HEALTHCARE IS A LIFESAVER

Quality, affordable health coverage saves lives.

MomsRising.org | MamásConPoder.org
Dear Friend,

Quality, affordable health coverage is a lifesaver for families in the U.S.

Indeed, recent improvements to our nation’s healthcare system have brought the number of uninsured Americans to a record low. Currently, over 90% of Americans are insured through employer-sponsored health coverage, Affordable Care Act Marketplace coverage, Medicare, Medicaid, and CHIP.

Any changes to our healthcare system must include a plan to ensure families do not lose access to the quality, affordable healthcare they depend on – it's a lifesaver!

Over the past week, we asked our over a million MomsRising volunteers to share their personal experiences about how the Affordable Care Act and other healthcare programs are helping their families and the response has been overwhelming. In the following pages, you will find some highlights of the heartfelt stories we received from around the country.

Listen to voices of moms like Leigh from Phoenix, AZ:

The ACA made a huge difference for my family. I had a child a few months before it went into effect. During that time, I paid 1/3 of my monthly salary for a minimalist employer health plan. It had a high deductible and my child was in the hospital for a few days, so I accrued thousands in medical debt. I ended up having to file bankruptcy. I was so thankful when the ACA went into effect. The new Obamacare plan was 1/3 the cost of my work plan and covered far more. Now I have a new job and the plan to add my child is 1/2 of my take home pay! We literally can’t afford for the ACA to go away. I have a masters degree and would be homeless if I had to pay that much for insurance. I work hard at my job and at being a parent. Families like mine need the ACA.

And Amy from Columbus, OH:

Our daughter Addie was diagnosed with Type 1 diabetes at age 6—an autoimmune disease for which there is no cure, but does have very expensive treatments. When my husband lost his job a few years ago, prior to the Affordable Care Act, NO ONE would insure us - at any cost. We were denied coverage because of Addie’s Type 1 diagnosis. Thanks to the Affordable Care Act, we no longer have to worry about being denied coverage and I can sleep at night knowing that Addie will always have access to her life saving medications – or will she??

These are voices of moms and dads across the nation who remind all of us that healthcare security is critical to our nation’s families.

If you have questions or would like to contact any of these individuals, please contact Felicia Willems at: felicia@momsrising.org.

Thank you for your work on behalf of America’s families!

Kristin Rowe-Finkbeiner
Executive Director
MomsRising.org
Personal stories from MomsRising members about the importance of quality, affordable healthcare

**ALABAMA**

My sweet boy was born at 30 weeks and was in the NICU. He is now 7 but he is on breathing meds daily. Sometimes he doesn’t need the fast acting inhaler and sometimes he does. He was a whole 3 lbs 10 oz and my one and only. He had to come early because I had Pre Eclampsia, HeLLp Syndrome, and my whole pregnancy was really horrible. I have never been so sick in my whole life. I love my sweetie and he needs his Medicaid!

– Shannon, Slocomb, AL

I am a breast cancer survivor and know how important it is for patients to NOT be excluded from insurance because of past medical history! Mine returned after more than 20 years.

– Betty, Fairhope, AL

We never expected that our healthy, active, eleven year old son would be diagnosed with a chronic and potentially life threatening condition. But, on March 1st, 2010 an emergency room doctor diagnosed Joshua with Type 1 diabetes. There is no cure for this auto-immune disorder, in which the immune system attacks and destroys the body’s insulin producing cells. We quickly learned to give insulin shots, count carbs, and use many daily finger sticks to monitor his blood sugar levels. With careful management, Joshua can live a full and healthy life.

I breathe a sigh of relief knowing that he can’t be denied health insurance because of his condition – both now and later as an adult. Joshua is a great kid. He’s kind, compassionate, a straight-A student, and active in our church. Just because a person has less-than-perfect health, doesn’t mean that person can’t also be a valuable and productive member of our society. Please keep health insurance available for EVERYBODY.

– Sandy, Killen, AL

**ALASKA**

My daughter sustained lung damage during birth, despite being carefully monitored in a hospital. She was in the NICU for a month and needed follow-up care for a year. All told her medical bills for that year reached nearly one million dollars.

Without the ACA provision that prevented our insurance from capping annual benefits, we would be bankrupt. Without CHIP paying for costs that Blue Cross would not cover (heart medication that had to be compounded for an infant, oxygen that she needed 24 hours a day for 4.5 months), we would be slightly better than bankrupt. I fear that my daughter’s first moments of life will make her uninsurable for the rest of her life.

– Robin, Anchorage, AK

I have a daughter currently going to college out of state. This past summer she landed in the emergency room twice because of a previously unknown health condition. It is one that will recur from time to time and causes her disabling pain and it is incurable to my knowledge. Even with a family policy, I am still paying off the costs that were not covered. There is no way she could afford this on her own. I was worried sick that she would become too old for coverage under our policy and would have no access to emergency services and pain relief when it inevitably happens again. I was thrilled to learn the new health care reform plan would mean she could not be dropped from our family policy until age 26. I can rest easy knowing that she can continue coverage and receive care she needs.

– Paige, Anchorage, AK

**ARIZONA**

I am a 61 year old single mom. I have been self employed my whole life. My son and I are very healthy. After 30 years of paying for premiums that at times I could not afford, I was going to have to give up my insurance in 2013 because it came down to eat or pay for insurance.

Then the ACA insurance began and I received a subsidy and cost sharing and I literally cried because I felt my government cared about me. Having health insurance gives me peace of mind.

– Nina, Tucson, AZ

I am a single mother to one. Costs of living have doubled in last ten years. Wages have stayed the same. Health care coverage is not available through my employer. The cost of a private plan involves a minimum monthly payment of 268 for myself and my son, of which the plan does not cover everything needed and the deductible is 7500. Too high for a single mother paying for mortgage payments, outrageous heating bill costs, and high medicaials copay costs.

Something must change and Affordable healthcare act provides hope that more healthcare service will be covered ie preventive care, mammograms, dental cleanings, eliminate pre existing conditions. The rest of the world does not have these problems as America does with inflated healthcare costs and it’s time America followed suit with providing reasonable costs to citizens.

– Kristina, Fairbanks, AK
I have many friends, family members and neighbors that did not have any insurance and did without medical care until the ACA made the premiums affordable.

- Merna, Tucson, AZ

I was diagnosed with Myasthenia Gravis about 10 years ago and it is systemic, meaning it affects all of my muscle systems. I put together a team of physicians who work together to keep me healthy and active. Because of the narrow networks this year my choices under the healthcare website are extremely limited. My primary, my neurologist, and my nephrologist are not in the networks of any plans offered. Because the new insurance does not cover any out of network doctors I will lose the three most important doctors who have kept me healthy. This is why networks need to not be limited. The citizens want a single payer healthcare system that is affordable.

- David, Glendale, AZ

The ACA made a huge difference for my family. I had a child a few months before it went into effect. During that time, I paid 1/3 of my monthly salary for a minimalist employer health plan. It had a high deductible and my child was in the hospital for a few days, so I accrued thousands in medical debt. I ended up having to file bankruptcy.

I was so thankful when the ACA went into effect. The new Obamacare plan was 1/3 the cost of my work plan and covered far more. Now I have a new job and the plan to add my child is 1/2 of my take home pay! We literally can’t afford for the ACA to go away. I have a masters degree and would be homeless if I had to pay that much for insurance. I work hard at my job and at being a parent. Families like mine need the ACA.

- Leigh, Phoenix, AZ

Before the Affordable Care Act I couldn’t get individual health insurance at all, not even if I was willing to pay a high premium, because I had asthma that needed to be treated with steroids. Now I can get GOOD coverage with an affordable premium and my asthma is completely managed. It brings me such peace of mind to both be healthier AND have insurance!

- Ann-Mary, Scottsdale, AZ

My adult daughter has asthma and diabetes. She has the Affordable Health Care plan. Without it, she could not get the medical supplies and treatment she needs to survive.

- Nancy, Glendale, AZ

Our daughter lost her job in the economic downturn, and also her insurance. She managed to be employed most of the time for the worst years, but all her jobs were part time or temporary, without benefits. She tried to get private insurance, but no companies would insure her due to a pre-existing condition. Through Obamacare, she was finally able to purchase insurance to get her through the last years before she was finally hired at a permanent job with benefits. Now she participates in the employee program at her company. But Obamacare got her safely through some very tough times.

- Deborah, Gilbert, AZ

Healthcare means not being trapped in your job to keep benefits. Also, both my brother and I have “pre-existing conditions” and cannot risk the insurance market without some protection.

- Erika, Phoenix, AZ

This year, I have had 2 strokes, due to a benign tumor on my heart valve, and an open-heart surgery in order to save my life. I had to go through many cat scans, echos, echocardiograms, x-rays, etc., during my 2 1/2 week stay in the hospital before the surgery was finally done on March 31. My second stroke happened on March 19. I just happened to have the Arkansas Blue Cross Blue Shield health insurance that paid for nearly $16,000 worth of medical bills. This is why I am so concerned about losing my healthcare and insurance. And, I didn’t have to pay a penny for anything except $4 co-pay on certain prescriptions.

- Kathy, Trumann, AR

I have two disabled daughters and not a lot of money. Without Medicaid, they would not be on the level developmentally that they are now.

- Melissa, Jacksonville, AR

ARKANSAS

Before the ACA, we were paying $2,000/month for horrible health insurance. That is 1/4 of our gross monthly income! And even that insurance ran out because of ‘pre-existing’ conditions, so we were without any insurance for 6 months until the ACA kicked in.

Now, we get better insurance and with the subsidies pay only $450/month for a family of three.

- Gunnar, Berkeley, CA

William, Palm Desert, CA

Since our income is extremely variable, the ACA has really helped my partner and me to keep our health insurance costs affordable. In years where we do well, we happily pay the full premium for our insurance, but in those years when we don’t do so well, the subsidy kicks in to help us out.

