



Women's Health under the Affordable Care Act

The *Covering Health Reform* Webinar Series For Journalists
Presented by the Kaiser Family Foundation

Thursday, February 6, 2014
12:30 p.m. ET – 1:30 p.m. ET

Today's Speakers from the Kaiser Family Foundation



Alina Salganicoff

Vice President
and Director of
Women's Health
Policy



Laurie Sobel

Senior Policy
Analyst



Penny Duckham

Executive
Director, Media
Fellowships
Program



Women Were a Critical Part of the ACA Debate

The White House Blog
Health Insurance Reform as a Women's Issue: The First Lady's Take

Comprehensive Health Care Reform: An Essential Prescription for Women
 A Report by the Joint Economic Committee
 Representative Carolyn B. Maloney, Chair
 Senator Charles E. Schumer, Vice Chair

Women of Color United for Health Reform

AARP.org
AARP on What Health Reform Means for Women

WOMEN'S HEALTH MATTERS. PLANNED PARENTHOOD

BEING A WOMAN IS NOT A PRE-EXISTING CONDITION
 NATIONAL WOMEN'S LAW CENTER

What's Wrong with ObamaCare?

March of Dimes Calls for Health Coverage for Women of Childbearing Age and Children

eliminating racism empowering women
ywca
 Join YWCA to tell Congress that now is the time to pass comprehensive healthcare reform.

AMA president says pregnant women are barred from buying individual health policies

ROADBLOCKS TO HEALTH CARE: Why the Current Health Care System *does not* work for Women

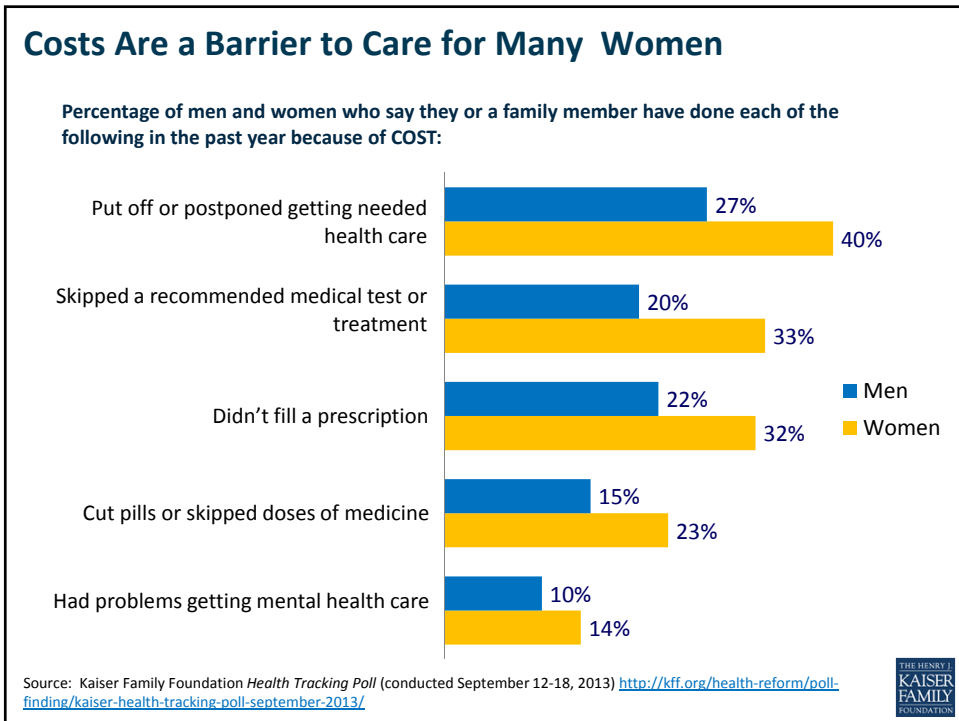
Health Reform in America - You can make a difference!

March of Dimes
 Saving babies, together.

Health Care: A Basic Right

Mom Bloggers CLUB

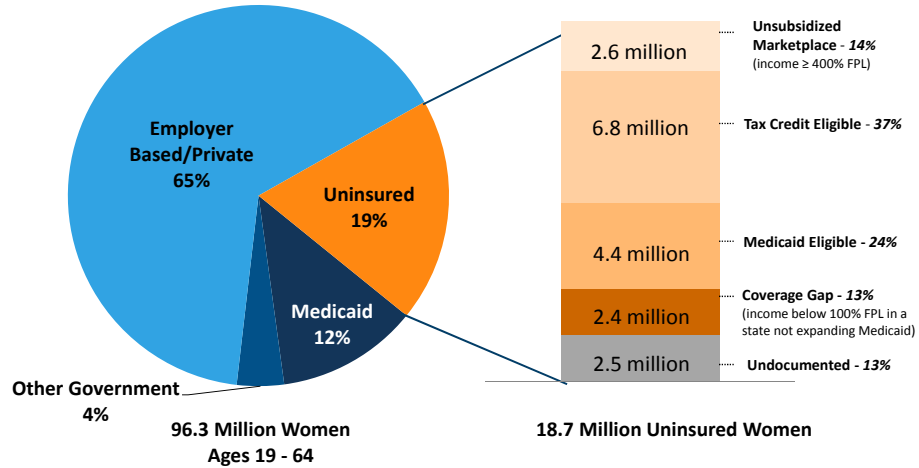
THE HENRY J. KAISER FAMILY FOUNDATION



Millions of Uninsured Women Could Gain Access to Affordable Coverage, but Many Are in the Gap

