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INSIDE:

A Lovely Evening | 1
Don't Cut Off your Nose | 1-2
Obamacare The Real Truth | 2-3
Bringing Planned Parenthood
Up to Date | 4-5
Support for Assisted Suicide | 5-6

This newsletter is meant to be shared with at least ten others – copy as needed!

A LOVELY EVENING WITH WONDERFUL PEOPLE AND A PRO-LIFE LEADER

On March 5, 2016 the “Evening with Lt. Governor John Sanchez” took place. It was a lovely evening with good fellowship, good food, wonderful entertainment and a dynamic speaker for life – John Sanchez.

We were reminded of how important our work is and that this year requires us all to get involved and to stay involved. The Lt. Governor pointed out the many years that the Right to Life Committee has been doing yeoman work for the movement and how we are still doing it with even more activities, including political action work.

The Lt. Governor is optimistic and believes great strides will be made in the future to save the unborn and to value all lives from beginning to end.

The Right to Life Committee of New Mexico is grateful for the time the Lt. Governor gave for this occasion and we thank the Olivas family for providing beautiful music. We especially thank each and every one who came to the dinner or donated towards the dinner. This will keep RTLNM moving forward to do even more educational activities that will help and affect the pro-life movement in New Mexico.



25 ALIVE PROGRAM - YOU STILL HAVE THE OPPORTUNITY TO JOIN THIS VERY IMPORTANT PROJECT

The 25 dollars (more or less) that people give to the 25 ALIVE PROGRAM **IS THE ONLY ESTABLISHED AMOUNT OF MONEY THAT IS DEDICATED EACH MONTH TO THE RIGHT TO LIFE COMMITTEE OF NM.**

ALL donations are important and much appreciated. However, we never know what amount these donations will be or when. That is like saying you get a commission, and no other stipend and your commission is all you will have to live on. Those who sell something for a commission knows that it is an iffy proposition. Some months can be great, and then there can be periods of bleakness. Indeed, this happens at RTLNM. No matter what, we have rent, salaries (2) taxes, office expenses, fees for items we use in our education. If these costs don't get met, RTLNM can no longer function as an education entity or as an organization or to do political work. We need more people to come on board for a monthly donation to this program. The form is on the back of this newsletter. Please fill out with the amount you choose to give and we will get you the proper envelopes. Please help us establish a basic budget so that we can move forward on a continuous basis.

DON'T CUT OFF YOUR NOSE TO SPITE YOUR FACE - EDITORIAL BY DAUNEEN DOLCE

In watching the maneuvering that President Obama is doing so that he can nominate the choice and placement of the next Supreme Court Justice, I am reminded how short sighted people, including pro-lifers can be.

NO CANDIDATE PROPOSED BY PRESIDENT OBAMA WILL BE ACCEPTABLE. ALL WILL UPHOLD ABORTION. FURTHERMORE, HILLARY CLINTON WILL DO THE SAME AND IF ELECTED WILL BE ABLE TO DO SO SEVERAL TIMES.

In all the discussion about who to support in the Republican Party to be the Party's nominee, certain inalienable facts must be recognized. THE DEMOCRAT PARTY'S PLATFORM IS PRO-ABORTION AND PRO- EUTHANASIA AND AT THE NATIONAL LEVEL, THEIR CANDIDATES TOE THE LINE. In the Republican Party, people are questioning whether all the candidates will follow their platform; can we trust him; who would he pick for Supreme Court Justice; and is he really pro-life. There is sufficient information provided by all the Republican candidates that they will follow the pro-life plank in the platform, they will pick a supporter of the constitution Supreme Court Judge and they are pro-life enough for the laws, and other issues such as Planned Parenthood that will need to be addressed. You may say, you can't prove that. Until a candidate is elected, no one can prove what anyone says in a campaign. WE CAN PROVE FROM A LONG LINE OF VOTES, SPEECHES, ACTIVITIES THAT HILLARY CLINTON IS NOT A LITTLE BUT A WHOLE LOT PRO-ABORTION. In the crisis our nation is in, the culture of death, the economy, war, crime, education and jobs, liking a candidate is not near as important as having a person address these issues with the hope of change and improvement. HILLARY CLINTON ONLY HAS OFFERED TO WORSEN THE SITUATION. So before you decide to quit the game and take your marbles home, think twice. To not vote for whomever the Republican candidate may be, IS A VOTE FOR HILLARY CLINTON. We must win the House, Senate and the White House with pro-life supporters to make the changes so desperately needed. This has many people involved in the issue. YOU DO HAVE THE RIGHT TO CHOOSE. DON'T MAKE A PRO-ABORTION CHOICE THAT COULD HARM OUR EFFORTS FOR YEARS TO COME.