One month after her graduation from UC Berkeley, my daughter was diagnosed with the life-threatening condition anorexia nervosa. She required two intensive hospitalizations and prolonged outpatient care which saved her life. She has been in remission now for about 5 years.

Since she had graduated the month before, without the ACA she would not have had any insurance, and had she not been covered until age 26 we would...
have had to pay for these extremely expensive hospitalizations and specialized outpatient care out of pocket. This would have been financially devastating for us even though I am a well compensated physician. I feel that the ACA saved my daughter’s life at that time, and that without it, she will again be vulnerable if insurance companies are allowed to deny coverage for pre-existing conditions should she relapse.

– Judith, Los Angeles, CA

I am currently going through my second bout with breast cancer. The first time was difficult financially but thank goodness we had insurance through my husband’s employer. We still do, but my greatest fear is that if the ACA is repealed I may be denied coverage due to my pre-existing condition or the insurance companies may be able to once again place caps on what they pay out for very expensive treatments such as chemo, radiation and surgeries.

– Karin, Richmond, CA

Preventative care - well-child visits for my son and daughter, mammograms for me - are covered with no cost now. Maintaining good health now takes priority and we no longer have to put off any doctor visits that will keep us healthier in the long run because of cost.

I have always been very healthy and since I’m self-employed, I did not have insurance because it was too costly. Also, I try to keep myself healthy and insurance at that time did not reward being proactive about my health. When the Affordable Health Care Act was passed, I decided at age 52 to take advantage of it. Little did I know what an important decision that was.

I signed up in January 2014 and in July of that year, I was diagnosed with Stage 3 breast cancer. If it weren’t for the ACA, I would be bankrupt or dead. I couldn’t be denied coverage because of a pre-existing condition and am happy to report that I am still here and cancer free two years later.

– Susan, San Francisco, CA

My daughter was born with a urinary-tract issue that was resolved surgically at age 4. Even years after the surgery, insurance companies refused to cover her. It wasn’t until the Affordable Care Act that we were able to purchase health insurance that covered our entire family. It was a life-saver.

– Jennie, Lafayette, CO

Without ACA or something like it, our son who is now 10 would have no health coverage. Prior to ACA he was uninsurable. The reason? He was born almost 3 months prematurely which caused neuro-sensory delays -- normal when one is that premature. So essentially, being premature was his pre-existing condition which left him uninsurable.

– Angela, Yorba Linda, CA

The Affordable Care Act saved my sight. Without it I would not have been able to afford two surgeries necessary to repair a detached retina. Today I have 20/30 sight in that eye.

– Jerilynn, Castro Valley, CA

The ACA enabled me to get the healthcare I needed to address a complex situation with my hearing and balance. This has enabled me to spend more time working and earning money for my family, not just because I’m in better health, but also because I spend less time on the phone dealing with the terrible insurance that was all we could afford before the ACA.

– Robin, Santa Cruz, CA

My daughter is now 10 and born with an undiagnosed heart defect. Myka spent 2.5 weeks in the NICU and had 2 open heart surgeries (one at 4 months old and one at 11 months old).

To date, she’s a $500k baby. My husband was laid off after the ACA became law. This gave him a chance to launch his own business as we were no longer chained to the protection of a big group policy. We secured insurance and his business has been thriving. We cannot afford to lose coverage for our Myka.

– Angela, Yorba Linda, CA

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– Susan, San Francisco, CA

My brother, his wife and son got health insurance for the first time a couple of years ago because of the ACA. His wife has a serious disease and without insurance, especially that covers preexisting conditions and doesn’t impose a cap on benefits, I don’t know what they would do.

My husband’s small business has saved thousands because of the ACA and I get my insurance through one of the exchanges. My mother is on Medicare.

– Kristin, Morrison, CO

I believe quality and affordable care encourages me and others to seek medical not only when we need to, also as a preventative measure with annual check-ups!

– Johanna, Aurora, CO

As a retired public school teacher I must pay for my own private health insurance. I have several chronic medical condi-
tions and as a result of the Affordable Health Care Act health insurers can’t discriminate against me. The ACA has given me peace of mind!

– Timothy, East Hartford, CT

Erin, New Fairfield, CT

My second child was born with an attached frenulum – meaning that he couldn’t effectively nurse or drink from a bottle. Without a well-baby visit to the pediatrician (covered at 100%) to diagnose the issue and a subsequent visit to an ENT specialist for a frenectomy (covered at 60%) my baby may not have thrived to become the happy, healthy, joyful child he is today.

DELWARE

I was only 19 when I was pregnant with my daughter. A single mom trying to make it on her own. Concerned about my future but most of all about my daughter's needs.

One of the things that worried me the most was how I could afford health care on a $7.50 an hour job. I was a teachers assistant at a daycare center where I was blessed to have been given a job through some difficult times. Yet we had no health care so I had to rely on Medicaid. It was another great blessing and I didn’t feel so bad knowing my taxes where helping me contribute towards it for me and others like myself. Although expensive, we now have great coverage through my husband’s policy but others are not as fortunate.

– Ivette, Newark, DE

George, Fort Lauderdale, FL

I served in the military for 28 years. I put my life on the line for what the American Dream is all about. No mom in the United States of America should ever have to worry about getting access to affordable healthcare for her children.

– Kristina, Newark, DE

FLORIDA

To my daughter and I health care is imperative for survival. My daughter who is 22 and has lived her whole life in and out of hospitals due to chronic lung disease, asthma and pneumonia has struggled without health care. Without any resources or health care my daughter’s future is uncertain. Right now she’s on oxygen and a BPAP machine. This needs to happen now, for my daughter and for all those like her that fight daily for their survival.

– Mariamee, Miami, FL

Christie, Defuniak Springs, FL

I grew up without insurance. Every time one of us was sick was a time of great worry; not just for our recovery but for the eternal “how are we going to pay for the doctor?” And the medicines were so expensive for us...maybe $100 for an antibiotic that didn’t work wasn’t much for some families, but for ours it was near disaster. It meant our savings account dwindling down to nothing yet again, my parents having to max out their credit cards, bills being paid late, and sometimes even trips to the pawn shop.

When I worked for a large multi-national company we had great insurance for a low monthly cost. I didn’t realize why people who had insurance were complaining about coverage and cost until I lost my job and our health insurance coverage comes from my husband’s job at a small independent school. We pay 4x more in our monthly premiums now and have barely any coverage.

My daughter is deaf and uses cochlear implants to hear, but our insurance coverage excludes all cochlear implant services. She also has cerebral palsy and our insurance excludes most therapy for chronic conditions, but when it does cover therapy costs it only covers 60 consecutive days. That leaves her with 10 months/year without any therapy coverage. Without Medicaid as her secondary insurance, she would not be able to get the services she needs to become a contributing member of society.

We have primary insurance, but it doesn’t cover what we need. I think there are so many families out there like us – they have insurance but it doesn’t cover the needs of their developmentally disabled child. Our society needs to take a stand for our children and continue to fund Medicaid for our most vulnerable citizens. Thank you for fighting to continue Medicaid coverage for disabled children and others.

– George, Fort Lauderdale, FL
Not having insurance meant that we didn’t go to the dentist unless we needed a tooth pulled. As an adult I am still suffering from the effects of that; a jaw-misalignment and a tooth grinding condition went undiagnosed until I was an adult with a terrible abscess. I have since had to have so many teeth removed (a very expensive procedure) due to those conditions that I have to chew with my front teeth and people look at me and think I must be on meth or something.

Worst of all for me personally, I have suffered from depression and anxiety since I was a small child. My parents knew something was terribly wrong when I wanted to die at the age of 7. But they had no way on earth of paying a child psychologist or psychiatrist or getting me any kind of mental help at all.

I had to grow up in a nightmarish world of my mind’s creating, often friendless, bullied for being different. I finally had a nervous breakdown in college and have never been the same. I can’t hold down a job, I can’t take a college class without almost ending up in the hospital (I’ve been hospitalized twice now), and even just being a housewife and mother is incredibly stressful to me. Every day I think of suicide. I would not be alive today if it had not been for my husband’s insurance from his job, which lets me get the treatment I have to have.

Even with insurance, my family now barely squeaks by, but without it, it would be impossible. We would have to sell our house and move in with my parents or something. My point is, insurance is a powerful thing that has been denied to so many, with consequences ranging from mild inconvenience for the healthy to life-changing devastation for those who truly need it.

To my daughter and I health care is imperative for survival. My daughter who is 22 and has lived her whole life in and out of hospitals due to chronic lung disease, asthma and pneumonias has struggled without health care. Without any resources or health care my daughter’s future is uncertain.

Right now She’s on oxygen and a BPAP machine. This needs to happen now, for my daughter and for all those like her that fight daily for their survival.

– Mariamee, Miami, FL

My son was a big baby. So much so that after his birth my upper belly was still distended. When I went to the doctor with a sore throat, she mentioned that I might have a hernia. When I tried to get private insurance a month later I was denied due to this note on her report. Thanks to Obama, there was a law in Michigan that if denied private insurance due to a pre-existing condition, one could purchase health insurance in Michigan under a state plan.

Thanks to Obamacare - no one has to suffer without insurance due to one doctor’s comment in passing.

– Rebecca, Miami, FL

When my daughter was 19 months old, she had a sudden seizure and fell backwards while I was giving her a bath. I was alone with her and couldn’t leave her to dial 911, so I rushed out of my house calling for help, clutching my naked child who was seizing in my arms. Fortunately, my next-door neighbors were home and I fell to my knees and placed my child on the floor and prayed as they called for an ambulance. Her lips were already turning blue. She stopped seizing shortly thereafter and was unconscious for the next 35 minutes.

