§ 1074f. Medical tracking system for members deployed overseas

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(a) System Required.—The Secretary of Defense shall establish a system to assess the medical condition of members of the armed forces (including members of the reserve components) who are deployed outside the United States or its territories or possessions as part of a contingency operation (including a humanitarian operation, peacekeeping operation, or similar operation) or combat operation.

(b) Elements of System.—(1) The system described in subsection (a) shall include the use of predeployment medical examinations and postdeployment medical examinations (including an assessment of mental health and the drawing of blood samples) to accurately record the medical condition of members before their deployment and any changes in their medical condition during the course of their deployment. The postdeployment examination shall be conducted when the member is redeployed or otherwise leaves an area in which the system is in operation (or as soon as possible thereafter).

(2) The predeployment and postdeployment medical examination of a member of the armed forces required under paragraph (1) shall include the following:

(A) An assessment of the current treatment of the member and any use of psychotropic medications by the member for a mental health condition or disorder.

(B) An assessment of traumatic brain injury.

(C) An assessment of post-traumatic stress disorder.

(3)(A) The Secretary shall establish for purposes of subparagraphs (B) and (C) of paragraph (2) a protocol for the predeployment assessment and documentation of the cognitive (including memory) functioning of a member who is deployed outside the United States in order to facilitate the assessment of the postdeployment cognitive (including memory) functioning of the member.

(B) The protocol under subparagraph (A) shall include appropriate mechanisms to permit the differential diagnosis of traumatic brain injury in members returning from deployment in a combat zone.

(c) Recordkeeping.—The results of all medical examinations conducted under the system, records of all health care services (including immunizations) received by members described in subsection (a) in anticipation of their deployment or during the course of their deployment, and records of events occurring in the deployment area that may affect the health of such members shall be retained and maintained in a centralized location to improve future access to the records.

(d) Quality Assurance.—(1) The Secretary of Defense shall establish a quality assurance program to evaluate the success of the system in ensuring that members described in subsection (a) receive

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predeployment medical examinations and postdeployment medical examinations and that the recordkeeping requirements with respect to the system are met.

(2) The quality assurance program established under paragraph (1) shall also include the following elements:

(A) The types of healthcare providers conducting postdeployment health assessments.

(B) The training received by such providers applicable to the conduct of such assessments, including training on assessments and referrals relating to mental health.

(C) The guidance available to such providers on how to apply the clinical practice guidelines developed under subsection (e)(1) in determining whether to make a referral for further evaluation of a member of the armed forces relating to mental health.

(D) The effectiveness of the tracking mechanisms required under this section in ensuring that members who receive referrals for further evaluations relating to mental health receive such evaluations and obtain such care and services as are warranted.

(E) Programs established for monitoring the mental health of each member who, after deployment to a combat operation or contingency operations, is known—

(i) to have a mental health condition or disorder; or

(ii) to be receiving treatment, including psychotropic medications, for a mental health condition or disorder.

(F) The diagnosis and treatment of traumatic brain injury and post-traumatic stress disorder.

(e) Criteria for Referral for Further Evaluations.—The system described in subsection (a) shall include—

(1) development of clinical practice guidelines to be utilized by healthcare providers in determining whether to refer a member of the armed forces for further evaluation relating to mental health (including traumatic brain injury);

(2) mechanisms to ensure that healthcare providers are trained in the application of such clinical practice guidelines; and

(3) mechanisms for oversight to ensure that healthcare providers apply such guidelines consistently.

(f) Minimum Standards for Deployment.—(1) The Secretary of Defense shall prescribe in regulations minimum standards for mental health for the eligibility of a member of the armed forces for deployment to a combat operation or contingency operation.

(2) The standards required by paragraph (1) shall include the following:

(A) A specification of the mental health conditions, treatment for such conditions, and

receipt of psychotropic medications for such conditions that preclude deployment of a member of the armed forces to a combat operation or contingency operation, or to a specified type of such operation.

(B) Guidelines for the deployability and treatment of members of the armed forces diagnosed with a severe mental illness, traumatic brain injury, or post traumatic stress disorder.

(3) The Secretary shall take appropriate actions to ensure the utilization of the standards prescribed under paragraph (1) in the making of determinations regarding the deployability of members of the armed forces to a combat operation or contingency operation.

NOTES

Source
(Added Pub. L. 105-85, div. A, title VII, Sec. 765(a)(1), Nov. 18, 1997, 111 Stat. 1826; amended Pub. L. 109-364, div. A, title VII, Sec. 738(a)-(d), Oct. 17, 2006, 120 Stat. 2303; Pub. L. 110-181, div. A, title XVI, Sec. 1673(a)(1), (b), (c), Jan. 28, 2008, 122 Stat. 482, 483; Pub. L. 111-84, div. A, title X, Sec. 1073(a)(9), Oct. 28, 2009, 123 Stat. 2472.)

