

JUSTICE IN AGING

FIGHTING SENIOR POVERTY THROUGH LAW

Modernizing Medicare to Close Its Gaps

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January 23, 2020

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Justice in Aging is a national organization that uses the power of law to fight senior poverty by securing access to affordable health care, economic security, and the courts for older adults with limited resources.

Since 1972 we've focused our efforts primarily on fighting for people who have been marginalized and excluded from justice, such as women, people of color, LGBTQ individuals, and people with limited English proficiency.

To achieve Justice in Aging, we must:

- Acknowledge systemic racism and discrimination
- Address the enduring negative effects of racism and differential treatment
- Promote access and equity in economic security, health care, and the courts for our nation's low-income older adults
- Recruit, support, and retain a diverse staff and board, including race, ethnicity, gender, gender identity and presentation, sexual orientation, disability, age, economic class



Medicare Primer

Medicare Primer: Basics

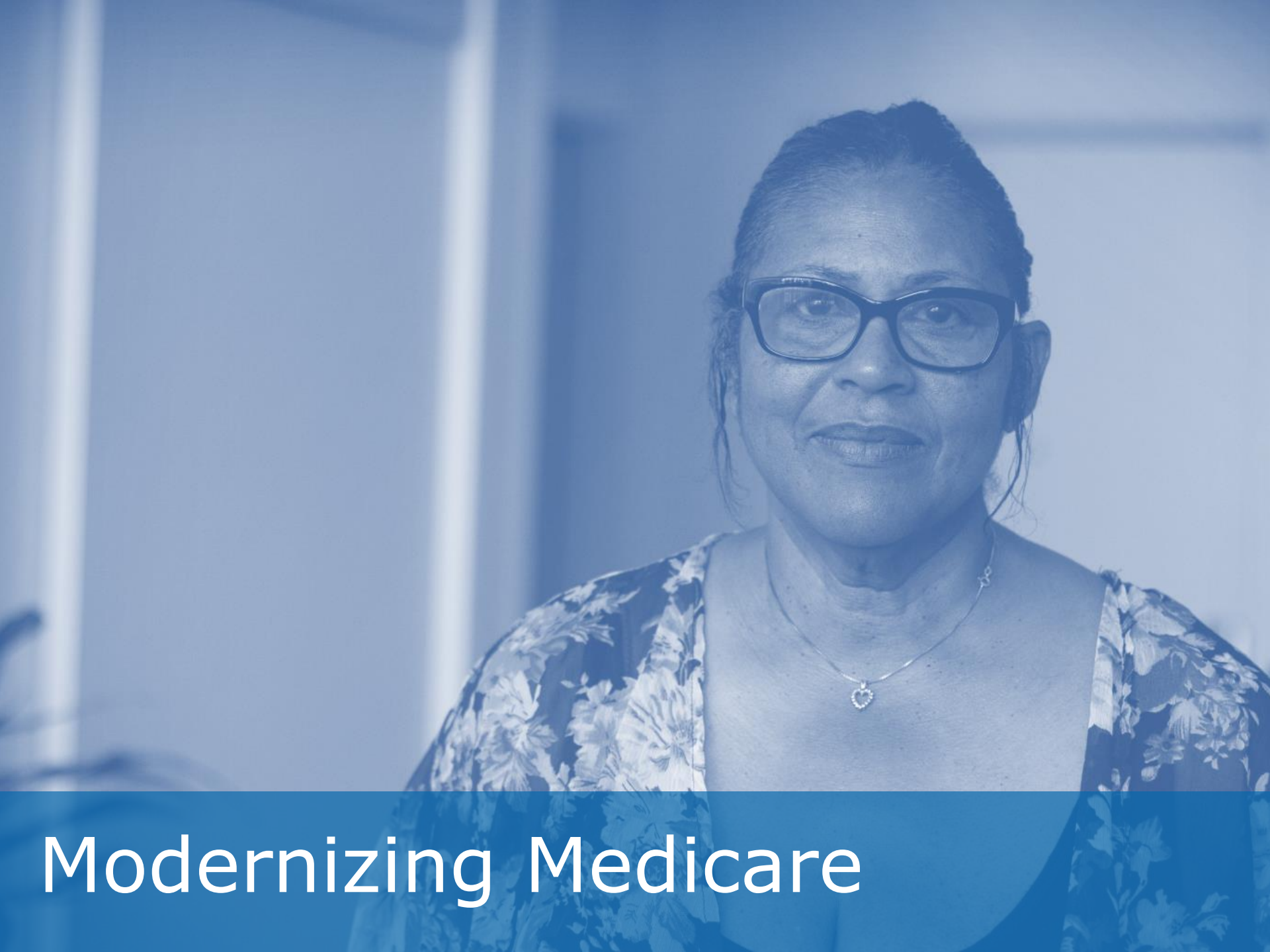
- Federal Program
- Individuals 65 and Over
- Younger individuals under 65 with disabilities
- **Not free/Not Comprehensive**
- **Very Limited Coverage of LTSS**
- **No Dental, Hearing, Vision Coverage**

