

The Status of Women's Health in Oregon

2010 Findings from *Making the Grade on Women's Health: A National and State-by-State Report Card*

Grade: Unsatisfactory

Rank: 10th

The fifth edition of *Making the Grade on Women's Health: A National and State-by-State Report Card* finds that while Oregon is outperforming the majority of states and is meeting women's health needs on many fronts, it is still far from the goal of creating a state of healthy women. Though the new federal health law (the Affordable Care Act, or ACA) will lead to improvements in some of the areas in which Oregon is falling short, the state must continue to pursue policies that will improve women's health and well-being—both by implementing the ACA in ways that will benefit women and by making progress in areas that are beyond the scope of the new law.

Too many women in Oregon lack health insurance.

- In Oregon, 18.9% women lack health insurance, ranking the state 33rd out of all states and the District of Columbia in health insurance coverage. There are also notable racial disparities—for instance, 52.2% of Hispanic women lack coverage compared with 15.6% of White women.

Oregon meets some goals for women's preventive care, but fails others.

- While Oregon receives a “Satisfactory” grade for its rates of mammograms and colorectal cancer screenings, it receives a “Failing” grade for its rate of pap smears, and ranks 42nd in the nation for cholesterol testing, with only 75.9% of women having been tested in the past 5 years.
- Oregon is a very active state, ranking 3rd for this indicator, and has a lower obesity rate than most other states at 23.5%.

Oregon is above average in some health outcomes, but has room for improvement in others.

- Oregon has lower rates of heart disease deaths and high blood pressure than most states, ranking 7th and 8th respectively.
- Unfortunately, the state's stroke death rate is very high at 52.4 deaths per 100,000, earning Oregon a “Failing” grade and ranking the state 39th. Oregon also ranks 41st for lung cancer deaths, with a rate of 46.3 deaths per 100,000.

Oregon meets 32 of the *Report Card's* 68 policy goals for women's health, more than most other states. For example:

- The state does not allow insurance companies to charge women and small businesses with a predominantly-female workforce more for coverage.
- Oregon requires private insurance companies to provide coverage for maternity care.
- However, Oregon has a very low Medicaid eligibility level for working parents.

The Affordable Care Act improves access to affordable and high-quality health care for women in Oregon. The ACA's benefits for women include:

- Health insurance coverage will be extended to millions of women in Oregon as a result of an unprecedented Medicaid expansion and a federal tax credit program to help people without job-based insurance purchase coverage through the new “Health Insurance Exchange” (both effective in 2014). As a temporary measure until 2014, uninsured women who have been denied coverage because of a pre-existing condition are currently eligible for new Pre-Existing Condition Insurance Plans.

- All new health plans are now required to cover certain recommended preventive health services for women with no co-payments or deductibles. These services include (among others) mammograms, smoking cessation treatment, colon cancer screenings, and flu shots.
- Insurance companies are no longer allowed to deny coverage to children with pre-existing conditions, to cancel a health insurance policy when an enrollee becomes sick, or to impose lifetime limits on health benefits. Starting in 2014, health insurers will also be prohibited from denying coverage to adults with pre-existing conditions, and will not be allowed to consider gender or health status when determining how much to charge individuals and small businesses for coverage.

The policy improvements in the Affordable Care Act will benefit women in Oregon by making it easier for them to get the care they need, where and when they need it. As an example, the state currently misses the benchmark for the percentage of women receiving Pap smears and cholesterol screenings, but provisions in the new law now expand access to these tests—beginning this year, the ACA requires that new health plans cover both of these critical preventive services at no cost to the plan enrollee. There is no doubt that, over time, the new law will lead to many improved health outcomes for women in Oregon and across the nation.

Making the Grade on Women's Health: A National and State-by-State Report Card is a project of the National Women's Law Center and Oregon Health and Science University, which was developed to improve women's health by encouraging policy change at both the national and state levels. It examines nearly 100 different health status and health policy indicators to provide the most comprehensive assessment of women's health to date.

For more information, see the complete 2010 *Health Report Card* findings on or after December 7, 2010 at: <http://hrc.nwlc.org>