



Active Retirement Ireland
Pre-Budget 2025 Submission
Department of Health

Active Retirement Ireland makes this pre-budget submission on behalf of our more than 21,000 affiliated Active Retirement Ireland members around the country. This submission is based on concerns and feedback raised by our members through various channels throughout the year.

Objective: To see health equity achieved for older people in Ireland by ensuring adequate supports are in place for all older people — not only those with means — to be able to prioritise their health and wellbeing and live with dignity, independence and highest quality of life after retirement.

Supporting older people to prioritise their health

Supporting older people to be able to prioritise their health and medical needs and making healthcare more accessible for people at a life stage when many need it the most is essential to protecting and promoting better quality of life among older people.

The number of older people living in poverty has increased in recent years, with a great many more at risk of poverty. Under the strain of trying to make ends meet, many older people are choosing to forego diagnostic or preventative healthcare, or even go without medical prescriptions and put off medical procedures, because they simply cannot afford them.

Responsive, accessible and quality healthcare should be available to all older people in Ireland, not just those who can afford it.

There is no benefit, whether to citizen or state, when preventative health care and early intervention initiatives are cost prohibitive or have other barriers to equal access.

Summary of proposals:

- Automatically entitle any person ordinarily resident in Ireland and over the age of 80 to a medical card.
- Implement more appropriate eligibility requirements for older people aged 70-79 to qualify for the medical card — either by increasing the means tested income threshold and base means testing on net income rather than gross, or base eligibility on medical need.
- Make the application process for medical cards more user-friendly and less restrictive.
- Work with GPs to remove disincentives to treat medical card holders and remove the discretionary powers of GPs to refuse an application by patients for medical card GP services on the basis of their holding a medical card.
- Work with dentists to remove disincentives to treat medical card holders and remove the discretionary powers of dentists to refuse appointments for patients on the basis of their holding a medical card.
- Remove ambiguity and GP discretionary charging by legislating against charging medical card holders fees for blood tests and diagnostic screening carried out at GP practices.

- Remove the cost of all blood tests and diagnostic screening carried out at GP practices for patients with GP visit cards.
- Abolish any charges associated with prescription medical items for medical card holders.
- Remove the Drugs Payment Scheme expiry period and reapplication requirement for people over the age of 70 availing of the scheme.
- Remove the upper age-limit on access to free government breast, bowel and cervical screening schemes.
- Implement an urgent investment and action plan to reduce hospital waiting times for older people.
- Implement a statutory home care system addressing all aspects of home care as part of a comprehensive, long-term strategy for older people needing care and who want to stay in their homes until end of life, as so many do.
- Develop and put into action a whole of government strategy to ageing that allows all older people to age with dignity, respect and independence for as long as possible.
- Establish an Independent Commissioner for Ageing and Older People in Ireland, similar to that which is in place in Northern Ireland and Wales, to ensure the rights and interests of older people are considered and promoted at all levels.
- Take ageism and the harm caused by ageist beliefs, attitudes and actions seriously and implement a well-resourced, meaningful programme of action to counteract it.

Accessing the medical card

The medical card scheme was introduced to give certain people access to free public health services.

It is our position that no person over the age of 80 and ordinarily resident of the state should have to pay for public health services in Ireland and, rather, should be automatically entitled to a medical card. Further, it is our position that more people between the ages of 70 and 79 should be eligible to access free public health services and that widening the scope of eligibility for the medical card is needed.

It is natural that as people age they are more likely to have increased need for health services than in their younger years. This is true for all of us. It is only right that older people who do experience increased need for health services — at a time in their lives when they are no longer working and are on a fixed income — are able to do so without being disproportionately burdened and driven into poverty. These are the workers, parents and carers of the present generations and their contribution to the state throughout their earlier lives should be valued and respected.

It is 16 years since the *Health Act 2008* was enacted and automatic medical card entitlement to people aged over 70 was ceased in favour of means tested eligibility. At the time, Ireland was in the grips of severe economic crisis and there was a clear and urgent need to make drastic cuts to public spending. However, this is no longer the case and the Economic and Social Research

Institute reported a stabilisation of the Irish economy as early as 2012¹ — from here, Ireland's economy has enjoyed a strong recovery to present day.

Further, since 2008 and the introduction of means-tested eligibility, the amount of means an older person is permitted to have in order to qualify for the medical card has been reduced so that it is now far less than in 2009.