She was diagnosed with febrile seizures that day. She has had five other seizures since, each brought on by moderate fevers. Each one was just as frightening as the first. Another thing that was just as frightening for me? Being an unemployed single mom, attempting to start a business, and worrying about how I would pay the medical bills if I had to rush my girl to the hospital.

Thankfully, I was able to get her insured through the CHIP. This critical program provides health insurance for children of low- to- moderate income families like mine.

My husband is a disabled veteran, covered by the VA for his insurance. I am an LPN, the sole breadwinner and I am also in school full-time to get my RN. I just lost my employer’s health insurance because I can’t work enough hours while going to school to meet the minimum for health coverage.

I recently applied for the ACA and I was approved for good coverage for $37 a month. I am so thankful for the ACA. Our daughter is covered by Medicaid because our family income is so low.

– Deanna, New Port Richey, FL

As a physician assistant for 25 years, I know that people without health insurance tend to die earlier than folks with insurance – they don’t get the preventative screenings and interventions that insurance as in the A.C.A. provides.

– William, Tallahassee, FL

Sili, Orlando, FL

My family is greatly impacted in a positive way by the Affordable Care Act. With 2 women in the family, we don’t have to pay different rates than the two men. Our children who are in college (22 and 19) are allowed to stay on our

Alexis, New Port Richey, FL
plan. It has made birth control accessible to our daughter at no cost. In 2017 it will allow our family to have medical coverage at a reasonable price ($198 per month) that we would not otherwise be able to obtain. In addition to the affordability, everyone in the family is guaranteed coverage even though we will be changing our insurance company/plan and have pre-existing conditions. Without the ACA, we’d be denied coverage and it would be impossible/difficult to obtain due to lack of employment.

My husband suffered a stroke in 2013 but eventually returned to work. In October of 2015 he was laid-off from his job as a computer programmer for a major U.S. bank without any warning. He was one of 300 people who lost their job that day. Meanwhile, he suffered some side effects from the stroke and wasn’t able to look for a new job making him in-eligible for unemployment or any benefits.

He filed for Social Security Disability in November of 2015 and was approved in July of 2016. Medicare is not available until 24 months after approval. Upon his 10 week severance package from the bank ending, we couldn’t afford to lose our medical, dental and vision benefits so we opted for COBRA. The cost has been $1,678.69 medical; $126.69 Dental; $19.29 Vision for a total of $1,824.67 per month. In the meantime, we had no income and numerous expenses.

You don’t receive any payment from disability until they determine if you’re approved. Upon approval, they reimburse you for any money owed after the first 5 months of the process. They don’t pay you for being disabled during that time. Our income went from $100,000 annually to $0. We now receive $2,396 per month from disability. I’m looking for employment but presently don’t have access to any type of employee benefits or income. The ACA is a lifeline to our family. Without it and its benefits, our family will suffer greatly. It is essential the ACA remains in tact or improved upon.

When my husband first got throat cancer, we had very poor health coverage. It took all of our savings and retirement to make it through that medical debacle. When it came back, he had ACA, which allowed us to get excellent medical help, and not to end up totally broke again. With his medical insurance and the Medicare, we didn’t have the nightmares we had originally.

- Lora, Fort Lauderdale, FL

People must know that they have health insurance. Without it it can lead to financial ruin. I have medicare and was only in the hospital for 30 hours. My bill was $45,000.

- Jeffrey, Lake Worth, FL

My daughter was unable to get insurance coverage because of a pre-existing condition and thanks to the affordable care act she got her insurance to cover her.

- Margarita, Mount Dora, FL

Before the Affordable care act, I purchased insurance for my family to cover us while I went back to school for my Masters. I thought I was purchasing a high deductible catastrophic policy, but found out only later after my son had to have an emergency appendectomy that there was a 2,000 cap on it. The same month before we even received the bad news about our policy, we got another denial for coverage for my 4 year old daughter’s surgical procedure to fix her kidney reflux.

They denied it saying that her frequent urinary infections in the past couple of months before showed it was a pre-existing condition, and not only got out of paying for the surgery, but refused to pay for any further pediatrician visits which were due to her bladder problems. I was so happy when the affordable care act was passed because I knew that no other family would ever have to go through this.

- Amy, Naples, FL

It gave us peace of mind when I was able to keep my children, who were young adults, on my employer’s group health insurance policy. It was affordable as my children got enough work experience to get jobs which provided them with their own employer health insurance.

- Anita, Port Richey, FL

GEORGIA

When the ACA was signed into law, I was able to get health insurance for the first time in my adult life. I worked in the service industry at the time, and neither of my employers offered benefits. Now I’m a mother and I have to make sure my baby is covered.

- Cassandra, Stone Mountain, GA

HAWAII

My grandchild was born with an overly fast heartbeat (tachycardia). Had my daughter not had Medicaid, we could not have corrected this defect with the help of appropriate medication, my granddaughter would have been condemned to a life-long heart condition and an undoubtedly short life.

- Virginia, Honolulu, HI

I’m 80 year old, Korean War veteran. Yes, both my wife, Helen, and I are covered under Medicare and Kaiser-Permanente Health Care, so we are assured to get coverage when we need it. But, our concern has been that costs of treatment and prescription drugs/medicine have been going higher and higher. And, we’ve been having a hard time in paying on our limited fixed income. Now, with the passage of the Health Care Law, I can sleep better at night, knowing that we’d get coverage of our pre-existing ailments. In fact, we foresee the costs of treatment and medication to slow down and stabilize eventually.

- Edgar, Honolulu, HI

IDAHO

I have been a special education teacher for 8 years and a regular classroom teacher for 12 years. I also stayed home
for 10 years to care for my mother-in-law, who had Alzheimer’s. We tried Assisted Living Facilities, but she was filthy, overweight, and on 10 medications. I quit my job to care for her, but needed the Medicaid she received to help.

- Diane, Boise, ID

In many ways, poor health coverage led to my mom’s death in 2010. We can’t allow our nation to go back to these pre-ACA days. Our family budget was stretched to the max to pay the premiums for “catastrophic coverage” and a $13,000 deductible. This meant that when it was clear my mom needed to go to the doctor, she didn’t go because we couldn’t afford the copay and she feared that her premiums would skyrocket if she actually used her insurance.

When she eventually visited a doctor, she was diagnosed with cancer that could have been easily prevented if she had received medical care at the first signs she needed it.

When she needed cancer treatment, her extremely poor health coverage presented endless barriers to obtaining high-quality treatment, from the high deductible, high co-insurance rates, and caps on hospital stays – to the repeated denial of the “medical necessity” of cancer treatments. It was infuriating and devastating and meant that her cancer returned three times, each time harder to treat and survive.

This past spring, I was diagnosed with thyroid cancer at age 27 and needed surgery to remove my thyroid and 50 lymph nodes. Now that I have a pre-existing condition, along with 27% of adult Americans under 65, I know that we can’t let America go back to the days of lifetime caps and high-cost or denial of coverage for those with pre-existing conditions.

- Sara, Hailey, ID

Our now 23-year old son was born with significant health problems that have followed him throughout his life: asthma, “clubbed” foot (multiple surgeries), tracheal myalgia. In the past three years he’s had kidney stones and a gall bladder removed.

I’m elated that we can keep him on our group insurance (although it’s 30/70 split with a $3000 deductible costing $1098/mo.) because we can get the care he needs. We are also pleased that when he ages out of our policy at 26 his pre-existing conditions won’t preclude his ability to obtain insurance.

- Lenore, Idaho Falls, ID

I am a single mother working full time. My daughter receives Medicaid. This is the only health insurance I can afford. Up until last month, I was purchasing my health insurance on the marketplace. It cost me $300 a month, and my employer contributed less than a third to this amount. It is nearly impossible to afford health coverage in this country. I was working in the healthcare industry myself, and I still could not afford my own family’s healthcare!

- Jenny, Chicago, IL

My daughter who is four years old with Pierre Robin Sequence and tracheomalacia has benefited from the Affordable Care Act. She is allowed on our private insurance due to no maximum benefit. This has helped pay for her multiple hospitalizations, multiple surgeries, home supplies, ventilators, and so on.

She is also on Medicaid to help cover what our private insurance does not cover such as nursing services. Without nursing services she would not be alive today because there is no way that I can stay up 24/7 to watch her.

She has coded multiple times and my nurse has saved her life multiple times. Please her life is so important to my whole family and extending family.

- Rachel, Warsaw, IN

INDIANA

Susan, Chatham, IL

My husband has Crohns and was denied health insurance for 5 years. He endured 3 hospitalizations along with numerous doctor visits that we paid out of pocket. We’re fortunate we avoided bankruptcy, as my brother was forced to.

He was a small business owner and couldn’t afford coverage when his wife had gallbladder surgery and associated complications. His son suffered and was treated for a benign brain tumor. Both of our families have benefited from the Affordable Care Act.
Little side note she is the smartest kid in her class per her teacher. Please help her stay alive.

Cyndi, Bloomington, IN

I come from a background of generational poverty in the hills of southern Indiana. I don’t recall going to the doctor growing up, so it was a good thing I was generally healthy besides the occasional cold. I worked hard throughout school and was awarded numerous college scholarships – becoming the first person on either side of the family to earn a degree. I went on to work as a math teacher in Indiana for years and even earned a masters, but later, when I started a family and discovered prenatal that I was going to have a baby girl with Down syndrome, my life changed dramatically.

It became clear shortly after she was born that to coordinate her medical care I would need to be a stay-at-home mom. Virtually overnight, we went from being a two-income family with no medical expenses to a one-income family with astronomical medical expenses. I remember standing at the mailbox with my tiny baby (still under 10 pounds at 11-months-old!) cradled in my arms and opening an envelope from the children’s hospital with a bill inside for $64,00 – more than my husband’s annual salary – for merely “renting” the surgical room and equipment used during her heart surgery the month before. I fought back tears as I tried to wrap my mind around it – recognizing that more bills would soon arrive in my mailbox for the hospital stay, surgeon’s fees, and more. Then it hit me: This was our new reality.

