Making Sense of Medicare-for-all and Other Proposals to Expand Public Coverage

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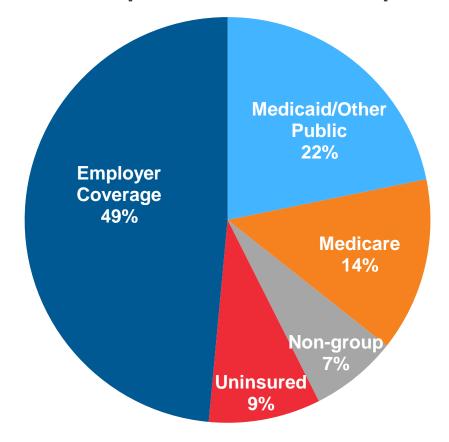
Medicare-for-all And Other Public Plan Proposals Aim To

Address Many Goals





Public Opinion About These Proposals Will Be Shaped, In Part, By The Coverage And Experiences People Have Today



Total U.S. population = 317 million people



There Are Five General Approaches Involving Public Plans

#1	#2	#3	#4	#5
Medicare-for-all	Public Program with Opt Out	Federal Public Plan Option	Medicare Buy-In (50-64)	Medicaid Buy-In
Medicare for All Act of 2019 (Rep. Jayapal) Medicare for All Act of 2019 (Sen. Sanders)	Medicare for America (Rep. DeLauro & Rep. Schakowsky)	Keeping Health Insurance Affordable Act of 2019 (Sen. Cardin) Medicare-X Choice Act (Sens. Bennet and Kaine/ Rep. Delgado) The CHOICE Act (Rep. Shakowsky/Sen. Whitehouse) Choose Medicare Act (Sen. Merkley & Rep. Richmond)	The Medicare at 50 Act (Sen. Stabenow) Medicare Buy-In Act of 2019 (Rep. Higgins)	State Public Option Act (Sen. Schatz/Rep. Luján)



Medicare-for-all

Sen. Sanders & Rep. Jayapal

- Cradle to grave coverage for all U.S. residents in one new "Medicare" program
- Replaces all other sources of coverage (except Veterans Administration, Indian Health Service)
- No premiums, deductibles or cost sharing (modest copays for prescription drugs in Sanders)
- Comprehensive benefits, including long-term services & supports
- Provider payments based on Medicare rates
- Government negotiates prescription drug prices
- Global budgets
- Federal financing--to be determined



Public Program With Opt Out

(Medicare for America)

Rep. DeLauro & Rep. Schakowsky

- Federal public program (Medicare for America) for all U.S. residents, with opportunity for individuals to opt out for qualified coverage; Medicare Advantage for America plans also offered
- Replaces Medicare, Medicaid, CHIP and individual insurance
- Employers may provide qualified coverage or purchase Medicare-for-America (8% of payroll);
 - Employees can elect Medicare-for-America instead of employer plan
- No premiums < 200% federal poverty level (FPL); income-related premiums above 200% FPL
- No cost sharing below 200% FPL; out-of-pocket limits up to \$3,500/individual and \$5,000/couple
- Comprehensive benefits including long-term services and supports
- Provider payments rates based on Medicare or Medicaid rates, whichever is greater



Federal Public Plan Options

Sen. Cardin; Sen. Merkley; Sen. Bennet; Rep. Schakowsky

- Establishes a federal public option; retains other sources of coverage
- Proposals with public plan options are similar to each other, but differ in ways, such as:
 - Eligibility criteria for public plan
 - Key Features of public plan
 - Benefits; cost-sharing and subsidies
 - ✓ Premiums, rating rules and subsidies
 - ✓ Provider payment rates
 - Changes to ACA marketplaces (e.g., cost-sharing subsidies)
 - Changes to current Medicare program (e.g., new out-of-pocket limit)



Medicare Buy-In for People Ages 50-64

Rep. Higgins & Sen. Stabenow

- Not the same as simply lowering the age of Medicare eligibility
- People ages 50-64 years old would have option to buy into Medicare
- Premiums would set to cover 100% of benefit & administrative costs for buy-in population
- Medicare benefits and cost-sharing (with new public Medigap option under the Higgins bill)
- ACA premium tax credits & cost-sharing subsidies applied to Medicare buy-in program
- Medicare providers and payment rates
- Secretary negotiates prescription drug prices
- No other changes to current Medicare program (firewall)



