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Department of Obstetrics and Gynecology at the Penn State College of Medicine;  
Planned Parenthood Keystone; PA Campaign for Women's Health;  
and Hershey Indivisible Team Health Care Committee.

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# Women's Health Care: Do You Know What's at Stake?

October 17, 2017

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PennState  
College of Medicine



**PennState Health**  
Milton S. Hershey  
Medical Center

**Department of  
Obstetrics and Gynecology**



# Hershey Indiv<sup>★</sup>isib<sup>★</sup>le Team



An educational event for community members and Penn State students, faculty, and staff.

Co-sponsored by the Penn State Center for Women's Health Research;  
Department of Obstetrics and Gynecology at the Penn State College of Medicine;  
Planned Parenthood Keystone; PA Campaign for Women's Health;  
and Hershey Indivisible Team Health Care Committee.

Tuesday, October 17, 2017  
6-8 pm

Penn State Hershey Medical Center  
Fitness & Conference Center  
500 University Drive, Hershey 17033

## Women's Health Care: Do You Know What's at Stake?

Panel Moderator: **Cynthia Chuang, MD, MSc**  
Professor and Chief, Division of General Internal Medicine



**Douglas Leslie, PhD**

*Health Insurance 101*

Professor and Director of the Center for  
Applied Studies in Health Economics



**Carol Weisman, PhD**

*Access to Reproductive Services*

Distinguished Professor of Public Health Sciences  
and Obstetrics and Gynecology



**Jennifer McCall-Hosenfeld, MD, MSc**

*Preventive Services Across the Lifespan*

Associate Professor and Director of the Penn State  
Center for Women's Health Research



**Cheri Rinehart, BSN**

*Influence Your Health Care through Advocacy*

President and CEO, Pennsylvania Association  
of Community Health Centers



Refreshments will be served. Space is limited, so please register for the  
event at: <https://pennstatehershey.tfaforms.net/276>

# Health Insurance 101

Doug Leslie, PhD

Center for Applied Studies in Health Economics  
Department of Public Health Sciences



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# Why do we need insurance?

- Insurance protects us against unforeseen “bad” events



- The “unforeseen” part is important



# How does health insurance work?

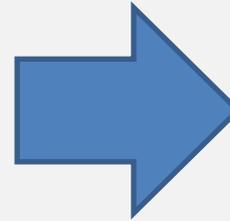
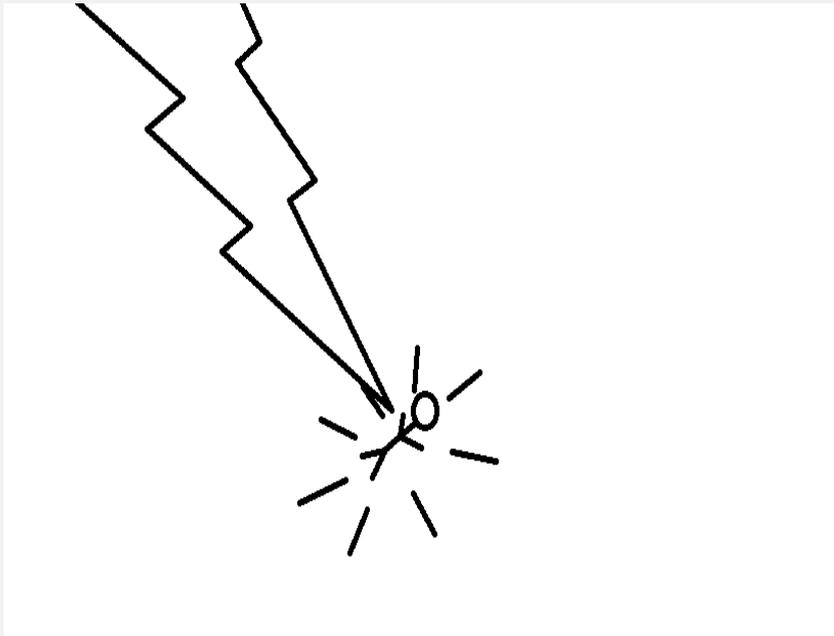
- You pay a monthly premium
- If you use health care services, insurance pays
- Theoretically, premiums are equal to the average cost of insurance payments



# Let's look at an example...

1%

\$50,000



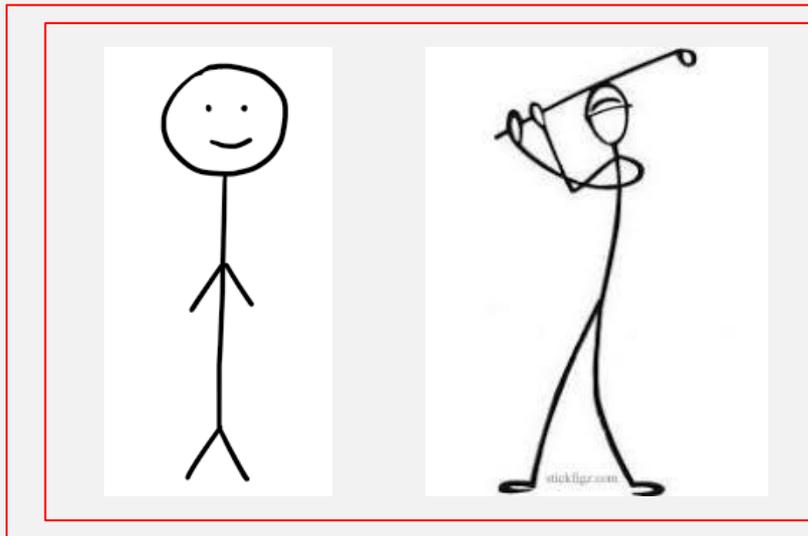
Expected cost:  $\$50,000 \times 0.01 = \$500$



