

STORIES THAT DEMAND HEALTH ACTION NOW

I carried health insurance for both my husband and myself through my employer. I was laid off from work on 12/10/08 and lost our health insurance coverage. I am 61 years old so I have not been able to find employment yet so we still do not have any health insurance. My unemployment is not enough to cover all our bills much less any health insurance. I looked into getting coverage when I first got laid off but it is so expensive that we can't afford it. We are both senior citizens with health issues but not yet old enough for Medicare either. We are caught between a rock and a hard place. – **Sharon B. Kaufman, TX**

My husband and I have been dealing for more than 16 years with his multiple diagnoses of cancer and other injuries. Fortunately we had insurance to pay for some of his treatment. Even so, we paid over \$12,000 a year for nearly 11 years out of our own pocket. Each year our premium increased by double digits and our coverage was reduced. We finally reached the point where we were no longer able to afford insurance or all the medical care we needed...Our savings and income have been and are being eaten up by medical expenses faster than we can earn money. – **Judy C. Rogers, AR**

I am 59 years old. I was diagnosed with Multiple Sclerosis (MS) at 51 years old. Believing in the American healthcare system, I maintained health insurance while raising a family of four and I never took unfair advantage and never let my insurance lapse. After my diagnosis for MS I battled my insurance company for two years before they finally dropped me. Now I am in no man's land, too young for Medicare, not employable because of my disability, turned down by Social Security disability, living on a fixed income from my savings, with medical costs of more than \$30,000 a year. I'm uninsurable in the private sector. And there is no state pool that begins to be affordable. All of my choices are bad and worse yet. – **Charles A. Greenville, SC**

I'm currently taking 17 different medications, several of which are expensive brand-name drugs for which generics aren't available. One pill alone is \$500 per month. I'm now in the doughnut hole. So far I've been able to get samples of the most expensive ones, but that only prolongs the agony. I don't understand how I'm supposed to come up with almost \$4,000 when my monthly income is \$1,700, and I still have to pay for things like food and utilities. – **Joan D. Raleigh, NC**

I'm 67 and my doctor has me on 8 prescription medicines, 5 of which have no generics. That's means I dropped partially into the doughnut hole in April and in May my monthly drug bill—even with RX coverage—will be something like \$550 a month. That's quite a sum for person getting about \$2,400 a month in Social Security and a work pension. We need relief NOW. – **Leslie W. La Grange, KY**

To share your story or get involved in AARP's efforts to reform health care, please go to HealthActionNow.org. It's time for us to create a better system for everyone.

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HEALTH CARE:**PRESERVE
WHAT'S RIGHT****AARP**

The power to make it better.

Who Will Health Care Reform Help?

AARP is working hard with lawmakers from both parties to enact an American solution to the health care challenges facing you and your family. You are the voices for better, more affordable health care, and through your voices, we can get Health Action Now!

Improving Your Health Care

Our health care system costs too much, wastes too much, makes too many mistakes and gives us back too little value for our money.

While health care costs are skyrocketing, people's retirement savings are shrinking, millions of Americans are losing their jobs and health coverage, and countless businesses are being forced to drop their health care plans or close their doors. Even people with insurance are paying more and getting less, and are not safe from devastating costs.

AARP is working to fix the broken system—for you and future generations.

With millions of people in Medicare spending nearly a third of their incomes on health care—we can't afford to wait.

With more than 7 million Americans age 50-64 without health insurance – we can't afford to wait.

With one in three Americans saying a family member has skipped pills, postponed or cut back on needed medical care due to the cost—we can't afford to wait.

The time to improve health care and lower costs to individuals, businesses and government is NOW!

Why is AARP Involved in Health Care Reform?

The key to AARP's success has always been that we listen to our members, who are sending us a clear message: we need to take action to make health care more affordable and to improve its quality.

As Congress and the President debate the most effective way to improve health care, AARP is fighting to make your voice heard. We're calling for fair and common-sense solutions that will lower costs, improve quality, and give *all* Americans affordable health care choices.

Fixing Health Care: Common-Sense Solutions

AARP's vision for how we can improve health care is to fix what's wrong and preserve what's right. AARP's eight principles for health care reform are:

- ✓ **Protect Your Health Care Choices:** Make sure that all Americans are free to choose their doctor and to follow the course of treatment their doctor recommends;
- ✓ **End Discrimination by Insurance Companies:** Prevent insurance companies from denying people coverage because of a pre-existing condition or using age to price Americans age 50+ out of affordable, quality coverage;
- ✓ **Lower Prescription Drug Costs:** Close the Medicare Part D "doughnut hole" and make lower-cost generics more widely available;
- ✓ **Make Health Care More Affordable:** Strengthen and improve Medicare and ensure Americans age 50-64 have a choice of health insurance plans they can afford;
- ✓ **Improve Care:** Improve quality and reduce medical errors so all Americans have the peace of mind that comes with good health care;
- ✓ **Guarantee Stable Coverage:** Ensure all Americans have the security of knowing that if they lose a job or experience life's other ups and downs, they will be able to get coverage;
- ✓ **Reduce Waste, Fraud, Abuse and Inefficiency:** Reduce the cost of health care by weeding out waste, fraud, abuse and inefficiency that lead to unnecessary and more costly care; and
- ✓ **Expand Care at Home:** Make sure individuals have a choice to receive care they need at home rather than in a more costly institution.