psychiatric As-  
20 sociation.”.

21 **SEC. 4. IDENTIFICATION AND TREATMENT OF EATING DIS-**  
22 **ORDERS FOR MEMBERS OF THE ARMED**  
23 **FORCES.**

24 Section 1090 of title 10, United States Code, is  
25 amended—

1           (1) by striking “The Secretary of Defense” and  
2           inserting the following:

3           “(a) IDENTIFICATION AND TREATMENT OF EATING  
4           DISORDERS AND DRUG AND ALCOHOL DEPENDENCE.—  
5           The Secretary of Defense”;

6           (2) by inserting “have an eating disorder or”  
7           before “are dependent on drugs or alcohol”; and

8           (3) by adding at the end the following new sub-  
9           sections:

10          “(b) FACILITIES AVAILABLE TO INDIVIDUALS WITH  
11          EATING DISORDERS.—For purposes of this section, ‘nec-  
12          essary facilities’ described in subsection (a) shall include  
13          the facilities described in section 1077(i)(1).

14          “(c) ELIGIBILITY FOR TREATMENT.—The Secretary  
15          of Defense, and the Secretary of Homeland Security with  
16          respect to the Coast Guard when it is not operating as  
17          a service in the Navy, may not deny a member of the  
18          armed forces treatment for an eating disorder on the basis  
19          that such disorder is not the primary diagnosis of such  
20          member.

21          “(d) EATING DISORDER DEFINED.—In this section,  
22          the term ‘eating disorder’ has the meaning given that term  
23          in section 1077(i)(3).”.

1 **SEC. 5. MENTAL HEALTH EARLY IDENTIFICATION TRAIN-**  
2 **ING.**

3 Section 1090a of title 10, United States Code, is  
4 amended—

5 (1) in subsection (b)—

6 (A) by striking “and” at the end of para-  
7 graph (1);

8 (B) by striking the period and inserting “;  
9 and” at the end of paragraph (2); and

10 (C) by adding at the end the following new  
11 paragraph:

12 “(3) encourage commanders and supervisory  
13 personnel to undertake mental health early identi-  
14 fication training.”; and

15 (2) in subsection (e), by adding at the end the  
16 following new paragraph:

17 “(4) The term ‘mental health early identifica-  
18 tion training’ means a training designed to educate  
19 the trainee on—

20 “(A) warning signs and symptoms of men-  
21 tal health illness, including an eating disorder;  
22 and

23 “(B) how to refer an individual for mental  
24 health treatment.”.

1 **SEC. 6. EXPEDITED ACCESS TO MENTAL HEALTH CARE.**

2 (a) FACILITIES PROVIDING MENTAL HEALTH SERV-  
3 ICES.—Chapter 55 of title 10, United States Code, is  
4 amended by inserting after section 1095g the following  
5 new section:

6 **“§ 1095h. Expedited approval of certain facilities pro-  
7 viding mental health services**

8 “The Secretary shall prescribe regulations to estab-  
9 lish that a facility may receive expedited authorization to  
10 provide services under this chapter if—

11 “(1) such facility is affiliated with a facility or  
12 provider authorized to provide services under this  
13 chapter; and

14 “(2) such facility only provides mental health  
15 services.”.

16 (b) CLERICAL AMENDMENT.—The table of sections  
17 at the beginning of such chapter is amended by inserting  
18 after the item relating to section 1095g the following new  
19 item:

“1095h. Expedited approval of certain facilities providing mental health serv-  
ices.”.

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