Congress of the United States

Washington. DC 20515

March 20, 2024

Dr. Lester Martinez-Lopez Assistant Secretary of Defense for Health Affairs Director, Defense Health Agency 1200 Defense, Pentagon Washington, DC 20301

Lieutenant General Telita Crosland 7700 Arlington Boulevard, Suite 5101 Falls Church, VA 22042-5101

Dear Assistant Secretary Martinez-Lopez and Lieutenant General Crosland:

We write in regard to my ongoing concerns that Department of Defense (DoD) civilians and contractors in Japan continue to face problems with access to medical care¹ and that this problem is impacting morale and retention. We also seek additional information on DoD's December 2023 Military Health System Strategic Plan and other efforts by DoD to address these problems.

Ongoing Concerns with Civilian Access to Medical Care in Japan

Multiple bipartisan, bicameral letters were sent to DoD last year that addressed the Department's September 2022 decision to cut off civilian access to medical care at Military Training Facilities (MTFs) in Japan and the Defense Health Agency's (DHA) failure to provide adequate support for civilians forced to shift to off-base locations for care.² This off-base care did not meet the needs of DoD-affiliated civilians. In November 2023 the DoD Inspector General (IG) "identified significant challenges associated with civilians using off-base medical care, including language barriers, differences in how medical care is provided overseas compared to the United States, and the lack of availability for some U.S. prescription medications in Japan."³

DHA announced a partial reversal of the plan in response to Congressional pressure, indicating that "DoD civilian employees in the Indo-Pacific region may seek treatment again at base hospitals for chronic health conditions," but that these individuals "may only schedule appointments on a space-available basis." DHA provided additional detail on this policy in a July 2023 response letter, including the agency's expansion of online appointments and a new

¹ U.S. Department of Defense Inspector General, "Management Advisory: Concerns with Access to Care and Staffing Shortages in the Military Health System," November 29, 2023, p. 1, https://media.defense.gov/2023/Nov/30/2003349496/-1/-1/1/DODIG-2024-033 REDACTED.PDF.

² Letter from Senator Elizabeth Warren to Acting Assistant Secretary of Defense for Health Affairs, Seileen Mullen, and Director, Defense Health Agency, Major General Telita Crosland, January 23, 2023, file:///C:/Users/DH44543/Documents/Defense%20Fellow/Japan%20Healthcare%20Follow%20Up/ 2023.01.23%20Letter%20to%20DoD%20on%20Civilian%20Care%20Shortfalls%20in%20Japan.pdf [Letter on file with the Office of Senator Elizabeth Warren.]

³ U.S. Department of Defense Inspector General, "Management Advisory: Concerns with Access to Care and Staffing Shortages in the Military Health System," November 29, 2023, pp. 6-7, https://media.defense.gov/2023/Nov/30/2003349496/-1/-1/1/DODIG-2024-033 REDACTED.PDF.

⁴ Stars and Stripes, Asia-Pacific, "DoD's reversal on civilian medical care 'a move in the right direction,' advocates say," Kelly Agee and Alex Wilson, March 6, 2023, https://www.stripes.com/theaters/asia_pacific/2023-03-06/dodcivilian-medical-care-access-9373503.html.

tele/behavioral health pilot.⁵ DHA also indicated it would work with the Office of Personnel Management to "examine options for the Federal Employee Health Benefits Program (FEHBP) to facilitate host-nation care as well as exploring other management actions that can improve access to care within MTFs."⁶

Although we appreciate these efforts, we remain concerned that DoD has not done enough to address these gaps in access to care. In addition, the November 2023 DoD Inspector General advisory—and ongoing reports of problems from DoD civilians in Japan—have revealed that many gaps remain.⁷

The DoD IG identified significant problems with beneficiaries' timely access to health care throughout the MHS as well as significant shortfalls in DoD's ability to support military families⁸ in general, and specifically in Japan. The IG reported that "In discussions with senior officials during visits to the INDOPACOM [Area of Responsibility] in May and June, 2023 the DoD IG and his team heard of staffing shortages and challenges to obtaining health care at Japan and Korea MTFs." The IG report revealed that staffing shortages led to capacity problems, which "[made] some specialty care services [un]available" at United States Naval Hospital Okinawa (USNHO), Japan. 10

<u>DoD Actions to Address Problems with Access to Health Care in Japan</u> in November and December 2023

In late 2023, after the release of the IG report, DoD military and civilian officials took several actions to address these problems.

