

Bipartisan deal on US veterans' health care includes step toward privatization

Kate Randall
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Senators Bernie Sanders (Independent, Vermont) and John McCain (Republican, Arizona) announced a deal Thursday on legislation to reform the Veterans Affairs (VA) Department's health care system. The bipartisan compromise was struck in the wake of a scandal over long wait times and subsequent deaths in the VA system, followed by the resignation last Friday of the Secretary of Veterans Affairs, retired Gen. Eric Shinseki.

The proposed legislation includes a two-year trial project under which veterans who live 40 miles or more from a Veterans Health Administration (VHA) facility would be able to seek alternate care in a private facility. Detailing the legislation before the Senate, Veterans Affairs Committee chair Sanders said that veterans meeting these conditions would "be able to go to the doctor of your choice, under the direct supervision of the VA."

The bill would also require the VA secretary to prioritize contracts with Federally Qualified Health Centers and Community Health Centers, as well as medical facilities receiving funding from the Department of Defense and the Indian Health Service. According the Associated Press, last year the VA spent about \$4.8 billion on medical care at non-VA hospitals and clinics, or about 10 percent of VHA health care costs.

Other provisions would increase the VA secretary's authority to remove senior executives and upgrade the VA's scheduling software. The bill also includes unspecified provisions to improve care and benefits to veterans who experience sexual trauma in the military, as well as to pay for university education at in-state tuition rates for post-9/11 veterans.

Speaking before the Senate, McCain, the senior Republican on the Armed Services Committee, praised

the deal, which he claimed would "help to relieve the terrible tragedy facing veterans." McCain is a strong proponent of privatization of veterans' health care. As early as 2008, as the Republican presidential candidate, he proposed a two-tier system in which veterans' "nonmilitary" medical issues would be handled by the private sector.

The crisis at the VA came to a head last week with the release of a report by the VA Office of the Inspector General showing that patients at the Phoenix Veterans' Hospital waited an average of 114 days for an initial appointment, and that hospital officials falsified records on wait times, with many receiving financial bonuses based on these bogus records. Doctors at the Phoenix hospital have charged that delays in treatment have been responsible for at least 40 preventable deaths.

The debate in Washington surrounding the VA scandal is steeped in hypocrisy. The same politicians who feign concern over the poor treatment of veterans, invariably described as "our military heroes," are responsible for authorizing and allocating funds for an endless list of military interventions across the globe. These wars create tens of thousands more maimed and psychologically scarred ex-soldiers needing treatment, while diverting resources from domestic social needs, including care for veterans of current and past wars.

Republican as well as Democratic members of Congress have seized on the crisis at the VA, not as the occasion for an emergency infusion of funding and trained healthcare workers for the department, but as a pretext for privatizing veterans' health care.

According to sources speaking to *The Hill*, the White House has been working closely with Senator Sanders to draft his Restoring Veterans' Trust Act. House Minority Leader Nancy Pelosi (California) voiced her support last week for privatizing more health care

services for veterans, telling reporters, “I don’t have any problem with that.”

Rep. Jeff Miller (Republican, Florida), chairman of the House Veterans Affairs Committee, has pushed legislation that would allow veterans who have been waiting more than 30 days for an appointment to receive care through private doctors and hospitals.

Another proposal, the “Veterans Choice Plan” being promoted by Rep. Andy Harris (Republican of Maryland), would establish what amounts to a voucher system, in which veterans could continue receiving care through the VHA or go to a private provider of their choosing. The federal government would cover the cost of insurance premiums and some out-of-pocket costs, depending on a veteran’s priority ranking.

While the provision in the new bipartisan Senate deal allowing private treatment is being presented as a two-year trial, it is clear that many lawmakers see it as the first crack in the door toward privatization. In an appearance Sunday on CBS’s “Face the Nation,” Senator McCain made clear that he would like to see the VA system opened up to full-scale privatization, stating, “Why doesn’t that veteran have a card and go to the caregiver that he or she needs and wants?”

Other provisions in the compromise bill will do little to alleviate the crisis in care at the beleaguered agency. Sanders announced Thursday that it would authorize \$500 million for the hiring of new VA doctors and nurses. This is a drop in the bucket under conditions where VA primary care appointments have increased by 50 percent in the past three years, while the staff of primary care doctors has grown by only 9 percent.

VA doctors are crushed under this caseload, being held responsible for upwards of 2,000 patients each. The VA health system is struggling under the weight of growing numbers of veterans from the wars in Iraq and Afghanistan seeking treatment for post-traumatic stress disorder, lost limbs, brain and other physical and mental injuries. Added to this are millions of aging veterans from the Vietnam and Korean wars.

The legislation also calls for the leasing of 27 major medical facilities by the VA in 18 states and Puerto Rico. It is unclear how these leases would be funded. It is also possible that Congressional Republicans will balk at authorizing any new funds—including the \$500 million for hiring doctors and nurses—as they view the crisis at the VA as an opportunity to bleed the agency

of funds and ultimately dismantle it.

According to a Congressional Research Service report prepared, the VA budget doubled between 2002 and 2012 in constant 2011 dollars. But this has not kept pace with the demand for veterans’ health care. Corresponding to this timeframe, according to a recent poll more than half of the 2.6 million soldiers dispatched to the wars in Afghanistan and Iraq report struggling with physical or mental health problems stemming from their deployments.

The House last month passed an annual spending bill including a minimal \$1.5 billion increase for fiscal year 2015 to fund veterans’ health programs, bringing the total to \$64.7 billion. By contrast, the US military machine consumes more than \$1 trillion every year to finance the wars of aggression that kill and maim thousands worldwide, including the injured soldiers who end up in the resource-strapped VA system.



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