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NEWS RELEASE
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Sick and Tired of Going Without, Older Americans Want Action to Lower Medicare Drug Costs Call Your Member of Congress Says, The Senior Citizens League

(Washington, DC) – Susan Gross, a 66 - year old retired office assistant living in Central Virginia, spends most of her day caregiving. Her 46-year-old son, who is disabled from cerebral palsy, lives with her, as does her mother, who is now 93. All three of them receive their healthcare coverage through Medicare. It's Susan's job to manage the high cost of the prescription medications that each of them needs for good health.

Susan has rheumatoid arthritis and was taking Humira, a drug that would cost more than \$4,000 out-of-pocket in 2019 if she had to purchase it through a Part D plan. Prior to starting Medicare, she paid a co-pay \$5.00 per month through her husband's insurance. Before starting on Medicare though, Susan transitioned to an older generic, Methotrexate, which costs just \$3.00 per month through her Part D plan. While the cost of the prescription is affordable, the drug causes a number of serious side effects. Susan needs to see her doctor more frequently for monitoring and blood tests. Her biggest prescription cost surprise was learning that her prescription vitamin, folic acid, which she needs to fight the side effects, was not covered under Medicare. Her Part D plan wanted \$140.00 for a one-month supply. Susan instead orders an over-the-counter supply of 400 pills for \$6.99 on Amazon, taking 7 pills every day to get to the required dosage, which is still not as effective as the prescription version of folic acid. Now her doctor is considering taking Susan off of the Methotrexate and trying something else.

Susan's son Andrew requires an expensive anti-convulsive medication, Depakote Sprinkles. None of his Part D plan choices covers the brand drug — which can cost \$5,099 a year retail but they do cover the generic version. For Andrew, however, the generic doesn't work, and he has suffered seizures while trying to use it. Susan learned, however, from a volunteer Medicare benefits counselor, that because Andrew receives Medicare Extra Help, his doctor can ask his drug plan for a coverage exception. Since starting Medicare, Andrew has received coverage for Depakote in each of his Part D plan choices.

Susan's mother started taking the prescription drug Eliquis last year, that will cost her mother about \$1,244 out-of-pocket in 2019 for that drug alone (she takes five other generics). Last year, the cost of Eliquis pushed her mom into the Part D doughnut hole where out-of-pocket costs were higher. Rising costs of the drug in 2019 will mean her mom will hit the doughnut hole a month sooner this year.

“The high cost of prescription drugs forces people to do what we shouldn't have to do, like ordering drugs from Canada,” says Susan. “I have a friend who went without one of her prescriptions because she didn't have the money, and she died of a stroke. Our government is not doing what it's supposed to do. It's a constant struggle, and my husband hasn't retired yet

because of our concern about the costs of his prescription drugs for which he currently gets good coverage from his job.”

A new online survey by [The Senior Citizens League](#) (TSCL) finds that older Americans overwhelmingly want Congress to take action to lower the cost of prescription drugs, by reducing Medicare Part D’s out-of-pocket spending requirements. “Fifty-six percent of participants in the survey indicate that they spend more than \$612 a year on prescription drugs,” says Mary Johnson, a Medicare and Social Security policy analyst for The Senior Citizens League. About one-out-of-five retirees spends more than \$250 per month on prescription medications.

“Eighty-two percent of survey participants want Congress to permanently reduce the amount of out-of-pocket spending under Medicare Part D,” says Johnson. The survey also found that 77 percent of survey participants think Congress should establish an out-of-pocket cap, for example, of no more than \$250 per month (\$3,000) per year.

Annual out-of-pocket spending on prescription drugs was the fastest rising expense of retirees from 2000 to 2019, according to recent study of retiree costs released by the League. That study found that average Social Security benefits lost 33 percent of buying power from 2000 to 2019. In the case of prescription drugs, the annual cost of living adjustment (COLA) increased Social Security benefits by 50 percent over the period, but out-of-pocket spending on prescription drugs rose more than five times faster — 253%.

The Senior Citizens League supports bipartisan legislation that would require Medicare to negotiate lower prices for Medicare Part D, allow safe importation of prescription drugs from Canada and other countries where the same drugs are often sold for much less, and would ban “pay for delay” deals between drug manufacturers that keep cheaper generics off the market.

To learn what you can do, visit www.SeniorsLeague.org.

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