

COVERAGE STATISTICS

Background: Family economic insecurity is on the rise. Increasing numbers of women and families are losing employer-sponsored insurance and either going without insurance or enrolling in Medicaid. Women are especially vulnerable to losing access to employer sponsored insurance, as they are more likely to be covered as dependents. Adult women are much more likely than adult men to be enrolled in Medicaid, although in many states a childless woman could be penniless and still not be eligible. Women are also more likely to be underinsured than men. Both uninsurance and underinsurance present health and financial risks.

ACA RELEVANCE	FACT	SOURCE
<p>The ACA makes historic expansions in access to quality, affordable health coverage through a number of provisions, including:</p> <ul style="list-style-type: none"> -Medicaid expansion -Premium tax credits -Insurance market reforms -Dependent coverage -Small business tax credits -PCIPs -Early Retiree Reinsurance Program -Health insurance exchanges and risk pooling -Simplified eligibiltiy and enrollment processes -Medicaid eligibility option for family planning services -Essential benefit package, including maternity care 	<p>The percentage of people without health insurance increased to 16.7 percent in 2009 from 15.4 percent. The number of uninsured people increased to 50.7 million in 2009 from 46.3 million in 2009.</p> <p>The number of people covered by private insurance decreased to 194.5 million (63.9%) in 2009 from 201.0 million (66.7%) in 2008.</p> <p>The percentage of people covered by employment-based health insurance decreased to 55.8% in 2009, from 58.5% in 2008. The percentage of people covered by employment-based health insurance is the lowest since 1987, the first year comparable data were collected.</p> <p>The percentage and number of people covered by Medicaid is the highest since 1987.</p> <p>In 2009, 10 percent of children under 18 were without health insurance.</p>	<p>http://www.census.gov/prod/2010pubs/p60-238.pdf</p>
<p>The ACA also makes significant investments in community health centers to ensure uninsured and underserved women can access high quality, affordable health care services.</p>	<p>Women are more likely to work for firms that pay low wages, about three-quarters of which are smaller firms which often deny employees a choice in insurance plans, if they offer coverage at all.</p>	<p>Low Wage Employers and Health Coverage: Findings from a National Survey,” Lake Snell Perry & Associates, January 2003, Unpublished (referring to research conducted by Jonathan Gruber, Professor of Economics at MIT, determining that 73% of employers with at least half of their workers earning \$7 or less per hour have fewer than 25 employees).</p>

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	<p>Employer-sponsored insurance covers 59% of women between the ages of 18 and 64. Women continue to be less likely than men to be insured through their own job (36% vs. 45%, respectively) and more likely to be covered as a dependent (23% vs. 13%).</p> <p>Between 2009 and 2010, the actual number of women (and men) with employer sponsored coverage actually fell for the first time, a reflection of the high unemployment rate.</p> <p>Compared to men, women are more vulnerable to losing their insurance, as they are more likely to be covered as dependents. Women are at greater risk of losing coverage if they become widowed or divorced, their spouse loses his job, his employer drops family coverage or increases premium and out-of-pocket costs to unaffordable levels.</p> <p>Individually purchased insurance is used by just 6% of women.</p>	<p>http://www.kff.org/womenshealth/upload/6000-09.pdf</p>
	<p>Currently, most (55%) women of reproductive age are covered through employer-sponsored plans from their own job or their husbands. Many of these plans do cover abortion currently.</p>	<p>http://www.kff.org/healthreform/upload/8021.pdf</p>

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	<p>The Guttmacher Institute's federally supported study, which assessed levels of insurance coverage for a wide range of reproductive health services, found that 87% of typical employer-based insurance policies in 2002 covered medically necessary or appropriate abortions.</p> <p>The Kaiser Family Foundation found that 46% of covered workers had coverage for abortion; the data were released as part of Kaiser's 2003 Annual Employer Health Benefits Survey. Another iteration of that survey, from 2010, found that three in 10 employers said they covered elective abortion, but the 2010 survey had a far higher rate of employers who could not or would not answer the question (71% in 2010 vs. 26% in 2003).</p> <p>The actual level of coverage is probably somewhere between the estimates made by Guttmacher and Kaiser, meaning that most Americans with employer-based insurance currently have coverage for abortion.</p>	<p>http://www.guttmacher.org/media/inthenews/2011/01/19/index.html</p>

