

116TH CONGRESS
1ST SESSION

H. R. 4994

To direct the Secretary of Defense to conduct a study on reimbursement rates for mental health care providers under the TRICARE program.

IN THE HOUSE OF REPRESENTATIVES

NOVEMBER 8, 2019

Ms. GABBARD introduced the following bill; which was referred to the
Committee on Armed Services

A BILL

To direct the Secretary of Defense to conduct a study on reimbursement rates for mental health care providers under the TRICARE program.

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 Payment
5 And Reimbursement Study Act” or the “TRICARE PAR
6 Study Act”.

1 **SEC. 2. STUDY ON REIMBURSEMENT RATES FOR MENTAL**
2 **HEALTH CARE PROVIDERS UNDER TRICARE**
3 **PRIME AND TRICARE SELECT IN THE EAST**
4 **AND WEST REGIONS OF THE TRICARE PRO-**
5 **GRAM.**

6 (a) STUDY.—The Secretary of Defense shall conduct
7 a study assessing the impact of using established rates to
8 reimburse covered mental health care providers on the
9 availability of such providers.

10 (b) ELEMENTS.—The study under subsection (a)
11 shall include the following:

12 (1) An evaluation of—

13 (A) whether there are enough covered men-
14 tal health care providers to adequately serve the
15 beneficiaries under TRICARE Prime and the
16 beneficiaries under TRICARE Select of each lo-
17 cality in the East and West regions of the
18 TRICARE program, including in rural commu-
19 nities in such regions; and

20 (B) whether the requirements under sec-
21 tions 1079(h)(1) and 1097b of title 10, United
22 States Code, to use established rates to reim-
23 burse covered mental health care providers lim-
24 its the number of covered health care providers
25 serving each locality in the East and West re-

1 gions of the TRICARE program, including in
2 rural communities in such regions.

3 (2) An assessment of the impact of using estab-
4 lished rates to reimburse covered mental health care
5 providers on—

6 (A) the ability of beneficiaries under
7 TRICARE Prime and beneficiaries under
8 TRICARE Select to access appropriate and
9 timely mental health care in accordance with
10 section 199.17 of title 32, Code of Federal Reg-
11 ulations; and

12 (B) the availability of services provided by
13 mental health care providers that are needed by
14 members of the Armed Forces to be medically
15 ready.

16 (3) Information about instances in which the
17 Secretary provided or applied exceptions to estab-
18 lished rates pursuant to section 1079(h)(2) of title
19 10, United States Code, to increase the number of
20 covered mental health care providers.

21 (4) A description of how the Secretary solicits
22 and collects feedback from covered mental health
23 care providers on established rates.

24 (5) A list of actions the Secretary has taken to
25 address such feedback.

1 (6) Any legislative, regulatory, or policy rec-
2 ommendations that are necessary to improve the
3 overall medical readiness of the Armed Forces.

4 (c) REPORT.—Not later than one year after the date
5 of the enactment of this Act, the Secretary shall submit
6 to the Committee on Armed Services of the House of Rep-
7 resentatives and the Committee on Armed Services of the
8 Senate a report on the results of the study required under
9 subsection (a).

10 (d) BRIEFING.—Not later than 60 days after the date
11 on which the report required under subsection (c) is sub-
12 mitted to the Committee on Armed Services of the House
13 of Representatives and the Committee on Armed Services
14 of the Senate, the Secretary shall provide a briefing to
15 such committees on the results of the study required under
16 subsection (a).

17 (e) COMPTROLLER GENERAL REVIEW AND RE-
18 PORT.—Not later than 180 days after the date on which
19 the report under subsection (c) is submitted to the Com-
20 mittee on Armed Services of the House of Representatives
21 and the Committee on Armed Services of the Senate, the
22 Comptroller General of the United States shall—

23 (1) review the report required under subsection
24 (c); and

(2) submit to the Committee on Armed Services of the House of Representatives and the Committee on Armed Services of the Senate an assessment of—

(A) whether the results of the study required under subsection (a) are supported by the data and information examined in the study required under subsection (a); and

(B) the feasibility of any recommendations identified by the Secretary under subsection (b)(6).

(f) DEFINITIONS.—In this section:

(1) The term “established rate” means the payment amount determined by the Secretary pursuant to sections 1079(h)(1) and 1097b of title 10, United States Code, and section 199.14 of title 32, Code of Federal Regulations.

(2) The term “covered mental health care provider” means a mental health care provider under TRICARE Prime and TRICARE Select in the East and West regions of the TRICARE program.

(3) The term “mental health care provider” means a psychiatrist, clinical psychologist, certified psychiatric nurse specialist, certified clinical social worker, certified marriage and family therapist, TRICARE certified mental health counselor, pas-

1 toral counselor under the supervision of a physician,
2 and supervised mental health counselor under the
3 supervision of a physician.

4 (4) The term locality means a geographic loca-
5 tion—

6 (A) designated as a Prime Service Area
7 under section 199.17(b)(1) of title 32, Code of
8 Federal Regulations; and

9 (B) in which the Secretary entered into a
10 contract under chapter 55 of title 10, United
11 States Code, with a contractor under the
12 TRICARE program to provide health care serv-
13 ices to beneficiaries by TRICARE-authorized ci-
14 vilian health care providers.

15 (5) The terms “TRICARE Prime” and
16 “TRICARE Select” have the meanings given those
17 terms in section 1072 of title 10, United States
18 Code.

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