

Since Medicare Part D went into effect January 1, 2006, my offices have been getting a lot of calls and letters about the complexity and confusion about this new prescription drug benefit plan.

People are distressed, confused and understandably frustrated because they are having trouble getting the prescriptions they need. Individuals are getting charged higher co-payments than they were promised, and important information is not being shared with pharmacists and insurers. People seeking help through the Medicare hotline, the Medicare computer system or insurers directly are finding it difficult to get the answers they need. This confusion has led 26 states including Massachusetts to take emergency action to ensure senior citizens are not denied medication because of the implementation of the new Medicare drug benefit.

I opposed passage of the 2003 Medicare Modernization Act, the law that created this program. The new Medicare drug plan is inadequate and overly complex. It prohibits the government from negotiating with drug companies to lower prices. It leaves seniors and people with disabilities with high out-of-pocket costs and a huge gap in coverage.

Although I voted against the passage of the 2003 MMA law, I am committed to doing whatever it takes to help my constituents understand the new law. At the very least, we need to give beneficiaries more time. That's why I am a cosponsor of the Medicare Informed Choice Act, which would prevent beneficiaries from losing their employer-based coverage, allow seniors to switch plans, and delay a late-enrollment penalty for 2006.

But we also need more comprehensive changes. I am a cosponsor of the Medicare Prescription Drug Savings and Choice Act which would give Medicare the power to negotiate lower prescription drug prices.

The new Medicare law does little to bring down the costs of prescription drugs and, in fact, explicitly prohibits Medicare from negotiating with drug manufacturers for lower prices. This is a giveaway to the big drug companies and must be taken back. Just like large employers and the departments of Veterans Affairs and Defense have been allowed to do, Medicare should be able to negotiate for lower drug prices for our country's 42 million Medicare beneficiaries. We must allow Medicare to use its considerable bargaining clout to get the best possible prices. As any consumer knows - when you buy in bulk, you can save money.

I am also urging Congress to allow American wholesalers, pharmacists and individuals to buy prescription drugs from other well-regulated nations, such as Canada, at substantial savings. This would lower the cost of brand name medicines by 30 to 50 percent, savings for both the government and individuals.

Beneficiaries deserve an affordable and universal drug benefit. In the meantime, they need more time and help navigating through the confusing Medicare drug plans now available to them. Ultimately, seniors and other beneficiaries deserve a better plan with clear options and affordable drugs.

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