



# ASPE

## ISSUE BRIEF

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### SEVENTY-ONE MILLION ADDITIONAL AMERICANS ARE RECEIVING PREVENTIVE SERVICES COVERAGE WITHOUT COST-SHARING UNDER THE AFFORDABLE CARE ACT

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The Affordable Care Act ensures that most insurance plans (so-called ‘non-grandfathered’ plans) provide coverage for and eliminate cost-sharing on certain recommended preventive health services, beginning on or after September 23, 2010.<sup>1</sup> Based in part on guidelines from the U.S. Preventive Services Task Force, this includes services such as colonoscopy screening for colon cancer, Pap smears and mammograms for women, well-child visits, flu shots for all children and adults, and many more services.<sup>2</sup>

While some plans already covered these services, millions of Americans were enrolled in health plans that did not. According to the Kaiser Family Foundation’s Employer Health Benefits Survey in 2012, 41% of all workers were covered by employer-sponsored group health plans that expanded their list of covered preventive services due to the Affordable Care Act.<sup>3</sup> The most recent data from the Census Bureau show that 173 million Americans ages 0 to 64 are enrolled in private health coverage.<sup>4</sup> Putting these facts together, we estimate that approximately 71 million Americans received expanded coverage of one or more preventive services in 2011 and 2012 due to the Affordable Care Act.<sup>5</sup>

Using national survey data on children and adults with private insurance, we next estimated how those 71 million people are distributed across states, and across age, race, and ethnic groups. We examined the following age/gender groups, and provide here a sample of the services they are now eligible for without any cost-sharing. Note that this is not an exhaustive list of covered services and is only meant to highlight several examples.

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<sup>1</sup> *Interim Final Rules for Group Health Plans and Health Insurance Issuers Relating to Coverage of Preventive Services Under the Patient Protection and Affordable Care Act*, U.S. Departments of Treasury; Labor; and Health and Human Services. 75 C.F.R. 41726 (Jul. 19, 2010).

<sup>2</sup> *Recommended Preventive Services*. U.S. Department of Health and Human Services, 2011. Accessed at: <http://www.healthcare.gov/law/resources/regulations/prevention/recommendations.html>

<sup>3</sup> Kaiser Family Foundation – Health Research and Education Trust. Employer Health Benefits: 2012 Summary of Findings. Exhibit 13.7 shows that 41% of workers were in plans “where the services considered preventive changed because of the ACA.” The same analysis shows that 27% of workers were in plans “where cost sharing changed for preventive services because of the ACA.” We made the conservative assumption that these two groups overlapped completely, meaning that 41% experienced expanded coverage and/or reduced cost sharing, though in fact if some people in the second group were not in the first, the overall percentage of workers affected by expanded coverage or by reduced cost sharing as a result of the ACA could have been even higher than 41% and as high as 68% (41% + 27%).

<sup>4</sup> DeNavas-Walt C, Proctor BD, Smith JC. Census Bureau, Current Population Reports, P60-243, Income, Poverty, and Health Insurance Coverage in the United States: 2011, Government Printing Office, Washington, DC, 2012.

<sup>5</sup> We included people with non-group plans in this calculation, since non-group coverage tends to be less generous than employer-provided insurance, suggesting that at least 41% of people in the non-group market likely experienced expanded coverage for preventive services due to this provision.

- **Children (0-17):** Coverage includes regular pediatrician visits, vision and hearing screening, developmental assessments, immunizations, and screening and counseling to address obesity and help children maintain a healthy weight.
- **Women (18-64):** Coverage includes cancer screening such as pap smears for those ages 21 to 64, mammograms for those ages 50 to 64, and colonoscopy for those ages 50 to 64; recommended immunizations such as HPV vaccination for those ages 19 to 26, flu shots for all adults, and meningococcal and pneumococcal vaccinations for high-risk adults; healthy diet counseling and obesity screening; cholesterol and blood pressure screening; screening for sexually-transmitted infections and HIV; depression screening; and tobacco-use counseling. For plan years (in the individual market, policy years) beginning on or after August 1, 2012, additional preventive services specific to women, such as well-woman visits, screening for gestational diabetes, domestic violence screening and counseling, and prescription, FDA-approved contraception, must be covered with no cost sharing.<sup>6</sup>
- **Men (18-64):** Coverage includes recommended immunizations such as flu shots for all adults and meningococcal and pneumococcal vaccinations for high-risk adults; cancer screening including colonoscopy for adults 50 to 64; healthy diet counseling and obesity screening; cholesterol and blood pressure screening; screening for HIV; depression screening; and tobacco-use counseling.

