



NEWS RELEASE

Embargoed for release:
12:01 a.m. ET
Friday, July 13, 2012

For further information, contact:

Mary Mahon: (212) 606-3853, mm@cmwf.org

Bethanne Fox: (301) 448-7411, bf@cmwf.org

Twitter: [@commonwealthfund](https://twitter.com/commonwealthfund)

NEW WOMEN’S HEALTH CARE REPORT: 20 PERCENT OF U.S. WOMEN WERE UNINSURED IN 2010, UP FROM 15 PERCENT IN 2000; U.S. WOMEN MUCH MORE LIKELY TO STRUGGLE WITH MEDICAL BILLS AND GO WITHOUT NEEDED CARE THAN WOMEN IN COUNTRIES WITH UNIVERSAL COVERAGE

Affordable Care Act Is Already Improving Access and Affordability of Health Care for Women; Nearly All U.S. Women Ages 19-64 Will Be Insured When the Law Is Fully Implemented

July 13, 2012, New York, NY—Twenty percent of U.S. women (18.7 million) ages 19-64 were uninsured in 2010, up from 15 percent (12.8 million) in 2000, according to a new Commonwealth Fund report on women’s health care. An additional 16.7 million women were underinsured in 2010, compared with 10.3 million in 2003. The report estimates that once fully implemented, the Affordable Care Act will cover nearly all women, reducing the uninsured rate among women from 20 percent to 8 percent.

“Women, particularly those in their childbearing years, are uniquely at risk for being unable to afford the care they need, having trouble with medical bills, and having high out-of-pocket costs,” said Commonwealth Fund Vice President and report co-author Sara Collins. “The Affordable Care Act will ensure that U.S. women have affordable, comprehensive health insurance that covers the services they need, including maternity care. And women will no longer have to worry about being denied coverage for a preexisting condition or that they will have to pay higher premiums because of their gender or health.”

In Oceans Apart: The Higher Health Costs of Women in the U.S. Compared to Other Nations, and How Reform Is Helping, Commonwealth Fund researchers examine differences in how women fare in the U.S. compared to women in 10 other countries—Australia, Canada, France, Germany, the Netherlands, New Zealand, Norway, Sweden, Switzerland, and the U.K.—all of which have universal health insurance coverage. The report finds that while uninsured women in the U.S. were most likely to face problems with medical bills and getting needed health care, even insured U.S. women were more likely to face these problems compared to women in other countries.

Major Findings:

- Women in the U.S. said they have problems paying medical bills at double the rate of women in any of the other countries. One-fourth (26%) of women in the U.S. ages 19 – 64 had medical bill problems, compared to 13% in Australia, 12% in France, and 4 % in Germany.
- About two of five (39%) women in the U.S. spent \$1,000 or more on out-of-pocket medical costs over 2009-2010, compared to one-fourth (24%) in Switzerland, 1 percent in Sweden, and 0 percent in the U.K.
- More than two of five (43%) women in the U.S. said that over 2009-2010 they went without recommended care, skipped seeing a doctor when they were sick, or failed to fill prescriptions because of cost, compared to 28 percent in Germany and Australia, 8 percent in the Netherlands, and 7 percent in the U.K.
- Half (52%) of women in the U.S. said they were confident that they would be able to afford the health care they need if they became seriously ill. In contrast, nearly all women in the U.K. (91%) and three-fourths (77%) in the Netherlands and Switzerland (76%) were confident they could afford needed care.

Uninsured U.S. Women Struggle Most

When looking just at uninsured U.S. women, the report finds even more substantial differences compared to women in other countries: 51 percent of uninsured U.S. women had a problem paying medical bills and 77 percent went without needed health care due to costs, more than double the rates reported by women in other nations. Within the U.S., there are strong geographic differences when it comes to women's health insurance, with 30 percent of women in Texas uninsured, compared to only 5 percent of women in Massachusetts, which enacted a universal health insurance law in 2006 that is similar to the Affordable Care Act.

