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(Original Signature of Member)

112TH CONGRESS
2D SESSION

H. R.

To direct the Secretary of Defense to submit a report to Congress on the future availability of TRICARE Prime throughout the United States and to ensure that certain TRICARE beneficiaries retain access to a primary care provider, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

Mr. WALDEN (for himself, Mr. AMODEI, and Ms. BONAMICI) introduced the following bill; which was referred to the Committee on

A BILL

To direct the Secretary of Defense to submit a report to Congress on the future availability of TRICARE Prime throughout the United States and to ensure that certain TRICARE beneficiaries retain access to a primary care provider, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “TRICARE Protection
5 Act”.

1 **SEC. 2. FUTURE AVAILABILITY OF TRICARE PRIME**
2 **THROUGHOUT THE UNITED STATES.**

3 (a) REPORT REQUIRED.—

4 (1) IN GENERAL.—Not later than 90 days after
5 the date of the enactment of this Act, the Secretary
6 of Defense shall submit to the Committees on Armed
7 Services of the Senate and the House of Representa-
8 tives a report setting forth the policy of the Depart-
9 ment of Defense on the future availability of
10 TRICARE Prime under the TRICARE program for
11 eligible beneficiaries in all TRICARE regions
12 throughout the United States.

13 (2) ELEMENTS.—The report required by para-
14 graph (1) shall include the following:

15 (A) A description, by region, of the dif-
16 ference in availability of TRICARE Prime for
17 eligible beneficiaries (other than eligible bene-
18 ficiaries on active duty in the Armed Forces)
19 under newly awarded TRICARE managed care
20 contracts, including, in particular, an identifica-
21 tion of the regions or areas in which TRICARE
22 Prime will no longer be available for such bene-
23 ficiaries under such contracts.

24 (B) In accordance with paragraph (3), a
25 plan to ensure that an affected eligible bene-
26 ficiary identified under subsection (b) retains

1 access to a primary care provider that meets
2 the TRICARE access standards.

3 (C) An estimate of the increased costs to
4 be incurred by an affected eligible beneficiary
5 for health care under the TRICARE program.

6 (D) An estimate of the savings to be
7 achieved by the Department as a result of the
8 contracts described in subparagraph (A).

9 (E) A description of the plans of the De-
10 partment to continue to assess the impact on
11 access to health care for affected eligible bene-
12 ficiaries, including the plan to carry out sub-
13 section (b).

14 (3) DEVELOPMENT OF PLAN.—In developing
15 the plan described in paragraph (2)(B), the Sec-
16 retary shall include the following actions under such
17 plan:

18 (A) The establishment of a navigator serv-
19 ice to assist an affected eligible beneficiary
20 identified under subsection (b) in locating a pri-
21 mary care provider.

22 (B) Allowing an affected eligible bene-
23 ficiary to enroll in TRICARE Prime Remote if
24 the Secretary determines that the beneficiary
25 would not otherwise have access to a primary

1 care provider that meets the TRICARE access
2 standards, regardless of whether such eligible
3 beneficiary would otherwise be eligible for such
4 program.

5 (C) Any other action the Secretary con-
6 siders appropriate.

7 (b) IDENTIFICATION OF BENEFICIARIES WITHOUT
8 ACCESS TO A PRIMARY CARE PROVIDER.—The Secretary
9 shall identify the affected eligible beneficiaries whom the
10 Secretary determines, because of the contracts described
11 in subsection (a)(2)(A), will not retain access to a primary
12 care provider that meets the TRICARE access standards.

13 (c) IMPLEMENTATION OF PLAN.—

14 (1) INITIAL IMPLEMENTATION.—Beginning on
15 the date that is 60 days after the date on which the
16 Secretary submits the report under paragraph (1) of
17 subsection (a), the Secretary shall implement the
18 plan described in paragraph (2)(B) of such sub-
19 section.

20 (2) DURATION.—The Secretary shall carry out
21 the implementation of the plan under paragraph (1)
22 until the earlier of the following dates:

23 (A) Any date after the date that is one
24 year after the date on which the Secretary be-
25 gins to carry out such implementation if the

1 Secretary determines that each affected eligible
2 beneficiary identified under subsection (b) will
3 have access to a primary care provider under a
4 contract described in subsection (a)(2)(A) that
5 meets the TRICARE access standards.

6 (B) The date that is two years after the
7 date on which the Secretary begins to carry out
8 such implementation.

9 (d) MONITORING OF ACCESS.—Section 711 of the
10 National Defense Authorization Act for Fiscal Year 2008
11 (Public Law 110–181; 122 Stat. 190; 10 U.S.C. 1073
12 note) is amended—

13 (1) in subsection (a)—

14 (A) in paragraph (1), by adding at the end
15 the following new subparagraph:

16 “(D) The access available for affected eli-
17 gible beneficiaries to a primary care provider
18 that meets the TRICARE access standards.”;
19 and

20 (B) in paragraph (3), by adding at the end
21 the following new subparagraph:

22 “(D) In the case of the surveys required by
23 subparagraph (D) of that paragraph, in each
24 region or area in which TRICARE Prime will
25 no longer be available for eligible beneficiaries

1 under newly awarded TRICARE managed care
2 contracts in each of fiscal years 2013 through
3 2015.”;

4 (2) in paragraph (2) of subsection (b), by add-
5 ing at the end the following new subparagraph:

6 “(I) An assessment of the access available
7 for affected eligible beneficiaries to a primary
8 care provider that meets the TRICARE access
9 standards.”; and

10 (3) in subsection (e), by adding at the end the
11 following new paragraphs:

12 “(8) The term ‘affected eligible beneficiary’
13 means an eligible beneficiary under the TRICARE
14 Program (other than eligible beneficiaries on active
15 duty in the Armed Forces) who, as of the date of
16 the enactment of this paragraph—

17 “(A) is enrolled in TRICARE Prime; and

18 “(B) resides in a region of the United
19 States in which TRICARE Prime enrollment
20 will no longer be available for such beneficiary
21 under a contract described in subsection
22 (a)(3)(D) that does not allow for such enroll-
23 ment because of the location in which such ben-
24 eficiary resides.

1 “(9) The term ‘TRICARE access standards’
2 means the standards developed under the TRICARE
3 Program to ensure that beneficiaries do not experi-
4 ence excessive wait times or travel times to access
5 health care.”.

6 (e) DEFINITIONS.—In this section:

7 (1) The term “affected eligible beneficiary”
8 means an eligible beneficiary under the TRICARE
9 Program (other than eligible beneficiaries on active
10 duty in the Armed Forces) who, as of the date of
11 the enactment of this Act—

12 (A) is enrolled in TRICARE Prime; and

13 (B) resides in a region of the United
14 States in which TRICARE Prime enrollment
15 will no longer be available for such beneficiary
16 under a contract described in subsection
17 (a)(2)(A) that does not allow for such enroll-
18 ment because of the location in which such ben-
19 eficiary resides.

20 (2) The term “TRICARE access standards”
21 means the standards developed under the TRICARE
22 Program to ensure that beneficiaries do not experi-
23 ence excessive wait times or travel times to access
24 health care.

- 1 (3) The term “TRICARE Prime” means the
- 2 managed care option of the TRICARE program.