Simulation report · Friday, November 13, 2026 at 1:46 PM EST

Solvency Simulation Summary Report Simulation

Report run Friday, November 13, 2026 at 1:46 PM EST.

This is the outcome of the settings listed here. The large dates are this run. The smaller line on each card is Current Law.

Review this report often after you change a setting. The settings list and the dates below update with each change.

This is a teaching report, not an official projection. The full notice is on the last page.

Settings used for this run Simulation

Full retirement age	65. Today's full retirement age is 67. The new age rises by 2 months a year, starting January 1, 2027. People already getting benefits stay on today's rules.
Earliest age to claim	62. This is today's earliest age to claim Social Security.
Medicare hospital insurance age	60. Today's eligibility age is 65. This changes hospital-insurance cost for people entering because of age. The report does not show who would pay hospital bills below the new age.
Phase-in	2 months of age each year.
Takes effect	January 1, 2027. Age changes and wage-tax changes wait until this date. A federal transfer or a checked proposed deposit is counted from 2026. The slower yearly raise starts with the December adjustment of this year, so the first smaller checks are paid the next year.
Remains solvent until	2075. Run the Simulator looks for payroll tax rates that keep the accounts paying full benefits through this year.
Federal transfer	0. No money from other federal funds is added.
Employer health-insurance charge	On. This is not Current Law. A proposed 2% charge on the premium the employer pays to the health insurance company. The worker's own premium payment is not taxed again. The 2% is split evenly between the worker and the employer. Each year through 2100, hospital insurance receives 21 billion 2026 dollars. Social Security and disability receive none.
Broader income tax	On. This is not Current Law. A proposed 4% tax on realized capital gains, dividends, and taxable interest. Each year through 2100, retirement receives 39.6 billion 2026 dollars and hospital insurance receives 21.1 billion. Disability is not given a share.

Stock-trade tariff	On. This is not Current Law. The tariff is on the dollars traded, once on the buy and once on the sale, 0.298% each side. On a $1,000 trade the buyer pays $2.98 and the seller pays $2.98. Each year through 2100, retirement receives 400.5 billion 2026 dollars, disability receives 68 billion, and hospital insurance receives 109.6 billion.
Slower yearly benefit increase	On. This is not Current Law. The yearly Social Security raise uses the chained price index, about 0.3 percentage points less than today's raise. Retirement, survivors, and disability receive it. Medicare hospital insurance does not. The first check stays the same. The smaller raise starts the year after 2027.
Tier 1 soft cap	On. Tier 1 stays at or under 13.45% for Social Security and 3.65% for Medicare. Higher tiers take any rate still needed.
Payroll tax tiers	Social Security: through $1,000,000 at 12.40%; $1,000,001 to $5,000,000 at 12.41%; $5,000,001 to $10,000,000 at 12.42%; above $10,000,000 at 12.43%. Hospital insurance: through $1,000,000 at 3.31%; $1,000,001 to $5,000,000 at 3.32%; $5,000,001 to $10,000,000 at 3.33%; above $10,000,000 at 3.34%.
Tariffs above $10 million	7% Social Security and 3% Medicare. Split evenly. The savings accounts receive the full tariff. It does not raise anyone's benefit.
Who pays Tiers 2, 3, and 4	The worker and the employer share the tax.
Future benefits	Wages above today's $184,500 wage base do not raise future benefits.

What these settings do

- Income tiers move with average wages. The dashed line is Current Law, including the real $200,000 and $250,000 Medicare limits, which do not rise with wages.
- These rates change tax money. They do not raise benefits on wages above today's $184,500 cap.
- The full retirement age moves from 67 to 65 at 2 months per year, so the new age applies to new retirees after about 12 years. A new retiree who still claims at 67 gets about 6.7% less each month for each year the full retirement age rises. People already getting benefits are unchanged. A slow phase-in does little to the early-2030s date when the account runs out. It lowers the cost later.
- The Medicare hospital-insurance eligibility age moves from 65 to 60. This changes Part A cost for people entering because of age. Disability, kidney failure, and ALS eligibility stay as they are. Hospital bills for people below the new age are not moved onto Medicaid, employers, or families in this picture.
- The employer health-insurance charge is on. It is not Current Law. It is a proposed 2% charge on the premium the employer pays to the health insurance company. The worker's own premium payment is not taxed again. The worker pays 1% and the employer pays 1%. Each year through 2100, hospital insurance receives 21 billion 2026 dollars. Social Security and disability receive none. It does not raise benefits.

- The broader income tax is on. It is not Current Law. It is a proposed 4% tax on realized capital gains, dividends, and taxable interest. Each year through 2100, retirement receives 39.6 billion 2026 dollars and hospital insurance receives 21.1 billion. Disability is not given a share. It does not raise benefits.
- The stock-trade tariff is on. It is not Current Law. The tariff is on the dollars traded, once on the buy and once on the sale. Each side pays 0.298%. On a $1,000 trade the buyer pays $2.98 and the seller pays $2.98. Each year through 2100, retirement receives 400.5 billion 2026 dollars, disability receives 68 billion, and hospital insurance receives 109.6 billion. It does not raise benefits. The solid green line includes this money. The red cost line does not move. Disability's share is inside the combined Social Security chart.
- The slower yearly benefit increase is on. It is not Current Law. Social Security checks rise with the chained price index, about 0.3 percentage points less than today's raise. The first check stays the same, because it is based on wages. People already getting benefits receive the smaller raise too. Retirement, survivors, and disability are included. Medicare hospital insurance is not. The first smaller checks are paid the year after 2027.

System Health

Combined Social Security pays full promised benefits through 2100 under your package. Current Law runs out in 2034, third quarter. Medicare hospital insurance runs out in 2076, first quarter under your package, and income would then cover about 86% of promised benefits. Current Law runs out in 2033, second quarter.

The large dates include a proposed option checked below the federal transfer, and the slower yearly Social Security raise. It is not Current Law. Click Reset to Current Law to clear it. The smaller line on each card is Current Law.

Retirement and survivors Under pressure

OASI is the official name for this savings account. It pays monthly cash to retired workers and to the spouses, children, and survivors of workers who have died. Payroll taxes on wages are its main source of money. It does not pay disability benefits. Retirement and survivors benefits at SSA.gov

Year the savings account runs out: 2081, fourth quarter

Current Law: 2032, fourth quarter

Share of promised benefits that incoming money can still pay: 82% when the savings account runs out · 80% in 2100

Current Law: 76% when the savings account runs out · 63% in 2100

Savings compared with one year of cost: 150% at the start of 2026. 328% at the start of 2036.

Current Law: 150% at the start of 2026. Runs out by 2036.

Social Security, combined Healthy

OASDI is the official name for Social Security as a whole. This box adds retirement and survivors insurance to Disability Insurance. Disability Insurance pays workers who can no longer work because of a serious medical condition, and their families. The two savings accounts are separate in law. Official reports often show them together. Social Security at SSA.gov

Year the savings account runs out: After 2100

Current Law: 2034, third quarter

Share of promised benefits that incoming money can still pay: 100% through 2100

Current Law: 81% when the savings account runs out · 67% in 2100

Savings compared with one year of cost: 151% at the start of 2026. 407% at the start of 2036.

