

# SOCIAL SECURITY WORKS

UNITED STATES CONGRESS  
MEMBER PACKET

117th Congress | 2021-2022

815 16th Street, NW, 4th Floor  
Washington, D.C. 20006



Greetings!

Congratulations on your election to the 117<sup>th</sup> Congress! Social Security Works is an organization dedicated to protecting and expanding Social Security, Medicare, and Medicaid and lowering prescription drug prices. These are among the most popular and important issues of your constituents of all demographics and party affiliations.

This packet will primarily serve as an educational tool to help you and your staff as you lead on these important economic security issues during the 117<sup>th</sup> Congress. Chapter 1 provides key facts, messaging, and polling for protecting and expanding Social Security. Chapter 2 provides the same, but for Medicare. Chapter 3 covers facts and messaging for prescription drug prices. Chapter 4 includes a list of bills SSW endorsed in the 116th Congress. Lastly, Chapter 5 has a list of suggested reading and contact information. After reading the packet, you should feel more prepared to lead in Congress on these important issues and speak to your constituents about these policies. To make your message most powerful, it is always good to include personal stories, in addition to the facts and figures included in this packet.

Social Security Works is excited to work with you soon!

Best Regards,

A handwritten signature in black ink that reads "Nancy J. Altman".

**Nancy J. Altman**

President, Social Security Works

# CHAPTER 1: SOCIAL SECURITY

## BECOMING A CONGRESSIONAL CHAMPION FOR SOCIAL SECURITY

Social Security is one of the most popular and most effective social insurance programs in the United States. Workers pay into the Social Security system over their working years and in return receive cash benefits to replace wages that are lost in the event of retirement, disability, or death.

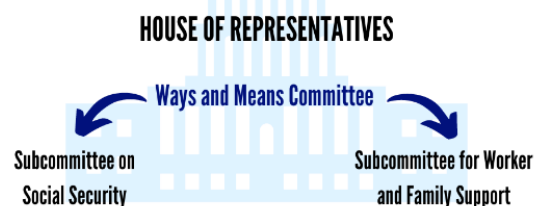
Congressional champions of Social Security believe:

- ★ Social Security is a solution to the looming retirement income crisis, inequality and much more.
- ★ Social Security's benefits are modest and should be expanded with no cuts whatsoever for anyone.
- ★ Social Security's protections are earned and should be expanded.
- ★ Social Security reforms should go through regular order, not through closed-door or fast-track commissions.

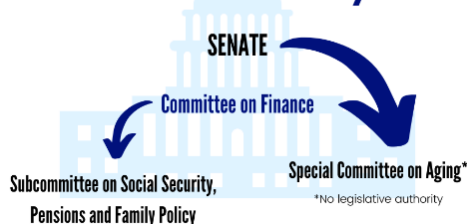
### Committee(s) of Jurisdiction

In the House of Representatives, the Ways and Means Committee is the primary committee of jurisdiction for Social Security and Supplemental Security Income (SSI) legislation. Within the Ways and Means Committee, there is a Subcommittee for Social Security. SSI falls under the jurisdiction of the Subcommittee for Worker and Family Support.

#### Committees of Jurisdiction: Social Security



#### Committees of Jurisdiction: Social Security



In the Senate, the Committee on Finance has jurisdiction over Social Security and SSI related issues. Both Social Security and SSI are housed under its Subcommittee on Social Security, Pensions, and Family Policy. The Senate additionally has a Special Committee on Aging, which has no legislative authority, but can study issues, conduct oversight of programs, and investigate reports of fraud and waste. Members can also make recommendations for legislation.

Members of Congress who want to be vocal champions for retirees, older Americans, people with disabilities, and other vulnerable populations should highly consider requesting to join these committees of jurisdiction.

# SOCIAL SECURITY KEY FACTS

Adopted from Social Security Administration Fact Sheet<sup>1</sup> and the Social Security Works Trustees Report Fact Sheet<sup>2</sup>

In 2020, about **65 million Americans** will receive over one trillion dollars in Social Security benefits.

Social Security is the major source of income for most seniors.



Nearly **nine out of ten** individuals age 65 and older receive Social Security benefits.



**Two out of three** seniors rely on Social Security for half or more of their income. (**50%** of married couples and **70%** of unmarried persons receive 50% or more of their income from Social Security.)



**One out of three** seniors rely on Social Security for virtually all of their income. (**21%** of married couples and about **45%** of unmarried persons rely on Social Security for 90% or more of their income.)

