## AMENDMENT TO RULES COMMITTEE PRINT 118– 10

## OFFERED BY MS. LEE OF NEVADA

Add at the end of subtitle C of title VII the following new section:

1	SEC. 7 HEALTH CARE MARKET ANALYSIS FOR REMOTE
2	INSTALLATIONS INSIDE THE CONTINENTAL
3	UNITED STATES.
4	(a) Analysis Required.—Not later than 180 days
5	after the date of the enactment of this Act, the Director
6	of the Defense Health Agency shall submit to the Commit-
7	tees on Armed Services of the House of Representatives
8	and Senate an analysis of the health care market for re-
9	mote military installations located inside the continental
10	United States. For each remote military installation stud-
11	ied, the analysis shall take into consideration—
12	(1) the health care provided at military medical
13	treatment facilities, including—
14	(A) wait times;
15	(B) average commuting demands;
16	(C) care available to members of the
17	Armed Force and to dependents of such mem-
18	bers;

1	(D) types of care available, including sub-
2	specialty care and women's health care; and
3	(E) effects on health outcomes;
4	(2) the care available through private commer-
5	cial medical facilities, including elements specified in
6	subparagraphs (A) through (D) of paragraph (2);
7	(3) the impact of any health care shortages,
8	commuting demands, or wait times on military read-
9	iness;
10	(4) the future health care needs of members at
11	remote military installations, and dependents of such
12	members, based on expectations and plans for mis-
13	sions in the coming years; and
14	(5) options for meeting such existing and future
15	health care needs.
16	(b) Remote Military Installation Defined.—
17	In this section, the term "remote military installation"
18	means a military installation located in a community that
19	is designated as a health professional shortage area under
20	section 332 of the Public Health Service Act (42 U.S.C.
21	254).

