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Tough choices come from Medicare plan

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WASHINGTON - They are poor or near-poor, old, disabled or both. Some have cancer or AIDS, schizophrenia or bipolar disorder, spinal cord injuries or multiple sclerosis. Others have lists of medications as long as the alphabet.

They're paying more for their drugs, perhaps as little as \$1 per prescription, but often thousands of dollars a year. Some buy on credit without knowing how they'll pay it off. Others scrimp on food and utilities or rely on the charity of family and friends. When things get really bad, they space out their pills or injections, risking medical setbacks. They lose weight or swell up or get nauseous. Some wind up in emergency rooms.

They are the people that Medicare's new prescription-drug program has hurt, rather than helped. Most of the program's beneficiaries have saved money since it began Jan. 1. But for others, perhaps about 20 percent, the much-heralded program has meant higher costs, and in some cases greater pain and more worry.

"The people who need this the most can fight the least," says Victoria D'Angelo of Denver, a former legal secretary now living on Social Security disability payments while battling bipolar disorder, asthma, high blood pressure and other ailments. "We don't have the strength. We don't have the mental ability."

Before Medicare, 6.4 million of them had drug coverage through Medicaid. Others had state help or free drugs from drug companies. "They had good coverage before this program began," says Ron Pollack of Families USA, a liberal health care advocacy group. Now, "there's a sizeable group that is actually worse off."

Last week, two advocacy groups and three patients sued the federal government in an effort to improve the plight of the 6.4 million people transferred from Medicaid to the Medicare plan.

"Our clients are poor, frail and disabled. They cannot afford to pay for their medicines or to go without them," said Vicki Gottlich of the Center for Medicare Advocacy, which joined the National Senior Citizens Law Center in filing the lawsuit.

Since the Medicare program went into effect, many states have dropped their drug-assistance programs. Many drug companies have stopped accepting Medicare enrollees into programs that last year donated 35 million prescriptions to low-income people, according to the industry's trade group.

Among the manufacturers cutting back are Eli Lilly, Astra Zeneca, Bristol Myers Squibb and Wyeth. Ed Sagebiel, spokesman for Eli Lilly, says the program was "a bridge" to Medicare's drug benefit.

Free drugs available

Companies such as Schering-Plough, Merck and Novartis have continued to provide free drugs to Medicare beneficiaries, due in part to an advisory opinion from the Department of Health and Human Services.

Medicare Administrator Mark McClellan has urged others to join them, "so beneficiaries can have the Medicare program and the assistance programs."

'They'll just go to the emergency room'

Across the country, many low-income people face rising costs and dwindling health:

In Denver, D'Angelo, 56, saw her drug costs under Medicare rise to more than \$500 a month. Now they're even higher, because she has reached the "doughnut hole," a period during which Medicare beneficiaries with high drug costs must pay for 100 percent of their prescriptions. Although she has cut back on her 22 medications, she recently put \$2,679.19 on her credit card for a three-month supply. "I have no idea how I'm going to pay for it," she says.

In Jacksonville, Fla., mentally ill residents of Doug Atkins' assisted-living facility are refusing to spend part of their \$54 monthly personal allowance on \$1 and \$3 drug co-payments. "They're saying they'll just go to the emergency room,"

Atkins says.

In Lafayette, La., Dorothy Broussard, 58, went a week in February without her arthritis and multiple sclerosis drugs because she was in the "doughnut hole." Her prescriptions came to about \$1,400 per month. "I almost passed out in the pharmacy."

In Albuquerque, N.M., Catherine De Bonet, 61, went to court rather than cut back on her anti-nausea drug for AIDS, as her plan had required. A slight reduction caused her weight to drop to 87 pounds, and she was getting increasingly nauseous. "If I weren't a stubborn old Brooklyn Italian lady, I would have given up."

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