

**Not for publication until released by the Committee**

**Prepared Statement**

**of**

**Susan Orsega, DSc (hc), MS, NP,  
Deputy Assistant Secretary of Defense,  
Health Services Policy & Oversight  
Health Affairs**

**Regarding**

**Mission Transition: Evaluating Mental Health Support  
Programs for Separating Service Members**

**Before the**

**House Veterans' Affairs Committee,  
Subcommittee on Economic Opportunity**

**September 10, 2024**

**Not for publication until released by the Committee**

Chairman Van Orden, Ranking Member Levin, and distinguished Members of the House Veterans' Affairs Committee, Subcommittee on Economic Opportunity, thank you for the opportunity to testify before you today. I am pleased to represent the Office of the Assistant Secretary of Defense for Health Affairs to discuss the Department of Defense's (DoD's) commitment to mental health support programs for separating Service members.

The DoD is committed to providing the highest level of mental health care to Service members. We ensure that those who serve our nation receive timely and high-quality health care, including care to address their mental health needs. This is particularly important during the transition from military to civilian life, when Service members are most vulnerable to suicide and some experience challenges such as the loss of a sense of purpose, post-traumatic stress disorder, and other mental health symptoms.

In this testimony, we will inform the Subcommittee about the Department's current mental health programs and resources during the transition from military to civilian life – including the inTransition program, the Transition Assistance Program (TAP), and Military OneSource, as well as the Department's implementation of recommendations from the U.S. Government Accountability Office (GAO) report, "DOD AND VA HEALTH CARE: Actions Needed to Better Facilitate Access to Mental Health Services During Military to Civilian Transitions" (GAO-24-106189).

The DoD created the inTransition program in 2010 in response to a 2007 report by the DoD Task Force on Mental Health, which revealed that a number of Service members were disengaging from mental health care treatment as they transitioned from the DoD to the Department of Veterans Affairs (VA) health care system, contributing to their worsened mental health. For 14 years, inTransition has facilitated continuity of care and connection to continued mental health resources for Service members receiving mental health and/or moderate to severe traumatic brain injury (TBI) care as they move into civilian life. The program supports a Service member's efforts to achieve and maintain wellness and enables continuity of needed services, including mental health services.

The inTransition program supports all transitioning Service members and veterans regardless of the duration of their service, time since discharge, or category of discharge. All Service members who are leaving the military service and who have received care for mental health and/or moderate to severe TBI within one year of their separation are automatically enrolled in the inTransition program, and Service members can also get connected to services through self- or provider-referrals.

Automatic enrollment is an "opt out" process, where neither written consent from the patient nor a signed authorization is required to enroll the Service member in the inTransition Program; however, Service members are provided a choice to remain in or opt out of the program. If the Service member does not opt out of the program, health care providers or designated staff can, in collaboration with the Service member, start enrollment by calling the inTransition number at (800) 424-7877. During this process, health care providers or designated staff provide the name, contact information, destination or discharge status, and diagnosis to the inTransition coach. Service members may also be made aware of the inTransition program and

self-refer through multiple channels, including the TAP curriculum, provider referrals, and inTransition program marketing and outreach activities. If not self-referred or provider-referred, all eligible service members are automatically enrolled and called by the inTransition program to discuss the program and provide services.

The inTransition program includes a call center that operates 24/7, 365 days a year, where program staff are available to respond to Service member questions concerning their mental health, and to inform Service members of local resources to meet their mental health needs. The program also provides Service members with specialized one-on-one motivational coaching, information, support, and education to encourage Service members to continue to engage with any needed mental health services. Coaches maintain regular telephonic contact (weekly, or at the preference of the Service member) until the Service member has been transitioned to the new provider and/or opts out of the program.<sup>1</sup> Coaches work with Service members to identify eligible referral destinations, support connecting them with a new mental health provider, and facilitate “warm handoff” referrals to VA personnel who guide Service members through the VA healthcare system to a VA mental health provider.<sup>2,3</sup> Through DoD’s inTransition program, the program staff, coaches, and separating Service members work together to help continue Service member engagement with mental health care services in accordance with the individual needs, preferences, and circumstances of each Service member.

Since 2019 the DoD has leveraged an Interactive Customer Evaluation (ICE) tool, which collects feedback on services provided within the DoD. All Service members and Veterans who participate in inTransition coaching services are requested to evaluate the program through the completion of an ICE survey. Since its inception, ICE data demonstrates that Service members who have participated in the inTransition program have indicated their satisfaction with the program and its ability to help connect them with necessary mental health supports and resources during their transition. The inTransition program regularly receives positive feedback from the field, including from military medical treatment facility staff, the VA, Vet Centers, and the Veterans Crisis Line—reflecting the program’s significant and successful role within the DoD and VA community.