Medicare Primer: Parts

- **Part A** – hospital, skilled nursing, hospice, some home health
- **Part B** – outpatient – doctors, ambulances, durable medical equipment, etc.
- **Part C** – option to join a private plan (Medicare Advantage)
- **Part D** – prescription drug coverage

Medicare Primer: Financial Assistance

- **Medicare Savings Programs** - Administered by State
 - Qualified Medicare Beneficiary (QMB) – pays Part A (if not free) and Part B premiums and cost sharing
 - Specified Low Income Beneficiary (SLMB) – pays Part B premium
 - Qualified Individual (QI) – pays Part B premium
- **Part D Low-Income Subsidy (LIS)** – or “Extra Help” – administered by SSA
 - Pays for premiums and reduces co-pays



Modernizing Medicare

Improve Medicare Affordability & Access

- **Eliminate the two-year waiting period for Medicare on the basis of disability**
- **Expand Eligibility For Medicare Savings Programs**
 - Raise income limits and ease or eliminate asset tests as 13 states have already done
 - Improve payment policies – eliminate the “lesser of” policy
- **Expand Eligibility for Part D Low-Income Subsidy (LIS)**
 - Increase the LIS income eligibility threshold to 150% for full benefits and 200% for partial; disregard certain retirement income; eliminate asset test.
- **Notify LIS Beneficiaries of \$0 premium options**
- **Language Access**
 - Translate Medicare and You beyond Spanish and expand translation requirements for important documents

Expand Benefits

- **Long-Term Services and Supports**
 - Add comprehensive LTSS benefit
 - Add respite care, adult day health care, eliminate the requirement that Medicare beneficiaries need skilled care and be homebound to qualify for home health coverage; remove “needed for use in home” restriction on DME
- **Nursing Facility Stays**
 - Eliminate the two-midnight rule
- **Add dental, vision and hearing**

Add Oral Health Coverage to Part B

- 65% of Medicare beneficiaries have NO dental coverage

37 million people

- Nearly 50% did not visit the dentist in last year
- Cost is biggest barrier to care

Source: [Kaiser Family Foundation](#)

Major Disparities

- 71% of Black & 65% of Hispanic Medicare beneficiaries did not see dentist in last year (versus 43% white)
- 70% with income below \$10K (versus 27% with \$40K)
- 62% of beneficiaries under 65 with a disability
- 59% in rural region (versus 46% in metro areas)

