

June 4th, 2019

The Honorable Adam Smith  
Chairman  
Committee on Armed Services  
2116 Rayburn House Office Building  
Washington, D.C. 20515

The Honorable Mac Thornberry  
Ranking Member  
Committee on Armed Services  
2116 Rayburn House Office Building  
Washington, D.C. 20515

Dear Chairman Smith and Ranking Member Thornberry,

The National Military & Veterans Alliance, a nonpartisan advocacy group of the undersigned military and veteran service organizations, asks for your assistance to advance H.R. 2371, Health Equity and Access for Returning Troops and Servicemembers (HEARTS) Act of 2019. We ask your committee to consider and order the bill reported for a vote on the House floor at the earliest opportunity. This is the same bill that was voted out of your committee last year and that was passed by the full House last September. Regrettably, there was not enough time in 115th Congress to advance the bill in the Senate. We are hopeful that early action in the 116th Congress will allow the necessary time for its passage by the Senate.

Currently, the interaction between Social Security's disability program and the TRICARE program inadvertently ends up penalizing wounded veterans who return to work after recovering from severe injuries. As a result, many of our most seriously injured veterans eventually lose access to their traditional, affordable TRICARE and cannot regain it for years if they return to work.

When service members return home, they are eligible for TRICARE. They may also be eligible for Social Security Disability Insurance (DI) due to their injuries. If service members qualify for DI, after two years they become eligible for Medicare benefits. When retired service members become eligible for Medicare—based on age or disability—they are no longer eligible for traditional TRICARE. Instead, they become eligible for TRICARE for Life, which supplements Medicare. However, to retain access to TRICARE for Life, service members must enroll in Medicare Part B at a higher premium than TRICARE.

This requirement continues for eight and a half years, even if these wounded veterans reenter the workforce and no longer receive DI benefits. Meanwhile, other individuals can maintain their TRICARE access at standard TRICARE rates if they retired from the military for medical reasons but without DI eligibility.

The HEARTS act addresses this unintended inequity and will end the requirement that wounded veterans who return to work must pay for Medicare coverage to keep access to TRICARE. This will ensure they have access to the best possible health care as they re-enter the workforce after recovering from wounds sustained in the service of our nation.

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The National Military & Veterans Alliance thanks you for your attention regarding this issue and for your support of our military, veterans, and retirees. We invite you to contact us regarding any issues affecting military and veterans in the future.

Sincerely,



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### **National Military and Veterans Alliance Member Organizations Supporting this Legislation**

American Military Society  
American Retirees Association  
AMVETS  
Armed Forces Marketing Council  
Armed Forces Retirees Association  
Army and Navy Union  
Association of the United States Navy  
Military Order of Foreign Wars  
Military Order of the Purple Heart  
Military Order of World Wars  
Naval Enlisted Reserve Association  
Reserve Officers Association  
Sea Service Family, Foundation  
Society of Military Widows  
The Independence Fund  
The Retired Enlisted Association  
Tragedy Assistance Program for Survivors  
VetsFirst  
Vietnam Veterans of America