



Elder Law Project

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BY EMAIL TO: LHoughton@leg.state.vt.us; CNeal@leg.state.vt.us

January 12, 2024

Re: Section 9 Medicare Savings Program; Income Eligibility of H.721: Medicaid Expansion Act of 2024

Dear Chair Houghton and Members of the House Health Care Committee:

I am the Director of the Elder Law Project of Vermont Legal Aid. I coordinate our advocacy for clients over the age of 60 across Vermont, including in cases involving Medicaid and Medicare. I strongly support the expansion of the Medicare Savings Programs in Sec. 9 of H.721. This expansion is one of the most important steps Vermont can take to address the affordability crisis facing older and disabled individuals on Medicare.

In our work in the Elder Law Project, we regularly talk to individuals confused by the complexities of our health care system and struggling to make ends meet. We see Vermonters who cannot afford to pay their Medicare costs and meet even their most basic needs. We also see cases involving significant medical debt and cases where our clients cannot afford the care they need. We try to help clients plan for their long-term care needs, and increasing their financial security is an essential part of that planning. Expanding the Medicare Savings Program will provide an immediate and significant help to these families. It will help them access the health care they need, as well as pay for their housing and other necessities.

Increasing the Medicare Savings Program eligibility limits helps close the “Medicare Cliff” as folks transition between Medicaid programs (MCA which serves under 65-year-olds to MABD which works with people who over 65 or disabled). Right now, many Vermonters see an increase in costs when they transition to Medicare, and the state has fewer programs to help them.

Expanding the Medicare Savings Programs will create a more equitable system and help ensure older and disabled Vermonters can get the care that they need. Eligibility for an MSP also qualifies the individual for Medicare’s “Extra Help” (also called Low Income Subsidy) to cover most costs under Medicare Part D for prescription drugs. This federal program will pay for Part D premium and keep prescription copayments low. We talk to Vermonters who do not sign up for Part D plans or do not fill prescriptions because of costs. Increasing eligibility for this federal program will help these Vermonters access the care they need.

Thank you and the Committee for consideration of this important change to provide significant financial relief to those older and disabled individuals on Medicare in Vermont.

Sincerely,

Michael Benvenuto
Project Director