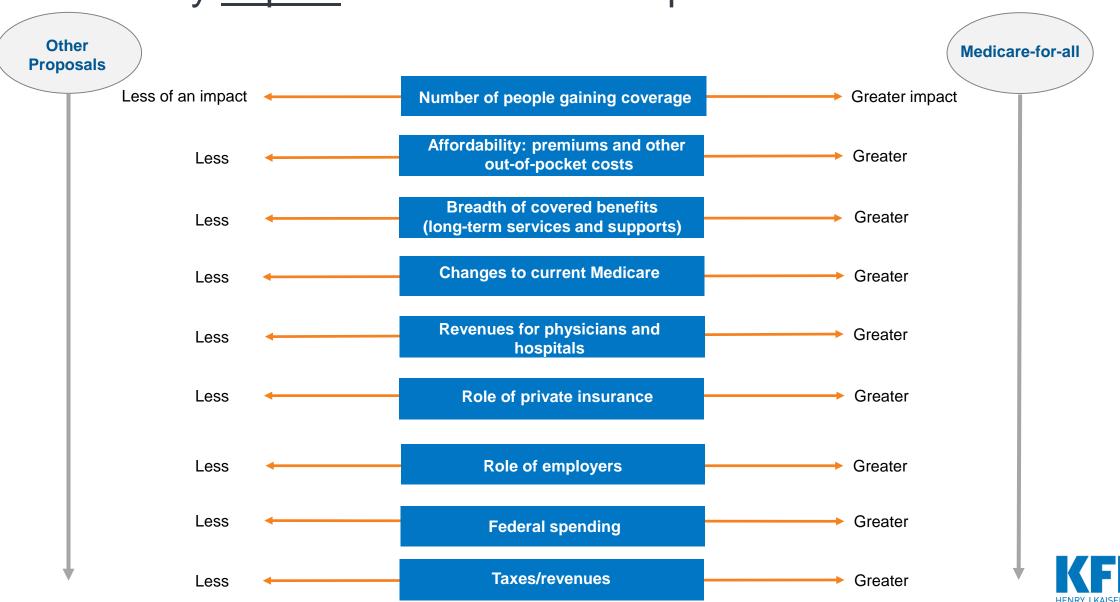
Medicaid Buy-In

Sen. Schatz & Rep. Luján

- Gives states the option to provide a public plan option based on Medicaid
- Eligible individuals can buy into the Medicaid plan through the marketplace
- Benefits-- ACA benefits (10 Essential Health Benefits) or broader
- Premiums set by states to be actuarially fair; no more than 9.5% of income
- Applies ACA premium tax credits & cost-sharing subsidies
- Uses Medicaid providers and payment rates, except Medicare rates for primary care
- Extends 100% Federal matching rate for states newly adopting Medicaid expansion



Likely Impact Varies Across Proposals



FAMILY FOUNDATION

Presidential Candidates Are Engaged On This Issue

Federal Public Plan Medicare Buy-In **Medicare-for-all Medicaid Buy-In Option (Or Opt Out)** (50-64)12 candidates 9 candidates 4 candidates 6 candidates

• Governor Jay Inslee [WA] signed into law a public option health care bill, S.B. 5526, Health Care & Long Term Care, May 13th, 2019.

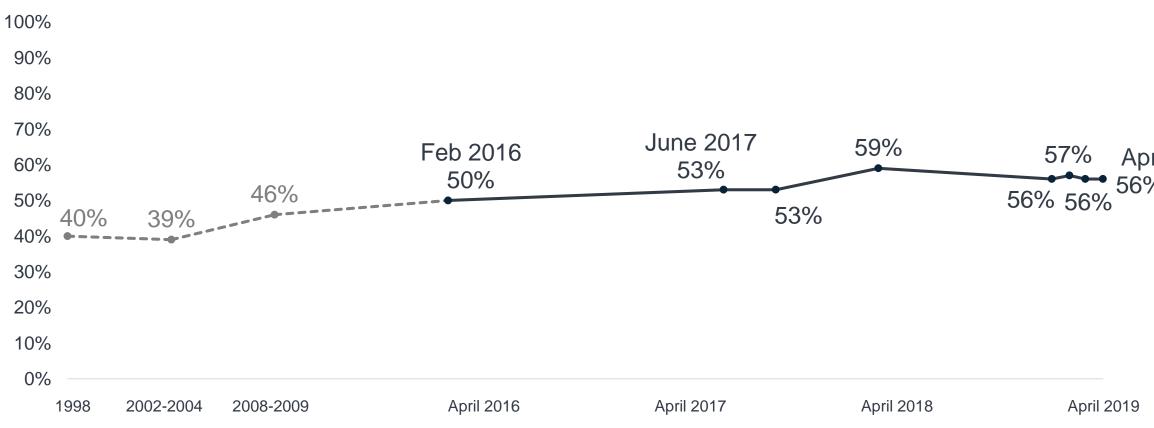
SOURCE: Candidate images are from the New York Times, 'Who's Running for President in 2020?", Updated May, 2019; Positions of current members of Congress are based on cosponsorship of legislation introduced in the 116th Congress. Other candidate positions are based on campaign websites (when available) and statements, but may not be tied directly to specific legislation. Sources are available upon request. Data as of 5/14/2019.



