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The Affordable Care Act and Women

PRINT-AND-GO GUIDE

Information for women about health care reform

What women need to know about health care reform

The Affordable Care Act was signed into law to benefit you and your family. Here are the top five items you need to know if you are a single woman or a woman with a family.

If you are a single woman:

- 1. New health plans cannot cancel your policy if you get sick, or even if you simply made an honest mistake on your plan application.
- 2. Medicare Part D enrollees who enter the "donut hole" receive a \$250 rebate, as well as discounts on all brand-name drugs.
- 3. New health plans must let you choose a primary care doctor and pediatrician and let you see an OB/GYN without a referral.
- 4. New health plans must cover certain benefits, such as mammograms and cervical cancer screenings, without any out-of-pocket costs to you.
- 5. Uninsured women with pre-existing health conditions can get insurance through state-run programs until health care exchanges are up and running by 2014.

If you are a woman with a family:

- 1. New health plans cannot set a lifetime dollar limit on your covered health benefits. New restrictions on annual limits also are in place now. These restrictions will squeeze annual limits tighter and tighter until 2014, when all annual limits will be banned.
- 2. New health plans cannot deny coverage for your children (under age 19) based on a preexisting condition, including a disability. Starting in 2014, these same plans won't be allowed to deny or exclude anyone or charge more for a pre-existing condition, including a disability.
- 3. New health plans must let your children stay on your plan until age 26. The only exception is if you have a job-based plan and your children can get their own job-based insurance.
- 4. Employers must give breastfeeding mothers break time and a private place to express milk.
- 5. Starting in 2014, pregnancy and newborn care, along with vision and dental care for children, will be covered in all Exchange plans and new plans sold to individuals and small businesses. (An Exchange is a new marketplace where individuals and small businesses can buy affordable health benefit plans.) Exchanges will offer you a choice of plans that meet certain benefits and cost standards.

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