

October 2013 | Fact Sheet

## Obamacare & You: If You Are A Woman...

As a woman, it is especially important for you to understand how the Affordable Care Act (ACA) will change healthcare in 2014. Your health care needs differ from men's and you are often the main healthcare decision maker for your family. Obamacare broadens the range of many services that are important to women that health plans now must cover, some without any co-pay. In addition, it expands access to coverage through [Medicaid](#) and the new state health [marketplaces](#). Changes important to women include:

### NO MORE PRE-EXISTING CONDITION LIMITS

Plans will no longer be allowed to deny coverage to pregnant women or those who have been diagnosed with depression or experienced domestic violence.

### EQUITABLE INSURANCE PRICING FOR MEN AND WOMEN

If you get your insurance on the individual market or through the new insurance marketplaces, your plan can no longer charge you a different premium than it would charge a man of the same age. This practice was called gender-rating and is no longer permitted.

### PREVENTIVE SERVICES

If you have private insurance and you or your family needs a vaccine, a health screening, or a number of other recommended preventive services-- deemed "highly effective" in preventing health problems--your insurance plan probably covers it without any cost sharing. These include mammography, Pap smears, HPV vaccines, STI screening, and annual well woman visits.

### CONTRACEPTIVES

If you need birth control, you probably no longer have to pay anything out of pocket for it if you have private insurance. The new law requires most private plans to cover all forms of prescription birth control (but not all brands) without any co-pay. Women with Medicaid also get birth control covered without cost-sharing.

### MATERNITY CARE

Obamacare requires that plans in the individual market and the new state marketplaces cover maternity services including childbirth, prenatal visits, and well-baby care. Most employer plans were already required to cover maternity care, but now you will also get prenatal visits and screenings, breast pump rentals, and breastfeeding counseling without any co-pay because they are considered preventive services. All state Medicaid programs cover maternity care as well, but the specific services may vary from state to state. If you are nursing and work for a large employer (50 or more employees), you now have access to a private room and break time to express milk for your baby.

### ABORTION

Many private insurance plans cover abortion. If you're signing up in your state's new marketplace, your coverage for abortion services will depend on where you live and the plan you choose. Some states have banned abortion coverage from all plans in the marketplace while some allow it. You'll have to check the details of your policy to see if it covers the procedure. State Medicaid programs typically limit abortion coverage to pregnancies that are a result of rape or incest or in cases when the pregnancy is a threat to woman's life. Some state Medicaid programs may cover abortion under other circumstances.

### DIRECT ACCESS TO OB-GYNS

If you have private insurance, most plans now must allow you to choose an ob-gyn as your primary provider or see an ob-gyn for basic care without a referral.

To find out more about how the ACA could affect you, visit [www.healthcare.gov](http://www.healthcare.gov).