



Active Retirement Ireland  
Pre-Budget 2023 Submission  
Department of Health

The two years to 2022 saw unprecedented and disproportionate health and social impacts for older people during the COVID-19 pandemic. In the aftermath and as a result of global social, political and economic factors, the cost of living in Ireland has, since the previous Budget, skyrocketed to crisis point. May 2022 saw inflation in Ireland rise to its highest level in 38 years at 7.8%, with older people among those Irish citizens feeling the impact of this most keenly on already tight household budgets.

Budget 2023 provides an opportunity for Ireland to position itself as a world leader in how we treat our older citizens, particularly during times of crisis. Supporting older people to be able to prioritise their health and medical needs despite the rising cost of living, and making healthcare more accessible is essential to protecting and promoting better quality of life among older people.

**Objective:** Ensure older people in Ireland are respected and valued for their lifelong contribution to the Irish social and economic landscape by enabling all older people to prioritise their health, not only those with means, to live with dignity, independence and highest quality of life after retirement.

### **Summary of proposals:**

- Base the entitlement to the medical card for the over-70s on net income, not gross.
- Make the application for medical cards more user-friendly and less restrictive.
- Remove the cost of blood tests and diagnostic screening carried out at GP practices for patients with GP visit cards.
- Abolish any charges associated with prescription items for medical card holders.
- Remove the upper age-limit on access to free government breast, bowel and cervical screening schemes.
- Institute a coherent system of supports so that older people can stay in their own homes to end of life, as so many want to do.
- Take ageism seriously and implement a well-resourced and meaningful programme of action to counteract it.
- Appoint a champion with a cross-departmental brief to prioritise older people's issues across the board and resource the active implementation of the National Positive Ageing Strategy (2013) or any other implementation structure.
- Establish an independent Commissioner or Ombudsman for Older People, similar to that in Northern Ireland.
- Develop a whole of government strategy to ageing that allows all older to age with dignity, respect and independence for as long as possible.

## Accessing the medical card

Under the *Health Act 2008*, automatic entitlement to a medical card for people in Ireland aged 70 and over came to an end and means testing of applicants in this age group was introduced. Pensions, earnings, interest from capital and all other sources of income are included in the means test.

From 2009 through to late 2012, if an older person's weekly gross income was below €700 (or €1400 for a couple) they were eligible for a medical card. The allowed weekly gross income was reduced by at least €100 per person in Budget 2013 and Budget 2014 until the threshold had been fallen to a weekly gross income of €500 per week for a single person and €900 per week for a couple.

This remained the threshold for six years, until November 2020 when it was increased slightly to €550 gross weekly income for a single person, and €1050 for a couple.

People aged over 70 are eligible for the more limited 'GP visit card' without an income test.

For people aged 66-69, eligibility for both the medical card and the GP visit card is means tested, within an onerous and complex application process.

In the 14 years since the *Health Act 2008* was enacted, instead of the income threshold at which an older person's eligibility for a medical card is assessed increasing in line with the rising cost of living over the period, it has been reduced so that it is now far less than in 2009. This means that fewer and fewer older people are able to avail of a health and social mechanism put in place to support people to be able to access affordable, government subsidised medical care.

### Proposals:

- Base the entitlement to medical cards for the over-70s on net income, not gross.
- Make the application for the medical card more user-friendly and less restrictive.

## Prescription and other health charges

In addition to supporting more older people to access affordable health care and improved health outcomes by broadening eligibility for the medical card, significant benefit can also be garnered through expanding the support available within the existing medical and GP visit card framework.

Active Retirement Ireland welcomed in November 2020 the prescription charge reduction for medical card holders of €0.50c per item dispensed and the lowering of the monthly cap, after which prescription charges are refunded.

At present, for older people aged 66-69 with a medical card, the prescription charge is €1.50 for each item dispensed under the medical card scheme, up to a maximum of €15 per month per person or family. For people aged over 70, the prescription charge is €1 per item, up to a maximum of €10 per month per person or family.<sup>1</sup>

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<sup>1</sup> Citizens Information — Prescription charges for medical card holders (Feb 2022)

However, even at reduced rates, any prescription charges for medical card holders unfairly target the poorest and sickest members of society, many of whom are older persons, and should be removed. These charges act as a barrier for many older people in accessing their monthly medical items and some older people are making decisions on which prescribed items to get or not.

As cost of living pressures reach crisis point and older people around the country are reporting having to choose between 'heating and eating', it is essential that prescribed medical items are health considerations only for older people and not financial decisions.