Over the next several years even with private insurance through my husband’s employer, the bills added up quickly. Besides deductibles and co-pays, there were many expenses insurance didn’t cover: medical equipment and supplies, high-tier medications, out-of-network specialists, therapies, incontinence supplies, specialized feeding supplies, travel, and more. Our out-of-pocket costs were spiraling with no end in sight. We even took out a home equity line of credit, all the while fast approaching the lifetime cap on medical expenses imposed by our private insurance.

Then came the Affordable Care Act – covering 28 million Americans who were previously without health insurance. We were so grateful not only for all those Americans gaining peace of mind, but for the peace of mind we had knowing that lifetime caps had been eliminated. Of course there was still the issue of our mounting medical debt. But then in 2015 after being on a waiting list since birth, my then-8-year-old daughter became eligible for the Medicaid waiver in the state of Indiana, effectively rendering her eligible for Medicaid Disability.

Medicaid now covers much of what private insurance does not, and while the system is still far from perfect (we still incur hundreds of dollars of uncovered medical expenses each month), it has meant a much brighter financial future for my family.

We have paid off most of our medical debt and have even begun saving for college for my other 2 children. If the ACA provisions are repealed. Americans like the pre-existing condition piece the removal of lifetime caps, and the ability to retain a child on their policy until age 26.

And finally funding Medicaid using a block grant model cannot be an option. Medicaid covers nearly 73 million people across the U.S. including low-income children, expecting mothers, persons with disabilities, and others. Imposing artificial caps on the Medicaid program would put all of them at risk, my daughter included. With block grants, states would be forced to further reduce already dismal Medicaid reimbursement rates and restrict eligibility requirements, thereby compromising access to quality care for those 73 million Americans. That would be a disaster.

I am a low income epileptic who struggled for years to control my seizures. This was not because my case was such a difficult one but because I had no insurance and could not afford to see a specialist or get more than one or two of the specialized tests needed for my condition. I could not even afford the regular blood tests needed to determine the dosing of my medication and suffered for years with ineffective medication I couldn’t really afford because of it.

This made it impossible for me to work, drive, or otherwise live independently. Recently I was able to get Medicaid through the Affordable Care Act and now have been able to see a neurologist and get the testing I needed to make my medication effective. It also made that medication affordable and now I am living independently and working on getting a job and to the point where I can drive. Without my Medicaid there is no way I could afford this medication and medical care and would be worse off than before.

– Genevieve, Valparaiso, IN

As a person in my sixties and originally on the individual market being in the marketplace has allowed me to feel confident that if I get sick the private providers won’t inflate my premiums so that they will not be payable.

– Catherine, Bloomingdale, IN

For 40 years, I’ve been a registered nurse. No other health care issue affected my practice like the ability to have access to care. As a psychiatric nurse, I saw devastating impact on youth, postpartum women and young adults who once diagnosed with treatable mental health or substance disorders, lose their insurance coverage. I also worked with 100s who in their middle years quit jobs to care for elders and then succumb to illness.

It is unconscionable still how many caregivers go without any health care coverage of their own. In 2009 lost my job and then within a year could not af-
My family has greatly benefited from the Affordable Care Act. 1. My father was a union carpenter his entire career. When he retired, he opted for the cobra ins coverage but this still ran out before Medicare started. My mother and he had an extremely difficult time getting any ins co to take them on. They had no big health concerns either.

It was very scary. The amount of money that they had to pay out of pocket was huge and I can’t imagine most people being able to afford it. 2. My brothers are also union carpenters. If they are laid off in the winter, they may not get enough work quarters to qualify for ins.

This was very scary as my older brother has children at home that needed covered. 3. My stepdaughters are in college. When they graduate, we are worried about their ability to qualify for health ins. With coverage to children up to 26yo, this has been a relief to us.

These are NORMAL EVERYDAY occurrences for NORMAL EVERYDAY Americans and it has impacted (Or will impact) my family in many, many ways.

– Andrew, Preston, IA

KANSAS

My husband and I have both been through cancer. Without affordable health care we would probably be dead.

– Jackie, Overland Park, KS

With a major illness in the family and the need to stay healthy for all of us, the ACA has made healthcare easier and within our means. Healthcare costs for a major illness are astronomical and, without the ACA and charitable agencies, we would not survive or have our home and general health.

– Meredith, Lawrence, KS

I have worked in both community mental health centers and in my own private practice for many years and the CHIP program helps lots of kids whose family members make too much money to qualify for Medicaid but make too little to afford purchasing their own insurance. Helping children with emotional disorders early in life lessens the need for more extensive mental health treatment and/or hospitalization later in life. Research shows that earlier intervention in childhood reduces mental disorders in adulthood and saves both money and improves their ability to lead productive and healthier lives.

– Mary, Wichita, KS

When I was younger I went many years with no insurance and hoped for the best. On minimum wage employment there was no way I could afford to buy insurance and pay the “survival” bills, such as rent, utilities and food. As a result I did not seek medical care until the situation became serious.

A fairly minor injury to my leg seemed manageable without a doctor’s attention so I saved the cost of an office visit, which had to be paid for in advance, since I was uninsured. However, in short order the wound became septic then began spreading up the leg and I had no choice but to seek care.

I was lucky to find an emergency “clinic” which was much less expensive than a hospital ER and did not require pre-payment so I was treated. I still have a scar on the leg from the destruction the infection caused.

Had I been insured or had otherwise affordable health care at the time, I would have sought treatment earlier and perhaps avoided much of the pain and cost.

– Dot, Norton, KS

– Cherie, Elliott, IA
**KENTUCKY**

I am a pediatric physical therapist and have served many children who have Medicaid. Without Medicaid these children would not have had access to investments in Medicaid strengthen our economy Study from the National Bureau of Economic Research http://www.nber.org/papers/w20835 children who are covered by Medicaid receive a boost in their future earnings in return, they pay more taxes & pump more money back into the economy MomsRising.org 7 basic medical care or therapy services. Through Medicaid I was able to order wheelchairs, stands and other devices to help children develop and make their parents’ lives easier.

I never dreamed of the day that I would personally use Medicaid services for my own child. My daughter was admitted to the hospital when she was 9 days old with RSV and we spent 1 week at the hospital, and while we had private insurance we were unable to cover the remaining costs of her care. Our local hospital encouraged us to apply for Medicaid to cover the remainder of the costs. To our surprise she qualified and it appears that they will be covering the remainder of her expenses.

- **Gina, Lexington, KY**

Being a single parent of two wonderful kids, medical coverage would be out the question for my kids. My place of employment doesn’t offer medical insurance unless you are an full time employee. The payment for the insurance would take most of my check just to have it all with co-pay payments for each visits. I have another job that doesn’t offer medical insurance at all. Without Medicaid, me and my children wouldn’t be able to have the medical attention that is needed in case of injury and everyday well child check-ups. Medicaid is needed in my households for us to be able to productive citizens.

- **Rolanda, Lexington, KY**

**LOUISIANA**

I have chronic migraines. Prior to the ACA, I was turned down for health insurance by multiple companies for this preexisting condition. Under the ACA, I have been able to receive excellent health care, with my choice of doctors and treatments. It would be devastating for me and my family if I was again excluded from health insurance, or had to pay premiums and deductibles so high as to render them unaffordable (I typically need between $8,000-$10,000 per year in medicines and treatments).

- **Mandy, New Orleans, LA**

**MAINE**

I have been a self employed farmer and crafts person all my life. My husband and I never had health insurance until the ACA. We never knew that people with health insurance got much more thorough check ups than we did without insurance. Even the way you are treated at the reception desk of a doctor’s office is better when you have insurance. Insurance through the ACA has been very affordable and very good.

- **Carol, Cherryfield, ME**

Before I had affordable coverage when I had an MS episode I paid for my care, if I got any, which I couldn’t afford. I carry debt from my last episode that I sought care for. With affordable care I am not afraid to see my neurologist or afraid of the cost of my care. Its a relief and a nice feeling.

- **Elizabeth, Gray, ME**

When I was diagnosed with another breast cancer in 2011, I discovered that the expensive health insurance I had been paying for every month, was going to leave me with 100s of thousands of dollars of medical debts for that year, alone. I wept over the burden my illness was placing on me and my husband, after we had climbed out of my medical debt so often before.

I was able to switch to a better carrier, only because of the rules of the Affordable Health Care Act, which prevented insurance companies from rejecting me for pre-existing conditions. As it was, I still had $17,000 in debt, which was largely taken care of by an incredible group fundraiser. Being able to switch to better insurance coverage lifted a huge weight of stress from our shoulders, which I am sure helped me in my recovery. It has helped us to stay living in our home and living our lives. And it has placed me in a position to help others now. I pay it forward. I still have medical debts accumulate but I manage. I am on Medicare now. I want to hang on to that as well. I’ve been paying into the system my whole working life. Less wealthy countries take care of their citizens’ health care needs. So can we.

- **Nancy, Searsmont, ME**

As a sole proprietor business in Washington County Maine I am dependent upon the ACA to buy affordable health care. It is the ONLY way I can afford it. Eliminating or increasing the cost or giving even more control over to the insurers means that 1000’s of folks will be without coverage. This is bad for them. And bad for overall health care costs because all care ends up back in the Emergency Rooms. Our rural hospitals sustainability will suffer even more.

- **Sarah, Robbinston, ME**

**MARYLAND**

I’m the proud mother of two wonderful boys with bright futures. Unfortunately, one of my sons has a serious pre-existing condition: cystic fibrosis. For him, access to health care is the key to that bright future. Parents of children with pre-existing conditions have to act today to protect our kids’ futures. I have heard about the tremendous challenges faced by young adults with cystic fibrosis in finding health insurance. Young adults with cystic fibrosis are often denied insurance coverage and also face barriers in their careers as they make work and life choices that are dictated by a limited set of health care options. That’s not the future I want for my son.

