## **Repealing the Essential Health Benefits** Would be Devastating for Women's Health

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The Affordable Care Act (ACA) is the greatest advance for women's health in a generation, but Republicans in Congress are dead set on rolling back key provisions that ensure women's access to necessary health care services, such as maternity care. They are trading women's access to health care for votes on the American Health Care Act (AHCA), a bill that would already wreak havoc on our health care system and take health care away from at least 24 million people.1

Specifically, Congress is attempting to repeal the Essential Health Benefits (EHB), which requires health plans in the small group and individual market to standardize the benefits they must cover. Repealing the EHB provision would be devastating for women's health, equity and economic security.

- Without EHB, women would once again be subject to skimpy, inadequate insurance coverage, just like before the ACA. Women and families have guaranteed access to a defined set of services under EHB including pregnancy, maternity and newborn care; mental health and substance use disorder services; prescription drugs; and preventive and wellness services, among other services. EHB ensures that when women sign up for coverage, they know they are getting comprehensive health insurance that will cover their essential health care needs without any lifetime or annual dollar limits on their care. Before the ACA, this was rarely the case for women purchasing insurance on the individual market.
- > Repealing EHB puts women's access to maternity and newborn care at dire risk. Before the ACA, the vast majority of plans in the individual market did not cover maternity care. In fact, only 12 percent of plans in the individual market covered this benefit. Even among plans that covered maternity services, the coverage was not always comprehensive or affordable. For example, one study found that several plans charged a separate maternity deductible that was as high as \$10,000, and some plans had waiting periods of up to a year before maternity care would be covered.4
  - Without coverage of maternity care, new parents could face large medical bills. Maternity care can be extremely expensive: \$21,001 was the average cost of all payments made for maternity and newborn care in 2010 for women who had commercial insurance. Quality insurance coverage provides an important financial protection for women and families. Without coverage of critical services like maternity care, women would once again be forced to choose between getting the care they need and other immediate needs, such as food and housing.



- ► Coverage of maternity care is essential for the health of women and babies. Uninsured pregnant women are less likely to seek prenatal care in the first trimester and to receive the optimal number of visits during their pregnancy. 6 Moreover, inadequate use of prenatal care is associated with higher rates of infant and maternal mortality. 7
- ▶ Without EHB, many women would lose coverage for life-saving prescription drugs. Before the ACA, one in five people enrolled in the individual market lacked coverage for prescription drugs. Prescription drugs are incredibly important to women with HIV, hepatitis, cancer, multiple sclerosis (MS), epilepsy and many other conditions. Rolling back coverage of prescription drugs means women would not be able to access the medicine they need to prevent or manage ongoing health conditions.
- Coverage of mental health services would be slashed, too. It is estimated that more than 32 million people gained access to coverage for mental health and substance use disorders (or both) benefits under the ACA. This is very important for women who, for example, are nearly twice as likely as men to be diagnosed with depression. Prior to the ACA, mental health coverage often was excluded from plans, or was very limited. Without EHB, women and families can expect to return to a time when they struggled to obtain needed coverage for mental health services.
- Insurers could make their benefits bare bones, dropping benefits entirely or dramatically limiting benefits. Limiting the benefits in a plan was a predatory practice that existed before the ACA as a way to discourage anyone with a pre-existing health condition from enrolling in coverage. Without EHB, women and families with certain conditions may not be able to purchase plans that cover the care they need, thereby discriminating against those with pre-existing health conditions. Repealing EHB would once again allow insurers to eliminate or drastically reduce the benefits they provide.

The Essential Health Benefits are a critical part of our health care system and help ensure that insurance coverage meets the needs of women and families. Women rely on the EHB provision to ensure they have access to the care they need and to protect their economic stability.

## Attempts to repeal the ACA are an assault on women's access to health care, their economic security and their overall well-being.

The National Partnership for Women & Families is a nonprofit, nonpartisan advocacy group dedicated to promoting fairness in the workplace, reproductive health and rights, access to quality health care and policies that help women and men meet the dual demands of work and family. More information is available at NationalPartnership.org.

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<sup>1</sup> Congressional Budget Office. (2017, March). American Health Care Act. Retrieved 23 March 2017, from https://www.cbo.gov/publication/52486

<sup>2</sup> Healthcare.gov. (n.d.). What Marketplace health insurance plans cover. Retrieved 23 March 2017, from https://www.healthcare.gov/coverage/what-marketplace-plans-cover/

<sup>3</sup> National Women's Law Center. (2012). Turning to Fairness: Insurance Discrimination against Women Today and the Affordable Care Act. Retrieved 14 December 2016, from http://www.nwlc.org/sites/default/files/pdfs/nwlc\_2012\_turningtofairness\_report.pdf

<sup>5</sup> Truven Health Analytics. (2013, January). The Cost of Having a Baby in the United States, Table 11. Retrieved 12 October 2016, from <a href="http://transform.childbirthconnection.org/reports/cost/">http://transform.childbirthconnection.org/reports/cost/</a>

<sup>6</sup> American College of Obstetricians and Gynecologists. (2008, February). Women and Health Insurance: By the Numbers. Retrieved 23 March 2017 from <a href="http://www.acog.org/~/media/Departments/Government%20Relations%20and%20Outreach/hcfwhcfa-numbers.pdf?dmc=1">http://www.acog.org/~/media/Departments/Government%20Relations%20and%20Outreach/hcfwhcfa-numbers.pdf?dmc=1</a>

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<sup>9</sup> U.S. Department of Health & Human Services. (2013, February). Affordable Care Act Will Expand Mental Health and Substance Use Disorder Benefits and Parity Protections for 62 Million Americans. Retrieved 23 March 2017, from https://aspe.hhs.gov/sites/default/files/pdf/76591/rb\_mental.pdf

<sup>10</sup> The Mayo Clinic. (2016, January). Depression in women: Understanding the gender gap. Retrieved 23 March 2017, from http://www.mayoclinic.org/diseases-conditions/depression/in-depth/depression/art-20047725

<sup>11</sup> See note 7.