

*National Committee to Preserve Social Security and Medicare-PAC*

**2018 CONGRESSIONAL CANDIDATE QUESTIONNAIRE**

**Candidate Name:** \_\_\_\_\_ **State:** \_\_\_\_\_ **District:** \_\_\_\_\_

**Affordable Care Act**

The Affordable Care Act (ACA) is a highly complex law that includes Medicare benefit increases for seniors, makes improvements that help to contain health care costs, and extends the solvency of the Medicare Part A trust fund. In September 2017, the Senate tried, but failed to approve legislation to repeal the ACA. The ACA is not perfect, but it should be improved and not repealed. The ACA repeal legislation considered by the Senate would have only made matters worse for American seniors.

- Will you oppose legislative efforts relating to the ACA that would . . .

	YES	NO
✓ Permit states to allow insurance carriers to charge certain enrollees with pre-existing conditions thousands of dollars more than healthier individuals (40 percent of enrollees age 50 to 64 have one or more pre-existing condition.)?	<input type="checkbox"/>	<input type="checkbox"/>
✓ Permit states to allow insurance carriers not to offer essential health benefits like prescription drugs, chronic disease management and maternity care?	<input type="checkbox"/>	<input type="checkbox"/>
✓ Reduce the Medicare Part A Hospital Insurance trust fund's solvency by repealing the ACA's 0.9 percent Hospital Insurance trust fund payroll tax on wages above \$200,000 per individual or \$250,000 per couple?	<input type="checkbox"/>	<input type="checkbox"/>
✓ Allow insurers to charge older enrollees five times more than younger ones (The Congressional Budget Office predicts that by 2026 this provision will substantially raise premiums for older people, e.g., 20 percent to 25 percent higher for a 64-year-old.)?	<input type="checkbox"/>	<input type="checkbox"/>
✓ Jeopardize long-term care and other services by restructuring Medicaid into per capita caps or block grants (Nearly two-thirds of all nursing home residents' care is financed in part by Medicaid.)?	<input type="checkbox"/>	<input type="checkbox"/>
✓ Phase out the Medicaid expansion which will take away health coverage for low-income seniors under the age of 65?	<input type="checkbox"/>	<input type="checkbox"/>

- |  | Yes                      | No                       |
|--|--------------------------|--------------------------|
| ✓ Increase seniors' out-of-pocket costs by repealing the ACA's subsidies, based on income and the cost of health insurance, that help defray the cost of premiums (The House-passed American Health Care Act would have provided refundable tax credits ranging from \$2,000 to \$4,000, based solely on age. For many people age 60 and older, a \$4,000 tax credit would fail to make comprehensive coverage affordable.)?                               | <input type="checkbox"/> | <input type="checkbox"/> |
| ✓ Impose an onerous premium surcharge of 30 percent for individuals who reenter the insurance market after a lapse in coverage of over 63 days (This penalty could be particularly burdensome for older, sicker individuals who rely more heavily on health insurance than younger and healthier individuals. Breaks in coverage are often due to honest mistakes or misinformation, but the AHCA does not include any exemptions to help in such cases.)? | <input type="checkbox"/> | <input type="checkbox"/> |

### **Medicare**

Medicare helps prevent poverty and promotes greater access to health care for people 65 years of age and older and people with disabilities. Even though half of all Medicare beneficiaries in 2016 had incomes below \$26,200, Medicare households spent over two times more than the average American household on out-of-pocket health care costs.

Older Americans should not have to choose between paying for health care, food or utilities. Medicare benefits must be improved, not cut. Medicare's long-term solvency must be strengthened, and access to health care providers and benefits must be enhanced and preserved. Unfortunately, the majority leadership of the 115th Congress have prioritized a plan that would undermine the health security of current and future retirees and people with disabilities by ending traditional Medicare, cutting improvements made to Medicare by the Affordable Care Act, and raising the Medicare eligibility age.

