This lists all answers to Question One of North Carolina Health News’ voter guide questionnaire. Unless otherwise noted, the answers were given directly to one of our reporters.

**Question 1: What changes should Congress make to ensure the continuing financial viability of the Medicare and Social Security programs, especially now as many Baby Boomers are starting to retire and require services?**

**NC 1**

**G.K. Butterfield:** The Republican tax plan contributes to rising federal deficits, increases the federal debt, and makes it more difficult for our country to afford important safety-net programs. I am deeply concerned that Congressional Republicans will seek cuts to Medicare, Medicaid, and Social Security to close a budget deficit of their own making. I will fight these assaults on North Carolinians’ health care and I will continue to call for bold action to lower health care costs.

**Roger W. Allison** did not answer the survey.

**NC 2**

**George Holding** did not answer the survey.

**Linda Coleman** did not answer the survey.

**Jeff Matemu** did not answer the survey.

**NC 3**

**Walter Jones** did not answer the survey.
David Price: I am a strong supporter of Social Security, Medicare, and other social safety net programs that have helped strengthen the middle class and ensure a secure retirement for senior citizens. Under the Trump Administration and Republican-controlled Congress, I am more concerned than ever about proposals to privatize Social Security or convert Medicare into a voucher program under the guise of deficit reduction. While balancing the federal budget is important to our nation’s economic future, spending reductions should not be made at the expense of economically disadvantaged seniors. That’s why I strongly oppose these efforts and any proposals that undermine Social Security and Medicare or otherwise threaten their long-term solvency.

That said, I believe there are various reforms we can make to both programs that would help preserve their viability without undermining their basic promise. Raising or eliminating the taxable earnings cap for Social Security would be an obvious first step. I am also a proponent of allowing individuals aged 55 to 64 to buy into Medicare at-cost, which would strengthen both Medicare and the private insurance market by reallocating risk.

Barbara Howe: Medicare and Social Security were flawed ideas from the start. The only possible solution is to gradually wean ourselves off the programs and allow individuals to retake charge of their retirement and their health care. The transition may be painful, but it is necessary. We should do all we can to honor the commitments to those who have been paying into the programs, but we need to start as soon as possible to end the program for current young taxpayers.

Steve A. Von Loor did not answer our survey.

Virginia Foxx did not answer the survey.

DD Adams: These two programs have made a significant contribution to the quality of life for older Americans and by bolstering their economic and health security and helping to lift millions out of poverty. The 2018 report of Medicare’s trustees finds that Medicare’s Hospital Insurance (HI) trust fund will remain solvent — that is, able to pay 100 percent of the costs of the hospital insurance coverage that Medicare provides — through 2026.
However, the 2017 tax law reduces income taxes on Social Security benefits, part of which go to the HI trust fund. Repealing the tax penalty for failing to get health insurance (also part of the tax law) will increase the number of uninsured and increase Medicare payments for uncompensated care. The solutions are difficult.

For Medicare:

- the eligibility age should be raised to from 65 to 67 to match the age eligible for Social Security benefits
- reinstating the Independent Payment Advisory Board, which was projected to help slow Medicare’s cost growth
- the Affordable Care Act (ACA), along with other factors, has significantly improved Medicare’s financial outlook, boosting revenues and making the program more efficient so the ACA should be reinstated until such time as we adopt a single payer system.

I agree with the Center for Budget Policy and Priorities when they conclude that “Policymakers and the American public should not be driven into adopting such proposals by misleading claims that Medicare is on the verge of “bankruptcy” or is “unsustainable.” Instead, we should pursue a balanced deficit-reduction approach that puts all parts of the budget on the table, including revenues.”

For Social Security:

- increasing the tax cap from $117,000 to $200,000 would reduce Social Security’s funding shortfall by 29 percent

**NC 6**

**Mark Walker** did not answer our survey.

**Ryan Watts** did not answer our survey.

**NC 7**

**David Rouzer** did not answer the survey.
**Dr. Kyle Horton:** As an internal medicine doctor who has cared for seniors throughout my career, I understand that we must protect, and actually expand both Medicare and Social Security, which have not kept up with the needs of our seniors and their cost of living. Contrary to what many think, it’s important voters realize that the Affordable Care Act (ACA) had actually extended the solvency of Medicare to 2038. In fact, we will need to put back several of the taxes that were recently cut by the GOP on the wealthiest corporations, including the big insurance and pharmaceutical companies, in order to ensure that Medicare doesn’t go broke with the debt crisis created. Hardworking Americans should be able to rely that after they paid into these programs, they will be around for the future—in order to do that we will have to adjust the payroll tax to keep pace with inflation and scrap the cap on Social Security income tax limits to ensure that everyone pays their fair share, and our seniors can retire with dignity and security.

