

Nowhere to Turn: How the Individual Health Insurance Market Fails Women

Many women face obstacles obtaining comprehensive, affordable health coverage in the individual market—simply because they are women. New research by the National Women’s Law Center (NWLC) shows that the individual insurance market, where individuals purchase health plans directly from insurance companies, fails women.

NWLC’s report: **Nowhere to Turn: How the Individual Health Insurance Market Fails Women** (available here: <http://action.nwlc.org/insurance>) includes both national and state-by-state analyses of the individual insurance market. Extensive research found that insurance companies can refuse to sell women coverage due to any health history, and often charge women drastically higher premiums than men. In addition, the coverage is frequently both exorbitant in cost and limited in scope – often failing to cover women’s specific needs, such as maternity care.

Key findings include:

- **Insurance companies can reject women applicants for health coverage for a variety of reasons often unique to women.** For example, it is still legal in 9 states and the District of Columbia for insurers to reject applicants who are survivors of domestic violence. Insurers in most states can also reject women for coverage simply for having previously had a Cesarean section.
- **Women often face higher premiums than men.** Under a practice known as gender rating, insurance companies in most states are permitted to charge men and women different rates. This practice is costly, and often results in wide variation in rates charged to women and men. NWLC research found that, among insurers who gender rate, insurers charge 25 year-old women up to 45 percent more than 25 year-old men; and 40 year-old women are charged up to 48 percent more than 40-year-old men for the same health coverage. One insurer in Missouri charges 40 year-old women 140 percent more than men of the same age for the exact same coverage.
- **It is difficult and costly for women to find health insurance that covers maternity care.** Of the more than 3,500 health plans offered to women in the individual market that we reviewed, the overwhelming majority do not cover maternity care. A limited number of insurers sell separate maternity coverage for an additional fee known as a ‘rider,’ but this supplemental coverage is often prohibitively expensive and limited in scope. Maternity riders in Kansas and New Hampshire, for example, cost upwards of \$1,100 *per month*, in addition to women’s regular health insurance premiums.
- **Other problems in the individual insurance market apply to both men and women, but have a far greater adverse impact on women.** Insurance companies also engage in premium rating practices that, while not applied solely to women, compound the affordability issues caused by gender rating that women face – including setting premiums that are based on age and health status.

Learn more about how NWLC is fighting for comprehensive, affordable health care for women and their families. Visit our Reform Matters project at www.nwlc.org/reformmatters to learn more.

For more information on the Reform Matters project, contact us at reformmatters@nwlc.org or 202-588-5180.