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Consumers Union Urges Americans to Keep Score on Medicare Bill

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Should Demand Answers from Congress on Whether Prescription Drug Bill Emerging From Conference Committee is Good or Bad for Consumers

(Washington, DC) -- Reports about tentative agreements and compromises struck by conferees working to reconcile the flawed Medicare prescription drug bills passed by the House and the Senate in June reveal that the measure may do little to help seniors access affordable prescription drugs.

When and if a final deal is struck, the legislation is likely to be rushed to the House and Senate floor for quick consideration. The fine print behind the deals will determine whether the legislation will provide modest relief for seniors and the disabled *or* whether the bill will mean the end of Medicare as we know it, forcing beneficiaries to sacrifice their freedom to choose their own doctor.

Consumers Union, publisher of *Consumer Reports*, urges the public to demand answers from their Representative and Senators about what the bill will mean for them. Before voting on the legislation, members should be able to explain to their constituents how the legislation scores on these key concerns:

Scorecard for Medicare Prescription Drug Bill Will Consumers' Needs be Met?

	Good for	Bad for
	Consumers	Consumers
Will the drug benefit be adequate?		
• Is coinsurance higher than 20 percent?		X
• Is there a doughnut in coverage?		X
• Is there relief for those with moderate expenses,	X	
and true catastrophic protection?		
Will the government negotiate fair prices for U.S.		
consumers?		
• Is there a prohibition on the government seeking		X
fairer prices?		
• Are loopholes that delay generics closed?	X	
• Will U.S. consumers have access to safe drugs at	X	
prices comparable to those in Canada?		

	Good for	Bad for
	Consumers	Consumers
Will the universal nature of Medicare be		
preserved?		
 Will benefits be based on income, providing 		X
incentives for those with high-incomes to leave		
the Medicare program?		
• Will Part B premiums vary substantially		X
depending on where in the country you happen to live?		
• Will pharmacy benefit managers (PBM's) have		X
total control (with limited accountability and		
transparency) meaning that benefits are not		
standard, but depend on where you live (and		
which PBM your plan uses)?		
Does the bill ensure beneficiaries' freedom to		
choose their own doctor is not threatened by		
requiring "traditional" fee-for-service Medicare to		
compete with private HMO's and PPO's?		
• Will those who wish to remain in traditional		X
Medicare face increased premiums based on their choice?		
 Are private HMO's and PPO's provided subsidies 		X
that unfairly favor them and drive up Medicare		
costs?		
Will the legislation not provide incentives for		
employers to drop their retiree benefits that now		
provide comprehensive drug coverage?		
• Will an estimated four million beneficiaries end		X
up with less prescription drug coverage than they		
have currently?		
Will those eligible for both Medicaid and		
Medicare not be forced to get their prescription		
drug benefits through Medicaid?		
• Will states' budgets get some relief that will allow	X	
keep them from cutting health benefits for		
children and those with low-income?		
Will those with low-income get meaningful relief?		
• Will there be an assets test that means low-income		X
alone is not sufficient to qualify for subsidies?	**	
Will low-income beneficiaries have coverage for	X	
any doughnut?		

	Good for	Bad for
	Consumers	Consumers
Will there be a real federal fallback?		
• Will the federal fallback apply when there is just		X
one private plan (plus one PPO) in a region?		
• Is the federal fallback expected to be available to	X	
at least one third of Medicare beneficiaries?		
• Will there be any guarantee of premium level?	X	
Will new cost containment provisions (such as a		X
global cap on spending) threaten the availability of		
Medicare benefits to all?		
Will costly provisions such as expanded medical		X
savings accounts (e.g. health savings accounts) that		
threaten to erode employer-based coverage for		
those under 65 be tacked on? (This could drive up		
the number of uninsured and make it harder for those		
with pre-existing conditions to get coverage?)		

For more information, go to http://www.consumersunion.org and click on the health care link.