2010 Women’s Health Report Card:  
*Are We Moving in the Right Direction?*

National Women’s Law Center  
Oregon Health & Science University  

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Today’s Speakers

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Overview of the Presentation

• About the Report Card
• Looking Back: 2000-2010
• Key Findings from 2010
• Moving Forward
  – Patient Protection and Affordable Care Act
  – Healthy People 2020 and other Initiatives
About the Report Card

• Presents a comprehensive and integrated list of women’s health concerns

• Grades and ranks the nation and states on 26 health status indicators for women
  – Goals primarily set using Healthy People 2010 Objectives

• Evaluates strength of 68 policy indicators related to women’s health
Ten-Year National Review

<table>
<thead>
<tr>
<th>Health Status Indicators</th>
<th>2000</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Progress</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Smoking (%)</td>
<td>20.8</td>
<td>16.8</td>
</tr>
<tr>
<td>Colorectal Cancer Screenings (%)</td>
<td>37.7</td>
<td>61.8</td>
</tr>
<tr>
<td>Coronary Heart Disease Death (per 100,000)</td>
<td>148.1</td>
<td>118.9</td>
</tr>
<tr>
<td><strong>Decline</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pap Smears (%)</td>
<td>84.9</td>
<td>78</td>
</tr>
<tr>
<td>Obese (%)</td>
<td>19.8</td>
<td>26.4</td>
</tr>
<tr>
<td>High Blood Pressure (%)</td>
<td>23.6</td>
<td>27.7</td>
</tr>
<tr>
<td>Binge Drinking (%)</td>
<td>6.7</td>
<td>10.6</td>
</tr>
</tbody>
</table>
Progress Since 2000: Common Factors

- Federal policies and resources
- State policy change
- Public education and awareness

States Meeting Anti-smoking Policy Goals, 2000-2010

<table>
<thead>
<tr>
<th>Policy Goal</th>
<th>2000</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid coverage of smoking cessation treatment</td>
<td>6</td>
<td>31</td>
</tr>
<tr>
<td>Sales rate of tobacco products to minors</td>
<td>3</td>
<td>22</td>
</tr>
<tr>
<td>Excise tax on cigarettes</td>
<td>3</td>
<td>30</td>
</tr>
</tbody>
</table>
2010 Key Findings
National Performance: Health Status

• **National Grade: Unsatisfactory**

• **3 benchmarks met:**
  – Women receiving mammograms
  – Colorectal screenings
  – Annual dental visits

• **23 benchmarks missed**
## State Performance: Health Status

<table>
<thead>
<tr>
<th>Status Indicators <em>Met</em> by All States</th>
<th>Status Indicators <em>Missed</em> by All States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Dental Visits</td>
<td>Health Insurance</td>
</tr>
<tr>
<td>Colorectal Cancer Screenings</td>
<td>Poverty</td>
</tr>
<tr>
<td></td>
<td>Obesity</td>
</tr>
<tr>
<td></td>
<td>Wage Gap</td>
</tr>
<tr>
<td></td>
<td>Pap Smears</td>
</tr>
<tr>
<td></td>
<td>Eating Five Fruits and Vegetables a Day</td>
</tr>
<tr>
<td></td>
<td>High Blood Pressure</td>
</tr>
<tr>
<td></td>
<td>Diabetes</td>
</tr>
<tr>
<td></td>
<td>Infant Mortality</td>
</tr>
<tr>
<td></td>
<td>Chlamydia</td>
</tr>
<tr>
<td></td>
<td>Life Expectancy</td>
</tr>
</tbody>
</table>
Health Status Varies by State

- **Top-Ranked**: Vermont, Massachusetts, Hawaii
- **Bottom-Ranked**: Mississippi, Louisiana, Arkansas

<table>
<thead>
<tr>
<th>Status Indicator</th>
<th>Best</th>
<th>Worst</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coronary Heart Disease Death Rate (per 100,000 women)</td>
<td>60.9</td>
<td>174.8</td>
</tr>
<tr>
<td></td>
<td>(HI)</td>
<td>(DC)</td>
</tr>
<tr>
<td>Obesity (%)</td>
<td>19.4</td>
<td>36.8</td>
</tr>
<tr>
<td></td>
<td>(CO)</td>
<td>(MS)</td>
</tr>
<tr>
<td>Diabetes (%)</td>
<td>5</td>
<td>12.9</td>
</tr>
<tr>
<td></td>
<td>(AK)</td>
<td>(WV)</td>
</tr>
</tbody>
</table>
2010 Overall State Grades

Key:  S(0)  S- (2)  U (37)  F (12)
State Performance: Policies to Improve Women’s Health

- **Leading:** California, New Jersey, Massachusetts
- **Last:** Mississippi, Idaho, South Dakota

<table>
<thead>
<tr>
<th>Policy Goals Met by All States</th>
<th>Policy Goals Met by Very Few States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid Coverage for Breast and Cervical Cancer Treatment</td>
<td>Abortion Clinic Access Protected (no states)</td>
</tr>
<tr>
<td>Nutrition Education for Food Stamp Recipients</td>
<td>Gender Rating in All Group Health Insurance (1 state)</td>
</tr>
</tbody>
</table>
Moving Forward: Patient Protection and Affordable Care Act
The Promise of the Affordable Care Act

ACA addresses **two-thirds** of the Report Card’s 68 health policies.