Figure 11

Modest Increase In Support For Single-Payer Health Care Over Time

Percent who **favor** a national health plan in which all Americans would get their insurance from a single government plan:



NOTE: Question wording has included "Medicare-for-all" since 2018. SOURCE: KFF Polls. See toplines for full question wording and response options.



Public's Attitudes On Proposals To Expand Medicare and Medicaid

■ Strongly or somewhat favor

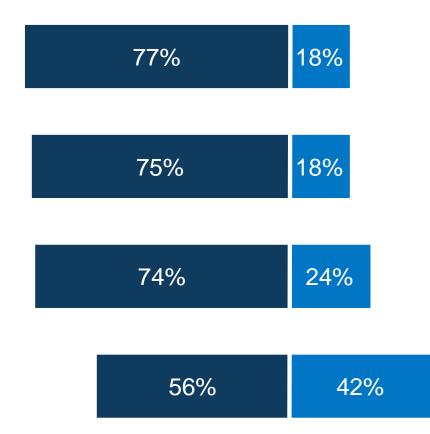
Allowing people between the ages of 50 and 64 to buy health insurance through Medicare

Allowing people who don't get health insurance at work to buy health insurance through their state Medicaid program instead of purchasing a private plan

Creating a national government administered health plan similar to Medicare open to anyone, but would allow people to keep the coverage they have

Having a national health plan, sometimes called Medicarefor-all, in which all Americans would get their insurance from a single government plan

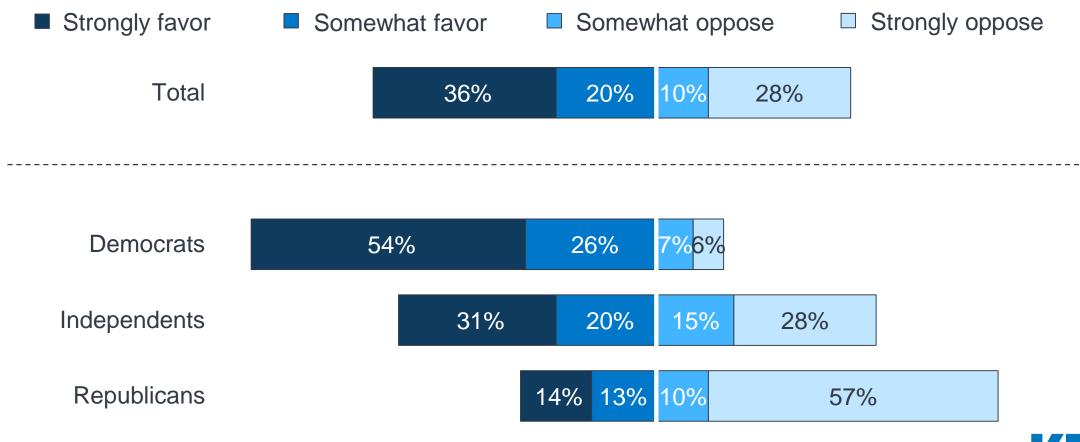






A Majority Of Republicans "Strongly Oppose" While A Majority Of Democrats "Strongly Favor" National Health Plan