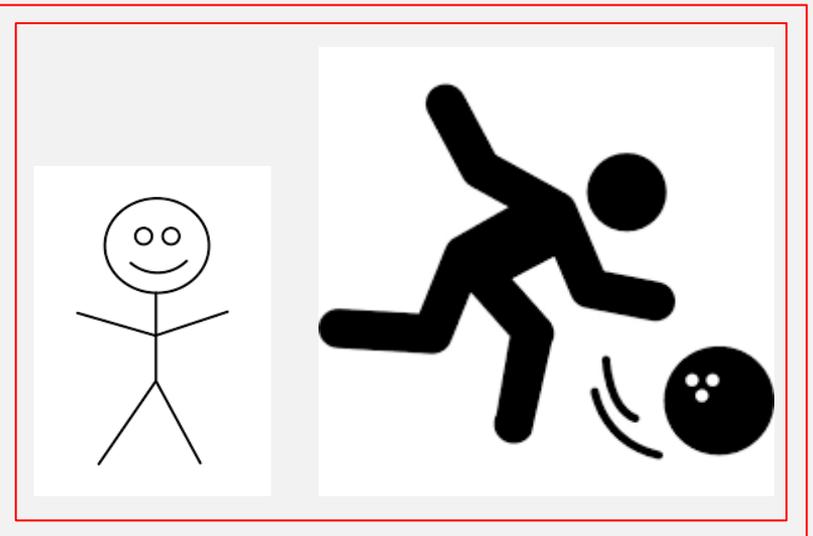
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# But not all people are the same

- Some may be more likely to be hit by lightning than others



High risk



Low risk

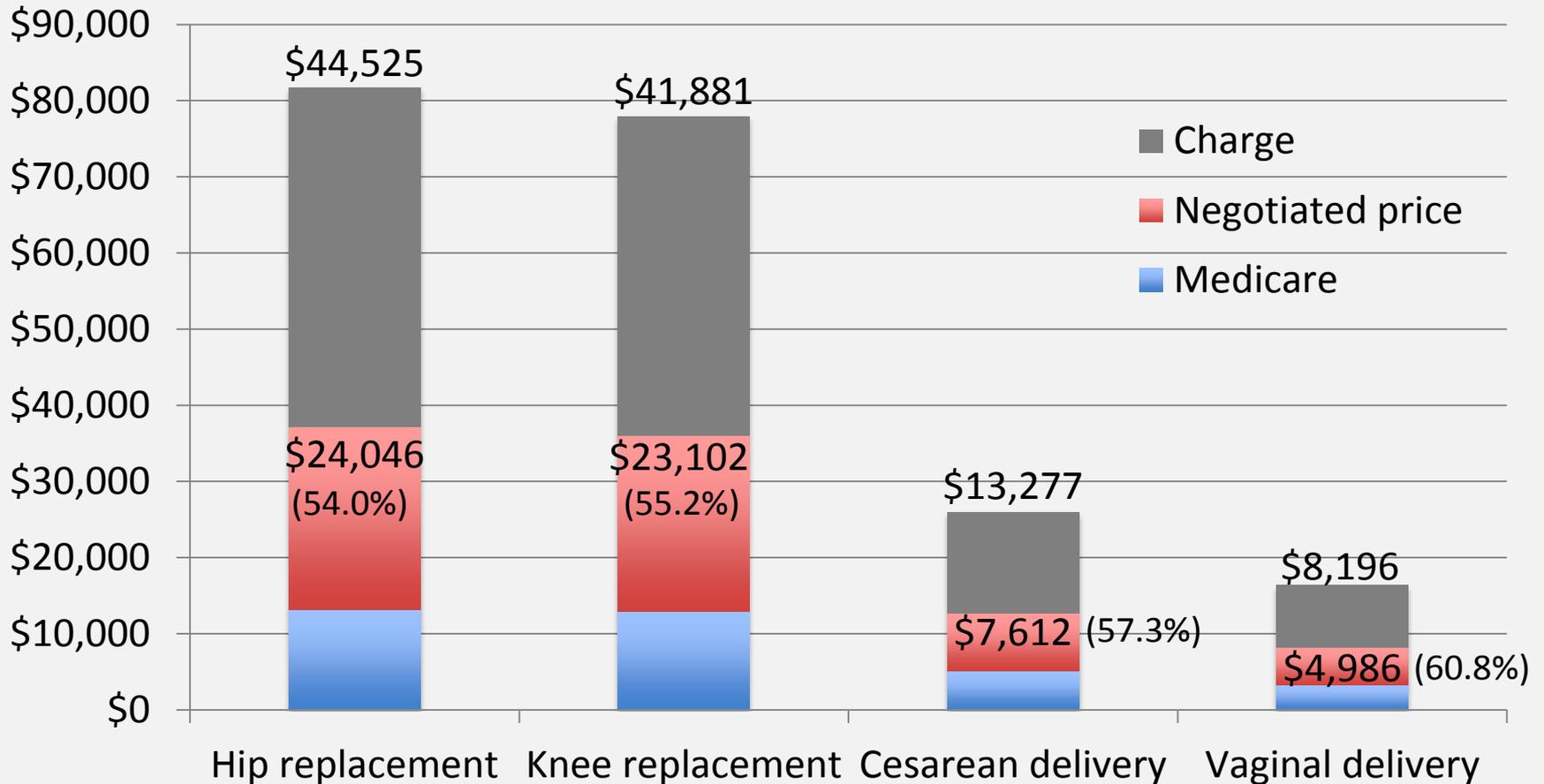


# Why do we need health insurance?

- Protects us against high health care costs when we get sick
- It also gets us access to lower prices
  - Insurance companies negotiate with health care providers to get low rates
  - If you don't have insurance, you pay much higher prices



# Hospital prices by payor, 2008-2011



Source: Cooper et al., "The Price Ain't Right? Hospital Prices and Health Spending on the Privately Insured," NBER, 2015



