

Medicare: Providing Critical Support for America's Older Women

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Older women rely on Medicare every day for affordable, quality health care. More than half of the 48.7 million Medicare beneficiaries are women. Women also constitute 70 percent of the oldest Medicare beneficiaries¹ – those 85 years or older.

Medicare is a critical part of the foundation of retirement financial security for women, enabling them to remain independent as they age. Without Medicare's guarantee of affordable health coverage, millions of older women would be left to bear significant health care costs, forego the critical health care services they need, rely on their children for financial assistance, or become impoverished.

Medicare is Key to Women's Financial Retirement Security

- ▶ Contrary to what many believe, most older women have very modest incomes. In 2010, the average income for women age 65 and older was only \$21,671.
- ▶ On average, older women also have lower Social Security benefits. The annual benefit for women over 65 was \$12,000 in 2009.²
- ▶ Medicare is crucial for protecting the modest retirement income of millions of older women so that they can remain independent.

Older Women Already Spend a Disproportionate Amount of Their Income on Health Care

- ▶ In 2007, women spent roughly 18.7 percent of their income on out-of-pocket health care costs.³
- ▶ Low and moderate income older women spend an even greater portion of their income – 22-25 percent – on health care.⁴
- ▶ Without Medicare, older women would be forced to spend even more of their modest retirement income on essential health care.

Medicare Already Requires Significant Out-of-Pocket Spending

- ▶ Although Medicare improves an older woman's ability to access health care, it only pays, on average, half of her health care costs.⁵
- ▶ In 2011, older women paid an average of \$115.40 for the Medicare Part B premium, a \$162 Part B deductible and, for those hospitalized for 60 days, a \$1,132 deductible – all before Medicare contributed anything toward the cost of their care.⁶

- ▶ Beyond Medicare cost-sharing, women also face out-of-pocket costs for many needed services that Medicare does not cover, including hearing aids, eyeglasses, podiatry services, and long-term care. Nursing home care alone can cost an older woman roughly \$75,000 per year.⁷
- ▶ Because they are more likely to live longer than men and need more health care services as they age, women are directly impacted by increased cost sharing and out-of-pocket expenses.

More Women With Chronic Illness Rely on Medicare

- ▶ Women with Medicare have high rates of chronic conditions including diabetes and heart disease and are more likely than men to have conditions like hypertension, high cholesterol, osteoporosis, cognitive impairment and depression.⁸
- ▶ Women are more likely to suffer from multiple chronic conditions.⁹ In fact, nearly 50 percent of women enrolled in Medicare report having three or more chronic conditions.
- ▶ Twenty percent of women with Medicare have physical limitations that impede their daily activities.

Women are Counting on Congress to Keep Medicare Strong

As Congress considers changes to Medicare, it must protect the integrity of this vital program. Changes that merely shift additional costs to beneficiaries or reduce Medicare's coverage are short-sighted. Any changes to Medicare must strengthen the program so that current and future generations of women continue to have access to affordable, quality health care.

Millions of American women – mothers, grandmothers, daughter, sisters and aunts – are counting on Congress to keep Medicare's promise of affordable, quality health care. Don't let them down.

1 Kaiser Family Foundation (2009). Medicare's Role for Women, 1. Retrieved from: <http://www.kff.org/womenshealth/upload/7913.pdf>

2 National Women's Law Center (2011). The Importance of Medicare for Women.

3 Noel-Miller, Claire (2012). Medicare Beneficiaries' Out-of-Pocket Spending for Health Care. *Insight on the Issues*, 65. Retrieved from: http://www.aarp.org/content/dam/aarp/research/public_policy_institute/health/medicare-beneficiaries-out-of-pocket-spending-AARP-ppi-health.pdf

4 Medicare.gov (2010). Frequently Asked Questions About Medicare: Medicare Premiums and Coinsurance rates for 2011. . Retrieved from: https://questions.medicare.gov/app/answers/detail/a_id/2305/~-/medicare-premiums-and-coinsurance-rates-for-2011

5 Kaiser Family Foundation (2011). Medicare Factsheet. Retrieved from: <http://www.kff.org/medicare/7305.cfm>

6 Medicare.gov (2010). Op Cit.

7 AARP Public Policy Institute (2011). Raising Expectations: A State Scorecard on Long-term Services and Supports for Older Adults, People with Physical Disabilities, and Family Caregivers.

8 CMS Center for Strategic Planning (2011). Chronic Conditions Among Medicare Beneficiaries, p. 7 <http://www.cms.gov/TheChartSeries/Downloads/ChartbookFinal.pdf>

9 Anderson, G. (2010). Chartbook, Chronic Conditions: Making Case for Ongoing Care. p.11 <http://www.rwjf.org/files/research/50968chronic.care.chartbook.pdf>

10 Kaiser Family Foundation (2009). Op Cit. p.1

The National Partnership for Women & Families is a nonprofit, nonpartisan advocacy group dedicated to promoting fairness in the workplace, access to quality health care and policies that help women and men meet the dual demands of work and family. More information is available at www.NationalPartnership.org.

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