

# Women's Health and Health Reform

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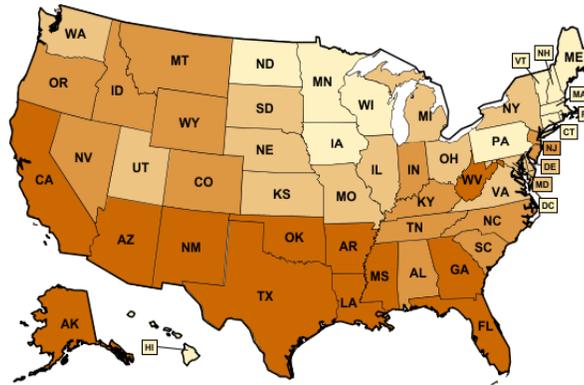
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## Challenges for HC system

- Women live longer than men, but live with higher levels of disability than men. Older women (over 85 years old) are the fastest growing segment of our population. Women's life beyond age 50 now extends for a significant period of time and is increasing.
- More than 21 million women are uninsured and millions more underinsured (45% of women in 2007), and women typically have higher out-of-pocket health care costs.
- Women are 40% more likely to live in poverty than men. 14.1 million women are poor, and 5.8 million families, 62% of them headed by women, are poor.
- Women are more likely to be the caregiver in the family, responsible not only for their own health, but also for the health of loved ones. Caregiving can create major psychological, physical and financial strain.

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## Distribution of Nonelderly Uninsured Women, 2007-2008



Health Insurance Coverage of Women 19-64, states (2007-2008), U.S. (2008): Uninsured

Source: Kaiser Family Foundati

 [statehealthfacts.org](http://statehealthfacts.org)

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## Women have different health care needs than men

- Over the course of their lifetimes, due in part to their reproductive health needs, women use – and need – the health care system more than their male peers.
- More women than men suffer from chronic conditions, such as diabetes, asthma, or hypertension, which require ongoing care.
- Fifty-six percent of women rely on a prescription drug on a regular basis, compared to 42% of men.
- One in four women report that they have been diagnosed with depression or anxiety, over twice the rate for men.

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## WOMEN'S HEALTH AND HEALTH CARE REFORM



The Economic Burden of Disease in Women

The Jacobs Institute of Women's Health  
The George Washington University School of Public Health and Health Services



As cost became part of the health care reform debate, it was important to make a scientific, data-driven case for:

- a comprehensive standard of health for American women
- affordable and stable coverage that:
  - enable women to attain good health in childhood and adolescence;
  - maintain good health during reproductive years; and
  - age well.

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### ***This analysis shows that in 2009:***

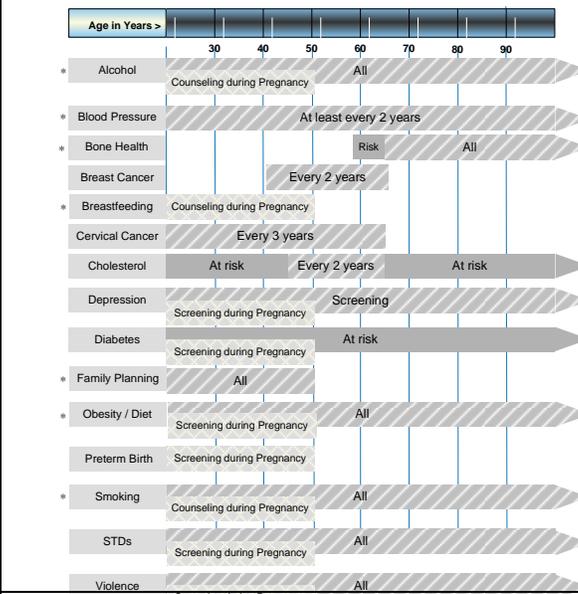
- The direct costs of *cardiovascular disease*, which affects 43 million U.S. women, are estimated at \$162 billion a year.
- Direct and indirect costs of *depression* for both women and men are estimated at over \$100 billion, with direct medical costs for depression in women alone estimated to be over \$20 billion.
- The direct medical costs of *diabetes* in women are estimated at over \$58 billion.
- The direct costs of *breast cancer* are estimated at \$9.1 billion.
- Best opportunity to provide primary preventive care and to reduce the burden of chronic diseases occur during reproductive years.

