

WHY MEDICAID EXPANSION MATTERS TO AFRICAN-AMERICAN WOMEN IN GEORGIA



INSIGHTS ON UNINSURED AFRICAN-AMERICAN WOMEN

Georgia has the fifth largest uninsured population in the country. In Georgia, 838,000 women are uninsured, representing 30% of women in the state overall. Across race, 28.7% of African-American women, 52.1% of Hispanic women and 19.5% of white women are uninsured. More than half of the nation's uninsured women had incomes in 2010 that qualified them for coverage under Medicaid expansion.

Low-income women are more likely to forgo prescriptions, visits to the doctor, or get recommended tests. They are also more likely to skip follow up care due to cost. African-American women in Georgia earn an average of 62.1 cents for every dollar earned by a non-Hispanic white male, and expansion will help many of these women afford coverage. Without Medicaid expansion, many low-income women are shut out of the gains in reproductive health services outlined in the ACA.

AFFORDABLE CARE ACT BENEFITS FOR AFRICAN-AMERICAN WOMEN

WOMEN GAIN ACCESS TO CERTAIN
PREVENTATIVE WOMEN'S HEALTH CARE
SERVICES WITH NO OUT OF POCKET COST.

Since 2012, the ACA requires individual and group private insurance plans, as well as those receiving coverage under the Medicaid expansion, to cover well-woman visits, domestic violence screening and counseling, and FDA-approved contraceptives without co-pays.vi

PROTECTIONS FOR PREGNANT WOMEN AND MOTHERS ARE INCREASED. INSURANCE COMPANIES MUST NOW COVER MATERNITY CARE AND BREASTFEEDING SUPPORT.

Before the ACA, 87% of insurance companies did not cover this essential benefit. **i This care is incredibly important to African-American women in Georgia who are 10% less likely to receive prenatal care in the first trimester of pregnancy compared to white women. **iii The ACA also requires businesses with 50 or more employees to provide nursing breaks in a private area for breastfeeding mothers. **iii

THE ACA PROHIBITS SEX BASED INSURANCE DISCRIMINATION.

Companies cannot charge different premiums based on sex. Prior to the ACA, a healthy 22-year-old woman could be charged 150% higher than a 22-year-old man.* The ACA also prohibits insurance companies from denying a person insurance coverage because of a pre-existing condition. This disproportionately affects African-American women because these women are more likely to have pre-existing chronic conditions.

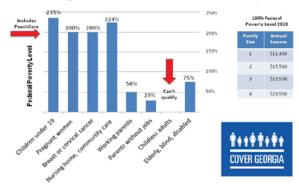
WHAT IS MEDICAID & WHAT DOES EXPANSION PROVIDE

Medicaid is a public assistance program that helps qualified people unable to afford medical care pay for some or all of their medical bills. The Georgia Medicaid program is administered by the Department of Community Health (DCH) and uses a combination of State and Federal tax funds to pay medical expenses. The program currently covers 1.7 million people who meet a narrow set of criteria. In Georgia, Medicaid covers low-income pregnant women, disabled persons, and working parents who make approximately \$9,765 a year (less than 50% of the Federal Poverty Level for a family of three in 2013). Medicaid does not cover low-income childless adults. In addition, many documented immigrants are ineligible for Medicaid for the first five years, even if they meet all of the state eligibility requirements. The accompanying chart explains current eligibility for Medicaid and PeachCare for Kids.

Signed into the law by President Barack Obama on March 23, 2010, the Affordable Care Act requires that states expand Medicaid eligibility to

nearly all those earning less than \$15,856 for an individual or \$26,951 for a family of three (up to 138% of the Federal Poverty Line).**Wednesday, the Supreme Court of the United States ruled on June 28, 2012 that states have an option on whether or not to accept the expansion of Medicaid. Unfortunately, Governor Nathan Deal has opted out of expanding Medicaid eligibility, creating a coverage gap in Georgia.**

Georgia Medicaid Income Limits Today





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JOIN THE FIGHT

We have the people power to demand Healthcare for all! Six out of 10 respondents to a poll by the *Atlanta Journal Constitution* said Georgia should affirm Medicaid expansion. ** Twenty-five percent of Georgians casting a vote in the 2012 presidential election were African-American and were in favor of President Barack Obama and his domestic policy platform, including the ACA. ** The next Governor of Georgia can change the healthcare destiny of the more than 650,000 low-income, uninsured Georgians by implementing Medicaid expansion.

