

## Bits and Pieces

- **Gold Star Parent Annuity Program**

The Legislature has eliminated the income eligibility requirement for the state's Gold Star Parent Annuity Program. This program provides an annuity of up to \$500 per year for the parent(s) who lost a son or daughter during a period of armed conflict as evidenced by DD Form 1300 (Report of Casualty) or a copy of the telegram from the Department of Defense advising the parent of his or her loss.

- **Helping Victims of Elder Abuse**

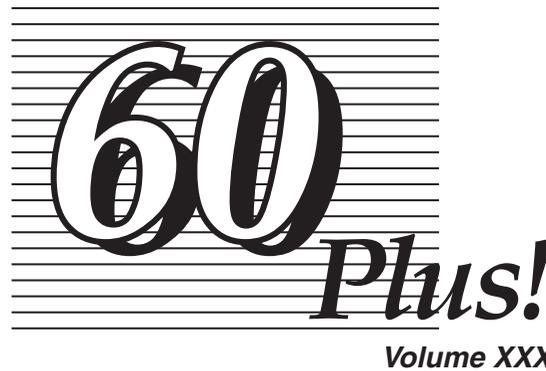
Victims of elder abuse often have to tell their stories to a grand jury and that process can be overwhelming. Legislation that I authored which was signed into law this year allows a social worker or informal caregiver, such as a family member, to be present and give care when a vulnerable elderly person testifies in a grand jury proceeding.

- **Office of Utility Consumer Advocate**

For a number of years many consumers and advocacy groups have called for the creation of an independent Office of Utility Consumer Advocate. This office would represent the interests of residential utility consumers in proceedings before state and federal regulators when utilities and other regulated companies seek rate changes for electric, natural gas, internet, cable television, telephone and wireless communication services. The Assembly has passed legislation I supported that would create the advocate's office but unfortunately this proposal was not acted on by the State Senate.



*Helpful Information from  
Assemblyman  
Robin  
Schimminger*



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*60 Plus! offers an important opportunity for me to share helpful information on legislative initiatives and programs that may be of interest to seniors. If you have any questions or comments on any of these items, as always, please feel free to contact my local office at 873-2540.*

*Sincerely yours,*

A handwritten signature in black ink, appearing to read 'Robin'.



## Changes to EPIC

Recognizing the incredible burden prescription drug costs place on seniors, the State Legislature enacted the Elderly Pharmaceutical Insurance Coverage Program, commonly known as EPIC, in 1987. Since its inception over 27 years ago, EPIC has provided prescription drug assistance to more than 911,000 low-and moderate-income seniors. Over the years, EPIC has changed, especially with the inception of Medicare Part D. Today, more than 270,000 income-eligible seniors age 65 and older have EPIC coverage to supplement their Medicare Part D drug coverage and help with out-of-pocket costs.

With prescription drug costs increasing at twice the rate of inflation, we in the State Legislature, once again, took action and upgraded the EPIC program. First, we allocated \$118.5 million in this year's state budget to fund EPIC, a \$4.1 million increase over last year's budgeted amount. Second, the income threshold for the deductible plan, which was last adjusted in 2001, was increased from \$35,000 to \$75,000 for those who are single and from \$50,000 to \$100,000 for married couples.

More New Yorkers will now be covered under the EPIC umbrella. EPIC's deductible plan can be an important and critical backup alternative when the dreaded Medicare "Donut Hole" kicks in or when a medication is not covered by one's Part D plan. EPIC's co-payments continue to be reasonably priced at \$3, \$7, \$15 or \$20 depending on the cost of the drug. In addition, EPIC enrollees with incomes of up to \$23,000 for singles and \$29,000 for married couples are eligible for help with paying their Medicare Part D premium.

These changes to EPIC went into effect on April 1, 2014. I am confident that these program enhancements will provide additional financial relief to those burdened with the high cost of obtaining pain-relieving and life-saving medications.

## Protections Against Surprise Medical Bills

Every year the New York State Department of Financial Services receives thousands of complaints from individuals who are billed for medical services that are not covered by their health insurance. As a general rule, insurance companies do not permit patients to go to doctors and other medical providers who are not part of their provider network. Unfortunately, there are times when, unbeknownst to the patient, he or she receives treatment from an out-of-network provider and is then billed for the service.

For example, a patient needing surgery may go to a hospital and have a surgeon who is part of the individual's health insurance network. However, during the surgery the services of a radiologist, pathologist or anesthesiologist may be required, and sometimes these professionals are not part of the patient's health insurance network. When that happens, the insurance company refuses to pay the out-of-network provider and the cost is then shifted to the patient, who receives a large, unexpected medical bill that could lead to credit problems and even bankruptcy.

To address this problem, legislation we enacted with the 2014-15 state budget contained a provision to protect customers from these surprise costs. Under the new law consumers will be removed from billing disputes between health insurers and out-of-network providers. As of April 1, 2015, a patient who receives a surprise bill from an out-of-network provider will be responsible for whatever his or her own insurance co-pay would be for that procedure. The remaining cost would go to "baseball arbitration," a process in which the out-of-network provider and the insurance company each propose a price for the billed for service and an arbitrator would decide on the amount of payment.

This new law protects patients who try to stay within their insurer's provider network and covers specialists when appropriate doctors are not available within that network. However, the law does not protect those individuals who simply choose to visit a health care provider outside of their insurer's network when that same service is available from an in-network provider.

Another provision of this measure requires insurers to let patients file claims online as well as by traditional mail.

## Beware of "Grandparent Scams"

In recent years, an increasing number of older adults are becoming victims of the "grandparent scam." The scam involves a grandparent getting a call from someone pretending to be a grandchild who has encountered an emergency situation—stranded in a faraway place, an arrest, or a health emergency—and asks for money. Information found on the Internet through social media sites like Facebook and Twitter can provide personal information that allows a scammer to trick a grandparent into believing the caller is really a family member in need of help. Wanting to help, the grandparent then wires money or purchases and sends prepaid cards to the imposter.

In New York, the Attorney General's office reports that in 2012 grandparents across the state were scammed out of more than \$441,000. In addition, the Federal Trade Commission estimates that people across the country have been scammed out of \$42 million as a result of "grandparent scams."

So, if you should get a call that begins with "Grandma/Grandpa do you know who this is" and then asks for money, be cautious and do not take the scammer's bait. Before taking any action, do some fact-checking by contacting your grandchild, child or another family member to determine whether or not the call is legitimate. And never wire money based on a request made over the phone or in an e-mail, especially if it is to be sent overseas. Remember that wiring money or sending prepaid cards is like giving cash—once you send it, you can't get it back.