**Improved Medicare for All**

**THE BREAKDOWN:**
- **EVERYBODY IN - NOBODY OUT** expands Medicare to cover everybody
- **COVERS ALL HEALTH NEEDS** lifelong coverage of medical, dental, vision & much more
- **FREEDOM & FLEXIBILITY** health services remain private with YOUR choice of doctors - no networks
- **EFFICIENCY + NEGOTIATION = LOWER COST** slashes bureaucracy and eliminates overcharges to save $3

**THE BOTTOM LINE:**
- **95% of people will pay LESS for healthcare than they do now**
  
  
  **WANT PROOF?** estimate YOUR savings with this calculator: www.hcfat.org/Calculator.html

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**Improved Medicare for All**

- **The U.S. spends 2X MORE on healthcare than nations that cover EVERYONE & have BETTER health**
- An efficient system to deliver healthcare to everyone in the U.S. - without increasing overall spending
- **average of 19 most costly healthcare countries (2016)**
  - ACA/Obamacare (2016)
  - Improved Medicare for All (post-transition - 2020)

<table>
<thead>
<tr>
<th>Cost per capita</th>
<th>$5,469</th>
<th>$9,892</th>
<th>$8,327</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population covered</td>
<td>100%</td>
<td>~80% (and declining)</td>
<td>100%</td>
</tr>
<tr>
<td>Services</td>
<td>ALL</td>
<td>partial/subject to restriction</td>
<td>ALL</td>
</tr>
<tr>
<td>Funding</td>
<td>public $</td>
<td>public $, premiums paid by employers &amp; employees, deductibles, copays, coinsurance</td>
<td>public $</td>
</tr>
<tr>
<td>Total cost</td>
<td>no data</td>
<td>$3.2 trillion</td>
<td>$2.7 trillion</td>
</tr>
</tbody>
</table>

Source: OECD 2016, House Resolution 676: Expanded and Improved Medicare for All, UN Population estimates - 2017

Calculated based on U.S. population of 325 million (2017 UN population estimates).

Assumes full implementation of HR676 in 2018 with 2 year transitional expenses satisfied, e.g. increased utilization, Medicaid rate adjustment, retraining and unemployment for displaced workers, and buy-out of private health care facilities -$394 billion (Friedman, 2013, “Funding HR 676...” https://bit.ly/NPQgb).

Actual per capita value is likely to be lower than projected due to negotiated prices for pharmaceutical and medical device products.
Q: WHY does the U.S. PAY SO MUCH FOR HEALTHCARE that doesn't adequately serve our needs?

A: UNNECESSARY COSTS due to PROVIDER MONOPOLIES and PRIVATE INSURANCE COMPANIES:

**PROFIT**
- executive salary & bonus
- marketing
- lobbying
- campaign contributions
- shareholders*

*Don't be fooled! "NON-PROFIT" hospital chains and insurers may not have shareholders, but they still have all the other expenses

**BUREAUCRACY**
- having dozens of insurance companies means
- **ENORMOUS ADMINISTRATIVE COSTS**
  - To cover staffing:
    - insurance companies
    - hospitals and clinics
  - **INCREASE PREMIUMS**
  - hospitals also to cover uninsured and underinsured patients


- **OVERCHARGE**

**PERSONAL**
- monthly premiums, copays, coinsurance & surprise out-of-pocket fees
- avoiding care because you can't afford it
- health decisions made by insurance companies ... NOT your health provider
- bankruptcy due to medical issues
- switching providers when networks change
- time spent dealing with billing issues, preauthorization paperwork, or claims for out-of-network providers
- emergency rooms overloaded with patients in need of primary care
- making job decisions based on healthcare coverage

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**Improved MEDICARE FOR ALL**

1. Eliminates **UNNECESSARY COSTS** for equipment, drugs, and medical devices by negotiating bulk pricing
2. LOWERS EXPENSES
3. Uses the **MONEY WE ALREADY SPEND**

Most of U.S. healthcare spending ALREADY comes from public dollars:

**CURRENT SPENDING**

<table>
<thead>
<tr>
<th>PUBLIC $</th>
<th>HOUSEHOLD $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicare</td>
<td>premiums</td>
</tr>
<tr>
<td>Medicaid</td>
<td>copays</td>
</tr>
<tr>
<td>ACA</td>
<td>deductibles</td>
</tr>
<tr>
<td>Tricare</td>
<td>coinsurance</td>
</tr>
<tr>
<td>Veterans</td>
<td></td>
</tr>
<tr>
<td>CHIP</td>
<td></td>
</tr>
<tr>
<td>IHS federal employees</td>
<td></td>
</tr>
</tbody>
</table>

**Improved MEDICARE FOR ALL**

| new public dollars (from payroll and other tax) that replaces what you ALREADY pay for private insurance |

**EVERYBODY gets healthcare AND overall spending is lower**

95% of households pay LESS*


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Healthcare for All, Y'all!
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