Insurance Coverage of Women in the U.S., 2011-2012

Eligibility for Coverage

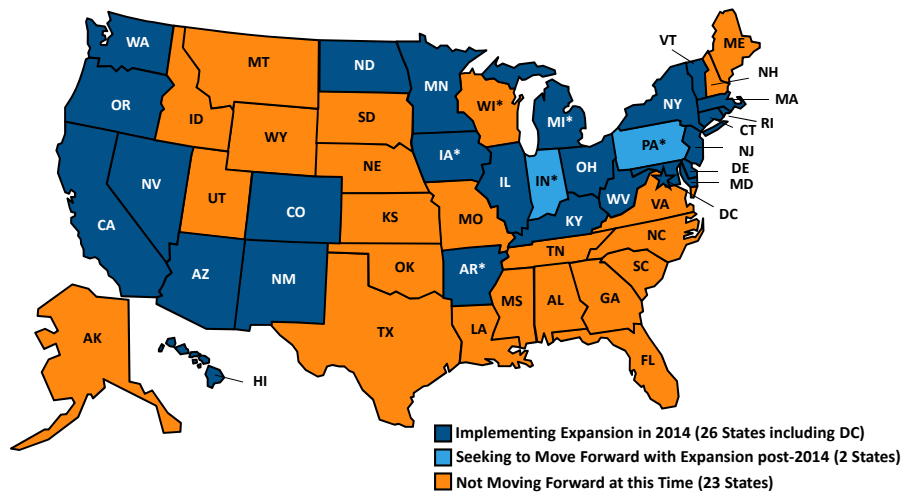


NOTE: Undocumented refers to those who are not legally authorized in the U.S. Medicaid Eligible includes women eligible for Medicaid in all states. Percentage may not add up to 100% due to rounding.

SOURCE: Kaiser Family Foundation analysis based on 2014 Medicaid eligibility levels and 2012-2013 Current Population Survey, U.S. Bureau of the Census.



Impact of the Supreme Court Ruling: Half of states will not be expanding Medicaid in 2014



SOURCES: State decisions on the Medicaid expansion as of December 11, 2013. Based on data from CMS, available at: <http://medicaid.gov/AffordableCareAct/Medicaid-Moving-Forward-2014/Medicaid-and-CHIP-Eligibility-Levels/medicaid-chip-eligibility-levels.html>. Data have been updated to reflect more recent activity.



The ACA Makes Many Insurance Reforms Affecting Women

Before ACA	After ACA
<ul style="list-style-type: none"> • No uniform national policy regarding dependent coverage age limits 	<ul style="list-style-type: none"> • Dependent coverage extended to age 26, Uninsured rate for women 19-25 fell from 30% in 2009 to 25% in 2012
<ul style="list-style-type: none"> • Pregnancy and history of domestic violence could be considered pre-existing conditions 	<ul style="list-style-type: none"> • No pre-existing condition exclusions
<ul style="list-style-type: none"> • Individual insurance plans could charge higher premiums to women. Many did. 	<ul style="list-style-type: none"> • Plans are no longer permitted to use gender to determine premiums: gender-rating banned
<ul style="list-style-type: none"> • Individual insurance plans typically excluded maternity care, considered pregnancy a “pre-ex”, or required costly riders for coverage. Only employer plans required to cover maternity care. 	<ul style="list-style-type: none"> • Individually purchased plans and employer-based plans include maternity care
<ul style="list-style-type: none"> • Plans were not required to cover preventive services without cost sharing. 	<ul style="list-style-type: none"> • ALL new plans must cover recommended preventive services without cost-sharing.

Source: Kaiser Family Foundation, [Health Reform: Implications for Women’s Access to Coverage and Care](#), 2013.