Social Security provides more than retirement benefits (as important as those are).

Around one out of four Social Security beneficiaries is not receiving retirement benefits.

Disabled workers and their dependents account for about 15% of the beneficiaries and **12%** of total benefits paid.

About **89 percent** of workers age 21-64 in covered employment in 2018 and their families have protection in the event of a severe and prolonged disability.

**An estimated 178 million workers are covered under Social Security.**



Just over **1 in 4** of today's 20-year-olds will become disabled before reaching age 67.

**67%** of the private sector workforce has no long-term disability insurance outside of Social Security.

Survivors of deceased workers account for about **10%** of the beneficiaries and 8% of total benefits paid.

About **one in nine** of today's 20-year-olds will die before reaching age 67.

<sup>1</sup> <https://www.ssa.gov/news/press/factsheets/basicfact-alt.pdf>

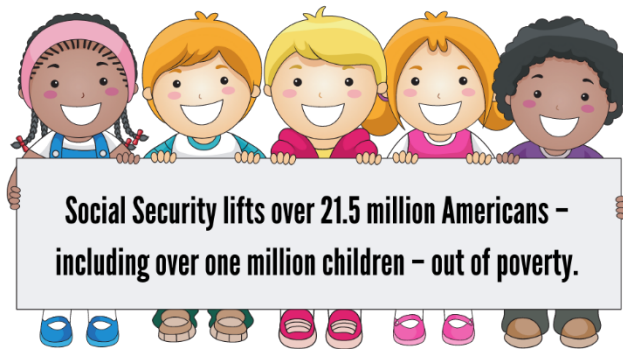
<sup>2</sup> <https://socialsecurityworks.org/2020/04/22/fact-sheet-on-the-2020-social-security-trustees-report/>

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## **SOCIAL SECURITY IS THE NATION'S LARGEST CHILDREN'S PROGRAM.**

*About 95% of persons aged 20-49 who worked in covered employment in 2018 have survivor's insurance protection for their children under age 18 (and surviving spouses caring for children under age 16).*

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Around eight percent of America's children receive Social Security benefits either directly as the result of the death or disability of a parent or indirectly. Social Security is the largest source of income for children being reared by grandparents.<sup>3</sup>

Social Security's benefits are modest by virtually any measure. The average benefit for all beneficiaries was just \$1,398.15 as of September 2020.<sup>4</sup> Social Security benefits

are lower than counterpart benefits paid by other industrialized countries. Workers who earned around \$50,000 a year and retired at age 62 last year received Social Security benefits equal to just 31 percent of their pay.<sup>5</sup>

Social Security has a large accumulated surplus. Social Security is extremely affordable.

At the end of the 21st century, Social Security is projected to cost less than 6 percent of gross domestic product (GDP). That is a much smaller percentage than other industrialized countries spend today on their counterpart old age, survivors, and disability programs.

Social Security's cumulative surplus is currently \$2.9 trillion.

Social Security is fully (100%) funded for the next decade; 91 percent funded for the next 25 years; 85 percent funded over the next 50 years; and 82 percent funded over the next 75 years.

Social Security, along with Medicare, is the most successful domestic program in the history of the country. It is a more efficient, secure, universal, and fair source of retirement income, disability insurance, and life insurance than private sector arrangements are or, indeed, could be.



**Social Security is fully  
funded for the next  
decade.**

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<sup>3</sup> <https://www.cbpp.org/research/social-security/social-security-lifts-more-americans-above-poverty-than-any-other-program>

<sup>4</sup> [https://www.ssa.gov/policy/docs/quickfacts/stat\\_snapshot/](https://www.ssa.gov/policy/docs/quickfacts/stat_snapshot/)

<sup>5</sup> <https://www.ssa.gov/oact/NOTES/ran9/an2020-9.pdf>

Social Security lifts over 21.5 million Americans – including over a million children – out of poverty and reduces the depth of poverty for millions more.<sup>6</sup>

Social Security is extremely efficient: Of every dollar spent, more than 99 cents is paid in benefits; less than a penny goes to administration.

## SOCIAL SECURITY KEY MESSAGING

Expanding Social Security is a solution to the following challenges:

- We are facing a retirement income crisis, where too many Americans correctly fear that they will not be able to retire without a drastic decline in their standard of living, due to disappearing traditional pensions, stagnating wages, and loss of home equity.
- We are facing rising levels of income and wealth inequality.
- The economic squeeze on middle class families is causing the middle class to disappear.