Current Law: 151% at the start of 2026. Runs out by 2036.

The disability account by itself still pays full promised benefits through 2100. At the end of 2025, 8.2 million people received disability benefits.

Medicare hospital insurance Under pressure

HI is the official name for this savings account. It is also called Medicare Part A. Part A helps pay for inpatient hospital care, skilled nursing stays, hospice, and some home health care. A payroll tax on wages is its main source of money. Part B helps pay doctor visits. Part D helps pay prescriptions. Those parts are not in this box. What Part A covers at Medicare.gov

Year the savings account runs out: 2076, first quarter

Current Law: 2033, second quarter

Share of hospital costs that incoming money can still pay: 86% when the savings account runs out · 84% in 2100

Current Law: 87% when the savings account runs out · 93% in 2100

Savings compared with one year of cost: 53% at the start of 2026. 239% at the start of 2036.

Current Law: 53% at the start of 2026. Runs out by 2036.

Healthy means the savings account lasts through 2100 and still holds at least one year of cost. Under pressure means it lasts past 2036 but does not meet that test. Critical means it runs out by 2036. The combined Social Security card adds the retirement account and the disability account together. In real law they are separate. Disability money cannot pay retirement benefits unless Congress changes the law. At the end of 2025, 62.3 million people received retirement and survivor benefits, 8.2 million received disability benefits, and 69.3 million were in Medicare. Part B (doctor visits) and Part D (prescriptions) are not shown. Their premiums and other federal money are reset each year to cover the cost, so they do not run out.

Settings used for this run Simulation

Social Security full retirement age	65
Earliest age to claim Social Security	62
Medicare hospital insurance eligibility age	60
Phase-in, months of age per year	2
Remains solvent until this year	2075
Takes effect January 1	2027
National Social Security tariff above $10 million	7%
National Medicare tariff above $10 million	3%
Who pays the tariffs above $10 million	Split evenly
Annual transfer from other federal funds to the Trust funds, billions of dollars (optional)	0 billion 2026 dollars each year through 2100
Payroll tax to employer-paid health insurance, proposed option	On. Hospital insurance receives 21 billion of 2026 dollars each year. Social Security and disability receive none.
Broader income tax, proposed option	On. Retirement 39.6 billion and hospital insurance 21.1 billion of 2026 dollars each year
Stock-trade tariff, proposed option	On. 0.298% on the buy and 0.298% on the sale. Retirement 400.5 billion, disability 68 billion, and hospital insurance 109.6 billion of 2026 dollars each year
Slower yearly benefit increase, proposed option	On. The yearly Social Security raise uses the chained price index, about 0.3 percentage points less than today's raise. Hospital insurance is unchanged.
Tier 1 soft cap	On. Tier 1 stays at or under 13.45% Social Security and 3.65% Medicare.
Newly taxed earnings and future benefits	Do not raise benefits above today's wage base
Who pays Tiers 2, 3, and 4	Worker and employer share the tax

Income tiers

Band	Earnings	Social Security	Medicare hospital insurance	Workers in this band
Tier 1	Through $1,000,000	12.4%	3.31%	More than 99.9% of workers have earnings in this band.
Tier 2	Through $5,000,000	12.41%	3.32%	About 1 in 47,000 workers has earnings in this band.
Tier 3	Through $10,000,000	12.42%	3.33%	Fewer than 1 in a million workers have earnings in this band.
Tier 4	Above $10,000,000	12.43%	3.34%	Fewer than 1 in a million workers have earnings in this band.

Social Security combined rate 12.43% + National Social Security tariff 7.0% = Total Social Security rate 19.43%. Medicare hospital insurance combined rate 3.34% + National Medicare tariff 3.0% = Total Medicare hospital insurance rate 6.34%. The combined rate does not include the tariff. A simulation charges the total on pay above $10 million. Current Law leaves the tariff out. A tariff does not raise anyone's benefit.

Simulator result

Takes effect January 1, 2027. Full retirement age 65 and Medicare hospital insurance at 60. Social Security rates, from Tier 1 through the top band: through $1,000,000 at 12.40%; $1,000,001 to $5,000,000 at 12.41%; $5,000,001 to $10,000,000 at 12.42%; above $10,000,000 at 12.43%. Medicare hospital insurance rates, from Tier 1 through the top band: through $1,000,000 at 3.31%; $1,000,001 to $5,000,000 at 3.32%; $5,000,001 to $10,000,000 at 3.33%; above $10,000,000 at 3.34%. Tier 1 runs through $1,000,000. The simulator tries to keep that band at or under 13.45% Social Security and 3.65% Medicare. Tier 2 can rise by as much as 4 percentage points above Tier 1. Tiers 3 and 4 take any rate still needed above that. Pay above $10 million also pays a 7% National Social Security tariff (3.5% worker and 3.5% employer) on top of the top Social Security rate, and a 3% National Medicare tariff (1.5% worker and 1.5% employer) on top of the top hospital rate. A tariff here is an extra charge. It is not a tax on imported goods, and it does not raise that person's benefit. The savings accounts receive the full tariff either way. Tiers 3 and 4 are 2.8% of combined Social Security payroll tax and 3.1% of Medicare hospital-insurance payroll tax. Combined Social Security lasts through 2075. Medicare hospital insurance lasts through 2075.

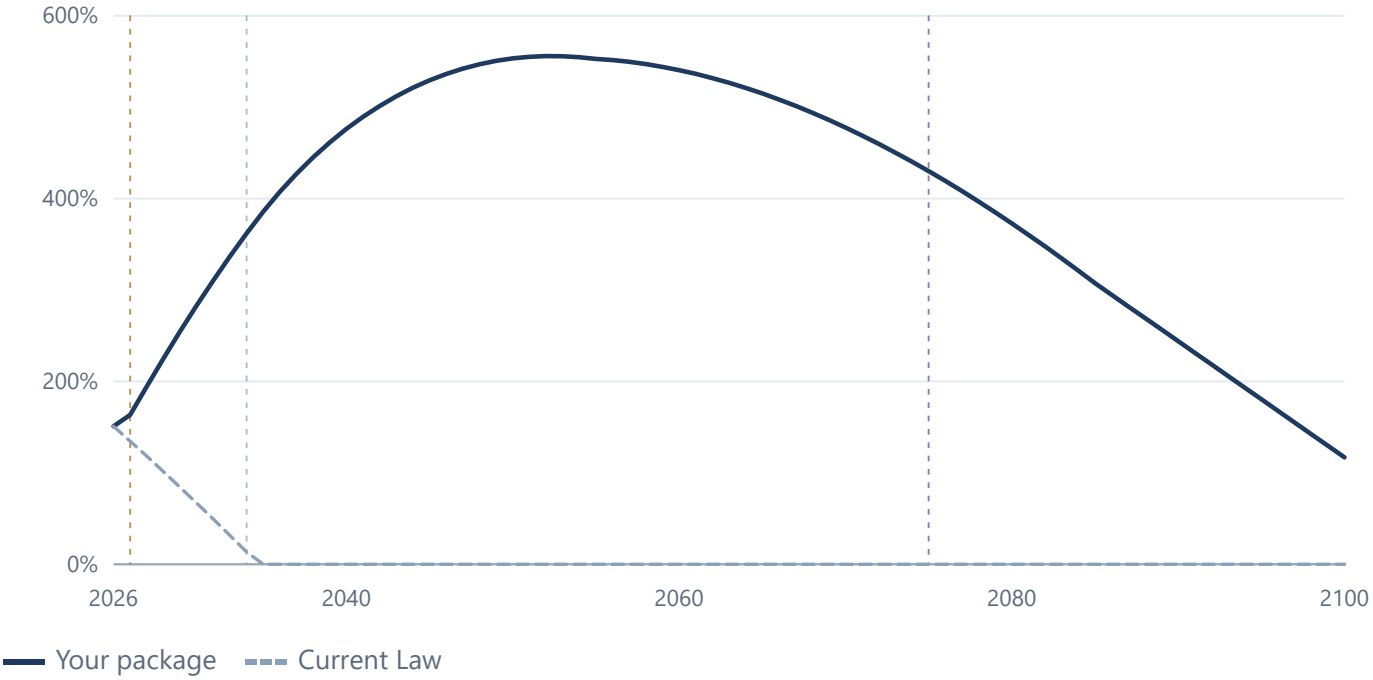
Back to the Solvency Simulation Summary Report, at the start of this report.

