AMERICAN SPEECH & DEBATE ASSOCIATION

2026-2027
Team Policy Debate
Resolution White Papers

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ASDA

Introduction

Government policy is the foundation of Team Policy Debate. For the 2026-2027 school year, ASDA is focusing on one of the most significant areas of government policy that affects every American and represents almost half of all Federal Government spending.

Team Policy Resolution

Resolved: The United States Federal Government should significantly reform one or more of the following entitlement programs: Social Security, Medicare, Medicaid, SNAP, or TANF.

Resolutional Analysis

"The United States Federal Government" focuses the resolution on entitlement programs created at the federal level. The key issue is a reform to federal policy, not state policy. Federal policies that affect states could be within the resolution.

"Should" means that it would be a *good idea* for the proposed reform to be passed. The goal is to debate the merits of the proposed plan, with Fiat Power meaning that the plan would be implemented if the judge votes Affirmative. So, you can think of the debate judge as the United States Congress, which you are trying to persuade to agree with your view (Affirmative or Negative) on the merits of your plan.

"Significantly" refers to the idea that the proposed plan should alter one or more entitlement programs in a way that would broadly be understood to be worthy of attention.

"Reform" means change, modify, update, or cancel. Affirmative has the burden of proof to show that reform should be done, while Negative argues that the status quo should remain.

"One or more" indicates that the Affirmative plan must include at least one of the 5 listed programs but can include more than one.

"Entitlement Programs" refers to government programs that provide guaranteed benefits based on specific eligibility requirements. Social Security, Medicare, Medicaid, SNAP (Supplemental Nutrition Assistance Program, commonly known as "food stamps"), and TANF (Temporary Assistance to Needy Families, commonly known as "welfare") are five of the largest entitlement programs in the US.

Affirmative and Negative Burdens

An Affirmative team must provide a specific plan. Failure to provide a plan that reforms one or more of the five listed programs will fail to meet the *burden of topicality* (i.e. affirming the resolution, which is a

basic and necessary responsibility of any Affirmative), thereby triggering a Negative win under the traditional policy debate paradigm.

Affirmative must provide their plan in the First Affirmative Constructive speech.

If the Affirmative team meets the burden of topicality, their broader burden is to prove why their proposed plan would be a good idea. For teams using the traditional policy debate stock issues, this means that the Affirmative team would need to identify one or more currently existing problems (*harms*) that are large enough to be worthy of public attention (*significance*) and which are not going to be solved unless some change is made (*inherency*), and also that their proposed plan can be reasonably predicted to solve or at least reduce these harms (*solvency*) without creating more significant new problems in the process (*disadvantages*).

The Negative team's burden is to prove that the Affirmative's proposed plan ought NOT to be passed. For teams using the traditional policy debate stock issues, this could involve arguing that the harms identified by Affirmative are not actually harms, arguing that the harms are insignificant, arguing that the harms will go away without making changes, arguing that the plan proposed by the Affirmative would not solve or mitigate the harms, and/or arguing that the plan proposed by the affirmative would create new problems.

Note that under ASDA rules, the Negative team may not present a counterplan or make so-called "prog" arguments against the resolution.

Potential Plans and Affirmative and Negative Strategies

Here are some examples of potential Affirmative plans:

Plan 1: Enact the Social Security Expansion Act (S. 770 / H.R. 1700, 119th Congress)

Plan Text: The United States Federal Government should enact the Social Security Expansion Act by increasing benefits across the board, adopting the Consumer Price Index for the Elderly (CPI-E) for cost-of-living adjustments, establishing a new minimum benefit tied above the poverty line, and extending payroll taxes to all wages and self-employment income above $250,000.

Summary: This legislation changes the way Social Security benefits are calculated by increasing the primary insurance amount for average monthly earnings below a specified threshold and revising cost-of-living adjustments to better account for the spending patterns of individuals over age 62. It also establishes a new minimum benefit for certain low earners and extends Social Security coverage for full-time student dependents of deceased or disabled workers. The expansion of benefits (cost) is funded by extending payroll taxes to wages, salaries, and self-employment earnings above $250,000 — well above the current $176,100 taxable wage base — and increases the net investment income tax from 3.8% to 16.2%.

