Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Alabama, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Alabama:

- 1,084,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 506,400 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 2,040,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 267,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 897,000 Alabamians have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 643,000 uninsured Alabamians will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $248 per family to approximately 1,500 consumers.
- In the first ten months of 2013, 60,100 seniors and people with disabilities have saved on average $876 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 49,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 1,566,000 Alabamians will no longer have to worry about annual limits, either.
- Health centers have received $79,151,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Alabama has approximately 140 health center sites, which served about 329,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Alabama.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Alaska, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Alaska:

- 164,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 41,000 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 43,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 156,000 Alaskans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 139,000 uninsured Alaskans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $190 per family to approximately 12,300 consumers.
- In the first ten months of 2013, 2,000 seniors and people with disabilities have saved on average $877 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 9,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 237,000 Alaskans will no longer have to worry about annual limits, either.
- Health centers have received $67,576,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Alaska has approximately 170 health center sites, which served about 99,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Alaska.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Arizona, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Arizona:

- 1,406,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 434,800 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 2,794,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 411,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 1,269,000 Arizonans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 948,000 uninsured Arizonans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $71 per family to approximately 424,000 consumers.
- In the first ten months of 2013, 59,600 seniors and people with disabilities have saved on average $813 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 69,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 2,091,000 Arizonans will no longer have to worry about annual limits, either.
- Health centers have received $84,457,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Arizona has approximately 140 health center sites, which served about 423,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefitting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Arizona.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Arkansas, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Arkansas:

- 578,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 311,400 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 1,239,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 168,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 604,000 Arkansans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 478,000 uninsured Arkansans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $49 per family to approximately 121,200 consumers.
- In the first ten months of 2013, 26,700 seniors and people with disabilities have saved on average $682 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 35,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 865,000 Arkansans will no longer have to worry about annual limits, either.
- Health centers have received $54,131,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Arkansas has approximately 100 health center sites, which served about 165,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Arkansas.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In California, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in California:

• 8,061,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 2,115,600 people with Medicare have received at least one preventive service at no out of pocket cost.
• The up to 16,133,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 2,236,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
• Approximately 7,559,000 Californians have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
• 5,560,000 uninsured Californians will have new health insurance options through Medicaid or private health plans in the Marketplace.
• As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $71 per family to approximately 1,433,800 consumers.
• In the first ten months of 2013, 282,900 seniors and people with disabilities have saved on average $900 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
• 435,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
• Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 12,092,000 Californians will no longer have to worry about annual limits, either.
• Health centers have received $647,300,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. California has approximately 1,200 health center sites, which served about 3,262,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in California.
THIS IS THE AFFORDABLE CARE ACT IN COLORADO

Repeal Would Raise Costs, Strip Protections from Colorado Families

Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Colorado, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Colorado:

- 1,288,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 292,500 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 2,250,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 291,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 1,115,000 Coloradans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 656,000 uninsured Coloradans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $134 per family to approximately 150,500 consumers.
- In the first ten months of 2013, 33,700 seniors and people with disabilities have saved on average $831 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 50,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 1,902,000 Coloradans will no longer have to worry about annual limits, either.
- Health centers have received $132,055,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Colorado has approximately 190 health center sites, which served about 494,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It's time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Colorado.
THIS IS THE AFFORDABLE CARE ACT IN CONNECTICUT

Repeal Would Raise Costs, Strip Protections from Connecticut Families

Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Connecticut, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Connecticut:

- 945,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 332,300 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 1,555,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 192,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 613,000 Connecticut residents have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 243,000 uninsured Connecticut residents will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $168 per family to approximately 47,600 consumers.
- In the first ten months of 2013, 42,000 seniors and people with disabilities have saved on average $934 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 23,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 1,386,000 Connecticut residents will no longer have to worry about annual limits, either.
- Health centers have received $74,616,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Connecticut has approximately 200 health center sites, which served about 329,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Connecticut.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Delaware, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Delaware:

- 218,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 120,200 people with Medicare have received at least one preventive service at no out-of-pocket cost.
- The up to 384,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 49,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 135,000 Delawareans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 72,000 uninsured Delawareans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $495 per family to approximately 4,000 consumers.
- In the first ten months of 2013, 16,900 seniors and people with disabilities have saved on average $1,011 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 6,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 320,000 Delawareans will no longer have to worry about annual limits, either.
- Health centers have received $14,847,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Delaware has approximately 10 health center sites, which served about 39,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Delaware.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In the District of Columbia, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in the District of Columbia:

- 141,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 44,500 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 268,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 27,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 85,000 Washingtonians have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 42,000 uninsured Washingtonians will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $53 per family to approximately 210,200 consumers.
- In the first ten months of 2013, 2,000 seniors and people with disabilities have saved on average $914 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 3,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 208,000 Washingtonians will no longer have to worry about annual limits, either.
- Health centers have received $22,343,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. The District of Columbia has approximately 45 health center sites, which served about 142,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in the District of Columbia.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Florida, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Florida:

- 3,762,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 1,778,900 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 7,839,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 960,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 4,242,000 Floridians have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 3,509,000 uninsured Floridians will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $132 per family to approximately 614,200 consumers.
- In the first ten months of 2013, 226,500 seniors and people with disabilities have saved on average $825 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 224,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 5,587,000 Floridians will no longer have to worry about annual limits, either.
- Health centers have received $214,730,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Florida has approximately 430 health center sites, which served about 1,129,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Florida.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Georgia, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Georgia:

- 2,202,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 728,900 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 4,324,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 613,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 2,036,000 Georgians have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 1,699,000 uninsured Georgians will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $82 per family to approximately 247,900 consumers.
- In the first ten months of 2013, 94,400 seniors and people with disabilities have saved on average $875 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 123,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 3,317,000 Georgians will no longer have to worry about annual limits, either.
- Health centers have received $102,945,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Georgia has approximately 175 health center sites, which served about 321,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Georgia.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Hawaii, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Hawaii:

- 323,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 73,900 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 560,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 69,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 228,000 Hawaiians have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 90,000 uninsured Hawaiians will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $59 per family to approximately 39,600 consumers.
- In the first ten months of 2013, 15,300 seniors and people with disabilities have saved on average $921 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 6,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 462,000 Hawaiians will no longer have to worry about annual limits, either.
- Health centers have received $42,210,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Hawaii has approximately 70 health center sites, which served about 144,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Hawaii.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Idaho, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Idaho:

- 367,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 111,400 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 662,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 99,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 367,000 Idahoans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 223,000 uninsured Idahoans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $152 per family to approximately 28,000 consumers.
- In the first ten months of 2013, 12,100 seniors and people with disabilities have saved on average $701 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 17,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 566,000 Idahoans will no longer have to worry about annual limits, either.
- Health centers have received $56,583,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Idaho has approximately 75 health center sites, which served about 130,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Idaho.
This is the Affordable Care Act in Illinois
Repeal Would Raise Costs, Strip Protections from Illinois Families

Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Illinois, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Illinois:

- 3,047,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 1,247,100 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 5,636,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 753,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 2,284,000 Illinoisans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 1,404,000 uninsured Illinoisans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $52 per family to approximately 178,600 consumers.
- In the first ten months of 2013, 114,700 seniors and people with disabilities have saved on average $801 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 125,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 4,670,000 Illinoisans will no longer have to worry about annual limits, either.
- Health centers have received $211,060,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Illinois has approximately 540 health center sites, which served about 1,142,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefitting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Illinois.
This is the Affordable Care Act in Indiana
Repeal Would Raise Costs, Strip Protections from Indiana Families

Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Indiana, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Indiana:

- 1,508,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 600,400 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 2,796,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 376,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 1,231,000 Hoosiers have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 910,000 uninsured Hoosiers will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $157 per family to approximately 273,000 consumers.
- In the first ten months of 2013, 88,100 seniors and people with disabilities have saved on average $855 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 62,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 2,259,000 Hoosiers will no longer have to worry about annual limits, either.
- Health centers have received $65,322,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Indiana has approximately 100 health center sites, which served about 286,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Indiana.
THIS IS THE AFFORDABLE CARE ACT IN IOWA
Repeal Would Raise Costs, Strip Protections from Iowa Families

Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Iowa, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Iowa:

- 801,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 342,500 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 1,290,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 168,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 666,000 Iowans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 255,000 uninsured Iowans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $111 per family to approximately 1,800 consumers.
- In the first ten months of 2013, 35,100 seniors and people with disabilities have saved on average $763 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 20,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 1,187,000 Iowans will no longer have to worry about annual limits, either.
- Health centers have received $52,358,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Iowa has approximately 100 health center sites, which served about 182,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Iowa.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Kansas, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Kansas:

- 684,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 273,400 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 1,214,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 166,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 553,000 Kansans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 327,000 uninsured Kansans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $71 per family to approximately 83,700 consumers.
- In the first ten months of 2013, 31,300 seniors and people with disabilities have saved on average $755 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 25,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 1,021,000 Kansans will no longer have to worry about annual limits, either.
- Health centers have received $51,144,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Kansas has approximately 50 health center sites, which served about 157,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Kansas.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Kentucky, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Kentucky:

- 975,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 442,400 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 1,895,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 241,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 819,000 Kentuckians have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 622,000 uninsured Kentuckians will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $100 per family to approximately 206,800 consumers.
- In the first ten months of 2013, 65,000 seniors and people with disabilities have saved on average $928 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 48,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 1,414,000 Kentuckians will no longer have to worry about annual limits, either.
- Health centers have received $93,133,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Kentucky has approximately 130 health center sites, which served about 291,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Kentucky.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Louisiana, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Louisiana:

- 932,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 371,200 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 1,952,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 266,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 1,002,000 Louisianans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 795,000 uninsured Louisianans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $50 per family to approximately 81,000 consumers.
- In the first ten months of 2013, 50,700 seniors and people with disabilities have saved on average $795 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 53,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 1,411,000 Louisianans will no longer have to worry about annual limits, either.
- Health centers have received $78,843,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Louisiana has approximately 140 health center sites, which served about 251,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It's time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Louisiana.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Maine, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Maine:

- 301,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 162,100 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 590,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 65,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 242,000 Maine residents have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 145,000 uninsured Maine residents will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $106 per family to approximately 8,800 consumers.
- In the first ten months of 2013, 10,900 seniors and people with disabilities have saved on average $818 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 9,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 431,000 Maine residents will no longer have to worry about annual limits, either.
- Health centers have received $35,515,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Maine has approximately 135 health center sites, which served about 181,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Maine.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Maryland, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Maryland:

- 1,518,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 547,600 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 2,543,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 320,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 981,000 Marylanders have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 481,000 uninsured Marylanders will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $143 per family to approximately 150,000 consumers.
- In the first ten months of 2013, 45,900 seniors and people with disabilities have saved on average $916 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 46,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 2,251,000 Marylanders will no longer have to worry about annual limits, either.
- Health centers have received $59,662,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Maryland has approximately 140 health center sites, which served about 292,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Maryland.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Massachusetts, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Massachusetts:

- 1,773,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 682,900 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 2,931,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 340,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 886,000 Massachusetts residents have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 239,000 uninsured Massachusetts residents will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $457 per family to approximately 173,500 consumers.
- In the first ten months of 2013, 52,100 seniors and people with disabilities have saved on average $774 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 21,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 2,520,000 Massachusetts residents will no longer have to worry about annual limits, either.
- Health centers have received $159,737,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Massachusetts has approximately 300 health center sites, which served about 634,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Massachusetts.
THIS IS THE AFFORDABLE CARE ACT in Michigan

Repeal Would Raise Costs, Strip Protections from Michigan Families

Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Michigan, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Michigan:

- 2,386,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 958,000 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 4,394,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 556,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 1,806,000 Michiganders have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 1,145,000 uninsured Michiganders will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $138 per family to approximately 222,000 consumers.
- In the first ten months of 2013, 142,100 seniors and people with disabilities have saved on average $1,001 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 94,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 3,547,000 Michiganders will no longer have to worry about annual limits, either.
- Health centers have received $121,893,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Michigan has approximately 200 health center sites, which served about 570,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Michigan.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Minnesota, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Minnesota:

- 1,412,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 272,900 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 2,319,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 298,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 990,000 Minnesotans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 423,000 uninsured Minnesotans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $303 per family to approximately 9,200 consumers.
- In the first ten months of 2013, 45,200 seniors and people with disabilities have saved on average $811 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 35,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 2,043,000 Minnesotans will no longer have to worry about annual limits, either.
- Health centers have received $48,506,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Minnesota has approximately 80 health center sites, which served about 181,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Minnesota.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Mississippi, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Mississippi:

- 586,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 324,500 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 1,262,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 181,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 552,000 Mississippians have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 512,000 uninsured Mississippians will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $140 per family to approximately 60,000 consumers.
- In the first ten months of 2013, 26,900 seniors and people with disabilities have saved on average $679 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 37,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 844,000 Mississippians will no longer have to worry about annual limits, either.
- Health centers have received $73,908,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Mississippi has approximately 200 health center sites, which served about 303,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Mississippi.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Missouri, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Missouri:

- 1,441,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 561,700 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 2,602,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 339,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 1,211,000 Missourians have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 799,000 uninsured Missourians will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $72 per family to approximately 457,000 consumers.
- In the first ten months of 2013, 70,100 seniors and people with disabilities have saved on average $779 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 55,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 2,148,000 Missourians will no longer have to worry about annual limits, either.
- Health centers have received $105,829,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Missouri has approximately 200 health center sites, which served about 438,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Missouri.
THIS IS THE AFFORDABLE CARE ACT in Montana
Repeal Would Raise Costs, Strip Protections from Montana Families

Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Montana, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Montana:

• 213,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 96,700 people with Medicare have received at least one preventive service at no out of pocket cost.
• The up to 426,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 52,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
• Approximately 252,000 Montanans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
• 186,000 uninsured Montanans will have new health insurance options through Medicaid or private health plans in the Marketplace.
• As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $173 per family to approximately 13,300 consumers.
• In the first ten months of 2013, 8,200 seniors and people with disabilities have saved on average $754 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
• 12,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
• Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 319,000 Montanans will no longer have to worry about annual limits, either.
• Health centers have received $47,838,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Montana has approximately 90 health center sites, which served about 99,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Montana.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Nebraska, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Nebraska:

- 477,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 174,200 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 768,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes — including up to 106,000 children — will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 402,000 Nebraskans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 196,000 uninsured Nebraskans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $82 per family to approximately 42,000 consumers.
- In the first ten months of 2013, 18,800 seniors and people with disabilities have saved on average $712 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 18,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 701,000 Nebraskans will no longer have to worry about annual limits, either.
- Health centers have received $28,603,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Nebraska has approximately 35 health center sites, which served about 63,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Nebraska.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Nevada, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Nevada:

- 615,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 169,600 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 1,157,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 162,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 551,000 Nevadans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 474,000 uninsured Nevadans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $75 per family to approximately 88,500 consumers.
- In the first ten months of 2013, 20,900 seniors and people with disabilities have saved on average $761 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 33,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 937,000 Nevadans will no longer have to worry about annual limits, either.
- Health centers have received $14,981,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Nevada has approximately 25 health center sites, which served about 62,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefitting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Nevada.
**THIS IS THE AFFORDABLE CARE ACT IN NEW HAMPSHIRE**

Repeal Would Raise Costs, Strip Protections from New Hampshire Families

Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In New Hampshire, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in New Hampshire:

- **365,000** individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional **161,600** people with Medicare have received at least one preventive service at no out of pocket cost.
- **The up to 597,000** individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to **69,000** children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- **Approximately 254,000** New Hampshirites have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- **126,000** uninsured New Hampshirites will have new health insurance options through Medicaid or private health plans in the Marketplace.
- **As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $147 per family to approximately 15,400 consumers.**
- **In the first ten months of 2013, 12,000** seniors and people with disabilities have saved on average $807 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- **10,000** young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- **Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 545,000** New Hampshirites will no longer have to worry about annual limits, either.
- **Health centers have received $22,172,000** to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. New Hampshire has approximately 50 health center sites, which served about **67,000** individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in New Hampshire.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In New Jersey, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in New Jersey:

- 2,209,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 870,000 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 3,848,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 485,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 1,551,000 New Jerseyans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 901,000 uninsured New Jerseyans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $104 per family to approximately 220,000 consumers.
- In the first ten months of 2013, 156,900 seniors and people with disabilities have saved on average $1,052 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 73,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 3,274,000 New Jerseyans will no longer have to worry about annual limits, either.
- Health centers have received $86,999,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. New Jersey has approximately 130 health center sites, which served about 468,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in New Jersey.
THIS IS THE AFFORDABLE CARE ACT in New Mexico
Repeal Would Raise Costs, Strip Protections from New Mexico Families

Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In New Mexico, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in New Mexico:

• 373,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 147,700 people with Medicare have received at least one preventive service at no out of pocket cost.
• The up to 862,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 122,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
• Approximately 403,000 New Mexicans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
• 360,000 uninsured New Mexicans will have new health insurance options through Medicaid or private health plans in the Marketplace.
• As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $24 per family to approximately 17,500 consumers.
• In the first ten months of 2013, 16,100 seniors and people with disabilities have saved on average $825 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
• 26,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
• Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 555,000 New Mexicans will no longer have to worry about annual limits, either.
• Health centers have received $97,954,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. New Mexico has approximately 150 health center sites, which served about 284,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in New Mexico.
THIS IS THE AFFORDABLE CARE ACT IN NEW YORK
Repeal Would Raise Costs, Strip Protections from New York Families

Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In New York, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in New York:

• 4,401,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 1,462,800 people with Medicare have received at least one preventive service at no out of pocket cost.
• The up to 8,616,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 1,048,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
• Approximately 2,964,000 New Yorkers have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
• 1,915,000 uninsured New Yorkers will have new health insurance options through Medicaid or private health plans in the Marketplace.
• As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $92 per family to approximately 633,800 consumers.
• In the first ten months of 2013, 252,800 seniors and people with disabilities have saved on average $975 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
• 160,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
• Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 6,432,000 New Yorkers will no longer have to worry about annual limits, either.
• Health centers have received $279,469,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. New York has approximately 600 health center sites, which served about 1,588,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in New York.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In North Carolina, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in North Carolina:

- 2,062,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 988,800 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 4,100,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 539,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 1,897,000 North Carolinians have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 1,347,000 uninsured North Carolinians will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $87 per family to approximately 192,600 consumers.
- In the first ten months of 2013, 116,000 seniors and people with disabilities have saved on average $856 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 95,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 3,091,000 North Carolinians will no longer have to worry about annual limits, either.
- Health centers have received $129,426,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. North Carolina has approximately 200 health center sites, which served about 431,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in North Carolina.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In North Dakota, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in North Dakota:

• 180,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 66,900 people with Medicare have received at least one preventive service at no out of pocket cost.
• The up to 276,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 34,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
• Approximately 160,000 North Dakotans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
• 68,000 uninsured North Dakotans will have new health insurance options through Medicaid or private health plans in the Marketplace.
• As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $64 per family to approximately 570 consumers.
• In the first ten months of 2013, 7,300 seniors and people with disabilities have saved on average $738 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
• 5,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
• Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 253,000 North Dakotans will no longer have to worry about annual limits, either.
• Health centers have received $6,014,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. North Dakota has approximately 15 health center sites, which served about 31,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in North Dakota.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Ohio, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Ohio:

- 2742,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 871,500 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 5,053,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 643,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 2,079,000 Ohioans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 1,355,000 uninsured Ohioans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $133 per family to approximately 6,300 consumers.
- In the first ten months of 2013, 166,900 seniors and people with disabilities have saved on average $913 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 97,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 4,154,000 Ohioans will no longer have to worry about annual limits, either.
- Health centers have received $128,429,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Ohio has approximately 200 health center sites, which served about 495,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Ohio.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Oklahoma, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Oklahoma:

- 811,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 358,200 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 1,579,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 218,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 774,000 Oklahomans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 647,000 uninsured Oklahomans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $92 per family to approximately 273,700 consumers.
- In the first ten months of 2013, 43,800 seniors and people with disabilities have saved on average $855 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 49,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 1,197,000 Oklahomans will no longer have to worry about annual limits, either.
- Health centers have received $61,585,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Oklahoma has approximately 85 health center sites, which served about 148,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Oklahoma.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Oregon, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Oregon:

- 907,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 250,200 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 1,692,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 207,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 817,000 Oregonians have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 520,000 uninsured Oregonians will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $206 per family to approximately 22,300 consumers.
- In the first ten months of 2013, 34,300 seniors and people with disabilities have saved on average $794 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 43,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 1,356,000 Oregonians will no longer have to worry about annual limits, either.
- Health centers have received $109,400,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Oregon has approximately 208 health center sites, which served about 311,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Oregon.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Pennsylvania, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Pennsylvania:

- 3,151,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 1,011,700 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 5,489,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 657,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 2,260,000 Pennsylvanians have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 1,242,000 uninsured Pennsylvanians will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $77 per family to approximately 123,600 consumers.
- In the first ten months of 2013, 207,000 seniors and people with disabilities have saved on average $856 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 91,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 4,582,000 Pennsylvanians will no longer have to worry about annual limits, either.
- Health centers have received $109,338,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Pennsylvania has approximately 260 health center sites, which served about 671,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Pennsylvania.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Rhode Island, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Rhode Island:

- 252,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 87,100 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 463,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 54,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 172,000 Rhode Islanders have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 101,000 uninsured Rhode Islanders will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $43 per family to approximately 1,300 consumers.
- In the first ten months of 2013, 10,600 seniors and people with disabilities have saved on average $677 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 9,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 374,000 Rhode Islanders will no longer have to worry about annual limits, either.
- Health centers have received $31,773,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Rhode Island has approximately 50 health center sites, which served about 135,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Rhode Island.
THIS IS THE AFFORDABLE CARE ACT IN SOUTH CAROLINA

Repeal Would Raise Costs, Strip Protections from South Carolina Families

Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle-class families.

In South Carolina, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in South Carolina:

• 980,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 512,900 people with Medicare have received at least one preventive service at no out of pocket cost.
• The up to 1,991,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 256,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
• Approximately 867,000 South Carolinians have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
• 727,000 uninsured South Carolinians will have new health insurance options through Medicaid or private health plans in the Marketplace.
• As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $70 per family to approximately 119,400 consumers.
• In the first ten months of 2013, 49,200 seniors and people with disabilities have saved on average $760 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
• 50,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
• Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 1,458,000 South Carolinians will no longer have to worry about annual limits, either.
• Health centers have received $91,898,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. South Carolina has approximately 160 health center sites, which served about 315,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in South Carolina.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In South Dakota, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in South Dakota:

- 200,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 84,000 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 346,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 47,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 203,000 South Dakotans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 92,000 uninsured South Dakotans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $70 per family to approximately 800 consumers.
- In the first ten months of 2013, 8,200 seniors and people with disabilities have saved on average $714 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 9,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 295,000 South Dakotans will no longer have to worry about annual limits, either.
- Health centers have received $14,225,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. South Dakota has approximately 45 health center sites, which served about 56,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in South Dakota.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Tennessee, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Tennessee:

- 1,413,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 584,400 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 2,765,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 353,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 1,208,000 Tennesseans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 889,000 uninsured Tennesseans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $69 per family to approximately 131,800 consumers.
- In the first ten months of 2013, 74,100 seniors and people with disabilities have saved on average $768 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 59,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 2,042,000 Tennesseans will no longer have to worry about annual limits, either.
- Health centers have received $108,059,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Tennessee has approximately 190 health center sites, which served about 384,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Tennessee.
THIS IS THE AFFORDABLE CARE ACT in Texas
Repeal Would Raise Costs, Strip Protections from Texas Families

Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Texas, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Texas:

- 5,198,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 1,683,800 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 10,695,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 1,632,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 5,189,000 Texans have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 4,889,000 uninsured Texans will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $95 per family to approximately 726,200 consumers.
- In the first ten months of 2013, 233,100 seniors and people with disabilities have saved on average $866 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 357,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 7,536,000 Texans will no longer have to worry about annual limits, either.
- Health centers have received $293,038,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Texas has approximately 400 health center sites, which served about 1,079,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Texas.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Utah, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Utah:

- 787,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 132,200 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 1,151,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 206,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 590,000 Utah residents have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 360,000 uninsured Utah residents will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $85 per family to approximately 139,700 consumers.
- In the first ten months of 2013, 17,700 seniors and people with disabilities have saved on average $776 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 26,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 1,183,000 Utah residents will no longer have to worry about annual limits, either.
- Health centers have received $31,000,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Utah has approximately 40 health center sites, which served about 115,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Utah.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Vermont, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Vermont:

- 151,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 78,500 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 281,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 30,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 120,000 Vermonters have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 44,000 uninsured Vermonters will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $58 per family to approximately 5,200 consumers.
- In the first ten months of 2013, 5,800 seniors and people with disabilities have saved on average $852 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 5,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 215,000 Vermonters will no longer have to worry about annual limits, either.
- Health centers have received $19,931,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Vermont has approximately 60 health center sites, which served about 131,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Vermont.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Virginia, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Virginia:

- 1,998,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 756,200 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 3,491,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 438,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 1,433,000 Virginians have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 845,000 uninsured Virginians will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $88 per family to approximately 236,000 consumers.
- In the first ten months of 2013, 73,700 seniors and people with disabilities have saved on average $837 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 66,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 2,974,000 Virginians will no longer have to worry about annual limits, either.
- Health centers have received $1,147,952,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Virginia has approximately 140 health center sites, which served about 284,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Virginia.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Washington, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Washington:

- 1,620,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 494,800 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 2,970,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 372,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 1,357,000 Washington residents have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 835,000 uninsured Washington residents will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $512 per family to approximately 3,000 consumers.
- In the first ten months of 2013, 47,200 seniors and people with disabilities have saved on average $805 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 62,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 2,427,000 Washington residents will no longer have to worry about annual limits, either.
- Health centers have received $148,575,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Washington has approximately 250 health center sites, which served about 819,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Washington.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In West Virginia, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in West Virginia:

- 398,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 206,500 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 800,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 91,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 322,000 West Virginians have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 286,000 uninsured West Virginians will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $132 per family to approximately 11,800 consumers.
- In the first ten months of 2013, 32,700 seniors and people with disabilities have saved on average $918 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 18,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 581,000 West Virginians will no longer have to worry about annual limits, either.
- Health centers have received $69,715,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. West Virginia has approximately 240 health center sites, which served about 382,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in West Virginia.
THIS IS THE AFFORDABLE CARE ACT in Wisconsin

Repeal Would Raise Costs, Strip Protections from Wisconsin Families

Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Wisconsin, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Wisconsin:

- 1,459,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 461,000 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 2,489,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 310,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 1,018,000 Wisconsinites have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 497,000 uninsured Wisconsinites will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $46 per family to approximately 147,100 consumers.
- In the first ten months of 2013, 58,900 seniors and people with disabilities have saved on average $848 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 43,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 2,142,000 Wisconsinites will no longer have to worry about annual limits, either.
- Health centers have received $54,198,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Wisconsin has approximately 100 health center sites, which served about 299,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefiting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Wisconsin.
Helping ordinary Americans and businesses take advantage of the benefits of the health care law is a top priority for the President and Democrats in Congress. The Affordable Care Act does more than just give millions of uninsured Americans access to health insurance. It helps Americans who already have insurance feel more secure in their coverage, ensuring it'll be there when they need it. This is a pocketbook issue for many middle class families.

In Wyoming, the benefits of the health care law are real, and the repeal plan pushed by Republicans in Congress would undermine or eliminate them across the board, reversing critical consumer protections and driving up costs for millions of Americans. Thanks to the Affordable Care Act, in Wyoming:

- 136,000 individuals on private insurance have gained coverage for at least one free preventive health care service such as a mammogram, birth control, or an immunization in 2011 and 2012. In the first eleven months of 2013 alone, an additional 48,400 people with Medicare have received at least one preventive service at no out of pocket cost.
- The up to 241,000 individuals with pre-existing conditions such as asthma, cancer, or diabetes – including up to 31,000 children – will no longer have to worry about being denied coverage or charged higher prices because of their health status or history.
- Approximately 128,000 Wyomingites have gained expanded mental health and substance use disorder benefits and/or federal parity protections.
- 82,000 uninsured Wyomingites will have new health insurance options through Medicaid or private health plans in the Marketplace.
- As a result of new policies that make sure premium dollars work for the consumer, not just the insurer, in the past year insurance companies have sent rebates averaging $284 per family to approximately 8,400 consumers.
- In the first ten months of 2013, 4,700 seniors and people with disabilities have saved on average $711 on prescription medications as the health care law closes Medicare’s so-called “donut hole.”
- 6,000 young adults have gained health insurance because they can now stay on their parents’ health plans until age 26.
- Individuals no longer have to worry about having their health benefits cut off after they reach a lifetime limit on benefits, and starting in January, 196,000 Wyomingites will no longer have to worry about annual limits, either.
- Health centers have received $17,739,000 to provide primary care, establish new sites, and renovate existing centers to expand access to quality health care. Wyoming has approximately 10 health center sites, which served about 16,000 individuals in 2012.

Moving forward, the President and Democrats in Congress are committed to improving the health care law and fixing it when the need arises. Every day more uninsured Americans are signing up for plans as the website gets faster and more people with insurance are benefitting from the law.

Yet instead of working to fix the law, Republicans in Congress have tried and failed to repeal it more than 40 times. Repealing the law completely would raise premiums, allow discrimination based on pre-existing conditions, force women to pay for preventive services like mammograms, and eliminate discounts seniors get on prescription drugs.

It’s time for Republicans in Congress to stop refighting old political battles over health care, because the real cost of repeal will hit home for many hardworking families in Wyoming.