From 2009 through to late 2012, if the weekly gross income of a person aged over 70 was below €700 (or €1400 for a couple) they were eligible for a medical card. This threshold was reduced over subsequent budgets to a weekly gross income of €500 per week for a single person and €900 per week for a couple by 2014. November 2020 saw the first increase to the threshold in eight years, when it was increased slightly to €550 gross weekly income for a single person, and €1050 for a couple.

In addition, the application process itself is particularly onerous and a further barrier to many older people accessing the medical card.

This means that, each year, fewer and fewer older people are able to avail of a key health and social mechanism put in place to enable people to access affordable, government-subsidised medical care, and Ireland is getting further and further from achieving some level of health equity for older people in Ireland.

Access to health services for medical card holders

As part of the present application process, patients applying for a medical card must be approved by their selected GP as a patient for medical card GP services. This policy is discriminatory, creates an inappropriate level of scrutiny at community level and promotes a two-tier patient system. Where a medical card applicant has been approved for eligibility by the state, they should receive the same treatment thereafter as any other patient and not be subject to further assessment by any other party with regards to their access to medical services, outside of purely medical considerations around eligibility for specific treatment.

Further, it is widely reported among our members who hold a medical card that, while medical card holders are purported to be entitled to free blood tests and diagnostic screening carried out at GP practices, they are often charged a fee depending on the GP practice they attend. Many express shame at having to challenge this at reception and pay the fee, with some not returning in future for fear of being met again with unexpected charges. This barrier to health care must be removed and medical card holders supported by way of legislation prohibiting discretionary charges imposed by GP practices.

Increasingly, too, our members with medical cards are reporting being turned away or having appointments cancelled by dental practices on the basis of their being a medical card holder. Active Retirement Ireland is aware of the reduction in the number of dentists willing to participate in the medical card scheme and appreciates that this is under review by department, however it is the most vulnerable in our society who are bearing the brunt of this current impasse. It is wholly unacceptable that an older person who holds a medical card is unable to access affordable dental health services in Ireland.

Active Retirement Ireland asks the Department of Health to:

- Automatically entitle any person ordinarily resident in Ireland and over the age of 80 to a medical card.

¹ J.Fitzgerald (2014) 'Ireland's recovery from crisis', The Economic and Social Research Institute, CESifo Forum 2/2014

- Implement more appropriate eligibility requirements for older people aged 70-79 to qualify for the medical card — either by increasing the means tested income threshold and base on net income rather than gross, or base the eligibility on medical need.
- Make the application process for medical cards more user-friendly and less restrictive.
- Work with GPs to remove disincentives to treat medical card holders, and remove the discretionary powers of GPs to refuse an application by patients for medical card GP services on the basis of their holding a medical card.
- Work with dentists to remove disincentives to treat medical card holders and, remove the discretionary powers of dentists to refuse appointments for patients on the basis of their holding a medical card.

Prescription and other health charges

Expanding other supports available within the existing medical and GP visit card framework, such as subsidised prescription medication schemes, can also contribute to achieving health equity for older people in Ireland and better support them to prioritise their health and wellbeing.

Active Retirement Ireland welcomed in November 2020 the prescription charge reduction of €0.50c per prescription item dispensed for medical card holders 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.²

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 having to make decisions on which medical prescriptions they fill based on their household budgets.

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

For the many older people aged 70 and over who do not qualify for a medical card and are availing of the Drugs Payment Scheme to reduce their out of pocket medical expenses, the requirement that they reapply for this scheme over and over is unnecessarily onerous and should be removed.

² Citizens Information — Prescription charges for medical card holders (May 2024)

Active Retirement Ireland asks the Department of Health to:

- Remove the cost of all 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 Drugs Payment Scheme expiry period for people over the age of 70 availing of the scheme.

Access to national cancer screening programmes

The 2023 Members' Consultation carried out by Active Retirement Ireland found that 60% of respondents feel strongly about access to free government breast, bowel and cervical screening schemes for more older people.

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 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 affects people aged 70 and older, in particular those with limited means.

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.³ For breast cancer, 36% of women diagnosed in Ireland from 2015-2017 were over 65.⁴

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.

Active Retirement Ireland asks the Department of Health to:

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

³ NHS, UK 2021

⁴ Europa Donna Ireland, 2019

Hospital waiting times

Our members continue to raise significant concerns about hospital waiting times in Ireland.

HSE figures show that nationally, in the first quarter of this year, the average hospital waiting time for people aged 75 and older was 13 hours and 48 minutes. The longest wait time for a person aged 75+ was 26 hours and 36 minutes. These figures are shocking and wholly unacceptable.

