

**Congress of the United States**  
**Washington, DC 20515**

September 24, 2020

The Honorable James Inhofe  
Chairman, Armed Services Committee  
United States Senate  
Washington, DC 20510

The Honorable Adam Smith  
Chairman, Armed Services Committee  
United States House of Representatives  
Washington, DC 20515

The Honorable Jack Reed  
Ranking Member, Armed Services Committee  
United States Senate  
Washington, DC 20510

The Honorable Mac Thornberry  
Ranking Member, Armed Services Committee  
United States House of Representatives  
Washington, DC 20515

Dear Chairmen and Ranking Members:

As you negotiate the final text of the FY2021 National Defense Authorization Act in conference, we urge you to include Section 706 of the House-passed NDAA in the final legislation. Section 706 draws from legislation we introduced, H.R. 6148, the TRICARE ECHO Improvement Act, and its enactment into law would benefit thousands of active-duty families with special needs dependents.

TRICARE's Extended Care Health Option (ECHO) provides important medical services such as home health care, respite care, and assistive technology devices to special needs dependents enrolled in the program. It was created as an alternative to Home and Community-Based Services (HCBS) waivers operated under states' Medicaid programs because active-duty families have difficulties accessing these waivers. Medicaid is a residency-based program, meaning military families must re-register for services each time they are assigned to a new base in a different state. Additionally, states also maintain strict enrollment caps for HCBS waivers, thereby creating lengthy waiting lists that average 30 months. This unfortunate situation means military families are automatically sent to the back of the line with each move, and many will move again before ever coming off their state's waiting list. This inevitably results in a lack of necessary, supportive services for their dependents that would otherwise be available were it not for a family member's membership in the Armed Forces.<sup>1</sup>

While ECHO is intended to be an alternative, it currently fails to provide comparable services to the HCBS waivers maintained by the states. Indeed, the Military Compensation and Retirement Modernization Commission concluded "ECHO benefits, as currently implemented, are not robust enough to replace state waiver programs when those programs are inaccessible."<sup>2</sup> The Commission even recommended narrow, commonsense changes to ECHO, most of which have not been implemented.

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<sup>1</sup> West Virginia University, *Medicaid and Military Families with Children with Special Healthcare Needs: Accessing Medicaid and Waivered Services*, at 19 (November 2013).

<sup>2</sup> *Report of the Military Compensation and Retirement Modernization Commission*, at 125 (January 2015).

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Section 706 incorporates much of the TRICARE ECHO Improvement Act and would enact some of these targeted changes. In doing so, it would create a more robust ECHO with services comparable to those available via the states. Specifically, Section 706 would:

- **Increase hours of offered respite care.** Respite care is short-term care for a patient to provide rest for the patient's primary caregiver. ECHO currently covers only 16 hours per month while states, on average, cover 60 hours. Section 706 would increase the ECHO benefit to 50 hours per month.
- **Codify new regulations on respite care eligibility.** Under recently revised regulations, respite care may be offered regardless of whether the eligible dependent receives another ECHO benefit.
- **Codify existing coverage of durable equipment.** Under current regulations, ECHO may cover service and modification of durable equipment and assistive technology devices, as well as training in use, to ensure equipment is fully functional and matches the physical needs of the user.
- **Provide coverage of residence and vehicle adaptations.** Most states with HCBS waivers cover medically necessary alterations to residences and vehicles to reduce the disabling effects of a person's qualifying medical condition. However, the ECHO program does not. Section 706 would extend its suite of covered benefits to include such adaptations.

These changes enjoy broad support among stakeholders. The TRICARE ECHO Improvement Act has been endorsed by the Tricare for Kids Coalition, Children's Hospital Association, Military Officers Association of America, National Military Family Association, and the Fleet Reserve Association. Additionally, the Military Coalition listed Section 706 among its recommendations for inclusion in the final NDAA.

Our active duty families sacrifice immensely for our country. We should not be asking them to sacrifice the appropriate medical services for their children too. Instead, we should reform ECHO to better align with these families' needs and the standard of care offered to thousands of special needs individuals through Medicaid. We therefore urge you to include Section 706 in the finalized FY2021 National Defense Authorization Act.

Sincerely,



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TOM COLE  
Member of Congress



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ELAINE LURIA  
Member of Congress