The INDOPACOM commander issued an order to U.S. Forces Japan and subordinate units to improve access to emergency medical care in Japan. ¹¹ Specifically, the units were ordered to "identify public hospitals in the vicinity of U.S. installations in Japan that provide emergency medical care...enhance access to public hospitals offering tertiary care...equip all [Status of Forces Agreement] SOFA-status personnel with a list of [local] tertiary care hospitals and Japanese language medical cards that orient Japanese first responders to the nearest [MTF]." ¹² It also requires them to "coordinate across services in Japan to determine the viability of

⁵ Letter from USD Gilbert R. Cisneros Jr. to Representative Frank Pallone, July 20, 2023, on file with the Office of Senator Elizabeth Warren.

⁶ Letter from DoD ASD(HA), Lester Martinez Lopez, to Senator Elizabeth Warren, March 14, 2023, on file with the Office of Senator Elizabeth Warren.

⁷ U.S. Department of Defense Inspector General, "Management Advisory: Concerns with Access to Care and Staffing Shortages in the Military Health System," November 29, 2023, pp. 3-4 and 6-11, https://media.defense.gov/2023/Nov/30/2003349496/-1/-1/1/DODIG-2024-033_REDACTED.PDF.

⁸ U.S. Department of Defense Inspector General, "Management Advisory: Concerns with Access to Care and Staffing Shortages in the Military Health System," November 29, 2023, p. 1, https://media.defense.gov/2023/Nov/30/2003349496/-1/-1/1/DODIG-2024-033 REDACTED.PDF.

⁹ *Id.*, p. 4.

¹⁰ *Id.*, p. 3.

¹¹ Memorandum from U.S. Indo-Pacific Command for Commander, U.S. Forces Japan, "Task Order to Improve Access to Emergency Medical Care in Japan," November 3, 2023, on file with the Office of Senator Elizabeth Warren.

¹² *Id*.

establishing on-call aeromedical support with operational aircraft...direct that Area-Orientation Briefs for all newly arriving SOFA personnel identify cultural differences associated with medical care...assess capability of MTFs to provide translation services...formalize arrangements with seven Japanese dispatch centers in Okinawa to delineate mutual support responsibilities...and coordinate with installation commanders to expedite host-nation EMS access to U.S. installations and expedite U.S. and host-nation aeromedical access to installations."¹³

The order also included instructions on how to improve routine access to medical care—identify high risk individuals, evaluate methods to reduce risk, conduct adequate pre-assignment medical screening, and adequately inform prospective civilian hires of the MTF limitations on medical care.¹⁴

The Office of the Acting Under Secretary of Defense also published a December 2023 memorandum describing its support efforts to mitigate the access to care issues facing the Total Force in Japan by creating a working group with DHA support to address the INDOPACOM commander's areas of concern, "define requirements, develop cost estimates, and identify risk to develop courses of action." This memo also described DHA's efforts to mitigate the access to care issues—lead a 10-month long working group, pursue a wrap-around contract for support to DoD civilian employees in Japan, create medical clinics in the base exchanges in Japan, ensure appropriate language is included in overseas job announcement "notifying applicants of limited medical care for civilian employees and their dependents," and implement a "Statement of Understanding" for civilian employees to sign "acknowledging the limitations of medical care."