Amendments
2009—Subsec. (f)(3). Pub. L. 111-84 substituted "contingency" for "continency".

2008—Subsec. (b)(2)(C). Pub. L. 110-181, Sec. 1673(a)(1)(A), added subpar. (C).
Subsec. (b)(3). Pub. L. 110-181, Sec. 1673(a)(1)(B), added par. (3).
Subsec. (d)(2)(F). Pub. L. 110-181, Sec. 1673(b), added subpar. (F).
Subsec. (f). Pub. L. 110-181, Sec. 1673(c)(1), struck out "Mental Health" after "Minimum" in heading.
Subsec. (f)(2)(B). Pub. L. 110-181, Sec. 1673(c)(2), substituted ", traumatic brain injury, or" for "or".

2006—Subsec. (b). Pub. L. 109-364, Sec. 738(a), designated existing provisions as par. (1) and added par. (2).
Subsec. (d). Pub. L. 109-364, Sec. 738(d), designated existing provisions as par. (1) and added par. (2).
Subsec. (e). Pub. L. 109-364, Sec. 738(b), added subsec. (e).
Subsec. (f). Pub. L. 109-364, Sec. 738(c), added subsec. (f).

Mental Health Assessments For Members Of The Armed Forces Deployed In Connection With A Contingency Operation
Pub. L. 111-84, div. A, title VII, Sec. 708, Oct. 28, 2009, 123 Stat. 2376, provided that:

"(a) Mental Health Assessments.—

(1) In general.—Not later than 180 days after the date of the enactment of this Act [Oct. 28, 2009], the Secretary of Defense shall issue guidance for the provision of a person-to-person mental health assessment for each member of the Armed Forces who is deployed in connection with a contingency operation as follows:

(A) At a time during the period beginning 60 days before the date of deployment in connection with the contingency operation.

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(B) At a time during the period beginning 90 days after the date of redeployment from the contingency operation and ending 180 days after the date of redeployment from the contingency operation.

(C) Subject to subsection (d), not later than each of 6 months, 12 months, and 24 months after return from deployment.

(2) Exclusion of certain members.—A mental health assessment is not required for a member of the Armed Forces under subparagraphs (B) and (C) of paragraph (1) if the Secretary determines that the member was not subjected or exposed to operational risk factors during deployment in the contingency operation concerned.

"(b) Purpose.—The purpose of the mental health assessments provided pursuant to this section shall be to identify post-traumatic stress disorder, suicidal tendencies, and other behavioral health conditions identified among members of the Armed Forces described in subsection (a) in order to determine which such members are in need of additional care and treatment for such health conditions.

"(c) Elements.—

(1) In general.—The mental health assessments provided pursuant to this section shall—

(A) be performed by personnel trained and certified to perform such assessments and may be performed by licensed mental health professionals if such professionals are available and the use of such professionals for the assessments would not impair the capacity of such professionals to perform higher priority tasks;

(B) include a person-to-person dialogue between members of the Armed Forces described in subsection (a) and the professionals or personnel described by paragraph (1), as applicable, on such matters as the Secretary shall specify in order that the assessments achieve the purpose specified in subsection (b) for such assessments;

(C) be conducted in a private setting to foster trust and openness in discussing sensitive health concerns; and

(D) be provided in a consistent manner across the military departments.

(2) Treatment of current assessments.—The Secretary may treat periodic health assessments and other person-to-person assessments that are provided to members of the Armed Forces as of the date of the enactment of this Act [Oct. 28, 2009] as meeting the requirements for mental health assessments required under this section if the Secretary determines that such assessments and person-to-person assessments meet the requirements for mental health assessments established by this section.

"(d) Cessation of Assessments.—No mental health assessment is required to be provided to an individual under subsection (a)(1)(C) after the individual's discharge or release from the Armed Forces.

"(e) Sharing of Information.—

(1) In general.—The Secretary of Defense shall share with the Secretary of Veterans Affairs such information on members of the Armed Forces that is derived from confidential mental health assessments, including mental health assessments provided pursuant to this section and health assessments and other person-to-person assessments provided before the date of the enactment of this Act [Oct. 28, 2009], as the Secretary of Defense and the Secretary of Veterans Affairs jointly consider appropriate to ensure continuity of mental health care and treatment of members of the Armed Forces during their transition from health care and treatment provided by the Department of Defense to health care and treatment provided by the Department of Veterans Affairs.

(2) Protocols.—Any sharing of information under paragraph (1) shall occur pursuant to a protocol jointly established by the Secretary of Defense and the Secretary of Veterans

Affairs for purposes of this subsection. Any such protocol shall be consistent with the following:

(A) Applicable provisions of the Wounded Warrior Act (title XVI of Public Law 110-181; 10 U.S.C. 1071 note), including in particular, section 1614 of that Act (122 Stat. 443; 10 U.S.C. 1071 note).