Charts: Social Security, combined

The solid line is this run. The dashed line is Current Law.

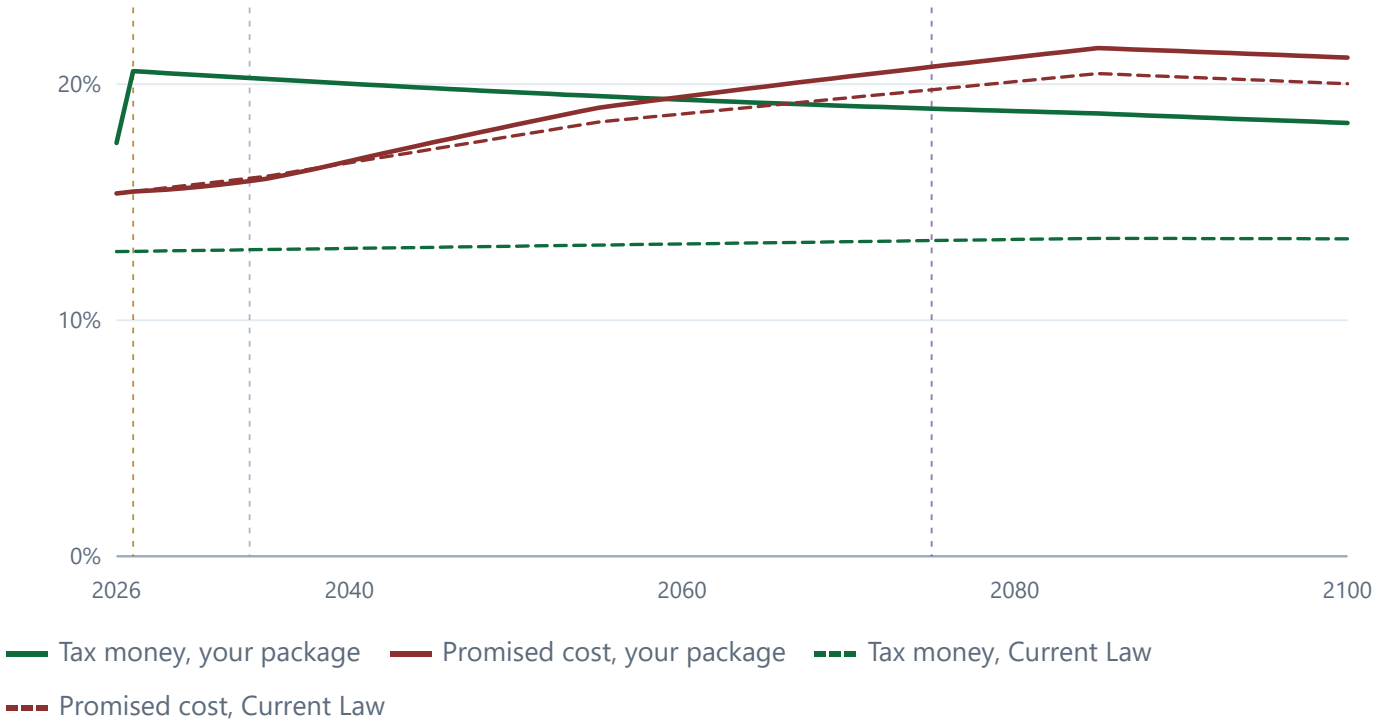
Savings compared with one year of cost

After the account runs out, the line is zero. Over 100% means more than one year of cost is saved.



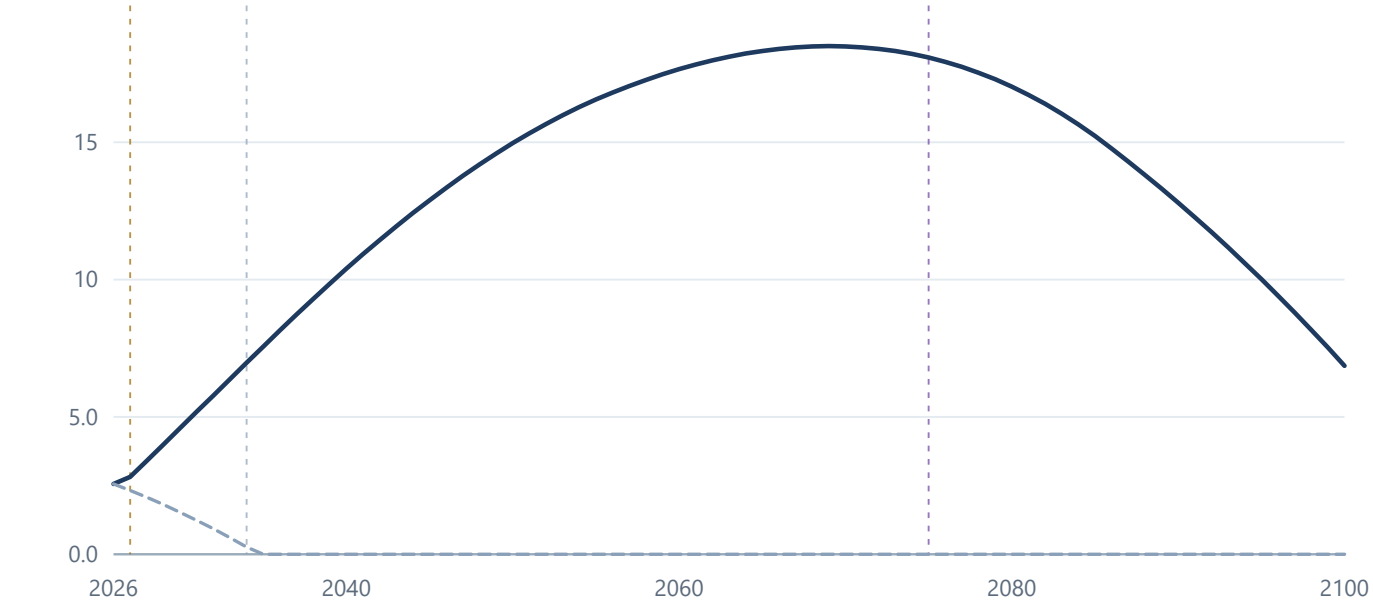
Money in and promised cost

Green is tax money. Red is the cost of promised benefits. Both are a percent of taxed wages. The dashed line is Current Law. The green line includes the proposed deposits from 2026. The dashed line leaves that money out. The stock-trade tariff is in this green line: 0.298% on the buy and 0.298% on the sale. This combined line includes the retirement share and the disability share. The red cost line does not change. The solid red line is the smaller yearly benefit raise. The dashed red line is today's raise.



