



**OFFICE OF THE UNDER SECRETARY OF DEFENSE**

4000 DEFENSE PENTAGON  
WASHINGTON, D.C. 20301-4000

PERSONNEL AND  
READINESS

The Honorable Mike D. Rogers  
Chairman  
Committee on Armed Services  
U.S. House of Representatives  
Washington, DC 20515

**SEP 11 2025**

Dear Mr. Chairman:

The Department's response to section 737 of the James M. Inhofe National Defense Authorization Act for Fiscal Year 2023 (Public Law 117-263), "Improvements Relating to Behavioral Health Care Available Under Military Health System," is enclosed. Section 737 requires that the Secretary of Defense conduct an analysis of the behavioral health workforce under the direct care component of the Military Health System.

The findings of this analysis are summarized in this report. Specifically, this report includes workforce data civilian and military behavioral health personnel based on type of facility, specialty, Military Department, and demand.

Thank you for your continued strong support for the health and well-being of our Service members, veterans, and their families. I am sending a similar letter to the Committee on Armed Services of the Senate.

Sincerely,

Merlynn Carson, MD  
Performing the Duties of the Deputy Under  
Secretary of Defense for Personnel and  
Readiness

Enclosure:  
As stated

cc:  
The Honorable Adam Smith  
Ranking Member



## OFFICE OF THE UNDER SECRETARY OF DEFENSE

4000 DEFENSE PENTAGON  
WASHINGTON, D.C. 20301-4000

PERSONNEL AND  
READINESS

The Honorable Roger F. Wicker  
Chairman  
Committee on Armed Services  
United States Senate  
Washington, DC 20510

SEP 11 2025

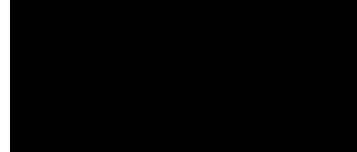
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Sincerely,

  
Merlynn Carson, MD  
Performing the Duties of the Deputy Under  
Secretary of Defense for Personnel and  
Readiness

Enclosure:  
As stated

cc:  
The Honorable Jack Reed  
Ranking Member

# **Report to the Committees on Armed Services of the Senate and the House of Representatives**



## **Improvements Relating to Behavioral Health Care Available Under Military Health System**

**September 2025**

The estimated cost of this report or study for the Department of Defense (DoD) is approximately \$8,460 in Fiscal Years 2023 - 2025. This includes \$0 in expenses and \$8,460 in DoD labor.  
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## INTRODUCTION

This report is in response to section 737 of the James M. Inhofe National Defense Authorization Act for Fiscal Year (FY) 2023 (Public Law 117–263), which requires that the Secretary of Defense (SecDef) conduct an analysis of the behavioral health (BH) workforce under the direct care component of the Military Health System (MHS) and provide a report containing the results of such analysis.

Section 737(c)(1) requires the report to include the following data for the professions described in paragraph (2),<sup>1</sup> including those at remote locations (e.g., Guam and Hawaii):

- (A) The number of positions authorized for military behavioral health providers within such workforce, and the number of such positions filled, disaggregated by the professions described in paragraph (2).
- (B) The number of positions authorized for civilian behavioral health providers within such workforce, and the number of such positions filled, disaggregated by the professions described in paragraph (2).
- (C) For each military department, the ratio of military behavioral health providers assigned to military medical treatment facilities compared to civilian behavioral health providers so assigned, disaggregated by the professions described in paragraph (2).
- (D) For each military department, the number of military behavioral health providers authorized to be embedded within an operational unit, and the number of such positions filled, disaggregated by the professions described in paragraph (2).
- (E) Data on the historical demand for behavioral health services by members of the Armed Forces.
- (F) An estimate of the number of health care providers necessary to meet the demand by such members for behavioral health care services under the direct care component of the military health system, disaggregated by provider type.
- (G) An identification of any shortfall between the estimated number under subparagraph (F) and the total number of positions for behavioral health providers filled within such workforce.
- (H) Such other information as the Secretary may determine appropriate.

## BACKGROUND

Responsibility for this report was delegated by the SecDef to the Assistant Secretary of Defense for Health Affairs, specifically to the MHS Chief Human Capital Officer (CHCO) in the Office of the Deputy Assistant Secretary of Defense for Health Services Policy and Oversight. The CHCO gathered FY 2023 provider, authorization and fill rate, location, operational, and demand data from the Military Departments (MILDEPs) and the Defense Health Agency (DHA) to complete the analysis.

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<sup>1</sup> Clinical psychologists, social workers, counselors, and other professions the Secretary may determine as appropriate.

## FY 2023 DATA

(A) *The number of positions authorized for military behavioral health providers within such workforce, and the number of such positions filled, disaggregated by the professions described in paragraph (2).*

Aggregate totals reported below include data from the MILDEPs and DHA.