(B) Section 1720F of title 38, United States Code.

"(f) Contingency Operation Defined.—In this section, the term 'contingency operation' has the meaning given that term in section 101(a)(13) of title 10, United States Code.

"(g) Reports.—

(1) Report on guidance.—Upon the issuance of the guidance required by subsection (a), the Secretary of Defense shall submit to Congress a report describing the guidance.

(2) Reports on implementation of guidance.—

(A) Initial report.—Not later than 270 days after the date of the issuance of the guidance, the Secretary shall submit to Congress an initial report on the implementation of the guidance by the military departments.

(B) Subsequent report.—Not later than two years after the date of the issuance of the guidance, the Secretary shall submit to Congress a report on the implementation of the guidance by the military departments. The report shall include an evidence-based assessment of the effectiveness of the mental health assessments provided pursuant to the guidance in achieving the purpose specified in subsection (b) for such assessments."

Administration And Prescription Of Psychotropic Medications For Members Of The Armed Forces Before And During Deployment

Pub. L. 111-84, div. A, title VII, Sec. 712, Oct. 28, 2009, 123 Stat. 2379, provided that:

"(a) Report Required.—Not later than October 1, 2010, the Secretary of Defense shall submit to the congressional defense committees [Committees on Armed Services and Appropriations of the Senate and the House of Representatives] a report on the implementation of policy guidance dated November 7, 2006, regarding deployment-limiting psychiatric conditions and medications.

"(b) Policy Required.—Not later than October 1, 2010, the Secretary shall establish and implement a policy for the use of psychotropic medications for deployed members of the Armed Forces. The policy shall, at a minimum, address the following:

(1) The circumstances or diagnosed conditions for which such medications may be administered or prescribed.

(2) The medical personnel who may administer or prescribe such medications.

(3) The method in which the administration or prescription of such medications will be documented in the medical records of members of the Armed Forces.

(4) The exam, treatment, or other care that is required following the administration or prescription of such medications."

Pilot Projects

Pub. L. 110-181, div. A, title XVI, Sec. 1673(a)(2), Jan. 28, 2008, 122 Stat. 482, provided that:

"(A) In developing the protocol required by paragraph (3) of section 1074f(b) of title 10, United States Code (as amended by paragraph (1) of this subsection), for purposes of assessments for traumatic brain injury, the Secretary of Defense shall conduct up to three pilot projects to evaluate various mechanisms for use in the protocol for such purposes. One of the mechanisms to be so evaluated shall be a computer-based assessment tool which shall, at a minimum, include the following:

(i) Administration of computer-based neurocognitive assessment.

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(ii) Pre-deployment assessments to establish a neurocognitive baseline for members of the Armed Forces for future treatment.

"(B) Not later than 60 days after the completion of the pilot projects conducted under this paragraph, the Secretary shall submit to the appropriate committees of Congress [Committees on Armed Services, Veterans' Affairs, and Appropriations of the Senate and the House of Representatives] a report on the pilot projects. The report shall include—

(i) a description of the pilot projects so conducted;

(ii) an assessment of the results of each such pilot project; and

(iii) a description of any mechanisms evaluated under each such pilot project that will be incorporated into the protocol.

"(C) Not later than 180 days after completion of the pilot projects conducted under this paragraph, the Secretary shall establish a means for implementing any mechanism evaluated under such a pilot project that is selected for incorporation in the protocol."

Implementation

Pub. L. 109-364, div. A, title VII, Sec. 738(f), Oct. 17, 2006, 120 Stat. 2304, provided that: "The Secretary of Defense shall implement the requirements of the amendments made by this section [amending this section] not later than six months after the date of the enactment of this Act [Oct. 17, 2006]."

Interim Standards For Blood Sampling

Pub. L. 108-375, div. A, title VII, Sec. 733(b), Oct. 28, 2004, 118 Stat. 1998, as amended by Pub. L. 109-364, div. A, title X, Sec. 1071(g)(9), Oct. 17, 2006, 120 Stat. 2402, provided that:

"(1) Time requirements.—Subject to paragraph (2), the Secretary of Defense shall require that—

"(A) the blood samples necessary for the predeployment medical examination of a member of the Armed Forces required under section 1074f(b) of title 10, United States Code, be drawn not earlier than 120 days before the date of the deployment; and

"(B) the blood samples necessary for the postdeployment medical examination of a member of the Armed Forces required under such section 1074f(b) of such title be drawn not later than 30 days after the date on which the deployment ends.

"(2) Contingent applicability.—The standards under paragraph (1) shall apply unless the Joint Medical Readiness Oversight Committee established by section 731(b) [10 U.S.C. 1074 note] recommends, and the Secretary approves, different standards for blood sampling."

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