

UK government crisis forces backtrack on scrapping free prescriptions for over 60s in England

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The widely reviled Johnson government has been forced to backtrack on plans to end free prescriptions for those aged 60. In recent months speculation mounted that the National Health Service (NHS) in England looked set to impose the policy, with the qualifying age raised to 66 in April this year.

The brutal policy would have seen many elderly people no longer be able to afford vital medication, or forced to choose between paying the prescription charge or for other daily necessities.

In the White Paper last year, the government argued that there is now a “disconnect” between the current aged-based exemption and the State Pension Age (SPA). As senior citizens are now forced to work for years longer, they are “economically active and more able to meet the cost of their prescriptions,” runs its cynical logic.

This week, government health minister Maria Caulfield was forced to backtrack, saying that “at the present time no decision has been made to increase the upper exemption for free prescriptions” and claiming that speculation that the exemption would be removed for pensioners is “completely false”.

There was no speculation. At the time of its White Paper the government held an eight-week consultation between July and August 2021, “Aligning the upper age for NHS prescription charge exemptions with the State Pension age”. It proposed two options for consideration. Option A was to raise the qualifying age for free prescriptions to the SPA (currently 66) for everyone. This would mean that those aged 65 and under would have to pay for their prescriptions until they reach the age of 66, unless they qualified for another exemption. Option B was “to raise the

qualifying age for free prescriptions to the SPA (currently 66) but with a period of protection, which would mean that people in the age range 60 to 65 would continue to receive free prescriptions.”

With Prime Minister Boris Johnson facing the threat of a leadership challenge, the proposals have been shelved but no doubt only temporarily.

Campaigners from the Prescription Charges Coalition (a collection of 40 charities) decried the intention to raise the qualifying age, telling *iNews* it would mean “disaster for tens of thousands of people who may face a new barrier to accessing their vital medicines.”

Laura Cockram, head of policy and campaigns at Parkinson’s UK and chair of the Prescription Charges Coalition, explained, “Worryingly, we also know that thousands of people are already having to choose between food and medications.”

Cockram added that “people with Parkinson’s lose an average of two-and-a-half hours a day to debilitating symptoms when their medication naturally wears off. If they were forced to reduce doses to make it last, or to stop it altogether, life would be unmanageable.”

Age UK reported one person telling them, “I will soon be 60. I spend £9 odd on one item of medication. At the moment, I am afraid to tell the doctor of my added illness as I cannot afford the prescription price and barely manage my health issues with the medication I have.”

Caroline Abrahams, charity director at Age UK said, “We are regularly contacted by older people asking what is happening with the changes as they are so worried about having to pay for their prescriptions with little warning.”

The move to make the elderly shoulder the cost of often vital life-preserving medication is part of the Conservative government's plans to raise the pension age to 68 for those born after April 1977.

When the government launched its White Paper last year floating the idea of aligning the qualifying age for free prescriptions to the new SPA, it received over 32,000 responses. In a letter to the Department of Health and Social Care, responsible for the consultative exercise, 20 healthcare organisations raised "deep shared concerns" that the abolition of free prescriptions would adversely impact over 52 percent of those aged between 60 and 64 with long-term health conditions. Even the government's own impact assessment, they pointed out, had found that 66 percent would become ineligible to claim free prescriptions, resulting in 15 percent discontinuing taking their prescribed medication.

When the National Health Service (NHS) was first formed in 1948 under Clement Atlee's Labour government, prescriptions were entirely free. Within a year, Labour introduced legislation allowing for the introduction of charges. In 1952, the Conservative government of Winston Churchill introduced a charge of one shilling (less than £2 today) per prescription. In 1956, the charge was levied against each item, rather than the entire prescription.

The charge has existed ever since, imposed by successive Tory and Labour governments, with the brief exception between 1965 and 1968. In 1979, with the coming to power of Margaret Thatcher, the charge was increased at a pace higher than the rate of inflation, reaching £3.05 in 1990, nearly a 15 percent rise in 11 years. Between 2007 and 2011, the devolved administrations in Wales, Scotland and Northern Ireland (run by the Scottish National Party, Labour Party and the Democratic Unionist/Sinn Féin respectively) all abolished prescription charges.

From 2011, the charge in England has risen annually (approximately 20p each year). The change now being proposed would see a further 2.4 million people paying for their prescriptions, with charges also set to rise from the current £9.35 per item in April.

Compared to overall NHS spending, the money that would be saved by raising the qualifying age is a drop in the ocean. The cost of free prescriptions in England in 2019 was approximately £600 million, which

represents less than 0.3 percent of the NHS budget in 2020/21. But there is an ideological imperative at work.

The formation of the National Health Service in 1948, like the earlier introduction of the Old Age Pension, marked major social gains for the working class. For more than three decades, both Tory and Labour governments have sought to erode these and shift the cost of health and other welfare provisions onto the individual. By decreasing the share of socially created wealth expended on the working class, this can flow into the coffers of the richest in society.

The government's real aims for the NHS are clear. All barriers to the private sector fortunes from it are being removed, in anticipation of the carve up of all facets of the NHS and a continued sell off to private investors.

At the first opportunity, the Johnson government, or one led by a prime minister even further to the right, will move to end all free prescription exemptions from the NHS that the elderly and millions more people rely on. A report by the House of Commons library this month noted, "A broad system of exemptions from prescription charges, including for those on low incomes and people with some long-term medical conditions, means around 89% of NHS prescription items are dispensed in the community free of charge, according to a Government answer to an oral Parliamentary Question in October 2019."

The health trade unions have done nothing over decades to prevent prescription charge increases or any of the attacks on public health care relied on by tens of millions. To fight this onslaught, health care workers must form rank and file committees independently of the trade unions, based on a social programme which prioritises the needs of the working class above that of making profits.

The WSWS urges all NHS and social care workers to contact us with their experiences. For more information, visit NHS FightBack and share your experiences of the pandemic and conditions at work.



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