

AMENDMENT TO
RULES COMMITTEE PRINT 119-33
OFFERED BY MR. BUCHANAN OF FLORIDA

Page 548, after line 21, insert the following new section:

1 **SEC. 760A. CONTINUOUS GLUCOSE MONITORING PILOT**
2 **PROGRAM.**

3 (a) PILOT PROGRAM.—The Secretary of Defense
4 shall carry out a pilot program under the TRICARE pro-
5 gram under which the Secretary provides covered mem-
6 bers with continuous glucose monitoring technology to as-
7 sess the effects of real-time metabolic health tracking and
8 early intervention on improving—

9 (1) the health of the members; and

10 (2) force readiness.

11 (b) PARTICIPATION.—The Secretary shall require a
12 covered member to participate in the pilot program under
13 subsection (a) if the Secretary identifies the member as
14 being in either the Partially Medically Ready category or
15 the Not Medically Ready category of the Individual Med-
16 ical Readiness program.

17 (c) DATA.—

1 (1) EXCLUSIVE USES.—The Secretary may use
2 the health information of a covered member collected
3 under the pilot program under subsection (a) only
4 for the purposes of—

5 (A) carrying out the pilot program, includ-
6 ing with respect to furnishing information to
7 the Comptroller General of the United States
8 pursuant to subsection (g)(1);

9 (B) providing health care, including pre-
10 ventative care, to the member pursuant to chap-
11 ter 55 of title 10, United States Code; and

12 (C) conducting the Individual Medical
13 Readiness program.

14 (2) NO USE FOR MEDICAL DISCHARGES.—The
15 Secretary may not use the health information of a
16 covered member collected under the pilot program
17 under subsection (a) in separating or discharging
18 the member from the Armed Forces under chapter
19 61 of title 10, United States Code.

20 (3) PROHIBITION ON NONGOVERNMENTAL
21 USE.—A nongovernmental entity that provides con-
22 tinuous glucose monitoring technology under the
23 pilot program under subsection (a), or otherwise
24 provides services under the pilot program, may
25 not—

1 (A) retain any rights to health information
2 of a covered member collected under the pilot
3 program;

4 (B) use such information except as author-
5 ized by this section; and

6 (C) may not retain such information after
7 such authorized use is completed.

8 (d) PROVISION OF INFORMATION AND SERVICES.—

9 The Secretary shall provide covered members participating
10 in the pilot program under subsection (a) with—

11 (1) information regarding metabolic health
12 awareness; and

13 (2) education and services to improve force
14 readiness.

15 (e) TRAINING.—The Secretary shall—

16 (1) provide medical professionals of the military
17 departments with in-person training on the back-
18 ground, procedures, and reporting requirements of
19 the pilot program under subsection (a); and

20 (2) establish shared educational resources and
21 training materials that may be used by all the mili-
22 tary departments.

23 (f) DURATION.—The Secretary shall carry out the
24 pilot program under subsection (a) for a five-year period.

25 (g) REPORTS.—

1 (1) COMPTROLLER GENERAL.—

2 (A) INITIAL.—Not later than three years
3 after the date on which the Secretary com-
4 mences the pilot program under subsection (a),
5 the Comptroller General of the United States
6 shall submit to the Committees on Armed Serv-
7 ices of the House of Representatives and the
8 Senate a report on the pilot program, includ-
9 ing—

10 (i) a comparison of the rates of mem-
11 bers in the Partially Medically Ready cat-
12 egory or the Not Medically Ready category
13 of the Individual Medical Readiness pro-
14 gram during 2025 and during the third
15 year in which the pilot program is carried
16 out; and

17 (ii) recommendations to improve the
18 pilot program.

19 (B) FINAL.—Not later than five years
20 after the date on which the Secretary com-
21 mences the pilot program under subsection (a),
22 the Comptroller General shall submit to the
23 Committees on Armed Services of the House of
24 Representatives and the Senate a report on the
25 pilot program, including—

1 (i) an assessment of the effectiveness
2 of the recommendations under subpara-
3 graph (A)(ii); and

4 (ii) a determination by the Comp-
5 troller General regarding whether the pilot
6 program should be extended.

7 (2) DOD.—Not later than five years after the
8 date on which the Secretary commences the pilot
9 program under subsection (a), the Secretary shall
10 submit to the Committees on Armed Services of the
11 House of Representatives and the Senate a report on
12 the pilot program, including—

13 (A) data regarding the use and efficacy of
14 the pilot program;

15 (B) how the pilot program affected force
16 readiness; and

17 (C) any recommendations by the Secretary
18 to improve the pilot program.

19 (h) DEFINITIONS.—In this section:

20 (1) The term “covered member” means a mem-
21 ber of the Armed Forces serving on active duty who
22 meets any of the following criteria:

23 (A) The member has been diagnosed with
24 prediabetes.

1 (B) The member has been diagnosed with
2 type 2 diabetes and does not take insulin.

3 (C) The member has had gestational dia-
4 betes.

5 (D) The member is overweight or obese.

6 (2) The term “Individual Medical Readiness
7 program” means the program specified in Depart-
8 ment of Defense Instruction 6025.19, or successor
9 instruction.

10 (3) The term “TRICARE program” has the
11 meaning given that term in section 1072 of title 10,
12 United States Code.

