

## **Fact Sheet: Benefits for Asian Americans and Pacific Islanders of New Affordable Care Act Rules on Expanding Prevention Coverage**

Today, too many Americans don't get the preventive health care they need to stay healthy, avoid or delay the onset of disease, lead productive lives, and reduce health care costs. Often because of cost, Americans use preventive services at about half the recommended rate. Yet chronic diseases, such as heart disease, cancer, and diabetes – which are responsible for 7 of 10 deaths among Americans each year and account for 75 percent of the nation's health spending – often are preventable. Cost sharing (including deductibles, coinsurance, or copayments) reduces the likelihood that preventive services will be used. Expanding access to preventive care can reduce health disparities for 16 million Asian Americans and Pacific Islanders (5 percent of the population) by helping to prevent many diseases that have a disproportionate impact on this group.<sup>1</sup>

The Affordable Care Act – the health insurance reform legislation passed by Congress and signed into law by President Obama on March 23 – will help make prevention affordable and accessible for all Americans by requiring health plans to cover preventive services and by eliminating cost sharing. According to new regulations released by the U.S. Departments of Health and Human Services (HHS), Labor, and the Treasury, if an individual or family enrolls in a new health plan on or after September 23, 2010, then that plan will be required to cover recommended preventive services without charging a deductible, copayment or coinsurance.<sup>2</sup> Expanding access to preventive care can improve health outcomes for Asians and Pacific Islanders.

### **Preventing and Controlling Cancer**

Despite our progress in controlling cancer, breast cancer, cervical cancer, colon cancer, and lung cancer continue to cause thousands of preventable deaths in the U.S each year. Asian Americans and Pacific Islanders tend to be less affected than other groups by cancer, but also are less likely to get screened for cancer. For example, the percent of Asian American women getting the recommended mammogram or Pap smear is 54 and 64 percent respectively, compared to 68 and 79 percent for white women. An even greater disparity exists for colorectal cancer screening: the rate is 42 percent among Asian Americans versus 59 percent among non-Hispanic white Americans. In addition, Vietnamese American women have a higher cervical cancer incidence rate than any ethnic group in the United States – five times that of non-Hispanic white women.<sup>3</sup>

The new regulations ensure that new health plans offer coverage without cost-sharing for

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<sup>1</sup> Unless otherwise noted, all statistics are from the U.S. Department of Health and Human Services, Office of Minority Health.

<sup>2</sup> To help individuals who like the coverage they have keep it, some plans that were in effect on March 23, 2010 and that were not significantly modified thereafter will be “grandfathered”. Grandfathered health plans are not subject to this policy. Many of the 98 million people in group health plans that are expected to be grandfathered and thus not subject to these regulations already have preventive services coverage.

For more information about the definition of a grandfathered plan, see [http://www.healthreform.gov/newsroom/keeping\\_the\\_health\\_plan\\_you\\_have.html](http://www.healthreform.gov/newsroom/keeping_the_health_plan_you_have.html)

<sup>3</sup> <http://www.cdc.gov/omhd/AMH/factsheets/cancer.htm>

a variety of important cancer prevention tools, such as:

- Preventing colon cancer: Screening tests for colon cancer for adults over 50.
- Preventing breast cancer: Annual mammograms for women over 40. Other services to prevent breast cancer will also be covered, including a referral to genetic counseling and a discussion of chemoprevention for certain women at increased risk.
- Preventing cervical cancer: Regular Pap smears to screen for cervical cancer and coverage for the HPV vaccine that can prevent cases of cervical cancer.
- Tobacco cessation interventions – like counseling or medication to help individuals quit.

### **Preventing Heart Disease**

Even though Asian Americans and Pacific Islanders have lower rates of heart disease than other racial and ethnic groups, they are experiencing increasing mortality rates for cardiovascular disease.<sup>4</sup> Catching heart disease and controlling its risk factors early can save lives and promote healthy aging.

Under the new regulations, new health plans must offer coverage without cost sharing for a number of services that will prevent and control these diseases, including:

- Screening for obesity and dietary counseling from your doctor and other health professionals to promote sustained weight loss
- Blood pressure screening
- Counseling on the use of daily aspirin to reduce the risk of a heart attack and stroke
- Tests to screen for high cholesterol and diabetes

### **Promoting Healthy Pregnancy**

Some Asian Americans and Pacific Islander populations experience high rates of infant mortality – higher than the U.S. infant mortality rate of 6.8 deaths for every 1,000 live births. For example, the infant mortality rate for Native Hawaiians was 9.6 per 1,000 live births, much higher than the national rate.<sup>5</sup>

The new law and regulations make sure that more mothers have access to services they need to ensure a healthy pregnancy, such as:

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<sup>4</sup> <http://www.familiesusa.org/assets/pdfs/AsAm1044.pdf>

<sup>5</sup> <http://www.cdc.gov/omhd/Highlights/2010/HMay10.html>

- Screening for conditions that can harm pregnant women or their babies, including iron deficiency, hepatitis B, a pregnancy related immune condition called Rh incompatibility, and a bacterial infection called bacteriuria.
- Special, pregnancy-tailored counseling from a doctor that will help pregnant women quit smoking and avoid alcohol use.
- Counseling to support breast-feeding and help nursing mothers.

### **Controlling Hepatitis B**

In 2005, Asian Americans and Pacific Islanders aged 40 years and older were 1.2 times more likely to have Hepatitis B than non-Hispanic whites.

The Affordable Care Act and the new regulation require new health plans to cover the Hepatitis B vaccine for many individuals, which will keep people healthy and prevent the spread of the disease.

### **Preventive Care Means New Cost Savings for all Americans**

While the elimination of co-pays, deductibles and other cost sharing under the Affordable Care Act will mean cost savings for all Americans, it will provide significant savings for Americans in greatest need of important, potentially life-saving preventive services. For instance, if a 58-year old woman who is at risk for heart disease should receive a mammogram, a colon cancer screening, a Pap test, a diabetes test, a cholesterol test, and an annual flu shot; under a typical insurance plan, these tests could cost the consumer more than \$300 out of her own pocket.

The proven benefits of preventive services also include additional cost savings for the nation from improved health and productivity of the nation's workforce, and reduced national health care spending.

- If just five preventive services –colorectal and breast cancer screening, flu vaccines, and counseling on smoking cessation and regular aspirin use – were utilized effectively, 100,000 deaths could be averted each year. In addition, effective cancer screening and early and sustained treatment could reduce the cancer death rate by 29 percent.
- 69 million workers reporting missed days due to illness each year, and reducing economic output by \$260 billion per year.
- Obese individuals have health care costs 39 percent above average, and reducing obesity and the diseases related to it could lower premiums overall by 0.05 to 0.1 percent.
- Every dollar spent on immunizations could save \$5.30 on direct health care costs and

\$16.50 on total societal costs of disease.