April 25, 2021

President Joseph R. Biden
The White House
1600 Pennsylvania Avenue
Washington, DC 20500

Dear President Biden:

We write to ask that, as part of the American Families Plan, you propose reducing the Medicare eligibility age, expanding Medicare benefits to include hearing, dental, and vision care, implementing a cap on out-of-pocket expenses under traditional Medicare, and negotiating lower drug prices.

As you know, Medicare has been one of the most successful and popular federal programs in our nation’s history since it was signed into law by President Lyndon Johnson in 1965. Now, 55 years later, the time is long overdue for us to expand and improve this program so that millions of older Americans can receive the health care they need, including eyeglasses, hearing aids and dental care.

While the American Rescue Plan Act made coverage more affordable, millions of older Americans are still uninsured or under-insured. Lowering the eligibility age for Medicare would help these individuals significantly. Twenty-seven percent of adults age 50 to 64 are not confident that they can afford health insurance over the next year, and more than a quarter report issues with navigating health insurance options, coverage decisions, and how their choices will affect their out-of-pocket costs. Researchers have found that there is a massive spike in the diagnosis of cancer among Americans who reach the age of 65 that could have been diagnosed much earlier if the Medicare eligibility age had been lower. Lowering the Medicare eligibility age to 60 could expand Medicare coverage to 23 million people, including nearly 2 million uninsured people, while lowering it to 55 could give over 42 million people access to the program, and lowering it to 50 could cover 63 million Americans. Lowering the Medicare eligibility age is not only the right thing to do from a public policy perspective, it is also what the overwhelming majority of Americans support. According to a recent Gallup poll, 65 percent of Americans support lowering the Medicare eligibility age.

There is also an urgent need to improve the current Medicare benefit. In America today, half of all adults over age 75 have hearing loss, as do one-third of adults age 65 to 74, according to the National Institute on Deafness and Other Communication Disorders (NIDCD). Yet more than 70 percent of older Americans who could benefit from a hearing aid do not have one—too often because hearing aids are simply too expensive. With costs ranging from $1,000 to as much as $6,000 for a single hearing aid, that simple and necessary device is simply out of reach for millions. Even when certain over-the-counter hearing aids become available, as required by law,
some hearing devices and hearing care will still be outrageously expensive. Inability to hear properly often leads to social isolation and depression and can be dangerous for people who can no longer hear warnings or alarms. No senior citizen in America should be isolated from their families and the communities in which they live simply because they cannot afford hearing care.

In addition, we must address the dental crisis in America, which is particularly acute in our nation’s elderly and disabled population. Today, over 70 percent of senior citizens have no dental insurance. The results have been tragic. Incredibly, more than a quarter of senior citizens in this country are missing all of their natural teeth with many unable to properly digest the food that they eat because they cannot afford a full set of dentures – which can cost anywhere from $2,500 to more than $5,000. While 70 percent of older Americans have gum disease - which can lead to rheumatoid arthritis and cardiovascular disease - half of senior citizens have not been to the dentist in over a year and about 20 percent have untreated cavities.

Further, senior citizens with poor vision should not be forced to go without routine eye exams or eyeglasses because of the cost, and instead deal with the disability, cognitive impairment, or depression that can result with ongoing vision problems.

At a time when half of senior citizens are trying to survive on less than $2,200 a month, we should also apply an out-of-pocket spending limit to traditional Medicare, as we have for Medicare Advantage plans and other private insurance plans through the Affordable Care Act.

In order to pay for these much needed improvements, we believe Medicare and the federal government should do what every major country on earth does: negotiate with pharmaceutical companies to lower the high price of prescription drugs. The Congressional Budget Office has estimated that requiring Medicare to negotiate with the pharmaceutical companies could save Medicare at least $456 billion and increase revenue by at least $45 billion over the next decade. In our view, savings that are achieved through price negotiation should be used to expand and improve Medicare.

We have an historic opportunity to make the most significant expansion of Medicare since it was signed into law. We look forward to working with you to make this a reality and, in the process, substantially improve the lives of millions of older Americans and persons with disabilities.

Sincerely,

Bernard Sanders
United States Senator

Debbie Stabenow
United States Senator

Benjamin L. Cardin
United States Senator

Elizabeth Warren
United States Senator
Tammy Baldwin  
United States Senator

Richard J. Durbin  
United States Senator

Chris Van Hollen  
United States Senator

Edward J. Markey  
United States Senator

Cory A. Booker  
United States Senator

Kirsten Gillibrand  
United States Senator

Jeffrey A. Merkley  
United States Senator

Richard Blumenthal  
United States Senator

Tina Smith  
United States Senator

Sherrod Brown  
United States Senator
Tammy Duckworth
United States Senator

Sheldon Whitehouse
United States Senator

Alex Padilla
United States Senator