

Matt Cartwright supports “Medicare for All” legislation that could eliminate private insurance, raise taxes, and cause doctor shortages and hospitals to shut down.

- **Rep. Cartwright is a co-sponsor of H.R.1384 - To establish an improved Medicare for All national health insurance program.** ([H.R. 1384](#), Introduced 2/27/19)
- **Under this plan, all current forms of insurance, including private insurance, would be eliminated.** “All current forms of insurance for acute care would be eliminated, including private insurance, Medicaid, and Medicare, and everyone residing in the US would be covered by a new public insurance program.” (“From Incremental to Comprehensive Health Reform: How Various Reform Options Compare on Coverage and Costs,” [Urban Institute](#), 10/16/19)
- **Under a single-payer plan, households will face increased taxes to pay for these programs.** “However, households will face increased taxes to finance any of these reforms, and we do not account for this.” (“From Incremental to Comprehensive Health Reform: How Various Reform Options Compare on Coverage and Costs,” [Urban Institute](#), 10/16/19)
- **As more costs are covered by the federal government instead of private entities, the greater the increase in federal taxes.** “The more costs are covered by the federal government instead of private entities (employers and households) and states, the greater the increase in federal taxes needed to finance them.” (“From Incremental to Comprehensive Health Reform: How Various Reform Options Compare on Coverage and Costs,” [Urban Institute](#), 10/16/19)
- **According to Betsy McCaughey, senior fellow at the London Center for Policy Research, an influx of younger patients into the UK health system, or a similar influx in the US, if Medicare-for-all were to pass, will decrease care available to seniors, create in-network doctor shortages and incentivize hospitals to lock out seniors.** “Faced with a budget crisis, Britain’s National Health Service is limiting the procedures seniors need most: hip and knee replacements, cataract operations, angioplasty and colonoscopies. It’s a preview of what American Boomers can expect under a ‘Medicare for all’ system. Whenever people over 65 have to compete with a younger population for health resources, they lose. Britain’s Boomers are being told they have fewer years of life ahead to benefit from costly medical procedures. ... Likewise, seniors here will have to brace themselves for shortages if Congress expands Medicare to younger people. It’s already tough for 65-and-overs to find a doctor willing to accept Medicare’s stingy payments. More than a fifth of doctors are turning away new Medicare patients, according to a Kaiser Family Foundation survey. Expanding Medicare will suddenly invite some 10 million more patients to compete for the same doctor appointments and surgery slots — a sudden 20 percent increase in demand. ... A year ago, when Hillary Clinton proposed expanding Medicare to people in their 50s, hospital organizations howled in protest, warning that it would threaten seniors’ access to care. Hospitals and doctors will devise ways to avoid treating them. That’s because Medicare pays only about 90 cents for every dollar of care, shortchanging hospitals and doctors. They take the payments, and then shift the unmet costs onto patients with private insurance. But the more Medicare is expanded, the harder the cost shifting will become. And the more doors will be slammed shut in seniors’ faces.” (Betsy McCaughey, Op-Ed, “Why ‘Medicare for all’ means deadly trouble for seniors,” [New York Post](#), 8/8/17)
- **Medicare for All is single payer health care.** “Single-payer national health insurance, also known as “Medicare for all,” is a system in which a single public or quasi-public agency

organizes health care financing, but the delivery of care remains largely in private hands.”
(Physicians for a National Health Program, “[About Single Payer](#),” Accessed 3/2/20)

- **Hospital administrators from Texas to Maine reported that a single-payer government health care program would force more rural hospitals to close.** “Adopting a single-payer government health care program that covers all Americans would force more rural hospitals to close, according to hospital administrators from Texas to Maine.” (Peter O'Dowd, “Rural Hospitals Say ‘Medicare For All’ Would End Up ‘Closing Our Doors’,” [WBLR](#), 8/16/19)