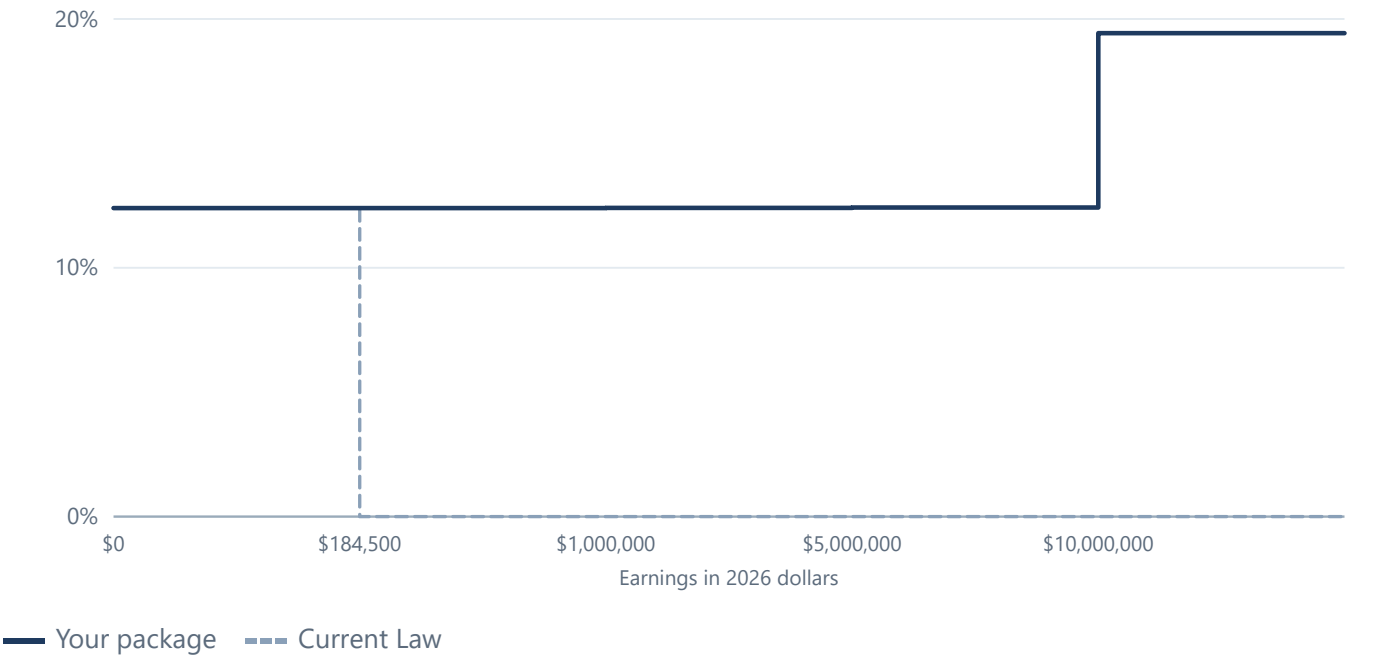
Savings

Trillions of 2026 dollars, at the start of each year.



Payroll tax rates

The dashed line is today's tax rate under Current Law.

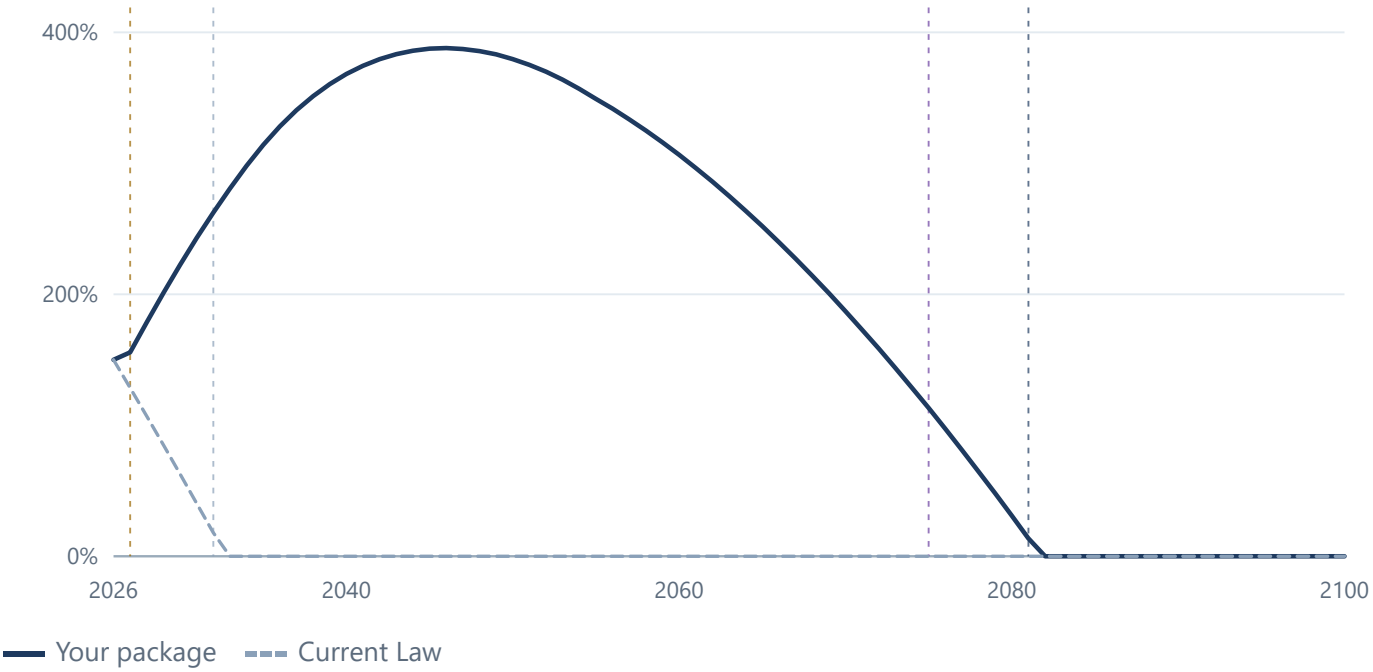


Charts: Retirement and survivors

The solid line is this run. The dashed line is Current Law.