Whether to expand or cut Social Security is a question of values, not affordability:

- We are the wealthiest country in the world at the wealthiest moment in our history.
- At its most expensive, at the end of this century, Social Security will cost under 6% of GDP – a much lower percentage than most other industrialized countries spend on their counterpart programs today. (It currently costs just under 5%.<sup>7</sup>)
- If the wealthiest among us are required to pay their fair share, not only can all promised benefits be paid throughout the 21<sup>st</sup> century and beyond, but we can afford to increase them.

Many opponents have been trying to cut, privatize, and dismantle Social Security for decades. They want to return to a world where older Americans were forced to live with their adult children or literally go to the poorhouse, instead of retiring with dignity and independence.

Don't be fooled when members of Congress talk about "saving" Social Security. That is Washington-speak for cutting, privatizing, dismantling Social Security brick by brick.



For nearly a decade, Social Security Administration (SSA) funding has been cut, leading to office closures and staff cuts at Social Security field offices around the country. With 10,000 baby boomers turning 65 every day, we should be fully funding SSA so they can open more offices instead of closing them.

<sup>6</sup> <https://www.cbpp.org/research/social-security/social-security-lifts-more-americans-above-poverty-than-any-other-program>

<sup>7</sup> [https://www.ssa.gov/oact/TR/2020/VI\\_G2\\_OASDHI\\_GDP.html#200732](https://www.ssa.gov/oact/TR/2020/VI_G2_OASDHI_GDP.html#200732)

# SOCIAL SECURITY IN THE U.S. CONGRESS

*Congress should hold hearings to educate the American people that Social Security is strong financially and should be expanded. Each chamber should vote on Social Security expansion legislation. That would allow the American people to see clearly where each party stands on this crucial issue.*

A [number of bills](#) have been introduced to expand Social Security, while ensuring that all benefits can be paid in full and on time. These bills include:

## SOCIAL SECURITY 2100 ACT

Rep. John Larson (D-CT) | Sen. Richard Blumenthal (D-CT)

By far the most popular plan to expand Social Security in the 116<sup>th</sup> Congress, the Social Security 2100 Act was introduced in the House of Representatives with 201 original cosponsors.

This bill was highly regarded in the House Ways and Means Committee hearings, as well as in the Social Security Subcommittee, as the plan requires an average worker to pay only an additional 50 cents a week in exchange for increased benefits.

We anticipate greater support for the legislation in the 117<sup>th</sup> Congress and potentially movement toward a floor vote.

## SOCIAL SECURITY EXPANSION ACT

Rep. Peter DeFazio (D-OR) | Sen. Bernie Sanders (I-VT)

The Social Security Expansion Act is one of the most effective plans to expand Social Security and ensure workers making under \$250,000 do not incur any increase in expenses.

We look forward to growing support for this proposal in the 117<sup>th</sup> Congress.

[Although the details of these various legislative proposals differ, they share common features. They all provide:](#)

- Across-the-board benefit increases.
- Switching to CPI-E, a more accurate cost of living adjustment, reflecting the higher health care and other costs of seniors and people with disabilities.
- Some targeted benefit increases to ensure that, after a lifetime of work, Americans do not retire into poverty.
- Increased revenue to Social Security by requiring that millionaires and billionaires pay the same rate into Social Security as middle-class Americans do.

For more detailed information about how proposals will affect Social Security, we recommend exploring the Social Security Actuary's website: [www.ssa.gov/oact/solvency](http://www.ssa.gov/oact/solvency). The Chief Actuary and their team are a great resource when you are ready to introduce your own legislation.



**SOCIAL  
SECURITY  
WORKS  
FOR  
THE UNITED  
STATES**

2019 Report



[socialsecurityworks.org](https://socialsecurityworks.org)

## SOCIAL SECURITY WORKS PUBLICATIONS

Each year SSW publishes a series of state reports about Social Security. In 2019 we published the **“Social Security Works for America”** series for each state and the entire country. The reports include Congressional district data. In addition, each year we release a fact sheet statement on the annual Social Security Trustees Report. Our fact sheet puts the annual report in context and explains its findings in comprehensible language.

