

Background

What's at Stake for Medicare and Medicaid

President Lyndon B. Johnson signed Medicare into law on July 30, 1965. We are now the inheritors of Medicare. We are here to preserve and protect it. Medicare's 50th birthday is the perfect time to organize and take action to ensure it continues for at least another 50 years.

The most recent Medicare Trustees Report showed that Medicare's finances actually improved, and Medicare will be solvent until 2026. This was nine years longer than projected in 2009, prior to passage of the Affordable Care Act.

In 2014, the Centers for Medicare and Medicaid Services reported that overall national health expenditures grew at an annual rate of 3.7 percent in 2012, marking the fourth consecutive year of low growth. Despite a large uptick in Medicare enrollment, Medicare spending growth slowed slightly in 2012. The Congressional Budget Office (CBO) projects that the slowdown in the growth of Medicare spending will likely continue for the next 25 years. This is attributed to not only the economy, but also structural changes in the Affordable Care Act.

Still, there are some in Congress who continue to call for benefit cuts for retirees and disabled Americans. We have been successful in fighting back against the chained CPI cut to Social Security benefits, which was not included in the President's budget this year and is currently on the back burner in Congress. However, there continue to be calls to cut Medicare benefits by raising the age of eligibility, means testing benefits, requiring home health co-pays and limiting Medigap coverage. These proposals were floated around as a way to pay for the "doc fix" and are also included in the House Republican budget. The House Republican budget also guts Medicaid and turns Medicare into a voucher program, under which seniors would receive a limited stipend to purchase insurance in the private marketplace or remain on Medicare. The Medicare cuts would do nothing to reduce the cost of health care, but instead, shift costs on to beneficiaries. Cutting Medicaid funding will jeopardize nursing home care.

There is a better alternative -- one that will not harm beneficiaries. Congress should pass the Medicare Drug Savings Act introduced by Senator Bill Nelson (D-FL) and Congresswoman Kathy Castor (D-FL), S. 1083 and H.R. 2005. This legislation will require drug companies to provide the government discounts for low-income Medicare beneficiaries, saving the government and taxpayers \$121 billion over 10 years and all but eliminating the need to cut benefits or shift costs on to beneficiaries.

Putting insurance companies in charge of Medicare is wrong. Slashing Medicaid funding or health care benefits for American families is wrong.

We are here to stand up to politicians in Washington who are determined to raise the retirement age.

We are telling politicians in Washington that we don't want our Medicare turned over to big insurance companies.

We are here to demand that Congress support better alternatives that will not harm beneficiaries.

Sample: Medicare Letter to the Editor #1 Bringing Coverage to All

(Date)

Dear Editor:

As Medicare celebrates its 50th year, it's the perfect time to reflect upon the difference Medicare has made in the lives of retirees like me. When Medicare was signed into law on July 30th 1965, only about half of our nation's seniors had health insurance. Before then, whenever uninsured seniors had health problems, they faced an impossible choice. Risk financial ruin by seeking necessary care or avoid treatment altogether and watch their health deteriorate. Thanks to Medicare, nearly all of our nation's seniors now have guaranteed health coverage.

The success of the Medicare program is clear. It has vastly improved the quality of life for millions of older Americans and allowed retirees to spend their later years in comfort and security. It has kept countless seniors from being thrown into poverty by the high cost of medical bills.

There has been a lot of talk in Washington lately about cutting Medicare benefits, further means testing the program, and shifting costs to seniors. These changes would be a disaster for our nation's current and future retirees. Medicare has been a cornerstone of retirement security for the last half-century. We owe it to future generations to keep the Medicare program strong and healthy.

Sincerely Yours,



Sample: Medicare Op-Ed

(Date)

On July 30th the Medicare program will celebrate its 50th birthday as a cornerstone of retirement security in America. This landmark occasion is the perfect time to examine the legacy of the program and reflect upon the positive impact it has had on the lives and health of our nation's retirees.

When President Johnson signed Medicare into law in 1965, growing older often meant poverty and illness. Only half of our nation's seniors had health insurance. While many retirees received health coverage through unions, the millions of seniors paying out of pocket faced premiums as much as three times the cost paid by younger workers. Insurance was seen as a luxury that many seniors simply couldn't afford.

Older Americans were all too often faced with a choice between protecting their health and protecting their savings. For millions of uninsured seniors, an illness could mean being thrust into poverty or going without treatment altogether. An estimated one in four retirees used to go without necessary care due to cost concerns. Around one in three seniors lived out their older years in poverty. Many were forced to lean on friends and family to provide care and financial support during times of illness.