- **Christine, Chevy Chase, MD**

I am lucky to have excellent health care insurance, but that is only because I am married to a man who runs his own business & has a group plan. Otherwise, no insurance company would ever touch me. I’ve had a chronic illness (Crohn’s disease) my entire adult life (diagnosed at age 17).

When I was 43, I was diagnosed with stage III rectal cancer. I never could have afforded the treatment I received that ultimately saved my life & allows me
to watch my children grow up. As I approach my 50th birthday I am aware that it’s not just about me – the fact that I personally am fortunate enough. I can’t live with myself to think that others like me are left to die. That’s not the America I want to live in.

We need to support each other in fundamental ways and to me affordable health care is not a privilege of being an American citizen but a right. I am willing to pay more to help others less fortunate.

– Jennifer, Chevy Chase, MD

MASSACHUSETTS

AnnMarie Belchertown, MA

My daughter, Gracie was born prematurely at 26.6 weeks for unknown reasons. Due to her prematurity, she spent 68 days in the NICU with premature lungs, 2 heart conditions, brain bleeds, jaundice and an infection. We fed her breast milk one cc at a time. By some miracle, she is now 7 years old and healthy!

However, due to her pre-existing condition, she could lose her health insurance as she would likely have already used up her lifetime cap on benefits.

I too have a chronic illness Crohn’s disease. I never know when it will flare up. I take an injected biologic medicine weekly to try to keep it (and the subsequent autoimmune diseases that come with Crohn’s: psoriasis, arthritis, iritis, etc.) in check. This medicine costs over $1,000 an injection. There is no way I could pay for it on my own.

I manage a thriving department full of employees, am a single mom and hence the manager of my family. I would not be able to keep up without it. Losing my insurance would require me to compromise my health, my livelihood and my ability to parent. I can’t see how that would be worth it!

– Jennifer, Chevy Chase, MD

Laura, Boston, MA

I am putting my husband through college and my employer is a small institute that does not offer health insurance. Without affordable options on the exchange, I don’t know what we would do to get covered. We need the ACA to ensure we can find a plan that fits our budget and lifestyle. Healthcare is a right, not a privilege, and is needed for a prosperous economy and communities.

– Laura, Boston, MA

MICHIGAN

Deirdre, Saginaw, MI

I have had cancer twice as a 32 year old single mom. Once thyroid and once cervical. Without the affordable health care act I would be uninsurable. I would not have survived my last fight with cancer and my son would be on his own at 10 years old.

My son was suffering from severe depression and drug addiction. The expanded medicaid program in Michigan allowed him to see a doctor and start treatment. It gave him the dignity to seek help. Medicaid actually lifts people out of poverty.

– Deirdre, Saginaw, MI

Karen, Marquette, MI

My youngest son is a type 1 diabetic and his medication is covered under state funded Medicaid because I don’t make enough money because I work part-time.

Without Medicaid coverage it would be an extreme hardship for me to try to pay for his medication and his diabetic supplies. I am a hard working mother and I am truly offended that Congress and the president-elect would try to take away healthcare for young people and hard working families.

I wish they could understand that this would be a financial blow to others who depend on the ACA and other provisions that help those in need. Maybe they need to concentrate on lowering medical supplies and medicines that individuals are depending on. It is a matter of life and death for millions like my son.

– Annette, Westland, MI

MINNESOTA

Diana, St. Paul, MN

I work only part-time (it’s all I’m able to manage) so do not get coverage through work. Due to a number of health issues I’ve had most of my life, I would not be able to get necessary prescriptions filled, or even regular checkups without affordable coverage.

– Diana, St. Paul, MN

After years of being uninsured, I finally have health insurance again. You see, I had a stroke 11 years ago, and even though I fully recovered very quickly and removed the only risk factor I had, I have been unable to get health insurance...
since losing my job in 2004. Not everyone has access, even well-paid jobs often no longer include health insurance, and with a pre-existing condition it’s virtually impossible to get insurance.

As it is, I’m not eligible for any form of disability or long-term care insurance, but at least now I can go to the doctor without worrying about how I will pay for it.

– Dayna, Richfield, MN

MISSISSIPPI

My daughter was born at 32 weeks following a car accident where we took the blunt of the impact. After an emergency C-section the hospital staff lost her for 18 minutes but managed to get her back. She could not breath on her own for over a month and remained in NICU for a total of two months. We brought her home on a sleep apnea monitor but no feeding tube due to a determination to get her drinking. At three months old she was diagnosed with severe Cerebral Palsy and Cortical blindness. She gained sight.

She’s 8 now and is non-verbal (although she ’speaks’ volumes), is wheelchair dependent and wears AFO’s and hand splints. She has limited use of her right hand and none of her left. MS Medicaid has stopped her speech therapy due to ’lack of progress’ Her equine (HIPO) therapy has been terminated.

Now she is on a new seizure medication that there always seems to be a problem filling. Don’t get me wrong – my husband and I appreciate her Medicaid but she needs so much more that they will not pay for.

– Stacy, Byram, MS

Thanks to the Affordable Care Act, my 50-year-old daughter, who is a small business owner, is able to buy health insurance for the first time. 42 years is an awfully long time to be without medical insurance. It has put a strain on the entire family, wondering when we were all going to be responsible for paying for a major medical event. Ultimately what it has meant is that, although she has worked since she was 18, she has gone without proper medical care all those years.

– Lyn, Oxford, MS

MISSOURI

I am a senior citizen who needs thirteen critical medications a month, several very expensive. Without the AFA provision that gives those of us in the Medicare “donut hole” a discount on the retail price, I would not be able to afford them thereby endangering my health. And there are many others just like me who would have to make a difficult choice – food and rent or medications.

– Carol, Grover, MO

My husband, a wounded Vietnam vet, just began receiving treatment through the VA system for the long term effects of Agent Orange exposure (he sprayed it) and PTSD.

Because he waited so long to get help, his health problems are highly complex and difficult to treat. In addition, his war injury has caused deterioration of his knee joint and he will need a replacement. Back surgery for a ruptured disk cost about $100,000.00 We couldn’t possibly afford this without insurance and the VA

– Kristin, Joplin, MO

MONTANA

Without the medicaid expansion I’d have NO insurance at all as I’m diabetic and according to insurance agents, un-insurable.

– Wm, Whitefish, MT

We are one of the lucky ones that have been able to have health insurance since my husband and I got married in 1991. It has been vital to our family. In 1992, we were expecting our first child. At 30 weeks we learned that our son would be born with kidney failure and probably would have lungs too small to sustain life. Somehow my son survived. He spent 2 weeks in the acute NICU and another 4 or 5 weeks on the pediatric floor. Even after he was born alive and able to breathe on his own, we were told that we shouldn’t treat him. He would never grow, never learn, never develop. We moved him to another hospital. The only reason we were even able to have a choice about hospitals was that my son qualified for SSI and Medicaid. Here we are almost 20 years later. My son spent 4 years on dialysis, has had more than 20 surgeries and countless painful procedures in that time. He received a kidney transplant when he was 5 years old and it’s still going strong almost 15 years later. The reason it is going strong is because he has insurance!

A transplant is NOT a cure. If you can’t afford the anti-rejection drugs, you lose the organ and you end up back on dialysis, or dead. My son also has autism (he is toward the mild end of the spectrum) and has developmental and learning delays, so even though he is almost 20 years old, he is unable to have gainful employment. Because of health care reform, we can keep him on our insurance until he is 26 years old. He does qualify for SSI and Medicaid now, but I know having him on our private insurance (which costs us over $600 a month and my husband’s employer pays more than toward the premium) helps to keep Medicaid from having to spend so much on his care. We don’t make a lot of money, we don’t have savings.

My husband works hard at his job so we can have a place to live and food to eat...AND insurance. Because of health care reform, I am relieved that my son will be able to have some kind of health care coverage and not be denied due to preexisting conditions.

– Shelly, Belgrade, MT

I have a friend who is disabled with a very limited income. Until the ACA, he couldn’t afford eye glasses, he needed eye surgery and dental surgery. He suffered from serious pain in his back. Once he was covered by Medicaid in this state, he was able to have eye surgery, get glasses, have his dental surgery and get dentures, and begin pain management for his back. He is a new man. He is bright, happy, motivated, looking for work...The ACA changed his life for the better. I could tell many other such stories, because I work in healthcare, but this one is the most personal.

– Janette, Butte, MT

If it wasn’t for my military service & the Veterans Administration, I would probably already be dead. I am a brittle diabetic & need medication every day. Be-
NEBRASKA

When I was 19 and in college I got sick. After several ER trips I had a late night surgery and was diagnosed with endometriosis. Working full time, going through treatments, and medication was too much in itself, let alone school. I quit college and lost my insurance. If the ACA was around then my life would be so different. I continued getting worse. Uninsured I still continued seeking care. I ended up having a hysterectomy. By that time I was $60k in debt and filed bankruptcy at 22.

Still sick I moved to Mississippi after Katrina to find a job with insurance. I did and I thrived financially. I was diagnosed with interstitial cystitis, fibromyalgia, pelvic congestion and a few other things. I spent almost 4 years there before I came home to Nebraska. I needed my family and friends around to support me. When I moved home in ’09 things changed, my body changed. I had no insurance again. In ’13 I had my second positive ana. I have unknown autoimmune diseases. I worked full time some times two jobs to survive. Pay for medical expenses and survive. Over the last 2 years I’ve gotten much worse.

– Amanda, Lincoln, NE

My father entered a nursing home about four years ago. He was losing his sight, had mobility problems and was showing signs of dementia. He had very little money set aside and had just household belongings. My brother had rescued the farm from foreclosure twenty years before and my father had lived on the farm. The house was literally falling apart and would have been condemned for living purposes if it had been inspected.