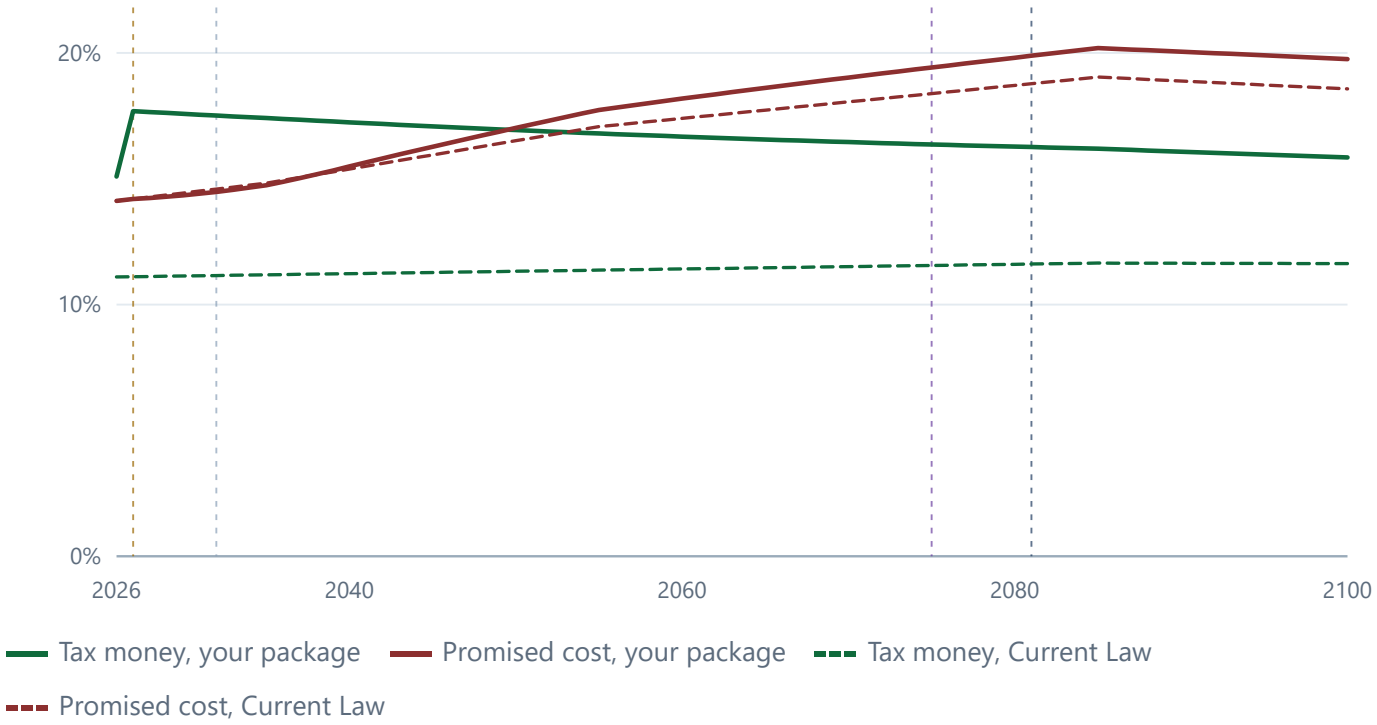
Savings compared with one year of cost

After the account runs out, the line is zero. Over 100% means more than one year of cost is saved.



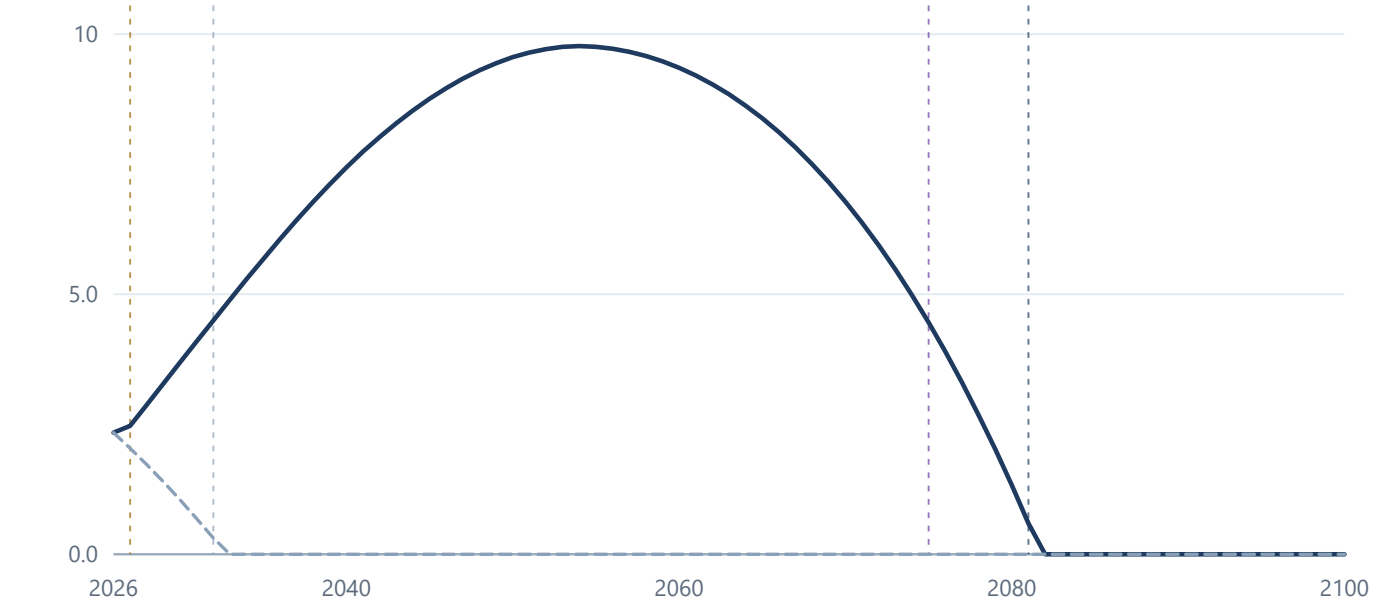
Money in and promised cost

Green is tax money. Red is the cost of promised benefits. Both are a percent of taxed wages. The dashed line is Current Law. The green line includes the proposed deposits from 2026. The dashed line leaves that money out. The stock-trade tariff is in this green line: 0.298% on the buy and 0.298% on the sale, retirement's share only. Disability's share is in the combined Social Security chart. The red cost line does not change. The solid red line is the smaller yearly benefit raise. The dashed red line is today's raise.



