



March 2011

A National Conference of State Legislatures seminar, “Policy Options to Improve the Health of Women of All Ages,” was held in December 2010 at the NCSL Fall Forum. The seminar featured speakers who covered a range of topics and concluded with a discussion among state legislators and staff about policy options to improve women’s health. With the help of a bipartisan group of policymakers, NCSL developed this list of women’s health policy options. NCSL does not promote particular actions by states. This list of topics and policy ideas is intended to provide background, raise awareness about women’s health, and highlight various options legislators may consider to improve women’s health in their states.

Categories identified are chronic disease management, coverage and access to care, maternal and reproductive health, mental health, and public health and wellness. For more information, visit [www.ncsl.org/?TabId=22117](http://www.ncsl.org/?TabId=22117) or e-mail [health-info@ncsl.org](mailto:health-info@ncsl.org).

Where relevant this document notes provisions of the federal health reform legislation known as the Affordable Care Act (ACA) that relate to listed options.

In addition to the policy options discussed below, legislators can take general steps to improve women’s health in their states.

- Create an office, commission or task force to address women’s health issues.
- Raise awareness about women’s health issues by creating a women’s health week or month.
- Consider supporting institutions and studies that focus on women’s health research.
- Explore ways to use existing state and federal resources aimed at improving women’s health.
- Explore creating a task force or program to specifically address the health of female veterans.

## CHRONIC DISEASE

Chronic diseases—such as heart disease, cancer and stroke—are the leading causes of death in the United States. Thirty-eight percent of women suffer from one or more chronic diseases, compared to 30 percent of men. To address chronic disease in women and to improve their overall health, policymakers may consider specific actions related to cancer, diabetes, heart disease and osteoporosis, or consider the following general measures.

- Create a statewide task force or appoint a coordinator to address chronic disease management for women.
- Develop policies that promote healthy choices and environments and educate the public about their health and prevention of chronic disease.
- Develop policies that educate patients about chronic disease management, including adhering to treatment recommendations made by health care professionals.
- Consider supporting chronic disease research, including research that targets women.
- Evaluate establishing insurance benefit design that encourages healthy lifestyle changes, prevention and adherence to treatment.
- Consider medication therapy management programs to avoid complications and help patients manage their medications.
- Explore policies to encourage smoke-free environments.
- Work with insurers to increase access to smoking cessation services and encourage development of programs that include counseling services and support groups for smoking cessation, especially for pregnant women. (The federal Affordable Care Act requires these services to be provided for pregnant women under Medicaid.)



## CANCER

- **Breast Cancer**—Encourage programs and awareness campaigns to educate women about early detection of breast cancer. Consider support for prevention programs, such as the Center for Disease Control and Prevention's (CDC) National Breast and Cervical Cancer and Early Detection Program, to provide access to preventive screening.
- **Cervical Cancer**—Collaborate with programs to provide screening for cervical cancer and to increase awareness about this topic. Consider the state's role in making the Human Papillomavirus (HPV) vaccine available to those who want it.
- **Colorectal Cancer**—Encourage programs and awareness campaigns to educate women about early detection of colorectal cancer, which is often under- or misdiagnosed in women.
- **Skin Cancer**—Consider policies that require a guardian's written consent for minors to use tanning bed facilities, except when used for medical purposes.

## DIABETES

- Create a voluntary diabetes registry to track prevalence, detect disparities, and target prevention and treatment interventions.
- Create a diabetes task force or coordinator to address the disease and barriers to access in the state.
- Establish programs to educate people with diabetes about self-management to prevent inpatient treatment for serious complications, including other conditions such as heart disease.
- Provide preconception care to women with diabetes or a history of gestational diabetes to promote healthier birth outcomes and reduce complications.
- Work with insurers to develop benefits for diabetes disease management to improve patient quality of care, including detection and treatment of co-occurring conditions.

## COVERAGE AND ACCESS TO CARE

Historically, women have faced challenges accessing and affording health care and, as caregivers, women often are gatekeepers for family health. Initiatives within the Affordable Care Act aim to improve the quality of and access to health insurance coverage for women. In addition, strengthening the health workforce is an important component in improving access to care for women. To address coverage and access to care policymakers may consider actions related to ensuring quality care, insurance coverage and expanding the health workforce.

## ENSURING QUALITY CARE

- Create incentives and/or a pilot program that establishes a medical home for women to provide comprehensive care and improve coordination of care.
- Explore establishing pilot projects for insurance benefit design that reinforce positive health behaviors and treatment adherence.
- Review insurance benefits that specifically affect women—such as maternity coverage—and examine whether modifications are needed. (The ACA calls for defining “essential ben-

## HEART DISEASE

- Create a heart disease task force or coordinator to address the disease and barriers to access in the state.
- Adopt or continue programs supported by the CDC, including the National Heart Disease and Stroke Prevention (HDSP) and/or Well-Integrated Screening and Evaluation for Women Across the Nation (WISEWOMAN).
- Encourage preventive health services, such as blood pressure and cholesterol screening.
- Recognize a day, week or month as “Wear Red” to raise awareness and support women in the fight against heart disease.
- Recognize “Heart Month” and encourage citizens to seek training for CPR and automated-external defibrillator use.
- Consider supporting organizations and programs that increase awareness about heart attack and stroke symptoms, including emphasis on the gender specific signs and symptoms.