Two ways to get involved:

- Join SPARK, the Atlanta Chapter of the National Domestic Workers Alliance, and Moral Monday Georgia as we stand up for health equity!
- Visit www.sparkrj.org to join our mailing list for the latest news, upcoming events, and opportunities to volunteer as we continue this push for healthy families!

ABOUT US

SPARK is reproductive justice (RJ) organization based in Atlanta, GA. We advocate for policies that protect and expand access to the full range of family planning options, abortion, and sexual health education for women and youth of color in the state of Georgia. Importantly, SPARK ensures the voices of women of color, young parents, and LGBTQQ youth of color living in the south are included in the reproductive rights and justice movements.

HOW CAN YOU GET COVERED

To learn more about the healthcare marketplace and plans you are eligible for call 1-800-318-2596 (TTY: 1-855-889-4325) or go to the Federal website www.healthcare.gov.

You can also visit your local "Navigator." Navigators provide in-person assistance for people obtaining healthcare coverage through the new market place due to the Affordable Care Act. Local health centers providing health services on a sliding income scale, have trained Navigators on-site to guide you through the marketplace. Visit healthcare.gov to determine the closest center near you.

This fact sheet was prepared with the support of the National Center for Lesbian Rights and demonstrates why Medicaid expansion, as outlined in the landmark Patient Protection and Affordable Care Act (ACA), is important to uninsured, low-income African-American Women and what you can do to make healthcare for all a reality.



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iii. National Health Law Program "10 Reasons Medicaid Expansion is Good For Women" -- healthlaw.org/images/stories/2012_08_13_Reasons_Medicaid_Good_Women.pdf

iv. Rustgi, S. D., Doty, M. M., & Collins, S. R. and The Commonwealth Fund Publication. "Women at Risk: Why Many Women Are Forgoing Needed Health Care." —

 $http://www.commonwealthfund.org/-/media/Files/Publications/lssue \& 20Brief/2009/May/Women \& 20Art \& 20Risk/PDF_1262_Rustgi_women_at_risk_issue_brief_Final.pdf -- pages 3-4 (a.g., a.g., a.g.,$

v. National Women's Law Center, "The Wage Gap By State for African-American Women", http://www.nwlc.org/resource/wage-gap-state-african-american-women

vi. U.S. Department of Health and Human Services "Women's Guidelines" – www.hrsa.gov/womensguidelines/

 $vii.\ National\ Women's\ Law\ Center, "Policy\ Indicators:\ Maternity\ Care"-http://hrc.nwlc.org/policy-indicators/maternity-care$

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 $x. \ US \ White \ House, "Health \ Reform \ For \ Women" - www.whitehouse.gov/files/documents/health_reform_for_women.pdf \ Annual Manna \$

xi. Georgia Department of Community Health, "Medicaid ABCs" -- https://dch.georgia.gov/medicaid-abcs

xii. Cover Georgia, "Medicaid 101" -- www.coverga.org/medicaid101/medicaid101.html

xiii. Kinsey Hasstedt, Guttmacher Institute, "Toward Equity and Access: Removing Legal Barriers to Health Insurance Coverage for Immigrants"-- http://www.guttmacher.org/pubs/gpr/16/1/gpr160102.html

xiv. The Henry J. Kaiser Family Foundation "Where are States Today? Medicaid and CHIP Eligibility Levels for Children and Non-Disabled Adults as of January 1, 2014" - http://kff.org/medicaid/fact-sheet/where-are-states-today-medicaid-and-chip/

xv. The Atlanta Journal-Constitution "Deal rejects expansion of Medicaid" - http://www.ajc.com/news/state-regional-govt-politics/deal-rejects-expansion-of-medicaid/nRMfk/

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