

The Ryan Medicare Plan

Ending Medicare, Increasing Seniors' Health Care Costs

Rep. Paul Ryan's Medicare plan would end traditional Medicare and put seniors at the mercy of private insurance companies, dramatically increasing their health care costs and limiting their choice of doctors and medical care.

ENDS MEDICARE

- **Seniors will be forced into private insurance plans:** The plan would significantly increase seniors' out-of-pocket health care costs, put their benefits at risk and limit their access to doctors of their choice.
- **False GOP claims that Medicare will still exist:** Any plan to privatize Medicare – even if it offers the option to stay with traditional Medicare – will effectively end the program. Health insurance companies will cherry-pick healthier enrollees and traditional Medicare will attract a less healthy pool of beneficiaries, causing the oldest, frailest seniors to pay much more in order to stay with the traditional plan that they know and like.

RAISES SENIORS' HEALTH CARE COSTS

- **Increases seniors' health care costs by \$6,400 starting in 2022:** According to the nonpartisan Congressional Budget Office, Ryan's 2011 budget would double seniors' health costs by 2022.
- **Raises Medicare eligibility from 65 to 67:** The plan would raise costs for millions of Americans who would be at the mercy of private insurance companies until they reach the new eligibility age.
- **Eliminates key improvements to Medicare:** Seniors would see their costs rise with the repeal of new benefits, including reopening the prescription drug doughnut hole, reinstating cost-sharing for life-saving preventive benefits and eliminating a new annual wellness visit. The plan would end new tools already successfully fighting fraud, waste and abuse, and thwart promising efforts to modernize the medical delivery system to improve quality and reduce costs for Medicare patients.

GIVES POWER BACK TO INSURANCE COMPANIES; DENIES SENIORS ACCESS TO DOCTORS OF CHOICE

- **Seniors will see their options limited:** Seniors will only be able to see the doctors, other health care providers and hospitals that are under contract with their insurance company. Today, Medicare allows seniors the freedom to choose their own health care providers from a broad provider network, as most physicians and hospitals participate in Medicare.
- **Insurance companies can pick and choose what benefits to cover:** Private insurance companies are not required to provide all of today's Medicare benefits, only those that are "actuarially equivalent" to the benefits under traditional Medicare. Bottom line: A plan could easily decide not to cover chemotherapy or other costly services, leaving some beneficiaries underinsured or burdened with expensive premiums and out-of-pocket costs.