

MEDICARE TRENDS AND RECOMMENDATIONS

ANALYSIS OF 2012 HELPLINE DATA

Trend – Affording Medicare

With half of all Medicare beneficiaries living on less than \$23,500 a year, and the costs of medical care and prescriptions continuing to rise, it is more important than ever to help people bridge the gap between what their benefits cover and what they can afford to pay for health care premiums, deductibles and other cost sharing.

Medicare households devote 14 percent of their budgets to health care, compared with just 5 percent for non-Medicare households.

Nearly all callers to the Medicare Rights Center’s helpline—poor, near-poor and even middle class—struggle to afford out-of-pocket health care costs.

Policy Recommendations

Protect all people with Medicare from higher health care costs, and strengthen low-income benefits. While there is widespread agreement that Congress should seek solutions to extend the financial health of Medicare over the long term, policy proposals that would save federal costs at the expense of people with Medicare must be avoided. At the same time, federal and state low-income assistance programs should be streamlined to reduce bureaucratic and financial barriers to getting help for those who are eligible for assistance with their insurance premiums, medical bills and prescription drug costs.

- ✗ Do not further income-relate premiums
- ✗ Do not prohibit or tax Medigap “first dollar” coverage
- ✗ Do not add a home health copayment
- ✗ Do not increase Extra Help copayments for brand-name drugs
- ✗ Do not restructure Medicare cost sharing with a savings goal
- ✗ Do not raise the Medicare age of eligibility
- ✓ Make the Qualified Individual Medicare Savings Program permanent
- ✓ Increase and align eligibility standards, and align and simplify application and renewal processes
- ✓ Ensure that health care providers are paid full cost sharing for people with Medicare Savings Programs

2012 HELPLINE HIGHLIGHTS

21% of all questions fielded by the helpline are related to low-income program enrollment

More than **half** of low-income calls were related to Medicare Savings Programs (MSP), and one-quarter of calls involved the Extra Help program

15% of calls concerned Medicaid, which helps the lowest income beneficiaries pay for costs not covered by Medicare