

Women's health must be priority for state health exchange marketplaces, new report says

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Women's issues play a major role in the health of the nation and should be a key consideration for policymakers as they design and set up the new insurance exchanges, according to a report co-authored by policy experts at the George Washington University School of Public Health and Health Services (SPHHS). The report offers a checklist for the statebased health insurance exchanges, one that will help ensure that women, children and family members can get the services they need to prevent costly and debilitating medical problems.

"Women often use a greater range of <u>health services</u> over a lifetime; they may also shoulder higher annual <u>medical costs</u> and often act as coordinators of health care for entire families," said co-author Susan F. Wood, PhD, who is the executive director of the Jacobs Institute of Women's Health and a professor of <u>health policy</u> at SPHHS. "This report identifies some of the major issues that states will need to consider if they are to provide the kinds of services that can keep millions of American women and their families healthy."

The Jacobs Institute of Women's Health, at SPHHS, The Kaiser Family Foundation and the Connors Center for Women's Health and Gender Biology at the Brigham & Women's Hospital all worked together to produce the report: Ensuring the Health Care Needs of Women: A Checklist for Health Exchanges. This report and checklist includes resources from a wide range of organizations that focus on the



implementation of health care reform, which can be found at a new website: <u>http://www.womenandhealthreform.org</u>.

The report notes that the Affordable Care Act (ACA) established online marketplaces where women can comparison shop for health insurance plans. Some states, like Massachusetts, have well-established exchanges already in place but many others are scrambling to set them up now, Wood said. Under the ACA, women will have greater access to <u>health</u> <u>insurance</u> and to no-cost preventive services that can keep them healthy—such as mammograms and other screening tests that can detect cancer and other chronic diseases at an early, more treatable stage.

This report, and the checklist, can help states fashion insurance exchanges that will best meet the needs of millions of American women. According to the report, state officials should consider:

- Designing benefits packages that include a range of essential health services that are required for women to maintain good health. The report says all women should have access to maternity and newborn care, access to family planning services, chronic illness management, mental health services, emergency medical care and other types of services.
- Defining the type of health care facility that will be included in networks so that women can get crucial health care, such as maternity care at free-standing birth centers.
- Educating women about the enrollment, scope of benefits, out of pocket charges and exemptions. Women often help other <u>family</u> <u>members</u> enroll in health plans and obtain health services.
- Ensuring affordable coverage by offering very clear explanations of the out-of-pocket costs. States that pay close attention to transparency will help women budget for health care, especially if they are caring for multiple family members—and picking up



the tab for an entire family.

• Measuring and reporting the impact and outcome of health reform on women's health and access to care. Better data will help states assess how well they are doing when it comes to keeping all women healthy.

Provided by George Washington University

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