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Table 1: Economic Burden of Disease Men and Women (Billion 2009 U.S. Dollars)					
	Men and Women <sup>a</sup>			Women only	CMS 2009 women's health allocation <sup>f</sup>
	Direct Costs	Indirect Costs	Total	Direct Costs	
Smoking <sup>b</sup>	96.6	104.3	200.9	46.1 <sup>d</sup>	
Obesity <sup>c</sup>	114.1			57.2 <sup>d</sup>	
CVD	313.8	161.5	475.3	166.4 <sup>d</sup>	33.7
Depression	32.0	70.2	102.3	15.4	4.4
Mental Disorders <sup>e</sup>	169.5	39.7	209.2	84.7 <sup>d,g</sup>	4.4
Diabetes	118.7	59.4	178.1	58.6 <sup>d</sup>	4.8
Osteoporosis				13.9	
COPD	23.7	18.5	42.2	14.9 <sup>d</sup>	5.1
Breast Cancer	9.1			9.1	0.8
Cervical Cancer				0.34-0.45	
IPV				4.7	
STIs (excluding HIV)	0.1			0.04 <sup>g</sup>	
HIV/AIDS	0.1			0.02	

a) References for economic burden of disease can be found in the main document  
b) Economic costs of smoking include a share of CVD, Diabetes, and COPD costs.  
c) Economic costs of obesity include a share CVD and Diabetes costs.  
d) Direct costs are estimated using the share of women who suffer from the condition (or health behavior).  
e) Mental Disorders includes depression.  
f) Source: Department of Health and Human Services: Women's Health Moyer Table (2009)  
g) due to the lack of gender specific prevalence data this estimate is calculated on the basis of 50% share of burden of disease for women

Figure 1: Preventative Screening and Counseling Services for Women



Source: United States Preventive Services Task Force (<http://www.ahrq.gov/clinic/pocketgd08/pocketgd08.pdf>) , and HHS, Office of Women's Health (<http://www.womenshealth.gov/screeningcharts/general/general.pdf>)  
\* Counseling

## Wellness and Prevention in the ACA

- Recommended preventive care fully covered with no co-pays and deductibles
- Women's Health Preventive Services (IOM Report July 2011)
- Annual wellness exam in Medicare
- Sustained funding for prevention and public health
- Calorie information on restaurant menus

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## Essential Health Benefits

- • Ambulatory patient services
- • Pediatric services, including oral and vision care
- • Emergency services
- • Prescription drugs
- • Hospitalization
- • Preventive and wellness services and chronic disease management without copay or deductible
- • Laboratory services
- • Maternity and newborn care
- • Rehabilitative and habilitative services and devices
- • Mental health and substance use disorder services, including behavioral health treatment

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***Senator Barbara Mikulski, (D-MD) offered a Women's Health Amendment which was adopted and includes:***

- *Coverage by group and individual plans for basic women's preventive care and screenings such as mammograms and Pap smears and*
- *Services provided by community health centers and women's clinics.*
- *Direct HRSA and HHS to develop a list of preventive services for women to be included in addition to the USPSTF list.*

## Preventive Services for Women

- U.S. Preventive Services Task Force charged with making recommendations for men, women, and children
- The USPSTF list includes many services for women, but does not include several key services for women

## IOM Definition of Preventive Service

For the purposes of this study, the Committee on Preventive Services for Women defines preventive health services to be measures—including medications, procedures, devices, tests, education, and counseling—shown to improve wellbeing and/or decrease the likelihood or delay the onset of a targeted disease or condition.

