



Bipartisan Representatives and Leaders in the Eating Disorders Field Urge Department of Defense to Implement the SERVE Act

WASHINGTON, D.C. (December 6, 2023)- The Department of Defense (DOD) and the Defense Health Agency (DHA) received two letters last week urging for a redetermination on the medical appropriateness of adult residential treatment centers (RTC) for eating disorders within TRICARE, the health care program for active-duty military members and their families. The [first letter](#) was sent from the Presidents of the Eating Disorders Coalition for Research, Policy, & Action and REDC Consortium respectively and the [second letter](#) was from bipartisan members of the U.S. House of Representatives.

In 2021, the bipartisan SERVE Act was passed as section 701 of the [Fiscal Year \(FY\) 2022 National Defense Authorization Act \(NDAA\)](#) P.L. 117-81. The legislation expands RTC for eating disorder recovery for servicemembers and dependents over the age of 20. Residential treatment is an evidence-based level of care effective in weight restoration and reduction of disordered eating behaviors for adult patients.¹ Private civilian health insurance programs typically cover all levels of care for eating disorders, including residential treatment, regardless of age.

Military spouses and children are diagnosed with eating disorders at rates three times higher than their peers.² According to the DOD, 19,468 dependents of servicemembers received an eating disorder diagnosis from FY 2014 through FY 2018.³ Additionally, the suicide rate for those affected by eating disorders is 23 times higher than the rate for the general population⁴, which is particularly concerning for service members who demonstrate heightened rates of suicide.⁵

¹ Fisher, M., Henretty, J. R., Cox, S. A., Feinstein, R., Fornari, V., Moskowitz, L., Schneider, M., Levine, S., Malizio, J., & Fishbein, J. (2019). Demographics and outcomes of patients with eating disorders treated in residential care. *Frontiers in Psychology*, 10, 2985. <https://www.frontiersin.org/articles/10.3389/fpsyg.2019.02985/full>

² Higgins Neyland, M. K., Shank, L. M., Burke, et al. (2020). Parental Deployment and Distress, and Adolescent Disordered Eating in Prevention-seeking Military Dependents. *The International Journal of Eating Disorders*, 53(2), 201–209. <https://doi.org/10.1002/eat.23180>.

³ Bartlett, B. and Mitchell, K., 2015. Eating disorders in military and veteran men and women: A systematic review. *International Journal of Eating Disorders*, 48(8), pp.1057-1069.

⁴ Harris, E.C. & Barraclough, B. (1997). Suicide as an outcome for mental disorders: a meta-analysis. *British Journal of Psychiatry*, 170(3), 205- 228.

⁵ Vergun, David. (2021). Following Report, DOD to Redouble Suicide Prevention Efforts. Available at: Following Report, DOD to Redouble Suicide Prevention Efforts > U.S. Department of Defense > Defense Department News

Thirteen months after the deadline to implement the federal law, DOD still only covers residential eating disorders treatment for TRICARE dependents under the age of 20. DOD continues to cite its 2021 evidentiary determination, which omitted key evidence-based research and clinical guidance that supports RTC for eating disorders in adults.⁶ Instead, the Determination cited non-medical websites like “besthealthmag.ca,” “healthline.com,” and “todaysgeriatricmedicine.com.” These sources were later referenced by the DHA⁷ as its rationale to deny lifesaving eating disorders coverage for military families.

“Eating disorders in the military are often hidden beneath a culture that prioritizes physical fitness. This can unknowingly stigmatize body diversity and contribute to disordered eating behaviors,” **said Leah Stiles, USN Senior Chief, (retired), SEA WAVES Founder and EDC Ambassador.** “Coupled with the unique stressors of service, these conditions affect not only physical health but also mental well-being, job performance, and military readiness. It’s essential to remember that untreated eating disorders can lead to severe health complications and tragically, even suicide, which is the leading cause of death in eating disorder cases.”

A body of published peer-reviewed research supports the safety and efficacy of RTC for adults. Among adult-only samples, research has revealed improvements across most outcome measures, including changes in eating disorders psychopathology, depression, anxiety, weight, quality of life, and behavior.⁸ Among clinically significant change analyses, results demonstrated the RTC interventions were effective for the majority of individuals.⁹

“Removing TRICARE coverage for an individual who needs RTC care upon their 21st birthday disrupts therapeutic relationships, sabotages patient progress, and leads to poorer outcomes, **said Dr. Jillian Lampert, PhD, MPH, RD President, REDC Consortium.** “Congress has spoken: the bipartisan SERVE Act enshrined in law that RTC care for eating disorders should be included in the TRICARE benefit for adult military dependents.”

“We urge the DOD and DHA to reconsider their original assessment and pursue a new evidentiary determination into the effectiveness of RTC and the feasibility of adding it to the TRICARE benefit, **said Dr. Christine Peat, PhD, FAED, LP President, EDC.** “To best serve our nation’s military families, residential treatment for eating disorders must be included as a

⁶M. P., Bluett, E. J., Cullum, J. L., Mitchell, P. R., Powers, P. S., Lensegrav-Benson, T., & Quakenbush-Roberts, B. (2016). Effectiveness and clinical response rates of a residential eating disorders facility. *Eating Disorders*, 24(3), 224-239.; Peckmezian, T., & Paxton, S. J. (2020). A systematic review of outcomes following residential treatment for eating disorders. *European Eating Disorders Review*, 28(3), 246-259.; and Friedman, K., Ramirez, A. L., Murray, S. B., Anderson, L. K., Cusack, A., Boutelle, K. N., & Kaye, W. H. (2016). A narrative review of outcome studies for residential and partial hospital based treatment of eating disorders. *European Eating Disorders Review*, 24(4), 263-276.

⁷ Defense Health Agency. (2023). Letter in response to Senator Shaheen March 23, 2023 inquiry.

⁸ Friedman, K., Ramirez, A. L., Murray, S. B., Anderson, L. K., Cusack, A., Boutelle, K. N., & Kaye, W. H. (2016). A narrative review of outcome studies for residential and partial hospital-based treatment of eating disorders. *European Eating Disorders Review*, 24(4), 263-276.

⁹ Twohig, M. P., Bluett, E. J., Cullum, J. L., Mitchell, P. R., Powers, P. S., Lensegrav-Benson, T., & Quakenbush-Roberts, B. (2016). Effectiveness and clinical response rates of a residential eating disorders facility. *Eating Disorders*, 24(3), 224-239.

benefit covered by TRICARE.”

The Eating Disorders Coalition for Research, Policy & Action (EDC) is a federal advocacy organization based in Washington, D.C. The EDC advances the recognition of eating disorders as a public health priority throughout the U.S.

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