## OSTEOPOROSIS

- Promote programs and initiatives to raise public awareness and knowledge about osteoporosis, including risk factors, options for treatment, and the value of prevention and early detection.
- Review options to provide osteoporosis-related diagnostic and treatment services, including bone density measurement, other diagnostic tests and effective medications (e.g., insurance coverage, public programs and private sector initiatives).
- Consider support for programs that include osteoporosis screening, referral, follow-up and patient education for low-income, underinsured and uninsured women.

efits” that will be required in the health insurance exchanges beginning in 2014, with provisions that will directly affect women, including maternity and newborn care, mental health and substance abuse, preventive and wellness services.)

- Review access for women to specific preventive services and options to improve access. (The ACA requires preventive care and screenings for women to be covered as recommended by the U.S. Preventive Services Task Force, the Institute of Medicine, and the Health Resources and Services Administration.)

- Consider creating a third-party, private and/or nonprofit entity to serve as an overarching consumer advocate or ombudsman office to ensure delivery of accessible, high-quality care. (The ACA encourages states to create these entities through grants, and beginning in 2014, the state-based health benefit exchanges will assume this function.)
- Explore options to improve access to quality care for diverse populations, including services tailored to address different cultures, beliefs and languages (referred to as “culturally competent care”).
- Explore options to increase consumer involvement in health purchasing.
- Consider initiatives to increase consumer access to information about quality ratings for doctors and hospitals.

### INSURANCE COVERAGE

- Explore expanding Medicaid for adults and pregnant women. (The ACA includes Medicaid expansion for all individuals with incomes up to 133 percent of the federal poverty guidelines [\$29,726 for a family of 4 in 2011], beginning in 2014.)
- Examine whether your state allows gender rating, under which women are charged higher premiums solely based on gender, and determine if modifications are needed. (Under the ACA, gender rating will be illegal beginning in 2014.)
- Examine the issue of insurers that restrict coverage based on certain health status-related factors, such as acts of domestic violence. (Beginning in 2014, this practice will be illegal under the ACA.)
- Consider policies that address efficacy and cost containment strategies to ensure affordable health care options.

## MATERNAL AND REPRODUCTIVE HEALTH

Healthy mothers have healthier babies. Appropriate maternal and reproductive health services save money by averting more costly health problems down the road. To address maternal and reproductive health issues, policymakers may consider actions related to breastfeeding, education, family planning, home visitation, prenatal care and teen pregnancy prevention.

### BREASTFEEDING

- Establish or encourage peer education and breastfeeding support programs for new mothers.
- Establish policies that allow a mother to breastfeed in any public or private location.
- Establish policies that clarify that breastfeeding is not an act of public indecency.
- Consider policies to improve access to breast pumps and lactation support.

- Examine whether your state plays a role in reviewing and approving state health insurance premium rates. (Beginning in 2011, the ACA provides a mechanism for states and the federal government to administer some rate reviews.)

### WORKFORCE

- Consider supporting programs to expand the primary care workforce, especially in rural and other underserved areas.
- Explore options to leverage federal loan and scholarship funds for health care professionals, especially in underserved areas.
- Explore options to increase access to primary care, including broadening the scope of practice and addressing training issues for certain medical professionals.
- Consider policies that recognize obstetricians and gynecologists as primary care providers.
- Consider programs that support diversity and look to expand the cultural competence of the health workforce.
- Consider policies that allow women to receive obstetric services from midwives.
- Explore expanding the scope of covered practices to include complementary medicines.
- Explore options to address dental provider shortages, including use of dental therapists and other dental provider incentive programs for rural areas.
- Consider supporting medical residency programs in locations where women receive health care (e.g., community health centers, rural health clinics).
- Examine malpractice insurance rates and determine if modifications are needed.



- Consider policies to require certain employers to provide reasonable break time and locations that allow an employee to express breast milk, considering an exemption for small business. (The ACA places requirements on certain employers; however, states may enact provisions beyond those in the ACA.)
- Consider creating a pilot program within state agencies (e.g., health department) to adopt breastfeeding policies and increase awareness of these practices.

