

Hello, my name is Shirbie Faulkner and I am a member of the Medicare Task Force. Champaign County Health Care Consumers organized the Medicare Task Force in 2005 to give Medicare beneficiaries a voice in the health care system. We are a group of Medicare beneficiaries and concerned individuals in Champaign County dedicated to making consumer-driven improvements in the Medicare Program. The Task Force's Campaign to Fix Part D supports legislative reform of the harmful and costly Medicare Part D prescription drug program.

The Medicare Task Force has held several press conferences and community meetings to talk about the pitfalls of Part D. We have gotten numerous businesses and organizations to sign on to the goals of our campaign including AFSCME Retirees Subchapter 88, Julia F. Burnham Nurses Association, and the Rantoul Chamber of Commerce. We have collected nearly 2,000 petition signatures and presented them to our elected officials, Senators Richard Durbin and Barack Obama, and Representative Tim Johnson.

We believe that Congress must take input from Medicare beneficiaries if they hope to create a REAL Medicare prescription drug benefit. The Medicare Task Force is fighting for a Part D program that includes the following 4 things:

- 1. Be administered by Medicare:** With a Medicare administered program, the confusion over plan coverage, formularies, and the extra cost associated with private insurance would be eliminated, saving the government, taxpayers, and Medicare beneficiaries money.
- 2. Negotiate discounted drug prices:** Part D legislation currently prohibits the government from using the bulk buying power of all Medicare beneficiaries to negotiate for lower drug prices. Allowing Medicare to negotiate for lower drug prices, as the Veteran's Administration has been doing successfully for years, would make prescription drugs affordable.

3. Eliminate the Donut Hole coverage gap: In the coverage gap built into Part D, the insurance company gets a free ride by not having to provide any coverage for the Medicare beneficiary's prescription drugs. Meanwhile, Medicare beneficiaries have to keep paying their monthly insurance premiums PLUS 100% of their drug costs, resulting in financial hardship and leaving many unable to afford needed medications. While they are in the Donut Hole, Medicare beneficiaries are literally forced to pay for coverage they are not getting! This is not right or fair.

4. Increase consumer protections: Most seniors live on a fixed income, so they especially need protection from the rising and unexpected costs that usually come with private insurance plans. Part D must include the following consumer protections to be a real benefit for Medicare beneficiaries: predictable premium costs, fixed drug costs, a clear and timely appeals process that ensures coverage of all drugs deemed medically necessary by a patient's physician, and the elimination of exorbitant and unforgiving late fees.

Medicare Part D has to be fixed. It is confusing, expensive, and full of loopholes that are designed to make money for private insurance companies and pharmaceutical companies at the expense of seniors. Medicare Part D has not lived up to its promise of being a prescription drug benefit that would improve the health of Medicare beneficiaries at a reasonable cost to taxpayers.

Now my fellow Task Force member, Bea Stratton, is going to share her own personal story about how the Medicare Part D program has failed her.