Medicare guarantees access to health care for older adults and people with disabilities. Together with the Affordable Care Act (ACA) and Medicaid, Medicare builds health security for Americans of all ages. Any changes to Medicare must aim for healthier people, better care, and smarter spending—not paying more for less.

Some lawmakers support increasing the Medicare eligibility age from 65 to 67. This costly benefit cut is sometimes defended by arguing that as Americans live longer and delay retirement, most people will not need Medicare at age 65. But most Americans retire well before age 67—half of all men are retired by age 64 and half of all women by age 62.¹

Raising the Medicare age is unpopular with Americans of all ages.

- More than 60% of Americans ages 18-54 and nearly 70% of those ages 55-64 do not support raising the eligibility age.¹

Many older adults would pay more or go without affordable coverage.

- Between almost **1.9 million to 3.8 million** people ages 65 and 66 could lose health insurance, depending on the continued availability of ACA coverage options.²

- If the ACA is repealed, the uninsured rate among Americans ages 65 and 66 could jump from **1.1%** to **as high as 37%** in 2019.³

- Premiums would likely go up for all people with Medicare coverage. The absence of younger, healthier 65- and 66-year-olds in Medicare would leave an older, sicker, and more expensive group for the federal government to insure.⁴

### People with Medicare: Just the Facts

**Most people with Medicare cannot afford to pay more.** Half of all people with Medicare have incomes less than **$24,150** per year and have **$63,350** or less in savings.

**People of color live on even less.** The median income for black beneficiaries is **$16,150 per year** and just **$12,800** for Hispanic beneficiaries.

**Older people of color are more likely to live in poverty.** The poverty rate is **18%** for black adults over 65 and **20%** for Hispanic adults compared to **7%** for white adults.

**People with Medicare already pay a significant amount towards health care.** In 2012, they paid **14%** of household expenses towards health care costs, compared with only **5%** for those not yet on Medicare.

**Baby Boomers need Medicare to retire.** Among future retirees, half will have incomes below **$28,450** per year and **$102,800** or less in savings.
Working-class people and diverse communities would be especially harmed.

- Increasing the Medicare eligibility age is particularly punitive for those who perform physical labor.\textsuperscript{vi} Machine operators, farm workers, and others with jobs that require physical activity and manual labor are often unable to delay retirement.\textsuperscript{vii}

- Diverse communities would be among those hardest hit. People of color tend to be in poorer health at earlier ages, with lower incomes and less wealth. Access to Medicare at the earliest possible age is essential—if not life-saving—for diverse elders.\textsuperscript{viii}

Hiking the Medicare age does not save costs—it merely shifts costs.

- Raising the Medicare eligibility age saves the federal government money at the expense of the individuals, employers, and states that would bear the cost of insuring 65- and 66-year-olds.

- Increased costs borne by these groups would more than offset any savings to the federal government. Estimates suggest increased costs overall would be two times the cost savings for the federal government—$11.4 billion in cost shifting versus $5.7 billion in federal savings in 2014.\textsuperscript{x}

- Without Medicare, employers would pick up some of the tab to insure 65- and 66-year-olds. If implemented in 2014, employers would have paid an increase of $4.5 billion in employer retiree health care costs.\textsuperscript{x}

\begin{itemize}
  \item 57 million Americans rely on Medicare for health insurance coverage.
  \item Medicare does a better job of controlling costs than private health plans. From 2010 to 2015, Medicare spending rose by an average of 1.4\% per person per year—less than half the growth rate of private insurance.
  \item Medicare will be able to fully pay on inpatient claims until 2028. Improvements included in the ACA strengthened Medicare’s financial outlook.
  \item More than 95\% of Americans consider Medicare an important program, and around 90\% of Americans want federal Medicare spending to stay the same or increase.
\end{itemize}

"I was uninsured for three years because I lost a job, and I could only find jobs that did not include health care. That all changed when I turned 65 and signed up for Medicare. That was one of the happiest days of my life! I cannot begin to tell you how relieved I was. And since that time, Medicare has improved to include some preventive care, and that makes it even better."

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\textsuperscript{1} Center for Retirement Research, “The Average Retirement Age—An Update,” (March 2015)
\textsuperscript{2} Kaiser Family Foundation, “Medicare And Medicaid At 50,” (July 2015)
\textsuperscript{3} National Committee to Preserve Social Security and Medicare Foundation, “Impact of Raising Eligibility Age of Medicare,” (January 2017)
\textsuperscript{4} National Committee to Preserve Social Security and Medicare Foundation, “Impact of Raising Eligibility Age of Medicare,” (January 2017)
\textsuperscript{5} Center on Budget and Policy Priorities, “Raising Medicare’s Eligibility Age Would Increase Overall Health Spending and Shift Costs to Seniors, States, and Employers,” (August 2011)
\textsuperscript{7} American Institute for Economic Research, “No Easy Social Security Fix,” (May 2012)
\textsuperscript{8} Medicare News Group, “Raising the Medicare Eligibility Age Harms Minorities, Is a “Benefits Reduction, Experts Say,” (August 2012)
\textsuperscript{9} Center on Budget and Policy Priorities, “Raising Medicare’s Eligibility Age Would Increase Overall Health Spending and Shift Costs to Seniors, States, and Employers.” (August 2011)
\textsuperscript{10} Kaiser Family Foundation, “Raising the Age of Medicare Eligibility: A Fresh Look Following Implementation of Health Reform,” (July 2011)