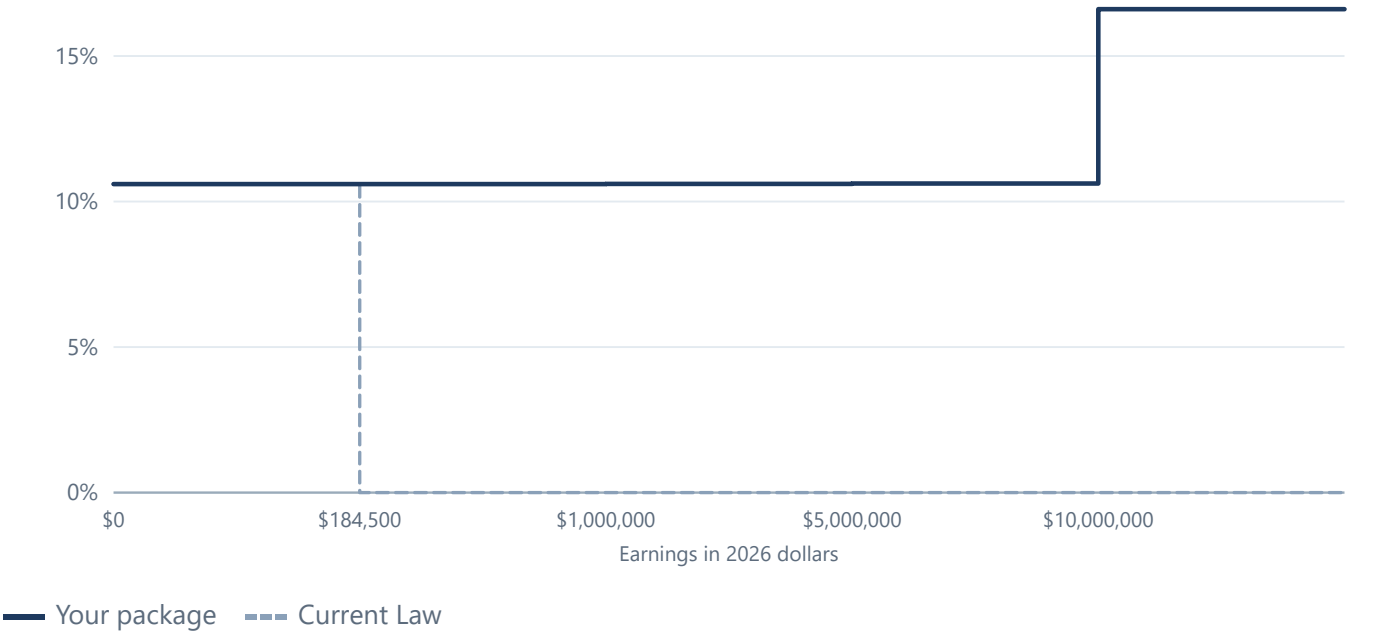
Savings

Trillions of 2026 dollars, at the start of each year.



Payroll tax rates

The dashed line is today's tax rate under Current Law.

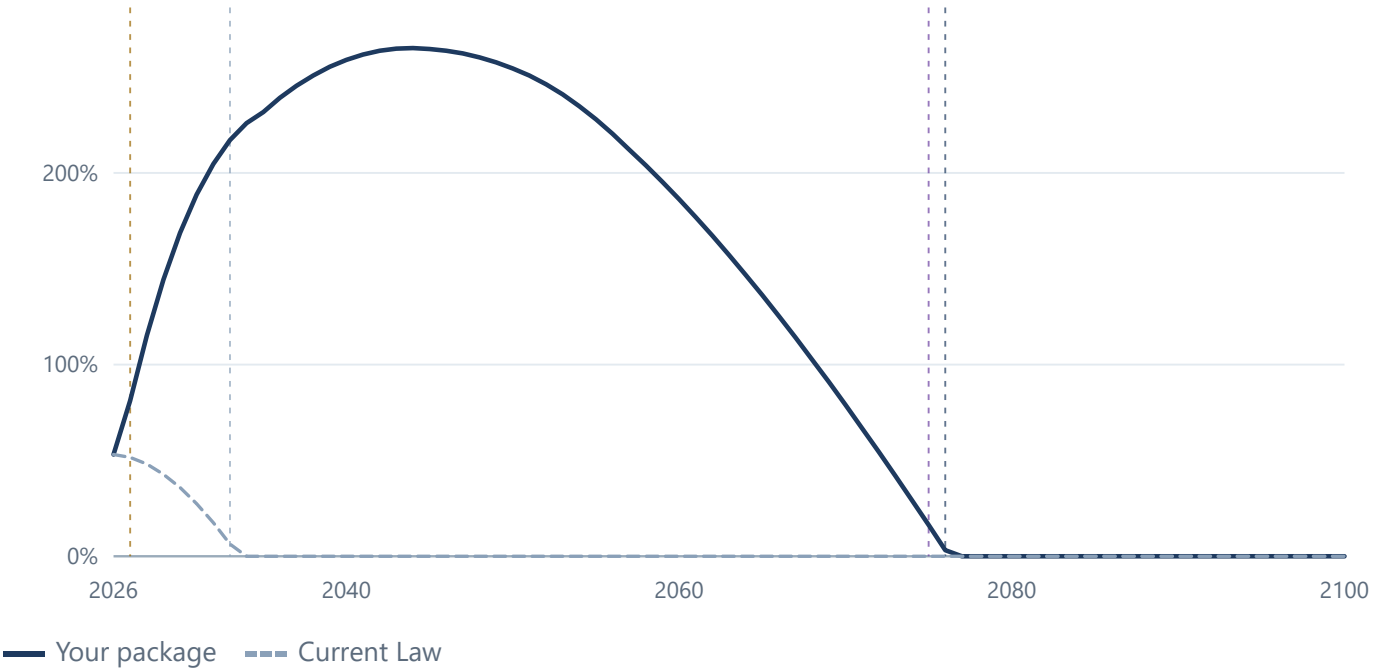


Charts: Medicare hospital insurance

The solid line is this run. The dashed line is Current Law.