NATIONAL RIGHT TO LIFE: THE NEXT PRESIDENT WILL PICK JUSTICE SCALIA'S SUCCESSOR

The head of the nation's largest pro-life organization, National Right to Life, said that her organization's members will strongly support THE Republican senators' decision to preserve the current U. S. Supreme Court vacancy for the next president to fill.

“This is not primarily about professional credentials of a particular nominee – it is about who picks the justice who will decide whether unborn children will be protected, whether religious liberty will be protected, and whether the free-speech rights of groups out of favor with the liberal elites will be protected,” said Carol Tobias, president of National Right to Life. “President Obama hopes to decisively shift

(continued on page 2)

Support For Assisted Suicide...(cont. from page 5)

2016 Southern Political Science Association Conference, examines all 180 of the 2014 Vermont political races, as well as 105 repeal efforts to determine if there were risks or rewards when vying for election associated specifically with a candidate's position on assisted suicide. Entitled “Assisted Suicide at the Polls: Risks & Rewards Associated with Voting to Legalize Assisted Suicide vs. Maintaining the Status Quo,” the study found that a candidate's position on assisted suicide may present risk for those in favor, and potential reward for those opposed.

Supporting assisted suicide reduced the likelihood of re-election for lawmakers in Vermont, the first state to pass an assisted suicide bill, in 2013 and the only state yet to hold elections. Opposing assisted suicide presented no such risk, but may have aided challengers who unseated six pro-assisted suicide politicians – including the primary sponsor of the bill that passed.



Twenty-Five Alive Pledge 2016

Name _____ Phone: _____
 Address: _____
 City: _____ Zip code: _____
 I pledge: my tax-deductible donation (\$5 - \$25 or more) \$ _____ Monthly
 \$ _____ Every 2 Months
 \$ _____ Every 3 Months. A One Time Pledge or Donation: \$ _____

MEMBERSHIP APPLICATION

I understand that the Right To Life Committee of New Mexico (RTLNM) is a non-sectarian, non-profit organization dedicated to the right to life of all innocent human beings from fertilization to natural death; that this organization takes a stand only on those issues that are directly related to abortion, infanticide and euthanasia.

I support the goals of RTLNM, including a Human Life Amendment to the U.S. Constitution, and hereby make application for membership (renewal) as follows:

- Individual — \$25.00
- Corporate — \$45.00 - for business organizations
- Family — \$35.00
- Life Membership — \$500.00

Name _____

Address _____

City/Zip _____

Wish to: (check one)

- Register to vote
- Re-register

I am a registered: (check one)

- Republican Democrat
- Other

Signature _____

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Don't Cut Off Your Nose.... (cont. from page 1)

the Court's balance on abortion, political free-speech rights, and a host of other issues. Yet, while President Obama has the authority to nominate, he appoints only with the consent of the Senate. The Republican senators have decided that, with an upcoming election in November, the voters should decide what kind of justice they want on the Court by the election of a presidential candidate."

In a new column being published today in National Right to Life News, to be read by pro-life activists nationwide, Tobias wrote: In a sense, the makeup of the U. S. Supreme Court is on the ballot in every presidential election –yet, the intensifying debate surrounding the current vacancy may have an impact on the general election to a degree seldom if ever seen before in our nation's history...Use every opportunity – petitions, fair booths, social media pages, advertising campaigns, etc. to reach voters; explaining their opportunity to make their votes heard in the nomination process. And definitely use every means possible to encourage the Senate to stand firm and #LetThePeopleDecide.