Social Security Works for the United States (2019) [Social Security Works]:  
<https://socialsecurityworks.org/wp-content/uploads/2019/08/United-States.pdf>

Social Security Works for America, State by State (2019) [Social Security Works]:  
[socialsecurityworks.org/social-security-works-for-america-2019](https://socialsecurityworks.org/social-security-works-for-america-2019)

Social Security Trustees Report (2020) [Social Security Works]:  
<https://socialsecurityworks.org/2020/04/22/fact-sheet-on-the-2020-social-security-trustees-report/>

## SUGGESTED SOCIAL SECURITY WEBSITE TEXT

Workers earn their Social Security benefits with every paycheck. I am working in Congress to protect and expand these vital benefits.

For decades, some members of Congress have tried to cut, undermine, and dismantle Social Security under the guise of “saving” it. In fact, Social Security doesn’t need saving. It is the most successful program in our nation’s history. If we simply require the wealthiest among us to contribute their fair share, we can easily afford to protect and expand benefits.

We don’t have a Social Security crisis, but we do have a retirement income crisis. The decline of traditional earned benefit pensions during the same decades that wages stagnated for working and middle-class Americans means that millions of workers face a reduced living standard when it’s time for them to retire – if they can retire at all. One out of every five senior citizens is trying to scrape by on an average income of just \$8,300 a year, and younger generations will have it even worse.<sup>8</sup>

Now is the time to increase Social Security’s modest benefits, as a solution to both the looming retirement income crisis and rising income and wealth inequality.

## SOCIAL SECURITY POLLING

Social Security Works keeps track of polling from several organizations to track the popularity of Social Security. Our polling memo can be found at: <https://socialsecurityworks.org/social-security-polling/>.

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<sup>8</sup> <https://www.charlotteobserver.com/opinion/op-ed/article36486309.html>



# CHAPTER 2: MEDICARE

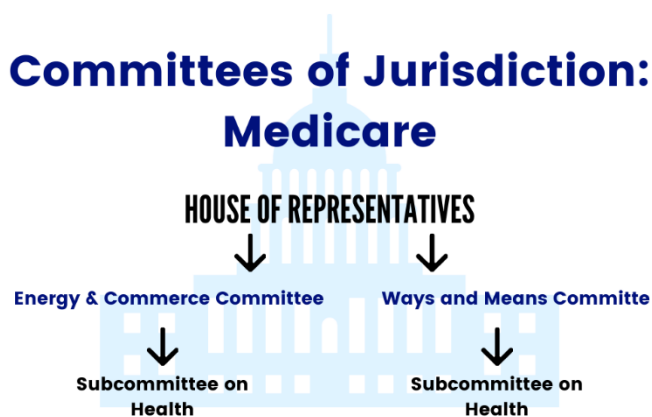
## BECOMING A CONGRESSIONAL CHAMPION FOR MEDICARE

Medicare, like Social Security, is a cornerstone of economic justice in our country. Workers pay into the Medicare system over their working years and in return receive health benefits once they turn 65.

Congressional champions of Medicare believe:

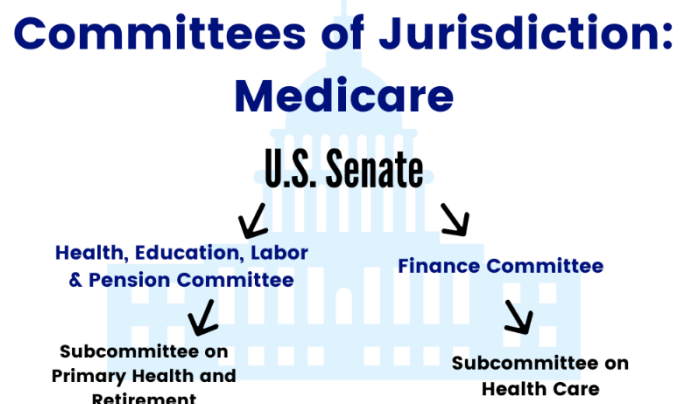
- ★ Health care is a human right.
- ★ Medicare is an earned benefit that must be protected and expanded to include everyone in the United States.
- ★ Medicare reforms should go through regular order, not through closed-door or fast-track commissions.

### Committee(s) of Jurisdiction



In the House of Representatives, the Energy and Commerce Committee and Ways and Means Committee are the primary committees of jurisdiction for health care legislation. Within both committees there is a Subcommittee for Health.

In the Senate, the Committee on Health, Education, Labor, and Pensions (HELP) and the Committee on Finance have jurisdiction over health care related issues. Within the HELP Committee there is a Subcommittee on Primary Health and Retirement Security. The Senate Finance Committee houses a Subcommittee on Health.



