Dear Editor:

It is well known that senior citizens and others on Medicare have difficulty affording prescription medicines, as pointed out in *P&T* Vol. 26 No. 10, October 2001, pages 530 and 533. Several physicians in my county have suggested that a realistic cost reduction in Medicare might be achieved by having patients sign advanced-care directives when they enroll in Medicare, with the knowledge that these directives would be honored for end-of-life care decisions. The patients would be informed that these directives would be used when patients are admitted to the hospital for terminal care (or discharged to home for terminal care) in order to avoid prolonging life through extraordinary means (e.g., intubation, dialysis, pharmacological blood pressure support, central venous feeding, etc.) when no hope for recovery is apparent. Since the cost of supporting life during the last few weeks of life is variously reported as between 50% and 80% of the health care dollar, Medicare patients could help avoid extravagant medical care that would rob themselves and others of needed non-terminal and preventive care. Those Medicare enrollees who sign such advanced-care directives would be eligible for a reduced payment schedule (improved government payments) for needed medicines and medical and nutritional services to prevent premature disease sequelae that could lead to terminal end-stage diseases such as congestive heart failure or renal failure.

Sincerely,

F. Delbert Moeller, MD, FACOG

Dr. Moeller practices at St. Joseph Hospital West in St. Charles County, Missouri, and is the president of the St. Charles/Lincoln County Medical Society (SCLCMS). The views expressed in this letter are the result of a discussion with a local family practice doctor and do NOT reflect the views of the SCLCMS.