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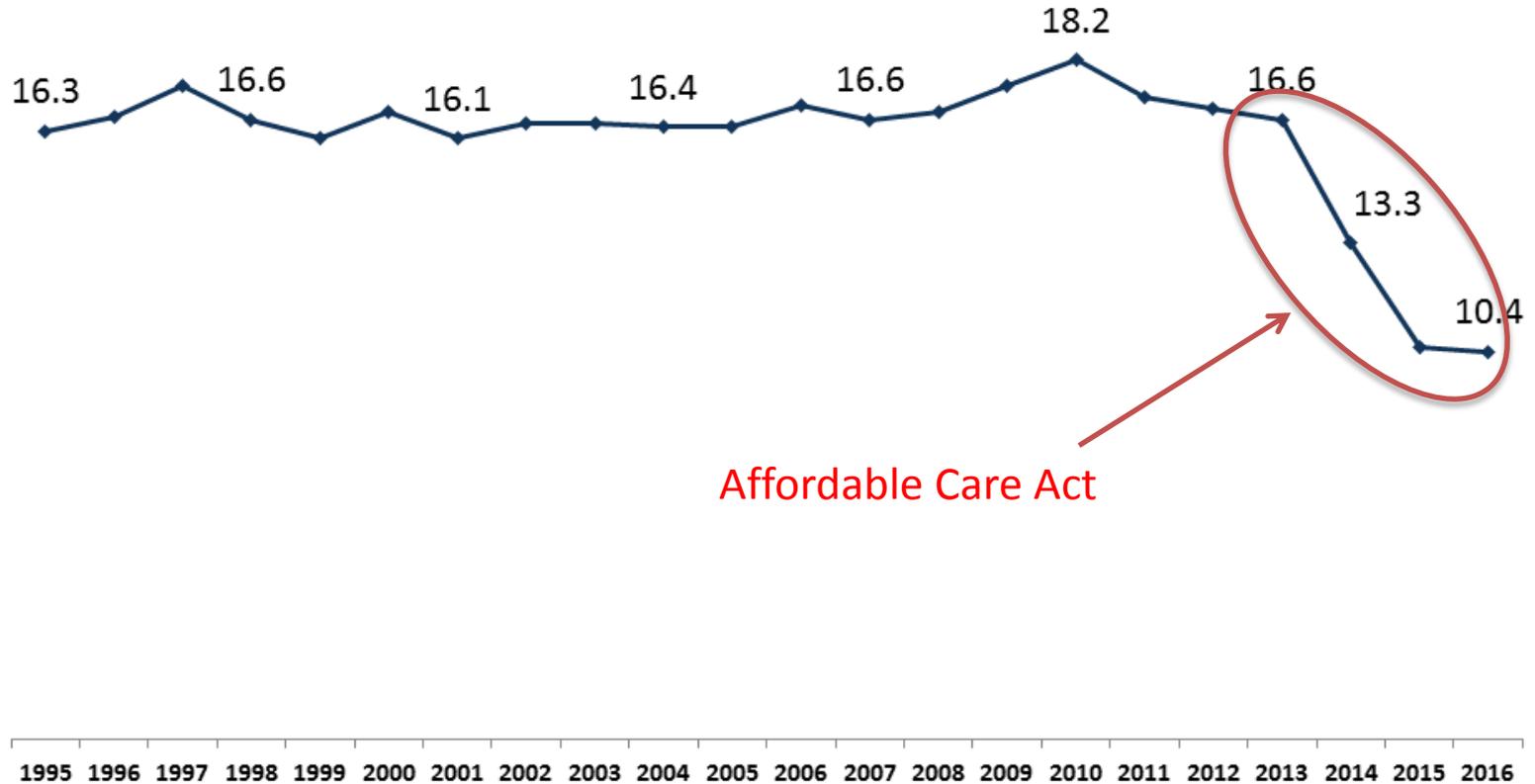
# So having health insurance is important!

- Let's see how the number of Americans who have health insurance has changed over time ...



Figure 1

# Uninsured Rate Among the Nonelderly Population, 1995-2016



Affordable Care Act

NOTES: Includes nonelderly individuals ages 0-64.

SOURCE: CDC/NCHS, National Health Interview Survey, reported in [http://www.cdc.gov/nchs/health\\_policy/trends\\_hc\\_1968\\_2011.htm#table01](http://www.cdc.gov/nchs/health_policy/trends_hc_1968_2011.htm#table01) and <https://www.cdc.gov/nchs/data/nhis/earlyrelease/insur201708.pdf>.



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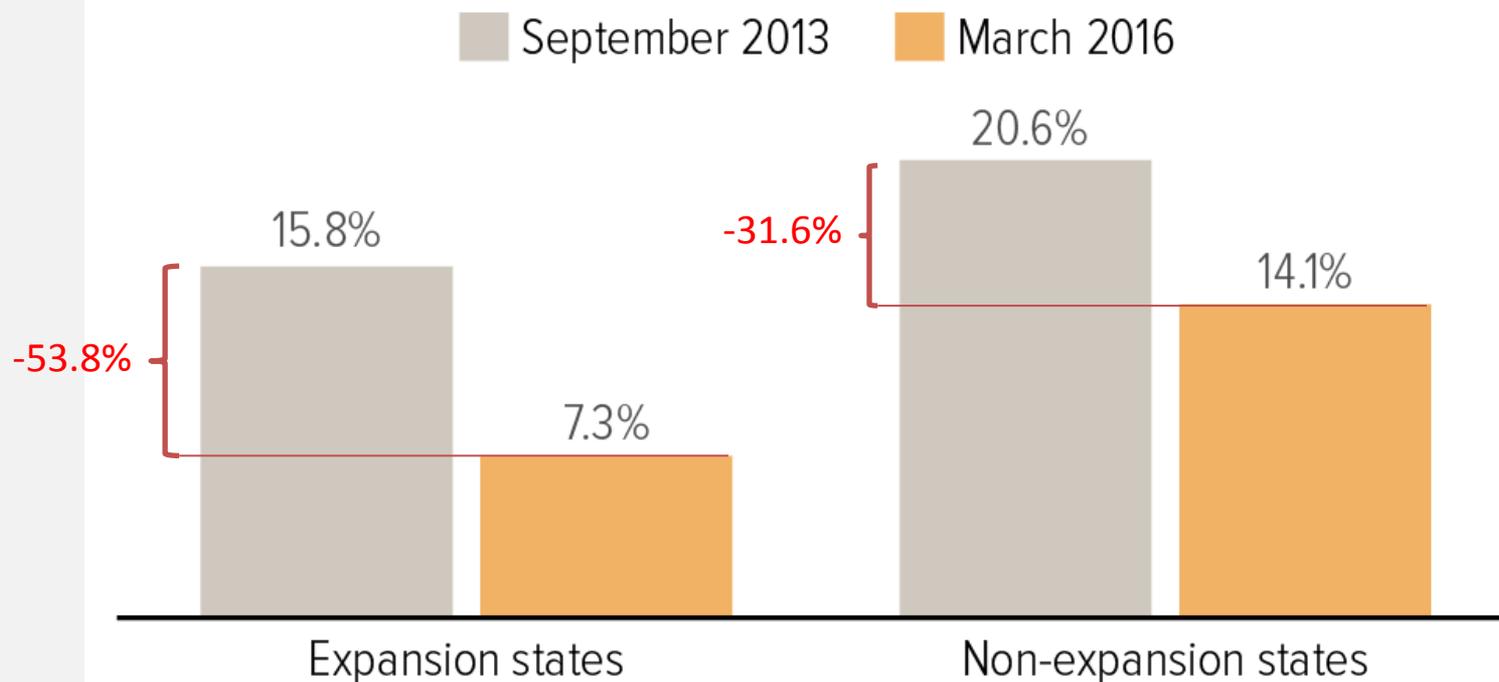
# Improving health insurance coverage