President Obama recently claimed that the Senate must act on his nominee, lest it will threaten the independence of the Judiciary, and create risk that the Supreme Court would "become one more extension of our polarized politics." National Right to Life Legislative Director Douglas Johnson called such concerns "laughable, coming from Obama, who filibustered Samuel Alito's nomination, and whose administration has repeatedly urged the Supreme Court to strike down state laws that violate no constitutional text. In reality the president wants not an independent judiciary, but a Supreme Court majority that will vote in lock step to strike down protections for unborn children, to tolerate escalating governmental attacks on religious liberty, to permit severe limits on the rights of independent groups to criticize those who hold or seek public office, and to nullify other laws that conflict with current liberal dogmas and policy preferences."

Johnson also noted that Senate Democrats had killed many of George W. Bush's nominations to courts of appeals by denying them up or down votes. Even earlier, as chairman of the Senate Judiciary Committee, Sen. Joe Biden killed President George H. W. Bush's January 1992 nomination of John Roberts to the U. S. Court of Appeals for the District of Columbia, simply by refusing to schedule a hearing on the nomination through the entire year. Indeed, during 1992 alone, Roberts was one of over 50 Bush judicial nominees who never received a hearing from Biden.

ARE YOU GETTING READY TO CAST YOUR VOTE?

The June Primaries will be upon us very soon. It is June 7, 2016. However, if you are not registered to vote or need to make changes to your current voter registration, you will have to take action to do that by May 10, 2016, after which point the registration books close and don't open up until after the primaries. Your vote is so important for the men and women running for our legislature, our Congress and for the Presidency. Your involvement for being the voice for the unborn and others in life who cannot speak for themselves takes place June 7, 2016. It couldn't be easier – you can do it on line by going to the Secretary of State web site for New Mexico. Follow the instructions. You will be registered to vote and able to do what many throughout the world wished they could do and what many died for so you are able to vote. So Mr. and Ms. Citizen – go do the right thing.

OBAMACARE THE REAL TRUTH By Dauneen Dolce, Executive Director

Recently I made a presentation in which I discussed Obamacare. To prepare for this I reviewed the article I wrote awhile back called "Promises Made on Obamacare" and realized this information needed

to be updated. Since it was written there have been many changes and they are not for the good.

Meanwhile an article that was provided by The Hill discussed the "White House to lay out next chapter for Obamacare." Now there are many aspects of Obamacare not covered in this article. What is discussed is a schedule that is being used each year to "advance" Obamacare. This schedule has advanced a program that is not a health care program but an insurance program and as such has not been doing that job, but is costing more to have healthcare since it has been implemented.

In the article, they discuss how the administration will look beyond the law's central issues of access and affordability and explore the next chapter of healthcare reform.

Health and Human Services (HHS) Secretary Sylvia Mathews Burwell plans to broaden the conversation about the 2010 law to highlight system-wide reforms to lower costs and improve quality. The initiatives such as delivery system reform and bundled payment are non-controversial and have bi-partisan support in Congress the article declared.

I question that statement as there is no support for most of Obamacare and there is a desire to replace it.

The article goes on to say these new initiatives and aspects of the law could prove to be helpful to Hillary Clinton who has focused on preserving Obamacare.

The article also said that the White House will also announce a series of events, starting in April that will highlight the significant progress made in improving access to quality health care under the Obama presidency. (As you can see there is now "political" aspect of this article.)

What the president should be doing is to taking a very close look at his "creation" which is slowly destroying what health care was in place before Obamacare, Unless it is replaced with something that gives freedom to the American people to make choices with better access, we will have a single-payer n government plan, which I think was always the plan. If that happens, not only will you have government control every aspect of your health care, but it will impact many other parts of our lives.

Back to that article I wrote on the PROMISES OF OBAMACARE:

1-IF YOU LIKE YOUR INSURANCE YOU CAN KEEP IT:

FACT: Nearly a third of the innovative health insurance plans created under the Affordable Care Act (Obamacare) were out of business at the end of 2015. These co-ops have decided to close or had been ordered to shut down. The main reason is financial. Some companies have been poorly managed and are under scrutiny of state regulators. The other reasons are that the HHS was paying only 12.6 percent of the nearly 3 billion they owed. The co-ops were set up with a promise of help from the federal government which they renege on.