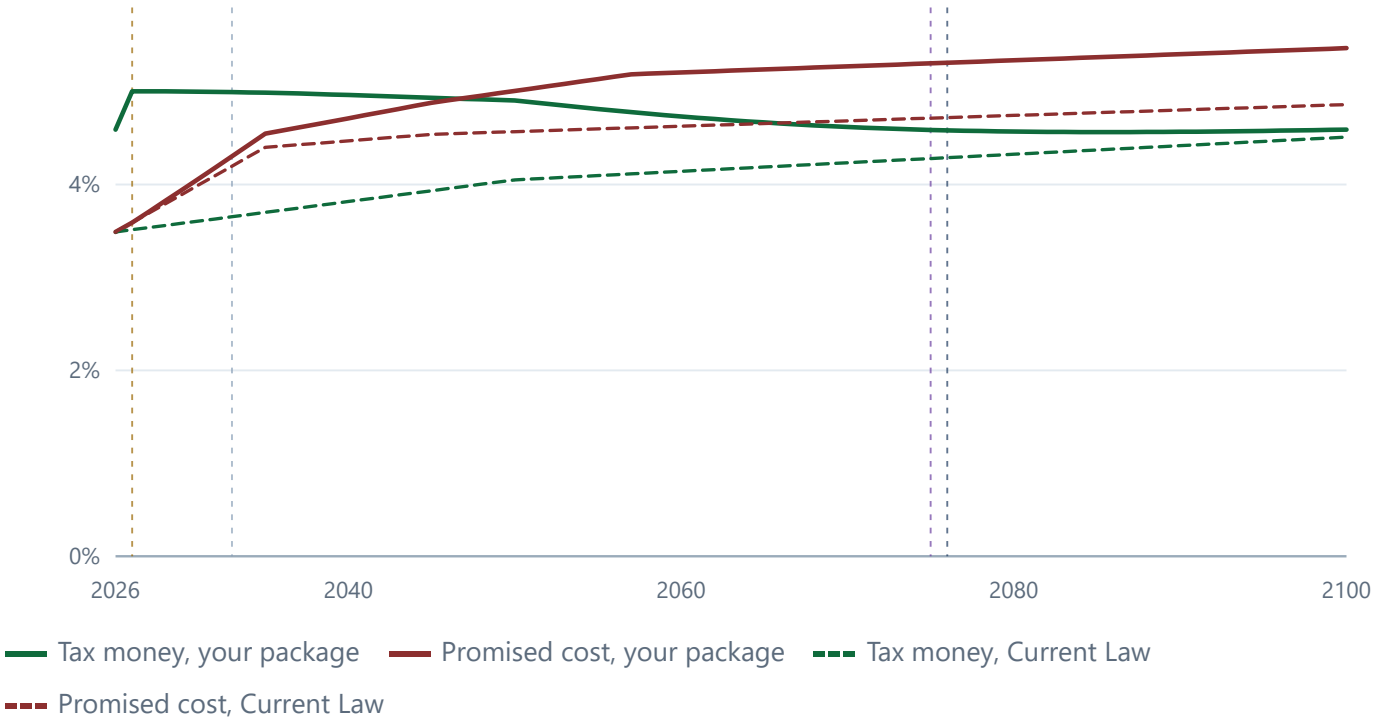
Savings compared with one year of cost

After the account runs out, the line is zero. Over 100% means more than one year of cost is saved.



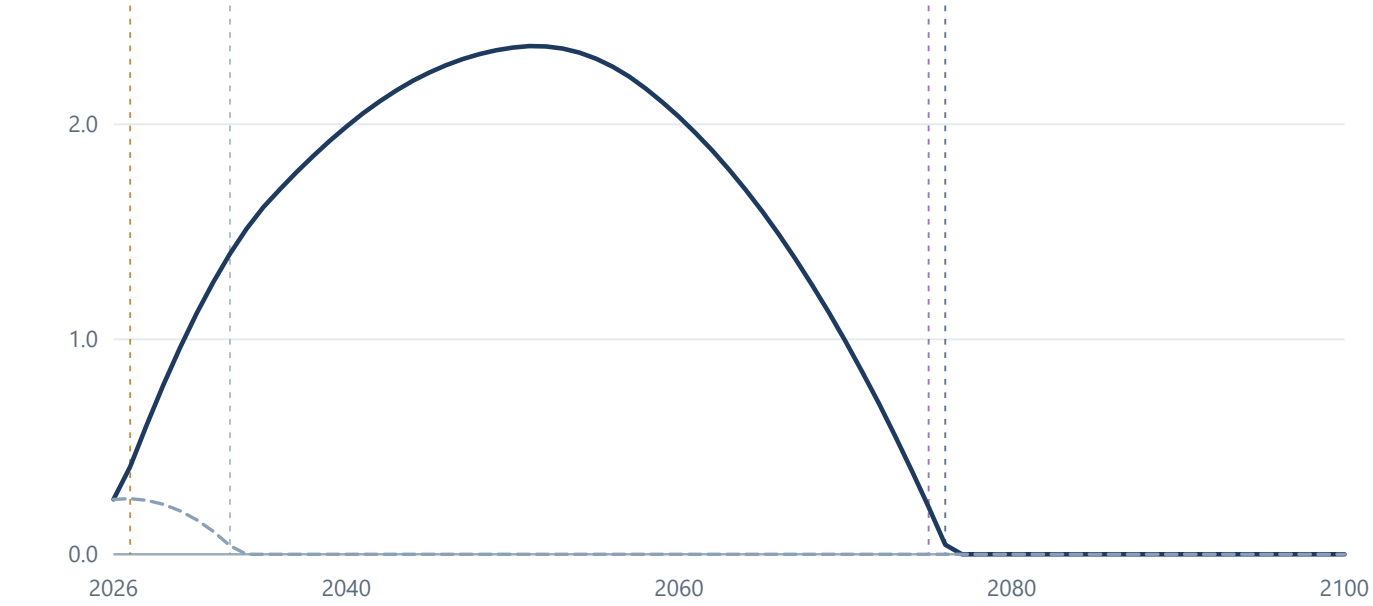
Money in and promised cost

Green is tax money. Red is the cost of promised hospital care. Both are a percent of taxed wages. Medicare's wage total is larger because there is no wage cap. The dashed line is Current Law. The green line includes the proposed deposits from 2026. The dashed line leaves that money out. The stock-trade tariff is in this green line: 0.298% on the buy and 0.298% on the sale, hospital insurance's share. The red cost line does not change. The slower Social Security raise is on. It does not change hospital cost, so the red lines stay together.