- How has the ACA expanded health insurance?
  - Allowing children to stay on parents' plans until age 26
  - Preventing insurers from denying coverage due to preexisting conditions
  - Individual mandate
  - Medicaid expansion



# Greater Drop in Uninsured Rate Among Adults in Medicaid Expansion States

Uninsurance rate among adults ages 18-64



Source: Urban Institute, May 2016

CENTER ON BUDGET AND POLICY PRIORITIES | CBPP.ORG



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# Conclusions

- Having health insurance is important!
- Everyone needs to pay into the system for it to work
- ACA has significantly improved access to health insurance
- Despite several efforts to repeal the ACA, it is still the law of the land



# Access to Reproductive Services

Carol Weisman, PhD

Department of Public Health Sciences  
Department of Obstetrics and Gynecology  
Penn State College of Medicine

# Did you know?



**45%** of all pregnancies in the U.S. are unintended

**42%** of unintended pregnancies end in abortion

**95%** of unintended pregnancies occur in women who do not use contraception, or use it inconsistently

# Reversible Contraceptive Methods

Most effective

Most used



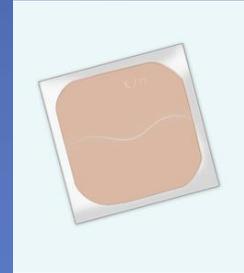
IUD



Implant



Injectable



Patch



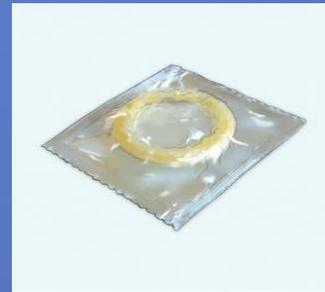
Pills



Ring



Diaphragm



Male condom



Female condom



Sponge



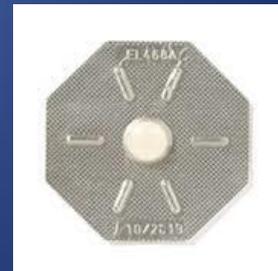
Spermicide



Cervical cap



Fertility awareness



Emergency Contraception

COMPILATION OF PATIENT PROTECTION  
AND AFFORDABLE CARE ACT

—————  
[As Amended Through May 1, 2010]

INCLUDING

PATIENT PROTECTION AND AFFORDABLE CARE ACT  
HEALTH-RELATED PORTIONS OF THE HEALTH CARE AND  
EDUCATION RECONCILIATION ACT OF 2010

—————  
PREPARED BY THE  
Office of the Legislative Counsel  
FOR THE USE OF THE  
U.S. HOUSE OF REPRESENTATIVES