Many insurance companies are still doing business but no longer take Medicare or Medicaid patients because they are not getting the reimbursements that an agreement with the government was to provide. Where these patients are going is a good question.

Last year, Ezekiel Emanuel, one of the architects behind Obamacare, is now claiming that "insurance companies as we know them are about to die. "The good news is you won't have insurance companies to kick around much longer. The system is changing," Emanuel writes in an op-ed in the New Republic. "As a result, insurance companies as they are now will be going away. Indeed, they are evolving. For the next few years insurance companies will both continue to provide services to employers and, increasingly, compete against each other in the health insurance exchanges.

Due to Obamacare, "new factors will force insurance companies to evolve or become extinct," he continues. Instead, new groups called "accountable care organizations" (ACO's) must start competing directly in the health care exchanges for exclusive contracts with employers. The ACOs will have "standardized, guideline driven

(continued on page 3)

Bringing Planned Parenthood.... (cont. from page 4)

would nominate judges that are like Anton Scalia.

PLANNED PARENTHOOD CLOSES ABORTION CLINIC THAT HAD BEEN KILLING UNBORN BABIES FOR 35 YEARS BY Micaiah Bilger

The Planned Parenthood Southeast clinic in Augusta, Georgia is closing because of financial issues. The clinic which has a history of health and safety violations with the state with 23 violations which included using unsterilized equipment and expired drugs), was fined \$1400.00 in 2011.

ABORTION CLINICS CLOSING AT RECORD PACE AS MORE BABIES SAVED FROM ABORTIONS – BY Micaiah Bilger –Life News

Abortion clinics are closing at a record pace across the country as they fail to meet new health and safety requirements and the demand for their business drops, according to a Bloomberg analysis.

While abortion activists blame the closures on laws that required basic health protections for patients, many factors are involved, including the lack of business and fewer doctors willing to do abortions. These numbers, coupled with plunging national abortion statistics, point to the fact that fewer women actually want abortions. Modern technology shows clear pictures of unborn babies in the womb, and as more pro-life groups offer women alternatives to abortion, more women have access to the education and resources to choose life for their unborn babies.

Since 2011, at least 162 abortion clinics have shut or stopped doing abortions; 21 new abortion clinics opened in the same time period, the report states. The top four states that saw abortion clinics close were Texas with 30-plus, Iowa with 14, Michigan with 13 and California with 12, according to the report. Operation Rescue also showed 53 abortion clinics closed in 2015 alone.

Lack of business has been a major factor in the closing of abortion clinics, according to the Bloomberg report. The news group found that of the 162 abortion facilities that closed, 19 percent were in counties with fewer than 100,000 people. This seems to indicate that rural abortion clinics aren't doing as well financially. Last week a Planned Parenthood in Blacksburg, Virginia announced it was closing for this very reason. A Bridgeport, Connecticut abortion clinic also told Bloomberg it closed in 2015 because of reduced demand.

Another interesting fact from the report showed a number of abortion clinics closed because the abortionists were deemed "unfit to practice," while others closed because they could not find a doctor willing to do abortions. Michigan specifically had two abortionists who were labeled "unfit to practice," according to the report. The large number of abortion facilities closing in California is interesting, given that state lawmakers are very supportive of abortion and even have passed several dangerous laws (one allowing midwives to perform abortions) in the same period that are meant to expand abortion. This also signals that fewer women are having abortions.

50 abortion clinics have closed for unknown reasons. We do know money appears to be a driving force. Also, when women are given access to all their options, more of them choose life for their unborn babies.

ANOTHER REASON FOR VOTING REPUBLICAN IN NOVEMBER FDA EXPANSION OF ABORTION PILL USE STILL DOES NOT NECESSARILY MEAN CHEMICAL ABORTION IS SAFER BY Tatiana Bergum – National RTL

"In the end, it is obvious that the FDA's new protocol serves only the interests of the abortion industry by expanding their base of potential customers, increasing their profit margin, and reducing the level of staff and amount of resources they have to devote to the patient."

WASHINGTON – The nation's oldest and largest pro-life organization today (March 30, 2016) warned that a decision by the U. S. Food and Drug Administration (FDA) to allow expanded use of

the abortion drug RU-486 doesn't mean an increase in safety for women using the abortion method. In response to the FDA's action, the following statement may be attributed to National Right to Life Director of Education and Research Randall K. O'Bannon, Ph.D.

