



Closing the Coverage Gap: Accepting Federal Funds is Critical to Maine Women's Health and Economic Security

Thanks to the Affordable Care Act (ACA), thousands of Maine women are able to get affordable health coverage. Because of the ACA, health insurers are no longer allowed to discriminate against women, simply because of their gender. But many women still face obstacles to getting affordable care, especially women living in poverty and women who still do not have coverage.

Unfortunately, Maine has failed to fully implement the ACA as it was intended by deciding not to expand its Medicaid program to cover individuals who make less than \$11,670 a year. Maine is the only state in New England that hasn't accepted these funds and the consequences are putting Maine women's health at risk.

Since January 1st of this year, Maine has lost **over \$260 million in federal funding – that's \$900,000 a day and counting** - that would have come into our state. These are dollars that could be used to provide mammograms for our mothers and sisters; prescriptions for our neighbors, and flu shots for the day care workers who care for our children and direct care workers who care for our seniors. These dollars would also help to create jobs and stimulate our economy.

Women with low income without health coverage experience many challenges. These women are more likely to go without care because of cost. They are less likely to have a regular source of medical care. They are also less likely to get preventive services that keep them healthy.

- For women in Maine, cost is a major barrier to care – **over 51 percent of uninsured Maine women have faced cost as an obstacle** when seeking care, compared to only 16 percent of insured women.
- Uninsured women use preventive services at lower rates; **only 50 percent of uninsured women in Maine received a recommended mammogram** compared to 78 percent of insured women.
- **Only 47 percent of uninsured women in Maine received a recommended colorectal cancer screening** compared to 75% of insured Maine women.
- Additionally, **only 68 percent of uninsured women in Maine have had a recommended Pap test** compared to 86 percent of insured women in Maine.¹

Women's health is at stake, but we can still change course. The opportunity to improve Maine women's health and economic security remains open.

For more information or to learn more about how you can get involved, please visit the Cover Maine Now website: <http://www.covermainenow.org/> or the Cover Maine Now Facebook page: <https://www.facebook.com/covermainenow>.

By closing the coverage gap, Maine will...



... **Help working parents with children.** Since 2012, about 25,000 parents have lost MaineCare coverage, impacting the health of both parents and their children. While their children may still have MaineCare, children's health and well-being are at risk when parents aren't covered. Children with uninsured parents are more likely to have gaps in coverage, and are less likely to receive check-ups, preventive care, and other health care services.ⁱⁱ Accepting federal funds to cover parents in Maine would increase the likelihood their children get and stay covered, leading to healthier families.



... **Improve women's reproductive health and reduce unintended pregnancies.** In addition to foregoing critical preventive cancer screenings and regular doctor visits, uninsured women are also less likely to receive critical reproductive health services like HIV testing or family planning services than women with coverage.



...**Help women to have healthier pregnancies.** Pregnant women with certain incomes may be eligible to get MaineCare, but only during and immediately after pregnancy. Giving women greater access to coverage, before and between births, will significantly lower risk factors like diabetes and tobacco use. Women without coverage are also more likely to experience infant mortality, delayed prenatal care, and complicated deliveries. With coverage, women will receive maternity and newborn care as well as preventive and postpartum services.



...**Improve the likelihood that women in abusive relationships may get the help they need.** MaineCare, like all health plans, must cover preventive screening for interpersonal violence which could increase early intervention and referrals to domestic violence programs that help women to get the help they need.



...**Help women travel to get to the care they need.** People who have MaineCare can get transportation to medical appointments. This means that Mainers living in rural areas or in areas where specialists are scarce will be more likely to get the care they need. For women, this is especially important because reproductive health providers are limited and may be harder to reach in certain parts of the state.



...**Cover women in low wage jobs.** Employers with a high number of low wage workers are far less likely to offer health insurance. A woman in Maine is more than 2.6 times more likely than a man to be working in a low wage job. Nationally, almost 3 in 4 women in the low wage work force are of reproductive age.ⁱⁱⁱ



...**Help women and their families achieve economic security.** Uninsured women and their families still need care and too many Mainers are still going into debt because of medical bills.^{iv} People with Medicaid coverage are less likely to ignore other bills or borrow money to pay for medical expenses than people without coverage.

All images from the Noun Project (thenounproject.com). From top: Family by Jens Tarning; Woman by Luis Prado; Pregnant by Andrew McKinley; Solidarity by Thibault Geffroy; Preschool by Michael Thompson; Piggy Bank by Ealancheliyans.

ⁱ National Women's Law Center, *Mind the Gap: Low Income Women in Dire Need of Health Insurance* 2014. Retrieved from http://www.nwlc.org/sites/default/files/pdfs/nwlcmindthegapmedicaidreportfinal_20140122.pdf.

ⁱⁱ Maine Children's Alliance, *Ensuring Health Coverage for Maine Families with Children in 2014, A Health Policy Brief*, March 2014, Retrieved from http://www.mekids.org/assets/files/issue_papers/healthcoverage_children_2014.pdf.

ⁱⁱⁱ National Women's Law Center, *Underpaid and Overloaded: Women in Low-Wage Jobs*, July 30, 2014. Retrieved from <http://www.nwlc.org/resource/underpaid-overloaded-women-low-wage-jobs>.

^{iv} 62% of bankruptcies nationwide are related to medical debt. The American Journal of Medicine, *Medical Bankruptcy in the United States, 2007: Results of a National Study*, August 2009. Retrieved from http://www.pnhp.org/new_bankruptcy_study/Bankruptcy-2009.pdf.