Lack of Access to Health Care Continues to Cause Serious Problems for DoD Civilians in Japan

We appreciate the steps that DHA and INDOPACOM are taking to address these issues. But we continue to be concerned by reports of problems accessing care, and its impact on morale and retention.

The IG report indicated that lack of access to health care in the INDOPACOM region is having a serious and negative impact on the lives of service members and DoD civilians, causing many to leave their assignments in Japan.¹⁷ A Japan Civilian Medical Advocacy Group survey from January to March 2023 found that "42 percent [of survey respondents] were actively in the process of finding a new job in order to access healthcare, and 60 percent were considering changing jobs or turning down an extension in order to access healthcare." The most significant

¹³ *Id*.

¹⁴ *Id*.

¹⁵ Memorandum from U.S. Department of Defense, Under Secretary of Defense for Commander, U.S. Indo-Pacific Command, "Interim Response to November 3, 2023 Memorandum Regarding Review of Access to Emergency Medical Care in Japan," December 13, 2023, on file with the Office of Senator Elizabeth Warren.

¹⁷ U.S. Department of Defense Inspector General, "Management Advisory: Concerns with Access to Care and Staffing Shortages in the Military Health System," November 29, 2023, pp. 6-7, https://media.defense.gov/2023/Nov/30/2003349496/-1/-1/1/DODIG-2024-033_REDACTED.PDF.

¹⁸ *Id.*, p. 7.

impacts faced by survey respondents were "increased anxiety and stress and having to forego recommended physicals, screenings, and follow-up care." In June 2023, Air Force officials in Japan reported that "in the last 6 months eight civilian employees requested a curtailment of their tour due to concerns with access to medical care; three declined a job offer citing concerns with access to medical care on base; and two chose to depart the island due to lack of obstetrics care for their pregnant spouses." ²⁰

The Marine Corps IG (IGMC) found that access to care challenges have increased for the 3,800 civilians linked to the military's mission in Okinawa, including fire and emergency personnel, teachers, and family housing managers. In addition, "Japanese medical facilities routinely and lawfully turn away patients when limited by medical staff, translation support, or when advanced payment cannot be secured, resulting in denial of care." The lack of health care access has resulted in "significant negative impacts to school operations at multiple locations in Japan" and "15 DoD Education Activity educators have resigned" since the start of the 2022-2023 school year, citing "access to [health] care" as the reason. In the case of the start of the 2022-2023 school year, citing "access to [health] care" as the reason.

In late 2023 and early 2024, a series of public reports indicated that problems with access to care in Japan were still not resolved. One DoD civilian's spouse found that the transition to the civilian medical network in Japan forced them "to travel long distances to find someone who [would] see [them]" and "pay up front and wait to get reimbursed by [their] insurance." Not only is the limited access to care frustrating and financially burdensome, but it has proven to be fatal as well. In one case, "a 7-year-old-child who suffered a traumatic brain injury" at a shopping mall "died from the oxygen deprivation she experienced as ambulance techs spent 35 minutes searching for a facility that would take her." In another case, a "service member's spouse 'died of an intracranial hemorrhage' when several hospitals in Tokyo denied her admittance." A DoD civilian suffered a heart attack, was denied care at 10 hospitals, and died "shortly before an 11th facility agreed to accept him."

These tragic incidents highlight the toll that the lack of access to medical care has on service members and civilians and explain why they feel compelled to leave the region. The wife of a middle school teacher at Camp Zama in Japan, stated, "The healthcare crisis for civilians in Japan is ongoing. Teachers have left and more are planning to when contracts are over. My husband and I are leaving. Since DHA dumped us into the local economy without even letting Japanese officials know, we are dealing with [Japanese providers] refusing us, charging us more than posted rates, having to travel long distances to find someone who will see us, and having to

¹⁹ *Id*.

²⁰ *Id*.

²¹ *Id.*, p. 6.

²² *Id.*, p. 7.

²³ *Id.*, p. 8.