Similarly, for older people holding GP visit cards, discretionary charges at GP practices for preventative health services such as health checks, screening services and routine blood tests carried out at the practice should also be removed. Early stage detection of chronic illness and other medical conditions improve health outcomes and quality of life and should be available to all older people, not only those who can afford it. Charges for these services for older GP visit card holders acts as a barrier to proactive health care, often leading to much later diagnoses and more difficult and costly treatment.

### **Proposals:**

- Abolish any charges associated with prescription items for medical card holders.
- Remove the cost of all blood tests and diagnostic screening carried out at GP practices for patients with GP visit cards.

### **Access to national cancer screening programmes**

In Ireland, free national screening programmes for breast cancer, cervical cancer and bowel cancer have been in place for a number of years. Each of these programmes sets an age bracket within which free screening is offered — BreastCheck mammograms are available to women aged 50–69 years every two years; CervicalCheck tests are available to women aged 25–65 every three to five years, and BowelScreen home tests are made available to men and women aged 60–69 every two years.

Any person outside of these age brackets wishing to access these preventative measures (before any symptoms present requiring referral) must cover the cost themselves. This disproportionately effects people aged 70 and older, in particular those with limited means.

At present, no person in Ireland over the age of 69 is eligible for free preventative cancer screening programmes. No person in Ireland is eligible for free preventative cervical cancer screening beyond the age of 65.

The risk of cancer increases as people age and there is no age at which the risk is no longer present. In the case of bowel cancer, more than half of cases develop in people aged 70 or older.<sup>2</sup> For breast cancer, 36% of women diagnosed in Ireland from 2015-2017 were over 65.<sup>3</sup>

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<sup>2</sup> NHS, UK 2021

<sup>3</sup> Europa Donna Ireland, 2019

It is imperative that free screening is offered to older people for life. Screening makes early stage diagnosis possible, which can often mean easier, less invasive treatment and a far greater chance of recovery.

**Proposals:**

- Remove the upper age-limit on access to free national breast, bowel and cervical screening programmes in Ireland.

**Ageing in place in conjunction with Alliance of Age Sector NGOs<sup>4</sup>**

The heightened challenges faced by older people during COVID-19 have been clear for all to see and the Alliance of Age Sector NGOs will continue to call for a renewed focus on regaining the positive role of older people in society.

**Proposals from ARI and the Alliance:**

- Institute a coherent system of supports so that older people can stay in their own homes to end of life, as so many want to do.
- Take ageism seriously and implement a well-resourced and meaningful programme of action to counteract it.
- Appoint a champion with a cross-departmental brief to prioritise older people's issues across the board and resource the active implementation of the National Positive Ageing Strategy (2013) or any other implementation structure.
- Establish an independent Commissioner or Ombudsman for Older People, similar to that in Northern Ireland.

We are an ageing population. It is predicted that the number of people aged 65 and older in Ireland will reach one million within the next 10 years — or just two typical Dáil terms. Older people and their interests must be considered by elected representatives when making decisions, now more than ever.

In the absence of a National Positive Ageing Strategy and with indications that the 2013 Strategy is no longer fit for purpose, Active Retirement Ireland asks the government to put in place a structure that takes a whole of government approach to ageing in place. This structure must view ageing beyond a care and medical model.

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<sup>4</sup> Annual Statement Alliance of Age Sector NGOs 2021

## **Home care**

Ireland is in the midst of the most acute recruitment crisis home care has experienced in its history. In autumn 2021, the government reported home care waiting lists of 800 people. As of the end December 2021, the national waiting list was in excess of 5,000 people. Family Carer's Ireland currently project that their members alone need to hire 3,000 additional home care workers in 2022 just to reach the goal of providing 24 million hours of home care. This does not include the additional staff needed by the HSE and other home care colleagues. The end result of this means older people being forced to leave their home and local community and be admitted into a nursing home against their wishes.

This is the hard reality of a sector that, for too long, has not received the focus its workforce challenges require. This government has made clear, in the programme for government and in public statements, that it supports a home first policy and to do this a clear strategy covering all aspects of home care needs to addressed.

Active Retirement Ireland wants to see the recipients of home care be included in co-design of the strategy and consulted on the type of support they wish to receive. Services in home care should fit around people's lifestyles, be person-centred and not the current one-size-fits-all model. Resourced home care needs to be central to supporting older people ageing at home for as long as possible with dignity, respect and independence.

## **Proposal**

- Develop a whole of government strategy to ageing that allows all older to age with dignity, respect and independence for as long as possible.