



## Women & the Affordable Care Act Maryland Policy Briefing

# Why This is Important

The Affordable Care Act (ACA) protects women from discriminatory health insurance practices, makes health coverage more affordable and easier to obtain, and improves access to many of the health services women need.

## Maryland Profile

- The most recent data demonstrates that approximately 280,000 women, **15% of women in Maryland, are uninsured.**
- Of the women who are uninsured in Maryland, **56% are currently employed.**
- There is a **significant disparity of insurance rates** among communities of color in Maryland ; 38.7% of Hispanic women and 17.7% of Black women are uninsured compared to 10.4% of White women.
- The **majority of uninsured women in Maryland are below 200%** of the federal poverty line (FPL), just \$21,780 annually for an individual and roughly \$37,000 for a family of three.

## Why This is Very Important

Women comprise a disproportionate share of health care consumers, often managing multiple chronic conditions and paying more out-of-pocket costs.

- In 2008, **one in four women** reported going without necessary health care because they could not afford it.
- The Department of Labor estimates that **women make approximately 80% of health care decisions** for their family.
- Traditionally, health insurance plans sold in the individual market have failed to provide comprehensive maternity services; **in 2009 only 13% of plans sold in the individual market included comprehensive maternity coverage.**
- Historically, women in the majority of states have been charged more for health insurance than men—a practice known as gender rating.

Women have difficulty finding coverage options that offer the full range of reproductive health services they need, such as family planning, maternity care, and abortion care.



**BEING A WOMAN IS NOT A  
PRE-EXISTING CONDITION**

**NATIONAL WOMEN'S LAW CENTER**

# The Affordable Care Act

## 17 million Women

**GOAL:** Provides affordable quality health coverage that is easily available and reforms unfair insurance practices

- Expands Medicaid
- Creates Insurance Exchanges
- Strengthens Medicare
- Reforms Private Insurance Market
- Protects Consumers

## Insurance Reforms

- Ban on Gender Rating
- Greater transparency and premium rate review
- Requirements on Medical Loss Ratio
- Guarantee issue
- Ban on pre-existing conditions
- Ban on caps and lifetime limits
- Remain on parents coverage until 26
- Standard Summary of Benefits
- Extends Mental Health Parity

# Nondiscrimination Provision

## **Section 1557**

Section 1557 of the Affordable Care Act additionally prohibits discrimination on the basis of race, color, national origin, sex, age and disability in health programs or activities that receive federal financial assistance are administered by an Executive agency or were established by Title I of the ACA.

**Section 1557 Applies to the Essential Health Benefits**

## Essential Health Benefits

- Ambulatory patient services
- Emergency services
- Hospitalization
- Laboratory services
- Maternity and newborn care
- Mental health and substance use disorder services, including behavioral health treatment
- Pediatric services, including oral and vision care.
- Prescription drugs
- Preventive and wellness services and chronic disease management
- Rehabilitative and habilitative services and devices

Special rules for abortion

# Essential Health Benefits

According to the ACA, the Secretary shall:

- Ensure that such essential health benefits reflect an appropriate balance among the categories and are not weighted to one or the other
- Not make coverage decisions, determine reimbursements rates, establish incentive programs, or design benefits in ways that discriminate against individuals because of their age, disability, or expected length of life
- **Take into account the health care needs of diverse segments of the populations, including women, children, and persons with disabilities and other groups**

# Special Rules on Abortion

- Plans are not required to provide abortion coverage
- BUT plans can choose to cover:
  - None
  - Some (Hyde exceptions)
  - All
- One plan in the exchange must not cover abortion
- Plans must not discriminate against providers
- No federal funds can be used for abortion services
- Enrollees must make two separate payments
- Payments must be segregated into separate accounts
- State Insurance Commissioners ensure compliance
- State abortion bans are not preemptive

# Women's Preventive Health Services

As of August 1<sup>st</sup> 2012, all new insurance plans are required to provide (at no cost-sharing!) the following services:

- The full range of FDA-approved contraception methods and contraceptive counseling
- well-woman visits
- screening for gestational diabetes
- human papillomavirus (HPV) DNA testing for women > 30 years
- sexually-transmitted infection counseling
- human immunodeficiency virus (HIV) screening and counseling;
- breastfeeding support, supplies, and counseling
- domestic violence screening and counseling

No copayments, deductibles or co-insurance

# How Women Benefit from the Law

- Insurance companies are prohibited from cancelling health insurance policies that have already gone into effect.
- Health plans are prohibited from imposing lifetime limits on coverage and limiting the amount of money they will pay for benefits during one year.
- All new health plans are required to cover key preventive health services for women at no cost, such as co-payments and deductibles.
- Medicare now covers preventative health benefits such as no-cost annual checkups and mammograms, and closes the Medicare Part D “donut hole.”
- A new tax credit that helps small businesses provide coverage.
- A requirement that employers with more than 50 employees provide women a reasonable time and place to express breast milk.
- Women now have “direct access” to obstetrical and gynecological care.

## How the law will help Women in Maryland

- **Approximately 245,000 women will gain coverage** because of the Affordable Care Act.
- **Approximately 110,000 women in Maryland will receive tax credits** to help women pay the premiums and out-of-pocket costs of plans offered in the Exchange and make coverage more affordable; tax credits will be available to those with family incomes up to 400% of the FPL, or roughly \$88,000 a year for a family of four.
- The Affordable Care Act also expands the Medicaid program in Maryland which will also help to reduce the rates of the uninsured. **Up to 135,000 uninsured, low-income women in Maryland will be newly eligible for coverage through Medicaid**, which will be expanded to those up to 133% of the FPL, or roughly \$29,000 a year for a family of four.

# Thank you MD Women's Coalition for Health Care Reform

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