



November 6, 2009

The Honorable Nancy Pelosi
Speaker
United States House of Representatives
Washington, DC 20515

Dear Speaker Pelosi:

On behalf of the National Council on Aging (NCOA) –the nation’s first organization formed to represent America’s seniors and those who serve them – I write to express our support for H.R. 3692, the *Affordable Health Care for America Act*. After careful analysis and consideration of the pros and cons, we have concluded that the bill would improve care for seniors, protect and strengthen the Medicare program, significantly reduce the number of uninsured Americans, and make important delivery system reforms that should reduce costs and improve quality – all in a fiscally responsible manner. We commend you and the Committee Chairmen who crafted the bill for your leadership and judgment in this landmark effort.

We are particularly pleased that certain NCOA priority provisions were included to address the following important health concerns among older Americans:

Long-Term Services and Supports – For too long, our nation and its leaders have ignored the growing crisis faced by our rapidly aging society. Millions of seniors, after working hard all their lives, are being forced to bankrupt themselves before receiving help. Our most frail, vulnerable citizens are entering nursing homes prematurely because home and community options are not available. Overburdened caregivers are sacrificing their mental, physical, and economic health. H.R. 3692 takes a significant step toward addressing these problems by including the Community Living Assistance Services and Supports (CLASS) proposal. This voluntary insurance program will support families, empower consumers, and promote choice, dignity and independence in a fiscally responsible and sustainable manner.

Medicare Low-Income Assistance – The bill will help protect seniors in greatest need from rising out-of-pocket health costs. It is important to recognize that affordability is a concern not only for younger Americans, but for many seniors as well. We are particularly grateful that the proposal includes a provision to improve asset eligibility levels for needed assistance, so fewer older Americans will be penalized for doing the right thing during their working years in setting aside a modest nest egg of savings for retirement. Such improvements are also particularly important for low-income Medicare beneficiaries who may be affected by needed reductions in overpayments and subsidies to private insurance Medicare Advantage plans, which will create a level playing field with the traditional fee-for-service program.

Chronic Care Coordination and Management – H.R. 3692 will improve coordination and quality of health care to reduce errors and confusion for seniors with chronic conditions, like diabetes or high blood pressure. Promoting evidence-based chronic disease self-management programs in community settings will improve health outcomes, reduce costs and help patients and their families to more actively participate in their health care.

Medicare Prescription Drugs – NCOA supports provisions in the bill to reduce Medicare beneficiary prescription drug costs by providing for a 50% discount on the price of covered brand-name drugs to individuals in the “doughnut hole” and gradually eliminating this coverage gap completely. We also appreciate coverage improvements for vaccines and immunosuppressive drugs.

Preventive Services – The bill eliminates deductibles and coinsurance for Medicare-covered preventive benefits – so these services will be free. A national strategy will be developed to improve the nation’s health through evidence-based clinical and community-based prevention and wellness activities, as well as a new prevention and wellness fund. It is important that the initiatives of the aging network have an opportunity to contribute to these important efforts.

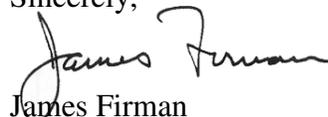
NCOA also greatly appreciates that the proposal would not cut services covered under the Medicare program and would extend Medicare Trust Fund solvency for an estimated 5 years. Older Americans will also be pleased to learn that the bill is projected to reduce the federal budget deficit over the next 10 years and beyond.

As the legislative process moves forward, we urge you to consider additional improvements in the conference discussions with the Senate. For example, we encourage you to include provisions embodied in the Elder Justice Act to create federal leadership and support to address the growing problems of elder abuse, neglect and exploitation.

We also encourage you to include provisions in the final bill to improve access to Medicaid home and community-based services. Despite the strong preference to stay at home, there is still a significant bias against these services in Medicaid, with 73% of long-term care spending for older people and adults with physical disabilities going toward institutional care. Medicaid dollars spent on home and community-based services can support nearly three people in need for every person in a nursing home and will slow the rate of Medicaid spending on long-term care.

We deeply appreciate your consideration of our views and all you have done to make this historic moment possible. We look forward to working with you to enact into law comprehensive health reform legislation that addresses the health needs of Americans of all ages.

Sincerely,



James Firman
President and CEO