

Introduction

In 2010, the year President Obama signed the Affordable Care Act (ACA) into law, nearly 50 million individuals in the United States were uninsured—more than 16 percent of the total population. Since then, the ACA has extended care to more than 20 million Americans.

ACA repeal would hurt millions of people who now have access to health insurance thanks to the policy. However, ACA repeal would hurt some populations more than others. In this brief, we focus on the effects on women, and in particular women of color.

The women who stand to lose the most are those who are already hurt by economic inequality and the revolving door between poverty, a lack of access to health care, and poor health.

Women are particularly vulnerable to health-based income shocks

- Women are more likely than men to live in poverty: 13.8 percent compared to 11.1 percent. And women of color are more likely to live below the poverty line: 26.5 percent of black women compared to 11.6 percent of white women.
- More than two-thirds of low-wage workers are women, and this group is disproportionately comprised of women of color. These jobs often do not provide benefits such as employer-based health insurance, paid sick days, or paid family leave.
- Black and Latina women are paid only 64 and 56 cents for every dollar paid to white, non-Hispanic men, respectively. This results in an annual loss of approximately \$19,000 for black women and \$23,000 for Latina women.
- Women are impacted not only by the gender income gap, but also by significant race and gender wealth gaps. Never-married men working full-time have a median wealth of \$20,000, whereas their female counterparts have a median wealth of \$3,150. Wealth serves as a financial cushion, and women's lack of wealth makes them particularly susceptible to health-based shocks.

The ACA has improved coverage for women

- Pre-ACA, women were far more likely than men to have to forgo care because of cost concerns, and cost was a major barrier to care for all women. Many women had difficulties paying their medical bills and reported that a shortage of time and the unavailability of time off, childcare, and transportation impeded their ability to access
- In 2013, before many of the ACA's key provisions kicked in, 18 percent of women overall were uninsured.
 - Women of color were disproportionately likely to be <u>uninsured</u>: 22 percent of black women and 36 percent of Latina women compared to 13 percent of white women.
- The ACA also had provisions specifically meant to deal with women's issues in health insurance markets. Before the ACA, the U.S. health system was rife with gender discrimination. It was both legal and commonplace for insurers to charge women higher premiums than men for the same health coverage. Many health insurance plans treated pregnancy as a pre-existing condition, which resulted in higher premiums or coverage denial for women. The ACA made such discrimination illegal.
- The ACA also raised the floor of coverage for women.
 - Under the ACA, private insurers are required to cover without cost-sharing all FDA-approved contraceptive methods, sterilization procedures, patient education, and counseling for all women of reproductive age, along with a host of other preventative health services. Previously, patients were required to pay a percentage of the cost of contraception, which made many methods—especially long-acting methods such as the IUD and the implant—inaccessible to most women.

¹ Chang, Mariko Lin. 2010. Shortchanged: Why Women Have Less Wealth and What Can Be Done About It. New York, NY: Oxford University Press



- The ACA prohibits private plans from charging women higher premiums than men and prohibits all forms of
 gender discrimination in any program or activity that receives federal financial assistance. It is the first
 federal law to prohibit sex discrimination in health care.
- The ACA prohibits denying coverage because of existing or pre-existing conditions.
- The ACA mandates coverage without cost-sharing for the following preventative benefits:
 - Pap tests, testing for high-risk strains of HPV, and the HPV vaccination
 - · Counseling and screening for HIV and other sexually transmitted infections for sexually active women
 - Preconception and prenatal care visits
 - Postpartum counseling and support for breastfeeding, including the cost of renting or purchasing breastfeeding equipment such as a breast pump
 - At least one well visit per year so that women can gain access to the aforementioned services

Impact of repeal on women

As Republicans work through their multi-pronged approach to repealing and replacing the ACA, Americans should be aware of the changes that will impact the quality of their coverage and their access to care:

- The reversal of Medicaid expansion and changes to Medicaid more broadly—including block-granting or percapita caps—would ultimately cause millions to lose coverage.
- Rolling back the essential benefits regulation would eliminate the requirement that all plans cover 10 basic services, including emergency care, preventive care, pregnancy and maternity care, family planning, and pediatric services, among others.
- Preventing Medicaid patients from using coverage at Planned Parenthood would erode the reproductive health safety net and leave millions of women without a trusted place of care.
- Increasing costs for older Americans would disproportionately impact women, who—thanks to wage and wealth gaps—have less to rely on as they near their retirement years.