

Reform Matters

Making Real Progress for Women and Health Care



Moving Forward... Protecting Women's Health Celebrating the One Year Anniversary of the Affordable Care Act

March 23 marks the one year anniversary of the Affordable Care Act. This law makes important advances for women's health and, when fully implemented, will provide millions of women and their families with access to high-quality and affordable health care and coverage. While some parts of the law are being phased in over time, there are many provisions that women and families are already benefitting from.

Women now have greater protections against insurance company abuses.

- Insurance companies are prohibited from cancelling health insurance polices that have already gone into effect unless there has been fraud or an intentional misrepresentation of material fact. Under this insurance practice known as "rescission," insurance companies search for reasons to cancel the policies of people who become sick as a way to avoid paying for medical treatments.
- Health plans are <u>prohibited from imposing lifetime limits on coverage</u>, meaning they can no longer limit the amount of money they will pay for essential health benefits over an individual's lifetime. This protection applies to all health plans (including existing plans) and is especially beneficial for women with high health care expenses, such as those with disabilities, chronic conditions, and serious illnesses.
- Similarly, health plans are <u>prohibited from limiting the amount of money they will pay</u> for benefits during one year. During 2011, annual limits cannot be lower than \$750,000 and are completely prohibited by 2014. The provision applies to all health plans except existing individual plans (not obtained through an employer).
- Women now have <u>"direct access" to obstetrical and gynecological care.</u> The new health care law explicitly prohibits any new health plan from requiring approval when women seek this type of health care.

Women have improved access to affordable preventive care.

All new health plans are required to cover key preventive health services for women at no cost, such as co-payments or deductibles. To ensure that costs are no longer a barrier to preventive care, the law requires new plans to cover for free services recommended by the US Preventive Services Task Force (USPSTF) such as mammograms, smoking cessation services, colon cancer screenings, and flu shots. Additional preventive services that women in particular need will be designated later this year.

Senior women have more affordable access to the services they need.

- Medicare now covers more <u>preventive benefits such as no-cost annual checkups and mammograms</u>.
- Women will benefit from a provision which <u>closes the Medicare Part D "donut hole,"</u> or the prescription drug coverage gap that requires seniors to pay the entire cost of prescriptions while in the gap. In 2007, 64% of those affected by the "donut hole" were

women.¹ Last year, seniors in the donut hole received rebate checks; this year, they will receive 50% discounts on brand name drugs.

It is now easier for children and young adults to get and keep health insurance.

- Young women—who are more likely to be uninsured than women in any other age group—are already benefitting from a new rule that <u>allows young adults to remain on their parents' health insurance</u> policy as a dependent until age 26.
- Health plans <u>are prohibited from denying coverage to children ages 0-19 with "pre-existing conditions"</u> such as asthma and diabetes. This protection applies to all health plans except existing individual plans.

Women are benefitting from many other provisions including, but not limited to:

- A new <u>tax credit that helps small businesses provide coverage</u> to their employees. Women are more likely than men to work for small businesses that don't offer health insurance.
- A requirement that employers with more than 50 employees provide women a reasonable time and place to express breast milk.
- Access to a new <u>pre-existing condition insurance plan or "high-risk pool"</u> that is available to women who are uninsured due to a preexisting condition until 2014, when insurance companies will no longer be able to deny women coverage due to pre-existing conditions.

This is just the beginning. Women will continue to benefit from additional provisions to help them and their families access and afford the quality health care they need so that by 2014:

- Insurance companies will no longer be able to deny women coverage due to pre-existing conditions, such as having had a C-section, breast or cervical cancer, or received medical treatment for domestic or sexual violence.
- Insurers will end their practice of charging individual women and small employers with a predominately-female workforce more for coverage than they charge men.
- Approximately 8.2 million uninsured women will gain health coverage from expanded Medicaid eligibility.²
- Women will benefit from new insurance market places -- known as Exchanges -- where women and their families and small employers can compare and choose the high-quality health plan that best fits their needs.
- Up to 11 million women who lack affordable insurance through an employer will be eligible for sliding-scale subsidies to help towards premiums and out-of-pocket costs of health plans available through the Exchanges.³

For more information on women and the new health care law, visit the National Women's Law Center website: www.nwlc.org/reformmatters

¹ 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.

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 *lbid.* Includes an estimated 8.1 million uninsured women and 2.9 million women who currently purchase coverage from the individual health insurance market.