<table>
<thead>
<tr>
<th>Fully Addressed</th>
<th>Partially Addressed</th>
<th>Not Addressed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid eligibility</td>
<td>Contraceptive coverage</td>
<td>Pharmacy refusals</td>
</tr>
<tr>
<td>Medicaid asset test</td>
<td>Medicaid Family Planning waiver</td>
<td>Reproductive health clinic access</td>
</tr>
<tr>
<td>Insurance regulation (individual market)</td>
<td>Diabetes-related services</td>
<td>Public funding for abortion</td>
</tr>
<tr>
<td>Mental health parity</td>
<td>Medicaid smoking cessation coverage</td>
<td>Family and medical leave</td>
</tr>
<tr>
<td>Patient protections in managed care</td>
<td>Sex education</td>
<td>Minimum wage</td>
</tr>
<tr>
<td>Preventive screening coverage</td>
<td>Discrimination against domestic violence survivors</td>
<td>Gun control (licensing, safe storage, concealed carry)</td>
</tr>
</tbody>
</table>
Coverage Expansions

Primary Ways the ACA Expands Coverage:

• Medicaid
• New “Health Insurance Exchanges” and federal subsidies

HRC Policy Goal: Cover working parents with incomes at or above 200% of the 2009 FPL

  – Medicaid expansion to all people with incomes up to 133% of the FPL
  – Those with incomes between 133% and 400% of poverty eligible for subsidies to purchase private coverage in new “Health Insurance Exchanges”

HRC Policy Goal: Eliminate the asset test for parents in Medicaid

  – Eliminates asset testing for almost all Medicaid applicants by 2014
Current Medicaid Coverage

- Infants, Preschool Children, and Pregnant Women: 133
- School Age Children: 100
- Disabled: 74
- Parents with Children: 41 (median)
- Adults without children: 0
2014 Medicaid Coverage

- Infants, Preschool Children, and Pregnant Women: 133
- School Age Children: 133
- Disabled: 133
- Parents with Children: 133
- Adults without children: 133
Health Insurance Reforms

The ACA bans practices that made health insurance inaccessible for many women.

**HRC Policy Goal:** Guarantee the accessibility of individual health plans

- Insurers must “guarantee issue” to all who apply and cannot use pre-existing condition exclusions

**HRC Policy Goal:** Prohibit private insurance companies from considering gender when determining health insurance premiums for individuals and groups of all sizes

- Insurers are prohibited from charging individuals and small groups more based on gender
The ACA Requires Coverage for Many Important Health Services for Women.

**HRC Policy Goal:** Require private insurance companies to provide coverage for maternity care

- Small group and individual health plans must cover a set of “essential health benefits” e.g. maternity care, mental health care, prescription drugs (among others)

**HRC Policy Goal:** Require private insurers to cover annual Pap smears/Chlamydia screening/mammograms/bone density tests

- New health plans must cover recommended preventive services with no copayments or deductibles
Access to Reproductive Health Services

The ACA expands access to several reproductive health services for women, but imposes unnecessary requirements on abortion coverage.

HRC Policy Goal: Allow private insurers to cover abortion services without restrictions
- Private Exchange-based insurance plans may cover abortion but then must collect 2 payments from enrollees and segregate a portion of premiums

HRC Policy Goal: Expand coverage for family planning services through Medicaid
- States have the flexibility to expand family planning services without having to obtain a federal waiver
Other Improvements in the ACA

The ACA includes many other provisions that will improve the health and well-being of women and their families.

**HRC Policy Goal:** Protect against impoverishment for “community” spouses of nursing home residents under Medicaid

- States must extend spousal impoverishment protections to spouses of Medicaid home and community-based long-term care services

**HRC Policy Goal:** Provide adequate funding for tobacco prevention activities

- Funding for disease prevention/health promotion in areas of smoking cessation, proper nutrition, regular exercise, obesity reduction
Healthy People 2020

• Newly released (www.healthypeople.gov)

• New framework
  – Emphasis on social determinants of health
  – Life course view of health promotion/disease prevention

• New topic areas/objectives (examples)
  – LGBT health
  – Adolescent health
  – Older adults

• New targets for 2020
Other Initiatives in Women’s Health

- HHS Coordinating Committee on Women’s Health
  - Multi-phase initiative concluding with *Summit for Action: the Health of Women and Girls Beyond 2010*

- NIH Office on Research in Women’s Health

- HRSA Maternal and Child Health Bureau
  - Exploring outcome measures for women’s health

- Institute of Medicine
  - *Women’s Health Research: Progress, Pitfalls, and Promise* (report)
Summing Up

• From 2000-2010: some improvement/some decline, still a long way to go on women’s health

• Progress can be achieved with federal/state policies and public attention/awareness

• The Affordable Care Act holds enormous potential for expanding coverage and improving women’s health
THANKS!

Please check out the entire 2010 Women’s Health Report Card at:

http://hrc.nwlc.org