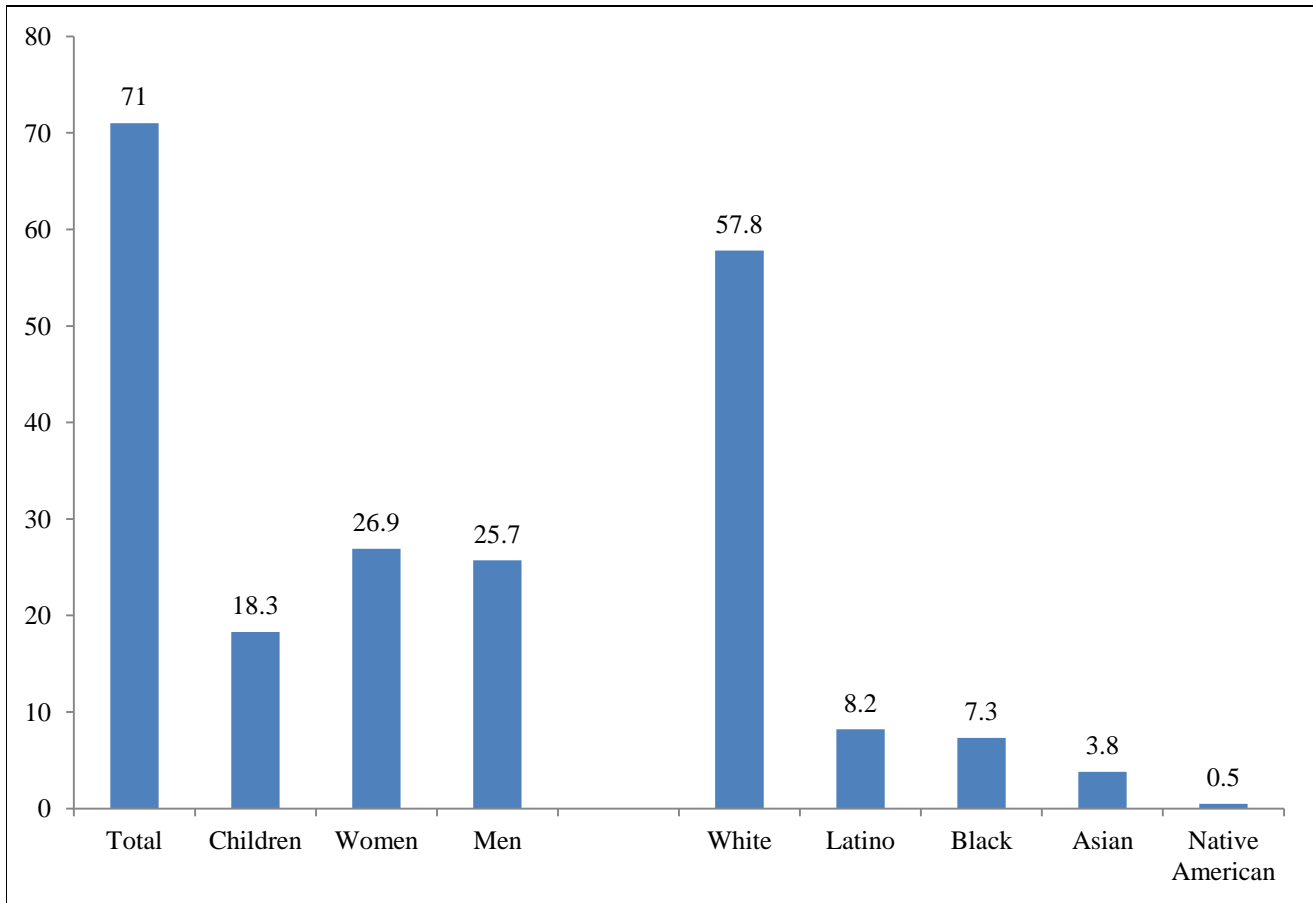
Figure 1 presents national totals, including breakdowns by age, gender, race and ethnicity. Table 1 presents totals by state.<sup>7</sup>

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<sup>6</sup> Certain religious employers are exempt from this requirement with respect to certain contraceptive services that otherwise would be required to be covered without cost sharing. In addition, with respect to certain other non-profit organizations with religious objections to contraception coverage, the Department of Health and Human Services (and the Departments of Labor and the Treasury) have provided for a temporary enforcement safe harbor during which rulemaking is being undertaken to accommodate such objections while preserving these latter organizations' employees' right to contraception coverage without cost sharing.

