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## Congress of the United States

August 22, 2006

Committee on Education  
and the Workforce

Permanent Select Committee  
on Intelligence  
Ranking Member  
Subcommittee on Intelligence Policy

Co-Chair  
Children's Environmental Health Caucus  
Member  
Congressional Arts Caucus  
Internet Caucus  
Law Enforcement Caucus  
Historic Preservation Caucus

The Honorable William Winkenwerder, Jr.  
Assistant Secretary of Defense for Health Affairs  
1200 Defense Pentagon, Room 3E1082  
Washington, D.C. 20301-1200

Dear Assistant Secretary Winkenwerder,

On August 17, we obtained the attached letter from the commander of the Patterson Army Health Clinic (PAHC) that apparently went to all TRICARE Plus beneficiaries who currently use the PAHC for their medical care, explaining that they will need to find alternative care providers by October 16, 2006. This would add expense and inconvenience to the patients. We wish to voice our strong opposition to this move, and demand that you meet with us to discuss alternatives.

Of course we understand the financial constraints facing the military clinics, and the impending Fort Monmouth closure later this decade necessitates your examining options for the Patterson Clinic. During a teleconference on August 10 with Dr. Steve Jones (OASD-HA), Col. John Morse, and Capt. Ronald Forbus, we discussed options that continue the functions of the clinic.

As discussed in our teleconference, a number of options are being explored that would continue the function of the clinic, if not its active military status, including an expanded veteran's clinic with a reciprocal TRICARE agreement. We were assured that these options would be fully explored with the Department of Veterans Affairs, the New Jersey Department of Military and Veterans Affairs, and the Fort Monmouth Economic Revitalization Planning Authority prior to any degradation of service at the PAHC. We were startled to discover one week later that these assurances seemed meaningless.

It is incumbent upon you to work with Army Secretary Francis Harvey, the VA, DMAVA, and the FMERPA to find whatever resources are necessary keep the PAHC open or otherwise ensure both the continuity and quality of care provided, until a plan has been established to care for area retirees. The TRICARE patients of the Patterson Clinic should have no less care than others in the military networks because of BRAC decisions that had nothing to do with them and were beyond their control. We look forward to your response.

Sincerely,

RUSH HOLT  
Member of Congress

FRANK PALLONE, JR.  
Member of Congress

cc: Dr. Steve Jones (OASD Health Affairs)

## **Fort Monmouth clinic continues health care services; military dependents, retirees to receive TRICARE-Plus**

**FORT MONMOUTH, NJ** August 31, 2006 - TRICARE-Plus health care services will not be terminated at Patterson Army Health Clinic (PAHC) on 15 October 2006, as previously announced.

The NARMC commander, Maj. Gen. George W. Weightman, has authorized additional staffing at PAHC, enabling it to continue serving TRICARE-Plus patients.

“The North Atlantic Regional Medical Command is committed to providing the highest quality of health care to our eligible beneficiaries,” Weightman said. “We were able to leverage our resources so that we could continue serving the TRICARE Plus population along with the other enrollees at Patterson Army Health Clinic.”

Initially, the NARMC staff will re-enforce the PAHC medical staff with an additional military primary care physician. The Army doctor will remain on station until a more long term solution can be implemented.

The NARMC and PAHC have established an excellent relationship with the Fort Monmouth community and are committed to providing the highest level of care for its beneficiaries.