

Being a Woman Just Got a Little Easier: How the Affordable Care Act Benefits Women

Historically, women have not had equal access to essential health coverage and care. Women have been charged higher insurance premiums than men simply because they are women. And they've had no guarantee that the health coverage they purchase will cover the women's health services that they need.

The Affordable Care Act is one of the greatest victories for women's rights in recent decades because it puts an end to this discrimination. The law improves access to care that is essential to women's health, and it makes coverage more affordable. Already, millions of women are benefiting from the health care law, and more protections are on their way in 2014. This fact sheet outlines how the Affordable Care Act protects and promotes the health of women across the country. The health care law:

► Ensures that women can get the care they need

- **Women can now visit an OB-GYN without a referral.** Insurance companies can no longer require a woman to obtain prior approval before seeking obstetrical and gynecological care.
- **Pregnant women who have Medicaid now have more options for where they get their maternity care.** They can choose to get care at a freestanding birth center, for example.
- **Women can now obtain preventive services with no copays or deductibles.** This includes mammograms, cervical cancer screenings, and blood pressure screenings. More than 20 million women are already receiving preventive health services without copays, thanks to the health care law.¹
- **Starting this August, new health plans must cover additional preventive services for women with no copays or deductibles.** These include:
 - an annual well woman visit,
 - birth control, including oral contraception and IUDs,
 - HIV screening and counseling,
 - sexually transmitted infection counseling,
 - screening for gestational diabetes,
 - breastfeeding consultation and supplies, including breast pumps, and
 - screening and counseling for domestic violence.
- **Starting in 2014, health plans will have to include coverage for maternity services.** Under this provision, 8.7 million women who buy coverage on their own in the individual market will gain essential maternity coverage.²

Cost Is No Longer a Barrier to Preventive Care

While every woman should be able to obtain the preventive health care services she needs, many women have had to forgo lifesaving and cost-effective preventive care because they couldn't afford the cost. Today,

- Birth control costs women with health insurance about \$215 a year. Women who are uninsured currently have to pay even more to obtain birth control, about \$1,210 a year.³
- Breast pumps and accessories can cost new moms about \$300 to \$750 each year.⁴

Starting this August, new health plans will have to cover these supplies with no copays. Thanks to the Affordable Care Act cost will no longer be a barrier to a woman making the preventive health care decisions that are the best for herself and her family.

► Protects women and their families from insurance discrimination

- **No more discrimination based on a child's pre-existing conditions.** Health insurance companies can no longer deny children health coverage because they have a pre-existing condition or deny children coverage for health services to treat their pre-existing condition.
- **Insurance companies can no longer cancel your health coverage when you get sick.** This gives families the security of knowing they will never lose their coverage if someone becomes ill.
- **Insurance companies can no longer place lifetime dollar limits on your coverage.** Insurance companies will have to increase their annual dollar limits on coverage until 2014, when they will no longer be able to place *any* annual dollar caps on your coverage.

and starting in 2014 . . .

- **Insurance companies will no longer be able to deny *anyone* health coverage or charge more for health coverage based on a pre-existing condition.** Nearly 30 percent of women (28.4 percent) in the United States have a diagnosed pre-existing condition that, without the health care law, could lead to a denial of coverage. (See Tables 1 and 2 for state-specific data.) Thanks to the law, women will no longer be discriminated against because they have pre-existing conditions. They also won't be denied coverage for having had a C-section or for having been a victim of domestic violence.
- **Simply being a woman will no longer be a pre-existing condition.** Insurance companies will no longer be able to charge women higher premiums than men for the exact same health coverage. This will ensure that no woman is ever again charged up to 85 percent more than a man for the exact same health coverage, simply because she is a woman.⁵

▶ Expands access to affordable health coverage

- **Young adults can now remain on their parent's health plan up to the age of 26.** Already more than 3 million young adults have gained coverage under this provision of the law.⁶ This provides peace of mind for millions of moms and their young adult daughters.

and starting in 2014 . . .