When Medicare was signed into law on July 30th 1965, retired workers, regardless of income or health history, found themselves with guaranteed health coverage for the first time. Today, seniors across the country are able to see a doctor and fill a prescription because of the Medicare program. Medicare has been so successful that today's seniors are more likely to have health coverage than any other segment of the population.

The success of the Medicare program is clear. It has vastly improved the quality of life for millions of older Americans and allowed retirees to spend their later years in comfort and security. It has kept millions of seniors from being thrown into poverty by the high cost of medical bills. In fact, the poverty rate for seniors has gone down by 75% since Medicare was signed into law. Medicare provides a critical lifeline that protects the health and economic security of our nation's seniors and their families.

Today, this lifeline finds itself under attack. Politicians in Washington like Rep. Paul Ryan (R-WI) and Sen. Marco Rubio (R-FL) are pushing to dismantle the Medicare program and roll back the clock 50 years. They are hoping to cut Medicare benefits for seniors, funnel money into the pockets of private insurance companies, and put an end to Medicare's guaranteed coverage.

This summer, the Alliance for Retired Americans is celebrating Medicare's 50th birthday with grassroots events all across the country. There will be rallies on Capitol Hill in DC and rallies at state capitols. Medicare's birthday will give us an opportunity to bring attention to its great success and to educate seniors on threats to the program. We will be working to educate seniors on the candidates in this year's elections and debunk the misinformation spread by corporate-backed lobby groups, politicians, and commentators.

Please join us in celebrating Medicare's half-century track record of success, and together we will work to make sure it's around for 50 more.



Medicare Talking Points

Congress should reject proposals that would cut Medicare funding by turning it into a voucher program.

- It takes away your traditional Medicare benefits and replaces it with limited stipend with which to purchase insurance in the private marketplace and ends Medicare as we know it leaving you at the mercy of private insurance companies.

Congress should reject proposals that further means tests Medicare benefits.

- Medicare Parts B and D is already means tested for individuals with incomes over \$85,000, and couples with incomes over \$170,000.
- More means testing is a direct attack on the middle class, as it will hit individuals making as little as \$47,000.

Congress should reject proposals that shift Medicare costs to seniors.

- Proposals to eliminate first dollar coverage or charge a surcharge to individuals who have Medigap do not deal with the rising costs of health care, but instead shifts costs on to beneficiaries.
- Likewise, proposals to institute home health co-pays will penalize those who can least afford it -- the oldest, sickest and chronically ill.

Congress should reject proposals that raise the eligibility age for Medicare beneficiaries.

- Proposals that have you wait two more years to get Medicare, raising the eligibility age to 67, leave you on your own when you are most vulnerable. You'll either have to find a job that provides coverage, when you are at an age that most employers don't want to hire you; pay for coverage yourself, at a time in life when your income is likely declining; or become impoverished so you are eligible for Medicaid, provided your state makes it available to you.

Congress should enact the Medicare drug rebate program.

- The proposal, which would require drug companies to provide discounts to the federal government for low-income Medicare beneficiaries, will save the government and taxpayers \$121 billion over 10 years.
- This is a sensible alternative that will save the Medicare program money without harming beneficiaries.



Medicaid Talking Points

Congress should not balance the budget on the backs of Medicaid beneficiaries.

- The House Republican budget guts the Medicaid program. Medicaid is our health care safety net for low-income women, children, seniors and people with disabilities.
- Medicaid covers 62% of all long term care programs in the U.S. Slashing one-third of its funding would severely impact seniors and the disabled that rely on the program for their nursing home and home care.

Congress should not shift Medicaid costs on to states.

- The House Republican budget shifts Medicaid costs on to cash-strapped states by turning Medicaid funding into state block grants.
- The grants would cover only a fraction of health costs, forcing states to make up the difference, or abandon their poor by restricting Medicaid eligibility or cutting services.

States should participate in the Medicaid expansion under the Affordable Care Act.

- The Medicaid expansion if fully implemented would expand coverage to 21 million uninsured Americans and will allow adults with incomes up to 138% of the federal poverty level to be covered under Medicaid.
- While seniors may be able to get coverage through the insurance exchanges, those with incomes below 100% of the federal poverty level would be ineligible. The Medicaid expansion is the only affordable way for them to get coverage.
- The failure of a state to participate in the Medicaid expansion will result in the state losing federal funding.