

How Many of Your Patients are Not on the Best Therapy Due to High Costs?

How many are not compliant with their meds due to costs?

How many are too embarrassed to say anything?

More than 41 million Americans had trouble getting medical care or had to delay care in 2001, mostly because of cost.

This is a surprising and somewhat ominous result given the context of the times. The nation would have expected to see an improvement in access and fewer delays during the economic boom. And, now with the recession, there's real concern that we could have some significant declines in access.

Getting care was most difficult for uninsured, Medicaid, Medicare, or those with low incomes or in poor health. In 2001, the uninsured were three times as likely to not get care. Slightly more than 15% of the uninsured delayed care, compared with 8.6% of the insured. More than one quarter of those who were uninsured and in poor health said they could not get needed care.

Of those who could not get care or delayed it, 62% said cost was the reason. It was the dominant worry for 90% or more of the uninsured, and for half of those with insurance.

Health care cost is particularly burdensome for our older population and those with lower income. Those with incomes below the federal poverty level are projected to pay, on average, 35 percent of their incomes on health costs. More significantly, however, those with incomes below the federal poverty level *who do not receive Medicaid assistance* are projected to pay, on average, about half their income on health costs.

“The number of people we see in need of aid with their prescriptions medications is overwhelming’ said Deanna McKennis of DiabetesMeds (www.DiabetesMeds.org). ‘Our research shows that, on average, the 34.3 million Medicare beneficiaries age 65 and over, and living in the community, will spent an average of 19 percent of their income, or \$2,149, on health care costs.’ Many people qualify for aid from pharmaceutical companies every year and most don’t know that the resources are available. ‘Since the median income of older persons in 2000 was \$19,168 for males and \$10,899 for females there

Health costs varies by whether the patient is enrolled in traditional fee-for-service Medicare or in a Health Maintenance Organization (HMO), and by whether the patient has Medicaid coverage. The 25.9 million Medicare beneficiaries who are in the traditional fee-for-service program (and not enrolled in Medicaid) are projected to spend, on average, 21 percent of their income, or \$2,454,

out-of- pocket on health care. The 4.5 million Medicare participants age 65 and older expected to be enrolled in HMOs in 1997 are projected to spend an average of 16 percent of income, or \$1,775, in out-of-pocket health care costs.

For information on how patients can remove the burden of the high cost of medications without the red tape, Visit www.diabetesmeds.org