- **Low- and middle-income families will receive tax credits to help make coverage affordable.** This means that 7 million women who are currently uninsured will be able to get tax credits that cover a portion of their monthly health insurance premiums, making coverage more affordable for them and their families.⁷
- **More low-income adults will be eligible for Medicaid.** Thanks to the law, 10 million women who are currently uninsured may be able to get health coverage through Medicaid.⁸

▶ Supports new moms and family planning

- **Employers must now provide nursing mothers with breaks and a private space to express breast milk in the workplace.** This protects 19 million employed women and ensures working moms can make the personal decision whether or not to breast feed without worrying about potential negative consequences at their job.⁹
- **Better care is on the way for women with postpartum depression.** New federal grants and research could help expand and improve care for women suffering from postpartum depression.
- **New programs are empowering young parents.** Grants are helping states build programs that help teen moms complete high school and continue on to higher education and that provide at-risk parents with home visits from social workers and nurses.
- **States are now able to provide comprehensive and evidence-based sex education.** This will help to reduce teen pregnancy rates and the transmission of sexually transmitted infections. Already more than \$100 million in grants have been awarded to states to provide youth with comprehensive sex education programs.¹⁰

The health care law works to protect and promote the health of women and their families in a number of ways. It ensures women have access to the essential health services they need and puts an end to discrimination against women by insurance companies. The law also provides greater health care security for women and their families and makes coverage more affordable. Thanks to the Affordable Care Act, being a woman just got a little easier.

Table 1.

Non-elderly Women Diagnosed with a Pre-Existing Condition that Could Result in a Denial of Coverage, by State

State	Total Number of Women in State	Number with a Pre-Existing Condition	Percent with a Pre-Existing Condition
Alabama	1,983,300	593,100	29.9%
Alaska	302,300	85,700	28.3%
Arizona	2,657,400	735,100	27.7%
Arkansas	1,181,800	349,600	29.6%
California	15,893,000	3,918,000	24.7%
Colorado	2,139,200	584,100	27.3%
Connecticut	1,502,500	424,100	28.2%
Delaware	375,900	110,800	29.5%
District of Columbia	265,300	77,900	29.4%
Florida	7,557,300	2,182,800	28.9%
Georgia	4,220,500	1,181,600	28.0%
Hawaii	555,700	120,000	21.6%
Idaho	657,900	182,000	27.7%
Illinois	5,473,700	1,620,800	29.6%
Indiana	2,725,700	845,900	31.0%
Iowa	1,245,700	382,400	30.7%
Kansas	1,188,500	351,000	29.5%
Kentucky	1,795,800	558,200	31.1%
Louisiana	1,831,700	535,500	29.2%
Maine	*	*	*
Maryland	2,509,100	692,700	27.6%
Massachusetts	*	*	*
Michigan	4,156,100	1,325,300	31.9%
Minnesota	2,229,100	675,200	30.3%
Mississippi	1,246,900	364,700	29.3%
Missouri	2,489,300	774,400	31.1%
Montana	402,400	121,600	30.2%

Table 1 cont'd.

Non-elderly Women Diagnosed with a Pre-Existing Condition that Could Result in a Denial of Coverage, by State

State	Total Number of Women in State	Number with a Pre-Existing Condition	Percent with a Pre-Existing Condition
Nebraska	756,800	223,900	29.6%
Nevada	1,134,400	292,900	25.8%
New Hampshire	552,700	163,500	29.6%
New Jersey	*	*	*
New Mexico	865,000	240,700	27.8%
New York	*	*	*
North Carolina	4,012,900	1,178,300	29.4%
North Dakota	268,600	83,600	31.1%
Ohio	4,840,400	1,542,700	31.9%
Oklahoma	1,541,300	461,100	29.9%
Oregon	1,593,200	461,900	29.0%
Pennsylvania	5,224,000	1,548,300	29.6%
Rhode Island	442,500	127,800	28.9%
South Carolina	1,925,700	574,000	29.8%
South Dakota	331,300	104,100	31.4%
Tennessee	2,645,100	810,200	30.6%
Texas	10,820,100	2,796,300	25.8%
Utah	1,201,800	304,700	25.4%
Vermont	*	*	*
Virginia	3,398,700	953,200	28.0%
Washington	2,831,000	790,200	27.9%
West Virginia	736,400	242,300	32.9%
Wisconsin	2,366,200	742,100	31.4%
Wyoming	231,900	66,200	28.5%
U.S. Total	129,835,800	36,856,400	28.4%

Notes: Estimates prepared by The Lewin Group for Families USA. Data are for the non-institutionalized, non-Medicare-eligible population. Numbers may not add due to rounding.

* Data are not available for Maine, Massachusetts, New Jersey, New York, and Vermont because these states have laws requiring that insurers offer coverage to all people regardless of health status.

Table 2.