ACA requires all “new” private plans to cover preventive services

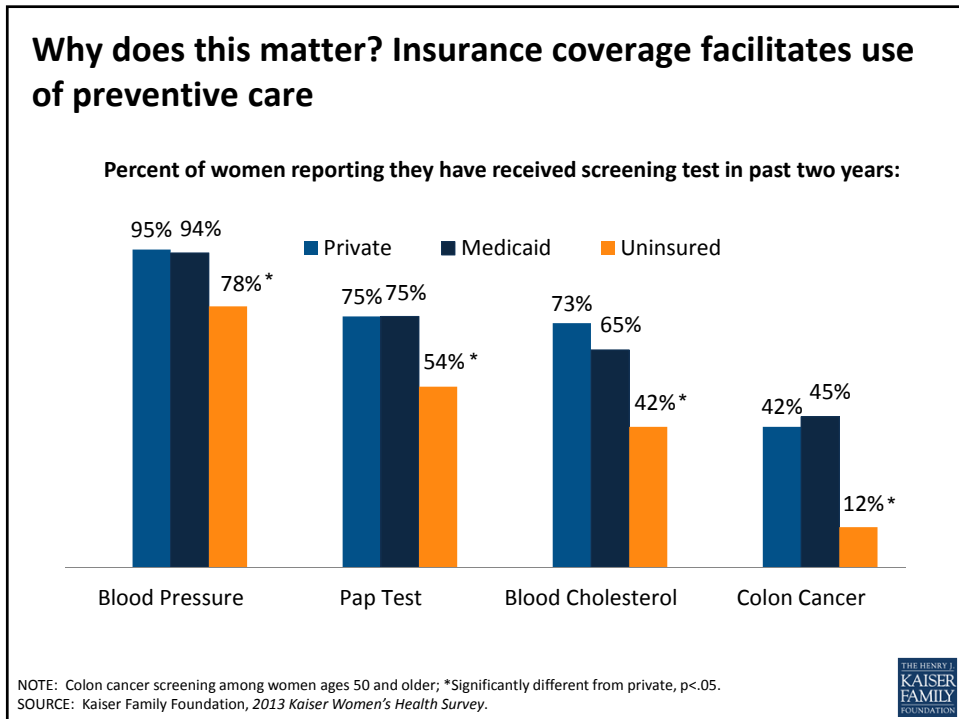
- Includes:
 - Self-insured employer plans (ERISA plans)
 - Individual insurance plans (plans purchased by individuals)
 - Small and Large group plans (plans employers buy for workers)
 - Plans that are “grandfathered” are exempt
- Requirement also applies to plans that are available in the state Marketplaces because preventive services are considered an Essential Health Benefit



Adult Preventive Services to be Covered by Private Plans Without Cost Sharing

Cancer	Chronic Conditions	Vaccines	Healthy Behaviors	Pregnancy	Reproductive and Sexual Health
<ul style="list-style-type: none"> ✓ Breast Cancer - Mammography for women 40+* - Genetic (BRCA) screening and counseling - Preventive medication ✓ Cervical Cancer - Pap testing (women 21+) - High-risk HPV DNA testing † ✓ Colorectal Cancer - One of following: fecal occult blood testing, colonoscopy, sigmoidoscopy 	<ul style="list-style-type: none"> ✓ Cardiovascular health - Hypertension screening - Lipid disorders screenings - Aspirin ✓ Type 2 Diabetes screening (adults w/ elevated blood pressure) ✓ Depression screening (adults, when follow up supports available) ✓ Osteoporosis screening (all women 65+, women 60+ at high risk) ✓ Obesity Screening (all adults) Counseling and behavioral interventions (obese adults) 	<ul style="list-style-type: none"> ✓ Td booster, Tdap ✓ MMR ✓ Meningococcal ✓ Hepatitis A, B ✓ Pneumococcal ✓ Zoster ✓ Influenza, ✓ Varicella ✓ HPV (women and men 19-26) 	<ul style="list-style-type: none"> ✓ Alcohol misuse screening and counseling (all adults) ✓ Diet counseling (adults w/high cholesterol, CVD risk factors, diet-related chronic disease) ✓ Tobacco counseling and cessation interventions (all adults) ✓ Interpersonal and domestic violence screening and counseling (women 18-64) ‡ ✓ Well-woman visits (women 18-64) ‡ 	<ul style="list-style-type: none"> ✓ Tobacco and cessation interventions ✓ Alcohol misuse screening/counseling ✓ Rh incompatibility screening ✓ Gestational diabetes screenings † - 24-28 weeks gestation - First prenatal visit (women at high risk for diabetes) ✓ Screenings - Hepatitis B - Chlamydia (<24, hi risk) - Gonorrhea - Syphilis - Bacteriurea ✓ Folic acid supplements (women w/repro capacity) ✓ Iron deficiency anemia screening ✓ Breastfeeding supports, counseling, consultations and equipment rental † 	<ul style="list-style-type: none"> ✓ STI and HIV counseling (adults at high risk; all sexually-active women †) ✓ Screenings: - Chlamydia (sexually active women ≤24y/o, older women at high risk) - Gonorrhea (sexually active women at high risk) - Syphilis (adults at high risk) - HIV (adults at high risk; all sexually active women †) ✓ Contraception (women w/repro capacity) † - All FDA approved methods as prescribed, - Sterilization procedures - Patient education and counseling

SOURCE: U.S. DHHS, "Recommended Preventive Services." Available at <http://www.healthcare.gov/center/regulations/prevention/recommendations.html>. More information about each of the services in this table, including details on periodicity, risk factors, and specific test and procedures are available at the following websites:
 USPSTF: <http://www.uspreventiveservicestaskforce.org/recommendations.htm>
 ACIP: <http://www.cdc.gov/vaccines/pubs/acip-list.htm#comp>; HRSA Women's Preventive Services: <http://www.hrsa.gov/womensguidelines/>



