

Women and Medicaid

Medicaid, the national health insurance program for low-income people, plays a critical role in providing health coverage for poor women. Over 20 million women are covered through Medicaid, comprising the majority (69 percent) of the program's adult beneficiaries.¹ Women are more likely than men to qualify for Medicaid because they tend to be poorer and are more likely to meet the program's stringent eligibility criteria. Women are also more likely to hold low-wage or part-time jobs that do not offer employer-sponsored health benefits, so Medicaid may be their only possible source of coverage.^{2,3}

One in ten women in the United States receives health care coverage through Medicaid.⁴

- Medicaid is the most important source of coverage for low-income women. In 2006, over one-fifth of all poor women were enrolled in the program.⁵
- Low-income mothers depend on the Medicaid program. Nearly two-thirds of the nonelderly women enrolled in Medicaid in 2004 had dependent children.⁶

Medicaid ensures that women have access to a comprehensive set of important health care services.

- Medicaid programs are required to provide certain health services to some covered populations—including family planning services, inpatient and outpatient hospital care, and pregnancy-related care—and the program has traditionally provided beneficiaries with a comprehensive set of health services. The Deficit Reduction Act of 2005, however, allows states to provide more limited benefit packages (without coverage for mental health or prescription drug services, for example) to certain enrollees.⁷
- Medicaid covers diagnosis and treatment of chronic illnesses including breast and cervical cancer and HIV/AIDS.⁸

Reproductive health services are a vital component of women's Medicaid coverage.

- In 2006, Medicaid provided basic health services to 7.3 million American women of reproductive age (15-44 years old).⁹
- Medicaid is the largest source of public funding for family planning services in the United States. In 2006, the program contributed \$1.3 billion toward family planning, accounting for 71 percent of total public spending on these essential services.¹⁰
- Medicaid covers 41 percent all births in the United States. The program finances prenatal visits and vitamins, ultrasound and amniocentesis screenings, childbirth by vaginal or caesarean delivery, and 60 days of postpartum care.¹¹ Pregnancy-related services accounted for the largest share of Medicaid's hospital charges in 2004.¹²

Medicaid is important for low-income women of all ages.

- For elderly women who meet income eligibility requirements, the program covers high-cost services provided in a skilled nursing facility, as well as home and community-based health care for women who are entitled to nursing facility services.¹³
- More than a third of all female Medicaid beneficiaries were age 45 or older in 2006.

These women typically rely on the program for: health care related to a physical or mental disability or chronic condition; treatment for breast or cervical cancer; long-term care services; or, cost-sharing required under Medicare.¹⁴



Women and Medicaid: What Can Women's Advocates Do?

Women's advocates can support reforms that protect and improve the Medicaid program without sacrificing women's access to health care services.

Policymakers will continue to debate the role that Medicaid and other public coverage programs should play in the U.S. health care system. Advocates should understand Medicaid's significance for women and support health reforms that will strengthen this critical health insurance program and improve women's access to care.



For further reading, see:

Kaiser Family Foundation, *Medicaid's Role for Women* (Oct. 2007), available at: http://www.kff.org/womenshealth/upload/7213_03.pdf.

Kaiser Family Foundation and the Guttmacher Institute, *Medicaid's Role in Family Planning* (Oct. 2007), available at: http://www.kff.org/womenshealth/upload/7064_03.pdf.

Kaiser Family Foundation, *Medicaid: A Primer* (July 2005), available at: http://www.kff.org/medicaid/upload/7334%20Medicaid%20Primer_Final%20for%20posting-3.pdf.

References

- 1 Kaiser Family Foundation, *Medicaid's Role for Women* (Oct. 2007), http://www.kff.org/womenshealth/upload/7213_03.pdf.
- 2 Elizabeth M. Patchias and Judy Waxman, National Women's Law Center and The Commonwealth Fund, *Women and Health Coverage: The Affordability Gap* (Apr. 2007), <http://www.nwlc.org/pdf/NWLCCommonwealthHealthInsuranceIssueBrief2007.pdf>.
- 3 Economic Research Service of the USDA, *Rural Labor and Education: Nonmetro Earnings and Low-Wage Workers* (Jan. 2007), <http://www.ers.usda.gov/Briefing/LaborAndEducation/earnings.htm#top>.
- 4 *Medicaid's Role*, *supra* note 1.
- 5 *Id.*
- 6 Alina Salganicoff et al., Kaiser Family Foundation, *Women and Health Care: A National Profile* (July 2005), <http://www.kff.org/womenshealth/upload/Women-and-Health-Care-A-National-Profile-Key-Findings-from-the-Kaiser-Women-s-Health-Survey.pdf>.
- 7 Families USA, *Medicaid Alert: Medicaid Benefit Package Changes, Coming to a State Near You?* (Mar. 2006), <http://www.familiesusa.org/assets/pdfs/DRA-Benefit-Package.pdf>.
- 8 *Medicaid's Role*, *supra* note 1.
- 9 Kaiser Family Foundation and the Guttmacher Institute, *Medicaid's Role in Family Planning* (Oct. 2007), http://www.kff.org/womenshealth/upload/7064_03.pdf.
- 10 Adam Sonfield et al., The Alan Guttmacher Institute, *Public Funding for Contraceptive, Sterilization and Abortion Services, FY 1980-2006* (Jan. 2008), <http://guttmacher.org/pubs/2008/01/28/or38.pdf>.
- 11 *Medicaid's Role*, *supra* note 1.
- 12 C. Allison Russo and Roxanne M. Andrews, Agency for Healthcare Research and Quality, Healthcare Utilization Project, *The National Hospital Bill: The Most Expensive Conditions, by Payer, 2004* (Sept. 2006), <http://www.hcup-us.ahrq.gov/reports/statbriefs/sb13.pdf>.
- 13 Ellen O'Brian, Georgetown University Long-Term Care Financing Project, *Medicaid's coverage of nursing home costs: Asset shelter for the wealthy or essential safety net?*, *Issue Brief* (May 2005), <http://lrc.georgetown.edu/pdfs/nursinghomecosts.pdf>.
- 14 *Medicaid's Role*, *supra* note 1.