Specialty	Authorized	Filled
Psychiatrists	577	540
Clinical Psychologists	758	899
Social Workers	603	934
Counselors	N/A	N/A
MH <sup>2</sup> Nurse Practitioner	259	266
Psychiatric Nurse	65	68
BH Technician	3,743	3,165
<b>Total</b>	<b>6,005</b>	<b>5,872</b>

(B) *The number of positions authorized for civilian behavioral health providers within such workforce, and the number of such positions filled, disaggregated by the professions described in paragraph (2).*

Aggregate totals reported below include data from the MILDEPs and DHA.

Specialty	Authorized	Filled
Psychiatrists	250	162
Clinical Psychologists	1,020	637
Social Workers	2,104	1,518
Counselors	149	159
MH Nurse Practitioner	146	114
Psychiatric Nurse	0	0
BH Technician	153	170
<b>Total</b>	<b>3,822</b>	<b>2,760</b>

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<sup>2</sup> Mental health.

(C) For each military department, the ratio of military behavioral health providers assigned to military medical treatment facilities compared to civilian behavioral health providers so assigned, disaggregated by the professions described in paragraph (2).

### Army

Specialty	MIL <sup>3</sup>		CIV <sup>4</sup>	
	Authorized to MTFs <sup>5</sup>	Assigned to MTFs	Authorized to MTFs	Assigned to MTFs
Psychiatrists	192	140	0	1
Clinical Psychologists	76	65	181	104
Social Workers	100	80	471	447
Counselors	0	0	4	21
MH Nurse Practitioner	47	36	0	0
Psychiatric Nurse	50	54	0	0
BH Technician	565	437	130	169
<b>Total</b>	<b>1,030</b>	<b>812</b>	<b>786</b>	<b>742</b>

### Navy

Specialty	MIL		CIV	
	Authorized to MTFs	Assigned to MTFs	Authorized to MTFs	Assigned to MTFs
Psychiatrists	84	69	1	1
Clinical Psychologists	122	94	1	0
Social Workers	58	57	0	0
Counselors	N/A	N/A	N/A	N/A
MH Nurse Practitioner	33	21	0	0
BH Technician	384	341	0	0
<b>Total</b>	<b>681</b>	<b>582</b>	<b>2</b>	<b>1</b>

<sup>3</sup> Military.

<sup>4</sup> Civilian.

<sup>5</sup> Military medical treatment facilities.

## Air Force

Specialty	MIL		CIV	
	Authorized to MTFs	Assigned to MTFs	Authorized to MTFs	Assigned to MTFs
Psychiatrists	88	84	7	0
Clinical Psychologists	211	168	59	1
Social Workers	234	203	118	40
Counselors	N/A	N/A	3	2
MH Nurse Practitioner	47	38	6	1
BH Technician	879	761	22	0
<b>Total</b>	<b>1,459</b>	<b>1,254</b>	<b>215</b>	<b>44</b>

## DHA

Specialty	MIL		CIV	
	Authorized to MTFs	Assigned to MTFs	Authorized to MTFs	Assigned to MTFs
Psychiatrists	N/A	N/A	240	154
Clinical Psychologists	N/A	N/A	776	528
Social Workers	N/A	N/A	1,160	756
Counselors	N/A	N/A	85	84
MH Nurse Practitioner	N/A	N/A	85	62
BH Technician	N/A	N/A	N/A	N/A
<b>Total</b>	<b>N/A</b>	<b>N/A</b>	<b>2,346</b>	<b>1,584</b>

(D) For each military department, the number of military behavioral health providers authorized to be embedded within an operational unit, and the number of such positions filled, disaggregated by the professions described in paragraph (2).

DoD assessed the number of military BH providers authorized to be embedded within an operational unit, and the number of positions filled, disaggregated by profession for FY 2023. For this analysis, embedded providers are defined as “embedded BH” (EBH) uniformed military providers, who provide psychotherapy and BH services, assigned specifically to operational units and training commands.

EBH providers are not directly assigned to an MTF, however, they may provide some level of care within MTFs or serve as borrowed manpower to MTFs. Nearly all EBH providers have orders directly to operational units on a full-time basis. EBH providers who work from MTF spaces fall under the authority, direction, and control of their unit commander.

## Army

Specialty	Authorized	Filled
Psychiatrists	46	45
Clinical Psychologists	104	102
Clinical Social Workers	143	141
Counselors	0	0
MH Nurse Practitioner	0	0
BH Technician	318	359
<b>Total</b>	<b>611</b>	<b>647</b>

## Navy

Specialty	Authorized	Filled
Psychiatrists	41	45
Clinical Psychologists	94	106
Clinical Social Workers	34	39
Counselors	0	0
MH Nurse Practitioner	6	8
BH Technician	143	158
<b>Total</b>	<b>318</b>	<b>356</b>

## Air Force

Specialty	Authorized	Filled
Psychiatrists	0	0
Clinical Psychologists	90	50
Clinical Social Workers	85	48
Counselors	0	0
MH Nurse Practitioner	0	0
BH Technician	28	24
<b>Total</b>	<b>203</b>	<b>122</b>

(E) Data on the historical demand for behavioral health services by members of the Armed Forces.