- |  | YES                      | NO                       |
|--|--------------------------|--------------------------|
| • Will you oppose Medicare privatization proposals (also known as "premium support") that would increase costs for beneficiaries, make it harder for them to choose their own doctors, and lead to the demise of traditional Medicare?                                 | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you oppose proposals to raise the Medicare eligibility age from 65 to 67?   | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you oppose weakening the social insurance nature of Medicare by further expanding means-testing of Part B and Part D premiums, an increase that would affect many middle-income Americans as well as wealthier beneficiaries who already pay more for Medicare? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support phasing out overpayments to private Medicare Advantage plans which will save Medicare \$156 billion over ten years?   | <input type="checkbox"/> | <input type="checkbox"/> |

- |   | Yes                      | No                       |
|---|--------------------------|--------------------------|
| • Will you support legislation to count all days in the hospital, whether in observation status or as an inpatient, toward meeting the three-day prior hospitalization requirement to be eligible for Medicare coverage of skilled nursing facility care?                             | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support proposals to cover vision, dental and hearing services under Medicare?   | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support legislation that would create a catastrophic out-of-pocket limit for spending in traditional Medicare?   | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support increased federal funding for Alzheimer’s research to stop the escalating financial drain on family caregivers, Medicare and Medicaid?   | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support creating a Medicare-operated prescription drug benefit?  | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support authorizing Medicare to negotiate drug prices similar to what the Department of Veterans Affairs does now to achieve the lowest prices possible for seniors?   | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support allowing Medicare to receive the same rebates as Medicaid for brand name and generic drugs provided to beneficiaries who receive the Part D Low-Income Subsidy?  | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support improving Part D for low-income seniors by 1) eliminating the asset test when determining eligibility for the Part D Low-Income Subsidy and 2) ensuring low-income Medicare beneficiaries are enrolled in the Part D plan most appropriate for their health needs? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support efforts to lower drug costs, including for the Medicare program and beneficiaries, by reducing the length of market exclusivity for biologics from 12 to 7 years?  | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you oppose efforts to drive up drug costs for the Medicare program and beneficiaries through policies and practices that delay generic completion such as so-called “pay-for-delay” agreements between brand name and generic drug makers?                                     | <input type="checkbox"/> | <input type="checkbox"/> |

**Social Security**

Social Security is our nation’s most important and effective income security program. It faces both short-term and long-term financial challenges. The Disability Insurance (DI) program is approaching depletion of its trust fund in 2023 and will be able to pay only about 80 percent of expected benefits thereafter. The Old Age, Survivors (OAS) program is fully financed through 2034 and will be able to pay approximately 79 percent of expected benefits thereafter.

Some propose to resolve these funding challenges by cutting Social Security benefits, whether by using the “Chained Consumer Price Index” for calculating beneficiary cost-of-living adjustments (COLAs), raising the retirement age, or through adjustments to the benefit formula to reduce benefits for future retirees. Others propose strengthening Social Security by increasing revenue and improving benefits for the growing share of Americans who depend on the program for all or most of their income in retirement.

Resolving Social Security’s funding challenge in a way that improves benefits is particularly important to women. Their Social Security benefits on average are lower than men’s and their pension and retirement savings and investment opportunities are constrained because they face persistent wage discrimination, are more likely to leave careers to care for family members, and can anticipate longer life expectancies.

The following are questions that the National Committee to Preserve Social Security and Medicare is posing to all candidates for Congress.

- |  | YES                      | NO                       |
|--|--------------------------|--------------------------|
| • Will you favor increasing benefits for workers by granting caregiver credits to workers, usually women, who take time out from the workforce in order to provide care to family members?   | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support strengthening COLAs by basing them on a fully developed Consumer Price Index for the Elderly, which would more accurately measure the effect of inflation on the price of goods and services that are purchased by seniors? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support proposals to improve benefits provided to a widow or widower by guaranteeing a benefit equaling 75 percent of the couple’s combined Social Security benefit?  | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support raising or repealing the Social Security “earnings cap,” which currently exempts workers from paying Social Security taxes on earnings in excess of \$127,200?  | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support combining the Old Age and Survivors (OASI) Trust Fund and the Disability Insurance (DI) Trust Fund into a single Social Security fund?  | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you oppose shifting to the “Chained CPI” for the purpose of calculating cost-of-living adjustments for Social Security beneficiaries?   | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you oppose increasing the retirement age for future retirees?   | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you oppose making changes to the Social Security benefit structure for the sole purpose of reducing the federal deficit?  | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support restoring the Social Security survivors’ student benefit until age 22 if the child is a full-time student in college or a vocational school?  | <input type="checkbox"/> | <input type="checkbox"/> |

