



Issues Affecting Retiree Power

November 13 – 15, 2018
Las Vegas, NV



2018 National Membership Meeting



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“But you also have to bring spending under control... The driver of our debt is the structure of Social Security and Medicare for future beneficiaries.”

Senator Marco Rubio (R, FL) Washington Post, December 2, 2017

"I think it would be safe to say that the single biggest disappointment of my time in Congress has been our failure to address the entitlement issue.”

Mitch McConnell, (R, KY) Bloomberg News, October 17, 2018



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President's FY 2019 Budget

- Cuts non-defense discretionary by 40%, \$2 Trillion
- Cuts Social Security and Medicare
- Repeals the ACA
- Cuts Medicaid and block grants it
- Eliminates LIHEAP
- Cuts nutrition program, including
- Meals-on-Wheels
- Eliminates Community Services Block Grant (CSBG)



House FY 2019 Budget

- Cuts \$6.5T in spending; increases defense by \$750B
- Cuts \$537B from Medicare
 - Raises the age of eligibility from 65 to 67
 - Voucherizes Medicare
- Slashes Medicaid by \$1T
- Repeals ACA, including protections for pre-existing conditions
- Cuts Social Security by \$4B
- Cuts \$923B from income security, including nutrition

Medicare Threats

- Raising the age of eligibility
- Voucher and Privatization
- "Redesigning" Medicare
- Means-Testing



Medicare for All

July 19, 2018, Dems launched “Medicare for All” Caucus

- Bennet, S. 1970, would allow those on health exchanges to buy-in to Medicare
- Merkley, S. 2708, would allow Medicare “public option”
- Stabenow, S. 1742, would allow 55 to 64 year old to buy-in to Medicare
- Sanders, S. 1804, bill would be a “single payer,” gradually lower Medicare age, eliminates co-pays and deductibles, cover vision and dental



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Drug Price Negotiations

- Drug negotiations
- Drug Formulary
- Empowering Medicare Seniors to Negotiate Drug Prices, S. 1688 (Sen. Klobuchar)
- Medicare Negotiation & Competitive Licensing, H.R. 6505 (Rep. Doggett)



Medicare Drug Savings Act

- S. 252, Medicare Drug Savings Act, Sen. Nelson (D – FL), would require drug companies to provide rebates to low-income Medicare and Medicaid beneficiaries.
 - Saves Medicare \$145 billion over 10 years
 - Reduces the need to shift costs on to Medicare beneficiaries