DoD assessed historical demand for BH services by members of the Armed Forces by reviewing in-person and telehealth encounters from FY 2015 to 2023. DHA reported that it does not track encounters and therefore did not provide data. The Army National Guard noted that it began tracking MH data in October 2015 and MH telehealth services began in FY 2020 in response to the coronavirus disease 2019 pandemic. No data from Army Medical Command or the Army Reserves was provided. Encounter data provided by Navy starts in 2017 and does not include data for Service members seen for MH concerns in the emergency departments, urgent care, or inpatient BH. The Air Force data includes Air Force Reserve Command Directors of Psychological Health encounters.

Encounters	2015	2016	2017	2018	2019	2020	2021	2022	2023
In-Person*	17,168	83,677	750,075	817,033	832,450	711,611	869,913	782,359	712,982
Telehealth	N/A	N/A	N/A	N/A	N/A	2232	2535	1025	0
<b>Total</b>	<b>17,168</b>	<b>83,677</b>	<b>750,075</b>	<b>817,033</b>	<b>832,450</b>	<b>713,843</b>	<b>872,448</b>	<b>783,384</b>	<b>712,982</b>

\*includes all Navy direct care encounters.

*(F) An estimate of the number of health care providers necessary to meet the demand by such members for behavioral health care services under the direct care component of the military health system, disaggregated by provider type.*

DoD assessed the number of health care providers necessary to meet the demand of members. The Army Medical Command and the Air Force Medical Service do not track this information.

### Army National Guard

Specialty	MIL	CIV	Total
Psychiatrists	23	N/A	<b>23</b>
Clinical Psychologists	90	N/A	<b>90</b>
Social Workers	241	N/A	<b>241</b>
Counselors	N/A	N/A	N/A
MH Nurse Practitioner	N/A	N/A	N/A
BH Technician	258	N/A	<b>258</b>
<b>Total</b>	<b>612</b>	N/A	<b>612</b>

### Navy

Specialty	MIL	CIV	Total
Psychiatrists	167	2	<b>169</b>
Clinical Psychologists	339	0	<b>339</b>
Social Workers	109	2	<b>111</b>
Counselors	N/A	N/A	N/A
MH Nurse Practitioner	45	0	<b>45</b>
BH Technician	801	0	<b>801</b>
<b>Total</b>	<b>1,461</b>	4	<b>1,465</b>

### Air National Guard

Specialty	MIL	CIV	Total
Psychiatrists	N/A	N/A	N/A
Clinical Psychologists	N/A	0	<b>0</b>
Social Workers	N/A	6	<b>6</b>
Counselors	N/A	N/A	N/A
MH Nurse Practitioner	N/A	N/A	N/A
BH Technician	N/A	N/A	N/A
<b>Total</b>	N/A	<b>6</b>	<b>6</b>

## DHA

Specialty	MIL	CIV	Total
Psychiatrists	N/A	183	<b>183</b>
Clinical Psychologists	N/A	630	<b>630</b>
Social Workers	N/A	974	<b>974</b>
Counselors	N/A	89	<b>89</b>
MH Nurse Practitioner	N/A	75	<b>75</b>
BH Technician	N/A	N/A	<b>N/A</b>
<b>Total</b>	<b>N/A</b>	<b>1951</b>	<b>1951</b>

*(G) An identification of any shortfall between the estimated number under subparagraph (F) and the total number of positions for behavioral health providers filled within such workforce.*

Data is not available to fully examine the shortfall between the estimated number of health care providers necessary to meet the demand and the number of positions for BH providers filled for all MILDEPS and DHA. Preliminary findings, however, indicate that such a shortfall exists. For instance, the Navy reported that 1,064 of 1,100 authorized BH provider positions are currently filled. However, 1,465 BH providers are required to meet the demand.

*(H) Such other information as the Secretary may determine appropriate.*

Caveats:

- The data in the above tables does not include students and trainees.
- Data provided as of Q4, FY 2023.
- Reporting authorized and filled rates does not fully capture the story of BH staffing. For instance, there are 192 authorized positions for the Air National Guard's Director of Psychological Health Program. However, only 116 of these authorized positions are funded, leaving 76 unfunded.

## CONCLUSION

This report details BH staffing information including civilian authorized and filled positions, military authorized and filled positions, historic demand, ratios of civilian to military providers in MTFs, embedded BH providers, and differences between staffing needed to meet demand and authorized positions. In addition to shortfalls between authorized and filled positions, there are also shortfalls between staffing needed to meet demand and authorized positions. BH staffing remains a critical topic for the MHS and leadership will continue to leverage recruitment, retention, and incentive strategies wherever possible.