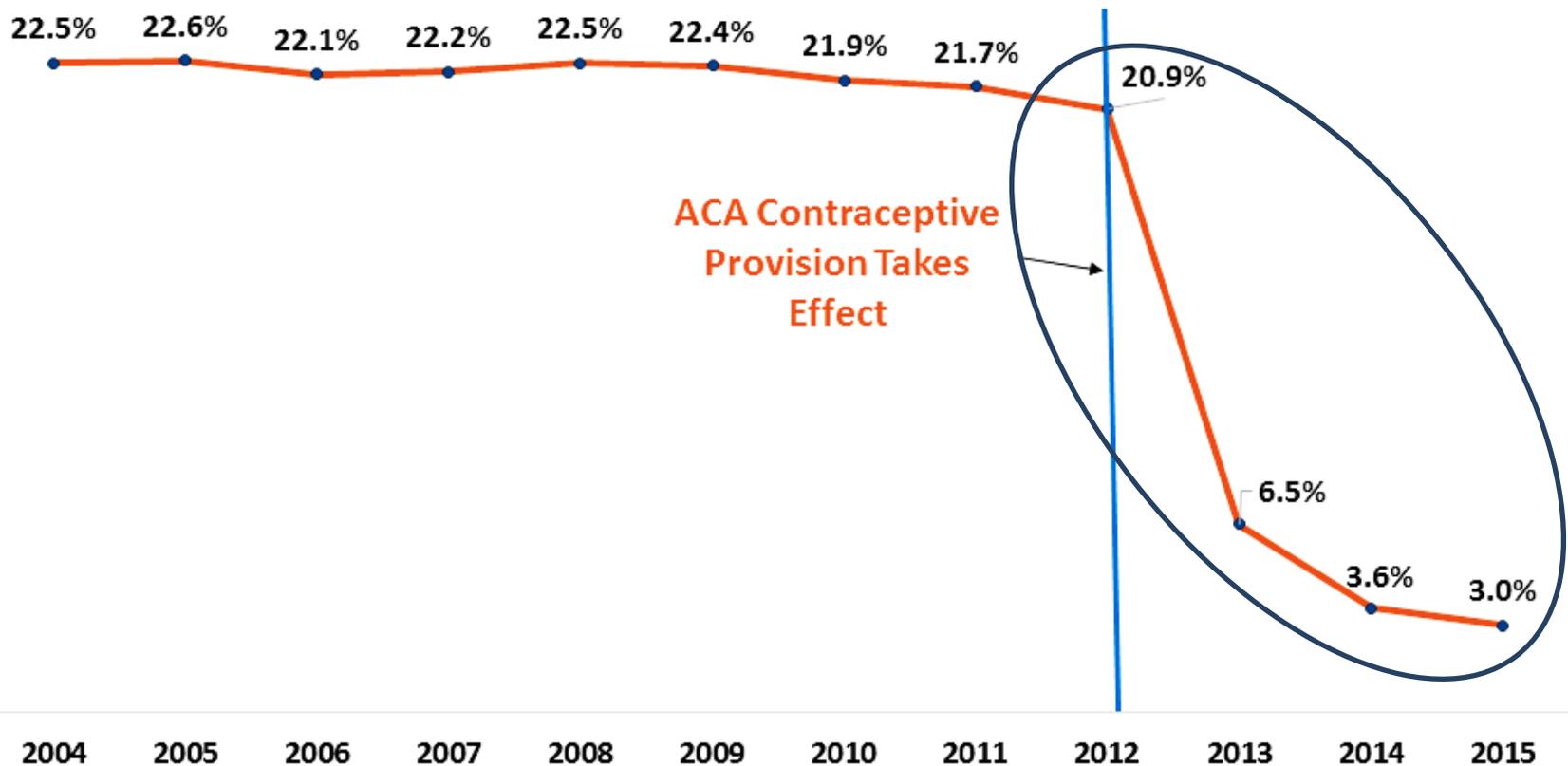
MAY 2010

The Affordable Care Act (ACA)  
required most private health  
plans to cover all FDA-  
approved contraceptives  
***with no costs to women***



# The Contraceptive Coverage Policy Has Had a Large Impact on Out-Of-Pocket Spending in a Short Amount of Time

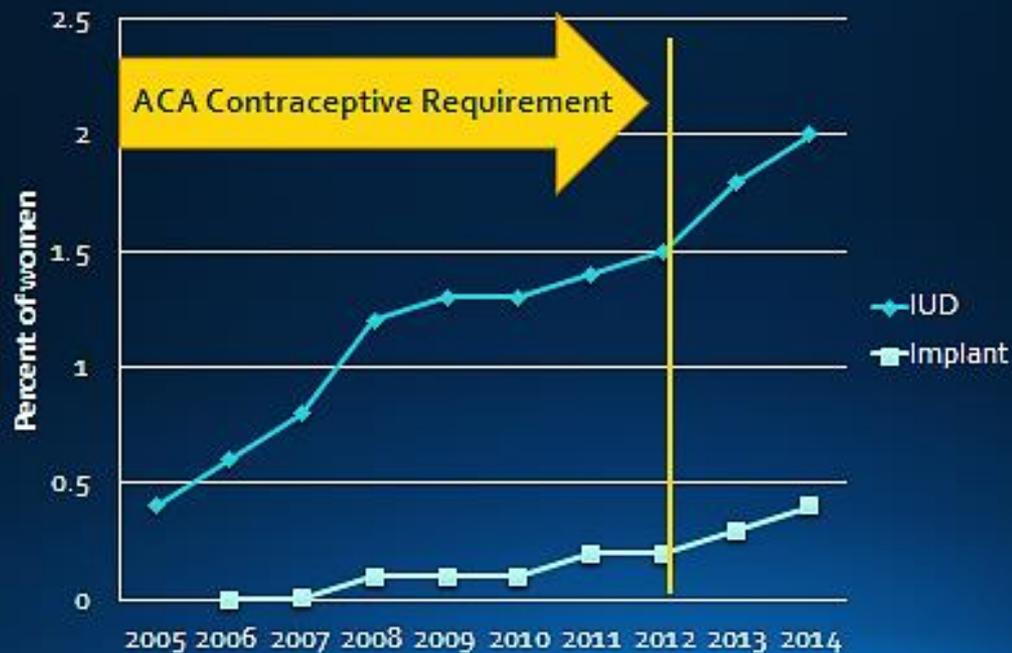
Share of insured women reporting any out-of-pocket spending on oral contraceptives



NOTE: Share of Women age 15-44 with health coverage from a large employer who have any out-of-pocket spending on oral contraceptive pills, 2004-2015.

SOURCE: Kaiser Family Foundation analysis of Truven Health Analytics MarketScan Commercial Claims and Encounters Database, 2004 – 2015. [Peterson-Kaiser Health System Tracker](#).

# IUD and Implant Insertion Rates, 2005-2014



Snyder, Weisman, Liu, Leslie, Chuang. Under review 2017.