The first two years he lived in an assisted living part of the home but as the dementia increased he had to go to the nursing home. No, he wasn’t completely happy there but neither was he when he had stayed with either of his children. I underwent back surgery and a couple of other surgeries while my father was receiving Medicaid housing. My husband would not have been able to take care of both of us. Without Medicaid I’m not sure how my father’s life would have ended. A year ago he died in a hospice bed in a hospital. I am concerned about those in similar situations today and tomorrow. The rising costs of medical care and the lack of assistance for people in small communities are causes of concern for people living there.

– Connie, Norfolk, NE

NEVADA

Like tens of millions of other women, the ACA means I don’t have to pay anything for my annual flu shot, Pap smear, mammogram or gynecological exam. That’s huge to me, and it has helped keep me healthy.

If not for Affordable Healthcare coverage here in NV, I would not be able to have health insurance. My husband has Medicare but I am 62 so too young for that program. I work part time so am not eligible through an employer. Therefore this issue is of utmost importance to me.

– Marilyn, Reno, NV

NEW HAMPSHIRE

ACA has given myself and my children healthcare when we could not get it through an employer and my child’s father could no longer afford to carry her on his plan.

– Joanna, Londonderry, NH

It saved me when I needed it most. I had a host of health issues and had lost my job...
because I was in the hospital so much. I would be homeless without it. Don’t get rid of it.

– Susan, Hanover, NH

NEW JERSEY

I’m the parent of a child with 5 life-threatening conditions and autism just to keep it interesting. I’m deeply concerned about protections on pre-existing conditions, dependent coverage, and annual/lifetime cap limits.

– Lauren, Trenton, NJ

NEW MEXICO

When my corporate job ended due to a chronic injury from a car accident, I was only able to get one policy, $400 a month with a $10,000 deductible. For 19 years I could not improve my coverage. Now I have coverage.

– Deborah, Taos, NM

My daughter was born with a genetic disorder that caused many health problems. She was not insurable and it caused her many problems. She can now buy insurance and that has changed her life for the better.

– Marie, Alcalde, NM

NEW YORK

After 61 years of excellent health, I had two emergency surgeries, one scheduled surgery, and pneumonia in less than 12 months. I was not strong enough to keep up with the pace of my nursing job and sought coverage with ObamaCare. It got me through months of recovery until I could get back to a job with insurance coverage.

My oldest son has had bladder cancer, and under Affordable Care he has been able to receive improved and higher quality treatment. His cancer is now in remission.

Two other adult children and their families receive medical care under Affordable Care with greater access to quality care at a lower cost.

– Sharon, New Baltimore, NY

A few years ago, before the Affordable Health Care Act, my husband’s employer was planning on changing companies, so he sent in one month, instead of three. We were dropped. New care started, but since I had already scheduled surgery, my gall bladder condition was not covered as preexisting.

I had to wait until it became infected, which was a new condition, the pain was incredible, the worst I’ve ever felt, it made childbirth seem like nothing, the surgery was much more difficult. I needed longer term antibiotics. Without surgery, I may very well have died. A molehill was turned into a mountain.

– Beth, Flushing, NY

NORTH CAROLINA

My Godmother, Karen, died because she didn’t go to the doctor. It wasn’t because she didn’t want to, it was because she couldn’t afford it and had a life threatening condition she didn’t know about.

If she had been able to go to the doctor, get her blood pressure checked, and get medication, my children may have known her and her child might still have a mother, her husband, might still have a wife, her mother might still have her child and her brother might still have a sister.

There are so many stories like this, and sadly, I might become one of them. My thyroid disease could easily be labeled a “preexisting condition” and a medication I need to function could be denied me because I’ve had it for years. I’m scared, sad, frustrated, and angry.

Every member of my family has what insurance companies consider pre-existing conditions, which means w/out the ACA we would likely be denied health
When my son was born in 2006, he needed to start chemotherapy at six weeks old to treat a life-threatening tumor. He needed round-the-clock care, so I had to quit my job to care for him, which meant we also lost our employer-sponsored health insurance. We were incredibly fortunate that he qualified for Medicaid, but after a lapse in coverage for myself, I found out I was uninsurable due to some minor pre-existing conditions.

I remained uninsured for a few years – putting off needed care and prescriptions – while I cared for my son. It wasn’t until the Affordable Care Act (ACA) was passed, which made it illegal for insurance companies to deny coverage to people with pre-existing conditions, that I was able to buy affordable health insurance coverage on the Marketplace.

As an 26 year Occupational Therapy professional, I have insurance via my employer. However, I have personally worked with clients who do not have healthcare and I see the effects of long term chronic illness that are not treated. Every American should have basic healthcare which will not only prevent unnecessary illnesses, but curb the cost of our healthcare overall here in America.

- E N, Clemmons, NC

Felicia, Raleigh, NC

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- Janice, Charlotte, NC

I have a number of friends and neighbors who have lost jobs and are trying to pay the bills through independent contracting, which is an unstable source of income. Without the ACA, they would have no health insurance. One of my friends was diagnosed with cancer – without the ACA she would have had no means to pay for the treatment.

- Bev, Pittsboro, NC

We live in a retirement village, and most of our money goes for living expenses. We NEED the Affordable Care Act to make health care something that we can access to!

Otherwise, we will be in financial trouble with all our health issues that must be dealt with, especially in my husband’s case with dementia growing each month!

- Dorothy & Robert, Durham, NC

I am 62 and didn’t have coverage before the ACA I had a hernia the first year I had coverage. If I didn’t have coverage I would have ended up in the emergency room instead of having a scheduled surgery. Without the tax credit I could not afford any coverage.

- Jesse, Louisburg, NC

As a parent, one of my biggest fears is my child getting sick. Really sick. If the unthinkable should happen, I want to be able to focus all my energy and time on helping my daughter get better, not fighting with the insurance company. The ACA is so crucial for the health and security of our middle- and lower-classes.

Maybe rich people don’t have to worry about being able to afford care if their children get sick, but I do. I pray to God every single night for my child’s continued good health. And I pray for the people who are in the situation of having a seriously ill child. Any one of us could be in that position.

- Brooke, Grand Forks, ND

NORTH DAKOTA

I applied for ChIP for my two daughters, a program that I just learned about and found out they qualify for Medicaid because of the new expansions to the program. Without it I don’t know how I’d afford my 4 year-old’s asthma medication.

- Sara, Grand Forks, ND

OHIO

My husband has been downsized twice in the last three years. We are both self-employed now, and are earning enough to stay comfortable. But I have rheumatoid arthritis, and without the Affordable Care Act, I fear I would be uninsurable as having a preexisting condition.

My practice has grown to the point I was able to hire a part-time employee this year. But if I lose my health insurance, I perhaps would need to find some employment where I could be covered and would need to let my employee go.

- Ann, South Euclid, OH

I am one of a family of five. My husband and I both work full time jobs. Together our household income is less than $45,000. He works for a company that doesn’t offer medical benefits and
I work for a non-profit social service agency that can barely afford to offer me any. Benefits for myself alone equals more than 5% of my income. I have a son who has a disability and requires lots of care. Because of Medicaid we are able to obtain the care he needs.

Without Medicaid we wouldn’t be able to afford the medical treatment and would be forced to live off of even less than what we make because one of us would have to stay home with him. This would add extra strain on the economy due to the need to apply for subsidized housing, food benefits and others.

But with his treatment that is paid for by Medicaid, he is able to go to school, camp, enjoy things other children his age enjoy and we are able to continue to work and contribute through our tax dollars to the public service that helps us make it all possible.

– Davetta, Cincinnati, OH

Our daughter Addie was diagnosed with Type 1 diabetes at age 6 - an autoimmune disease for which there is no cure, but does have very expensive treatments. When my husband lost his job a few years ago, prior to the Affordable Care Act, NO ONE would insure us - at any cost.

We were denied coverage because of Addie’s Type 1 diagnosis. Thanks to the Affordable Care Act, we no longer have to worry about being denied coverage and I can sleep at night knowing that Addie will always have access to her life saving medications - or will she??

– Amy, Columbus, OH

I am a two-time cancer survivor. The health insurance premiums for my husband and myself, after age 60, covered at the time by the church we have pastored many years, were approaching $38,000/year. When the ACA was approved, our American Baptist denomination ceased offering health insurance to churches due to the spiraling costs, and we were then on the open market.

My cancer is in remission, thankfully, but I have an immune disorder which requires monthly intravenous treatments. Without this support, my health would be severely compromised. The ACA policy my husband and I have has covered my previous doctors, although not at all the same locations, and the staff at the other end of the call line of this insurance company has been friendly, helpful, kind, and thorough.

– Mary, Oberlin, OH

Before ACA our health insurance deductible skyrocketed to $20,000 a year for our family and our out of network was $40,000. My husband works for a small business and within the company several pre-existing conditions made insurance outrageous.

After we experienced a year with over $20,000 in medical bills we were considering selling our home/ down sizing and pulling our kids from the parochial school they love. We had saved enough to get through one tough year but we were afraid that subsequent years of high bills would pull us under.

Once ACA passed our deductible went down to $3000. We were able to save money and my husband was able to buy a share of his company. ACA allowed us to become small business owners since we had affordable health care. Our children have stayed in the school they love. All of this uncertainty surrounding health care has us worried again.

Since ACA our youngest child was born with FPIES. We are scared she will be considered uninsurable. She appears to be outgrowing the condition but will insurance companies insure her?

– Rebecca, Cincinnati, OH

Our family has had a series of health issues and having health insurance has made it possible for us to deal with them. I am especially grateful for the ACA rule that requires coverage for preventative treatments and that mental health issues be treated the same as other medical issues.

Without this later provision, some necessary treatment would not have been an affordable option for us.