Members of Congress who want to be vocal champions for health care issues, especially Medicare for All, should highly consider requesting to join these committees of jurisdiction.

# MEDICARE KEY FACTS AND MESSAGING

## MEDICARE

ADOPTED FROM MEDICARE.GOV<sup>9</sup>

### Medicare has different parts that help cover specific services:

#### Medicare Part A (Hospital Insurance)

- Part A helps cover inpatient care in hospitals, including critical access hospitals, and skilled nursing facilities (not custodial or long-term care). It also helps cover hospice care and some home health care. Beneficiaries must meet certain conditions to get these benefits. Most people don't pay a premium for Part A because they or a spouse already paid for it through their Medicare contributions while working.

**Medicare Part B (Medical Insurance)** - Part B helps cover doctors' services and outpatient care. It also covers some other medical services that Part A doesn't cover, such as some of the services of physical and occupational therapists, and some home health care. Part B helps pay for these covered services and supplies when they are medically necessary. Part B is financed from premiums and general revenue.

#### Medicare Part D (Prescription Drug Coverage)

- Medicare prescription drug coverage is available to everyone with Medicare. To get Medicare prescription drug coverage, people must join a plan approved by Medicare that offers Medicare drug coverage. Part D is financed from premiums and general revenue.

Medicare has over **62 million** beneficiaries with Part A and Part B coverage. Over **47 million** Americans are enrolled in Medicare Part D coverage.



**Medicare is a health insurance program for:**

People age 65 or older

People under age 65 with long-term disabilities

People of all ages with End-Stage Renal Disease

Permanent kidney failure requiring dialysis or a kidney transplant



**Medicare has over 62 million beneficiaries with Part A and Part B coverage.**

**Over 47 million Americans are enrolled in Medicare Part D coverage.**



<sup>9</sup> <https://www.medicare.gov/what-medicare-covers>

Medicare, along with Social Security, is the most successful domestic program in the history of the country. Before Medicare, very few seniors had any health insurance at all, and the health insurance that those very few had was generally inadequate and extremely expensive.

Medicare covers both seniors and people with disabilities, those with the highest medical costs. Yet, it is much more efficient than private sector healthcare plans.

**Medicare  
should be improved for those on it  
and expanded.**



**Medicare should cover hearing,  
vision, and dental procedures, as  
well as long-term care.**

Medicare spends just 1.4 cents of every dollar on administrative costs. The rest is paid in benefits.

In contrast, the Affordable Care Act had to limit insurance companies to using no more than 20% of patient premiums for administrative costs. There is a big difference between 20% and 1.4%!

## MEDICARE FOR ALL

Medicare for seniors and people with disabilities was intended as a first step toward covering everyone. Improved Medicare for All would provide cradle to grave coverage with expanded services, like long-term care.<sup>10</sup>

- Around 70% of 65-year-olds will need some long-term support.
- Two thirds of all Americans over 40 have done little or no planning for their care needs.
- 80% of all home care is provided by an unpaid care giver. Two thirds of those care givers are women.
- The average room in a nursing home costs up to \$7,700 a month.
- Healthcare should be a right, not a privilege. Other industrialized countries provide universal coverage, spend less as a percentage of GDP, and produce better health outcomes.

The creators of Medicare intended its original structure to be a first step toward Medicare for All.

- They began with seniors and people with disabilities, those who on average have the highest health care costs.
- Covering everyone else is *less* expensive.

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<sup>10</sup> Adopted from "Funding Long-Term Care: Cash Benefits for Informal Care," by Corina Mommaerts (Yale University, Institute for Social and Policy Studies); and <https://longtermcare.acl.gov/>.

- If the United States had the same per capita health care costs as any other industrialized country, the federal government would be projecting surpluses.
- The United States' patchwork health care "system" is extremely wasteful. Americans can pay less out of pocket and less as a society, while covering everyone – if we improve Medicare and expand it to all.

## MEDICARE FOR ALL IN THE U.S. CONGRESS

Momentum is growing for Medicare for All.

### House of Representatives

The Medicare for All Act of 2019 was introduced in the House of Representatives by Rep. Pramila Jayapal (D-WA) with over 100 cosponsors.

For the first time ever, Medicare for All was on the agenda of the House of Representatives, with hearings held in the Ways and Means Committee, Energy and Commerce Committee, Rules Committee, and the Budget Committee.

### Senate

Senator Bernie Sanders (I-VT) introduced the Medicare for All Act of 2019, a slightly different version of the House bill, with an unprecedented 14 cosponsors.

