

# Australian state government considers forcing unvaccinated COVID patients to pay for hospital care

Gary Alvernia  
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New South Wales (NSW), the most populous state in Australia, is experiencing one of the fastest growing COVID Omicron outbreaks in the world, the result of a pro-business policy of fully re-opening and dismantling public health restrictions.

To divert attention from its own criminal responsibility for exposing people to death and disability from the virus, the NSW state government has said it is discussing plans to force unvaccinated COVID patients to pay public hospital costs, including for admission to intensive care units (ICUs).

Revealed in an interview on Sydney radio station 2GB last month, the proposal is under review by NSW Health Minister Brad Hazzard. At present, all public hospital costs are covered for Australian citizens and some residents.

The costs of a public hospital admission would be completely unaffordable for many working people. In Australia, hospital ward beds cost around \$1,000 per day, and ICU beds on average \$4,375 per day. Hospitalised COVID patients are often very sick, requiring on average 2 to 4 weeks of care.

Unvaccinated patients would either be bankrupted by illness, or avoid coming to hospital until it was too late, increasing the risk of death.

Unvaccinated persons, currently less than 6 percent of adults in NSW, are being scapegoated for large outbreaks, with claims that they are taking up a disproportionate amount of healthcare resources.

Unvaccinated persons are certainly at much greater risk of contracting and dying from COVID-19, and therefore more likely to need hospital admission than their vaccinated counterparts. This, however, is not why public hospitals are being overwhelmed. That responsibility lies with the governments, whose “live with the virus”

policies have guaranteed massive outbreaks and huge strains on unprepared and chronically underfunded healthcare systems.

NSW Premier Dominic Perrottet, a right-wing proponent of “living with the virus,” was installed in October precisely to accelerate the opening up of the state and the abandonment of public health measures including contact-tracing, travel quarantines and social distancing measures. His predecessor Gladys Berejiklian had already forced schoolchildren to return to in-class learning, despite their vulnerability to COVID, and the lack of access to vaccinations for those aged under 12.

Having abandoned previous limited measures to suppress COVID infections, the government now declares it is the responsibility of individuals to stay safe and avoid infection. This is virtually impossible given the pressures to return to work and school with no support. Even getting tested is difficult, as PCR testing centres are overwhelmed, and less reliable rapid antigen tests are either unavailable or sold at price-gouging costs.

At the same time, not a cent more has been given to increase staffing or boost hospital infrastructure. Like his Liberal and Labor predecessors, Perrottet has continued to underfund the public health system, resulting in a hospital bed and staffing crisis, including the loss of dozens of ICU beds and thousands of nurses.

It is these criminal policies, which have already more than quadrupled hospitalisations since December 19, that the government is seeking to hide behind the mask of “personal responsibility”—in essence the lie that those contracting COVID have brought it upon themselves.

It is not the case that all unvaccinated persons are simply “choosing” not to get inoculated. Vaccine supplies have not been equitably distributed to poorer working class and rural areas, resulting in significant delays in

accessing vaccination. There has been no scientific campaign to educate the public about vaccines. Aboriginal and non-English speaking immigrant communities have often been left unawares about the importance and availability of vaccines.

Furthermore, sections of the media and political establishment have been a sewer of anti-scientific propaganda, with federal parliamentarians like Craig Kelly and George Christensen able to spout anti-vax misinformation and promote bogus cures with impunity, even with support from the federal government of Prime Minister Scott Morrison.

Since the emergence of the Omicron variant in southern Africa, Australian federal and state governments, including some health officials, have sought to downplay its severity and encourage complacency, even as doctors and scientists have issued stark warnings about the danger of a COVID surge.

Chief Medical Officer Paul Kelly said on November 29 that Omicron could be the “greatest Christmas present” if it turned out to be less fatal than the Delta mutation. This week Queensland state Chief Medical Officer Gerrard all but encouraged infections, telling a media conference: “This virus ultimately needs to become endemic in the community.”

Vaccination itself is not seen as a public health measure, but rather as a means to justify the unconscionable goal of letting COVID loose through the community. Vaccination, while necessary to save lives, is only one part of a scientifically guided program to eliminate COVID, along with quarantines, lockdowns, and income and social supports for workers and their families.

Bombarded with lies and misinformation, compounded by decades of attacks on science education and conceptions of social solidarity, it is unsurprising that a small layer of the population would be left confused and sympathetic to anti-vaccination propaganda.

The NSW government’s proposal to impose hospital charges on the unvaccinated has drawn condemnation. Australian Medical Association (AMA) national president Omar Khorshid branded it “unethical.” He told the *Guardian* that “it’s really not the right thing to do to limit access to healthcare based on people’s previous health choices... if you follow that same logic, are you going to ask smokers to pay for their healthcare?”

Nervous about a backlash, the *Sydney Morning Herald* published an editorial this week titled “Forcing unvaccinated people to pay for hospital care is wrong.” It stated: “Of all the misguided and questionable ideas

proffered by federal and state governments since the pandemic began, the latest from NSW Health Minister Brad Hazzard must rank in the top tier... It is an unnecessary and reckless proposal; the start of a path we must not go down.”

The plan to deny hospital care will not be limited to unvaccinated COVID patients, but will be used as a precedent to further erode workers’ right to free healthcare, forcing them to accept greater costs. Such a denial of care could be expanded to those suffering from substance dependency or workplace injuries. The denial of care will primarily hit workers. Wealthy people, vaccinated or otherwise, will continue to get private hospital care.

It is not just the Perrottet and his NSW Liberal government that are championing these anti-working class measures.

In November, former NSW Labor premier Bob Carr unleashed a foul diatribe supporting the denial of care to the unvaccinated. He urged governments to “follow Singapore and legislate no medical or hospital expenses to be reimbursed to people who are not vaccinated without medical justification and then contract Covid.”

Like Australia, the government in Singapore ignored scientific and medical advice and dropped its COVID containment measures, leading to a rapid rise in Delta COVID cases and hospitalisations, despite high vaccination rates. Other countries have similarly scapegoated unvaccinated persons for COVID surges, including France which now requires unvaccinated adults to pay for PCR testing.

The inevitable logic of scapegoating individuals for the enormous strains on the public hospital system is to deny them health care and condemn them to their fate. Such an approach is a complete abdication of the elementary responsibility of society to protect human health and life. It stems from the determination of the capitalist classes internationally to protect the wealth and profits of the super-rich regardless of the cost in millions of lives.



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