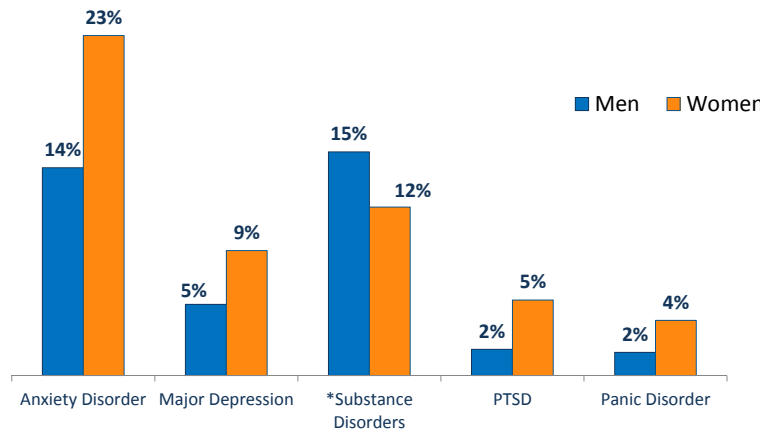
ACA makes important reforms to improve availability of maternity care

- Pregnancy no longer a pre-existing condition
- Maternity and newborn care are essential health benefits
- Prenatal care and recommended screening services, breastfeeding support now covered without cost-sharing
- Medicaid – Pays for nearly half of U.S. births
 - Mandatory coverage of tobacco cessation programs for pregnant women
 - Optional coverage for freestanding birth centers
 - Medicaid coverage for all newborns who lack acceptable coverage
- Workplace breastfeeding protections for nursing mothers
 - Breaks and private area to express milk



ACA’s mental health coverage benefit helps women who have historically lacked coverage for many conditions

12 month prevalence of disorders by sex:



NOTE: *Substance Disorders includes nicotine addiction.
 SOURCE: Comorbidity Survey Replication, updated 2012. *Journal of the American Academy of Child and Adolescent Psychiatry*, March 2009.



ACA expands the preventive services that Medicare Part B will cover without cost-sharing



- ✓ “Welcome to Medicare” preventive visit
- ✓ Yearly “Wellness” visit
- ✓ Abdominal aortic aneurysm screening
- ✓ Alcohol misuse screenings & counseling
- ✓ Bone mass measurements (bone density)
- ✓ Cardiovascular disease screenings
- ✓ Cardiovascular disease (behavioral therapy)
- ✓ Cervical & vaginal cancer screening
- ✓ Colorectal cancer screenings
- ✓ Depression screenings
- ✓ Diabetes screenings and self-management training
- ✓ Glaucoma tests
- ✓ HIV screening
- ✓ Mammograms (screening)
- ✓ Nutrition therapy services
- ✓ Obesity screenings & counseling
- ✓ Sexually transmitted infections screening & counseling
- ✓ Vaccinations: Flu, Hepatitis B, Pneumococcal
- ✓ Tobacco use cessation counseling

Source: <http://www.medicare.gov/coverage/preventive-and-screening-services.html>

FOUNDATION

Focus on Coverage of Contraception and Abortion

THE HENRY
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Contraceptive Coverage: What does it include?

- ACA requires coverage of FDA-approved contraceptive methods “as prescribed” for women with no cost sharing.
- Includes counseling and insertion as well as services related to follow-up and management of side effects, counseling for continued adherence, and device removal
- All new plans and for-profit employers must cover contraceptives
- Exemptions and accommodations for certain religious and affiliated nonprofits



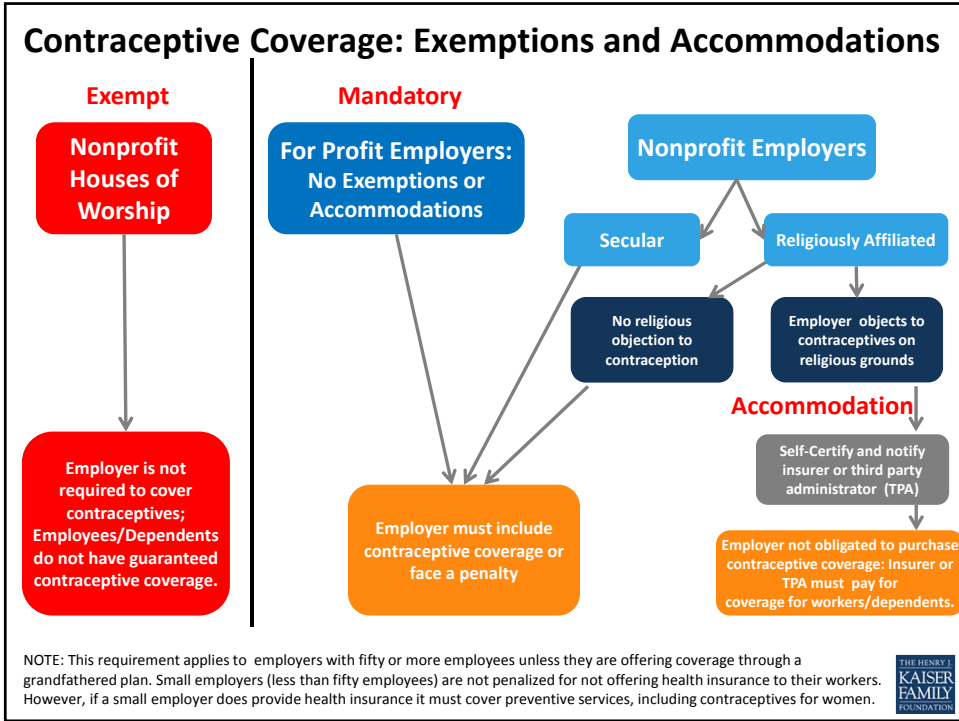
FDA Approved Contraceptive Services and Supplies - Covered without Cost-Sharing

