



Seniors Update 2013

SENATOR BERNIE SANDERS

Dear Vermont Senior,

These are tough times for many seniors in Vermont and throughout the country. With 46.5 million Americans living in poverty, more than at any time in the history of our country, poverty among seniors is also rising – especially for the very poor. Today, with high prices for food, fuel and prescription drugs, nearly half the senior population is unable to afford basic living expenses. Incredibly, 20 percent of seniors in this country are living on an average income of \$7,500 a year. As we continue in the midst of the most significant economic decline since the 1930s, with an aging population and with more and more income and wealth inequality, we must not turn our backs on older Americans.

Yet, I am sorry to have to tell you that there are members of Congress who are not only ignoring the plight of seniors, they are actively trying to make a bad situation even worse. They want to cut Social Security, Medicare, Medicaid, food stamps, LIHEAP, Meals on Wheels and other programs, which are of enormous importance to millions of Americans. After voting for unpaid wars in Iraq and Afghanistan and tax breaks for the very rich, they now want to balance the budget on the backs of the elderly, the children, the sick and the poor - the most vulnerable people in our country.

That's the bad news. Here's some good news. As Chairman of the subcommittee that deals with the Older Americans Act, I am happy to report that we are making progress in getting that very important program – which includes Meals on Wheels, the congregate meal program, senior employment and protection against elder abuse – reauthorized. In late October, the Senate Health, Education, Labor, and Pensions Committee passed a bipartisan bill out of committee with strong support. Now, we must make sure that Congress does not drag its feet and get the bill passed through the full Senate and the House.

I am also happy to mention to you that we continue to make good progress in expanding affordable primary health care throughout the state. This impacts seniors and all Vermonters. As a result of funding, which I helped place in the Affordable Care Act, the Department of Health and Human Services recently announced that Vermont will have three new Federally Qualified Community Health Centers (FQHCs): the Five-Town Health Alliance in Addison County, the Battenkill Valley Health Center in Bennington County and the Gifford Primary Care Center in Orange County. This means that Vermont will soon have a total of 11 Community Health Centers with over 50 sites, one in almost every region of the state, which provide affordable health care, dental care, mental health counseling and low-cost prescription drugs. All of these health centers have a sliding scale and welcome Medicare and Medicaid patients. (For more information about these health centers, please call my office).

Finally, if you or anyone you know has a problem with a federal program or agency – Social Security, Medicare, Medicaid, prescription drugs, veterans benefits, housing, nutrition services, etc. – please do not hesitate to contact my office at (800) 339-9834. Also, for up-to-date information from my office, please visit my Website at sanders.senate.gov and sign up for my newsletter, the Bernie Buzz.

Sincerely,

A handwritten signature in blue ink that reads "Bernie".

Bernie Sanders
United States Senator

sanders.senate.gov

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Defending Social Security

There was a time, not so many years ago, when defending Social Security was a bipartisan and widely supported proposition. That is no longer the case. Now, there are a number of right-wing billionaires who are spending hundreds of millions of dollars to lobby Congress to cut Social Security, Medicare and Medicaid. And they have a lot of support in Congress. Instead of asking the very wealthy and large corporations to pay their fair share of taxes, many of my Republican colleagues want to balance the budget by cutting programs of vital importance to the elderly, the children, the sick and the poor.

As part of this anti-Social Security campaign, an enormous amount of misinformation is floating around. Let me try to set the record straight.

Is Social Security “going broke”? No! The Social Security Trust Fund has a \$2.8 trillion surplus that, along with revenue coming in every day, can pay out every benefit owed to every eligible American for the next 20 years. In 2033, unless Congress acts, Social Security will be able to pay out only 75 percent of benefits owed. For the last 77 years, Social Security has paid out every nickel owed to every eligible American. Now, Congress must make Social Security solvent for the next 50 to 75 years.

Is Social Security an “entitlement program”? Has it contributed to our deficit? Social Security is not an “entitlement.” It is a benefit earned by workers who currently contribute 6.2 percent of their income up to \$113,700 in FICA taxes. Employers match that amount. By law, Social Security cannot contribute to the federal deficit.

Has the Social Security program been successful? Social Security has been the most successful and reliable program in our history. Before Social Security, about half of our senior citizens lived in poverty. Today, while still too high, senior poverty is 9.1 percent. More than 57 million Americans receive

Social Security benefits.

What is the “chained CPI”? The “chained” consumer price index is a new way to calculate yearly cost-of-living adjustments to keep pace with inflation. Believe it or not, despite the fact that this year’s COLA is all of 1.5 percent, the 2013 COLA was 1.7 percent, the 2012 COLA was 3.6 percent, and the two previous years were 0 percent, the “chained CPI” is based on the theory that COLAs now are “too generous.” A chained-CPI would mean a \$658 cut in benefits by the time a typical Social Security recipient who retired at age 65 turns 75. The same person would get \$1,100 less a year at age 85 than under current law.

Does the chained CPI impact veterans? Because veterans’ COLAs are based on the same formulation as Social Security COLAs, a chained-CPI would also make substantial cuts in VA benefits for more than 3.2 million veterans. Veterans who started receiving VA disability benefits at age 30 would see them cut by \$3,231 a year by the time they turn 65. A chained-CPI would result in a loss of tens of thousands of dollars during the lifetime of a young disabled veteran.

