

**To: Maryland Delegates and Senators - SB946 and its impact on State Retirees**

- **FACT** – MEDICARE PART D does not cover **ALL** prescriptions such as medications for diabetes, arthritis, glaucoma, cancer, heart disease and kidney disease to name a few.
- **FACT** – CO PAYS on brand name drugs in the formulary are more than double the cost.
- **FACT** – No Medicare Part D Plans have an out of pocket cap.
- **FACT** – A State Retiree is prohibited from getting discounts from pharmaceuticals.
- **FACT** – A State Retiree will not qualify for State Aid to help with Cost of Medications.
- **FACT** – State Retirees earned and paid for this benefit.
- **FACT** – There is no guarantee that the Reimbursement Program will reimburse a Retiree the full cost of the medications.
- **FACT** – There is no guarantee that the Life Sustaining Program will cover newer drugs developed to halt illness and disease.
- **FACT** – Retirees **CANNOT AFFORD** to Pay the Out of Pocket Costs upfront because of fixed income.
- **FACT** – MEDICARE PART D costs for prescription drug coverage **WILL** cost be thousands of dollars for retirees.
- **FACT** – If the State has money to reimburse Retirees, they have enough to fund the current program.
- **FACT** – The General Assembly took away RX coverage for State Retirees but kept it for prisoners.
- **FACT** – Retirement plans for Active employees were disregarded when prescription coverage was bifurcated for pre-2011 hires.
- **FACT** – Active employees incurred a subsidy penalty when they retired before December 31, 2019.
- **FACT** – MEDICARE PART D in 2019 has a \$415.00 deductible. The State plan does not.
- **FACT** – State employees purchased their prescription drug coverage for the entirety of their retirement through the buyback program and could **SUE** the State for Millions.
- **FACT** – State employees settled lawsuits with the State to continue their health benefit that includes prescription drug coverage for their retirement and can **SUE** the State for millions.
- **FACT** – State employees injured on the job (Police, Correctional Officers, Troopers) were given health care including prescription drug benefits and can **SUE** the State for millions.
- **FACT** – If the State Retiree cannot afford to pay medication costs up front – they will **DIE** and Maryland lawmakers will be the **EXECUTIONER**.



## WE MATTER

The 2019 Maryland General Assembly dangled the promise of reinstatement of the State retirees' prescription drug coverage and then stunned retirees when they issued a death sentence with the passage of SB946. If State Retirees do not get the promised prescription benefits needed to control their illness, they will die. I know – I am one of them.

In June 2018, Maryland State Retirees were informed that as of January 1, 2019, the State was dropping their prescription drugs benefits and that Retirees would have to enroll in Medicare Part D. So, what's the problem? Medicare Part D. It does not cover the prescriptions necessary to maintain the retirees' life and/or the cost is so high that a State retiree on a fixed income cannot afford these prescriptions to stay alive. I know. My out of pocket costs will jump from \$930 a year to over \$11,000 a year (on the cheapest plan) on Medicare Part D.

So, what is wrong with SB946? SB946 gives the illusion that State Retirees will have their prescription drug coverage. Then it tells retirees that they would have to **pay for it out of their pocket** before they can get reimbursed. What! News Flash: The General Assembly passed a new law that did the same thing as the old law. SB946 requires that I (and thousands of others) pay the outrageous costs for prescription drug coverage under Medicare Part D without the benefit of the State's wraparound program. So, on paper I still would have my coverage, but financially I am screwed.

Why? I don't have enough money to pay for this coverage every month and wait for reimbursement. I don't have the money because I worked for the State of Maryland and accepted lower wages in exchange for first class retirement benefits.

My future is bleak. I will sell my house, sell my car, move in with my daughter, ration my food, ultimately bankrupt my daughter to pay for this medicine that keeps me alive. My life expectancy cut short because the General Assembly do not think I and thousands like me deserve to live.

*Food for thought* - if the State of Maryland has the money to pay me back, why make me pay up front for my prescription coverage in the first place?