## **Tax Legislation**

Legislation being considered by Congress would result in cuts to Medicare, Medicaid and Social Security – all to pay for massive tax breaks for the very wealthy and profitable corporations. Under both House and Senate tax bills, \$1.5 trillion of the legislation’s nearly \$6 trillion cost would not be paid for. By increasing the federal budget deficit by at least \$1.5 trillion, the tax bill would leave Social Security, Medicare and Medicaid vulnerable to benefit cuts to make up the difference.

In addition, both bills use the chained CPI to index increases in tax brackets and deductions, which will result in a tax increase. If the chained CPI is used as an index in the tax code, supporters of cutting Social Security are likely to demand that the chained CPI is used to cut Social Security and federal civilian and military retirement cost-of-living adjustments (COLA).

The House-passed bill repeals the medical expense deduction. Presently, the medical deduction allows individuals to deduct the costs of very high out-of-pocket health care and/or long-term care costs. The bill repeals that provision. About three-quarters of the 8.8 million taxpayers who claim the medical expense deduction are 50 or older, and more than 70 percent have incomes \$75,000 or below.

A provision in the Senate tax bill to repeal the ACA’s individual health coverage mandate will leave 13 million Americans uninsured, destabilize the health insurance market and skyrocket premiums. Millions of seniors not yet eligible for Medicare depend on the ACA for their health coverage.

- |   | YES                      | NO                       |
|---|--------------------------|--------------------------|
| • Do you oppose tax legislation that would explode the budget deficit, thereby leading to cuts in Medicare, Medicaid and Social Security? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Do you oppose using the chained CPI to index tax brackets and deductions?   | <input type="checkbox"/> | <input type="checkbox"/> |
| • Do you oppose the repeal of the medical expense deduction?  | <input type="checkbox"/> | <input type="checkbox"/> |
| • Do you oppose the repeal of the ACA’s individual mandate?   | <input type="checkbox"/> | <input type="checkbox"/> |

## **Pensions and Retirement Savings and Investments**

Today’s workers find it increasingly difficult to prepare adequately for their retirement years. Only 20 percent of American workers have traditional, defined-benefit pensions, down from 50 percent in 1975. Employers who do offer “retirement plans” have shifted from traditional pensions to less stable defined-contribution plans, such as 401(k) plans, leaving employee retirement savings and income highly vulnerable to stock market downturns. Even when employees participate in defined-contribution plans, stagnant wages, frequent job changes and market downturns make it difficult to accumulate meaningful account balances. The *median* workplace retirement account balance is just \$31,396 and the average

401(k) balance *at retirement* is less than \$200,000—enough to generate only about \$7,500 annually during retirement.

- |   | YES                      | NO                       |
|---|--------------------------|--------------------------|
| • Will you support automatic 401(k) enrollment upon hiring?   | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support the broad disclosure of 401(k) fees?   | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support obligating 401(k) plan sponsors to constantly monitor the expenses of their plan funds?  | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will you support proposals to hold retirement plan financial advisors to an “investor best interest fiduciary” standard rather than a “suitability” standard? | <input type="checkbox"/> | <input type="checkbox"/> |

**Candidate comments and attachments on other issues and experience viewed as important to seniors and their families are welcome. For questions or additional information, please contact Phillip Rotondi by telephone at 202/216-8376 or by email at [ncpac@ncpssm.org](mailto:ncpac@ncpssm.org). This questionnaire also can be provided by email as a Word document.**