What is the most sensible long-term funding solution for Social Security? The fairest approach to making Social Security fully solvent for the next 50 years is to lift the cap on taxable income, now at \$113,700, and apply the Social Security payroll tax on income above \$250,000. That change would impact the wealthiest 1.3 percent of wage earners. That is the approach that President Obama supported when he first ran for President in 2008.

As a member of a special Senate and House committee that is working to end sequestration and craft a long-term budget, I will do everything I can to protect Social Security, Medicare and Medicaid. Yes. We must move forward in trying to cut the deficit, but it must be done in a way that is fair.



Senator Bernie Sanders speaks against the chained CPI at a rally with the Alliance for Retired Americans in Burlington.

Protecting Our Veterans

Nearly 50,000 veterans call Vermont home, including many who are seniors. As Chairman of the Senate Committee on Veterans' Affairs, I am proud to tell you we are making progress in protecting veterans in Vermont and throughout our country.

In Vermont, we have been aggressive in improving and expanding access to VA health care. In the last five years alone, new Community Based Outreach Clinics have opened in Newport, Brattleboro and Rutland, and another facility just opened in Burlington. We have also seen major improvements at the White River Junction VA Medical Center – including the establishment of a women's health clinic.

The new Caregivers Program gives much needed support to those family members who are caring for the severely disabled Post-9/11 veterans. My legislation to expand that program to include veterans of all eras has passed the Veterans' Affairs Committee and now awaits action by the full Senate.

For too many years, one of our national disgraces has been the large number of veterans sleeping on the streets.

Between 2010 and 2013, the VA reduced the population of homeless veterans by 24 percent. That progress must continue. To this end, bipartisan legislation has just passed the Senate that will continue our efforts to end homelessness in the veterans' community. I look forward to working with my colleagues in the House of Representatives to enact these provisions.

All veterans – particularly those with severe disabilities – deserve the very best care this country has to offer. The good news is today's VA provides high-quality, cost-effective health care to more than 6 million veterans. The bad news is there are many veterans who would like to access VA health care but are unable to do so. In my view, we should expand VA health care eligibility and allow those veterans who want and need VA health care to have access to it. We must also understand the provision of dental care is a basic component of any comprehensive health

care system. My bills to expand access to VA health care and dental care recently passed the Veterans' Affairs Committee and will be taken up soon by the full Senate.



Strengthening the Older Americans Act

One of the most effective programs ever devised to address the needs of vulnerable seniors is the Older Americans Act. Signed into law by President Lyndon Johnson in 1965, the same year as the better-known Medicare and Medicaid programs, the Older Americans Act provides federal funding for many essential services for seniors including meals, job training, caregiver support, transportation, health promotion, and protections from abuse.

The truth of the matter is, in virtually every state in this country, frail seniors who are absolutely dependent on these programs are on waiting lists for services like Meals on Wheels. Like many programs across the country, some Vermont programs have been forced to reduce the number of meals they serve, which means there are people in our communities who are going hungry. These meals programs not only work to ease isolation, hunger

and suffering, they also save taxpayers substantial sums of money. The simple truth is that we can feed a senior for an entire year for the cost of one day in a hospital.

The good news is that on October 30, the Older Americans Act reauthorization bill (S. 1562) cleared



Senator Sanders hosts the Older Americans Summit in Washington with Senators Harkin and Baldwin.

an important hurdle when it passed out of the Senate Health, Education, Labor and Pensions Committee with strong bipartisan support. The bill is endorsed by over 50 national organizations representing the voices of tens of millions of Americans, including AARP, the National Committee to Preserve Social Security and Medicare, the Alzheimer's Association, and the

Meals on Wheels Association of America. As Chairman of the subcommittee that wrote this bill, I will be working with my colleagues to make sure this legislation passes quickly through the Senate and is signed into law.

Need help on how to get in touch with senior advocates? Contact the Area Agency on Aging (AAA) in your part of the state. To find any of the AAAs, please call my office toll-free at 1 (800) 339-9834 and we can give you the number to the Vermont Senior HelpLine to help you connect with your local AAA.

Area Agencies on Aging

These agencies coordinate and support a wide range of home and community-based services, including information and referral, home-delivered and congregate meals, transportation, employment services, senior centers, adult day care and a long-term care ombudsman program. They also provide assistance for adults in need of protection or supportive services.

Central Vermont Council on Aging (CVCOA)
Lamoille, Orange & Washington Counties

Champlain Valley Agency on Aging (CVAA)
Addison, Chittenden, Franklin & Grand Isle Counties

Northeastern Vermont Area Agency on Aging (NEVAAA)
Caledonia, Essex & Orleans Counties

Senior Solutions (Council on Aging for Southeastern Vermont)
Windham & Windsor Counties

Southwestern Vermont Council on Aging (SVCOA)
Bennington & Rutland Counties

The Affordable Care Act: lowering health care costs for seniors.

- Closing the “donut hole” in Medicare Part D, saving Vermont seniors more than \$17 million on prescription drugs since 2010.
- Medicare Part B premiums and deductibles will not increase for 2014 because of ACA.
- The deductible for standard Part D plans has gone down.
- Free preventive services for seniors, including flu shots and annual doctor’s visits.

If you are on Medicare, you cannot sign up for Vermont Health Connect or any of the new exchanges. You will stay on Medicare.



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