Contraceptive	Costs	
Barrier Methods 	Diaphragm	\$15-\$75
	Sponge	\$9-15
	Cervical Cap	\$60-\$75
	Spermicide	\$8
	Female Condom	\$4
Hormonal Methods 	Oral Contraceptives (Pills)	\$15-\$50
	Birth Control Patch (Ortho Evra)	\$15-\$80
	Birth Control Ring (NuvaRing)	\$15-\$80
	Birth Control Shot (Depo-Provera)	\$35-\$100
Emergency Contraception 	Plan B – One Step, Next Choice, Levonorgestrel	\$35-\$60
	ella	\$55
Implanted Devices 	Intrauterine device – ParaGard, Hormonal IUD- Mirena, Skyla	\$500-\$1000
	Implantable Rods	\$400-\$800
Sterilization for Women	Procedure	\$1500 - \$6000

NOTE: A woman’s reproductive life spans approximately 30 years.

SOURCE: Planned Parenthood, Birth Control, <http://www.plannedparenthood.org/health-topics/birth-control-4211.htm>.





Do for-profit corporations have religious rights? Supreme Court - Oral Argument 3/25/14

Case	Plaintiff	Claim
<p>Hobby Lobby, Inc. v. Sebelius</p> 	<p>Green family, Protestants of Oklahoma, own Hobby Lobby, a national chain of craft stores with over 500 stores in over 41 states and over 13,000 employees</p>	<p>Greens object to providing health insurance coverage for Ella, Plan B, and IUDs because it is against their religious beliefs and the requirement violates the Religious Freedom Restoration Act (RFRA) and the First Amendment</p>
<p>Conestoga Wood Specialties Corp. v. Sebelius</p> 	<p>Hahn family, Mennonites of Pennsylvania, own Conestoga Woods Specialties which manufactures wood cabinets and has 950 full time employees.</p>	<p>Hahns object to providing health insurance coverage for Plan B and Ella because it is against their religious beliefs and the requirement violates RFRA and the First Amendment</p>

SOURCE: Kaiser Family Foundation, *A Guide to the Supreme Court's Review of the Contraceptive Coverage Requirement*, Dec. 2013



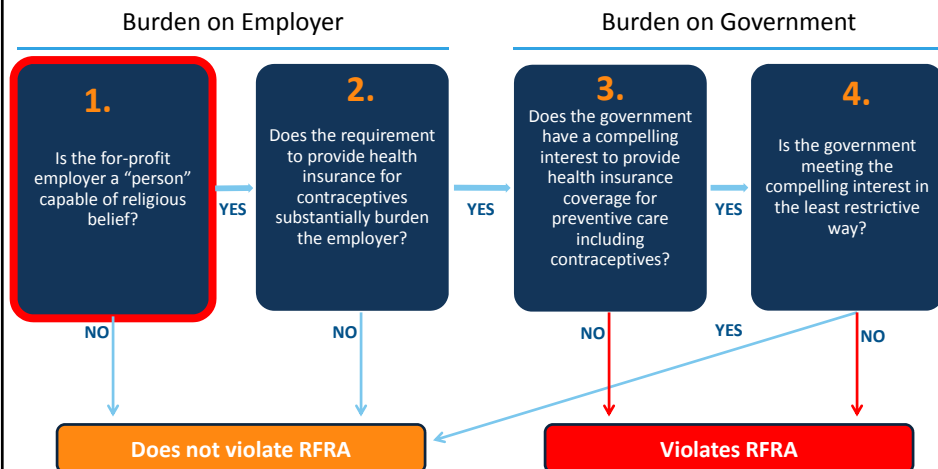
Religious Freedom Restoration Act of 1993

The Religious Freedom Restoration Act of 1993 (RFRA) provides that the government “**shall not substantially burden a person’s exercise of religion**” unless that burden is the **least restrictive means** to further a **compelling governmental interest**.

<http://www.law.cornell.edu/uscode/text/42/chapter-21B>



What the Supreme Court Must Consider



SOURCE: Kaiser Family Foundation, *A Guide to the Supreme Court’s Review of the Contraceptive Coverage Requirement*, Dec. 2013



Broader Ramifications of the Decision Beyond Health Care:

A decision in favor of granting for profit corporations religious rights could have far-reaching consequences:

- Some business owners may have religious beliefs that conflict with various aspects of health care, including: blood transfusions, vaccinations, infertility treatments, psychiatry treatment and drugs, and health insurance all together.
- Employers could ask to “opt out” of civil rights laws including:
 - Laws meant to protect people from employment and housing discrimination based on race, gender, religion, national origin, or pregnancy.