Many suspected that today's announcement by the FDA was a long time coming. Despite a record of at least 14 known deaths, and thousands of women suffering significant adverse events, the FDA relaxed safety standards and modified the protocol for mifepristone/misoprostol chemical abortions that have been in place since 2000.

The FDA, responding to a request by the U. S. distributor of the drug, has modified dosages, changed the administration, reduced the number of visits, expanded the prescriber pool, and expanded the time frame where the drugs may be used. Though applauded by the abortion industry, the documentation of the impact on women's safety has not been made publicly available.

Certainly, none of the modifications is of any benefit to the unborn child.

For women, the mifepristone/misoprostol combination comes with significant cramping, bleeding, and other gastrointestinal side effects (nausea, vomiting, and diarrhea) that are expected parts of the chemical abortion process.

While it may be claimed that these side effects are supposed to be reduced with the new protocol, chemical abortions do not occur without significant bleeding, cramping, etc. These side effects are similar to signs of ruptured ectopic pregnancy, serious infection, or may be the prelude to significant hemorrhage that could be missed by patients or even doctors expecting these as part of any chemical abortion would still appear to be a problem under any protocol.

In the end, it is obvious that the FDA's new protocol serves only the interests of the abortion industry by expanding their base of potential customers, increasing their profit margin, and reducing the level of staff and amount of resources they have to devote to the patient.

It is clear whose interest it is the FDA is serving. It isn't the women and it isn't the babies.

PLEASE NOTE: Under the Clinton Administration the FDA was politicized when it changed its protocol for testing RU-486. Scientists who did some of the testing said not enough testing was done and warned of dire consequences. But now that surgical abortions are going down and the finances don't allow them to keep as many abortion clinics open, they will move to chemical ones.

The timing is important. This is being done while Obama is president, for this would not happen under a Republican president. Of course, Hillary Clinton would probably make even more dangerous changes.

Hopefully, in the future this whole procedure, FDA, and the good of the people will be put on the path of science and protection of human life.

SUPPORT FOR ASSISTED SUICIDE MAY BE A POISON PILL AT THE POLLS By Alex Schadenberg

A recent study by Dr. Jacqueline Harvey and published by the Charlotte Lozier Institute shows that support for assisted suicide may have negative consequences for politicians who support assisted suicide.

Opposition to assisted suicide has historically been bi-partisan with more than 175 bills in 34 states and the District of Columbia since 1991 being rejected or quietly ignored by lawmakers, since there was little to indicate if constituents would reward them with votes – or if it would risk re-election by championing an issue that divides Americans virtually in half. Fortunately science may finally have some answers on how voters respond to assisted suicide at the polls.

New research out of Tarleton State University, presented at the

(continued on page 6)

Obamacare, the Real Truth... (cont. from page 2)

care plans for most major conditions and procedures to increase efficiency,” says Emmanuel, the brother of Obama’s former chief of staff and current Chicago Mayor, Rahm Emanuel.

He also said “They will have figured out how to harness their electronic medical records to better identify patients who will become sick and how to intervene early as well as how to care for the well-identified chronically ill so as to reduce costs.”

Indeed that last sentence is the crux. They will identify, as they have been doing, but more effectively and that means rationing for many elderly, chronically ill and those with disabilities. This is our new health care. What will be still in effect will have a hard time getting a doctor to provide the care patients need

2-IF YOU LIKE YOUR DOCTOR YOU CAN KEEP YOUR DOCTOR:

FACT: Our doctors are fairly elderly, with one in three being over 50 and one in four over 60. In a 2013 survey of 20,000 physicians, it indicated that 62% say that “It is likely that many physicians will retire earlier than planned in the next one to three years”. Even if not retiring, doctors say they believe physicians will “scale back practice hours (55%) based on how the future of medicine is changing.

These retirements are a problem in specialties like primary care. Nurse practitioners are replacing doctors, but they too are burned out and are retiring early.

