

Raising Women's Voices for the health care we need

ADVOCACY TALKING POINTS AND QUESTIONS No. 1

INSURANCE COMPANIES DENYING COVERAGE DUE TO PRE-EXISTING CONDITIONS

1. Talking Point: In many states, insurance companies can refuse to provide coverage to individuals who really need health care – such as women with breast cancer or diabetes. This is outrageous and must be stopped!

- **Question for public official or candidate:** We rely on government to hold insurance companies accountable, so that no corporation can deny us access to care. So, what will you do to end such unfair denials and make sure everyone can get health insurance – whether they are healthy or sick?

2. Talking Point: *The New York Times* recently revealed that some insurance companies won't cover women who have had c-sections. This is really unfair, especially when about one-third of pregnant women now have their babies by c-section. Sometimes, we are rushed into c-sections by our doctors when they aren't really necessary. Now we can be denied health insurance because of it!

- **Question for public official or candidate:** Government shouldn't allow insurance companies to get away with discriminatory practices like this. Will you promise to fight for laws that prohibit insurance companies from denying coverage to women?

3. Talking Point: As women we want peace of mind about our families' health care. Our families have the right to get the health care we need, and the best way to make sure that our families always have health care is to enact comprehensive health reform. We need the kind of reform that would give every family affordable, continuous access to quality care that cannot be taken away.

- **Question for public official or candidate:** What will you do to make sure everyone in the United States has quality, affordable health care that is in effect no matter who we are - whether we are healthy or sick, wealthy or poor, women or men?

4. Talking Point: Our government can take very immediate steps to protect us from outrageous insurance company policies. For example, states can pass laws requiring insurance companies to provide comprehensive insurance to everyone who applies, no matter if they are healthy or sick. Five states (Maine, Massachusetts, New Jersey, New York and Vermont) have already done this.

- **Question for public official or candidate:** Will you pledge to fight for a ban of abusive insurance company practices, like refusing to cover women who are sick? Please be specific about what you would do.

ADVOCACY TALKING POINTS AND QUESTIONS No. 2

ELIMINATING HEALTH CARE DISPARITIES

1. Talking Point: Women from minority populations, such as African American and Hispanic women, lesbian women, women with disabilities, and women veterans, and also low-income women find it particularly difficult to access care. Many cannot get any health care at all. And even when they do get care, this is often of much lower quality. For example, African American women have been found to get less comprehensive treatment for breast cancer than white women, and are more likely to die from the disease.¹

- **Question for public official or candidate:** Do you agree that we all have a right to equal access to health care, and that no one should be discriminated against because of their income, race, sexual orientation, or similar factors? What measures do you propose to ensure that women from minority groups and low-income women get the same quality care as everyone else?

2. Talking Point: Studies show that women with AIDS receive less optimal care than men,² and minority women are particularly affected. Hispanic women are nearly five times as likely to die from AIDS as white non-Hispanic women, mainly due to a lack of access to care.³ Such appalling disparities in health outcomes are also found regarding other diseases. For example, even though African American women are less likely to get breast cancer than white women, their death rate is much higher.⁴

- **Question for public official or candidate:** These examples show that women from minority ethnic groups suffer poorer health outcomes than white women, and studies show that this is often a consequence of daunting hurdles they face in getting adequate health care. Do you agree that such disparities are an injustice and if so, how do you propose to address this?

3. Talking Point: Poor women, including many women of color, are not able to access comprehensive reproductive health care. This is largely due to the Hyde Amendment, which prohibits Medicaid to help with costs of abortions.

- **Question for public official or candidate:** It is unfair to have a two-tiered system of health care, in which certain services are available only to those women who can afford them. Will you commit to actively working to repeal the Hyde Amendment so that all women can get the care they need, regardless of how wealthy they are?

4. Talking Point: Women with limited English proficiency (LEP) may experience difficulty while communicating with their doctors.⁵ Often, they have to bring family members with them to interpret, which interferes with proper diagnoses and treatment, and compromises doctor-patient confidentiality.

- **Question for public official or candidate:** Will you mandate that interpretation services are available for every hospital and doctor's practice?

5. Talking Point: Inaccessible medical offices and health facilities often serve as barriers to women with disabilities. For example, women with disabilities who have given birth in hospitals report that the hospital had failed to prepare for needed disability-specific accommodations. Moreover, women with disabilities often experience inferior quality of care. Specifically, they were 20 percent less likely to receive breast-conserving surgery compared to women without disabilities.⁶

- **Question for public official or candidate:** Will you ensure that women with disabilities are no longer discriminated against by hospitals and doctors' practices? Describe how you will work to ensure that women with disabilities get accessible and quality health care.

