



Aligning the upper age for NHS prescription charge exemptions with the State Pension age

**Submission from the
National Pensioners Convention**

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Prescribing Policy and Charges Team
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Dear consultation team

NPC evidence for the consultation

Aligning the upper age for NHS prescription charge exemptions with the State Pension age

Introduction

The National Pensioners' Convention (NPC) is Britain's biggest independent organisation of older people, representing around one thousand local, regional, and national pensioner groups with a total of 1.5 million members. The NPC is run by and for pensioners and campaigns for improvements to the income, health and welfare of both today's and tomorrow's pensioners and this response is based on the views and experiences of our members.

We wish to submit views to the Department of Health and Social Care for the consultation for the 'Aligning the upper age for NHS prescription charge exemptions with the State Pension age' consultation. Our response has been compiled by our Women's Working Party, Digital Working Party, Minority Elders' Committee, Health & Social Care Working Party, LGBT Group, as well as our National Administration & Information Manager and will concentrate on the experiences and concerns of our members who are, by definition, in the older age range.

Consultation Methodology

The NPC hold deep concerns about the way in which the consultation has been conducted. The only way to find out about the consultation is via online methods. This will exclude millions of people from potentially giving their views on this important subject matter. The digital first approach must not be a digital only approach.

The NPC is campaigning for 'Connections For All', meaning that those who want go online and use the internet, computers and modern technology, should be given the access, help and training to do so to help digitally include them. However, we firmly believe that traditional forms of communication and services such as face to face, over the telephone and via post must remain in place. This is so as not to digitally exclude those who cannot use more modern technologies, those who do not wish to use them, and those who are priced out by equipment, broadband and upkeep costs, from our society.

It may be suggested that people who do not have access to the internet should use local libraries, which are likely to have computer facilities, or get help from a friend or relative, however this completely misses the point. Many people do not feel comfortable asking for others to respond on their behalf and not everyone has a family or someone they can trust to help them with technology – even if they wanted to. People who are not online have a right to be able to find out about government consultations and a right to respond. Traditional methods of publicising consultations and allowing people to respond by offline means, must be maintained.

Minority Elders' Committee comments - The consultation should be further extended. It needs to be published in a form that is accessible to those affected. Many BAME people do not have access to IT equipment, and some have language constraints, which prevents them from having their views expressed. How would be people concerned have known about the proposals in the consultation?

Consultation Response

1. Should the upper age exemption to prescription charges be aligned to the State Pension age?

- Strongly disagree

2. If the prescription charge exemption age is raised to State Pension age should people in the age groups 60 to 65 at the date of change retain their existing exemption?

- Strongly agree

3. Do you think there will be any unintended consequences that a raise in the upper age exemption could have on people, pharmacies or other organisations?

- Yes
- The high level of prescription charges (even for someone using an annual subscription payment) will potentially mean that this age group of people with need to make decisions about how they pay the costs.
- This may take the form of either stopping medication altogether or choosing which medication to take if on multiple prescriptions.
- Doing so will increase the risk to their already poor health and place a further burden on the NHS
- Pharmacies will perhaps need to offer alternatives to prescribed medication, although this cost would be prohibitive in terms of their income.

Women's Working Party comments - It will disadvantage those who are poorer. Those people who are unable to afford the cost would be likely to make savings by not purchasing their prescriptions. This would result in them not taking necessary medication creating in an even greater cost and burden to the NHS, a greater need

for Social Care and associated costs, harm to local communities and society as a whole.

Minority Elders' Committee comments - It will impact negatively on people who are on low income. Poor people will be unable to meet the costs and, in some cases, relinquish buying important medication. They will be forced to make difficult choices and it might result in people self-medicating and seeking unproven remedies. As a consequence, it will put a greater burden on the overstretched NHS. Furthermore, it will increase social care and related costs. It will affect people's ability to carry out their work, volunteering and participatory activities, which will in turn compromise their well-being.

LGBT Group comments - Medication for many over 60s is unlikely to be only one item. For most LGB people as with all it would be expensive and may stop taking. For trans people it could be dangerous / life threatening if can't continue to afford medication.

4. Do you think that aligning the upper age exemption with State Pension age could have a differential impact on particular groups of people or communities?

- Yes
- To limit free prescriptions to those over retirement age is a false economy for the reasons stated above.
- State Pension age is set to increase over the next 5 years. This will then start to exclude those below that retirement age and add to the numbers of at-risk people who will not be able to afford prescription charges.
- Particularly concerned about those without families or others to monitor medication intake – so choosing not to take medication could well be life threatening.
- Those hardest hit will be older women and minority elders.

Women's Working Party comments - It would be harmful to those people who are poorer and more likely to have poorer health. Despite life expectancy having risen during the 20th century recent statistics indicate that this rise has stalled during the last 10 years and that poorer people in society suffer greater ill-health and their life expectancy is now in decline. Women who suffer greater long-term ill-health would also be disadvantaged, as would those from black and ethnic minorities.

Minority Elders' Committee comments - Amongst the poorest communities in the country are people from BAME groups, who are known to suffer disadvantage and inequalities. They are more likely to have poorer health. Despite life expectancy and health outcomes having improved somewhat over the years, there has not been concomitant increase in the health of BAME groups. They continue to experience ill-health and their life-expectancy continues to decline. There is a clear correlation between poverty, poor health and housing, inadequate social care, social deprivation and aging well. BAME people across the country, are already disadvantaged in relation to the above and will increasingly be harmed by the proposals.

5. Do you think that aligning the upper age exemption with State Pension age could adversely impact people from deprived backgrounds or between disadvantaged geographical areas?

- Yes
- Pensioner poverty is increasing. Government attacks on pensioner entitlements to prop up the most inadequate state pension in the economically developed world will add to the numbers falling into poverty.

Women's Working Party comments - The north-west and has been hit the hardest by Covid and much of the reason for this is due to low incomes, social deprivation, poor diet, poor housing, etc. Areas of deprivation across the country would be further harmed by these proposals.

Minority Elders' Committee comments - Geographically, many BAME communities reside in the Northwest, where the impact of COVID-19, has been demonstrated. The link between socio-economic deprivation and health and clear.

Should you require any further information, please use the contact information supplied below.

Yours sincerely

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