We expect member support for Medicare for All will increase in the 117<sup>th</sup> Congress.

## MEDICARE PUBLICATIONS

All Means All Congressional District Reports (2020) [Social Security Works]

Medicare for All Report (2017) [National Nurses United]

## SUGGESTED MEDICARE WEBSITE TEXT

### Medicare:

Medicare, together with Social Security, is the nation's most successful domestic federal program. It must be improved for those currently on it and expanded so that those younger than age 65 can benefit from it sooner. By ensuring that Medicare provides vision, dental, hearing, and long-term care coverage, we can correct an outrageous omission. By lowering the Medicare eligibility age, we can eliminate the age tax in health care premiums paid by older adults.

It is well past time to improve and expand Medicare. Doing so will cost the nation less while improving our health and well-being.

## Medicare for All:

Healthcare is a right, not a privilege. We should improve Medicare for those currently receiving it and expand it to everyone. Instead of subsidizing the insurance and pharmaceutical industries, our first priority should be ensuring all Americans can access the health care they need and deserve.



In 1965 and 1972, we took the first steps toward Medicare for All by providing guaranteed health insurance to seniors and people with disabilities – people who, on average, have the greatest need for health care and incur the highest cost. It is now time to finish the job and cover everyone.

If we do, we will pay less, have better coverage and have better health care outcomes. The time to act is now.

## MEDICARE POLLING

Social Security Works keeps track of polling from several organizations to track the popularity of Medicare. Click the heading to view our Medicare Polling Memo ([https://socialsecurityworks.org/wp-content/uploads/2017/01/Medicare-Polling-Memo\\_FINAL.pdf](https://socialsecurityworks.org/wp-content/uploads/2017/01/Medicare-Polling-Memo_FINAL.pdf)).

# Chapter 3: Prescription Drug Prices

## BECOMING A CONGRESSIONAL CHAMPION FOR LOWERING PRESCRIPTION DRUG PRICES

Lowering prescription drug prices is one of the most important aspects of economic justice for seniors and people with disabilities. The United States Congress allows prescription drug manufacturers to act with monopoly powers that cause outrageous prices for people in the United States and across the globe.

Congressional champions for lowering prescription drug prices believe:

- ★ Health care is a human right.
- ★ Medicare should be allowed to negotiate drug prices on behalf of the American people.
- ★ The US government should step in to hold the pharmaceutical corporations accountable for price gouging and require transparency in their work.
- ★ The country should work toward a public pharmaceutical manufacturing system to promote competition and ensure proper pricing of medicines, which are created with public investment in research and development.

### Committees of Jurisdiction: Prescription Drug Pricing



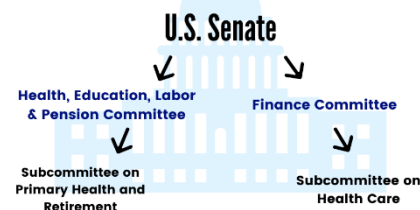
### Committee(s) of Jurisdiction

In the House of Representatives, the Energy and Commerce Committee and Ways and Means Committee are the primary committees of jurisdiction for health care legislation. Within both committees there is a Subcommittee on Health.

The House Committee on Oversight and Reform has historically played a huge role in holding pharmaceutical executives accountable for the actions which keep prescription drug prices high.

In the Senate, the Committee on Health, Education, Labor, and Pensions (HELP) and the Committee on Finance have jurisdiction over health care related issues. Within the HELP Committee there is a Subcommittee on Primary Health and Retirement Security. The Senate Finance Committee houses a Subcommittee on Health.