SOURCE: Kaiser Family Foundation, *A Guide to the Supreme Court’s Review of the Contraceptive Coverage Requirement*, Dec. 2013

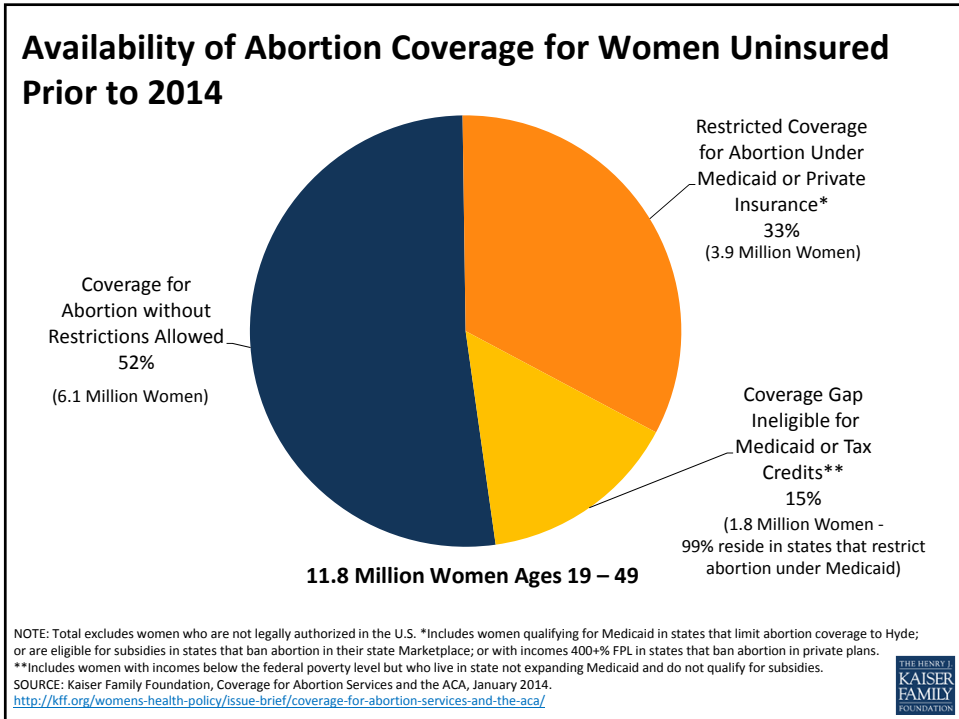
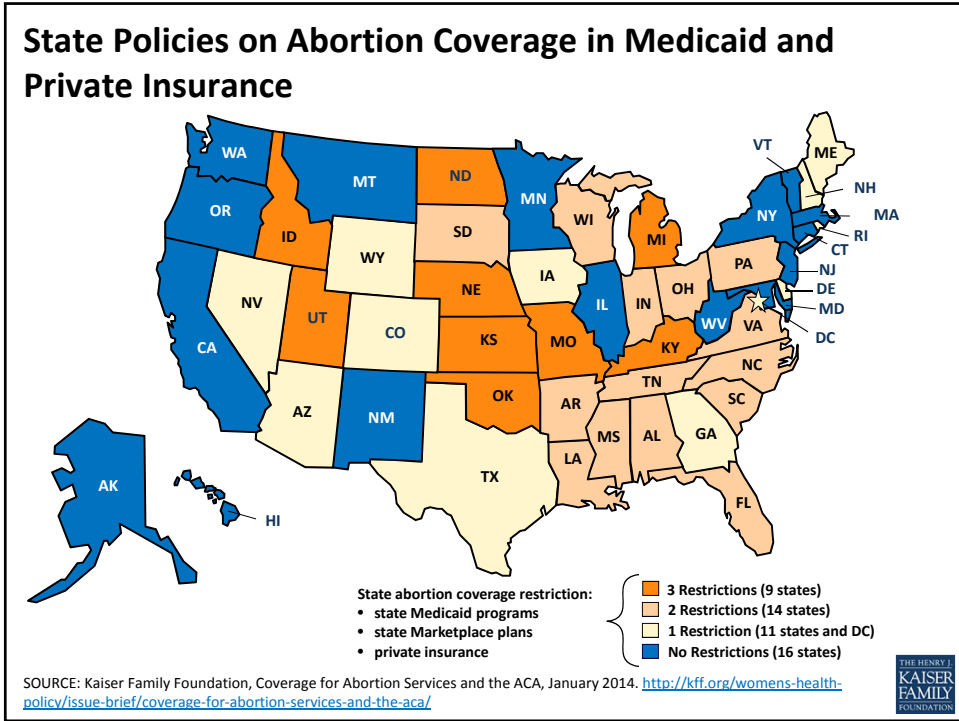


ACA and Abortion Coverage

- **Abortion explicitly banned as an essential health benefit**
- **State policy also shapes coverage**
 - **Medicaid:**
 - The Hyde Amendment limits the use of federal funds (including tax credits and subsidies) to abortion coverage only in the cases of rape, incest, life endangerment
 - **State Marketplaces and Private Insurance:**
 - States can ban abortion coverage in Marketplaces; 24 states have done so
 - 9 states have either banned or restricted abortion coverage in plans sold by private insurers in the state (beyond the State Marketplace)

SOURCE: Patient Protection and Affordable Care Act , Section 1334.





