Amid polarizing debates to repeal and replace the Affordable Care Act or convert to "Medicare for All," a BPC poll shows voters prefer building on the current health care system. BPC's Future of Health Care leaders' new report, Bipartisan Rx for America's Health Care, offers a practical path to reform that is designed to decrease costs, expand access, and improve quality.

**What Voters Want**

- **Improving the current health care system** 39%
- **Repealing and replacing the Affordable Care Act** 23%
- **Transforming to a Medicare for All-style single-payer health care system** 22%
- **Don’t know/ No opinion** 16%

**Challenges**

- **Political Polarization**
  - Neither “Repeal and Replace” nor Medicare for All is a realistic option. Bipartisan solutions are needed.

- **High Prices**
  - High prices and surprise medical bills across the system limit access to consumer care. The result? Sicker people, job-lock, bankruptcy, increasing federal deficit.

- **Outdated Regulations**
  - Care delivery models and technology have evolved but regulations have not, limiting the move to value-based care.

- **Lack of Competition**
  - Lack of competition drives up costs in the drug industry, and in some hospital markets when mergers increase prices.

**Costs on the Rise**

- **Consumers**
  - The average monthly Marketplace benchmark premium is $462, but in some states, it is much higher; $881 in Wyoming and $752 in Iowa.
  - In 2017, 18% of ER visits and 16% of in-network hospital stays included at least one out-of-network charge.

- **Employers and Employees**
  - Over the last 15 years, employee out-of-pocket costs rose by 58% while wages only increased by 27%.
  - The average individual deductible for employer-sponsored insurance more than tripled from 2009 ($533) to 2019 ($1,655).

- **Government**
  - Major federal health care programs are expected to consume 32.5% of the federal budget by 2049.
  - Federal spending for those with the highest prescription drug costs was 42% of Part D spending in 2019 ($43 billion).
A Practical Path to Reform

Report Highlights:

To Lower Costs for Consumers, Employers and Employees, and Government:

- Limit hospital charges in markets when mergers increase prices.
- Promote generic drugs to increase competition in the prescription market.
- End surprise medical bills by limiting charges from out-of-network providers at in-network facilities.
- Establish a reinsurance program for individual insurance in Marketplaces.
- Restore cost-sharing reduction payments to stabilize premiums.
- Lower costs by increasing financial responsibility of drug companies and Part D plans.

To Improve Access to Coverage:

- Expand subsidies more in the middle class to make individual insurance more affordable.
- Auto-enroll subsidy-eligible individuals in Marketplace plans.
- Allow states to keep adults in Medicaid regardless of mid-year income fluctuations or paperwork delays.

To Accelerate the Move to Value-Based Care:

- Promote collection of price and quality information through all-payer claims databases.
- Promote value-based care in Medicare & Medicaid by modernizing the Stark Law and Anti-Kickback Statute.

For a full list of recommendations, visit bipartisanpolicy.org/report/bipartisan-RX

@BPC_Bipartisan