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Service	Recommendation
Screening for gestational diabetes	Pregnant women between 24 and 28 weeks of gestation and at first prenatal visit for high risk pregnant women
HPV Testing	Add high-risk HPV DNA testing to cytology testing in women with normal results. Every 3 yrs after 30
Counseling for STIs	Annual counseling on STIs for sexually active women
Counseling and screening for HIV	Counseling and screening HIV annually for sexually active women
Contraceptive Methods and Counseling	FDA-approved contraceptive methods, sterilization procedures, and patient education and counseling for women with reproductive capacity
Breastfeeding support, supplies, and counseling	Comprehensive lactation support and counseling and costs of renting breastfeeding equipment.
Screening and counseling for Interpersonal and domestic violence	Screening and counseling for interpersonal and domestic violence
Well-women visits	At least one well-woman preventive care visit annually for adult women to obtain recommended preventive services, including preconception and prenatal care

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### Women's Preventive Health Services

As of August 1st 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

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## Ongoing Activities

- Implementation of the Mikulski Women's Health Amendment
- State response to Essential Benefit plan guidance
- States working on responding to ACA – developing exchanges

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# Resources for Women's Health and Health Reform



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## Key Questions

### [Key Questions for State Exchange Implementation](#)

These resources are organized by five strategic questions state actors should consider when designing and implementing their state insurance exchanges to ensure that the state is best informed of its role in facilitating access to care and insurance affordability for women.

1. Does the state exchange offer insurance products that cover the comprehensive range of health services important to women across the lifespan (e.g., prevention, reproductive care, mental health, chronic illnesses, and other care)?
2. How will the state ensure that the range of providers in Exchange plans is broad enough to meet the wide range of women's health needs?
3. How will the state inform women about the scope of benefits, out-of-pocket charges, and exemptions?
4. How will the impact of improvements in coverage, affordability and access to health care be assessed for women and other subpopulations?
5. Will women be able to find affordable and continuous health care coverage under the state's health exchange?

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# Key Questions

- ▶ **Briefings**
  - Roundtable Discussion on Women's Health
  - Hormone Therapy and Communication
  - Abnormal Uterine Bleeding
  - New Directions in Women's Health
  - Heart Disease
  - Depression and Pregnancy
  - More...
- ▶ **Projects**
  - HPV Vaccine: Recommendation or Mandate?
  - Women's Health Data Book
  - State Profiles
  - More...
- ▶ **Home**

**1. Does the state exchange offer insurance products that cover the comprehensive range of health services important to women across the lifespan (e.g., prevention, reproductive care, mental health, chronic illnesses, and other care)?**

Supporting Comprehensive Healthcare for Women Makes Dollars, and Sense, September 2012  
<http://www.rand.org/commentary/2012/09/05/RAND.html>

Policy Brief: Insurance Coverage of Contraceptives, October 2012  
[http://www.guttmacher.org/statecenter/spibs/spib\\_ICC.pdf](http://www.guttmacher.org/statecenter/spibs/spib_ICC.pdf)

Contraceptive Coverage "Accommodation" of Religiously-Affiliated Employers, March 2012  
[http://www.nwlc.org/sites/default/files/pdfs/faq\\_contraceptive\\_coverage\\_accommodation\\_032212\\_final.pdf](http://www.nwlc.org/sites/default/files/pdfs/faq_contraceptive_coverage_accommodation_032212_final.pdf)

Fact Sheet: Covering Prescription Contraceptives in Employee Health Plans: How This Coverage Saves Money, February 2012  
[http://www.nwlc.org/sites/default/files/pdfs/contraceptive\\_coverage\\_saves\\_money\\_fact\\_sheet.pdf](http://www.nwlc.org/sites/default/files/pdfs/contraceptive_coverage_saves_money_fact_sheet.pdf)

Fact Sheet: Preventive Services Covered by Private Health Plans under the ACA, September 2011  
<http://www.kff.org/healthreform/upload/8219.pdf>