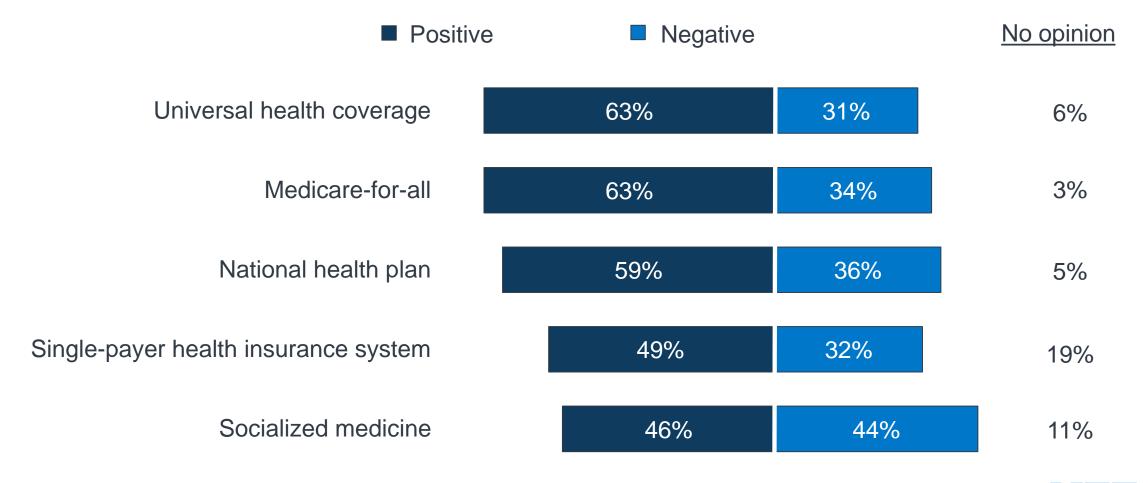
Do you favor or oppose having a national health plan, sometimes called Medicare-for-all, in which all Americans would get their insurance from a single government plan?





Terminology Affects Public Opinion On A National Health Plan

Do you have a positive or negative reaction to each of the following terms?





More Than Half Of Democrats And About Half Of Republicans Now Report Strong Partisan Reactions To Medicare-for-all

Percent of **Democrats** who say they have a "**very positive**" reaction:

Percent of **Republicans** who say they have a "very negative" reaction:

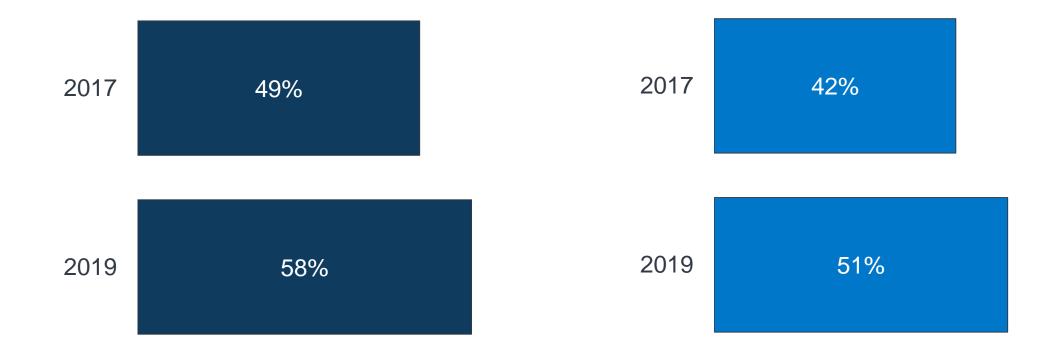




Figure 16

Public's Views Of Medicare-For-All Can Shift Significantly After Hearing Arguments On Either Side

■ Favor

Do you favor or oppose having a national health plan, sometimes called Medicare-for-all?

56%	42%	+14

Oppose

Would you favor or oppose a national Medicare-for-all plan if you heard that it would do the following?