Why is this happening? Health care providers face many new obligations and restrictions as a result of Obamacare. Because insurance companies are pressured to keep costs unrealistically low, providers are being reimbursed at financially unsustainable rates. This letter was read to the House of Representatives by Rep. Mo Brooks, Ala.-R:

“Dear Congressman Brooks, As a practicing family physician, I plead for help against what I can best characterize as Washington’s war against doctors. The medical profession has never before remotely approached today’s stress, work hours, wasted costs, decreased efficiency, and declining ability to focus on patient care. In our community alone, at least 6 doctors have left patient care for administrative positions, to start a concierge practice, or retire altogether. Doctors are smothered by destructive regulations that add costs, raise our overhead and ‘gum up the works,’ making patient treatment slower and less efficient, thus forcing doctors to focus on things other than patient care and reduce the number of patients we can help each day. I spend more time at work than any time in my 27 years of practice and more of that time is spent on administrative tasks and entering useless data into a computer rather than helping sick patients. Doctors have been forced by ill-informed bureaucrats to implement electronic medical records (“EMR”) that, in our four doctor practice, costs well over \$100,000 plus continuing yearly operational costs...all of which does not help take care of one patient while driving up the cost of every patient’s health care. Washington’s electronic medical record requirement makes our medical practice much slower and less efficient, forcing our doctors to treat fewer patients per day than we did before the EMR mandate. To make matters worse, Washington forces doctors to demonstrate ‘meaningful use’ of EMR or risk not being fully paid for the help we give. In addition to the electronic medical records burden, we face a mandate to use the ICD-10 coding system, a new set of reimbursement diagnosis codes. The current ICD-9 coding system uses roughly 13,000 codes. The new ICD-10 system uses a staggering 70,000 new and completely different codes, thus dramatically slowing doctors down due to the unnecessary complexity and sheer numbers of codes that must be learned. The cost of this new ICD-10 coding system for our small practice is roughly \$80,000, again driving up health care costs without one iota of improvement in health care quality. Finally, doctors face nonpayment by patients with Obamacare. These patients may or may not be paying their premiums and we have no way of verifying this. No business can operate with that much uncertainty. On behalf of the medical profession, I ask that Washington stop the implementation

of the ICD-10 coding system, repeal the Affordable Care Act, and replace it with a better law written with the input of real doctors who will actually treat patients covered by it. America has enjoyed the best health care in the world has ever known. The health care is in jeopardy because physicians cannot survive Washington’s “war on doctors” without relief. Eventually the problems for doctors will become problems for patients, and we are all patients at some point. Sincerely yours, Dr. Marlin Gill of Decatur, Alabama.

This doctor put all that needs to be said on paper. The doctors are overworked using a system that doesn’t allow them to deliver care to patients but provides information to Washington. Washington is sick so we need to heal it with the coming elections and let the good doctors go back to what they do best- treat those who are ill.

3- Obamacare will deliver benefits to all Americans.

Many people are receiving fewer benefits than they did before Obamacare was instituted. This is especially true for the elderly. In the first 10 years, \$716 billion will be taken from Medicare. There have been \$200 billion cuts to date. Without that money, then of course, health care is reduced and patients are denied what they did have. In 2022 significant changes are coming again. It is at this time that reimbursement to hospitals, insurers and the Medicare Advantage Program will be reduced by about \$68.00 per month according to the Congressional Budget Office. This undoubtedly will cause more reductions in benefits and services to seniors. Medicare changes will also close the so called “donut hole” in drug coverage which gave seniors a break on their out of pocket costs for medications.

Then there is the Independent Payment Advisory Board (IPAB). This board of 15 “experts” or bureaucrats chosen by the President and approved by the Senate will be empowered to cut Medicare spending and make other healthcare decisions independently, unless counteracted by a three-fifths “super-majority” vote in Congress.

The idea behind IPAB’s creation is that the board would be able to make tough budgetary decisions that might be politically difficult for the Congress or the President to implement (such as Medicare reductions.) So we now have “Big Brother” who does not have any constituents to represent or to have input from, make decisions about those people and their health, and ultimately their lives.

Many states are imposing a monthly limit on the number of drugs Medicaid recipients can receive and some have enacted caps. Even our military is seeing a reduction in care. Senior citizens are being denied home bound Medicaid and Medicare. Spouses have been dropped from medical coverage at places like the University of Virginia.

