

# HEALTH REFORM FACT SHEET

## IMPROVING ACCESS TO HIV PREVENTION, CARE, AND TREATMENT FOR WOMEN

### OVERVIEW

The Affordable Care Act (ACA) presents an unprecedented opportunity to make strides against the HIV epidemic and to meet the goals of the National HIV/AIDS Strategy. However, ensuring that the ACA lives up to its promise and provides the tools we need to decrease new infections, increase access to care, and address health inequities will take leadership and vision from state and federal policy makers, public health officials, providers, advocates, and consumers alike. This is particularly true if we are to address HIV-related health disparities and the disproportionate impact of the epidemic on women of color.

Below are the top five provisions that will have the most significant impact on women living with and at risk for HIV, including action steps that we as a community must take to make sure these provisions are implemented in ways that address health disparities:

### 1. MEDICAID EXPANSION

In 2014, the ACA allows states to expand Medicaid to most people with income up to 138% of the federal poverty level (FPL). However, the Supreme Court's decision taking away a major enforcement mechanism for the expansion creates a question of when and if every state will expand the program. Expanding Medicaid will increase access to essential HIV prevention, care, and treatment services for the majority of women living with HIV who have income below the federal poverty level.

**ACTION STEP:** Urge your state to expand Medicaid to achieve the individual health, public health, and economic benefits that come with improved access to regular HIV care.

### 2. INTEGRATION OF REPRODUCTIVE HEALTH AND HIV CARE AND TREATMENT IN MEDICAID

Even in states that do not expand Medicaid, the ACA includes a number of reforms aimed at increasing the quality of care in the program. This is particularly important for women living with HIV who are more

likely to be covered by Medicaid under current law than men. For instance, the Medicaid Health Home program offers states enhanced federal funding to provide care coordination services for people living with chronic conditions, including HIV. Offering a range of support services – such as peer counseling, targeted social services referrals, and treatment management – is particularly important for women living with HIV, many of whom are primary caretakers for other family members and have multiple health and social services needs. New options to increase the availability of family planning services through Medicaid, which may include HIV testing and counseling as well as other reproductive health services, also provide an opportunity to improve the ability of the Medicaid program to meet the needs of women living with and at risk for HIV.

**ACTION STEP:** Urge your state to consider implementing Medicaid programs that emphasize whole-person care and that integrate reproductive health and HIV services.

### 3. PRIVATE INSURANCE EXPANSION

In addition to the Medicaid expansion, the ACA increases access to private insurance coverage through new exchanges/marketplaces where people will be able to compare and purchase private insurance in 2014. In addition, the ACA prohibits plans from charging higher premiums based on health status or gender, imposing lifetime and annual limits on services, and denying coverage because a person has a pre-existing condition. Finally, in order to make this insurance affordable, people with income between 100 and 400% FPL will have access to federal subsidies to help them pay for coverage.

**ACTION STEP:** Ensure that new exchanges/marketplaces are reaching out to women living with and at risk for HIV to make sure they are aware of new coverage options and financial assistance to pay for insurance. These outreach and enrollment programs must include community-based organizations who are already working with women living with and at risk for HIV.

#### 4. ESSENTIAL HEALTH BENEFITS COVERAGE

Access to insurance is only meaningful if the benefits coverage attached to that insurance is able to meet HIV prevention, care, and treatment needs. To this end, the ACA requires Medicaid for newly eligible beneficiaries as well as private insurance plans sold in the individual and group markets to cover ten categories of “Essential Health Benefits” in 2014. Even with these benefits requirements, however, states will still have a great deal of flexibility in defining what services will be provided to newly eligible Medicaid beneficiaries as well as those purchasing insurance in the private market. For instance, whether plans cover comprehensive case management and other services that are particularly important to engage and retain women living with HIV in care, will vary by state and by plan.

**ACTION STEP:** Ensure that state Medicaid programs and private insurance plans cover the range of benefits that people living with HIV need to stay healthy, including case management and other support services.

#### 5. COMMUNITY HEALTH CENTER INVESTMENTS

The ACA makes significant investments to shore up the nation’s health care workforce and infrastructure through expansion of community health centers. As community health centers increase their capacity, the HIV community is working to ensure that community health centers have the expertise to serve women living with and at risk for HIV. Many women living with HIV are already seeking care through community health centers and new ACA investments present an opportunity to support more integrated reproductive health and HIV services.

**ACTION STEP:** Build a relationship with your local community health center and find out what capacity it has to serve women living with and at risk for HIV.

#### RESOURCES ON WOMEN LIVING WITH AND AT RISK FOR HIV AND THE ACA:

For questions, contact [Amy Killelea](#).

- [NASTAD Health Reform Resources](#)
- National Health Law Program (NHeLP), [10 Reasons the Medicaid Expansion Benefits Women Living with HIV \(August 2012\)](#)
- Center for Health Law and Policy Innovation of Harvard Law School and 30 for 30 Campaign, [Affordable Care Act Priorities: Opportunities for Addressing the Critical Health Care Needs of Women Living with and at Risk for HIV \(July 2012\)](#)