

## **Fact Sheet: Benefits for African Americans 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 will reduce health disparities for 41 million African Americans (14% of the population) by helping to prevent many diseases that have a disproportionate impact on this group. The death rate for African Americans is higher than that of whites for heart diseases, stroke, cancer, asthma, influenza, diabetes, and HIV/AIDS – conditions that can often be prevented.<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 African Americans.

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

African Americans suffer from obesity, heart disease, and diabetes at high levels. In 2008, 44 percent of African Americans were obese, compared to 33 percent of whites. Nearly 50 percent of African American women were obese, compared to 33 percent of white women.<sup>3</sup> African American adults are less likely to be diagnosed with coronary disease, but are more likely to die from heart disease. This may result in part from lack of timely prevention or screening. High blood pressure contributes to both heart disease and strokes, and African American adults are 1.5 times more likely to have high blood pressure and 1.7 times more likely to have a stroke than white adults. And, compared to whites, African Americans are twice as likely to both be diagnosed with diabetes and die from the disease.

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:

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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> 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.

- 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**

African Americans are more likely to develop and die from cancer than any other racial or ethnic group. African American men are 1.2 times more likely than non-Hispanic white men to suffer from colorectal cancer. According to the Centers for Disease Control and Prevention, at least six out of every 10 colorectal cancer deaths could be prevented if every adult 50 years or older got screened regularly. While African American women are 10 percent less likely to be diagnosed with breast cancer, they are about one-third more likely to die from the disease compared to non-Hispanic white women. In part, this is because they are more likely to have advanced breast cancer when first diagnosed.

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.

### **Promoting Healthy Pregnancy**

The U.S. infant mortality rate is a troublingly high 6.8 deaths for every 1,000 live births, and 8.2 percent of babies have a low birth weight, up 17 percent since 1990.<sup>4</sup> African Americans' rate of infant mortality is more than double the rate for whites, and African American babies are more likely to be born pre-term or with a low birth weight. African-American mothers were 2.5 times as likely as non-Hispanic white mothers to begin prenatal care in the 3rd trimester or not receive prenatal care at all.

The new law and regulations make sure that more mothers have access to services they need to

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<sup>4</sup> Centers for Disease Control and Prevention, *Health United States 2009*.

ensure a healthy pregnancy, such as:

- 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

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

African Americans experience new HIV infections at seven times the rate of whites.<sup>5</sup> Nearly half of people with HIV/AIDS are African Americans.

The new law requires insurance plans to offer coverage without cost-sharing for HIV screening tests for at-risk individuals. This 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.

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<sup>5</sup> Centers for Disease Control and Prevention. HIV/AIDS Surveillance Report, 2007. Vol. 19. Atlanta: U.S.

- Every dollar spent on immunizations could save \$5.30 on direct health care costs and \$16.50 on total societal costs of disease.