The Daily Dish

Medicare for More Goes Live

DOUGLAS HOLTZ-EAKIN | NOVEMBER 17, 2026

A popular parlor game these days is to speculate about the Democrats' agenda in the new Congress. Among the key issues is whether Medicare for All (M4A) is merely a campaign talking point or a realistic legislative option. Eakinomics has long held that it is the former.

It would be seeming madness to force newly elected moderate Democrats to vote on Medicare for All. The one thing that the spectrum of health policy experts agrees upon is that fee-for-service medicine is bad practice, and Medicare for All puts fee-for-service on steroids. And the budget implications are daunting, to say the least. The latest AAF estimates indicate that "…the coverage provisions of [M4A] carry a net budgetary cost of $2.5 trillion in 2027, rising to roughly $5.9 trillion annually by 2036, for a cumulative net cost of $47.4 trillion over the 2027–2036 period." Voting on that proposal is electoral suicide.

Incoming Speaker Hakeem Jeffries seems to agree. As covered by *The Hill*:

> *During a conference in Denver about the future of the Democratic Party, Jeffries outlined the healthcare legislative priorities Democrats plan to tackle once he takes over as House Speaker in January.*
> *…*
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> *While he stopped short of endorsing Medicare for All, Jeffries said Democrats need to go further than merely restoring what Republicans took.*
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> *"I think we've got to lower the age of eligibility as it relates to Medicare. I think we've got to make sure that we cover hearing, vision and dental, and we've got to make sure that every child in America can be able to see a doctor with high-quality affordable healthcare," Jeffries said.*

What would that look like? *The Hill* also reported on remarks by Senator Bernie Sanders, who has been the leading proponent of Medicare for All:

> *After the election, Sanders called on Democrats to lower the Medicare age to 55 through budget reconciliation, which can pass on a party-line vote, as an "immediate first step" toward Medicare for All.*

Here's the catch: Even just lowering the eligibility age is really costly. AAF recently looked at lowering the Medicare eligibility age to 62 and concluded it would "cost $387.6 billion over the 10-year period from 2027–2036." This assumes that employers continue to offer health insurance to those newly eligible for Medicare. If, instead, employers drop their coverage of workers eligible for Medicare, "the total cost of the policy would climb to as high as $1,771.1 billion (about $1.8 trillion)." That's just lowering eligibility to 62, which is only 30 percent of the decline to 55. Extrapolating to a full 10-year reduction in the eligibility age would yield a range from $1.3 trillion to $6.0 trillion.

The lesson is that if you start with proposals that are extreme in their character and apocalyptic in their budgetary impact, scaling them down somewhat will still leave you with bad policy that you cannot afford.