



**Association of Defense Communities National Summit  
March 8, 2022**

**What are the issues keeping military families in your communities up at night? Too often, it's how they can find mental or behavioral health care for their kids.**

**In this session, members of the TRICARE for Kids Coalition will discuss the access and coverage challenges facing military connected families seeking mental and behavioral health care for children and teens.**

- Tricare does not utilize a pediatric specific medical necessity standard, which disadvantages children from receiving necessary services (DHB Report 2017).
- Nationwide provider shortages are exacerbated for military connected families because of burdensome participation hurdles and low reimbursement. Families report difficulties navigating a complex system to identify provider availability and obtain care.
- These challenges result in care gaps from missed opportunities for screening and early intervention, to lack of continuity in care, especially when relocating, to inability to access specialty care due to condition, age, or parent's active duty status exclusions.
- Autism Care Demonstration provides an excellent example of these difficulties and challenges for both providers and families. Recent changes are disrupting access and should be placed on hold pending an independent review required by the FY22 NDAA.

**We'll also discuss why community care options are essential for families of children with chronic and complex health conditions, and how inadequate networks and inaccurate provider directories can leave families struggling to find care.**

- Uniformed billet cut proposals have been paused by Congress pending further analysis; this is vital to maintaining access to care and training pediatric providers for the future.
- The direct care system does not and will not ever be able to meet all the needs of the 2.4 million plus children covered by Tricare. This is especially true for children with complex and chronic conditions requiring specialty care, wrap-around services, and supports that are often not covered by Tricare or commercial plans.
- Basing decisions rely on provider directories, which are often inaccurate, incomplete, or not specific enough, resulting in denials of duty stations unnecessarily or placements in duty stations where children's needs cannot be met. When care can be found using directories, extensive wait times are not taken into account, thus flooding the market with additional care needs resulting in longer wait times for both military and civilian patients.
- Tricare network standards are not specific enough to capture the universe of pediatric specialties necessary for children with complex and chronic conditions.
- ECHO, which is the DoD program that attempts to provide Medicaid like waiver services, is not meeting all the needs of Active Duty families. ECHO improvements are a priority for TFK, yet even with a robust ECHO program, there will always be a need for Tricare families to weave community programming into their care matrix.

**With family readiness a community responsibility (10 USC 1781b) how can host communities join us in advocacy to fill gaps and improve healthcare services and supports for military and veteran families?**

- Share TFK priorities with your delegations on Capitol Hill.
- Work with your community and bases to make sure the provider network and spectrum of healthcare services and supports in your area are accurately reflected and address the needs of families stationed there.
- Champion full funding and robust implementation of Medicaid and other state and community programs that are vital for military connected families.

**Today's Panelists:**



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**Thank you for the opportunity to share our priorities!**

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