Reform Matters
Making Real Progress for Women and Health Care

Repealing the Affordable Care Act will Hurt Women in Alaska

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The Affordable Care Act makes important advances for women's health. The new law protects women in Alaska from discriminatory health insurance practices, makes health coverage more affordable and easier for them to obtain, and improves access to many of the health services they need. Repealing this important law will hurt women in Alaska by returning to the days of a health care system that did not work for women.

Insurance Industry Practices that are Harmful to Women Would Continue

In addition to the prohibition on sex discrimination in health care, the new health care law explicitly prohibits discriminatory insurance practices. These important protections will prohibit insurers from treating women like a pre-existing condition. Here are a few of the important insurance protections women will lose if the law is repealed:

- A ban on gender rating for individuals and small businesses. Under the new law, by 2014 (at the latest) insurers in Alaska would no longer be allowed to charge individual women and small employers with a predominately-female workforce more for coverage.
- Prohibitions on coverage denials and exclusions for women with "pre-existing conditions" such as pregnancy; having had a C-section, breast, or cervical cancer; or having received medical treatment for domestic or sexual violence. By 2014 (at the latest) insurers in Alaska will be required to accept all applicants for coverage regardless of their medical history, and will no longer be able to issue coverage with pre-existing condition exclusions. For children, the prohibition on pre-existing condition exclusions began in September 2010.
    - Uninsured women in Alaska who were uninsured due to a pre-existing condition will lose access to coverage through the pre-existing condition insurance plan – or "high-risk pool" – that is available on a temporary basis, until the new insurance rules are in effect in 2014.
- A ban on lifetime and annual limits, which prohibits health plans from placing dollar limits on covered services, giving women the security of knowing that their plan benefits won't run out when they need them the most. Lifetime limits were banned for all health plans starting in September 2010. Annual limits are also strictly regulated and will be banned entirely for all new health plans and existing group plans in 2014.

Obtaining Insurance will be Harder and More Expensive if the Affordable Care Act is Repealed.

Women in Alaska are poorer (on average) than men and have more trouble affording health care. For instance, 18% of women in the state report not visiting a doctor due to high costs.[1] The new health care law would expand access to affordable coverage in several ways by 2014, but if the law is repealed women will lose opportunities to obtain the affordable coverage they need. For example:

- Up to 11,200 uninsured, low-income women in Alaska would not become eligible for Medicaid, which by 2014 would be expanded to those up to 133% of the federal poverty level (FPL), or roughly $29,000 a year for a family of four. [2]

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- Women would not see the benefits of a new Health Insurance Exchange that would be established in Alaska to serve as an easy-to-use "insurance shopping center" where women can compare and choose the high-quality health plan that best fits their needs.
- Approximately 28,000 women in Alaska would not receive health insurance subsidies to help towards premiums and out-of-pocket costs of Exchange-based health plans; subsidies would be available to those with family incomes up to 400% of the FPL, or roughly $88,000 a year for a family of four. [3]

Women Would Lose Coverage of Many of the Important Health Care Services They Need.

- All new health plans issued on or after September 23, 2010 are required to cover recommended preventive care at no cost. Repealing the new law would mean women would lose no-cost access to important preventive screenings such as mammograms and pap smears.
- Starting in 2014, health plans sold to individuals and small businesses must cover a broad range of health services. If the law is repealed, plans will not be federally required to cover many services important to women including maternity care, prescription drugs and mental health care.
- Alaska would lose a new and immediate opportunity to expand eligibility for Medicaid coverage for family planning to women and men with family incomes up to 175% of the FPL, the same income eligibility level for pregnancy.

There Are Many Additional Provisions of the New Law That Will Improve the Health and Well-Being of Alaska Women and Their Families- Which Women Will Lose with Repeal.

Additional benefits of the new health care law that women will lose with repeal include (but are certainly not limited to):

- Tax Credits for Small Business: Women are more likely than men to work for small businesses that don't offer health insurance, and will benefit from the new tax credits to help small businesses provide coverage to their employees (available for the 2010 tax year), as well as unprecedented access to affordable small group health coverage through the Exchanges.
- Coverage for Young Women Up to Age 26: Young women—who are more likely to be uninsured than women in any other age group—will benefit from a new rule that took effect September 2010 which allows young adults to remain on their parents' health insurance policy as a dependent until age 26. [4]
- Closing the Medicare Drug Coverage Gap: Older women will benefit from a provision which closes the Medicare Part D "donut hole," or the coverage gap that currently requires seniors to spend a considerable amount out-of-pocket for prescription drugs. In 2007, 64% of the Medicare beneficiaries that were affected by the "donut hole" were women.[5]
- New Long Term Care Insurance Options: A new national, voluntary insurance program known as CLASS will be established as early as 2011 to provide long-term services and supports to individuals with functional limitations. This program will alleviate burdens on family caregivers, who are most often women.[6]

- Time for Nursing Moms to Express Breast Milk at Work: Nursing mothers and their infants will gain from a requirement that employers provide a reasonable break time and location to express breast milk (effective immediately).[7,8]
- "Direct Access" to Obstetrical and Gynecological Care: As of September 2010, all new health plans are prohibited from requiring authorization or prior approval when women seek this type of health care.[9]

For more detailed information on how women will benefit from Affordable Care Act, visit the National Women's Law Center website: www.nwlc.org/reformmatters

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[1] Kaiser Family Foundation, *Putting Women's Health Disparities on the Map* (2009), http://www.statehealthfacts.org/comparemapreport.jsp?rep=31&cat=15

[2] National Women's Law Center calculations based on health insurance data for women ages 18-64 from the Current Population Survey's 2008 *Annual Social and Economic Supplement*, using CPS Table Creator, http://www.census.gov/hhes/www/cpstc/cps_table_creator.html

[3] *Ibid.* Includes an estimated 102,000 uninsured women and 51,000 women who currently purchase coverage from the individual health insurance market.

[4] At least thirty states already have laws that extend dependent coverage to young adult children, regardless of enrollment in school. Many of these state laws are more restrictive than the new federal law, and none apply to self-insured or ERISA plans (as the federal law does). The National Conference of State Legislatures (NCSL) provides a list of states' dependent coverage laws at: http://www.ncsl.org/default.aspx?tabid=14497

[5] U.S. Department of Health and Human Services, *Strengthening the Health Insurance System: How Health Insurance Reform Will Help America's Older and Senior Women*, http://www.healthreform.gov/reports/seniorwomen/index.html, Last Accessed on April 26, 2010.

[6] 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] This provision applies to all employers, though employers with fewer than 50 employees may be exempt if they demonstrate that the requirements impose an "undue hardship" on their business.

[8] At least twenty-four states already have laws related to expressing breast milk in the workplace. The National Conference of State Legislatures (NCSL) provides a list of these states and summaries of their laws at: http://www.ncsl.org/IssuesResearch/Health/BreastfeedingLaws/tabid/14389/Default.aspx

[9] Thirty-six states and DC already have direct access laws that managed care companies and group health plans must comply with. However, the new health reform law is broader in scope, since it requires all new health plans (i.e. for individuals and groups of all sizes, including self-insured health plans) to comply. The Kaiser Family Foundation provides a list of existing direct access laws at: http://www.statehealthfacts.org/comparemaptable.jsp?ind=493&cat=10