Women's Health and ACA: Key Issues and Dates

✓ Enrollment:

- ✓ Women comprise 54% of early Marketplace enrollees. Women's role in promoting enrollment to families and young adults is key

✓ Coverage Gap

- ✓ 2.4 million women in coverage gap

✓ Preventive Services

- ✓ Implementation will be key

✓ Reproductive Services

- ✓ Contraceptive coverage: Supreme Court oral arguments on Hobby Lobby and Conestoga Wood Specialties will be on March 25th, 2014, with an expected decision in June 2014
- ✓ Abortion coverage rules still in play in state and federal arena



Women's Health Resources from The Kaiser Family Foundation

- The Kaiser Family Foundation, [Women's Health Policy](#)
- [FAQ's about Women's Health and the ACA](#)
- [A Guide to the Supreme Court's Review of the Contraceptive Coverage Requirement](#)
- [Coverage for Abortion Services and the ACA](#)
- [Health Reform: Implications for Women's Access to Coverage and Care](#)
- Fact Sheet: [Women's Health Insurance Coverage](#)
- [Medicaid's Role for Women Across the Lifespan: Current Issues and the Impact of the Affordable Care Act](#)



Women's Health on kff.org

Issue Brief: Coverage for Abortion Services and the ACA

Read Issue Brief

Category	Percentage
Abortion Coverage Without Limitations	52%
Abortion Coverage Only Under Limited Circumstances	33%
Insurance Coverage Gap	15%

CURRENT ISSUES

As states implement the Affordable Care Act, it will be critical to consider coverage, affordability and access issues that are important for women.

- Health Reform: Implications for Women's Access to Coverage and Care
- State Coverage of Preventive Services for Women under Medicaid: Findings from a State-Level Survey
- Checklist: Key Issues for Women in ACA Health Insurance Exchanges

A Guide to the Supreme Court and the ACA's Contraception Coverage Requirement

Read Issue Brief

KAISER HEALTH NEWS

- U.S. Abortion Rate Drops, But Not For The Reasons You Might Think
- First Edition: February 3, 2014
- State Highlights: Va. Senate Panel Backs Mental Health Bill

See More

INTERACTIVES

Data: Compare women's health and access across states.

View State-Level Data

FAQs about Women's Health and the ACA

Learn More

kff.org/womens-health-policy/

KFF Resources on **Insurance Coverage for Women**

- Health Reform: Implications for Women's Access to Coverage and Care
- Fact Sheet: Women's Health Insurance Coverage
- Health Insurance Coverage of Women, State Estimates
- Medicaid's Role for Women Across the Lifespan: Current Issues and the Impact of the Affordable Care Act
- Preventive Services Covered by Private Health Plans under the Affordable Care Act

Search for "women's health" on kff.org



KFF Resources on **Contraception and Abortion**

- A Guide to the Supreme Court’s Review of the Contraceptive Coverage Requirement
- Coverage for Abortion Services and the ACA
- Fact Sheet: Emergency Contraception
- State Health Facts: Abortion Statistics and Policies

Search for “contraceptive” or “abortion” on kff.org



State-by-State Data on Women’s Health

Search State Health Facts:

Choose Category - or - Choose Location

- > Demographics and the Economy
- > Health Costs & Budgets
- > Health Coverage & Uninsured
- > Health Insurance & Managed Care
- > Health Reform
- > Health Status
- > HIV/AIDS
- > Medicaid & CHIP
- > Medicare
- > Minority Health
- > Providers & Service Use
- > Women's Health



www.kff.org/statedata/



KFF's Frequently Asked Questions (FAQs) on the ACA

Search FAQs by typing a search term or click on a section heading (not pictured)

Frequently Asked Questions About Health Reform

To search Frequently Asked Questions about Health Reform, enter your search terms in the box to the right.

While we have made every effort to provide accurate information in these FAQs, people should contact the Marketplace or Medicaid agency in their state for guidance on their specific circumstances.

The Kaiser Family Foundation appreciates help received from staff at the Center on Budget and Policy Priorities and the Georgetown University Center on Health Insurance Reforms in answering these frequently asked questions.

For additional resources to answer consumer questions, see www.healthreformbeyondthebasics.org

[Back to top](#)

Women

Clear Search Terms

- * What services do plans have to cover for pregnant women?
- * Are there any preventive services for women specifically?
- * I'm low income and enrolled in subsidized Marketplace coverage now. I just found out I'm pregnant. Under my state's rules, I now qualify for Medicaid. Do I have to drop out of the Marketplace coverage and enroll in Medicaid? If I don't will I have to pay back the premium tax credit subsidy?

Special rules apply for women in this situation, depending on where they live. In general, Medicaid is considered to be "minimum essential coverage," and you are not eligible for premium tax credits when you are eligible for other minimum essential coverage. However, States have the option of limiting Medicaid covered benefits just to pregnancy-related services for women who are eligible for Medicaid because they are pregnant. In states that elect to limit coverage in this way, Medicaid coverage for pregnant women is not considered "minimum essential coverage."

If you are pregnant and eligible for limited Medicaid coverage, you don't have to drop your Marketplace coverage. You remain eligible for Marketplace coverage and subsidies and if you stay enrolled, you would not have to pay back the advance payments you receive while you are pregnant.

