**Opt-Out House SHIP Funding Letter**

***Please contact*** ***marci.phillips@ncoa.org*** ***by noon on Tuesday, July 18 if you signed but would like your name removed, or if you did not sign and would like to be added to the list below.***

July 18, 2017

The Honorable Rodney P. Frelinghuysen, Chairman

The Honorable Nita M. Lowey, Ranking Member

House Committee on Appropriations

Washington, DC 20515

The Honorable Tom Cole, Chairman

The Honorable Rosa L. DeLauro

House Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies

Washington, DC 20515

Dear Chairman Frelinghuysen, Ranking Member Lowey, Chairman Cole, and Ranking Member DeLauro:

The 75 undersigned organizations are writing to **urge you to protect funding for the Medicare State Health Insurance Assistance Program (SHIP)**, and restore funding to the FY16 level of $52.1 million.

Approximately 10,000 Americans become eligible for Medicare each day – significantly increasing the need and demand for SHIP services. Over the past two years, more than 7 million people with Medicare received help from SHIPs. Since 1992, counseling services have been provided via telephone, one-on-one in-person sessions, interactive presentation events, health fairs, exhibits, and enrollment events. Individualized assistance provided by SHIPs almost tripled over the past 10 years.

Understanding the A, B, C, and Ds of Medicare is an overwhelming, isolating experience if older adults and people with disabilities go without help. SHIPs provide local, in-depth, insurance counseling and assistance to Medicare beneficiaries, their families and caregivers. This encompasses a broad range of areas, including coverage options, fraud and abuse issues, billing problems, appeal rights, and enrollment in low-income protection programs.

If the recent $52.1 million investment had simply kept pace with inflation and the increasing number of Medicare beneficiaries since FY11, it would have reached at least $67 million for FY18. Eliminating the program would be a devastating blow to the Americans with Medicare who would no longer have access to the only federal program that provides free, personalized, unbiased counseling on the growing complexities of Medicare coverage.

SHIPs receive funding under the Administration for Community Living for 54 grantees (all states, Puerto Rico, Guam, DC, and the US Virgin Islands), overseeing a network of more than 3,300 local SHIPs and over 15,000 counselors, 57% of whom are highly trained volunteers who donate almost 2 million hours of assistance. SHIPs provide one-on-one, face-to-face assistance. Because of the labor-intensive, in-person nature of SHIP work and the high demand for SHIP services, volunteers have helped paid staff meet beneficiary needs since the inception of the program. Though volunteers donate their time, they cannot accurately and safely serve often vulnerable beneficiaries without training, support, and monitoring – all of which must be provided by paid staff. Given Medicare’s complexities and the reality of volunteer turnover, SHIPs must dedicate year-round resources to recruiting volunteers and managing their volunteer programs or they will have none.

SHIPs offer increasingly critical services that cannot be supplied by 1-800 MEDICARE, on-line or written materials, or other outreach activities. In fact, approximately one-third of all partner referrals to SHIP originate from Medicare Advantage and Part D prescription drug plans, local and state agencies, the Centers for Medicare and Medicaid Services, the Social Security Administration, and members of Congress and their staff. Additionally, these partners include SHIP contact information in their websites, publications, and correspondence to beneficiaries as the source of assistance when individuals need help.

SHIPs advise, educate, and empower individuals to navigate the increasingly complex Medicare program and help beneficiaries make choices among a vast array of options to best meet their needs. Making informed decisions among an average of 20+ prescription drug plans and 19 Medicare Advantage plans, as well as various Medigap supplemental insurance policies, can save money and improve access to quality care. Given the significant differences in premiums, cost sharing, provider networks, and coverage rules, SHIPs play a critical role in ensuring that these choices are well informed and thoughtful for each beneficiary served.

While the Medicare coverage that best meets a beneficiary’s unique needs isn’t always the least expensive, wise decision-making by informed consumers in the current market can save money for individuals, and potentially reduce overall Medicare spending as well. For example, a 2012 study in *Health Affairs* entitled “The Vast Majority of Medicare Part D Beneficiaries Still Don’t Choose the Cheapest Plans That Meet Their Medication Needs,” found that if beneficiaries chose the least expensive Part D plan available in their region, they could save an average of $368 per year and that only 5.2% of the beneficiaries in the study sample chose the least expensive plan. Several states that estimate savings to beneficiaries resulting from SHIP assistance reported achieving significant savings in 2015, including $110 million in Massachusetts, $56 million in Michigan, and $53 million in North Carolina.

We urge the House to provide the support and assistance needed by America’s seniors and people with disabilities on Medicare by restoring SHIP funding to $52.1 million.

Sincerely,

Signers of [November Senate letter](https://www.ncoa.org/wp-content/uploads/SHIP-Senate-FY17-Group-Letter.pdf):

AFSCME Retirees

Aging Life Care Association

Allergy & Asthma Network

Alliance for Aging Research

Alliance for Retired Americans

Alliance of Information and Referral Systems

Altarum Institute

AMDA – The Society for Post-Acute and Long-Term Care Medicine

American Association for Indigenous Aging

American Association on Health and Disability

American Dance Therapy Association

American Diabetes Association

American Federation of Government Employees

American Foundation for the Blind

American Music Therapy Association

American Society on Aging

Association for Gerontology and Human Development in Historically Black Colleges and Universities (AGHDHBCU)

Association of Jewish Family and Children’s Agencies

Asthma and Allergy Foundation of America

Better Medicare Alliance

B’nai B’rith International

Brain Injury Association of America

California Health Advocates

Caring Across Generations

Center for Elder Care and Advanced Illness

Center for Medicare Advocacy

Christopher & Dana Reeve Foundation

Community Catalyst

Dialysis Patient Citizens

Disability Rights Education and Defense Fund (DREDF)

Easterseals

Epilepsy Foundation

Families USA

Gerontological Society of America

GIST Cancer Awareness Foundation

Justice in Aging

Lakeshore Foundation

LeadingAge

Lupus Foundation of America

Lutheran Services of America

Medicare Rights Center

National Academy of Elder Law Attorneys

National Adult Day Services Association (NADSA)

National Adult Protective Services Association

National Alliance for Caregiving

National Asian Pacific Center on Aging

National Association for Home Care & Hospice

National Association of Area Agencies on Aging

National Association of Nutrition and Aging Services Programs

National Association of RSVP Directors

National Association of Social Workers (NASW)

National Association of State Head Injury Administrators

National Association of State Long-Term Care Ombudsman Programs

National Association of States United for Aging and Disabilities

National Committee to Preserve Social Security and Medicare

National Consumer Voice for Quality Long-Term Care

National Council on Aging

National Council on Independent Living (NCIL)

National Disability Rights Network (NDRN)

National Health Law Program

National Kidney Foundation

National Multiple Sclerosis Society

National Senior Corps Association

Parent Project Muscular Dystrophy (PPMD)

Pension Rights Center

Senior Service America, Inc.

Service Employees International Union

Social Security Works

Special Needs Alliance

The AIDS Institute

The ALS Association

The Arc of the United States

United Cerebral Palsy

Visiting Nurse Associations of America (VNAA)

Women's Institute for a Secure Retirement