

VA audit shows nearly 60,000 US veterans face delays receiving health care

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11 June 2014

A Department of Veterans Affairs (VA) internal audit released Monday shows that nearly 60,000 veterans are waiting to get appointments as new patients at VA facilities. It also reveals that 70 percent of VA facilities have used an alternative to official appointment schedules to make wait times for care appear shorter.

The audit was commissioned in the wake of a crisis at the VA following the release of an earlier report by the VA Office of the Inspector General (OIG), which showed that patients at the Phoenix Veterans' Hospital waited an average of 114 days for an initial appointment, and that many hospital officials received financial bonuses based on falsified records on wait times.

Doctors at the Phoenix hospital have charged that delays in treatment have been responsible for at least 40 preventable deaths, while an earlier internal VA review found that long wait times at VA hospitals in multiple states were linked to 23 deaths. VA director Eric Shinseki resigned over the scandal May 30, after presenting President Obama with preliminary department findings and ordering the system-wide audit.

The new Veterans Health Administration (VHA) audit of 731 VA facilities and nearly 4,000 employees from May 12 through June 3 found widespread problems with appointment scheduling and pressure on employees to falsify data. The audit found that 13 percent of schedulers at hospitals and outpatient clinics reported being told by supervisors to falsify appointment schedules to make the wait times appear shorter.

The new audit provides further confirmation of the deplorable state of veterans' health care in the US, as returning soldiers from the wars in Iraq and Afghanistan flood the VA system for treatment

alongside the aging population of Vietnam War veterans. The crisis has been seized upon by Congressional Republicans and Democrats alike, not as the occasion to increase funding for beleaguered VHA system, but to push for its privatization.

Last week, Senators Bernie Sanders (Independent, Vermont) and John McCain (Republican, Arizona) announced a deal on proposed legislation that includes a two-year trial project under which veterans who live 40 miles or more from a VHA facility would be able to seek alternate care in a private facility. The bill includes a minimal \$500 million in funding to hire doctors and other medical professionals, who are being overwhelmed by patients seeking treatment for post-traumatic stress disorder, amputations and spinal, brain and other debilitating injuries.

The new audit finds that as of May 15, 57,436 veterans were waiting to be scheduled for care at VA hospitals and clinics. Another 63,869 who had enrolled in the VA system over the past decade had never been seen for an appointment. It is unclear whether these veterans sought and received treatment elsewhere.

The audit found that wait times for new patients far exceeded the VA-mandated 14-day goal to be seen for an appointment. Some of the longest times were at VA health centers in Canandaigua, New York, 72 days; Baltimore, Maryland, 81 days; and Honolulu, Hawaii, 145 days. The shortest waits were in Coatesville, Pennsylvania, 17 days; and Bedford, Massachusetts, 12 days. Wait times were shorter in general for established patients.

At a hearing before the House Veterans Affairs Committee on Monday, Philip Matkovsky, the VA's assistant deputy secretary, commented on the results of the VA audit, "This is a breach of trust. It is irresponsible. It is indefensible. And it is unacceptable.

I apologize to our veterans ... and the American people.”

Rep. Beto O'Rourke (Democrat of Texas) cited a letter he received last month from VA officials claiming that a VA facility in his district had no veterans waiting to receive care, while the agency audit revealed patients were waiting there an average of 60 days, one of the worst records in the country.

Matkovsky told O'Rourke he should believe the audit's figures and warned that the “data could become worse” as the department further assesses its patient wait times. A number of House VA committee members called for a criminal investigation into the alleged falsification and corruption among senior executives in the VA system.

In a statement coinciding with the release of the audit, Sloan Gibson, the new acting VA secretary, announced a hiring freeze among senior positions at the VA, and said the VA would “trigger administrative procedures” against senior leaders in charge of facilities where falsified records have been exposed.

The VA's acting inspector general (IG), Richard Griffin, says his office is investigating 69 VA facilities nationwide for possible wrongdoing, up from 42 facilities two weeks ago. He said the investigations could result in criminal charges. Griffin told a congressional hearing in mid-May that his office had so far found no evidence of willful destruction of evidence related to the falsified records.

In a conference call with reporters, a senior VA official said the department projects it will need \$300 million over the next three months to accelerate medical care for the tens of thousands of veterans who have been waiting for appointments. It is unclear if and when such funding will be appropriated to clear the backlog to allow veterans to access this vitally needed care.

The crisis at Veterans Affairs continues to prompt a steady drumbeat of calls in Congress and the media for privatization of the department. 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 at the government's expense.

An editorial Monday in the *Washington Post* headlined “Reforming the VA” questions the limited,

two-year trial of privatization measures included in the Sanders-McCain bill, writing that such temporary efforts may relieve pressures in the VA system in the short term, but that it still “remains a government-operated centralized bureaucracy, utterly lacking the capacity to adjust its supply of services to rapid changes in demand.”

The editorial argues that while “‘Privatization’ is a dirty word to many VA supporters on the Hill and in the veterans’ lobby,” if the two-year trial allowing veterans to utilize private care proves effective, “Congress may well see the wisdom of this approach and want to continue and expand it.”



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