

SOS

Save our SeniorCare



Why Changes to SeniorCare are BAD for Wisconsin

Seniors can't afford it.

Most older people in Wisconsin are on a fixed budget; over 1/3 of couples live on just over \$20,000 per year of income. If they are forced to enroll in Medicare Part D, they will incur additional costs and face uncertainty over those cost increases every year.

The annual enrollment cost for SeniorCare is \$30; the average Medicare Part D plan monthly cost is \$35 – that's an extra \$390 every year per person.

SeniorCare is cost-effective.

Under SeniorCare, the state negotiates rebates from drug companies that pay 45% of the total cost of the program, with federal matching funds paying 30% of the cost. The state only pays 25% of the cost.

SeniorCare has also been successful in encouraging the use of less-costly generic drugs. In fact, 75% of drugs purchased through the SeniorCare program are generics.

SeniorCare is cost-efficient.

During the current state budget, SeniorCare has shown a \$20 million savings that is already being used to plug the Medicaid deficit.

Meet Edwin and Marian Schroeder, a couple who have depended on SeniorCare since it first began in 2002. Mr. Schroeder is 79 years old and Mrs. Schroeder is 77 years old and they live on a farm near Watertown in Jefferson County, WI. Mr. Schroeder is a diabetic and had one leg amputated seven years ago and Mrs. Schroeder has serious back pain. He uses a wheelchair and they have made their house accessible hoping they “can live there as long as possible.” This is a couple who worked all their lives and thought that they had planned adequately for their future. They have now sold all but four acres of land and have a life estate on their farmstead where they hope to live for the rest of their lives. Because their Social Security Income is under 160% of the federal poverty level they are qualified for Level 1 of SeniorCare. That means they pay the annual enrollment fee of \$60 for two people, a \$5 copayment for each generic drug, and \$15 for each brand name drug. Together the Schroeder's take 17 prescription medications with all but four being generic drugs. The Schroeder's Social Security Income is used to pay for a Medicare Supplemental policy and helps them pay their annual property taxes of \$4000, but they also must dip into their savings each month to meet other expenses.

Under Governor Walker's proposal, Mr. and Mrs. Schroeder would be required to purchase a Medicare Part D insurance plan. They would also continue to be enrolled in SeniorCare which would cover some of the costs not covered by the Part D plan. The costs for Part D plans in Wisconsin range from \$15 a month to \$109 a month with copayments being much higher than SeniorCare's \$5 and \$15. The Schroeder's would not qualify for the Part D Low Income Subsidy because the asset level for a full subsidy is only \$10,020 for a couple. Mr. Schroeder says he does not know how they can afford the extra cost for a Part D plan and states that SeniorCare “saved our necks really.” Also, he says that if the Governor's plan is approved by the legislature he and his wife will have to make a choice of, “Are we going to eat or take our prescription drugs?”

Please stand up for the Schroeder's – and the thousands of other older persons throughout Wisconsin who depend on SeniorCare.

Please leave SeniorCare as it is. No changes.