

LAW & JUSTICE

Raising Medicare Age Would Hurt Seniors

Merkley, others call proposal a 'death sentence'

BY CARI HACHMANN
THE PORTLAND OBSERVER

U.S. Sen. Jeff Merkley, D-Ore., told a group of seniors and other listeners at the Multicultural Senior Center on Northeast Martin Luther King Boulevard that he would oppose any proposal made to Congress and the Obama administration that raise the age of Medicare.

A proposal to increase Medicare eligibility from age 65 to 67 was discussed during the recent fiscal cliff debate and some outside groups and members of Congress are making similar proposals.

"This is unacceptable. This hurts our seniors," Merkley said during the Jan. 18 forum.

In addition to the health risks of more seniors going uninsured while waiting for eligibility, a higher eligibility age would also increase out-of-pocket medical costs for many seniors, placing them at a significant financial risk.

Merkley, who previously worked as a Portland lawmaker in the state Legislature to expand access to healthcare and make it more affordable, said raising the Medicare age would be "a death sentence" for some aging adults.

Opening the forum to seniors to share their stories, many of whom were dealing with health problems prior to age 65, Peggy Brey, Multnomah County's aging and disability services director, called those backing higher eligibility rules, "out of touch with challenges of everyday citizens."

Ann Sorlie, 66, of southeast Portland shared her story.



PHOTO BY CARI HACHMANN/THE PORTLAND OBSERVER
U.S. Sen. Jeff Merkley, D-Ore., visits the Multicultural Senior Center on Northeast Martin Luther King Jr. Boulevard to express his opposition to any proposal in Congress that would raise the age of Medicare. The Urban League of Portland's Bonnie Jones (center) and southeast Portland senior Ann Sorlie (right) also spoke against Medicare cuts.

"Before I got onto Medicare I was without health insurance for three years and couldn't afford to get the medication I needed," said Sorlie, who is now a current Medicare beneficiary.

"I was just hanging on to reach 65 and I can't imagine where I would be today if I had to wait more years to get the care I needed," she said.

Things started going downhill when Sorlie lost her consulting job in 2008 when the economy tanked. She struggled to find a company that would employ someone her age.

Burning through unemployment checks, she described how difficult it was to pay for medication, house

ills, and even her pet's food. Worse, the following year, a car accident left her with a knee injury that would require surgery and a limp that made finding employment even more inconceivable.

Even while employed, Sorlie did not have medical insurance. She was required to wait until she turned 65 to get Medicare.

"It was an emotional and stressful time," said the widow of more than 30 years.

Bonny Jones, a case manager for the Urban League of Portland, says a lot of people "start falling apart at 60."

The financial difficulties in pay-

ing medical bills are common for many of her clients, she said, a majority of whom have an average income of \$800 to \$900 a month.

They say, "I don't know whether to buy my food or buy my medication—and it just breaks my heart," she said.

Jones shares the story of one client, a blind woman who had no money for her insulin treatments. Waiting to get coverage under the Oregon Health Plan, a lottery system, she said her client was sick for years before she finally turned 65 and qualified for Medicare.

Sadly, the next month she had a

heart attack. In a month following, the woman had several more heart attacks and died.

"To make people wait. To make it 67 or 70—that's crazy," Jones said.

Merkley ended the discussion by offering alternative solutions to make the health care system more affordable.

He suggested investing more heavily in preventative services at local health clinics, shutting down insurance plans that overcharge, and vigorously targeting fraud.

"There is tremendous amount we can do," he said. "Age is not the way to go."

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