AMENDMENT TO
RULES COMMITTEE PRINT 118–10
OFFERED BY MR. STEUBE OF FLORIDA

At the beginning of subtitle A of title VII, insert the following new section (and redesignate the following sections accordingly):

SEC. 701. ELIGIBILITY FOR TRICARE FOR VETERANS WITH SERVICE-CONNECTED DISABILITIES.

(a) IN GENERAL.—

(1) ENROLLMENT IN TRICARE SELECT.—Section 1075 of title 10, United States Code, is amended—

(A) in subsection (b)(1)(B), by inserting before the period at the end the following: ‘‘, and covered veteran beneficiaries under subsection (h), other than Medicare-eligible beneficiaries described in such subsection (d)(2)’’;

(B) by redesignating subsection (h) as subsection (i); and

(C) by inserting after subsection (g) the following new subsection:

‘‘(h) COVERED VETERAN BENEFICIARIES.—(1) Subject to section 1086(d) of this title, a covered veteran ben-
(2) The cost-sharing requirements under TRICARE Select for covered veteran beneficiaries shall be calculated pursuant to subsection (d)(1), regardless of the date of the original enlistment or appointment of the beneficiary in the uniformed services.

“(3) A dependent of a covered veteran beneficiary may not enroll in the TRICARE program solely by reason of the covered veteran beneficiary enrolling in the TRICARE program.”.

(2) ENROLLMENT IN TRICARE FOR LIFE.—Section 1086(d) of such title is amended—

(A) in paragraph (1), by inserting before the period at the end the following: “or pursuant to section 1075(h) of this title”; and

(B) in paragraphs (2) and (4), by inserting “, or section 1075(h) of this title,” after “a person referred to in subsection (e)” both places it appears.

(3) DEFINITION.—Section 1072 of such title is amended by adding at the end the following new paragraph:

“(16) The term ‘covered veteran beneficiary’ means a veteran who—
“(A) is eligible to enroll in the system of patient enrollment under paragraph (1), (2), or (3) of section 1705 of title 38; and

“(B) is eligible to enroll in the TRICARE program only pursuant to—

“(i) section 1075(h) of this title; or

“(ii) section 1086(d) of this title by reason of being an individual who would be covered by section 1075(h) but for being a Medicare-eligible beneficiary covered by such section 1086(d).”.

(4) ENROLLMENT IN VA HEALTH CARE.—Section 1705 of title 38, United States Code, is amended by adding at the end the following new subsection:

“(d)(1) A covered veteran beneficiary who enrolls in the TRICARE program may not be concurrently enrolled in the system of patient enrollment under subsection (a), and the Secretary may not furnish medical care to the covered veteran beneficiary under this chapter or other provision of law administered by the Secretary while the covered veteran beneficiary is so enrolled in the TRICARE program.
(2) In this subsection, the terms ‘covered veteran beneficiary’ and ‘TRICARE program’ have the meaning given those terms in section 1072 of title 10.”.

(b) Memorandum of Understanding.—The Secretary of Veterans Affairs and the Secretary of Defense shall enter into a memorandum of understanding under which the Secretary of Veterans Affairs reimburses the Secretary of Defense for the costs of enrolling covered veteran beneficiaries in the TRICARE program pursuant to the amendments made by subsection (a), as jointly determined appropriate by the Secretaries.

(c) Implementation.—

(1) Effective date.—The amendments made by this section shall take effect one year after the date of the enactment of this Act.

(2) Regulations.—During the one-year period following the date on which the amendments made by this section take effect, the Secretary of Veterans Affairs and the Secretary of Defense shall each prescribe regulations to carry out such amendments.

(3) Phase in.—During the one-year period following the date on which the regulations are prescribed under paragraph (2), the Secretaries shall phase in the enrollment of covered veteran bene-
ficiaries in accordance with the annual open enroll-
ment season of the TRICARE program.

(4) VA CENTER FOR INNOVATION FOR CARE
AND PAYMENT.—The Secretary of Veterans Affairs
shall carry out this subsection through the Center
for Innovation for Care and Payment of the Depart-
ment of Veterans Affairs.

(d) REPORTS.—

(1) REPORTS ON IMPLEMENTATION.—On a
quarterly basis during the two-year period following
the date of the enactment of this Act, the Secretary
of Veterans Affairs and the Secretary of Defense
shall jointly submit to the Committees on Veterans’
Affairs and Armed Services of the Senate and the
House of Representatives a report on the implemen-
tation of this Act and the amendments made by this
Act.

(2) ANNUAL REPORTS.—Not later than one
year after the date on which the final report under
paragraph (1) is required to be submitted, and an-
nually thereafter, the Secretaries shall jointly submit
to the Committees on Veterans’ Affairs and Armed
Services of the Senate and the House of Representa-
tives a report on covered veteran beneficiaries en-
rolled in the TRICARE program.
(c) DEFINITIONS.—In this section, the terms “covered veteran beneficiary” and “TRICARE program” have the meaning given those terms in section 1072 of title 10, United States Code, as amended by subsection (a).