Affirmative Rationale: This plan addresses the inadequacy of current benefits for elderly Americans living in poverty while shoring up the program's long-term solvency by making the wealthy pay more into the system.

Negative Rationale: Social Security reform makes sense on the surface, since it's not sustainable as-is. However, this plan is a huge wealth transfer from younger Americans to older Americans. A more than 4x increase in the Net Investment Income Tax (NIIT) would discourage investment and could lead to a stock market collapse.

Plan 2: Enact the SNAP Reform and Upward Mobility Act (119th Congress)

Plan Text: The United States Federal Government should enact the SNAP Reform and Upward Mobility Act which expands and tightens work requirements for able-bodied SNAP recipients, closes categorical eligibility loopholes, strengthens anti-fraud measures, and increases state accountability for program management.

Summary: This legislation is aimed at strengthening work requirements for able-bodied SNAP beneficiaries and closing loopholes that have contributed to the program's rapid expansion. Key provisions include closing categorical eligibility loopholes, expanding work requirements for able-bodied adults, enforcing federal accountability standards, and giving states greater responsibility for program management. This plan also complements the SNAP provisions already enacted in H.R. 1, which raised the age range for general SNAP work requirements, revised the definition of the Thrifty Food Plan to require cost neutrality in future reevaluations, and raised the age of a dependent child for whom a parent/caretaker is exempt from work requirements.

Affirmative Rationale: SNAP was designed to provide temporary relief to vulnerable individuals, not a permanent subsidy for able-bodied adults, and that work requirements are widely supported by the public, save taxpayer dollars, and will strengthen the program for families who truly need it. This plan promotes economic mobility, reduces long-term dependency, and protects the integrity of a program meant for the truly vulnerable.

Negative Rationale: Negative agrees that SNAP should serve those who truly need it. But the research on work requirements is clear: they do not increase employment — they primarily cause eligible people to lose benefits due to paperwork, bureaucratic barriers, and labor market conditions outside their control. The Affirmative plan causes significant harm without producing the self-sufficiency it promises.

Plan 3: Enact the "Same Care, Lower Cost Act"

Plan Text: The United States Federal Government should enact the Same Care, Lower Cost Act, reforming Medicare by directing the Secretary of Health and Human Services to implement site-neutral payment rates for the 66 ambulatory payment classifications identified by the Medicare Payment Advisory Commission (MedPAC). This would require Medicare to pay identical reimbursement rates for the same outpatient service regardless of whether it is performed in a hospital outpatient department or

a physician's office. It would also grant the Secretary authority to expand site-neutral rates to additional billing codes as appropriate.

Summary: Medicare currently operates an irrational payment structure: when a patient receives the exact same outpatient service — an allergy test, an X-ray, a routine injection — Medicare pays dramatically more if that service happens to occur in a hospital-owned facility than in a physician's office.

Affirmative Rationale: According to CBO estimates, Medicare pays on average 2.5 times more for many identical outpatient procedures when they are performed in a hospital outpatient department rather than a physician's office. The real-world cost difference to patients is striking: an allergy skin test costs about $176 in a physician's office but $719 in an off-campus hospital clinic. The fiscal impact is enormous and well-documented: according to CBO, implementing site-neutral payments for hospital outpatient departments could save the Medicare program and taxpayers roughly $157 billion over 10 years.

Negative Rationale: Negative does not dispute that Medicare faces a solvency problem, nor that the payment gap between hospital outpatient departments and physician offices is large. Negative challenges the plan's underlying assumption that the services being compared are truly equivalent. They are not. Hospitals bear genuine structural costs that physician offices do not, and cutting their reimbursement to physician-office rates will trigger a cascade of service reductions and facility closures that fall hardest on rural and low-income communities.