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CONGRESS:
Cosponsor the
Military CARE Act
(H.R. 6796).

Military CARE Act: Improve Access to Care at Military Hospitals and Clinics

THE ISSUE

Military treatment facilities (MTFs) are a critical part of the military health system, but persistent access-to-care challenges continue to prevent many servicemembers and their families from receiving timely, service-earned medical care. Appointment shortages, unanswered phone calls, and referral delays remain common, and existing systems lack the transparency and accountability needed to identify and fix these problems at scale.

THE ACTION

Passing the Military Care, Access, Reporting, and Evaluation (CARE) Act (H.R. 6796) would improve access to care at military hospitals and clinics through enhanced data, transparency, and oversight.

The legislation would require the Pentagon to establish a standardized, user-friendly digital platform allowing TRICARE beneficiaries to report and track access-to-care complaints at MTFs. Submissions would be routed to patient advocates, aggregated by the Defense Health Agency (DHA), and reported to Congress.

KEY FACTS

- **Widespread Access Barriers:** Servicemembers, families, retirees, and survivors regularly face barriers to accessing care at MTFs. These challenges have been identified as long-standing issues by the House Armed Services Committee’s Quality of Life Panel and acknowledged by Pentagon leaders.
- **Inconsistent Enforcement of Standards:** The military health system has access-to-care standards intended to facilitate timely treatment, but compliance varies. Patients are not always referred to the civilian TRICARE network when an MTF cannot meet access standards.
- **TRICARE Policy Restrictions:** Patients facing access issues at an MTF cannot switch TRICARE plans to seek civilian care except during annual open season or after a qualifying life event (e.g., relocation). While aligned with commercial insurance rules, this policy overlooks the military health system’s unique structure, which can leave beneficiaries stuck in an MTF that does not meet their



needs — making a strong reporting system essential for those unable to seek care elsewhere.

- **Lack of Transparency and Accountability:** There is no standardized, systemwide mechanism to capture and track beneficiary access problems. Without reliable, unfiltered data at the MTF level, DHA leaders and Congress lack the visibility needed to identify systemic issues and hold facilities accountable.
- **Limited Existing Tools:** Current complaint mechanisms, including the Interactive Customer Evaluation application, are inconsistently used, lack uniform handling requirements, and provide minimal reporting value.

READINESS AND ACCOUNTABILITY

Access-to-care problems within the military health system undermine readiness, strain families, and erode trust. A standardized, transparent reporting system ensures beneficiaries know where to turn when care is delayed, equips leaders with the data needed to quickly address problems, and allows Congress to conduct meaningful oversight.



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