



Single Payer/Public Option/Medicare and Medicaid Buy-In Proposals January 2020

Bill No.	Sponsors	What It Does	Also Does and Other Notes
HR 1346 Medicare Buy-In and Health Care Stabilization Act of 2019 S470 Medicare at 50 Act <u>Bills are not identical*</u> (1)Stabenow (S470) allows buy-in to Medicare Advantage Part C (2)Stabenow (S470) only addresses buy-in and Part D benefits	Higgins Stabenow	<ul style="list-style-type: none"> • Medicare buy-in for age 50-64 for Parts A, B, and D* • APTC and cost-sharing reductions can reduce cost • Secretary creates rates actuarially • Can be age rated • Doesn't allow Medicaid eligible individuals to buy in 	<ul style="list-style-type: none"> • Includes federal reinsurance • Includes Part D negotiation of prices • Reauthorizes risk corridors • Enhances Cost sharing reductions • Funds navigators • Doesn't exclude agents <p><i>Higgins (HR1346) also:</i></p> <ul style="list-style-type: none"> • Creates a public option Medicare Supplement program • Makes private Medicare supplements available to buy-in population
HR2000 S981 Medicare X Choice Act of 2019	Delgado Bennet	<ul style="list-style-type: none"> • Individual market in some rating areas 2021 all areas 2024 • Sm. Grp. Mkt. 2025 • Silver and Gold • Providers paid Medicare rates • Payments based on quality of care and innovation without increasing spending • Providers must participate if they want to be included in Medicare 	<ul style="list-style-type: none"> • Expands APTC to 600% of poverty • Allows negotiation of Part D and Medicare X prescription drug rates • In addition to being paid Medicare rates, providers are paid based on quality of care and innovation that does not increase spending



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HR1277 S489 State Public Option Act House and Senate are identical bills	Lujan Schatz	<ul style="list-style-type: none"> Allows states to create a buy-in for Medicaid Allows Modified community rating, deductibles and coinsurance per ACA rules Primary care providers paid based on Medicare rates Individual market 	
HR1384 S1129 Medicare for All <u>Bills are not identical:</u> (1)Sanders (S1129) covers institutional long term care under Medicaid (2)Sanders (S1129) transition period is 4 years (3)Sanders (S1129) allows up to \$200 cost-sharing for prescription drugs	Jayapal Sanders	<ul style="list-style-type: none"> Medicare for all covers will cover everyone except VA and Indian Health Services Most medical services are covered with no cost-sharing including Long Term Care.* One year transition period for people over 55 and younger than 19. Two years for others* Buy-in during transition period Private coverage that duplicates covered benefits not permitted 	<ul style="list-style-type: none"> Global budget – Physicians not paid for as Medicare is today – likely to cause waiting lists for care. Provider payments will reduce substantially - may result in some facility closures. Physicians who opt out and contract directly with patients only permitted with strict contract and physician must sit out of Medicare program for 2 years

Note: Some presidential candidates have slight variations on these proposals.