The HSE has further reported that up to the end of April 2024, the number of patients aged 75 and older attending emergency departments had increased by 15.8% this year on the same period in 2023, and 22% on 2022.

Urgent action and investment is needed to increase capacity at hospitals around the country to ensure older people are able to access timely emergency care and are not subjected to inhumane waiting times. Further review into the primary health system in Ireland is also needed to identify why the number of older people attending hospital emergency departments continues to increase, and why more and more older people are choosing to attend emergency departments instead of accessing other care options, despite the wide reporting of excessive hospital waiting times.

Active Retirement Ireland asks the Department of Health to:

- Implement an urgent investment and action plan to reduce hospital waiting times for older people.

Home care

Despite a commitment to a Commission on Care outlined in the programme for government and approval by government in October 2023 of a proposal to establish a ‘Commission on Care for Older Persons’ to examine the provision of health and social care services and supports for older persons and make recommendations, we are yet to see any real action in relation to tackling the care crisis in Ireland.

And while the government committed in 2022 to addressing the critical shortage of care workers in Ireland as an urgent priority, Home and Community Care Ireland report that home care waiting lists increased by 25% between 2022 and 2023⁵. In November 2023 there were still more than 6,000 people on the national waiting list for home care.

As a result, for the vast majority of older people who need care but do not want to enter a nursing home, home care is not an option.

Tellingly, the Active Retirement Ireland Members’ Consultation conducted in 2023 found that nearly all respondents (84%) would prefer to remain at home with care provided should they become in need of full-time care in the future. Just 4.3% indicated a preference for residential care or nursing home care.

Unfortunately, without access to properly resourced, quality home care, older people needing care have little option but to spend lengthy periods in hospital in an already overcrowded hospital system or be forced to leave their home and local community and be admitted into a nursing home against their wishes — or a revolving-door combination of both.

⁵ HCCI Pre-budget submission 2024 (August 2023)

In addition, as more and more nursing homes close around the country — many citing a lack of financial viability — Ireland is facing the very real risk that there will not even be enough nursing homes places to absorb the home care shortfall.

It is time for the government to act and implement a statutory home care system addressing all aspects of home care as part of a comprehensive, long-term strategy for older people needing care and who want to stay in their homes until end of life. This strategy should be co-designed by recipients of home care, through consultation on the type of support they wish to receive so that services are appropriate and person-centred rather than 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.

Active Retirement Ireland asks the Department of Health to:

- Implement a statutory home care system addressing all aspects of home care as part of a comprehensive, long-term strategy for older people needing care and who want to stay in their homes until end of life, as so many do.
- Develop and put into action a whole of government strategy to ageing that allows all older to age with dignity, respect and independence for as long as possible.

A whole-of-government approach to protecting the rights of older people — Alliance of Age Sector NGOs

In January 2023 the Alliance of Age Sector NGOs, of which Active Retirement Ireland is a member, released a report setting out a number of recommendations for action to create an Ireland for all ages. Chief among these is the need for an independent Commissioner for Ageing and Older People to promote and protect the rights and interests of older people across government departments and at all policy levels.

In the 2023 Members' Consultation carried out by Active Retirement Ireland, 94% of respondents said they would like to see the establishment of an independent Commissioner for Older People in Ireland.

A Red C poll commissioned by Sage Advocacy in September 2023 found that 81% of respondents wanted to see the introduction of a Commissioner for Older People.

A further recommendation by Active Retirement Ireland and the Alliance of Age Sector NGOs is that the government acknowledge the pervasive culture of ageism in Ireland and the harm it causes, and implement a whole-of-government strategy to counteract it.

Ageist attitudes, beliefs, behaviours and policies are commonplace in Irish society and in all settings. Ageism may be intentional, structural or even unintended, such as benevolent ageism, but all ageism is harmful.

The World Health Organization lists some of the harmful effects of ageism as:

- shorter lifespan
- diminished mental and physical health
- isolation
- cognitive decline
- reduced quality of life.

Active Retirement Ireland and the Alliance of Age Sector NGOs ask the Department of Health to:

- Support the establishment of an independent Commissioner for Ageing and Older People in Ireland, similar to that which is in place in Northern Ireland and Wales, to ensure the rights and interests of older people are considered and promoted at all levels.
- Take ageism and the harm caused by ageist beliefs, attitudes and actions seriously and support the implementation of a well-resourced, meaningful programme of action to counteract it.
- Support the development and implementation of a comprehensive, whole-of-government positive ageing framework in Ireland that looks beyond the care and medical needs of older people to protect all aspects of ageing and allow older people to ensure people in Ireland are empowered and supported to age well.