October 6, 2017

# Trump administration narrows Affordable Care Act's contraception mandate

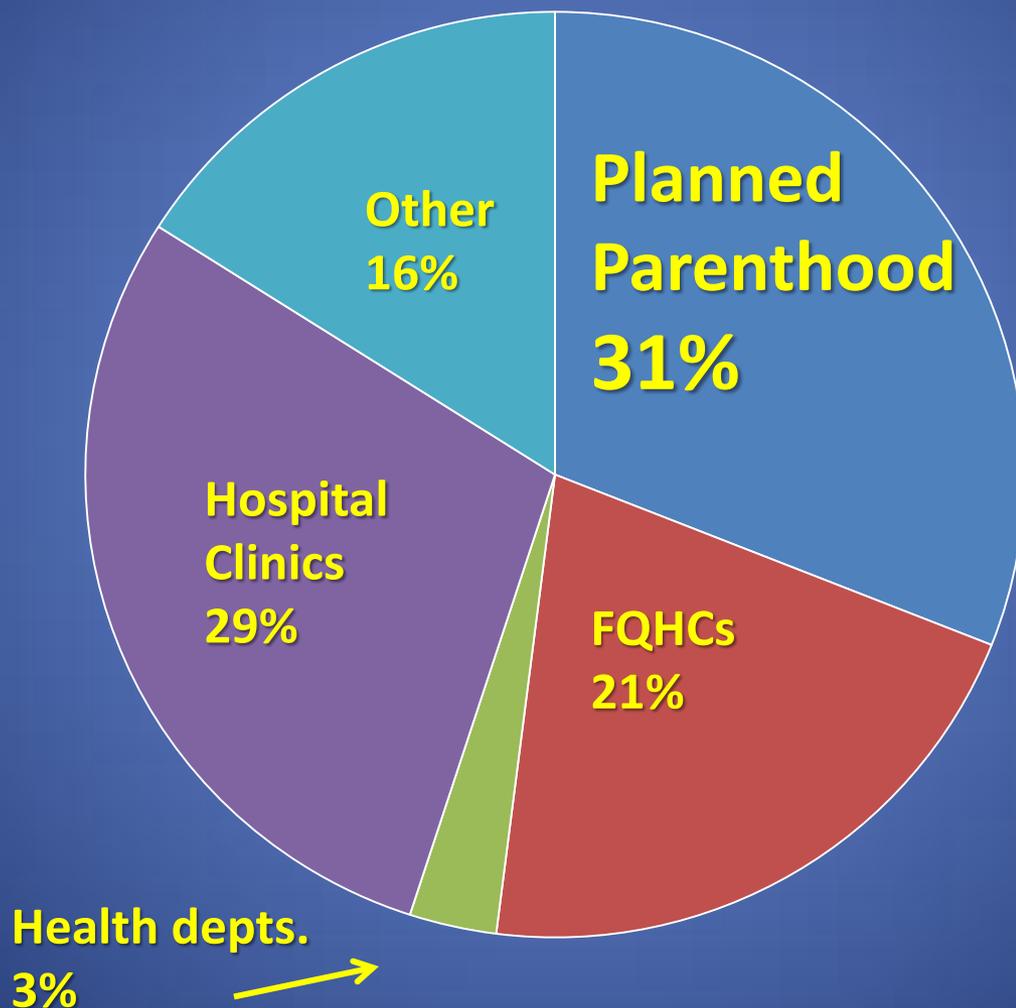
**The Washington Post**

By Amy Goldstein, Juliet Eilperin and William Wan October 6 



**The New York Times**

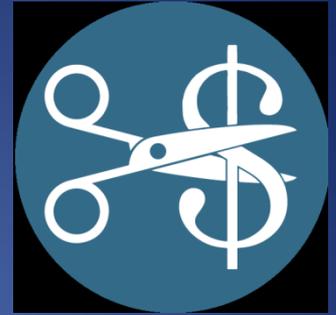
# Clients of safety-net family planning providers in Pennsylvania, 2015 (226,600 women)



FQHC = Federally Qualified Health Center

Guttmacher Institute, 2017

# Funding threats



Congress allowed 70% of the **funding for Community Health Centers (FQHCs)** to expire

**Title X National Family Planning Program** could be cut/eliminated by Congress

Medicaid reimbursements to **Planned Parenthood** are threatened

The NEW ENGLAND JOURNAL of MEDICINE

SPECIAL ARTICLE

## Effect of Removal of Planned Parenthood from the Texas Women's Health Program

Amanda J. Stevenson, M.A., Imelda M. Flores-Vazquez, Ph.D.,  
Richard L. Allgeyer, Ph.D., Pete Schenckan, J.D., and Joseph E. Potter, Ph.D.

ABSTRACT



ELSEVIER

Journal of Health Economics

Volume 55, September 2017, Pages 168-185



Family planning funding cuts and teen childbearing ☆

Analisa Packham ✉

# Meanwhile in Pennsylvania



**SB300** would bar most public family planning funding from any entity that provides abortion

# What is at stake?

- Access to no-cost contraception
- Access to family planning providers

***Women's access to the services  
and providers of their choice***

# Preventive Healthcare Across the Lifespan

Jennifer McCall-Hosenfeld, MD, MSc, FACP  
Associate Professor, Medicine and Public Health Sciences  
Director, Penn State Center for Women's Health Research

*Women's Health Care: Do You Know What's At Stake?*  
*Penn State College of Medicine Community Event*  
*Hershey, PA*  
*10/17/17*



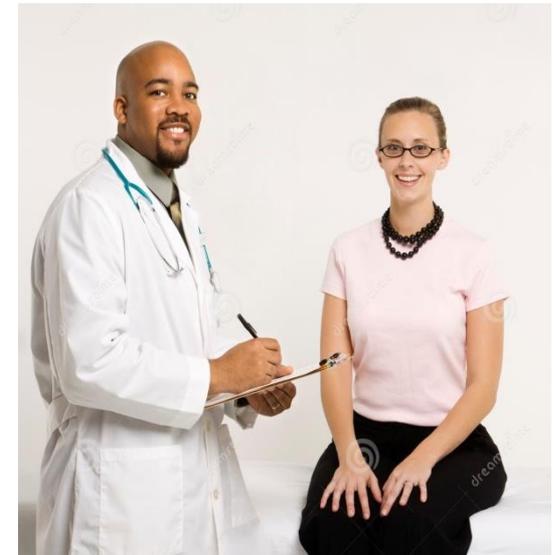
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# What are preventive healthcare services?



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# Preventive health services help people lead healthier lives

- Preventive healthcare is routine health care that includes check-ups, patient counseling and screenings to prevent illness, disease and other health-related problems.

<http://www.investopedia.com/terms/p/preventive-services.asp#ixzz4uUxCai7H>

# ...and reduce cost to the healthcare system (Health Affairs, 2010)

By Michael V. Maciosek, Ashley B. Coffield, Thomas J. Flottemesch, Nichol M. Edwards, and Leif I. Solberg

## Greater Use Of Preventive Services In U.S. Health Care Could Save Lives At Little Or No Cost

Avert the loss of >2 million years of life every year

Savings of \$ 3.7 Billion annually

**ABSTRACT** There is broad debate over whether preventive health services save money or represent a good investment. This paper analyzes the estimated cost of adopting a package of twenty proven preventive services—including tobacco cessation screening, alcohol abuse screening, and daily aspirin use—against the estimated savings that could be generated. We find that greater use of proven clinical preventive services in the United States could avert the loss of more than two million life-years annually. What's more, increasing the use of these services from current levels to 90 percent in 2006 would result in total savings of \$3.7 billion, or 0.2 percent of U.S. personal health care spending. These findings suggest that policy makers should pursue options that move the nation toward greater use of proven preventive services.



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# Examples of preventive healthcare for adolescent girls

- Discussion of healthy relationships
- Prevention of pregnancy and STIs
- Vaccines (e.g., meningococcal if college/military bound)



## Hanging Out or Hooking Up?



Anyone you're with—if you are talking, hanging out, or hooking up—should:

- ✓ Make you feel safe and comfortable
- ✓ Not pressure you to get drunk or high because they want to have sex with you
- ✓ Respect your boundaries and ask if it's OK to touch or kiss you (or whatever else)
- ✓ Give you space to hang out with your friends

But sometimes there is drama in relationships. How often does the person you are seeing:

1. Shame you or make you feel stupid?
2. Pressure you to go to the next step when you are not ready?
3. Control you, or make you feel afraid if you don't do what they want?
4. Send lots of texts, ask for your online passwords, or make you send them naked pictures?

How would you want your best friend, sister or brother to be treated by someone they were going out with? Ask yourself if the person you are seeing treats you with respect, and if you treat them with respect.

