

## **Fact Sheet: Benefits for Latinos 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 by helping to prevent many diseases that have disproportionately affected 47 million Latinos (15 percent of the population).<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 Latinos.

### **Reducing Obesity, Preventing Heart Disease, and Targeting Diabetes**

Latinos suffer from obesity, heart disease, and diabetes at higher levels than white Americans. Roughly 38 percent of Latinos were obese in 2008, compared to 33 percent of whites, with the disparity greater among women (43 percent compared to 33 percent).<sup>3</sup> While overall, Latinos have lower rates of obesity than African Americans, this is reversed among children: 38 percent of Latino youth are obese, compared to 36 percent of black youth and 29 percent of white youth ages 2 to 19.<sup>4</sup> Higher rates of obesity may contribute to higher rates of chronic, preventable disease among Latinos compared to whites. While less likely to have heart disease, Latinos are more likely to die of it than white Americans, mostly likely due to late detection and inadequate treatment. Latinos

---

<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> Flegal KM, Carroll MD, Ogden CL, et al. “Prevalence and Trends in Obesity among U.S. Adults, 1999-2008.” *Journal of the American Medical Association*, 303(3): 235-41, 2010.

<sup>4</sup> Ogden CL, Carroll MD, and Flegal KM. “High Body Mass Index for Age among U.S. Children and Adolescents, 2003-2006.” *Journal of the American Medical Association*, 299(20): 2401-2405, 2008.

are 1.6 times more likely to die of diabetes as whites. When diabetes is not managed properly, patients can incur kidney disease, a condition that is much more likely among Latinos.<sup>5</sup>

Because of the Affordable Care Act and the new regulations, new health plans must offer coverage without cost sharing for services that will prevent and control these diseases, like:

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

### **Preventing and Controlling Cancer**

Latinas have disproportionate rates of cervical cancer, which they contract at twice the rate of white women. Since 1998, mammography levels have been lower among Latinas compared with non-Hispanic white and black women.<sup>6</sup> Only 37 percent of Latinos received a colorectal cancer screening in 2007, compared with 57 percent of whites.<sup>7</sup>

The new regulations ensure that new health plans offer coverage without cost-sharing for a variety of important cancer prevention tools, such as:

- 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 colon cancer: Screening tests for colon cancer for adults over 50.

### **Preventing and Treating HIV/AIDS**

---

<sup>5</sup> Agency for Healthcare Research and Quality, *National Healthcare Disparities Report*, 2008

<sup>6</sup> <http://www.cdc.gov/nchs/data/hus/hus08.pdf#030>

<sup>7</sup> Agency for Healthcare Research and Quality, *National Healthcare Disparities Report*, 2008

The death rate from HIV/AIDS for Latinos is 2.5 to 3 times higher than that of whites. Latinas are 5 times as likely as white women to have AIDS, while Latino men are 3 times as likely.

The new law requires insurance plans to offer coverage without cost-sharing for HIV screening tests for at-risk individuals, which will enable more people to get access to life-saving treatment more quickly.

### **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.