### Committees of Jurisdiction: Prescription Drug Pricing



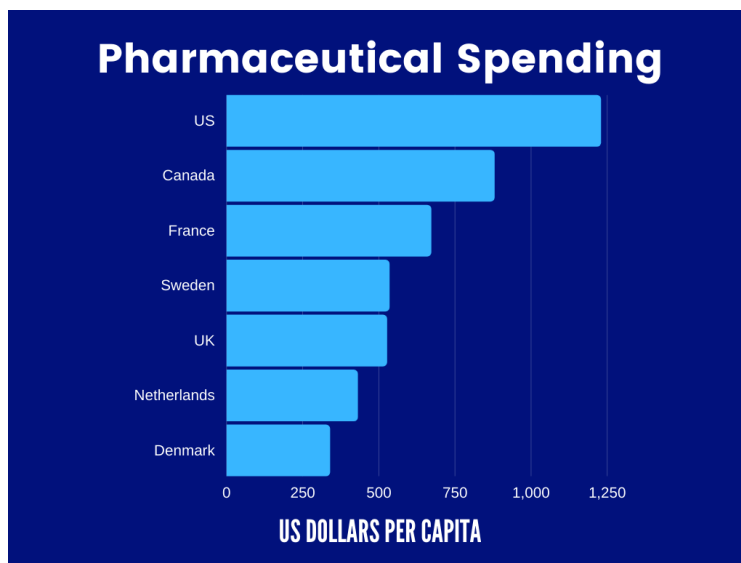
Members of Congress who want to be vocal champions for prescription drug pricing should highly consider requesting to join these committees of jurisdiction.

# DRUG PRICES KEY FACTS AND MESSAGING

## Prescription Drug Prices are too high in the United States.

Americans spend **over \$1200** per person on prescription drugs, much more than our allied nations like Canada, France, Sweden, the UK, the Netherlands and Denmark.<sup>11</sup>

The U.S. government has very limited authority to negotiate drug prices on behalf of citizens. Each private health insurance plan negotiates with drug makers separately. Medicare is the largest purchaser of prescription drugs in the US, but the Department of Health and Human Services (HHS) does not negotiate prices for Medicare Part D beneficiaries. Congress prohibits Medicare from negotiating for lower drug costs.



Drug prices are not regulated in the United States, giving pharmaceutical corporations massive power. Drug prices are too high in the United States. They are too high in absolute terms and in comparative terms. We have the highest drug prices in the world.

Nearly every new drug approved by the Food and Drug Administration (FDA) from 2010-2019 was associated with published research that was contributed to by the taxpayer-funded National Institutes of Health (NIH). Consequently, Americans essentially pay twice for our medication.

Big Pharma has higher profits than any other industry. Too many drug companies put profits over people. Some of these corporations have hedge fund managers with no medical background making decisions about what to research and what price to charge.

Price gouging is a major problem when it comes to prescription drug pricing. In 2015, a drug company bought a medicine that sold for \$13.50 and raised the price to \$750 overnight. Two recently approved cancer-fighting drugs, developed from the research and support of the federal government, cost \$475,000 and \$373,000 each.

By curbing excess profits and monopolies, we will benefit from the vast taxpayer investment we already make in drug development and provide medicines to anyone who needs them. A life-saving medicine doesn't work if people can't afford it.



# PRESCRIPTION DRUG PRICING IN THE U.S. CONGRESS

We must ensure that there is competitive licensing, so patients will have choice about purchasing lower cost generics. The Medicare Negotiation and Competitive Licensing Act, introduced in the House of Representatives, uses a competitive license to provide competition against companies that won't negotiate a fair price with the government. This legislation will be reintroduced in the 117<sup>th</sup> Congress in the House and introduced in the Senate.

The Prescription Drug Price Relief Act also introduces a competitive license for companies that will not lower their prices to a level of that in different countries. This bill was introduced in the House and Senate during the 116<sup>th</sup> Congress as S.102 and H.R.465.

## Suggested Prescription Drugs Website Text



Health care is a right, not a privilege. Being healthy includes the ability to afford safe and affordable prescription drugs when our doctors prescribe them. It is time to enact prescription drug policies that end Big Pharma's shameless price gouging.

It is outrageous that our tax dollars pay for much of the research for prescription drugs and then we are charged the highest prices in the world. It is unconscionable that anyone in the wealthiest country in the world has to choose between

buying food and paying for prescription drugs. That is wrong.

It is time that we lower prescription drug prices. Our policies should work for all of us, not just for the CEOs and shareholders of the pharmaceutical industry.

# CHAPTER 4: BILLS TO COSPONSOR

There are so many bills introduced each Congress, and we want to make it easier for new members to navigate the firehose of legislation. Below are many of the bills endorsed by Social Security Works in the 116<sup>th</sup> Congress, many of which we expect to be reintroduced in the 117<sup>th</sup> Congress. As new legislation is introduced, we will keep you and your staff informed of our endorsements.

