

# ConnectedHealthInitiative

July 17, 2025

Dr. Stephen Ferrara  
Assistant Secretary of Defense for Health Affairs  
Defense Health Agency  
7700 Arlington Blvd.  
Falls Church, Virginia 22042

Dear Dr. Ferrara,

The Connected Health Initiative (CHI)<sup>1</sup> shares your commitment to innovating, collaborating, and adopting cutting edge wearable health and fitness technology to measure and promote U.S. service member readiness and care. Our community writes to encourage rapid modernization of the Military Health System and TRICARE through leveraging the demonstrated ability of wearables to measure and promote readiness and warfighter effectiveness, as well as improve patient outcomes, augment population health management, and support the Defense Health Agency workforce while reducing costs and delivering a strong return on investment.

The Connected Health Initiative (CHI) is the leading multistakeholder policy and legal advocacy effort dedicated to improving health outcomes while reducing costs. Our work is driven by the consensus of stakeholders from across the connected health ecosystem. CHI aims to realize an environment in which Americans can see improvements in their health through policies that allow for connected technologies to advance outcomes and reduce costs. We advocate before Congress, numerous U.S. federal agencies, and state legislatures and agencies, to accomplish responsible pro-digital health policy and law changes in areas including reimbursement/payment, privacy/security, effectiveness/quality assurance, U.S. Food and Drug Administration (FDA) regulation of digital health, health data interoperability, and the rising role of artificial intelligence (AI) in care delivery. For more information, see [www.connectedhi.com](http://www.connectedhi.com).

Wearable health devices have become widely available as tools to empower individuals to proactively engage in their own efforts to enhance their physical and mental performance and/or combat disease. Wearables that provide timely and actionable patient-generated health data (PGHD) enhance situational awareness for both the patient and their care team, better informing decisions related to preventative measures, optimizing performance, and developing effective treatment plans for overall personnel readiness. Recent advancements in edge computing (processing and storing data closer to the device), cloud computing, and AI/machine learning have enabled the development of numerous personal and population health innovations that respect individual warfighter privacy and protect overall force security. Notably, wearables provide health insights through measuring various physiological and therapeutic metrics, including activity levels, sleep patterns, heart rate variability, and oxygen saturation. While such readings are indispensable in disease treatment, they also enable the detection of early warning signs that often signal the onset or further development of disease, providing a critical window to prevent disease. As DHA

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<sup>1</sup> [www.connectedhi.com](http://www.connectedhi.com).

has noted, more than 40 percent of active-duty military personnel do not get enough sleep, a factor linked to increased inflammation, stress, obesity, diabetes, cardiovascular and neurodegenerative diseases, reliance on sleep aids, diminished quality of life, and a higher risk of accidents.<sup>2</sup> These functionalities that support disease prevention and improve engagement in care provide DHA with an immense opportunity to reduce costs. These same indicators can also provide early indicators or risks that undermine force readiness such as MSK injuries or infectious disease. As highlighted in the Department's July 2023 report *Use of Fitness Wearables to Measure and Promote Readiness*,<sup>3</sup> these devices offer 'unique potential for individual Service members and Commanders real-and near-real time measurements of key readiness metrics and scores, including activity level, stress, sleep, heart rate variability, and oxygen saturation,' which can inform optimal training and mission planning. Wearables and the data they provide should be the foundation for any modernized military healthcare system.

The Department of Defense is already beginning to leverage the potential of wearables and PGHD,<sup>4</sup> and Congress long ago identified a National Defense Strategy priority for creating a resilient Joint Force and defense ecosystem through the use of technology to service members. The 2022 National Defense Authorization Act (NDAA) required the Secretary of Defense to assess, address, or develop capabilities spanning critical Military Health System (MHS) priorities, including clinical care, population health, medical research, and bio surveillance. Section 724 of the NDAA required the development of a digital health strategy that incorporates new and emerging technologies and methods, including wearable devices and other innovative methods that leverage new or emerging technologies in the provision of clinical care within the MHS. Further, Section 722 of the 2022 NDAA required the Department to enable collection and stratification of data from multiple sources to measure population goals to improve and integrate wellness services across the MHS.