Even when you are able to get health care, it used to take 2 weeks to see a doctor, but now it is up to 1 month 10 days and is expected to be 2 months this year. With an aging population needing care, the time may get much worse.

So reductions, denial and delay are already in play, but in a few years, if not sooner, you will see even more that impacts what insurance companies that are still in place, hospitals, and exchanges in ‘saving’ money at the cost of people getting health care. It is just that simple – we have less now than we had.

4-Obamacare will reduce our out-of-pocket insurance costs and to “bend down” the national spending curve.

Higher co-pays and higher deductibles are a fact of life and each year the amounts go higher.

The Congressional Budget Office, on March 24, 2016, has predicted that the federal government will spend more on Obamacare than previously thought. They estimate the cost will be \$1.34 trillion over the next decade, an increase of \$136 billion from the CBO’s predictions in 2015. In 2016, alone, Obamacare will cost \$110 billion. This rise in cost will mean that premiums will jump 6% a year.

The CBO says the rise in cost is likely caused by the higher-than-expected enrollment in the expanded Medicaid program. New Mexico, who expanded Medicaid to receive federal dollars, now faces

(continued on page 4)

APRIL 2016 VIVA LIFE 3

Obamacare, the Real Truth...(cont. from page 3)

a \$417 million shortfall. In the 2016 legislative session the Human Services Department asked for \$85.2 million increase to keep up with the enrollment growth and the now looming decrease from the federal matching rate for those states that expanded their Medicaid. They also asked for \$41 million to help get through the rest of this year. The legislature in 2016 approved a \$6.2 billion budget for the fiscal year starting in July that includes \$928.5 million in state funds for Medicaid in the coming year which is a \$20.8 million increase over this year’s levels. So now the agency is \$86 million short of what it projected it needed in state funds for the next 16 months. When the federal dollars disappear, which is \$3 or \$4 for every dollar NM spends, there will be \$417 million shortfall when the matching funds are factored in.. With revenues from oil and gas being very low, this is a crisis for New Mexico. Since “government” has no money of its own, it will be the good ole taxpayer who will be involved in some way with this problem.

Meanwhile, UNM employees have a rising cost of 4-5% starting July 1, 2016. By July, 2017 nearly half the state’s population will be enrolled in Medicaid. With the country’s highest unemployment, meaning there is no tax base, what will be done to provide health care to the people of New Mexico?

For once I agree with a Clinton. Chelsea Clinton has decried the “Crushing Costs” of Obamacare which she says her mother will fix, offering her own deadly health care plan.

Meanwhile, the unconstitutional fines for not purchasing health care are rising. In 2016 fines are up to \$1000.00 per household and each year that cost will go up. Thus, the younger population with low incomes are put in a vise.

THE PROMISES WERE LIES. THE FUTURE IS BLEAK UNLESS SOMETHING IS DONE ABOUT OBAMACARE AND THE ELECTIONS IN 2016 ARE THE ONLY WAY WE CAN MAKE THOSE CHANGES. WE MUST FIND MEN AND WOMEN WHO CARE ABOUT SOLUTIONS AND WHO CARE ABOUT THE LIVES OF THE AMERICAN PEOPLE.

BRINGING PLANNED PARENTHOOD UP-TO-DATE WITH YOU

As we are reviewing Obamacare, we must always stay on top of what is happening with Planned Parenthood. What we see is both good and bad, but whichever – it is. Do note: Wisconsin just defunded Planned Parenthood. This contributed to the reason for that vote.

PLANNED PARENTHOOD SOLD HEARTS AND BRAINS OF 18-WEEK OLD BABIES MINUTES AFTER ABORTING THEM

- By Steven Ertelt with Life News

A report came out that has shown that Planned Parenthood sold the hearts and brains of 18-week-old babies to the University of Wisconsin and harvested the body parts just minutes after aborting the babies.

A public records has reveled that Planned Parenthood’s Wisconsin affiliate did provide these baby parts to University of Wisconsin – Madison, something both Planned Parenthood and the U of W denied. There are records, letters to support what the report is saying. So both Planned Parenthood and University of Wisconsin lied.