<sup>7</sup> Data come from the Census Bureau's Current Population Survey, for the years 2010-2012. We use three pooled years to allow for state-level estimates. We analyzed the proportion of all non-elderly individuals (0-64 years old) with private insurance in each category and state listed in Figure 1 and Table 1, and scaled the survey-weighted percentages to total 71 million individuals in aggregate, to match the projected number of people affected by this policy. Note that this overall approach is only a rough approximation and does not reflect any potential uneven distribution of individuals by age, race/ethnicity, or state of residence in private plans affected by the preventive coverage provisions of the Affordable Care Act.

**FIGURE 1: Number of Americans Estimated to be Receiving Expanded Preventive Services Coverage Under the Affordable Care Act (in Millions)<sup>8</sup>**



<sup>8</sup> The Census Bureau records race and ethnicity separately, which means that totals combining racial and ethnic groups sum to more than 100%.

**TABLE 1: Number of Americans Estimated to be Receiving Expanded Preventive Services Coverage Under the Affordable Care Act, by State**

State	Total	Children	Women	Men
Alabama	1,084,000	272,000	426,000	386,000
Alaska	164,000	44,000	60,000	60,000
Arizona	1,406,000	377,000	518,000	511,000
Arkansas	578,000	144,000	224,000	209,000
California	8,061,000	2,118,000	2,987,000	2,956,000
Colorado	1,288,000	348,000	478,000	462,000
Connecticut	945,000	246,000	361,000	338,000
Delaware	218,000	57,000	84,000	78,000
District of Columbia	141,000	22,000	63,000	56,000
Florida	3,762,000	912,000	1,470,000	1,380,000
Georgia	2,202,000	592,000	843,000	767,000
Hawaii	323,000	79,000	122,000	122,000
Idaho	367,000	109,000	130,000	128,000
Illinois	3,047,000	762,000	1,153,000	1,131,000
Indiana	1,508,000	406,000	554,000	548,000
Iowa	801,000	206,000	298,000	297,000
Kansas	684,000	186,000	255,000	242,000
Kentucky	975,000	243,000	374,000	359,000
Louisiana	932,000	238,000	356,000	338,000
Maine	301,000	70,000	122,000	109,000
Maryland	1,518,000	382,000	590,000	546,000
Massachusetts	1,773,000	433,000	690,000	650,000
Michigan	2,386,000	637,000	901,000	848,000
Minnesota	1,412,000	380,000	520,000	511,000
Mississippi	586,000	152,000	226,000	208,000
Missouri	1,441,000	379,000	532,000	529,000
Montana	213,000	52,000	82,000	78,000
Nebraska	477,000	128,000	176,000	173,000
Nevada	615,000	171,000	223,000	220,000
New Hampshire	365,000	91,000	141,000	133,000
New Jersey	2,209,000	590,000	816,000	802,000
New Mexico	373,000	95,000	146,000	132,000
New York	4,401,000	1,077,000	1,743,000	1,581,000
North Carolina	2,062,000	519,000	797,000	746,000
North Dakota	180,000	46,000	67,000	67,000
Ohio	2,742,000	695,000	1,037,000	1,010,000
Oklahoma	811,000	210,000	309,000	292,000
Oregon	907,000	220,000	360,000	327,000
Pennsylvania	3,151,000	761,000	1,218,000	1,172,000
Rhode Island	252,000	60,000	99,000	93,000
South Carolina	980,000	256,000	388,000	336,000
South Dakota	200,000	53,000	74,000	73,000
Tennessee	1,413,000	356,000	542,000	515,000
Texas	5,198,000	1,407,000	1,923,000	1,868,000
Utah	787,000	267,000	261,000	259,000
Vermont	151,000	31,000	62,000	58,000
Virginia	1,998,000	535,000	765,000	698,000
Washington	1,620,000	376,000	638,000	606,000
West Virginia	398,000	96,000	153,000	148,000
Wisconsin	1,459,000	378,000	542,000	538,000
Wyoming	136,000	36,000	48,000	51,000
<b>TOTAL</b>	<b>71,001,000</b>	<b>18,300,000</b>	<b>26,947,000</b>	<b>25,745,000</b>