CMA Weekly Alert – August 3, 2005

WAITING FOR MEDICARE

Last week, we celebrated Medicare’s 40th anniversary and the enormous contribution the Medicare program has made to providing health insurance and health security for nearly every older American. This week, more than 1.2 million people with disabilities are still waiting to get Medicare coverage for their health care needs. Nearly one-third of them have no health insurance at all. Caught in a 24-month waiting period that does not begin until after they receive their first Social Security Disability Insurance (SSDI) check, many people with disabilities die before they qualify for Medicare.

Why this anomaly? Why do people with disabilities have to wait so long to get Medicare? When Medicare was expanded in 1972 to include people with significant disabilities, Congress simultaneously created the 24-month waiting period to reduce the costs of the program’s expansion.

Legislation to phase out the waiting period is now pending in Congress. “Ending the Medicare Disability Waiting Period Act of 2005,” introduced in the Senate as S.1217, and, in the House of Representatives, as H.R. 2869, would phase-out the waiting period over the next ten years and would authorize the Secretary of the Department of Health and Human Services, in the interim, to waive the waiting period for people with life-threatening illnesses. Congress has already created exceptions to the waiting period for people with amyotrophic lateral sclerosis (ALS) and for those needing hospice services.

Introducing S.1217 with a bipartisan group of co-sponsors, Senator Jeff Bingaman (D, NM) stated, “There is no reason, be it fiscal or moral, to tell people that they must wait longer than two years after becoming severely disabled before we provide them access to much needed health care.” He cited two studies issued by the Commonwealth Fund documenting the devastating consequences of the waiting period on people with disabilities.

Eliminating the 24-month waiting period would also decrease Medicaid costs. The Commonwealth Fund estimated that 40% of the 1.26 million people with disabilities in the waiting period are enrolled in Medicaid. Consequently, nearly 30% of the increased Medicare costs would be offset by federal savings in the Medicaid program.

Commonwealth Fund president Karen Davis said, “Individuals in the waiting period for Medicare suffer from a broad range of debilitating diseases and are in urgent need of appropriate medical care to manage their conditions. Eliminating the two-year wait would ensure access to care for those already on the way to Medicare.”
As people learn about the hardships suffered by people caught in the two-year waiting period, momentum will grow to amend the Medicare statute. Currently 83 national and state organizations have endorsed the legislation.

More information about the legislation and links to the Commonwealth Fund reports are available on the Center for Medicare Advocacy’s website, www.medicareadvocacy.org, at http://medicareadvocacy.org/Reform_BilltoEnd24moWaitingPeriod.htm#facts. For more information, contact attorney Toby Edelman (tedelman@medicareadvocacy.org) or attorney Vicki Gottlich (vgottlich@medicareadvocacy.org) in the Center for Medicare Advocacy’s Washington, DC office at (202) 216-0028.