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	<p>A Guttmacher Institute study found that, in 2008, only 30% of abortion patients had private insurance. Among those who did have private insurance, about one-third used their insurance and nearly two-thirds (63%) paid out of pocket. In all, 12% of abortions were paid for with private insurance. Several factors likely contributed to the lack of reliance on private insurance among women who had it: Some may have had health care plans that did not cover abortion (especially given the concentration of abortion among lower-income women, whose private plans are likely to be less generous), or they may have been unaware if their plan did cover the procedure. Many women with private health insurance have deductibles of several hundred—or even several thousand—dollars that have to be met before they can be reimbursed and thus may have paid for an abortion out of pocket. Finally, given the stigma that still surrounds abortion, some women may not use insurance coverage because they do not want their insurer, employer or primary policy holder (such as a spouse or parent) to find out about the abortion.</p>	<p>http://www.guttmacher.org/media/inthenews/2011/01/19/index.html</p>
	<p>Although the Pregnancy Discrimination Act requires that employers with at least 15 employees offer plans that cover expenses for pregnancy-related conditions on the same basis as for other medical conditions, coverage for maternity care is not included in many individual insurance plans currently. In this market, women typically have had to purchase a separate rider to cover maternity care which can be extremely costly and often requires a waiting period before the benefits are covered.</p>	<p>http://www.kff.org/womenshealth/upload/7987.pdf</p>
	<p>As of January 2010, only 12 states require maternity coverage to be included in plans sold in the individual market.</p>	<p>Henry J. Kaiser Family Foundation. (2010, January). StateHealthFacts.org: Mandated Coverage of Maternity Care, January 2010. Retrieved January 14, 2011, from http://www.statehealthfacts.org/comparetable.jsp?ind=687&cat=7&sort=1558</p>

ACA RELEVANCE	FACT	SOURCE
	<p>As of 2009, only about 13% of plans on individual market include any maternity coverage.</p>	<p>Courtot, B. & Kaye, J. (2009, October). Still Nowhere to Turn: Insurance Companies Treat Women Like a Pre-Existing Condition. National Women’s Law Center Publication. Retrieved on January 14, 2011, from http://www.nwlc.org/resource/still-nowhere-turn-insurance-companies-treat-women-pre-existing-condition</p>
	<p>Over the last 25 years, the share of nonelderly women covered by private health insurance fell 11 percentage points to 67 percent, while the proportion covered by Medicaid increased 5 percentage points to 11 percent.</p>	<p>U. S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Health Statistics: National Health Interview Survey, 1984-2009, previously unpublished tabulations (August 2010).</p> <p>(Via WOMEN IN AMERICA: Indicators of Social and Economic Well-Being, http://www.whitehouse.gov/sites/default/files/rss_viewer/Women_in_America.pdf)</p>
	<p>Medicaid, the state-federal program for the poor, covers 12% of nonelderly women, rising from 10% of women in 2008. According to Medicaid program statistics in 2006, nearly 17 million low-income women (18 to 64 years) were enrolled in Medicaid. Women make up three-quarters of the adult Medicaid population.</p> <p>Among all insurers, Medicaid disproportionately carries the weight of covering the poorest and sickest population of women. Over 80% of non-elderly women on Medicaid have incomes below 200% of the Federal Poverty Level (FPL) and one third (32%) rate their health as fair or poor, compared to 12% of low-income women covered by employer-sponsored insurance.</p> <p>Medicaid finances 41% of all births in the U.S., 43% of all nursing home spending, and accounts for 71% of all publicly funded family planning services.</p>	<p>http://www.kff.org/womenshealth/upload/6000-09.pdf</p>
	<p>Currently, 17 states and the District of Columbia use state-only funds to cover abortions beyond the federal limitations for women on Medicaid.</p>	<p>Guttmacher Institute, State Policies in Brief, November 1, 2010.</p>

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	<p>In 2009, 12% of women had Medicaid coverage, rising from 10% of women in 2008. Seven in ten Medicaid beneficiaries older than age 14 were women. The proportion of poor women who depend upon Medicaid is significantly higher -- in 2006, 37% of women of reproductive age (15-44) with family incomes below the federal poverty guidelines (\$16,600 for family of three in 2006) were enrolled in Medicaid.</p> <p>Women make up three-quarters of the adult Medicaid population.</p> <p>Among all insurers, Medicaid disproportionately carries the weight of covering the poorest and sickest population of women. Over 80% of non-elderly women on Medicaid have incomes below 200% of the Federal Poverty Level (FPL) and one third (32%) rate their health as fair or poor, compared to 12% of low-income women covered by employer-sponsored insurance.</p>	<p>http://www.kff.org/womenshealth/upload/6000-09.pdf</p>
	<p>Right now in most states, a woman without dependent children could be penniless and still not be eligible for Medicaid.</p>	<p>Where Are States Today: Medicaid and State-Funded Coverage Eligibility Levels for Low-Income Adults, Kaiser Commission on Medicaid and the Uninsured analysis of state policies through program websites and contacts with state officials, December 2009. Available at: http://www.kff.org/medicaid/upload/7993.pdf.</p>