Given the well-demonstrated value of wearables in improving both prevention and treatment of disease, in addition to the DHA's endorsement of the value of wearables and PGHD, DHA should take rapid steps to remove legacy limitations on support for the use of wearables and related software in TRICARE. Presently, TRICARE will not provide coverage for wearable devices unless they meet strict durable medical equipment (DME) criteria, even when they would serve an eligible medical purpose.<sup>5</sup> TRICARE also excludes all mobile medical applications, which would support the timely use of PGHD collected by the wearable, from coverage.<sup>6</sup> Even further, TRICARE does not reimburse care teams for their time spent reviewing or integrating data from wearables into clinical care. In sum, the TRICARE program fails to provide an incentive to providers or patients to leverage

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<sup>2</sup> Mysliwiec, V.; McGraw, L.; Pierce, R.; Smith, P.; Trapp, B.; Roth, B.J. Sleep disorders and associated medical comorbidities in active-duty military personnel. *Sleep* 2013, 36, 167-174.

<sup>3</sup> U.S. Department of Defense, *Use of Fitness Wearables to Measure and Promote Readiness*, Report to the Committee on Armed Services of the House of Representatives (July 2023), <https://health.mil/Reference-Center/Reports/2023/07/24/Use-of-Fitness-Wearables-to-Measure-and-Promote-Readiness>.

<sup>4</sup> E.g., Karen Jowers, *Starlink, Oura Rings to help monitor sailor fatigue underway*, *Military Times* (May 27, 2025), <https://www.militarytimes.com/news/your-military/2025/05/27/starlink-oura-rings-to-help-monitor-sailor-fatigue-underway/>; U.S. Army, Holistic Health and Fitness (H2F), <https://h2f.army.mil/> (last visited July 11, 2025); *DoD Commits \$500 Million for Women's Health Research, Supports Better Care for All Women*, *USUHS News* (Sept. 24, 2024), <https://news.usuhs.edu/2024/09/dod-commits-500-million-for-womens.html>.

<sup>5</sup> <https://tricare.mil/CoveredServices/IsItCovered/DurableMedicalEquipment>.

<sup>6</sup> [https://manuals.health.mil/pages/DisplayManualHtmlFile/2023-11-28/AsOf/TP15/C1S1\\_2.html](https://manuals.health.mil/pages/DisplayManualHtmlFile/2023-11-28/AsOf/TP15/C1S1_2.html).

connected health solutions that are widely available and used elsewhere in the American health system.

TRICARE's pre-2000s era approach to wearables and the PGHD they generate denies its 9.6 million beneficiaries the opportunity to realize advanced connected care. These exclusions also increasingly place TRICARE behind the curve of digital health integration and innovation, particularly as Medicare and many Medicaid programs have come to embrace PGHD systems over the last decade.

**First, we urge DHA to immediately launch a new pilot at sufficient scale to explore the impacts of wearables and timely leveraging of PGHD, focusing on force readiness, individual patient outcomes, population health management, cost savings, and how the MHS and TRICARE provider workforce is affected.** DHA is fully enabled to undertake temporary pilots that explore access to new services or technologies to evaluate feasibility, effectiveness, and value. The results of this pilot provide needed experiences and data points to inform future policy decisions.

**Second, we call on DHA to initiate a new rulemaking to identify opportunities for how TRICARE beneficiary coverage policies for digital health innovations can be modernized, and to make appropriate modernizations to the TRICARE program as soon as practicable.** In this effort, DHA should focus on directly supporting, and removing barriers to, the integration of wearable technology and the PGHD it generates into TRICARE policy. We note that such a policy update would align TRICARE with the Trump Administration's priorities for technology adoption across the healthcare sector.<sup>7</sup>

Based on DHA's longstanding acknowledgement of the benefits of wearable technology and bringing PGHD into the continuum of care, and recognizing the critical role MHS and TRICARE beneficiaries play in supporting U.S. safety and national defense objectives, it is vital that the Department of Defense provides efficacious technology solutions already widely available to improve care outcomes and enhance overall force readiness.

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<sup>7</sup> <https://tricare.mil/CoveredServices/HowBenefitBecomesCovered/DetailedSteps>

The 2023 Report concludes: "The Department aims to continue leading as a change agent committed to innovating, collaborating, and adopting cutting edge wearable health and fitness technology to measure and promote Service member readiness and care." We wholeheartedly endorse this position. We sincerely appreciate the efforts of DHA to support TRICARE and the 9.6 million active duty service members, military retirees, and their eligible family members that rely on it. We welcome the opportunity to work with MHS and DHA to support this community through the use of digital health innovations.

Sincerely,

A handwritten signature in black ink, appearing to read "B. Scarpelli", with a stylized, cursive script.

Brian Scarpelli  
Executive Director

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