

Preventive Services: Health Equity & Common Sense

Colin Reusch

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Importance of Access to Preventive Services

1. **Avoid costly health conditions & reduce unnecessary utilization of care**
2. **Ensure early detection & provide bridge to necessary treatment/management**
3. **Prevent the spread of disease**
4. **Identify other co-morbid health conditions and health-related social needs through**
5. **Improve health equity & address disproportionate burden on underserved and marginalized populations**
6. **Reduce costs to individuals, payors, and society**





Access to no-cost preventive care is critical to health equity

ACA preventive services requirements have had a meaningful impact on disparities in access and health outcomes:

- 150+ million people have gained access to no-cost preventive services & comprehensive coverage – significant declines in racial disparities in uninsurance rates
- Improvements in colon & breast cancer screenings, particularly among Black & Hispanic populations
- Reductions in incidence of hypertension, heart disease, and mental health conditions
- Improved access to contraceptive care, cholesterol screenings, immunizations, and other services

BUT...inequities in access to care still persist due to structural barriers





Barriers to Preventive Care

- Uninsurance/undersinsurance
- Lack of clarity in state/federal coverage standards (e.g., EHB)
- Inconsistent and confusing plan documentation
- Drug formulary adherence to guidelines
- Service limits and insurer guidance to providers
 - E.g., fluoride treatments for children, number of covered prenatal visits
- Inadequate adjudication of claims denials
- Cost-sharing & co-pays (even when modest)
- Health-related social needs, transportation, etc.



Affordable Care Act (ACA) Preventive Services Requirements

Advisory Committee on Immunization Practices (ACIP)

Appointed by the Centers for Disease Control and Prevention (CDC)

Establishes guidelines on vaccines & immunizations

Health Resources and Services Administration (HRSA)

Federal agency as endorsing body

Guidelines on preventive services for women & children (including AAP's Bright Futures)

US Preventive Services Task Force (USPSTF)

Appointed by the Agency for Healthcare Research and Quality (AHRQ)

Regularly makes evidence-based recommendations which are automatically included in ACA requirements

Preventive services recommended or endorsed by these bodies must be covered without co-pays or cost-sharing by all non-grandfathered health insurance plans and Medicaid



Braidwood v. Becerra

- Brought by plaintiffs claiming requirement for self-funded plans to cover PrEP, violates religious freedom
- Challenges USPSTF authority, citing non-delegation doctrine
- Fifth Circuit hearing case after decision to invalidate USPSTF preventive services requirements
- Stay issued in May, requiring non-grandfathered plans to continue covering USPSTF services, pending decision later this year
- At risk: access to dozens of preventive services for 150+ million people, including:
 - Lung cancer screenings, PrEP, HIV screenings, Hepatitis screenings, etc.
- Increasing the cost of access to these services would only compound existing inequities
- States have already begun taking action to enshrine ACA preventive services protections but gaps still exist for self-insured plans
 - Massachusetts among strongest, prohibiting cost-sharing for “federally-defined preventive services & leveraging state individual mandate to broaden protections



Thank you.

