

## **Witness Statement of Judiciary House Tenants**

### **Introduction**

My name is Brenda Clegg-Boodram. I live at Judiciary House which is a DC Housing Authority Property for Senior and Disabled People of Low Income. I am accompanied by Grady Hammond, Edith Williams, and Mary Royal. We all are residents in the Judiciary House which is located in China Town of Washington, D.C.

### **Background Information**

Our population is "deemed" independent living. I volunteer as the Acting President and Treasurer for the Resident Council which acts as a liaison between DC Housing and other social service organizations.

The Judiciary House is a Housing Authority property which provides low income housing to the most vulnerable population in the city. The elderly and disabled tenants do not and many times can not understand paperwork. Although the tenants are deemed "capable of independent living" in reality for much of this population, this is not true.

I was approached in late January 2007 by two gentlemen who identified themselves as having good news about Medicare Part C. At this point, I was not aware that they were selling insurance. Initially, I thought they worked with Medicare.

Darnell Keyes and T.C. (Coventry), was sent to my office by the property manager's office. They advised me that they had information about Medicare. They proceeded to explain that Medicare had recently approved Part C which was specifically for Eyes, Dental and Hearing. And as I understood them, this would be in addition, to Medicare Part A, B, and D.

They asked me when could they do an educational presentation to my tenants and advised that they would provide the posters. I advised that I already had the Legal Aid Society Lawyers to assist my tenants with their Healthcare and their Prescription coverage. They advised that they understood and they told me that they were not dealing with Part D for prescription coverage.

I felt confident that these men understood and I treated them like any other health outreach. I provided them with a date and about a week later they gave me the posters. At this point, they did give me some paperwork about Coventry and I again reminded them that Legal Aid had already reviewed and assisted my participating tenants for appropriate insurance and prescription coverage. I posted the posters but, I did not read the information about Coventry.

### **The Consequences**

I arranged for them to do their presentation at two of our tenant meetings. One meeting took place in the Resident Council Office and one meeting took place in our Community Room. I was not ever told that they were selling health insurance or that they intended to change my tenants' health coverage. It was my understanding that they were going to add Medicare Part C to their current coverage.

They did two presentations in the month of February 2007. About three to four weeks later, Mary Royal came to me and advised that her coverage was changed. Then Grady Hammond, Edith Williams, and there were other tenants who complained that they could not get their medications and that their physicians and hospitals did not accept and/or know about this insurance company and calling customer service did not help.

**Please Note:** This incident created a health crisis for our witness Ms. Edith Williams who has Multiple Sclerosis and had to be treated by an Emergency Room and subsequently she had to pay cash for her medications because they changed her Medicare Part D Drug Coverage. She did not have all of the money and over a period of a week or more she suffered physically and she had to scrape up the money for her medication.

I contacted Jennifer Mezey, Supervising Attorney of the Legal Aid Society of the District of Columbia. Attorney Jennifer Mezey helped Mary Royal, Mr. Grady Hammond, and Edith Williams to disenroll. I know that there are other tenants in my building who needed the assistance of Ms. Mezey to disenroll but they are unable to ask for help and they are still suffering ...

I believe that there is a lack of responsible coverage of care for the seniors, mental, emotional, and sometimes the physically disabled and I feel that there should be measures taken to prevent these types of incidents from occurring.

### **Conclusion**

This statement is also a question ... where is the accountability? Who makes sure/certain that the population who can least afford these types of mistakes are protected? I know of individuals in other states who are having similar problems so this is not a local problem but a national problem.

We barely survived the Medicare Part D problems and in fact, there are citizens who are unable to advocate for themselves who do not understand and are stuck with inadequate healthcare and prescription coverage as a result of the Part D. We seriously need more checks and balances written into the regulations.