



COUNCIL OF ACCOUNTABLE PHYSICIAN PRACTICES

An affiliate of the AMGA Foundation

What’s the difference between “single payer” and “Medicare for All”?

At CAPP, we believe that every person should receive high-quality, affordable health care through a coordinated, value-based delivery system. As Medicare for All calls have become commonplace in health policy conversation, the nuances of each plan are important for the health care system. Here are simple explanations and information about what the options mean.

Medicare for All	Public Option	Medicare Buy-in	Medicaid Buy-in
OVERVIEW Creates a single national health insurance program, administered by the federal government, for all US residents.	OVERVIEW Federal public plan option offered to eligible individuals; would compete with other private insurance plans	OVERVIEW Provides an option for individuals to buy into Medicare	OVERVIEW Provides an option for individuals to buy into a state’s Medicaid program
PROVIDER PAYMENTS Typically fee-for-service (FFS)	PROVIDER PAYMENTS Typically FFS-would not fall below current Medicare payment rates	PROVIDER PAYMENTS Follows Medicare payment rates (FFS); Medicare participating providers	PROVIDER PAYMENTS States required to pay primary care providers at least Medicare rates (FFS)
PROVIDER PARTICIPATION All state-licensed and certified providers	PROVIDER PARTICIPATION Medicare (and sometimes Medicaid) participating providers	PROVIDER PARTICIPATION Medicare participating providers	PROVIDER PARTICIPATION Medicaid providers, including Medicaid managed care organizations
ELIMINATES PRIVATE INSURANCE? Yes	ELIMINATES PRIVATE INSURANCE? No	ELIMINATES PRIVATE INSURANCE? No	ELIMINATES PRIVATE INSURANCE? No
FINANCED <ul style="list-style-type: none"> • Taxes • No premiums and limited cost sharing if any 	FINANCED <ul style="list-style-type: none"> • Premiums and cost sharing • Annual out-of-pocket limit cannot exceed the ACA limit 	FINANCED <ul style="list-style-type: none"> • Premiums and cost sharing • No out-of-pocket limit, unless beneficiary is enrolled in Medicare Advantage or ACA cost sharing applies 	FINANCED <ul style="list-style-type: none"> • Premiums and cost sharing • Annual out-of-pocket limit cannot exceed the ACA limit
EXAMPLE: SENATE Sen. Sanders S.1129 EXAMPLE: HOUSE Rep. Jayapal H.R.1384	EXAMPLE: SENATE Sen. Cardin S.3 EXAMPLE: HOUSE Rep. Schakowsky H.R. 2085	EXAMPLE: SENATE Sen. Stabenow S.470 EXAMPLE: HOUSE Rep. Higgins H.R.1346	EXAMPLE: SENATE Sen. Schatz S.489 EXAMPLE: HOUSE Rep. Lujan H.R. 1277