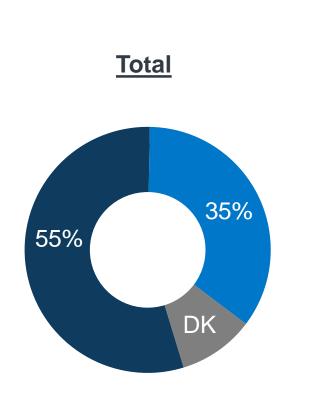
Guarantee health insurance as a right for all Americans	71% 27%	+45
Eliminate all health insurance premiums and reduce out-of-pocket health care costs for most Americans	67% 30%	+37
Eliminate private health insurance companies	37% 58%	-21
Require most Americans to pay more in taxes	37% 60%	-23
Threaten the current Medicare program	32% 60%	-28
Lead to delays in people getting some medical tests and treatments	26% 70%	-44



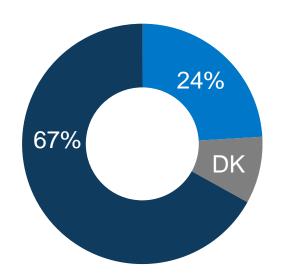
favorability

Public Education Challenges: Most (67%) Supporters Think They Would Be Able To Keep Their Health Insurance

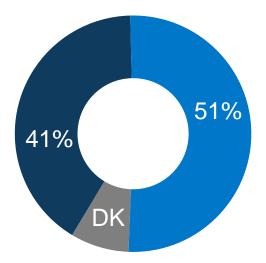
- Yes, think they and their family would be able to keep their current health insurance
- No, think they and their family would not be able to keep their current health insurance



Among those who **favor** having a national health insurance plan or Medicare-for-all



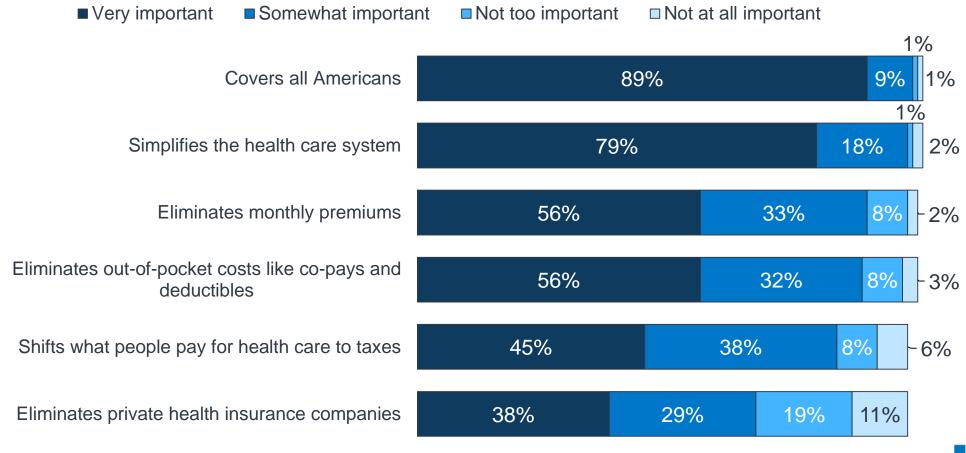
Among those who **oppose** having a national health insurance plan or Medicare-for-all





Universal Coverage Is Most Important Feature Of A National Health Plan Among Supporters

How **important** is it that a national health plan...?



NOTE: Among those who favor a national health plan.

SOURCE: KFF Health Tracking Poll (March 13-18, 2019). See topline for full question wording and response options.



Focus Group Participants' Questions About Medicare-For-All

If everybody has health insurance, and the government's covering it, how long will it take to see a doctor? It's concerning.

It says here, all people in the US... for anybody who

can walk across a river

Single payer, who's the payer? Are we the payer?

Those individuals who can afford to have the type of coverage they want, they wouldn't want a basic burger. No, they want to add all of the extra fixings because they can afford it.

What effect does it have on all the people who work for insurance companies? Are they out of jobs?

It seems like a **fairytale**.



What Focus Group Participants Like About Medicare-For-All

No one can be omitted, no ailment, no illness, nothing can be omitted. No age, no income. Everyone can get it, so that you can get the healthcare that you need.

This [system] strikes me as much more fair.

When businesses don't have to pay insurance premiums anymore, if they increase employees' pay, it would be great.

Even though your taxes may go up, you may actually have more money.

I get that it would raise taxes...but I believe in everyone taking care of each other in that way... everyone pitching in, so that everyone can be taken care of.

Everybody is **secure**.



Resources on KFF.org

- ✓ Compare Medicare-for-all and Public Plan Proposals
- ✓ Medicare-for-all and Public Plan Buy-In Proposals: Overview and Key Issues
- ✓ Public Opinion on Single-Payer, National Health Plans, and Expanding Access to Medicare Coverage

Thank you.

