
Defense Report

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Military Medical Care—Its Condition Is Serious But Not Terminal

On the list of reasons new recruits give for enlisting in the Army, medical and dental care is rarely mentioned. But at reenlistment time, health care ranks closely behind job satisfaction and retirement benefits among the most important reasons soldiers give for staying in the Army.

Yet, despite the importance of adequate health care, there is a growing uncertainty on the part of military personnel about obtaining access to proper medical treatment.

In recent years, a number of Army treatment facilities—both medical and dental—stand closed because of government squabbling over how such facilities will be funded for the work they can perform.

At a time when 11 percent of the active Army is female and 57 percent is married, a Department of Defense attitude that for a long time, minimized the readiness contributions of OB/GYN physicians is seriously affecting morale of those who serve in and those who receive the services of the Army Medical Department.

This sends a clear signal to soldiers and their families that the military health care system is not being funded to meet the needs of its beneficiaries.

In addition, in 1988 military retirees and their families have seen increasing instances where medical treatment rooms were closed to them. First in a few isolated locations, then later with near uniformity, they were denied access to dental and optometry clinics and later to the use of other medical services. Even some reciprocal agreements for treatment of retirees at Veterans Administration hospitals were discontinued by the Defense Department, allegedly because funding was not available.

Both the Administration and Congress need to be made aware of the fact that military health care is a vital benefit for soldier's, retirees, and their families. It must be brought to the attention of our government that the incentive of lifelong quality family health care, so important to mid-career retention and the readiness of our military units, is being seriously eroded by reductions in the capability of military health care facilities. When that is accomplished, there may be hope that those who serve and have served will again be entitled to receive access to treatment for their health problems.