

U.S. Senate Committee on Homeland Security and Governmental Affairs Subcommittee on Federal Spending Oversight



Senator Rand Paul, M.D. (Kentucky), Chairman

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Medical Waste: Coast Guard Medical Vacations

In February, the Inspector General (IG) for the Department of Homeland Security issued a report documenting a lack of oversight in the Coast Guard's *Travel to Obtain Health Care Program*. At an **average annual cost of \$1.2 million** (not counting lost work), this program pays for persons stationed in Alaska to travel to receive medical care they cannot get locally.¹

As the IG notes in their report, most care can be fully provided in Anchorage or (if needed) in Seattle, WA. Instead, the IG uncovered **trips from Alaska to Vail, Colorado; Orlando, FL; Scottsdale, AZ; and Savannah, GA.²** Though a doctor's referral is supposed to be required before travel is approved, only <u>twelve percent</u> of records had such notes.

In total, 94 percent of all records were missing key elements including travel requests, approval forms, cost estimates, and/or doctor's notes.³ This lack of basic documentation prevented the IG from substantiating whistleblower claims that trips -even to Anchorage- were more for shopping than medical care, while also preventing the IG from affirming the need for accompanying spouses (who also traveled at taxpayer expense) to assist patients.

The IG made several recommendations to improve training on what kind of documentation is required for the health care travel program. The Coast Guard agreed to all the recommendations and has implemented the training, but **one should not need special training to know that taxpayer funded medical travel should not be approved without a doctor's note**, especially if that travel is for couples' trips to vacation hot spots.

³ Ibid

¹ Persons stationed in Hawaii and Puerto Rico are also eligible for this program, but together only account for 7% of total cases.

² DHS Office of the Inspector General, *The U.S. Coast Guard Travel to Obtain Health Care Program Needs Improved Policies and Better Oversight*, Rep. No. OIG-15-31, Washington, D.C. February 2015. Web

ttps://www.oig.dhs.gov/assets/Mgmt/2015/OIG_15-31_Feb15.pdf