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	<p>In 2009, 18 percent of nonelderly women (age 18–64) lacked health insurance, compared to 13 percent in 1984. For men, the percentage of uninsured rose from 16 percent to 24 percent.</p> <p>About a quarter of unmarried women under age 65 lacked health insurance, compared to 14 percent of nonelderly married women in 2009.</p> <p>Non-Hispanic Black women (21 percent) and Hispanic women (38 percent) were more likely to be uninsured than non-Hispanic White women in 2009 (14 percent).</p> <p>Lack of a usual source of health care is highly associated with lack of health insurance. Almost half of all women who were uninsured for more than 12 months had no usual source of care, compared to 7 percent of women who had been continuously insured for the prior 12 months. Lack of a usual source of health care is higher for Hispanic (24 percent) and non-Hispanic Black (16 percent) women than for non- Hispanic White women (12 percent) in this age range. Women age 18–44 are almost twice as likely to have no usual source of health care as are women age 45–64 (18 percent and 10 percent, respectively).</p>	<p>U. S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Health Statistics: National Health Interview Survey, 1984-2009, previously unpublished tabulations (August 2010).</p> <p>(Via WOMEN IN AMERICA: Indicators of Social and Economic Well-Being, http://www.whitehouse.gov/sites/default/files/rss_viewer/Women_in_America.pdf)</p>
	<p>Women make up the majority of the uninsured among the pre-Medicare population (age 55-64), in part because they lose their dependent coverage if their spouse goes on Medicare.</p>	<p>Axeen, S. and E. Carpenter, “Who are the Uninsured?” New America Foundation, December 2007. Accessed at http://www.newamerica.net/files/NAFwhoaretheuninsured.pdf.</p>

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	<p>Approximately 19.1 million women are uninsured. Women who are younger, low-income, and of color (especially Latinas) are particularly at risk for being uninsured.</p> <p>Uninsured women are more likely to have inadequate access to care, get a lower standard of care when they are in the health system, and have poorer health outcomes. They are more likely to postpone care and to forgo filling prescriptions than their insured counterparts and often delay or skip important preventive care such as mammograms and Pap tests.</p>	<p>http://www.kff.org/womenshealth/upload/6000-09.pdf</p>
	<p>Half (49%) of women who are uninsured live in households with incomes under 133 percent of poverty. Medicaid eligibility expansion has the potential to provide health coverage to up to 8.2 million uninsured women ages 19 to 64 in that income range.</p>	<p>Analysis of the 2009 Current Population Survey by Nicholas Tilipman and Bhaven Sampat of Columbia University.</p>
	<p>One in five women of reproductive age are uninsured.</p>	<p>“Census Data on Uninsured Women and Children,” March of Dimes Foundation, September 2009. Available at http://www.marchofdimes.com/files/Uninsured_Highlights09.pdf</p>
	<p>One study attributed nearly 45,000 excess annual deaths to lack of health insurance</p>	<p>Wilper A, et al. “Health Insurance and Mortality in U.S. Adults,” AJPH, Sept. 17, 2009 (online); print edition, Vol. 99, Issue 12, December 2009. (Via http://www.kff.org/womenshealth/upload/6000-09.pdf)</p>
	<p>Women, especially minority women, are more likely than men to be uninsured.</p> <p>The underinsured are generally older and sicker, and make greater use of the health care system, and may present a larger public health and health policy challenge than the uninsured.</p>	<p>http://www.ncbi.nlm.nih.gov/pubmed/20799673</p>

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	<p>Of the 19.1 million uninsured women in 2009, with the new types of assistance potentially available in 2014 under the ACA 54% will be eligible for Medicaid, and 37% will be eligible for premium assistance tax credits.</p>	<p>http://www.kff.org/womenshealth/upload/7987.pdf</p>
	<p>The Departments of Health and Human Services, Labor, and Treasury estimate that about 1.2 million young adults will become covered under their parents' policies in 2011. Of those, about 650,000 will have been previously uninsured and 550,000 will have purchased coverage in the individual insurance market.</p>	<p>Treasury, Labor, and Health and Human Services, Interim Final Rules for Group Health Plans and Health Insurance Issuers, 2010.</p>
	<p>Small businesses – which women are more likely to work for and own – sponsor insurance coverage for their workers. Starting last year, businesses with fewer than 25 employees and average annual wages below \$50,000 began receiving substantial tax credits for offering health insurance – up to 35 percent of employer-covered premiums in 2010 and increasing to 50 percent in 2014.</p>	<p>Low Wage Employers and Health Coverage: Findings from a National Survey,” Lake Snell Perry & Associates, January 2003, Unpublished (referring to research conducted by Jonathan Gruber, Professor of Economics at MIT, determining that 73% of employers with at least half of their workers earning \$7 or less per hour have fewer than 25 employees).</p>