# Checklist

<ul style="list-style-type: none"> <li>▶ <b>Major Initiatives</b> <ul style="list-style-type: none"> <li>The Health of Incarcerated Women</li> <li>Expecting Something Better: A Conference to Optimize Maternal Health Care</li> <li>Cardiovascular Disease</li> <li>Managed Care</li> <li>Quality of Care</li> <li>Health Disparities</li> <li>More...</li> </ul> </li> <li>▶ <b>Briefings</b> <ul style="list-style-type: none"> <li>Roundtable Discussion on Women's Health</li> <li>Hormone Therapy and Communication</li> <li>Abnormal Uterine Bleeding</li> <li>New Directions in Women's Health</li> <li>Heart Disease</li> <li>Depression and Pregnancy</li> <li>More...</li> </ul> </li> </ul>	<p>Women's Health &amp; Policy Updates &gt; Checklist Resources</p> <p><b>Designing State Exchanges To Meet the Health Needs of Women: Checklist of Issues for States to Consider</b></p> <p>Women's health, a major determinant of our nation's health and the health of future generations, is central to the planning and design of our nation's health care system under national health care reform, which requires states to implement Health Exchanges either alone or in partnership with the federal government. The following checklist and resource guide provides state policymakers, officials, regulators, advocates, providers, and other stakeholders with a tool to guide state's efforts to ensure coverage, affordability, and access to health care for women as they design and implement their health care exchanges.</p> <p><b>A. Essential Health Benefits</b></p> <p>Questions to consider:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> How will the state implement the Essential Health Benefit (EHB) provisions?</li> <li><input type="checkbox"/> Does the state exchange offer insurance products that cover the comprehensive range of health services important to women across the lifespan (e.g., prevention, reproductive care, mental health, chronic illnesses, and other care)?</li> <li><input type="checkbox"/> How will your state evaluate if EHB benchmark plans meet the needs of women?</li> </ul>
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# Topic Areas

## Resources by Topic Areas

The resources listed here are organized by a range of topics included in the Patient Protection and Affordable Care Act that affect women throughout the entire range of their lifetimes. They include:

- Overview of Women's Health in the Affordable Care Act,
- Implementation of Women's Health Provisions
- Preventive Care for Women,
- Contraception, Family Planning, and Reproductive Health,
- Insurance Coverage and Affordability of Health Care, and
- Addressing Health Disparities in Women

# Topic Areas

Quality of Care	<b>A. Overview of Women's Health in the Affordable Care Act</b>  What's in the health care law for women? A lot!, October 2012 <a href="http://nwhn.org/newsletter/node/1479">http://nwhn.org/newsletter/node/1479</a>  Fact Sheet: Being a Woman Just Got a Little Easier: How the ACA Benefits Women, July 2012 <a href="http://familiesusa2.org/assets/pdfs/Affordable-Care-Act-Benefits-Women.pdf">http://familiesusa2.org/assets/pdfs/Affordable-Care-Act-Benefits-Women.pdf</a>  Why the ACA Matters for Women: Summary of Key Provisions, July 2012 <a href="http://www.nationalpartnership.org/site/DocServer/SUMMARY.pdf?docID=10001">http://www.nationalpartnership.org/site/DocServer/SUMMARY.pdf?docID=10001</a>  Issue Brief: Impact of Health Reform on Women's Access to Coverage and Care, April 2012 <a href="http://www.kff.org/womenshealth/upload/7987-02.pdf">http://www.kff.org/womenshealth/upload/7987-02.pdf</a>  What Women Are Getting From Health Reform Top Ten List, 2011 <a href="http://www.raisingwomensvoices.net/storage/pdf_files/What%20Women%20Get%20From%20Health%20Reform%208-11%20update.pdf">http://www.raisingwomensvoices.net/storage/pdf_files/What%20Women%20Get%20From%20Health%20Reform%208-11%20update.pdf</a>  Issue Module: Women and Health Care in the United States, September 2011 <a href="http://www.kaiseredu.org/Issue-Modules/Women-and-Health-Care-in-the-United-States/Key-Data.aspx">http://www.kaiseredu.org/Issue-Modules/Women-and-Health-Care-in-the-United-States/Key-Data.aspx</a>
Health Disparities	
More...	
<b>Briefings</b>	
Roundtable Discussion on Women's Health	
Hormone Therapy and Communication	
Abnormal Uterine Bleeding	
New Directions in Women's Health	
Heart Disease	
Depression and Pregnancy	
More...	
<b>Projects</b>	
HPV Vaccine:	

# Source Organizations

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## [Resources by Source Organizations](#)

These resources were created by our partners at:

- The Center for American Progress
- Mary Horrigan Connors Center for Women's Health and Gender Biology, Brigham and Women's Hospital
- Enroll America
- Families USA
- Health Reform GPS
- The Guttmacher Institute
- The Henry J. Kaiser Family Foundation
- The National Academy for State Health Policy
- The National Conference of State Legislatures
- The National Partnership for Women and Families
- The National Women's Health Network
- The National Women's Law Center
- Planned Parenthood
- Raising Women's Voices
- RAND Corporation

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