

# Women's Access to Care: A State-Level Analysis of Key Health Policies

## PRIVATE INSURANCE COVERAGE: HIGHLIGHTS

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Nationally, more than 60% of women ages 18 to 64 are covered by private health insurance, primarily through employer-sponsored coverage. States can improve access for many of these women by requiring that insurers cover preventive screenings, protect continuity under managed care, and pay for experimental therapies.

### Scope of Coverage

Historically, insurers have not covered some services of importance to women such as contraceptives or mental health services. States are beginning to address these disparities by requiring plans to cover some of the gaps in benefits. States, however, have limited jurisdiction over self-funded plans, which are under federal authority.

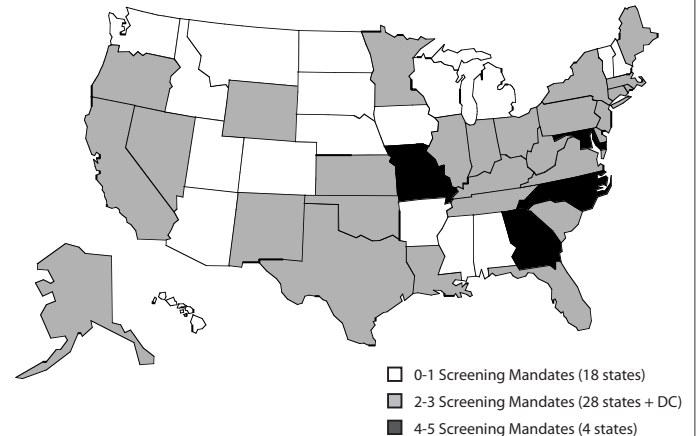
- 20 states require coverage for all FDA-approved contraceptives in plans that cover prescription drugs; however, 15 of these states allow exemptions for insurers and/or employers who have moral or religious objections.
- 10 states require private insurers to cover infertility treatment, however, 3 of these states allow exemptions for insurers and/or employers with moral or religious objections.
- Certain mental illnesses, particularly depression, anxiety disorders, and eating disorders, are more prevalent among women than men. 35 states have enacted mental health parity laws, however, only 8 are comprehensive in nature.

### Screening Mandates

Screening services are important for early detection and treatment of several diseases that affect women, and state policies mandate that plans cover many of them. There is great variation in the types of screenings mandated, the guidelines followed, and exceptions allowed.

- Nearly all states require coverage for annual breast cancer screenings beginning at age 50 and at least biennial screenings for women ages 40 to 49.
- Half as many (25 states and DC) require coverage for annual cervical cancer screening.
- Only 3 states require coverage for screening for chlamydia, the most common bacterial sexually transmitted disease affecting women.
- Only 1 state, Maryland, requires coverage for screenings for all of the following: breast cancer, cervical cancer, colorectal cancer, osteoporosis, and chlamydia. Utah does not have any screening mandates.

### Number of Screening Coverage Mandates State Requires for Private Insurers, 2001- 2002\*



\*Screening coverage mandates include screenings for breast cancer, cervical cancer, colorectal cancer, osteoporosis, & chlamydia.  
SOURCE: National Conference of State Legislatures, Health Policy Tracking Service, <http://www.hpts.org>, 2001-2002.

### Managed Care Protections

More than three-quarters of privately insured women are enrolled in managed care arrangements. Many states have enacted policies that facilitate access to OB/GYNs, promote continuous care, and cover experimental treatment for managed care enrollees.

- Since reproductive health care is integral to women's basic primary care, many states allow women to have direct access to OB/GYNs without "gatekeeper" approval. 43 states and DC allow enrollees some level of direct access to OB/GYNs, either through designation as a primary care provider (PCP) or by allowing visits without requiring PCP authorization.
- In response to the churning of health care providers in and out of managed care networks, 25 states have enacted policies that require managed care plans to allow pregnant women to continue with their provider through the postpartum period even if the provider no longer participates in the plan.
- 15 states have policies that require managed care plans to cover care for women enrolled in clinical trials, which can offer access to experimental therapies for very ill patients. Most policies are limited in scope, often to cancer-related treatments. Only 5 states require coverage for all four phases of clinical trials.

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## Selected State Policies: Private Insurance and Women's Access to Care

State	Contraceptive Coverage Mandates	Mental Health Parity	Direct Access to OB/GYNs or OB/GYN as PCP	Coverage for Routine Clinical Trial Costs
<b>Total States</b>	<b>20</b>	<b>35</b>	<b>43 + DC</b>	<b>14</b>
Alabama		⊙	●	
Alaska				
Arizona	●*	○		●
Arkansas		○	●	
California	●*	○	●	●
Colorado		○	●	
Connecticut	●*	●	●	●
Delaware	●*	○	●	●
District of Columbia			●	
Florida			●	
Georgia	●	⊙	●	●
Hawaii	●*	○		
Idaho			●	
Illinois		○	●	●
Indiana		●	●	
Iowa	●			
Kansas			●	
Kentucky		●	○	
Louisiana		○	●	●
Maine	●*	○	●	●
Maryland	●*	●	●	●
Massachusetts	●*	○	●	
Michigan			●	
Minnesota		●	●	
Mississippi			●	
Missouri	●*	○	●	
Montana		○	●	
Nebraska		○	●	
Nevada	●*	○	●	
New Hampshire	●	○	●	○ (medically necessary)
New Jersey		○	●	
New Mexico	●*	●	●	●
New York	●*		●	
North Carolina	●*	○	●	○ (medically necessary)
North Dakota				
Ohio			●	
Oklahoma		○	●	
Oregon			●	
Pennsylvania			●	
Rhode Island	●*	●	●	
South Carolina		○	●	
South Dakota		○		
Tennessee		○	●	
Texas	●*	○	●	
Utah		○	●	
Vermont	●	●	●	●
Virginia		○	●	●
Washington	●		●	
West Virginia		○	●	
Wisconsin			●	
Wyoming				

- Notes:**
- State has policy
  - State has a limited policy
  - ⊙ State requires insurers to sell coverage but employers are not required to purchase.
  - \* Law includes an exemption for insurers and/or employers who have a moral or religious objection to contraception.

**Sources:** **Information on Contraceptive Coverage**, National Women's Law Center, unpublished data collected for this report; Alan Guttmacher Institute, *State Policies in Brief* (New York: Alan Guttmacher Institute, February 2003). **Data current as of February 2003**

**Information on Mental Health Parity**, National Mental Health Association (NMHA), "What Have States Done to Pass Parity?" (Washington, D.C.: NMHA, May 2002). NMHA, "Mandated Mental Health and Substance Abuse Benefits Chart," Draft (Washington, D.C.: NMHA, December 2001). **Data current as of May 2002**

**Information on Access to OB/GYNs**, The Henry J. Kaiser Family Foundation, State Health Facts Online, [Online] <http://www.statehealthfacts.kff.org>, citing National Conference of State Legislatures, Health Policy Tracking Service. **Data current as of November 2001**

**Information on Coverage for Clinical Trials**, National Conference of State Legislatures, "Mandated Benefits: Clinical Trial Coverage Requirements," April 8, 2002, [Online] <http://www.hpts.org>. **Data current as of April 2002**