H.R. 3069 EXPLAINER

THE BILL

The National Improved Medicare for All Act: one health program that covers everyone in the United States.

THE BASICS

H.R. 3069 is a bill in the U.S. House of Representatives. Representatives Jayapal and Dingell introduced it in 2025, and 117 members of Congress have signed on to support it. It would put every person living in the United States into one program that pays for all the health care they need. The bill will have to be introduced again in 2027, and it may get a new number then.

WHAT THE BILL DOES

Four things that would change for you and your family.

1. **Everyone is covered, automatically.** Every person living in the U.S. is covered for life, starting at birth or when they become a resident.
2. **You choose where to get care.** You can go to any doctor, clinic, or hospital you want.
3. **You pay nothing when you get care.** No monthly insurance payments, no deductibles, no copays, and no bills after your visit.
4. **No more new medical debt.** Because care costs you nothing out of pocket, getting sick can no longer put you in debt.

HOW IT WOULD START

YEARS 1 & 2 Anyone who wants to can buy Medicare coverage.

YEAR 2 Children and people 55 and older are signed up automatically.

YEAR 3 **Everyone is covered.** Improved Medicare for All is fully in place.

WHAT IS COVERED

More than Medicare covers today. All the care you medically need, including:

- ✓ **Doctor visits:** primary care, checkups, and specialists
- ✓ **Hospital care**
- ✓ **Emergency care** and transportation
- ✓ **Prescription drugs** and medical devices
- ✓ **Dental, vision, and hearing** care
- ✓ **Mental health care,** marriage and family therapy, and treatment for drug and alcohol use
- ✓ **Pregnancy, birth, and newborn** care
- ✓ **Reproductive care,** including abortion, birth control, and fertility treatment
- ✓ **Gender-affirming care**
- ✓ **Lab work** and medical tests
- ✓ **Rehabilitation, long-term care** and support, and hospice care

ON THE BACK How the program works, how it is paid for, and three ways to make the bill better.

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NATIONAL IMPROVED MEDICARE FOR ALL

HOW IT WORKS

- ✓ **Lower drug prices.** The program can bargain with drug companies over what they charge. That lowers prices for everyone, and you pay nothing at the pharmacy.
- ✓ **Hospitals that stay open.** Each hospital gets a global budget, paid ahead of time, ending billing nightmares and the threat of closing. Operating budgets pay for enough doctors and nurses to keep patients safe. Capital Funds budgets pay for hospital upkeep. Special Funds budgets build hospitals in areas with too little care, including rural areas.
- ✓ **More primary care.** A new Office of Primary Care will work to add primary care doctors, nurses, nurse practitioners, physician assistants, and dentists, especially in areas with too little care, so there is room for everyone.
- ✓ **Private insurance mostly goes away.** Companies can no longer sell insurance for care the program covers. They can still sell it for the few things the program does not cover.
- ✓ **Help for workers who lose their jobs.** About 1 million people in health insurance work will lose their jobs. For five years, the bill gives them replacement pay, retirement benefits, job training and placement, education benefits, and priority when new jobs are filled. Many health office jobs will still be needed as Medicare grows to cover everyone. For comparison, about 5 million U.S. workers leave or lose a job every month.

HOW IT IS PAID FOR

The country would spend less on health care than it does now, while covering everyone.

$1.343 trillion+	possible savings
– $304 billion	new yearly costs
= about $1 trillion	**still saved**

WHERE THE SAVINGS COME FROM

- Bargaining for lower drug prices
- Paying all doctors and hospitals at agreed Medicare rates
- Less paperwork and office overhead
- Stopping fraudulent billing
- Fewer avoidable emergency room visits and hospital stays

WHERE COSTS GO UP

- Paying for care that goes unpaid today
- People getting care they have put off
- Dental coverage for everyone

3 WAYS TO MAKE THE BILL BETTER

H.R. 3069 is based on an earlier bill, H.R. 676, and left out some of its important parts.

1 Take profit out of care

The bill still lets for-profit hospitals, dialysis centers, nursing homes, and clinics provide care. We need these facilities, but they should not make a profit from our tax dollars. The bill should pay to turn them into nonprofits and enforce nonprofit rules.

2 Say how it will be funded

The bill does not say where the money will come from, so it is hard to answer “Will my taxes go up?” It should spell out fair funding: lower-income families pay less and high earners pay more.

3 Start in one year, not two

In 1965, 20 million seniors signed up for Medicare in 10 months, using index cards. Today we do not need a complicated two-year start. We can do it in one.

THE BOTTOM LINE

H.R. 3069 would cover everyone in the United States for all the care they need, with nothing to pay at the doctor, hospital, or pharmacy. The country would spend less on health care than it does today.

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Questions, comments, or ready to get involved: email us.