6. Talking Point: Studies have shown that doctors fail to adequately screen lesbians for certain cancer risks, and that lesbians are therefore at an increased risk to get cancer.⁷ This neglectful practice is appalling.

- **Question for public official or candidate:** Do you agree that the LGBT community has an equal right to comprehensive health care? If so, would you mandate that special training be included in the health curriculum to improve health providers' ability to appropriately serve the LGBT community?

7. Talking Point: Health care for female military veterans lags behind the care offered to male vets at many VA facilities. Female veterans aren't getting the same quality of outpatient care as men in about one-third of those facilities that offer it.

- **Question for public official or candidate:** Women who serve their country in the armed forces deserve high quality and comprehensive medical treatment. Do you support enacting legislation to ensure that women vets' needs are promptly and adequately met?

8. Talking Point: Over the past several years, a man's risk of dying from cardiovascular disease has decreased while that of women has not improved at all. Women are often excluded from clinical trials causing the diseases that affect women to be less understood.

- **Question for public official or candidate:** Much of the research done on the most common diseases, including things like cardiovascular disease, is government funded. Will you encourage and fund gender-specific research so we understand the medical, social and environmental reasons for these disparities and eliminate them?

¹ M. Banerjee *et al.*, "Disentangling the Effects of Race on Breast Cancer Treatment," *Cancer*, Vol. 110, No. 10 pp. 2169-2177.

² *Women and HIV/AIDS in the United States* (Kaiser Family Foundation: 2006).

³ National Alliance for Hispanic Health, *Quality Health Services for Hispanics: The Cultural Competency Component* (U.S. Department of Health and Human Services: 2001).

⁴ *American Cancer Society, Cancer Facts & Figures for African-Americans 2007-08*, Atlanta, American Cancer Society 2007.

⁵ Eliminating racial and ethnic disparities in women's health care is the focus of a national symposium.

http://www.commonwealthfund.org/newsroom/newsroom_show.htm?doc_id=223590.

⁶ "Disparities in Breast Cancer Treatment for Women with Disabilities,"

http://bidmc.harvard.edu/tools/newsnow/pr_out.asp?pr_id=1424.

⁷ www.lgbthealth.net. See also I. Meyer, "Prejudice, Social Stress and Mental Health in Lesbian, Gay and Bisexual Populations: Conceptual Issues and Research Evidence," *Psychological Bulletin*, 129.674-697 (2003).

ADVOCACY TALKING POINTS AND QUESTIONS No. 3

MAKING HEALTH CARE AFFORDABLE FOR WOMEN, FAMILIES AND COMMUNITIES

1. Talking Point: Skyrocketing health care costs have affected everyone – not just working families, but business owners too. One of the ways that employers are dealing with this is by cutting back on offering dependent health insurance coverage. This is having a devastating affect on women and children because we're less likely to get insurance through our own jobs - which are often part-time with no benefits, and more likely to rely on dependent coverage.

- **Question for public official or candidate:** What will you do to make sure that every woman, whether she is employed full-time, part-time or not at all, has continuous, affordable access to health care?

2. Talking Point: Women are acutely hurt by the high cost of health care because we earn less money and have different health care needs than men. The inequity is even worse in the 75 percent of states where insurance companies can charge women more than they charge men for the same health insurance plan. This gender discrimination squeezes the budgets of women and families and it's not fair. Now we can no longer make our own decisions about the health care that's best for us and our families.

- **Question for public official or candidate:** We rely on government to be a watchdog over insurance companies and to make sure they treat people equally and don't deny access to care to anyone. Will you stop insurance companies from discriminating against women and making health care unaffordable for us by charging women more than men?

3. Talking Point: The health care crisis is one of the biggest worries for women who are concerned about our families' health and economic well-being. The best way to give women peace of mind and make sure our families can always get affordable health care is to enact comprehensive health care reform. This would give every family the right to affordable, continuous access to quality care that cannot be taken away.

- **Question for public official or candidate:** What will you do to make sure everyone in the United States can get quality health care whenever we need it, so that care is always available and affordable for all women and our families?

4. Talking Point: Some politicians want to increase the use of Health Savings Accounts that make people pay health care costs out of their own pockets. But this puts an unfair burden on women because we tend to need more health care services and earn less money. A woman with this kind of plan who is having a baby, for example, might have to pay as much as \$20,000 for the birth of her child.

- **Question for public official or candidate:** Will you pledge to oppose health reform plans that expose women to even greater out-of-pocket medical costs and put us more at risk for being overwhelmed by medical debt?