The Affordable Care Act Is Helping Women

According to the report, The Affordable Care Act is already making health insurance and needed health care more affordable and available to women:

- In 2011, an estimated 20.4 million women benefitted from provisions requiring all private insurance plans in existence when the law passed in March 2010 to provide preventive services like screening for cervical, breast, and colon cancer, cholesterol checks, and osteoporosis and chlamydia screening without cost sharing.

- Beginning in August 2012, private insurance plans will cover an additional set of preventive services tailored specifically for women, including family planning services, without cost sharing.
- According to a recent Commonwealth Fund survey, in 2011 an estimated 3.1 million young women stayed on or joined their parents' health plans likely because of The Affordable Care Act provision requiring insurers that offer dependent coverage to let young adults enroll in their parents' health insurance until they are 26.
- The U.S. Department of Health and Human Services has estimated that 39.5 million women no longer have lifetime limits on what their health insurance plans cover because of the Affordable Care Act provision requiring insurers to remove them.
- Preexisting Condition Insurance Plans are available in all 50 states for people with health problems who have been uninsured for at least six months. Nearly 62,000 people have enrolled in the plans, more than half of whom are women.
- The Medicaid program now covers more services for women including smoking cessation support for pregnant women and care from free standing birth centers.

Moving Forward

According to the report, new subsidized insurance options, including a substantial expansion in eligibility for Medicaid and premium tax credits for people with incomes up to \$92,200 for a family of four, will help ensure that nearly all women will have access to affordable, comprehensive health insurance. Among the five states where more than one quarter of women lacked coverage in 2009/10, uninsured rates are estimated to fall below 14 percent when the Affordable Care Act is fully implemented: in Texas, the uninsured rate is expected to drop from 30.3 percent in 2009/10 to 11.6 percent; in Florida from 26.2 percent to 9.9 percent; in Arkansas from 25.3 percent to 6.8 percent; in New Mexico from 25.3 percent to 13.3 percent; and in Nevada from 25.2 percent to 13.1 percent.

The report finds that women will also benefit from provisions in the law that will prevent insurers from charging women higher premiums because of their gender or health. More affordable reproductive and preventive health care and a strengthening of primary care services will also benefit women.

The report's authors note that continued implementation of the Affordable Care Act reforms will be essential to ensuring the future affordability of health care for women and households. "We are on the cusp of a remarkable feat—providing comprehensive, affordable health insurance to almost all American women," said Commonwealth Fund President Karen Davis. "It is crucial that states actively work to implement the reform law and take full advantage of all the benefits

the Affordable Care Act stands to offer to their residents so that all American families are able to benefit from the law’s potential.”

The report will be available on the Commonwealth Fund Web site on July 13, 2012, at: <http://www.commonwealthfund.org/Publications/Issue-Briefs/2012/Jul/Oceans-Apart-Women.aspx>.

Methodology

This issue brief includes data from three surveys over multiple years: the Commonwealth Fund International Health Policy Survey of Adults in Eleven Countries (2010); the Commonwealth Fund Biennial Health Insurance Survey (2003, 2007, 2010); and the March Annual Social and Economic Supplement to the Current Population Survey (CPS) (2001 – 2011). The 2010 Commonwealth Fund International Health Policy Survey of Adults in Eleven Countries was conducted by telephone by Harris Interactive and country contractors in Australia, Canada, France, Germany, the Netherlands, New Zealand, Norway, Sweden, Switzerland, the U.K., and the U.S. from March through June 2010. This issue brief is based on responses of 8,197 females ages 19 to 64. The Commonwealth Fund 2010 Biennial Health Insurance Survey was conducted by telephone by Princeton Survey Research Associates International from July 14 through November 30, 2010 with analysis in this issue brief based on the responses of 1,671 females ages 19 - 64. We also report estimates from the 2003 and 2007 Commonwealth Fund Biennial Health Insurance Surveys, also conducted by Princeton Survey Research Associates International. In 2007, the survey was conducted from June 6, 2007 through October 24, 2007 and included 1,675 women ages 19 to 64. In 2003, the survey was conducted from September 3, 2003, through January 4, 2004 and included 2,009 women ages 19 to 64.

The Commonwealth Fund is a private foundation supporting independent research on health policy reform and a high performance health system.