



D'ARTAGNAN



Shop Premium
Gourmet Food
from D'Artagnan

SHOP NOW >

Dow Jones Reprints: This copy is for your personal, non-commercial use only. To order presentation-ready copies for distribution to your colleagues, clients or customers, use the Order Reprints tool at the bottom of any article or visit www.djreprints.com

• [See a sample reprint in PDF format.](#) • [Order a reprint of this article now](#)

OPINION

How to Fix the Veterans Affairs Mess

Why do the VA and Defense Department operate parallel health-care systems? Maybe it's time to combine them.

By ANTHONY J. PRINCIPI

May 29, 2014 7:13 p.m. ET

As a former secretary of the Department of Veterans Affairs, I am deeply troubled by reports involving the falsification of records to conceal waiting times for veterans at VA hospitals—with at least 40 of them dying while awaiting treatment. A preliminary review by the VA inspector general, released Wednesday, found that at least 1,700 veterans waiting for care at the Phoenix Veterans Affairs medical facility were not even on a wait list.

Such acts are unconscionable, and those responsible must be held accountable. American veterans deserve nothing but the very best from the nation they have so honorably served, and they need to be reassured that they will receive it.

Much has been said about how to fix the VA's problems. Some say the department is underfunded. I disagree. The VA's budget has more than tripled, to \$154 billion in 2014 from \$49 billion in 2001, the year I became secretary. In that time, the veteran population has declined to 21.9 million from 25.5 million. The decline will accelerate with the passing of the World War II, Korean War and Vietnam War veteran populations.

With the Iraq war over and the war in Afghanistan winding down, it is time to chart a new course for the VA in the 21st century. Veterans' benefits have clearly multiplied far beyond President Lincoln's post-Civil War promise to "care for him who shall have borne the battle, and for his widow, and his orphan." It's time for a return to original principles. Those with disabilities incurred while in service—especially in combat or while training for combat—should never again have to wait in line for health care or benefits.

It's time to modernize the VA's antiquated disability compensation system—to develop a new framework that promotes wellness and compensates those whose quality of life and economic well-being have been sacrificed for our sake. Today, the country actually compensates a significant number of veterans for the expected and ordinary effects of aging based on presumptions. For example, while we must compensate veterans for diseases linked to exposure to environmental hazards on the battlefield, we should do so only when those decisions are based on sound scientific and medical evidence that the diseases are caused by such exposures.

When the VA makes payments to veterans more than 40 years after their military service for ailments such



Rueters

as heart disease or prostate cancer where there is *no* medical evidence of service-related exposure it undermines public confidence in the system and derails funding and treatment for those who need more urgent medical care. I dare say this was not what Lincoln had in mind.

In 2007, at the request of Congress, the Institute of Medicine issued a comprehensive report on how to improve the presumptive disability decision-making process for veterans—in other words how to determine whether an illness or disability that manifests itself long after service is service

related. The institute's report recommended that Congress provide a "clearer and more consistent charge on how much evidence is needed to make a presumption." The report also recommended that the VA adopt "transparent and consistent approaches" for making presumption decisions. To date, no action has been taken.

The Obama administration and Congress have a moral obligation to review and overhaul all laws and regulations to ensure that the determination of benefits and all other VA decisions are beyond reproach, and based on the best facts available.

It's also time to seriously consider the realignment of the separate Veterans Affairs and Defense Department health-care systems. The U.S. government operates two systems, both caring for the same people at different points in their lives. Many benefits would be derived from operating a fully integrated system where purchasing power applied to pharmaceuticals, medical supplies and equipment translates into savings used to advance better care. Shared infrastructure alone would save billions in construction costs over the long term, and help in treating more veterans closer to their homes.

Realignment would also end the long-running battle between the VA and the Pentagon regarding electronic medical records. Nearly \$1 billion has been wasted in a failed attempt to move the departments to a joint operating platform. Realignment would help caregivers refocus their efforts to provide world-class care to service members and veterans, with the highest priority on caring for those wounded in battle.

The VA and the White House recently announced plans to make it easier for some veterans to receive medical treatment outside of the VA system. While this may have value in areas with long waiting lists, it raises serious questions. The VA system is valuable because it is able to provide specialized health care for the unique medical issues that veterans face, such as prosthetic care, spinal-cord injury and mental-health care. If there is too great a clamor for vouchers to be used in outside hospitals and clinics, the VA system will fail for lack of patients and funds, and the nation would lose a unique health-care asset.

Vouchers are not necessary to ensure high-quality health care, nor is the removal of civil-service protections for senior VA leaders, as has also been proposed. What is needed is leadership to ensure that taxpayer dollars are being properly used for patient care.

It is also time for Congress to pass the Putting Veterans Funding First Act. Sponsored by House Veterans Affairs Committee Chairman Jeff Miller, the act provides advance appropriations for all of the VA's discretionary accounts, especially medical services. Appropriations bills for the VA have been passed on time in only three of the past 25 years. Passage of the act would help the VA better serve veterans, meet its operating goals, and plan for the future.

Monday's Memorial Day ceremonies—with veterans from World War II, Korea, Vietnam, Iraq and Afghanistan in attendance—remind us that the problems the VA faces aren't limited to the agency and those it serves. Left unresolved, the problems pose a significant threat to the future of our national defense by sending a message to young men and women we send in harm's way that when they return the door to care may be closed.

I recognize that veterans, and the service organizations that so ably represent them, have fought hard for many of the benefits I now suggest we reform. But it is time for them, for elected officials and for the nation to take a hard look at the current course and make certain that, from this point on, the VA's top priority is to care for those who have borne the battle.

Mr. Principi served as secretary of Veterans Affairs from 2001-05.

Copyright 2013 Dow Jones & Company, Inc. All Rights Reserved

This copy is for your personal, non-commercial use only. Distribution and use of this material are governed by our [Subscriber Agreement](#) and by copyright law. For non-personal use or to order multiple copies, please contact Dow Jones Reprints at 1-800-843-0008 or visit www.djreprints.com