## EDUCATION

- Encourage hospitals and birthing centers to disseminate information about a variety of issues to educate new parents, including injury prevention, maintaining a healthy lifestyle and preventing chronic disease.
- Consider initiatives to raise awareness about child health issues, such as newborn hearing screening, sudden infant death syndrome (SIDS) and childhood injury prevention.
- Consider integrating education on healthy pregnancies—including early brain development, folic acid and prenatal vitamins—into current programs and services for pregnant women and women of reproductive age.
- Explore initiatives that offer increased education and awareness to women of all ages about the importance of HIV testing and offer HIV testing as a part of routine medical care for women.
- Consider supporting policies that effectively use alternative media (e.g., text messages or social networking sites) to provide continuing education for pregnant women and new parents.

## FAMILY PLANNING

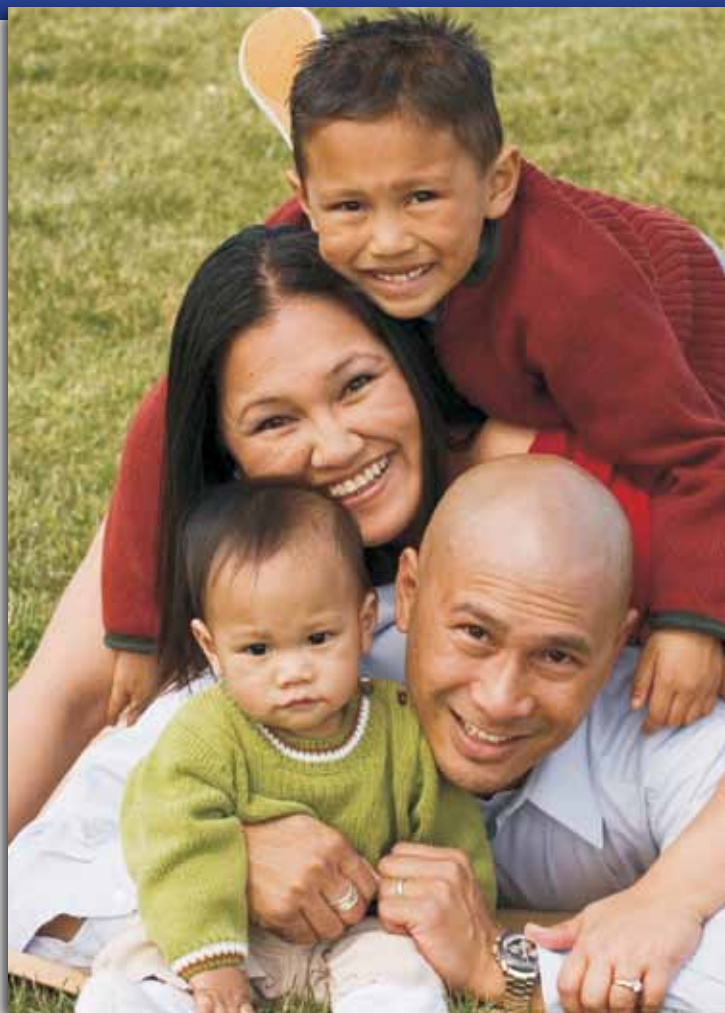
- Consider expanding access to family planning services under Medicaid to provide such services to more women, including those who otherwise would lose eligibility after giving birth. (This option was streamlined under the ACA, which allows a simple plan amendment rather than application through a waiver.)
- Explore options to improve access to infertility services, including diagnosis and treatment (e.g., insurance coverage, public programs, private sector initiatives).
- Explore options to improve contraceptive services (e.g., insurance coverage, public programs, private sector initiatives).

## HOME VISITATION

- Consider establishing an early childhood home visitation program to promote maternal and child health and early childhood development and to reduce child maltreatment and injuries. (The ACA established a federal home visiting initiative to help states develop a coordinated system of early childhood home visiting.)
- Examine the extent to which home visiting programs are coordinated within the state and are evidence- and research-based.

## PRENATAL CARE

- Ensure that pregnant women have access to mental health care; smoking cessation services; and culturally competent, early, quality prenatal health care.
- Consider providing information about detection of special needs in babies and children and encourage early screening and interventions for such indicators.
- Provide information about folic acid in programs such as the Women, Infants and Children (WIC) nutrition program or



family planning programs and provide increased education about the importance of folic acid, vitamins and enriched foods.

- Explore efforts to offer education and awareness about fetal alcohol syndrome and exposure to drugs during pregnancy and its effects on babies.

## TEEN PREGNANCY PREVENTION

- Evaluate policies and curriculum for sexual health education in schools, focusing on those that are evidence-based.
- Explore opportunities to support existing programs or start new programs through federal funding streams, including “Pregnant and Parenting Teens” (educational support program), “Personal Responsibility Education” and “Abstinence Education” (available through the ACA).
- Review and coordinate current funding mechanisms for reproductive health services and facilities where teens may access care.
- Review state teen pregnancy rates and consider supporting intervention efforts that target at-risk populations.
- Consider efforts to prevent repeat teen births by building relationships with teen mothers over time and offering continued social, health and educational support.