## SOCIAL SECURITY

*If you plan to introduce your own Social Security legislation, you should know that the actuaries at the Social Security Administration are the most equipped to work with you and tell you how a particular proposal will affect Social Security.*

### AGES Act

Fair COLA for Seniors Act of 2019

Fairness for Seniors and People with Disabilities During COVID-19 Act

Grandfamilies Act of 2019

Improving Social Security Service to Victims of Identity Theft Act

Know Your Social Security Act

Maintain Access to Vital Social Security Services Act

Older Americans Bill of Rights

Protect Our Widow(er) Retirement Act (POWR Act)

Protecting and Preserving Social Security Act

Protection of Social Security Benefits Restoration Act

Public Servants Protection and Fairness Act

Save Our Social Security Now Act

Social Security 2100 Act

Social Security Administration Accountability Act

Social Security Caregiver Credit Act of 2019

Social Security Enhancement and Protection Act

Social Security Expansion Act

Social Security Fairness Act

Social Security for Future Generations Act

Stop the Wait Act

Strengthening Social Security Act

Supplemental Security Income Restoration Act

Surviving Widow(er) Income Fair Treatment Act of 2019 (SWIFT Act)

Taxing Dynastic Wealth Act

The ALJ Competitive Service Restoration Act

The Gig is Up Act

Work Without Worry Act

## MEDICARE

Anti-Racism in Public Health Act  
Medicare and Medicaid Dental, Vision, and Hearing Benefit Act  
Medicare Dental, Vision, and Hearing Benefit Act  
Medicare for All Act (House)  
Medicare for All Act (Senate)  
Medigap Consumer Protection Act  
MORE Savings Act  
State Based Universal Health Care Act  
Strengthening the Medicare Trust Fund Act  
The Green New Deal

## PRESCRIPTION DRUG PRICES

Affordable and Safe Prescription Drug Importation Act  
Affordable Drug Manufacturing Act  
CURE High Drug Prices Act  
Emergency Access to Insulin Act  
End Price Gouging for Medications Act  
Lower Prescription Drug Costs Now Act  
Lowest Price for Patients Act  
Make Medications Affordable by Preventing Pandemic Price-gouging (MMAPPP) Act  
Medicare Drug Price Negotiation Act  
Medicare Negotiation and Competitive Licensing Act  
Medicare Prescription Drug Price Negotiation Act of 2019  
Opioid Crisis Accountability Act  
Prescription Drug Affordability and Access Act  
Prescription Drug Price Relief Act  
STOP GAMES Act of 2019  
Taxpayer Research and Coronavirus Knowledge (TRACK) Act

## COVID-19 Legislation

Assisted Living Facility Coronavirus Reporting Act  
Coronavirus Relief for Seniors and People with Disabilities Act  
COVID-19 Recovery for Seniors and People with Disabilities Act  
Emergency Social Security Benefits Improvement Act  
Emergency Social Security COLA for 2021 Act  
Health Care Emergency Guarantee Act  
Masks for All Act  
MEALS Act  
Medical Supply Chain Emergency Act  
Medicare Crisis Program Act  
Nursing Home COVID-19 Protection and Prevention Act  
Pandemic Child Hunger Prevention Act  
Quality Care for Nursing Home Residents and Workers During COVID-19 Act  
Recovery Rebates Improvement Act

Rent and Mortgage Cancellation Act

RESOLUTION: Department of Justice should defend the Patient Protection and Affordable Care Act

SNAP Online Purchasing Flexibility Act

Social Security COVID Correction and Equity Act

Suspend School Lunch Debt Collection Act

## OTHER

*While Social Security Works primarily works on issues related to Social Security, Medicare and prescription drug pricing, our mission is very inclusive to all economic justice issues so, therefore, we endorse legislation outside of our primary scope very often. In the 116th Congress this included the following legislation.*

CEO Accountability and Responsibility Act

Excessive CEO Pay Tax Act

Homes for All Act

Make Billionaires Pay Act

Postal Banking

College for All Act

Debt-Free College Act

Student Debt Cancellation Act

Student Loan Debt Relief Act

Universal School Meals Program Act

# Chapter 5: Suggested Reading & Contacting Social Security Works

## RECOMMENDED READING

### SOCIAL SECURITY

**The Battle for Social Security** | Nancy J. Altman

**Social Security Works!** *Why Social Security Isn't Going Broke and How Expanding It Will Help Us All* | Nancy J. Altman & Eric R. Kingson

**The Truth About Social Security** *The Founders' Words Refute Revisionist History, Zombie Lies, and Common Misunderstandings* | Nancy J. Altman

### PRESCRIPTION DRUG PRICES

**The \$800 Million Pill:** *The Truth Behind The Cost Of New Drugs* | Merrill Goozner

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