**NC 8**

**Richard Hudson** did not answer our survey.

**Frank McNeill** did not answer our survey.

**NC 9**

**Mark Harris:** The first thing we've got to state upfront is that we cannot and will not cut benefits for our seniors for Social Security and Medicare. [For] anyone that is receiving it [or] nearing retirement, we've got to make sure that the plan is solid. I do believe that there's going to be an overhaul [for] a graduated type of system for those that are much younger, that will probably be put in place to make sure that it's solvent. As I understand, left untouched, [Social Security] goes broke in 2032. Medicare much sooner than that, maybe 2028, it would go broke.

[For] everybody who's paid into this system, it is their money [and] we've got to make sure that it's cared for and that they can receive it back. We will need to look at the future of it in terms of options that those in their 20s and early 30s
now would have about their participation, to really keep it solvent. We've got to make sure our first commitment is that we protect our seniors now, without any cuts to Social Security or Medicare.

**Dan McCready:** Our seniors have paid into Social Security and Medicare over decades, and we must keep those promises. The recent tax legislation, when fully implemented, gives 83% of the benefits to the wealthy and ultra-wealthy and adds $1.9 trillion to the deficit. We should repeal the portion of the bill that helps the top 1% and use that money to shore up Social Security and Medicare and to cut taxes more for the middle class.

**Jeff Scott:** Social Security is not financially viable. It requires structural changes to meet basic standards of soundness and fairness. It must be modified by raising contributions from taxpayers, borrowing money, or lowering benefits. I oppose higher taxes, further indebtedness and undue burdens on young workers. As a financial professional, I have a duty to protect the elderly against false promises and poorly designed retirement plans. Working in Congress, I recognize that the benefit formula must reflect the reality that we are living and working longer.

Medicare is unviable in a different way. The Medicare4All movement made famous by Senator Sanders thinks the program can be scaled up to provide a nationwide single-payer plan. Medicare’s administration costs are low because the program has failed to effectively monitor waste, fraud and abuse. The Federal government’s inadequate management will continue to promote runaway costs and jeopardize the provision of decent, basic care for seniors at the right price.

**NC 10**

**Patrick McHenry** did not answer our survey.

**David Wilson Brown:** Increase the cap for social security. I think there’s no reason why we even have a cap on Social Security to collect and make a huge differential in its viability going forward. Right now there’s a cap. It’s too low for sure and there really should not be one in place because that has a major impact on how much money is coming into the system. Especially with how much longer we’re living. I think it’s a necessary fix.
Mark Meadows did not answer our survey.

Clifton B. Ingram did not answer our survey.

Phillip Price: With Social Security I think that what we need is to remove the cap, the income cap, for those that are paying into social security. I think that the answer to Social Security is a much broader issue than just one or two things that can be done to fix it. My platform of bringing better jobs with bigger paychecks to Western North Carolina as the bigger picture of Social Security. If we can increase wages, bring wages to a more of living wages and provide opportunities and jobs in industries that are going to pay a living wage, then the Social Security taxes that will be collected will be greatly increased just because of the fact that people will be raising the tax base by improving people’s wages across the board.

Alma Adams: I always tell folks, you want to make good policy, you have to have good people who understand why it's important for the people. In North Carolina, we have a lot of elderly people, that people would reach that retirement age, including myself. What's important for them to know they paid into social security, [and] it should be available for them when they need it. We've got over 400,000 people in our state who don't have [healthcare]; we did not expand Medicaid in the state. I think that was very foolish on the part of the General Assembly. I fought for them to do it and they didn't. And that's why I say you got to have people understand it. I didn't grow up with healthcare. My sister had sickle cell, she passed away at age 26. We always had to get her healthcare from the emergency room. No one should have to do that. Everyone should have health care, and it's not a partisan issue. If you're sick, you need to see a doctor, then that becomes important, more important than what your party affiliation is.

Paul Wright did not answer our survey, but provided a statement.
Ted Budd did not answer our survey.

Kathy Manning did not answer our survey.

Tom Bailey did not answer our survey.