– Sonya, Cleveland Hts, OH

My husband has had a job with a very small organization that cannot afford to provide healthcare for its 2 employees. I am the sole owner of a very small business. Thank goodness we can get our healthcare coverage through the exchanges.

– Adina, Shaker Heights, OH

OKLAHOMA

My mother-in-law had a seizure at her new job, Walmart (after being at home for years), and did not yet qualify for health insurance (not even catastrophic insurance).

She was diagnosed with 2 brain tumors, one benign, the other malignant. Without Medicaid, my mother-in-law could not have received any cancer treatment and the hospice care she will eventually receive.

– Melissa, Edmond, OK

I am the mother of a disabled adult daughter. Medicare and Medicaid have been very important in her care. She is able to live at home and has not been hospitalized in several years.

It is urgent that Medicare and Medicaid be preserved. It is much more cost effective than hospitalization and emergency room care!

– Roslyn, Shawness, OK

OREGON

Larry, Tigard, OR

Thanks to the ACA, my sister and her daughter were able to get health coverage despite having diabetes...a pre-existing condition. Without ACA, no insurance company would cover them. Thank you Obamacare!
As someone who has suffered for years from depression, the ACA has finally made it possible for me to find a treatment plan that works. I can’t tell you what this means to me and my family. I am finally about to be the mother I always wanted to be – available, patient, and emotionally balanced.

If the ACA goes away, so does my medical care. On my budget, there is no way that I could afford health insurance, and a health savings account would be of no use.

Both of our sons were included on our family insurance for some years due to the Affordable Care Act. Our elder son’s coverage denied him prior to the passage of the Affordable Care Act simply due to a bicycle injury while in college.

He wrote an eloquent letter along with one from his doctor at the time to have the denial set aside. For anyone else without his eloquence and our support, he would have been left without insurance.

– Christina, Lake Oswego, OR

Mary, Gresham, OR

My life long medically, mentally, physically disabled daughter of 42 years has received appropriate health care from private health insurance, Medicare & Medicaid all her life. Without this care she would be dead a long time ago. I am 1 of millions of families surviving with a disabled family member because of available national health care laws.

Rhea, Portland, OR

At 57 my back blew out due to severe stenosis. The condition has left me with little ability to walk constant pain any time’s and inability to even care for myself. I was covered by Medicaid until my SSI disability was approved.

Since there’s a two-year waiting period for Medicare I have to pay for my own insurance for the next two years. Without the Affordable Care Act I would not be able to afford insurance where would I be insurable on my own.

– Barbara, Bridgeville, PA

Mary, Gresham, OR

My life long medically, mentally, physically disabled daughter of 42 years has received appropriate health care from private health insurance, Medicare & Medicaid all her life. Without this care

Pennsylvania

Elizabeth Greenfield Twp, PA

I had a number of concerning symptoms, but I didn’t know what was wrong. My husband was having heart palpitations, just one year younger than when his father died of a heart attack. We couldn’t afford testing to find out what was wrong with us, and we wanted a child. After getting health insurance through the ACA, we both got tests I had a thyroid condition that was easily treated with an inexpensive medication.

He was put on a simple inexpensive heart medication and we both started going to the doctor for simple check-ups. We had our baby in January 2016 and I was happy to have excellent care through my thankfully uncomplicated pregnancy.

My beautiful healthy baby relies on our coverage for his many regular well baby appointments and vaccines. We both work. The ACA is our only option, I love it and credit it with my families health.

For me it’s simple. With Affordable Health Care I get to live a relatively comfortable life. Without it I would perish. I was diagnosed with numerous autoimmune conditions at the age of 13. I’ve never been insurable until President Obama pass the Affordable Care Act. At times when I could work I had employer provided health insurance.

Tam, Furlong, PA

A year before the ACA was passed, I had a beautiful 30-yr old niece who died because she lost her job, had a preexisting condition, and didn’t have access to affordable health insurance. This heartbreaking tragedy should not happen ever again to any family.

My husband and I are in our early sixties. Before the ACA, there were several years where I was unable to get health insurance because of pre-existing conditions. During the same time period, my husband was in the hospital four times in one year, and despite the fact that he had insurance from work, we had to file bankruptcy due to excessive medical bills.

If the ACA is repealed, my husband will lose his coverage and will be unable to get any due to pre-existing conditions.

– Laura, Reading, PA

We have 5 children. Three would have aged out of our insurance if not for the...
ACA. Three people that I love more than anything could be without health protection. We are forever thankful for it.

– Robin, Pittsburgh, PA

The ACA finally allowed us to breathe freely for the first time in years. Before the ACA we spent 50% of our income on premiums and healthcare. After the ACA we got the care we needed and had enough money to live on. It made all the difference!

Before the ACA the premium for high deductible basic insurance was $2500 a month after it was $535 a month with a low deductible and low copays for most services. That is life changing!

– Paulette, Nazareth, PA

Thank God that my son was able to continue on my insurance until 26! At 25 he was diagnosed with the same heart condition that had killed his father. He now has an internal defibrillator in his chest, which now brands him as having a pre-existing condition.

– Annie, Elkins Park, PA

I cannot afford health insurance without this program. The wife and I are on limited incomes.

– Chester, Mechanicsburg, PA

I am a two-time cancer survivor and the protections in the ACA for pre-existing coverage and banning life-time limits are critical for people like me and especially for children who have had cancer.

– Meredith, Erie, PA

I was laid off from my long term full time job last November, 2015. I have since had some temporary employment while continuing to look for full time work. I was diagnosed with cataracts last spring and had operations this summer on both eyes.

– Michelle, Scottdale, PA

Through the Affordable Care Act I was able to get a breast pump. This allowed me as a mother to work (or have my husband or someone else watch our baby) while still giving our baby breastmilk, which is what a little baby needs.

– Irene, Philadelphia, PA

My husband and I are both self employed. I was diagnosed in 2013 with triple negative breast cancer.

I had chemotherapy and radiation for over 7 months. It has now moved to my lungs and liver. If penalties for preexisting conditions return we will both be uninsurable.

– Sandy, Bloomsburg, PA

My wife and I have pre-existing conditions (cancer, diabetes). We could not purchase or afford healthcare without the ACA.

– Kenneth, Moore & Kim, Bethlehem, PA

RHODE ISLAND

My partner had major injuries from a car accident, was in extreme pain and unable to work. He could finally get rehabilitative treatment when he got insurance under the ACA. I am a mental health counselor.

So many of my clients – the clients most in need of treatment – were only able to start treatment once they got insured under the affordable care act. These people are now better able to lead productive lives.

– Ellen, Providence, RI

My son Thomas was born at 34 weeks old. Luckily he was in good health, and a great weight. But had it not been for Medicaid we would not have been able to receive the health care that we did at the hospital. He was in the NICU for a week.

– Kayla, Warick, RI

SOUTH CAROLINA

My 32 year old son has been on dialysis since he was nineteen years old. If it were not for Medicaid, many if not most, dialysis patients in this country would die.

My son is a very important part of our family. Even though he can not hold a job, he contributes to society in many positive ways.

– Doris, Lyman, SC

I lost my job in May 2016. While my two children qualified for Medicaid through SCHIP, my husband and I only qualified for family planning services through Medicaid.

The ACA has enabled us to purchase affordable healthcare that covers all of our existing and potential future needs, which is a huge load off our minds.

– Christa, Simpsonville, SC

SOUTH DAKOTA

My daughter and her husband were struggling with low paying jobs and no benefits. She is a college graduate with a degree in pre-professional biology. He works in construction or as a waiter as opportunity presents.

They have two very young children. Because of Medicaid, they were able to get health care for their children while she continued her education.

– Dorna, Sturgis, SD

I have an elderly mom who is being helped through Medicaid. I believe the wealth and the goodness of a nation is determined by how we treat our least fortunate members.

– Susan, Sioux Falls, SD

TENNESSEE

I hadn’t seen a doctor - not counting expensive visits to walk-in clinics when I couldn’t stand something anymore -- since about 1976.

For three years now, I’ve had actual health insurance that I can afford thanks to my ACA supplement.

I’ve had a couple of physicals and some tests and mammograms and everything is good. If we can keep up this system, I have a chance of knowing in advance if anything serious is about to go wrong. That sort of preventative care can save money and lives.

– Teresa, Nashville, TN

I was able to get health insurance through the ACA for 20 dollars a month. This gives me piece of mind that if I get sick I can afford to go to the clinic.

– Jesse, Maryville, TN
My grandson was a 29 week preemie. He was covered under my insurance until my daughter turned 25, at which point he would have been uninsurable without Obamacare. My daughter has also had many health issues that made her uninsurable as well.

– Vicki, Brentwood, TN

My son is a musician and has Stage IV melanoma diagnosed in August. If he had not had ObamaCare, he would have been uninsured when he got sick and would not be alive today.

– Jill, Sweetwater, TN

TEXAS

Now she has a good paying job at a hospital in the medical laboratory and is paying taxes that she is glad to pay, hoping someone else will be able to take care of their family while getting the training and education they need. Medicaid made this possible for her. Without it, they would not have been able to pay for her schooling and care for the children.

– Holly, Luling, TX

My husband was diagnosed with Hep C, treated with success, diagnosed with liver cancer, received a liver transplant, and now he will have to take anti-rejection medication for the rest of his life. I was having cardio issues with a failing valve, and I received a pace maker. I have had the battery replaced now twice, and still going strong. We were very fortunate that the A.C.A. was already in place when these pre-existing conditions surfaced. If it had not been, I am not sure either one of us would be here today.

– Kay, Sunset, TX

UTAH

I have twins born 7 weeks too early. They were in intensive care for 7 weeks and after that for one year in intensive rehabilitation. Without Medicaid and the proper help, they would have died.

– Corinna, Sandy, UT

Elizabeth, Centerville, UT

My mother is 89 years old, frail, and has very poor vision due to macular degeneration. She needs full-time care, so I can’t work outside the home. I am her caregiver. My only access to affordable healthcare is through the marketplace established by the Affordable Care Act.