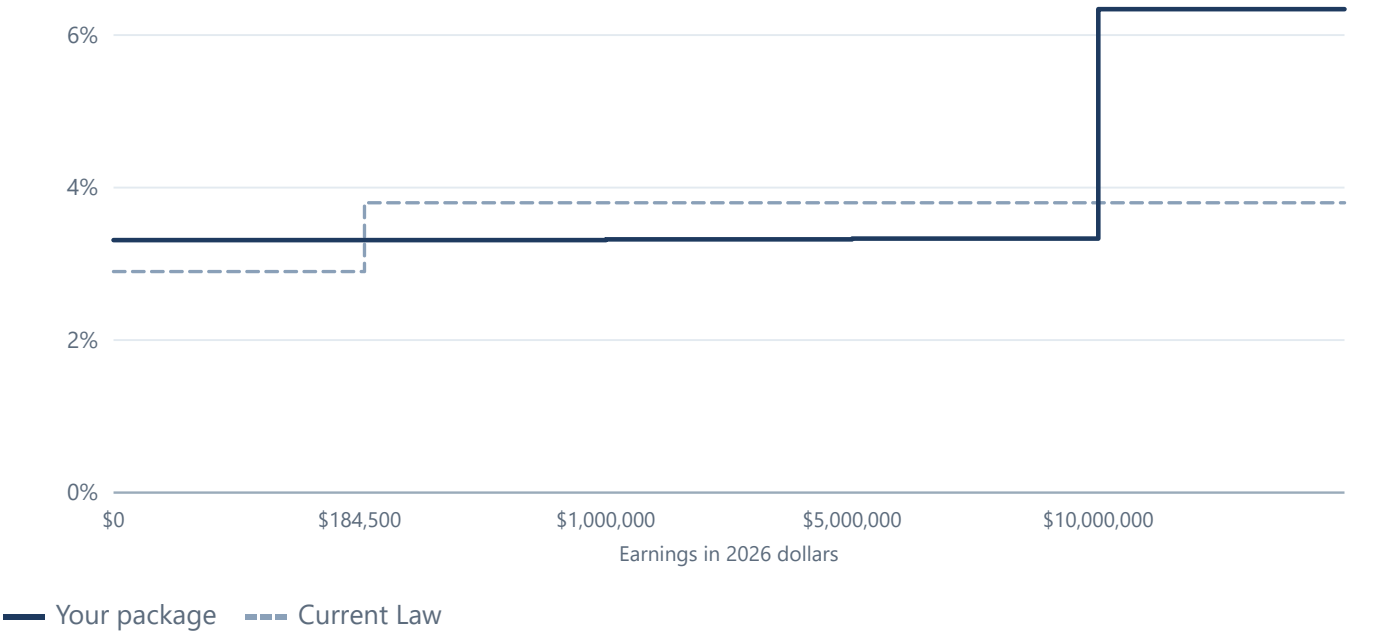
Savings

Trillions of 2026 dollars, at the start of each year.



Payroll tax rates

The dashed line is today's tax rate under Current Law.



About how much tax each band pays

Approximate figures, in trillions of 2026 dollars, from January 1, 2027 through 2075. Pay under $2 million follows the wage pattern already in this model. Pay at and above $2 million, and at and above $10 million, uses 2023 Social Security wage statistics. The first percentage is that band's share of the program's payroll tax. The second is its share of the dollars above Current Law. The extra tariffs are added only on pay above $10 million. Social Security is 3.5% from the worker and 3.5% from the employer. Medicare hospital insurance is 1.5% from the worker and 1.5% from the employer. The savings accounts receive the full tariff either way, and it does not raise anyone's benefit.

Tier	Retirement and survivors	Combined Social Security	Medicare hospital insurance
Through $1,000,000	**$95.29 trillion** 96.5% of payroll tax 82.2% share of the dollars above Current Law	**$111.5 trillion** 96.5% of payroll tax 82.2% share of the dollars above Current Law	**$30.87 trillion** 96.1% of payroll tax 113.9% share of the dollars above Current Law
Through $5,000,000	**$0.75 trillion** 0.8% of payroll tax 3.8% share of the dollars above Current Law	**$0.88 trillion** 0.8% of payroll tax 3.8% share of the dollars above Current Law	**$0.24 trillion** 0.8% of payroll tax 3.1% share of the dollars above Current Law
Through $10,000,000	**$1.20 trillion** 1.2% of payroll tax 6.1% share of the dollars above Current Law	**$1.40 trillion** 1.2% of payroll tax 6.1% share of the dollars above Current Law	**$0.39 trillion** 1.2% of payroll tax 4.9% share of the dollars above Current Law
Above $10,000,000	**$1.56 trillion** 1.6% of payroll tax 7.9% share of the dollars above Current Law	**$1.82 trillion** 1.6% of payroll tax 7.9% share of the dollars above Current Law	**$0.62 trillion** 1.9% of payroll tax −21.8% share of the dollars above Current Law

What this tool does and does not do

What it does

- Shows the retirement account, the disability account, Social Security as a whole, and the Medicare hospital account from 2026 through 2100.
- Compares your package with Current Law on the same charts. Current Law is the dashed line.
- Shows how taxes, income bands, and eligibility ages move the year the account runs out, the savings compared with one year of cost, and the share of promised benefits that incoming money can still pay.

What it does not do

- It is not an official score. A full official estimate uses detailed population, wage, and claiming patterns that this page simplifies.
- It does not model Medicare Part B (doctor visits) or Part D (prescriptions), private premiums, Medicaid, employer coverage, or family hospital bills.
- It does not change benefits for people already getting them. It also does not show poverty, retirement decisions, or the federal budget beyond these savings accounts.

Methodology

The starting point is the middle official projection for 2026. Under Current Law, with no extra federal transfer, combined Social Security runs out in the third quarter of 2034. Income would then cover about 83% of promised benefits, falling toward 65% by 2100. Retirement and survivors run out in the fourth quarter of 2032 (about 78%, then 62% by 2100). Disability Insurance lasts through 2100. Medicare hospital insurance runs out in the second quarter of 2033 (about 89%, about 85% in 2050, and about 93% by 2100). If the transfer box is above 0, the cards show a later date than these.

The savings at the end of 2025 were $2,338 billion for retirement and survivors, $223 billion for disability, and $256 billion for hospital insurance. Tax money and cost follow smoothed paths through the published rates. Social Security tax money, not counting interest, is 12.91% of taxed wages in 2026 and 13.45% in 2100. The cost of promised benefits is 15.37% in 2026, 20.45% around 2085, and 20.02% in 2100. Hospital insurance tax money goes from 3.49% to 4.51% of its taxed wages, and cost from 3.49% through 4.54% in 2045 to 4.86% in 2100. An interest rate of 3.5% and wage growth of about 3.6% are chosen so this simpler picture runs out in those same quarters. The share of promised benefits that incoming money can still pay lands within about two points of the official figures.

The 2026 wage base, the cap on the Social Security tax, is $184,500. About 83% of Social Security wages are treated as falling under that cap. That share is an assumption. It fits with hospital-insurance wages averaging about 25% larger than Social Security wages, because hospital insurance has no cap. Income bands apply the rates you set to that pattern. Freezing the bands holds them in 2026 dollars while wages grow about 3.6% a year.

Program size comes from the 2026 official summary. At the end of 2025, 62.3 million people received retirement and survivor benefits, 8.2 million received disability benefits, and 69.3 million people were in Medicare. About 184.7 million people paid Social Security taxes and 188.7 million paid Medicare taxes. Savings compared with one year of cost were 153% for retirement and survivors, 132% for disability, and

53% for hospital insurance at the start of 2026. Hospital insurance enrollment in that report was 62.0 million older people and 7.1 million people with disabilities in 2025. The 2.5% cost change per year of eligibility age is a rough stand-in for one young age group, not an official Medicare estimate.

Each year the full retirement age rises, a new retiree's promised benefit is about 6.7% lower if they claim at the old full retirement age. About one-twentieth of retired people are replaced by new awards each year, so the savings account feels the change slowly. The earliest claiming age has a small long-run effect, because a later claim comes with a higher monthly benefit, plus a near-term dip while those claims are delayed. The long-range hospital cost path is smoothed so Current Law still runs out in the second quarter of 2033. The official cost rate reaches 4.99% of taxed wages around 2085 before easing to 4.86% in 2100.

Sources

- 2026 Social Security Trustees Report. OASDI is the official name for Social Security as a whole: retirement, survivors, and disability.
- A Summary of the 2026 Annual Reports and the PDF summary
- The wage base, also called the contribution and benefit base
- Official Medicare Trustees Reports. HI is the official name for the hospital insurance account, also called Part A.
- Medicare Enrollment Dashboard. The enrollment counts on this page come from the official reports. The dashboard did not provide them as readable text.
- Census Bureau population projections, which the official population path already uses

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