²⁴ Federal News Network, "In Japan, Civilian Feds Say Health Care Crisis Still Isn't Fixed," Jared Serbu, November 28, 2023, https://federalnewsnetwork.com/federal-report/2023/11/in-japan-civilian-feds-say-health-care-crisis-still-isnt-fixed/.

²⁵ Military.com, "Denied Care, Deaths in Japan Result from Lack of Emergency Medical Services for American Personnel," Patricia Kime, January 4, 2024, https://www.military.com/daily-news/2024/01/04/denied-care-deaths-japan-result-lack-of-emergency-medical-services-american-personnel.html.

²⁶ *Id*.

²⁷ *Id*.

pay up front..."²⁸ Another Yokosuka-based DoD employee described the health care situation there as "worse than it's ever been" and listed it as "a major contributor to why [he] is leaving DoD."²⁹ One of the two child clinical psychologists in Okinawa testified at a town hall that they recently became a patient at the USNHO hospital due to a traumatic injury, but did not receive proper and timely care, and now has long-term and permanent effects.³⁰ Further, due to this condition, they will now have to leave Japan to seek treatment, leaving the island with only one child clinical psychologist.³¹ These numerous reports of problems accessing care show its negative impact on morale and retention, and degrades our nation's readiness.

New Military Health System Strategic Plan

DoD released a new MHS Strategic Plan in December 2023, acknowledging health care as "critical to the wellbeing of [their] patients" and DoD's need to "stabilize the MHS...prioritize military and civilian staffing...and increase readiness." We appreciate the Department of Defense's (DoD) release of this plan, and its focus on increasing staff in MTFs and encouraging patients to return to on-base facilities. However, the strategic plan largely overlooks care for the civilian force outside of employment opportunities. To ensure DoD civilians who support our military receive access to adequate health care, we would like more information on how DoD plans to implement the reforms and goals in the MHS Strategic Plan, and address concerns about lack of access to care for DoD-affiliated civilians.

Questions

We seek to learn how and when DoD will implement the MHS Strategic Plan and the DoD IG's recommendations, and address ongoing problems with access to healthcare in in Japan and the INDOPACOM region. To do so, we ask that you provide answers to the following questions no later than April 1, 2024:

1. In the DHA response letter from Assistant Secretary of Defense Lester Martinez-Lopez to Senator Elizabeth Warren on March 14, 2023, DHA states that "DoD is examining additional options" to provide care in Japan.³⁴ Please explain what options have been assessed and implemented.

²⁸ Federal News Network, "In Japan, Civilian Feds Say Health Care Crisis Still Isn't Fixed," Jared Serbu, November 28, 2023, https://federalnewsnetwork.com/federal-report/2023/11/in-japan-civilian-feds-say-health-care-crisis-still-isnt-fixed/.

²⁹ *Id*.

³⁰ U.S. Department of Defense Inspector General, "Management Advisory: Concerns with Access to Care and Staffing Shortages in the Military Health System," November 29, 2023, p. 8, https://media.defense.gov/2023/Nov/30/2003349496/-1/-1/1/DODIG-2024-033_REDACTED.PDF.

³¹ *Id.*

³² U.S. Department of Defense, "Military Health System Strategy: Fiscal Years 2024-2029," https://health.mil/Reference-Center/Publications/2023/12/15/MHS_Strategic_Plan_FY24_29.

³⁴ U.S. Department of Defense Response Letter to Senator Elizabeth Warren, Assistant Secretary of Defense, Lester Martinez-Lopez., March 14, 2023, on file with the Office of Senator Elizabeth Warren.

