

VIP health system for top US officials risked jeopardizing care for soldiers, say investigators

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Top U.S. officials in the Washington area have received preferential treatment from a little-known health care program run by the military,

potentially jeopardizing care for other patients including active-duty service members, according to Pentagon investigators.

White House officials, senior military and other national security leaders, retired military officers, and family members have all benefited. The Washington elite could jump the line when filling prescriptions, book appointments through special call centers, and receive choice parking spots and escorts at military hospitals and other facilities, including Walter Reed National Military Medical Center in Bethesda, Maryland, according to the Pentagon's inspector general.

Through a unit at the White House, government personnel were routinely allowed to receive treatment under aliases, providing no home address or insurance information. For some of them, the care was free, as Walter Reed had no way to bill for it or waived charges.

The so-called executive medicine program was described in a [report](#) the Pentagon's inspector general released in January. The investigation drew extensive media attention for spotlighting a history of loose prescribing practices and poor controls of powerful drugs including opioids in the White House Medical Unit, a military outfit that attends to the president, vice president, and others in the White House compound.

But the White House Medical Unit is just the tip of the broader executive medicine program, intended to provide VIP treatment to senior government and [military officials](#). Though the program is meant largely to accommodate top officials' busy schedules, the privileges have followed many patients into retirement.

According to data from late 2019 and early 2020, the IG's report said, 80% of the executive medicine population in the national capital region were military retirees and members of their families.

Some facilities "provided access to care for executive medicine patients over active-duty military patients that had acute needs," according to the report, which added that prioritizing [medical care](#) by seniority rather than medical need "increased the risk to the health and safety of non-executive general patient population."

Much of the report was written in past tense, leaving unclear whether all the practices it described continue. Before the report was made public, a draft was under review by the White House Medical Unit for more than three years—from May 2020, when Donald Trump was in office, to last July. The delay isn't explained in the report, and White House spokespeople didn't respond to questions for this article.

A spokesperson for the inspector general's office, Deputy Assistant Inspector General Reishia Kelsey, declined to elaborate on the report. A spokesperson for the Pentagon, James P. Adams, also declined to comment.

In a response included in the inspector general's report, a Pentagon official said there were "new procedures already put in place by the White House Medical Unit." The report didn't detail those changes.

At Walter Reed, the program is available to Cabinet members; members of Congress; Supreme Court justices; active-duty and retired generals and flag officers and their beneficiaries; members of the Senior Executive Service who retired from the military; secretaries, deputy secretaries, and assistant secretaries of the Department of Defense and military departments; certain foreign military officers; and Medal of Honor recipients.

Walter Reed's executive medicine program caters to the "time, privacy, and security demands" of leaders' jobs, the hospital says on its website. The IG report makes clear that the program has, at times, provided

extraordinary privileges to the government's most elite officials.

For example, one unnamed executive medicine patient asked to have a prescription for an unspecified "controlled medication" refilled two weeks early—and complained when pharmacy staff at Fort Belvoir Community Hospital said that wasn't allowed.

Hospital leaders told hospital staff to fill the prescription as requested. According to the report, the staff said the task required an estimated 30 hours of extra work.

Controlled medications are subject to abuse, and some, such as opioids, can be addictive. Defense Department health policy calls for minimizing the use of opioids and prescribing them only when indicated.

A spokesperson for the Fort Belvoir hospital, now known as Alexander T. Augusta Military Medical Center, said every patient is seen through the same lens and treated with the care they deserve.

The spokesperson, Reese Brown, said the facility shows military deference to top officers on account of their rank. For example, they don't have to sit with the general population of patients.

The facility's website mentions an "Executive Medicine Health & Wellness Clinic" for authorized patients, including eligible family members.

Brown said he was unaware of the inspector general's account of the prescription refill and had no information about it.

The report said that at one unidentified pharmacy site, "all pharmacy staff members expressed frustration about the prioritization and filling of executive medicine prescriptions. This prioritization of executive

medicine prescriptions diverted the pharmacist from filling prescriptions for patients diagnosed with conditions that are more urgent."

Executive medicine services are also provided at the DiLorenzo Tricare Health Clinic at the Pentagon, Fort McNair Army Health Clinic, and Andrew Rader U.S. Army Health Clinic, the report said.

The inspector general recommended the Department of Defense take steps such as establishing controls for billing nonmilitary senior officials for outpatient services.

The assistant secretary of defense for health affairs agreed but said the department would consider "the historical practices of the White House Medical Unit, the DoD's health care support for non-military U.S. Government senior officials, and the need for strict security protocols to protect the health and safety of White House principals."

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