Non-Elderly Americans Diagnosed with a Pre-Existing Condition that Could Result in a Denial of Coverage, by Gender and State

State	Total Number	Percent of all State Residents	Percent of Women	Percent of Men
Alabama	1,030,900	26.2%	29.9%	22.5%
Alaska	159,400	25.1%	28.3%	22.1%
Arizona	1,297,000	24.2%	27.7%	20.8%
Arkansas	615,600	26.0%	29.6%	22.5%
California	6,894,400	21.5%	24.7%	18.3%
Colorado	1,042,900	24.0%	27.3%	20.7%
Connecticut	742,000	24.8%	28.2%	21.3%
Delaware	192,300	25.9%	29.5%	22.2%
District of Columbia	133,700	26.1%	29.4%	22.5%
Florida	3,822,700	25.4%	28.9%	21.9%
Georgia	2,051,700	24.5%	28.0%	20.9%
Hawaii	216,300	19.1%	21.6%	16.7%
Idaho	323,000	24.3%	27.7%	21.0%
Illinois	2,853,000	26.0%	29.6%	22.4%
Indiana	1,500,600	27.4%	31.0%	23.8%
Iowa	688,200	27.3%	30.7%	24.0%
Kansas	627,200	26.1%	29.5%	22.8%
Kentucky	979,700	27.3%	31.1%	23.6%
Louisiana	929,500	25.5%	29.2%	21.8%
Maine	*	*	*	*
Maryland	1,198,300	24.2%	27.6%	20.8%
Massachusetts	*	*	*	*
Michigan	2,357,400	28.4%	31.9%	24.8%
Minnesota	1,213,300	26.9%	30.3%	23.6%
Mississippi	632,400	25.6%	29.3%	21.9%
Missouri	1,366,700	27.5%	31.1%	24.0%
Montana	220,000	26.9%	30.2%	23.7%

Table 2 cont'd.

Non-Elderly Americans Diagnosed with a Pre-Existing Condition that Could Result in a Denial of Coverage, by Gender and State

State	Total Number	Percent of all State Residents	Percent of Women	Percent of Men
Nebraska	402,800	26.2%	29.6%	23.0%
Nevada	527,100	22.8%	25.8%	19.8%
New Hampshire	290,800	26.2%	29.6%	22.8%
New Jersey	*	*	*	*
New Mexico	419,900	24.4%	27.8%	20.9%
New York	*	*	*	*
North Carolina	2,052,100	25.7%	29.4%	22.1%
North Dakota	153,200	27.5%	31.1%	24.1%
Ohio	2,729,200	28.3%	31.9%	24.7%
Oklahoma	816,500	26.2%	29.9%	22.6%
Oregon	820,700	25.6%	29.0%	22.2%
Pennsylvania	2,723,600	26.1%	29.6%	22.6%
Rhode Island	222,700	25.5%	28.9%	21.9%
South Carolina	1,000,900	26.2%	29.8%	22.5%
South Dakota	189,600	28.0%	31.4%	24.7%
Tennessee	1,413,500	26.9%	30.6%	23.1%
Texas	4,893,700	22.5%	25.8%	19.1%
Utah	536,800	22.0%	25.4%	18.7%
Vermont	*	*	*	*
Virginia	1,675,600	24.7%	28.0%	21.3%
Washington	1,405,500	24.6%	27.9%	21.3%
West Virginia	426,800	29.1%	32.9%	25.2%
Wisconsin	1,337,700	27.9%	31.4%	24.5%
Wyoming	120,000	25.1%	28.5%	21.8%
U.S. Total	64,821,400	24.9%	28.4%	21.5%

Notes: Estimates prepared by The Lewin Group for Families USA. Data are for the non-institutionalized, non-Medicare-eligible population. Numbers may not add due to rounding.

* Data are not available for Maine, Massachusetts, New Jersey, New York, and Vermont because these states have laws requiring that insurers offer coverage to all people regardless of health status.

Endnotes

- ¹ Benjamin D. Sommers and Lee Wilson. *Fifty-four Million Additional Americans Are Receiving Preventive Services without Cost-Sharing under the Affordable Care Act*. (Washington: ASPE Office of Health Policy, February 2012), available online at <http://aspe.hhs.gov/health/reports/2012/PreventiveServices/ib.pdf>.
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- ⁶ Benjamin D. Sommers, *Number of Young Adults Gaining Insurance Due to The Affordable Care Act Now Tops 3 Million* (Washington: ASPE Office of Health Policy, June 2012), available online at <http://aspe.hhs.gov/aspe/gaininginsurance/rb.pdf>.
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- ¹⁰ U.S. Department of Health and Human Services, Administration for Children and Families, *FY 2011 Adolescent Pregnancy Prevention Grant Awards: State Personal Responsibility Education Program (PREP) Grants* (Washington: HHS, 2012), available online at <http://www.acf.hhs.gov/programs/fysb/content/docs/11-tpp.htm#stateprep>.

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