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## High Cost Of Medications Debated

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NORWICH -- On the day that Congress convened in Washington with an eye toward passing a Medicare prescription drug plan by week's end, the high cost of medication for older adults was the topic of lively debate at the Rose City Senior Center Monday.

The forum - billed as a head-to-head debate pitting Connecticut's leading advocate of prescription drug price controls against an executive of one of the nation's leading drug makers, Pfizer - had more the tone of polite dinner conversation than of a prize fight.

But the headliners' views definitely remained in opposite corners.

State Sen. Edith G. Prague, D-Columbia, opened the conversation by calling the cost of prescription drugs in the United States "an outrage." She blamed pharmaceutical companies for passing along to consumers the high costs of advertising and pushing their formulations to doctors.

John Swen, senior director for U.S. Science Policy and Public Affairs at Groton-based Pfizer, acknowledged that Americans pay more for medications than their neighbors around the world because most foreign governments set limits on drug prices.

Drug makers can sell medications in foreign countries cheaply because it costs little to produce a drug once it has been developed. The cost of drugs in the United States includes the price of developing new medications.

"The price we pay in the U.S. subsidizes the cost of bringing new drugs to the world," Swen said. The U.S. government could also impose price controls, but the social cost could be astronomical, Swen warned.

"What will happen down the road," he said, "is you won't get those new medications."

Prague urged seniors to continue buying drugs from pharmacies in Canada. But she warned that pharmaceutical companies might be trying to make that more difficult by lobbying for stricter control of imports at the borders.

The planned focus on drug pricing was overshadowed a bit by Sunday's announcement that

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congressional leaders had agreed on the framework of a plan that would help some seniors pay for their medications.

U.S. Rep. Rob Simmons, R-2nd District, who appeared at the senior center briefly before boarding a plane for Washington to begin reviewing the prescription drug bill, said he would support the proposal if it provided better benefits than exist now.

Lisa Perone, a legislative aide who sat in Monday for U.S. Rep. John B. Larson, D-1st District, said the bill under discussion contained huge gaps and threatened to undermine the tried-and-true hospital benefits that have served older people well for four decades.

Judith Stein, executive director and founder of the Center for Medicare Advocacy, headquartered in Willimantic, said the bill was "a major restructuring of Medicare. It's not an expansion."

Stein and Perone were especially critical of a provision that would require Medicare to compete with private insurance plans in up to six test markets starting in 2010. The plan is designed to find out if competition will reduce the cost of Medicare.

Critics also complained that Medicare recipients would choose a prescription drug provider and then be wedded to that plan for a year. Only certain approved drugs would be available under each plan. If a new medical condition surfaced during the year, but the needed medication was not on the patient's plan, or formulary, the person might have to wait months to switch plans, Stein said.

Doris Falck, 64, finds the whole issue dizzying. Her husband is about to turn 65 and become eligible for Medicare. But even if the prescription drug bill passes, Falck said, she's not sure it will help her family. Her husband had heart bypass surgery and also takes medication for lung problems. She thinks they might be better off paying more than \$500 a month for private health insurance.

Falck said she listened to the conversation Monday but remained confused. "I don't know if there is a big answer," she said.

Also Monday, Prague added her voice to the growing chorus of anger over a new state law that requires older people who participate in ConnPace, the state's prescription drug subsidy, to repay after they die the amount they have used in benefits.

The law, passed so quietly in August that participants only learned of it last week after receiving letters in the mail, allows the state to dip into the estates of deceased persons to recoup money it spent for social service programs such as ConnPace.

The phones at the Connecticut branch of the AARP have been ringing off the hook since the letters started arriving last week, said John Erlingheuser, the group's advocacy director.

Several lawmakers, including Prague, have filed legislation that would repeal the ConnPace recovery law. As it stands, any drug subsidy accepted since July 1, 2003, could be subject to repayment.

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