**FUTURES**  
HEALTHY RELATIONSHIPS

We are here to help. You or a friend can talk to us about how things are going. Or you can make a call to one of these confidential hotlines 24 hours a day:

National Teen Dating Abuse Helpline 1-888-213-8874 or online <http://www.loveisrespect.org>  
Suicide Prevention Helpline 1-800-273-8255  
Teen Runaway Helpline 1-800-871-4300  
Rape, Abuse, Incest National Helpline (RAINN) 1-800-688-4875



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# Preventive health for reproductive aged women

- Pap test (screening for cervical cancer)
- Prenatal and maternity care
- Influenza vaccine



# Preventive health as women get older...

- Mammography
- Colonoscopy
- Blood pressure screenings
- Additional vaccines (pneumonia, shingles)



# Why does the ACA matter for women's preventive healthcare?

- Health plans must cover preventive services for women without out of pocket costs
- The ACA expanded the number and type of preventive services specifically offered to improve the health of women and their children.



# Without out of pocket cost: maternity and reproductive care

Services covered by the ACA include but are not limited to:

- Breastfeeding comprehensive support and counseling
- Contraception
- Folic acid supplements
- Screening for STIs and other infections
- Screening for gestational diabetes



Photo:  
[www.thebump.com](http://www.thebump.com)

# Without out of pocket costs: women's preventive health services

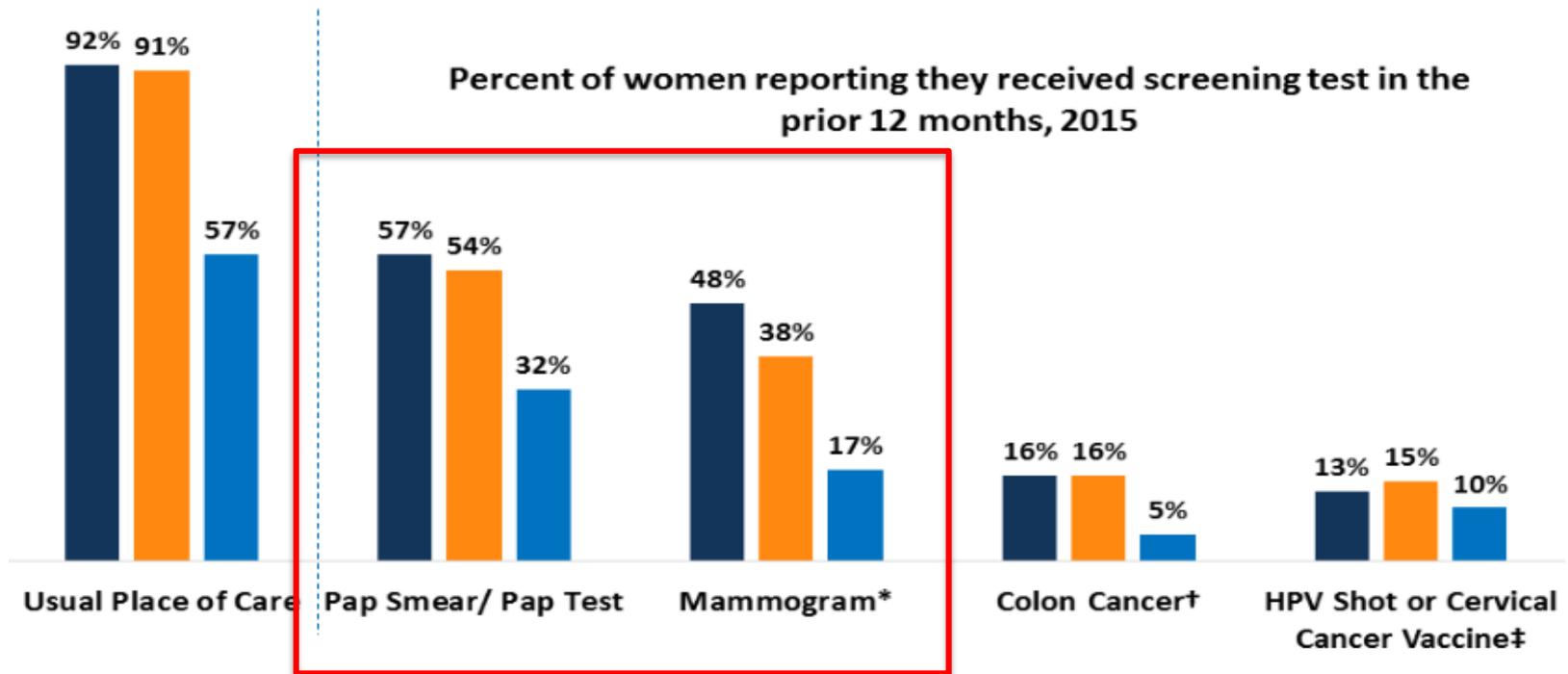
- Mammography and counseling for breast cancer risk
- Pap tests (cervical cancer screening)
- Domestic violence screening and counseling
- Osteoporosis screening
- Tobacco screening and intervention
- Well woman visits



# Insurance Coverage Facilitates Access and Use of Primary and Preventive Care

■ Private ■ Medicaid ■ Uninsured

Percent of women reporting they received screening test in the prior 12 months, 2015



NOTES: Among women 18-64. \*Among women 30+. †Among women 40+. ‡Have ever received shot or vaccine.

SOURCE: Kaiser Family Foundation analysis of 2015 National Health Interview Survey



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# What do pre-existing conditions have to do with preventive healthcare?

- Care of chronic medical conditions can prevent them from becoming worse.