In addition to inTransition, the DoD implements TAP, which is the result of an interagency partnership among the DoD, VA, the Departments of Labor, Education, and Homeland Security, the Small Business Administration, and the Office of Personnel Management.<sup>4</sup> TAP addresses the many facets of a Service member’s transition while providing information, resources, and tools to Service members to help them prepare for the move from military to civilian life. TAP includes counseling from DoD, VA, and DOL on various benefits, programs, services, tools, and other important resource entitlements for which Service members may be eligible, as well as curriculums that educate Service members on VA mental health resources that they can engage with during their transition and when they have reintegrated into civilian life.<sup>5</sup> Through TAP, if it is determined that a Service member is not prepared for

---

<sup>1</sup> [Defense Health Agency Administrative Instruction \(DHA-AI\) 6490.02, “inTransition Program,” March 7, 2024.](#)

<sup>2</sup> [DHA-AI 6490.02.](#)

<sup>3</sup> [Health.mil](#); “inTransition.”

<sup>4</sup> [DoDTAP.mil](#); “Partnering Agencies.”

<sup>5</sup> [DoDTAP.mil](#); “TAP Curriculum.”

transition, there is a warm handover between TAP counselors and the appropriate partner or agency to connect Service members with the needed resources to further assist them post-transition.

Service members participate in TAP up to one year prior to separation or two years prior to retiring to help prepare for their transition and to proactively inform them of available resources to maintain their mental health during their journey back to civilian life.<sup>6</sup> Service members who have participated in TAP have indicated that the program is valuable and that they are satisfied with its ability to educate them on accessing resources, with 91% of respondents confirming that they know how to access transition-related resources, according to 2023 survey results.

Military OneSource is a 24/7 resource available to all Service members and families regardless of whether they are transitioning to civilian life. One element of Military OneSource offers transitioning Service members consultations on navigating their transition and provides information on the resources and programs available to help Service members have a successful transition.<sup>7</sup> Through Military OneSource, Service members have access to confidential non-medical counseling up to a year after their separation or retirement.<sup>8</sup> These resources, along with programs like inTransition and TAP, offer transitioning Service members with a comprehensive set of tools to promote continuity of mental health care.

The mental health of Service members remains a priority for the DoD, and we are continuously identifying opportunities to improve the delivery of mental health support for those who serve our nation. The recently published GAO report, “DOD AND VA HEALTH CARE: Actions Needed to Better Facilitate Access to Mental Health Services During Military to Civilian Transition” (July 15, 2024), reviewed access to mental health services for transitioning Service members, which included examining elements of the DoD’s inTransition program and the DoD-VA Joint Executive Committee’s (JEC) assessment of the effectiveness of efforts to facilitate access to mental health services for transitioning Service members.

The GAO’s review identified challenges for inTransition to conduct outreach to Service members and to connect with Service members that are automatically enrolled in the program. Consequently, GAO provided the following five recommendations, which included a revision of inTransition’s enrollment criteria and outreach policy, establishment of inTransition performance goals, and an assessment by the DoD-VA JEC of the departments’ efforts to facilitate access to mental health services:

- Recommendation 1: The Defense Health Agency (DHA) should revise the inTransition program’s criteria for auto-enrollment as outlined in its policy to identify and enroll eligible Service members prior to their separation from the military.
- Recommendation 2: DHA should revise the inTransition program’s policy to expand the outreach methods used by the program to contact automatically enrolled Service

---

<sup>6</sup> [DoD Instruction 1332.35, “Transition Assistance Program \(TAP\) for Military Personnel,” September 26, 2019.](#)

<sup>7</sup> [Militaryonesource.mil](#); “Military OneSource’s Transitioning Veterans Consultation.”

<sup>8</sup> [Militaryonesource.mil](#); “Military Transition to Civilian Life Comes with a Full Year of Support from Military OneSource.”

PASSBACK

members, such as by adding requirements for outreach through email, text, or the use of location services.

- Recommendation 3: DHA should establish measurable performance goals for the inTransition program that have quantitative targets and time frames.
- Recommendation 4: DHA should implement a process for the inTransition program to use performance information to assess its effectiveness and make any needed improvements, as appropriate.
- Recommendation 5: The DoD-VA JEC should assess the effectiveness of DoD and VA programs and processes overall in facilitating access to mental health services across the transition continuum, and recommend any needed changes to DoD and VA, including changes to address any identified gaps or unnecessary duplication or overlap.

The DoD reviewed the GAO report and recommendations and a formal comment from the Department is in progress. We are committed to continuing to enhance the inTransition program and to assessing the effectiveness of transition-related programs in order to improve continuity of care for transitioning Service members.

Thank you for your continued support of the health and well-being of our Service members and for inviting me to be here with you today to discuss the important issue of continuity of mental health support services for Service members transitioning to civilian life. We recognize that we have more work to do, and much more progress to make, in support of our Service members when they are most vulnerable as they transition into civilian life. We remain committed to enabling Service members to receive the necessary mental health support they need during this life-changing and important transition. I look forward to your questions.