- 2. What Federal Employee Health Benefits Program (FEHBP) services and coverage are available to the DoD civilian employees and contractor personnel serving overseas, particularly in Japan?
- 3. What management options has DHA explored to improve access to care at MTFs?
- 4. What actions have DHA taken to improve the staffing shortage in MTFs, particularly in Japan and outside of continental United States (OCONUS) locations?
- 5. How is DoD assisting DoD civilians who are trying to transfer to different locations for better access to care in Japan?
- 6. How long are the wait times for primary care appointments at MTFs in Japan?
- 7. How long are the wait times for primary care appointments at off-base locations in Japan?
- 8. How long are the wait times for specialty care appointments at MTFs in Japan?
- 9. How long are the wait times for specialty care appointments at off-base locations in Japan?
- 10. What are the staffing shortages for each MTF in INDOPACOM?
- 11. What is the plan and timeline for implementing a strategy to improve access to care for civilians in Japan?
- 12. Has the DHA's implementation of telehealth decreased any concerns on access to care for civilians in Japan?
- 13. DHA failed to provide a response to the November 2023 DoD IG report recommendations "despite [DoD IG] providing an extension of…[its] original deadline for the Director to respond."³⁵
 - a. Why did you fail to provide a response to the DoD IG by their deadline?
 - b. Have you provided a response to the DoD IG since then? If so, please provide a copy of said response and the date on which you provided it to the DoD IG.
 - c. When do you anticipate implementing the DoD IG recommendations from this report? Please provide an update on the progress of their implementations so far.
- 14. DHA failed to implement a DoD OIG recommendation from its April 2022 DoD OIG report, which identified "the challenges faced by MTF personnel during the COVID-19 pandemic, and found that many MTF personnel experienced burnout due to staffing

³⁵ U.S. Department of Defense Inspector General, "Management Advisory: Concerns with Access to Care and Staffing Shortages in the Military Health System," November 29, 2023, p. i, https://media.defense.gov/2023/Nov/30/2003349496/-1/-1/1/DODIG-2024-033 REDACTED.PDF.

shortages...and staff resignations because personnel were experiencing burnout."³⁶ To reduce the impacts that lead to fatigue and burnout, the DoD OIG recommended that the Assistant Secretary of Defense for Health Affairs (ASD(HA)) develop policy for the maximum consecutive hours to be worked by active duty, civilians, nurses, and other staff at MTFs."³⁷

- a. Why did you fail to implement DoD OIG's recommendation to develop a plan for maximum consecutive hours to be worked for Military Health System staff?
- b. When do you expect to create said policy and implement it?

Sincerely,

Elizabeth Warren

United States Senator

Γim Kaine

United States Senator

Michael C. Burgess, M.D.

Member of Congress

³⁶ U.S. Department of Defense Inspector General, "Management Advisory: Concerns with Access to Care and Staffing Shortages in the Military Health System," November 29, 2023, p. 5, https://media.defense.gov/2023/Nov/30/2003349496/-1/-1/1/DODIG-2024-033 REDACTED.PDF; U.S.

https://media.defense.gov/2023/Nov/30/2003349496/-1/-1/1/DODIG-2024-033_REDACTED.PDF; U.S. Department of Defense Inspector General, "Evaluation of Department of Defense Military Medical Treatment Facility Challenges During the Coronavirus Disease-2019 (COVID-19) Pandemic in Fiscal Year 2021," April 5, 2022, p. ii, https://media.defense.gov/2022/Apr/06/2002970821/-1/-1/1/DODIG-2022-081_REDACTED.PDF.

37 U.S. Department of Defense Inspector General, "Management Advisory: Concerns with Access to Care and Staffing Shortages in the Military Health System," November 29, 2023, p. 5,

https://media.defense.gov/2023/Nov/30/2003349496/-1/-1/1/DODIG-2024-033_REDACTED.PDF; U.S. Department of Defense Inspector General, "Evaluation of Department of Defense Military Medical Treatment Facility Challenges During the Coronavirus Disease-2019 (COVID-19) Pandemic in Fiscal Year 2021," April 5, 2022, p. ii, https://media.defense.gov/2022/Apr/06/2002970821/-1/-1/1/DODIG-2022-081_REDACTED.PDF.