Example – cardiovascular disease is the #1 killer of women

- Blood pressure screening reveals Mary has hypertension
- Hypertension puts Mary at a high risk for stroke



# But Mary has health insurance

- She goes to the doctor regularly
- She receives counseling about diet and exercise to reduce her blood pressure
- She takes medications regularly
- Stroke risk is reduced (and stroke may be prevented)



# So...what is the role of preventive healthcare if I already have a condition?

- Under the ACA, your health plan cannot
  - deny you coverage
  - raise your rates OR
  - refuse to pay for routine and emergency medical care
- Women can't be charged more than men
- Women can't be discriminated against based on pregnancy
- Treatment for any pre-existing medical condition is covered



# What's at stake – a case study



Susan



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# Okay, but what if I don't care about

- CBO reports
- Most of the proportion c
- This allows a
- Prevents mi department provider
- This saves \$



the budget deficit  
easing the  
althcare services  
emergency  
ventive healthcare

K. Amadeo, CBO  
Economy, 8/2016, [www.thebalance.com](http://www.thebalance.com)

ings and Impact on



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“Supporting access to affordable, high quality health care”



# Making a Difference: One Person, One Bite at a Time

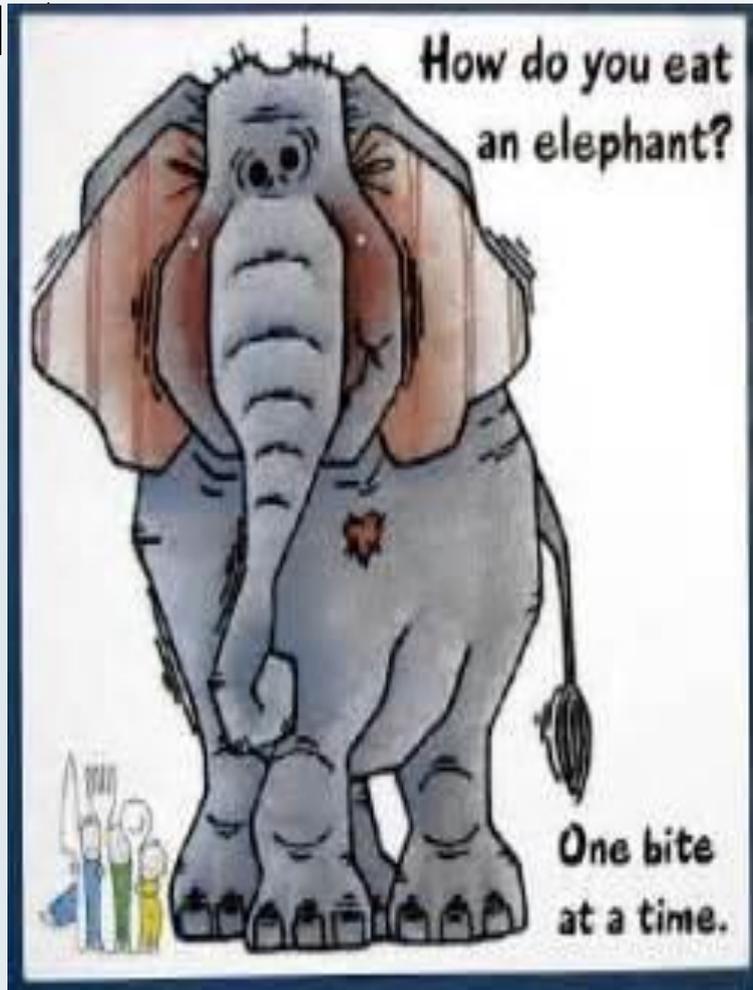
CHERI RINEHART, PRESIDENT & CEO

# What is PACHC?

Pennsylvania's Primary Care Association, representing federally qualified health centers (FQHCs), FQHC Look-Alikes, rural health clinics (RHCs), and other like-mission primary care providers



# Advocacy Seems...Complicated and Bi



# Objectives

- ▶ Understand why **advocacy** is important
- ▶ Understand **what works** and **what doesn't**
- ▶ Understand why a **personal touch** is so important
- ▶ Overcoming **reluctance** to grassroots advocacy
- ▶ Leave knowing you **CAN make a difference**



# Why Advocacy is Important

- ▶ Politicians are listening. Really
- ▶ Are they listening enough? Likely not, but we share responsibility
- ▶ One person can make a difference. Many together, even more
- ▶ There are others counting on us

*It is the greatest of all mistakes to do nothing when you can only do a little. Do what you can.*

- Sydney Smith



# What Works

- ▶ Advocacy when there is preexisting **relationship and credibility**
- ▶ **Personal outreach** through phone calls, personalized emails and visits
- ▶ Campaign **donations**, including time
- ▶ Factual and thoughtful **arguments** supported by data, stories and illustrations
- ▶ Advocacy **with a group** and in **organized campaigns**
- ▶ **Social media**, depending on how it is used

*"I can do things you cannot. You can do things I cannot. Together, we can do great things."*

--Mother Teresa

What works



# ...and What Doesn't Work As Well, or at All

- ▶ Non-personalized form letters and emails
- ▶ Online petitions
- ▶ Yelling, screaming, blaming
- ▶ Venting on social media
- ▶ Outreach without fact check and follow up
- ▶ Doing nothing



*"There are times when you run a marathon and you wonder, "Why am I doing this?" But you take a drink of water and around the next bend, you get your wind back, remember the finish line, and keep going."*

- Steve Jobs



# Why Personal Touch is Important

- ▶ You are a **voter**. Politicians want to get re-elected.
- ▶ Most politicians **care** about their constituents and want to help
- ▶ Politicians won't and can't appreciate the importance of an issue without **real-life context**
- ▶ **Stories** are powerful
- ▶ You are (or can become) an **expert** on the issues important to you. Politicians need trusted experts to reach out to for counsel and opinion.

*True expertise is the most potent form of authority.*

- Victoria Bond





## Legislation: The “Law” or Skeleton (framework)

Statutes are laws enacted by legislatures.



## Regulation: The “Muscles”

Regulations are the rules to implement laws.



## Policy: The Organs & Nervous System

Policies are principles that guide decision-making.

# Becoming Part of the Solution

- ▶ **Make one call, schedule one visit, comment on one proposal**
- ▶ **Script and rehearse**
- ▶ **Have an ask in mind - they expect it**
- ▶ **Meet in the district office first**
- ▶ **Know it is okay to meet with a legislative assistant**
- ▶ **Accompany an experienced advocate on a visit**
- ▶ **Relationships are everything**

*Practice isn't the thing you do once you're good. It's the thing that makes you good.*

- Malcolm Gladwell



*"Never doubt that a small group of thoughtful, committed, citizens can change the world. Indeed, it is the only thing that ever has."*

—Margaret Mead





## For More Information:

- ▶ [www.pachc.org](http://www.pachc.org)
- ▶ Cheri Rinehart
- ▶ President & CEO
- ▶ [cheri@pachc.org](mailto:cheri@pachc.org)
- ▶ (717) 761-6443, ext. 203



Thank You  
to the 53  
community members  
who attended!