## MENTAL HEALTH

Mental health is an important component of women's overall health. To address mental health issues, policymakers may consider actions related to mental health access and treatment, elderly depression, postpartum depression, and violence and suicide.

### MENTAL HEALTH ACCESS AND TREATMENT

- Explore options to improve access to services that address a range of mental health disorders, including eating disorders.
- Consider supporting access to mental health treatment through alternative avenues such as telemedicine to reach women in rural areas.
- Explore policies that address barriers to access for mental health services (e.g., insurance coverage, access to community services, private sector initiatives).
- Encourage programs that provide support for caregivers of family members who have mental illness to enable people to remain in a community or home-based setting.
- Explore ways to determine psychiatric care and treatment preferences for people in the event they lose the capacity to make informed decisions.
- Establish a task force to generate ideas and develop options for mental health care access and treatment.

### ELDERLY DEPRESSION

- Encourage use of collaborative care by a team of medical professionals to best prevent and treat depression among the elderly.
- Consider initiatives to increase awareness and education about the risk factors and symptoms of depression in the elderly.



- Explore supporting policies that create an infrastructure to promote maintaining health-related quality of life in the elderly, including mental health factors.

### POSTPARTUM DEPRESSION

- Consider support for efforts designed to screen and follow up on postpartum mental health concerns.
- Work with insurers to develop health benefits packages for women that offer comprehensive coverage for both physical and mental illnesses.
- Encourage hospitals and clinics to provide written information on the signs, symptoms and treatment of postpartum depression to new parents and other family members.

### VIOLENCE AND SUICIDE

- Encourage school systems to develop youth suicide prevention initiatives or curriculums.
- Encourage collaboration among agencies and programs that educate and work towards common goals of suicide prevention for women of all ages.
- Consider supporting efforts that provide counseling for victims of intimate partner violence, especially initiatives that focus on teens.

## PUBLIC HEALTH AND WELLNESS

Public health and wellness involve systems designed to protect and improve health at the community and population levels. Public health efforts aim to improve health by preventing disease and promoting healthy behaviors. To address public health issues, policymakers may consider initiatives related to communities, employers, immunizations, nutrition and oral health.

### COMMUNITY INITIATIVES

- Consider establishing and maintaining a comprehensive women's health program to address major risk factors for chronic disease for middle-aged and older women.
- Consider supporting community initiatives and infrastructure to promote physical activity through transportation systems, bike paths and access to parks.
- Develop incentives to encourage communities to create healthier environments for residents.
- Explore policies that encourage adherence to the national physical activity guidelines.

### EMPLOYER INITIATIVES

- Consider allowing insurers to offer discounts or rebates to an insured person who participates in programs that promote disease prevention, wellness and health.
- Study the cost and effects of chronic disease in the state and the potential positive effects of worksite wellness programs.
- Create a pilot worksite wellness program within the legislature, state health department or state employee benefit program.
- Consider a tax credit for employers that offer certified wellness programs.

- Establish worksite programs that offer discounts for employees who use community gyms and fitness centers.
- Recognize and support employers that offer wellness programs, incentives for employees who participate in wellness programs, or flexibility in employee scheduling to allow for physical activities.

### IMMUNIZATIONS

- Explore expanding alternate sites—including schools and other public buildings—for vaccine administration to increase access and improve immunization rates.
- Explore options to improve coverage for vaccines to prevent disease.
- Increase awareness and education about health benefits and the safety of immunizations, especially related to immunizations for pregnant women and new parents.

### NUTRITION INITIATIVES

- Encourage healthy food systems in communities by supporting access to nutritious foods in stores, schools, restaurants, workplaces and entertainment venues.
- Consider initiatives to encourage or require restaurants to make nutritional information available to consumers. (The

### RESOURCES

- Women's Health Across the Lifespan  
[www.ncsl.org/default.aspx?TabId=14407](http://www.ncsl.org/default.aspx?TabId=14407)
- Women's Legislative Network  
[www.ncsl.org/wln](http://www.ncsl.org/wln)

ACA established national labeling requirements for chain restaurants with 20 or more locations and vending machines.)

- Consider efforts to limit the amount of trans-fat in food items to promote cardiovascular health.
- Explore efforts to reduce the sodium content in certain foods—including procurement standards for state-purchased foods—to prevent and control high blood pressure.



### ORAL HEALTH

- Consider water fluoridation programs in communities or statewide to prevent tooth decay.
- Explore whether your Medicaid program covers dental services for adults, especially pregnant women. Oral health care may be provided to pregnant women if it is required as a pregnancy-related service.
- Explore supporting educational initiatives about the importance of prevention and treatment of dental caries, especially in pregnant women and young children.

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