2019 Legislation

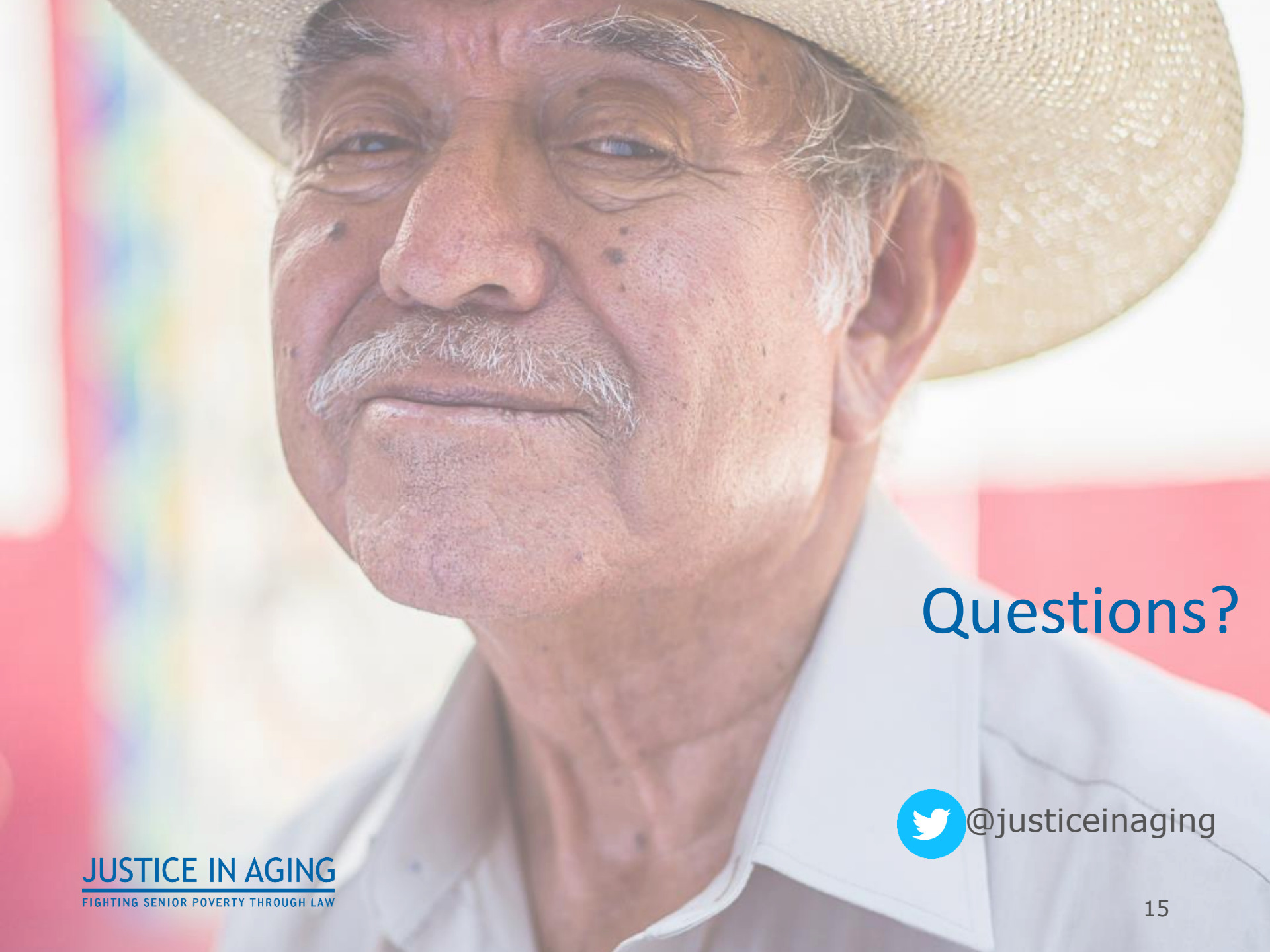
- Medicare Dental Benefit Act of 2019 (Cardin, S. 22)
- Companion House Bill Medicare Dental Benefit Act of 2019 (Barragan, HR 2951)
- Medicare Dental, Vision & hearing Benefit Act of 2019 (Doggett, HR 1393)
- Seniors Have Eyes, Ears, and Teeth Act (Roybal-Allard, HR 576)
- Medicare and Medicaid Dental, Vision, and Hearing Benefit Act of 2019 (Casey, S. 1423)
- HR 3 – oral health added to Medicare and approved by House; unlikely to pass in the Senate. Monumental!

Additional Resources

- **Justice in Aging, [Oral Health Page](#)**
 - **Creating an Oral Health Benefit in Medicare: A Statutory Analysis**, Justice in Aging (Jan. 2019)
 - **Adding a Dental Benefit to Medicare: Addressing Racial Disparities**, Justice in Aging (Oct. 2019)
 - **Adding a Dental Benefit to Medicare Part B: FAQs**, Justice in Aging, CMA, FUSA (Nov. 2019),
 - **An Oral Health Benefit in Medicare Part B, It's Time to Include Oral Health in Health Care**, Joint White Paper (Jul. 2018), available at

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Questions?



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