

Exhibit 1. The Affordable Care Act's Key Coverage Accomplishments, November 2013

HEALTH INSURANCE COVERAGE	
PROVISION, START DATE	IMPACT
Young adults up to age 26 allowed on parents' health plans, 2010	<ul style="list-style-type: none"> • 7.8 million young adults (ages 19–25) enrolled in a parent's health plan in 2012 who would not have been eligible prior to the ACA. • 3 million previously uninsured young adults gained coverage since 2010.
Prohibition on preexisting condition exclusions for children, 2010	<ul style="list-style-type: none"> • 17.6 million children were projected to benefit.
Bans on annual and lifetime benefit limits, 2010–2014	<ul style="list-style-type: none"> • 105 million people were estimated to have had lifetime benefit limits. • 18 million people had annual limits on their health plans.
All new health plans required to provide free preventive care, 2010	<ul style="list-style-type: none"> • 71 million adults gained coverage for at least one free preventive care service over 2011–2012. • 47 million women estimated to be covered for women's preventive services with no cost-sharing in plans that were renewed on or after August 2012.
Elimination of the Medicare prescription drug coverage gap, or "doughnut hole," 2010–2020	<ul style="list-style-type: none"> • 7.3 million Medicare beneficiaries with over \$8.9 billion in drug rebates and discounts since 2010; an average of \$1,209 in savings per person.
Free wellness visit for Medicare beneficiaries, 2011	<ul style="list-style-type: none"> • 34 million seniors received one or more free preventive services, including the new annual wellness visit, in 2012.
Limits on nonmedical spending by health plans, 2011	<ul style="list-style-type: none"> • Consumer savings totaling \$3.6 billion in 2011 and 2012.
Premium rate review (insurers required to submit justification for unreasonable premium increases to the federal and relevant state governments), 2010	<ul style="list-style-type: none"> • Consumer savings of \$1.2 billion in 2012.
State-based health insurance marketplaces offer affordable coverage to small businesses and people without employer coverage, 2014	<ul style="list-style-type: none"> • Over 200,000 people have selected a health plan for 2014 through the marketplaces as of the end of November 2013.

Exhibit 2. The Affordable Care Act's Key Delivery System Accomplishments, November 2013

DELIVERY SYSTEM REFORMS	
PROVISION, START DATE	IMPACT
Creation of Medicare accountable care organizations (ACOs) in which an insurer and group of providers share in savings generated by meeting quality and cost targets, 2012	<ul style="list-style-type: none"> • Over 250 Medicare ACOs serving up to 4 million people have been formed. • Costs for the more than 669,000 beneficiaries aligned to “Pioneer ACOs” increased 0.3 percent in 2012 vs. 0.8 percent for other similar beneficiaries. • 13 out of 32 Pioneer ACOs produced gross savings of \$87.6 million in 2012.
Medicare Advantage quality bonus incentives, 2012	<ul style="list-style-type: none"> • 14 million beneficiaries currently enrolled in Medicare Advantage (MA) have access to 127 highly rated plans, 21 more high-quality plans than were available in the previous year. • MA enrollment up 30 percent, premiums down 10 percent.
Reduced payment for preventable hospital readmissions, 2012	<ul style="list-style-type: none"> • An estimated 70,000 hospital readmissions prevented in 2012.
Discouraging hospital-acquired conditions, 2012–2015	<ul style="list-style-type: none"> • Hospital rates of serious hospital-acquired conditions (HACs) now available on the Centers for Medicare and Medicaid Services’ Hospital Compare website.
Creation of the Center for Medicare and Medicaid Innovation (CMMI), 2011	<ul style="list-style-type: none"> • More than 50,000 health care providers across the country involved in CMMI innovation projects to improve quality and lower costs. • Over 3,700 hospitals participating in the Partnership for Patients initiative to improve patient safety. • Over 500 organizations participating in the Bundled Payments for Care Improvement initiative.

These reforms may already be bending the cost curve: Medicare spending per beneficiary grew 0.4% per capita in fiscal year 2012, a historically low rate.