Medicare for All Act

S. 1655 Senator Bernie Sanders

H.R. 3421 Rep. Pramila Jayapal » Rep. Debbie Dingell

Today's health care system fails to provide quality, therapeutic care to every U.S. resident and wastes hundreds of billions of dollars a year in unnecessary administrative costs. Covid-19 has exposed the existing patchwork system of private for-profit insurers for what it is — ineffective, inefficient, and unjustifiably unaffordable for our patients and for our country. Medicare for All would expand the cost-effective and administratively efficient Medicare program to finance comprehensive, high-quality health care for everybody in the United States. Most importantly, a Medicare for All — single-payer system — would provide health care based on patient need, not on profit.

Our current health care system is ineffective, inefficient, and expensive.

In the United States 27.5 million Americans are uninsured,[1] with 15 million more expected to lose Medicaid coverage with the ending of the public health emergency.[2] Meanwhile, an additional 46 million Americans aged 19-64 are underinsured.[3]

» 41 percent of adults have some debt from medical or dental bills. Of those with medical and dental bills, 24 percent of adults say that they are past due or unable to pay what they owe.[4] At least, $88 billion in medical debt is reported on credit reports, though the total amount of medical debt U.S. patients carry is likely higher.[5]

» In the last ten years, the average family premium for employer-sponsored health plans has increased 43 percent and the average deductible for single coverage employees has increased 61 percent.[6]
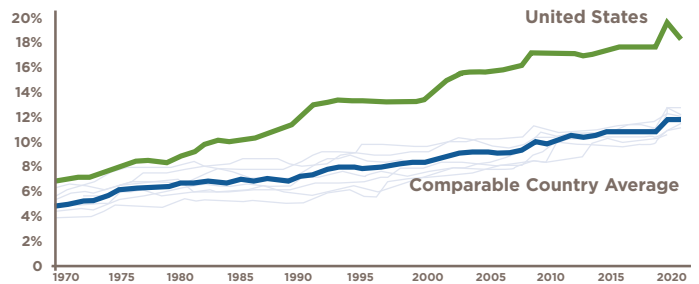
The United States spends twice as much on health care as other major industrialized countries.

» The patchwork system of private for-profit insurers has led to an extremely bloated administrative bureaucracy, costing $812 billion per year ($2,696 per insured person) and consuming 34.2% of total health care spending.[7]

» Americans pay excessive prices for medical visits and procedures.[8]

» In 2021, the U.S. spent 18.3 percent of GDP on health care, far exceeding other industrialized nations with projections of nearly 20 percent by 2030.[9]

	BYPASS SURGERY	APPENDECTOMY	MRI
Australia	$42,130	$5,177	$350
Netherlands	$15,742	$4,995	$461
Switzerland	$36,509	$9,845	$138
United States	$75,345	$13,910	$1,145

Source: Issue brief, Commonwealth Fund, 2015.

Health Consumption Expenditures as Percent of GDP » 1970–2021

Notes: U.S. values obtained from National Health Expenditure data. Health consumption does not include investments in structures, equipment, or research. 2021 data not yet available for Australia, Belgium, Japan or Switzerland. Provisional 2021 data for Austria, Germany, Netherlands, Sweden, France, United States and the United Kingdom. Provisional 2020 data for Sweden, Japan, Australia and Canada. Difference in methodology for Canada in 2020 and 2021.

Peterson-KFF **Health System Tracker**   Source: KFF analysis of National Health Expenditure (NHE) and OECD data

Despite spending more money per person on health care than any other country, the U.S. experiences extremely poor health outcomes.

» 33 percent of U.S. adults go without recommended care, do not see a doctor when sick, or fail to fill a prescription because of costs. Only 7–8 percent of people in the U.K., Germany, the Netherlands, and Sweden experience these problems.[10]

» The U.S. has the highest rate of preventable deaths under the age of 75 compared to all but six of the 38 Organization for Economic Co-operation and Development (OECD) countries and the highest rate of treatable deaths under the age of 75 compared to all but 10 of 38 OECD countries.[11]

» Among 13 other industrialized countries, the U.S. had the lowest life expectancy at birth and the highest infant and maternal mortality.[12]

» As of 2017, over 80 percent of Americans over the age of 65 were living with two or more chronic conditions, compared to only 33 percent in the United Kingdom.[13]

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National Nurses United

The Covid-19 pandemic has laid bare the fundamental flaws of our for-profit, fragmented health care system, and has shown the entire country just how deadly these flaws can be. We need a health care system that will prioritize the needs of patients, and provide equal access to quality, therapeutic health care for every person who needs it. A single-payer system has been proven to do this effectively in many countries throughout the world.

The majority of Americans want a Medicare for All health care system

An April 2020 poll by Hill.TV/HarrisX shows that 69 percent of registered voters support Medicare for All, with 88 percent of Democrats and 46 percent of Republicans supporting it. Young Americans overwhelmingly support a single payer program. The Hill.TV/HarrisX Poll showed that 79 percent of Americans between the ages of 18 and 49 support Medicare for All.[14]

Medicare for All dominated the 2020 Democratic primary elections. In every single state poll where Democratic voters were asked their opinions on Medicare for All, it was favored by a solid majority.

Support for a Medicare for All system is growing!

Medicare for All offers a comprehensive, life-saving solution to health care crisis

How It Works »

» A single-payer system would expand the existing Medicare program to cover everyone in the United States.

» A single government agency would replace private insurance companies and provide the public financing of health care.

» Patients would have their choice of health care providers.

» All medically necessary services would be covered, including doctor's visits, hospitalization, preventive care, long-term care, mental health, reproductive health, dental, vision, medical supplies, and prescription drugs.

» Hospitals serving vulnerable communities in rural and underserved areas would benefit from reliable and equitable funding which will improve health care in these communities and prevent hospital closures.

» The payments and reimbursements model would more fairly and effectively distribute care across the system, directing health care resources where they are needed most and where health inequities have been identified.

» The new system would lead to a net increase of 2.6 million jobs.[15] It would be an economic stimulus for small businesses which would no longer be responsible to pay for private employee health insurance.

» Medicare for All would enable the professional clinical judgment of doctors and nurses to be the basis of health care decisions.

» Individuals and employers would no longer be responsible for paying premiums, deductibles, and copays.

» Medicare for All would eliminate health insurance industry profits, marketing costs, and administrative waste and allow for the full scope of drug price negotiations, and medical fees, saving nearly $500 billion annually. This is enough to cover all of the uninsured and to eliminate deductibles, coinsurance, and copays for everyone, and still save the country trillions of dollars.

» Seniors would immediately benefit from more comprehensive coverage in Medicare, which would be improved to cover dental, vision, prescription drugs, and long-term care services. Seniors would no longer need supplemental insurance to cover aspects of their health care.

» Medicare for All would make health care a universal right, and health care would no longer be tied to employment. As a result, no person living in the United States would have to worry about losing their health care when they change jobs.

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