After I have nothing left to sell, nothing to barter, I will end up on welfare and Medicaid. Then I will quietly pass away – a victim of this discriminatory death penalty. And believe me there will be many more. I know people who are rationing their medicine now, because they will not be able to afford medicine if the **Fitch v. Maryland** lawsuit is unsuccessful. Did lawmakers expect its seniors at 70, 80 or 90 to embark on a new career to obtain prescription drug coverage or do they just want us senior citizens to quietly pass away so they can take our pensions too?

*Food for thought.* Maryland eliminates prescription drug coverage for senior citizens but continue to pay the cost of healthcare for prisoners and illegal immigrants with our tax dollars.

State retirees need this coverage and a HB1230 will redress this injustice. They were promised these benefits, they paid for these benefits and they demand their return. The General Assembly in this matter has represented every interest but the interest of its employees by passing this law that sentences state retirees to death. I say we are your grandparents, your fathers and mothers, aunts and uncles, we are your neighbors, we are members of your church and most importantly, **WE MATTER.**

Dear General Assembly, your names will be forever etched in Maryland history as the judge, jury and executioner of retired elderly State employees by issuing this death sentence.

**Support reinstatement of State Retirees Prescription Drug Coverage.**



### AFFIDAVIT OF KEN FITCH


I, Kenneth Fitch, am over eighteen years of age and competent to testify to the matter and the facts asserted herein and make this affidavit in support thereof.

1. Prior to my employment with the State of Maryland, the I was a mechanic for Maryland Cup making approximately \$39,000 annually.
2. That in the Spring of 1989, I applied and was hired for a position as a maintenance mechanic at the Department of General Services for the State of Maryland I took a substantial pay cut from my employment with Maryland Cup. I accepted the pay cut in exchange for the superior benefits, including its pension and retiree health benefits, offered by the State of Maryland.
3. During my tenure as an employee of the State of Maryland, I held positions of Maintenance Mechanic, Maintenance Mechanic Senior, Maintenance Chief I, Maintenance Chief II, Maintenance Chief 4 and Building Manager with the State of Maryland.
4. That throughout my tenure with the State of Maryland, I was provided health insurance benefits including prescription drug coverage, dental coverage, and vision coverage.
5. That the State of Maryland deducted the then applicable health insurance benefit premiums from my biweekly paycheck. Each year the State of Maryland adjusted my premium for health insurance benefits.
6. That the State of Maryland deducted an additional amount for retirement contributions from my paycheck. The State of Maryland changed the mandatory retirement contribution rate on numerous occasions.
7. I injured my back in 1993 as a result of a work-related injury. However, I returned to work for the State of Maryland. In 2012, my treating physician recommended that I request a disability retirement due to my affliction of chronic back pain and diabetic complications.
8. The State of Maryland approved my request for Ordinary Retirement as I was a determined to be eligible.
9. I retired at 54 years of age and am 60 years of age at the time of this filing.
10. That in May 2018, I received notice from the Department of Budget and Management informing me of my requirement to register for Medicare Part D for my prescription drug coverage.
11. I am eligible for Medicare Part D due to my disability.
12. I am also a diabetic. I take the following medications:
  1. Furosemide TAB 40MG
  2. Humalog MIX 50/50 Kwikpen INJ
  3. Losartan Potassium TAB 50MG
  4. Metformin Hcl TAB 500MG
  5. Simvastatin TAB 5MG
  6. Toujeo Solostar INJ 300IU/ML
  7. Tramadol Hcl TAB 50MG
  8. Victoza INJ 18MG/3ML

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13. I currently pay **\$930.00** in co-pays a year for my medications. Under Medicare Part D I will cost **\$11,683.10** in copay per year.
14. Because the rate is gone up so much, I will not be able to afford my medications. If I cannot take my medications I will die. I left a much better paying position because of the health care benefits in retirement.
15. I was very upset when I found out that the Department of Budget and Management will not continue to provide prescription drug coverage to me although I am a vested employee as do 2012.

**I SOLEMNLY AFFIRM UNDER THE PENALTIES OF PERJURY AND UPON PERSONAL KNOWLEDGE THAT THE CONTENTS OF THE FOREGOING PAPER ARE TRUE.**



Ken Fitch