If you do decide to enroll in limited Medicaid coverage for pregnant women, at least in 2014, you will not be subject to a penalty for not having coverage even though the pregnant women coverage is not considered minimum essential coverage.

kff.org/health-reform/faq/health-reform-frequently-asked-questions/



KFF Resources on ACA and Low- to Moderate-Income Adults

- The Coverage Gap: Uninsured Poor Adults in States that Do Not Expand Medicaid
- State Estimates for People Eligible for Tax Credits In Marketplace

kff.org/health-reform/



KFF Resources on **Exchanges / Marketplaces**

- (NEW) Marketplace Enrollment as a Share of the Marketplace Eligible Population
- State Marketplace Statistics
- Explaining Health Care Reform: Questions About Health Insurance Exchanges
- State Decisions For Creating Health Insurance Exchanges

[Search for “marketplaces” on kff.org](#)



KFF Resources on **Tax Credits & Premiums**

- Quantifying Tax Credits for People Now Buying Insurance on Their Own
- Explaining Health Care Reform: Questions About Health Insurance Subsidies
- Why Premiums Will Change for People Who Now Have Nongroup Insurance

[Search for “tax credit” on kff.org](#)



KFF Resources on Insurance Market Reforms

The “Health Insurance Market Reforms” series covers:

- Pre-Existing Condition Exclusions
- Guaranteed Issue
- Rate Restrictions
- Rate Review

Search for “Health Insurance Market Reforms” at kff.org



Feature Our Resources on Your Site For Free

Health Reform Subsidy Calculator

Subsidy Calculator
Premium Assistance for Coverage in Exchanges

ABOUT THIS TOOL

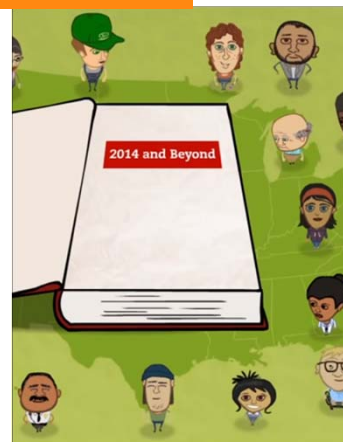
This tool was developed by the Kaiser Family Foundation to illustrate health insurance on premiums and subsidies for people purchasing insurance on their own in new health insurance exchanges (or “Marketplaces”) created by the Affordable Care Act (ACA). You can enter different incomes, ages, and family sizes to get an estimate of your eligibility for subsidies and how much you could spend on health insurance. For more information on methodology and to read answers to frequently asked questions, click here.

Enter Information About Your Household

1. Enter annual income (dollars)
2. Is employer coverage available? No
3. Number of people in family
4. Number of adults (21 and older) enrolling in exchange coverage
5. Number of children (20 and younger) enrolling in exchange coverage No Children

kff.org/interactive/subsidy-calculator

Animated Video



kff.org/youtoons-obamacare-video

kff.org/aca-consumer-resources



KFF Resources for Consumers on the ACA

FAQS

Frequently Asked Questions About Health Reform

Have a question about health reform? See if you can find what you're looking for on our list of Frequently Asked Questions.

[Go to FAQs](#)

INFOGRAPHIC

Premium Subsidy Scenarios Under Obamacare

PREMIUM SUBSIDY SCENARIOS UNDER OBAMACARE



This infographic shows 3 scenarios that illustrate the cost of health insurance under the Affordable Care Act for families in different circumstances, both before and after premium subsidies (in the form of a tax credit).

[See infographic](#)

OBAMACARE & YOU

Obamacare and You is a series of one-page papers explaining how the Affordable Care Act, also known as "Obamacare," will affect different groups of people. Click on the links below to learn more:

- > [If You Are Uninsured](#)
- > [If You Are Low-Income and May Qualify for Medicaid](#)
- > [If You Have a Pre-Existing Condition](#)
- > [If You Buy Coverage in the Individual Market](#)
- > [If You Have Job-Based Coverage](#)
- > [If You Have Medicare](#)
- > [If You Are A Woman](#)

If you are living with HIV, more information on how the ACA affects you is available on our [HIV consumer web portal](#), presented as part of [Greater Than AIDS](#).

FLOWCHART

How to Get Coverage in 2014

HEALTH COVERAGE UNDER THE AFFORDABLE CARE ACT

How to Get Coverage Beginning in 2014



Follow the lines on this flowchart to see what kinds of healthcare you qualify for starting in 2014.

[See Flowchart](#)

QUIZ

Health Reform Quiz

Test your knowledge of the Affordable Care Act with our 10-question quiz!

[Take the Quiz](#)

kff.org/aca-consumer-resources



KFF Resources in Spanish

- "Los YouToons Se Preparan Para Obamacare" (Video)
- **Obamacare y Usted**
 - Seven fact sheets on how the ACA affects people if they:
 - Have Medicare
 - Qualify for Medicaid
 - Have coverage through their employers
 - Are uninsured
 - Have pre-existing conditions
 - Are a woman
 - Buy coverage in the individual market
- **Calculadora de subsidios**



kff.org/cuidado-de-salud-recursos-para-los-consumidores/



Contact Information

Rakesh Singh, Vice President of Communications
Kaiser Family Foundation | Menlo Park, Calif.
Email: RSingh@KFF.org

Victoria Chao, Communications Associate
Kaiser Family Foundation | Menlo Park, Calif.
Email: VChao@KFF.org



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Emails: kff.org/email