Prior to the passage of the ACA, I was struggling to pay monthly costs for insurance that doubled in just two years. Yes, my premiums will increase in 2017, but I’ll still be paying less than a third of what I was paying prior to the ACA. Until the ACA passed, people were losing their savings, their homes, and even their lives because they couldn’t afford healthcare.

It’s not perfect, but it’s a whole lot better than the system we had before.

– Solveig, Battlebro, VT

While my partner and I have always had strong employment, our four children have always been eligible for Medicaid Coverage. I have been so thankful for this coverage in so many capacities since I started my family.

Medicaid Insurance ensured that I had excellent prenatal and postnatal care. Medicaid Insurance ensured that my children were birthed in an excellent medical facility, of which we were very thankful when complications were unexpectedly experienced with one birth.

Medicaid Insurance ensured that my children received all the health and wellness checkups necessary, which is a huge preventative practice, not only preventing disease, but definitely promoting health.

– Willow, Bristol, VT

VERMONT

My mother’s name is Mia. She recently moved to our town in order to help take care of our 2-year-old daughter, Lotte (and soon, our second baby will be here too!!!).

My mom helps us in a million ways. She gives me time to work, she helps with the dishes and she provides her wonderful wisdom and emotional support. She gives my daughter the kind of attention that only a spectacular grandmother can. She is essential to the wellbeing of our family. I truly don’t know what we would do without her. When the time comes I want to be able to provide her with the kind of love and care she deserves.

Without Medicaid, I’m not sure how we will do that. Hopefully, by the time my mom needs care our children will be old enough that we can all pitch in but what if something happens before I can properly care for her? If I still have two small children I don’t know what we’ll do. We’ll need help from Medicaid. Maybe that won’t happen but it’s not a risk I’m willing to take.

– Solveig, Battlebro, VT

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– Willow, Bristol, VT

VIRGINIA

Margarita, Charlottesville, VA

My mother in law is a permanent resident and without the ACA she and my family could not afford health care coverage for her.

Since she has had medical insurance coverage we have all breathe a sigh of relief, the possibility of my MIL having a medical emergency and either not being able to afford the needed care or my family going into bankruptcy to pay for her medical bills was very real.
I was without health insurance for many years, when I could no longer obtain it through my work place. I had a couple pre-existing conditions that made individual insurance too expensive. When the ACA was passed, I put off signing up, kept hearing how hard it was to navigate the system, etc. I suddenly fell ill a couple years ago, and two hospital stays later discovered I had colon cancer. When the community hospital I had been at declined to do the surgery due to possible complications, and I was sent to UVA Hospital, I became very worried about costs. UVA has a very small self-pay discount, and as a property owner I did not qualify for any aid. Faced with putting off surgery until open season (a five month delay which the doctors advised against) I started searching ACA sites. Health Solutions One came up, I called, and within 20 minutes I had insurance. Within a week all the paperwork arrived and three weeks later I had the surgery. A month later I was back to work, and have received all good health checks since then.

While paying for the surgery wouldn’t have bankrupted me, it would have taken up a significant portion of my retirement income, and at age 59 that was a very dismal thought. I am very grateful for the law which has abolished pre-existing conditions as a means of denying insurance. If I had known it would be so easy to sign up I would have done it much sooner!

- Tedi, Afton, VA

WASHINGTON

I am a nurse practitioner. Before ACA, my uninsured patients waited until they were very ill before seeking care. I would have to beg for free medications for my homeless and destitute patients. The hospital I worked at allowed patients no more than $40 a year of free medications. How can this be stretched to cover the health care needs of a homeless person? For example if they had pneumonia, I was forced to choose an inexpensive antibiotic which might now work. When it did not work, they ended up in the hospital where they were finally able to get charity care as an in patient but which cost the hospital many thousand of dollars more than it would have originally cost to provide the correct medicine immediately. As this was a public hospital, in the end, tax payers carried the burden of this cost. After ACA, my patients could finally get their basic medical needs met.

No longer were people having strokes and heart attacks because they could not afford their blood pressure medicines or dying of treatable cancers because they had no coverage for chemotherapy and radiation. Everyone deserves health care not just those who are well off. The ACA provides health care to the destitute as well as working people who do not have health insurance through their employers.

- Rebecca, Redmond, WA

Preventative services like well-child visits, vaccinations & flu shots have been so very important to our family. Also, I suffer from PTSD from years of childhood sexual abuse & neglect – being able to afford to go to a therapist & pay for my medications has helped me become much more functional & has furthered my healing. Quality, affordable health coverage is something that I am grateful for every day & I know from experience how much it matters in my family’s daily life.

I am a family doctor working in a community health center, and have the privilege to be the primary care provider for many people and families who would not have health coverage if it weren’t for the Affordable Care Act. My patients represent a wide range of life experiences: people working multiple jobs to make ends meet, new refugees who have fled terrifying and traumatic situations to find a safer life here in the U.S., people who are disabled from injuries, people suffering with chronic mental illness, young families, newborn babies, and elderly patients on Medicare. Prior to the ACA, I saw many patients have to make heartbreaking decisions between having food and having their medications. The Affordable Care Act as well as WA state’s medicare expansion, has made such a significant positive impact on this; I cannot imagine us going back to the way it was before. People’s health, well-being, and indeed, lives, are at stake.

- Sara, Seattle, WA
medicaid expansion, has made such a significant positive impact on this; I cannot imagine us going back to the way it was before. People’s health, well-being, and indeed, lives, are at stake.

Erin, Langley, WA

I am one of 166,000+ folks enrolled in my state’s healthcare exchange, able to afford insurance coverage only due to the ACA subsidy. I am a self-employed, single parent who works 7 days a week. I am very healthy, but without insurance coverage, my asthma medication costs $300 per month. My child is completely dependent on my income, and she is a childhood cancer survivor able to have access to Medicaid under the current ACA plan. There are many families like mine who will revert to medical bankruptcies or go uninsured if we need to in order to keep shelter and food for our families.

WASHINGTON, D.C.

Chelsea, Washington, D.C.

I was 21 years old and I had just lost my job, unfairly due to “Right to Work” in the state of Florida. My job at the time wouldn’t help me register for their health care to save money. I was broke, I had debt, and more importantly I had nowhere to go for healthcare. It was about a month before I was fired that I started to get pains in my stomach. This was partly due to the fact that I have General Anxiety Disorder, my anxiety is so bad that my body physically feels stress. Sometimes it is so bad I will be doubled over in pain. I had no insurance, no counselor I could talk to, and I was in a toxic working environment. My parents who are on food stamps were also uninsured so asking for help was not an option.

Luckily the ACA and the Marketplace were there when it came to choosing an affordable health care plan. Before long I was finally able to see a therapist and get the help I needed to be healthy again. Since I was working through my mental illness I was finally able to get a job that was right for me and become a contributing member of society again. The Affordable Care Act supports constituents so that they may support their communities.

WEST VIRGINIA

My two-year-old daughter has a pre-existing condition. We have health insurance through my son’s job, but they change it from time to time. Thanks to Health Reform, I never have to worry about her being denied health insurance.

– Gessika, Martinsburg, WV

It truly is comforting to know that my son who has pre-existing medical conditions, can not be denied insurance in the future because of that fact. I pray that this will always be the case in our healthcare system.

– Robin, St. Albans, WV

Because of health care reform, our son will now have health care insurance as a graduate student. He was due to lose it because of his age, and now we can keep him on our policy until he finishes school. Given his health care needs, this is a tremendous relief. Healthcare reform is impacting us all now for the better. I keep telling people to learn the facts, not listen to the inaccurate rumors that continue to distort the true picture.

– Patricia, Morgantown, WV

WISCONSIN

Before I had Medicaid, I went into a coma about once a month because I am on insulin. I have many complications as a result of going years without healthcare.

Now I never go into comas. Insulin has gone up so much that if not for insurance, I would not be able to buy it. It’s unethical to force people to suffer and die because they are not rich!

– Lisa, Madison, WI

WYOMING

I have Multifocal Motor Neuropathy which is a very expensive disease to treat. There is no cure. Fortunately, I have great insurance from my employer and they have fully covered my illness without exception. I would have reached the $2 million lifetime maximum payout at the end of December 2010.

By some miracle, as of January 2011, lifetime maximum payout limits became illegal. I’ll now be able to continue treatment which allows me to work and be a productive member of our society.

I’m 52 years old and without the ability to find affordable insurance, I would end up in a care facility which would drain my retirement funds within a few short years. Then what? You guessed it. The State would have to absorb the costs. So, I’m one of those folks that the healthcare bill has benefited. Just in time too.

– Sue, Powell, WY

My husband and I both received our Bachelors degrees when our first child was 6 months old. My husband went on to receive his Masters and Doctorate degrees. Unfortunately, due to the economic crisis of 2008, when he needed to find employment, he was unable to get the type of job he was 3-degree trained for.

He now works by the hour to support me and our 7 children, each of whom have health issues requiring daily medication. Our medical bills are extremely high, even with Medicaid supplementing the younger children’s medical costs.

– Mary, Laramie, WY
MomsRising.org is an online and on-the-ground grassroots organization of more than a million people who are working to achieve economic security for all families in the United States.

MomsRising is working for paid family leave, flexible work options, affordable childcare, and for an end to the wage and hiring discrimination which penalizes so many others. MomsRising also advocates for better childhood nutrition, health care for all, toxic-free environments, and breastfeeding rights so that all children can have a healthy start.

Established in 2006, MomsRising and its members are organizing and speaking out to improve public policy and to change the national dialogue on issues that are critically important to America’s families. In 2013, Forbes.com named MomsRising's web site as one of the Top 100 Websites For Women for the fourth year in a row and Working Mother magazine included MomsRising on its “Best of the Net” list.