

**AMENDMENT TO RULES COMMITTEE PRINT 119-8**

**OFFERED BY MR. HORSFORD OF NEVADA**

At the end of subtitle B of title VII, add the following new section:

1 **SEC. 7\_\_\_\_. DIGITAL SYSTEM FOR ACCESS ASSISTANCE AT**  
2 **MILITARY MEDICAL TREATMENT FACILITIES.**

3 (a) DIGITAL SYSTEM FOR ACCESS ASSISTANCE.—

4 Not later than 18 months after the date of enactment of  
5 this Act, the Secretary of Defense shall establish an infor-  
6 mation technology system under which—

7 (1) a covered beneficiary who receives health  
8 care at a military medical treatment facility may  
9 electronically—

10 (A) file a complaint relating to access to  
11 care at such military medical treatment facility;  
12 and

13 (B) view the status of such complaint at  
14 any time, including the status of any interim or  
15 final action taken to address the complaint;

16 (2) any complaint filed under paragraph (1)(A)  
17 shall be promptly transmitted to an appropriate pa-  
18 tient advocate of the Department of Defense; and

1           (3) complaints filed under paragraph (1)(A)  
2       with respect to each military medical treatment facil-  
3       ity may be automatically aggregated and submitted  
4       to the Director of the Defense Health Agency on a  
5       quarterly basis.

6       (b) REPORT ON COMPLAINTS FILED UNDER DIGITAL  
7       SYSTEM.—

8           (1) SUBMISSION.—Not later than March 1 each  
9       year, the Secretary of Defense shall submit to the  
10      Committees on Armed Services of the House of Rep-  
11      resentatives and the Senate a report on the total  
12      number of complaints filed under the system under  
13      subsection (a).

14          (2) ELEMENTS.—Each report under paragraph  
15      (1) shall include, for each military medical treatment  
16      facility for which a complaint was filed under the  
17      system under subsection (a), the following:

18           (A) An identification of the most common  
19      access to care complaints filed by covered bene-  
20      ficiaries with respect to such facility.

21           (B) A comparison of the number of com-  
22      plaints so filed regarding access to specialty  
23      care versus access to primary care.

1 (C) A comparison of the number of com-  
2 plaints so filed regarding access to pediatric  
3 versus non-pediatric care.

4 (D) A comparison of the number of com-  
5 plaints so filed regarding administrative hurdles  
6 to access versus other access issues.

7 (E) A summary of steps taken at such fa-  
8 cility to reduce access to care complaints by  
9 covered beneficiaries

10 (c) COVERED BENEFICIARY DEFINED.—In this sec-  
11 tion, the term “covered beneficiary” means an individual  
12 enrolled in a health care plan under the TRICARE pro-  
13 gram and eligible to receive care at a military medical  
14 treatment facility.