Babies 10-18 weeks of gestational age within five minutes of the abortion procedure “After the procedure, the heart was grasped with sterilized surgical instruments and carefully isolated from the rest of the thoracic content to be placed in the plastic tubes. Fetal brain was collected in the same fashion.” All of this was done violating federal law.

Note: Although Planned Parenthood and what it doing needs to be addressed, so should those tax-payer supported universities such as the U. of W. and U. of N.M. be brought to task and something be done with what is happening in these schools

PLANNED PARENTHOOD TO SPEND OVER \$1 MILLION FOR NEW ADS PROMOTING HILLARY CLINTON

4 VIVA LIFE APRIL 2016

Hillary Clinton’s best friends at Planned Parenthood sinking even more money into promoting her campaign for Democratic nomination for president. The abortion giant announced on February 25, 2016 that it will spend over \$1 million on television and internet-based advertising to push her campaign to Democrats as Clinton faces a tough challenge from fellow abortion advocate Bernie Sanders. Planned Parenthood Votes and the Planned Parenthood Acton Fund have launched a multi-platform, seven-figure ad campaign in Michigan, Virginia and Texas. The campaign will use videos, digital ads, phone banks and mailers in support of former Secretary of State Hillary Clinton, who the groups, the political arms of Planned Parenthood, have endorsed in the Democratic presidential primary.

“Hillary Clinton is the only candidate in this race who has made women’s health and rights a priority. Hillary Clinton has been fighting for women and their families for her entire life,” Deirdre Schifeling, the executive director of the Planned Parenthood Action Fund said in a statement. “Politicians in Virginia, Texas and Michigan have been stripping women and families of their basic health and rights. Women in these states know how important it is to elect a champion who will fight for women. That’s why so many women are standing up in support of Hillary. They know what is at stake, and they know she’ll fight for us”.

Earlier this year, PP spent six figures on a huge ad in Iowa. They bought ad space and ran two videos pushing Clinton’s candidacy on the home pages of the Cedar Rapids Gazette and the Des Moines Register newspapers. In February they endorsed Hillary Clinton – their first-ever primary endorsement – and promised to spend \$20 million this year supporting her and her pro-abortion allies running for office.

Clinton has promised to get rid of the Hyde Amendment, which would clear the way for the expansion of taxpayer-funded abortion up until birth. She also said she would favor appointing Barack Obama to the Supreme Court. She said she would not restrict abortion for any reason through all nine months of pregnancy.

Please note: PP gets \$550 million in taxpayer dollars. How much of this is used for these political activities? If not this money, then the money from dead innocent babies is being used.

DONALD TRUMP: UNLESS PLANNED PARENTHOOD STOPS DOING ABORTIONS, WE SHOULD DE-FUND IT -BY STEVEN ETELTELT

Republican presidential candidate Donald Trump weighed in on Planned Parenthood funding in two separate interviews. Having said that Planned Parenthood does some “good things”, he said he would de-fund Planned Parenthood if it refuses to stop doing abortions.

Although he has been misled into believing that Planned Parenthood does give good services to women and believes abortion is a small part of the organization, he still would de-fund the organization as long as they do abortions. This has been his position since last summer.

HILLARY CLINTON: I WOULD NOT APPOINT SOMEONE TO THE SUPREME COURT WHO DIDN’T SUPPORT ABORTION- BY NATIONAL RIGHT TO LIFE NEWS

On the presidential campaign trail, Hillary Clinton is making it abundantly clear. She will not name any nominees to the Supreme Court who do not support abortion on demand. She said any nomination she would make if elected would be a hardcore abortion activist who supports Roe vs. Wade, which has ushered in an era of 58 million abortions.

She also told the Washington Times she would impose a litmus test on abortion and campaign finance. Her nominees, she said, would have to prove that they would uphold the Roe v. Wade decision establishing a national right to abortion and would have to show that they would overturn the Citizens United Decision that established free speech campaign rights for interest groups. “I would not appoint someone who didn’t think that Roe v. Wade is settled Law,” Mrs. Clinton said while campaigning in Wisconsin.

Please note: Both Donald Trump and Ted Cruz have said they

(continued on page 5)