

The Impact of the Affordable Care Act (ACA) FOR WOMEN'S HEALTH AND ECONOMIC SECURITY

Millions of women gained access to affordable health care coverage under the ACA.

Increased access to care for women of color contributes to reducing health disparities.

More young women have access to coverage as a result of the ACA's provision allowing adults to stay on their family's plan until age 26.

Women can no longer be charged more for health coverage simply because they are women.

Under the ACA, women are guaranteed coverage without copays, deductibles, or other outof-pocket costs for preventive services such as birth control, cervical cancer screenings, and annual well-women exams.

The ACA protects against insurance discrimination for survivors of domestic violence.

Coverage for maternity care is guaranteed as an essential health benefit, without extra cost to women. The ACA set the first national standards for nursing mothers at the workplace.

Women can no longer be denied coverage or charged more because of a preexisting condition.

Insurance companies can no longer discriminate or deny women coverage for genderrelated health conditions.

Lower- and middle-income women and families are provided financial assistance to purchase health coverage.

Health care providers like Planned Parenthood receive federal funding from Title X to provide access to preventative and primary care for millions of people, particularly low-income women, women of color, and women in rural areas.

The ACA allowed for states to expand Medicaid eligibility, which has greatly increased access to coverage for lowincome women.

THE IMPACT OF THE AFFORDABLE CARE ACT (ACA) FOR WOMEN'S HEALTH AND ECONOMIC SECURITY

The Affordable Care Act (ACA) has led to groundbreaking improvements in health care for women; contributing to their increased economic potential as women's health and well-being is directly tied to their educational attainment and workforce participation.

Efforts to repeal or weaken the ACA would jeopardize the health care coverage of nearly 1 million Ohioans, and women would be disproportionately hurt by the loss of key provisions of the law. Without the ACA, women stand to lose access to affordable health care coverage and vital services for reproductive, preventative, and primary health.

The federal law has made health care affordable for many lower- and middle- income women and their families, and has provided protections from sex discrimination women faced regularly with health care in pricing, coverage, and access to care.

The ACA has led to groundbreaking improvements in health care access and affordability for women, contributing to increased economic productivity. Under the ACA:

Millions of women gained access to affordable health care coverage under the ACA as a result of expanded Medicaid coverage and subsidies to purchase coverage for those without insurance through an employer. In 2016, 6.8 million women and girls enrolled in coverage during the open enrollment period through the Health Insurance Marketplace. Between 2010 and 2014, the percentage of women of color reporting no usual source of health care significantly decreased; dropping by nearly 30 percent for Black women and almost 25 percent for Latinas.

Increased access to care for women of color contributes to the reduction of racial health disparities. Women of color are more likely to be uninsured, yet they experience disproportionally higher rates of diabetes, obesity, and reproductive health care disparities. With increased coverage rates under the ACA, women of color have greater access to services to treat these health care needs, as well as greater access to critical preventative care services. In addition, the ACA created data-collection standards to better understand health disparities, and allocate resources more efficiently. Under the ACA, there are incentives now in place to increase racial and ethnic diversity among the health care workforce and provide medical professionals with opportunities to receive cultural competency training. **More young women have been able to access coverage.** Under the ACA, young adults are able to stay on their parents' health plans until the age of 26, allowing for young women to gain access to coverage for primary care services and reproductive health services. According to the US Department of Health and Human Services, an estimated 81,000 young Ohioans have benefited from this provision.

Women can no longer be charged more for health coverage simply because they are women. Prior to the ACA, women were routinely charged as much as 50 percent more for the same coverage simply for being a woman. Now, under the ACA, there are protections against gender-based discrimination in health coverage.

Under the ACA, women are guaranteed coverage without co-pays, deductibles, or other out-ofpocket costs for preventive services such as birth control, cervical cancer screenings, and annual well-women exams. According to federal officials, an estimated 55.6 million women with private insurance are able to access contraception, mammograms, Pap smears, cervical cancer screenings, and other essential preventive services without cost-sharing.

The ACA protects against insurance discrimination for survivors of domestic violence. The ACA created reforms that prohibit insurance discrimination against survivors of domestic violence. The preventive health services that insurance plans must offer without co-pays includes screening and brief counseling for domestic violence.

Coverage for maternity care is guaranteed as an essential health benefit, without extra cost to women. Before the ACA, many health insurance plans did not cover maternity care or they required women to pay more out-of-pocket for the additional coverage. What's more, pregnancy could be considered a pre-existing condition, meaning women could be denied coverage for maternity care. Additionally, under the ACA, insurance plans can no longer require women seeking OB/GYN care to receive pre-authorization or a referral for the care, which saves women both time and money.

The ACA set the first national standard for nursing mothers at the workplace. Under the ACA, employers are required to provide enough break time and a place for nursing mothers to pump at work. Unfortunately, this provision has not been well enforced, and has been violated by employers. The ACA also requires most insurance plans to cover breastfeeding counseling support and equipment for women with no co-sharing.

Women can no longer be denied coverage or charged more because of a pre-existing condition.

Before the ACA, women with pre-existing conditions like diabetes or cancer were routinely denied coverage. Insurance plans that denied coverage for these so-called pre-existing conditions sometimes included Cesarean sections, pregnancy, domestic violence, and sexual assault in this category. Under the ACA, as many as 65 million women with pre-existing conditions no longer experience discrimination when enrolling in coverage.

Insurance companies can no longer discriminate or deny women coverage for gender-related health conditions. Insurance plans can no longer deny coverage or charge excessively high premiums to cover gender-related conditions, such as breast cancer or heart disease. The ACA prohibits sex discrimination in federal health programs, health programs that are receiving federal funding, and any programs created by the ACA. Lower- and middle-income women and families are provided financial assistance to purchase health coverage. Many women enrolling in plans through the Health Insurance Marketplace created by the ACA received tax credits and subsidies to assist in accessing affordable comprehensive coverage. Additionally, because of Medicaid eligibility expansion under the ACA, more low-income women have gained access to essential health benefits through Medicaid coverage.

Health care providers like Planned Parenthood receive federal funding from Title X to provide access to preventative and primary care for many low-income women. Planned Parenthood provides many of the services covered under the ACA for low-income women insured through Medicaid, including cancer screenings, HIV testing, and birth control. Lawmakers have stated that they plan to include defunding Planned Parenthood as a part of their efforts to repeal the ACA. Loss of this funding would have devastating effects on low-women receiving access to vital healthcare services through Medicaid and Title X family planning funding.

The ACA allowed for states to expand Medicaid eligibility to individuals with household incomes up to 138 percent of the Federal Poverty Level, which has greatly increased access to coverage for lowincome women. In Ohio, 700,000 people have gained coverage under Medicaid Expansion, dramatically reducing the rate of uninsured people in the state. Medicaid has long been a lifeline for women, and the ACA's provision encouraging states to expand eligibility has been particularly beneficial to women.

ABOUT THE COALITION:

The Ohio Women's Public Policy Network is a coalition unlike any other group in the state. Formed in 2015 and convened by Innovation Ohio Education Fund, we bring together more than 25 organizations from across the state to work collaboratively to advance policies that create economic security for women and strengthen families. For more information, visit our website at

WWW.WOMENSPUBLICPOLICYNETWORK.ORG

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