



UNITED STATES SENATOR HARRY REID OF NEVADA

HEALTH REFORM FOR NEVADA'S WOMEN

Lower Costs for Women

* Insurance Industry Reforms that Save Women Money

Caps what insurance companies can require women to pay in out-of-pocket expenses, such as co-pays and deductibles, prohibits lifetime limits on how much insurance companies cover if beneficiaries get sick, and regulates the use of annual limits to ensure access to necessary care, until 2014 when annual limits are prohibited. More than half of women report delaying needed care because of cost, and one-third of women were forced to make a difficult tradeoff such as giving up basic necessities in order to get health care.

- Reduces family health insurance premiums by \$1,380 - \$1,970 for the same benefits, as compared to what they would be without health reform by 2016. [Senate Finance Committee estimate based on CBO, 11/30/09]

* Premium Relief

Requires premium rate reviews to track any arbitrary premium increases, cracks down on excessive insurance overhead by applying standards on how much insurance companies can spend on non-medical costs, such as bureaucracy and advertising, and provides consumers a rebate if non-medical costs are too high. Provides sliding scale premium tax credits for women who cannot afford quality health insurance.

- As many as 311,000 Nevadans could receive these tax credits to make health insurance more affordable, bringing \$5 billion in premium and cost-sharing tax credits into Nevada during the first five years of the health insurance Exchange. [HealthReform.gov, accessed 5/12/10; Senate Finance Committee]

* Reduces Cost-Shifting

Covers more Americans to reduce cost-shifting that increases premiums for insured Americans. To pay for the cost of uncompensated care, medical providers pass costs on to private insurers, which pass them on to families, increasing family premiums by, on average, over \$1,100 a year.

Greater Choices for Women

* Ends Insurance Company Discrimination

Prohibits insurance companies from denying women health insurance because of a pre-existing condition or excluding coverage of that condition, dropping coverage if a beneficiary becomes sick, or charging more because of health status or gender. Right now, a healthy 22-year-old woman can be charged premiums 150 percent higher than a 22-year-old man.

- This protects coverage for the 681,033 children in Nevada and ensures immediate access to affordable insurance options for as many as 68,321 uninsured Nevadans who have a pre-existing condition. [U.S. Census Bureau, 1/7/10; Staff estimate using Agency for Healthcare Research and Quality (AHRQ), 4/09; HealthReform.gov, accessed 3/20/10]

Provides people who have health problems, but who lack access to health insurance, access to a plan that protects them from medical bankruptcy, by July 1, 2010. This high risk pool is a stop-gap measure that will serve as a bridge to a reformed health insurance marketplace.

- Nevada could receive as much as \$61 million for its high-risk pool. [HHS, accessed 5/12/10]

* More Affordable Choices

Creates state-based health insurance Exchanges to provide women with a variety of choices, including private plans, co-ops, and multi-state plans, to foster competition and increase choice.

- Health reform will ensure that the 518,000 uninsured Nevadans and 132,000 Nevadans who purchase health insurance through the individual market have access to affordable health insurance options through state-based health insurance Exchanges. [HealthReform.gov, accessed 3/20/10]

* One-Stop Shopping to Put Women in Charge

Provides standardized, easy-to-understand information through the Exchanges on different health insurance plans available in a geographic region so women can easily compare prices, benefits and performance of health plans to decide which quality affordable option is right for themselves and their families. Women are often the decision-makers when it comes to health care for their families.

* Insurance Security

Ensures that women always have guaranteed choices of quality, affordable health insurance if they lose their jobs, switch jobs, move, or become sick, through the creation of Exchanges. Less than half of women have the option of obtaining health insurance through a job.

Quality, Affordable Health Care for Women

* Preventive Care for Better Health

Ensures coverage of prevention and basic health services, including maternity benefits, to create a system that encourages innovations in health care to prevent illness and disease before women require more costly treatment. Today, maternity benefits are often not provided in health plans in the individual insurance market, even though a \$1 investment in prenatal care for a woman with diabetes generates \$5 in savings from reduced complications.

* Quality Care for American Children

Requires every insurance company to provide quality coverage for Nevada's 681,033 children. By ensuring coverage for well-child, dental and eye care services, American families will have increased peace of mind and children will be healthier. [U.S. Census Bureau, 1/7/10]