

# Direct-Care Workers Need Health Reform *Now*

*“Gender rating is unfair.”*

Linda Bettinazzi,  
President and CEO  
Visiting Nurse Association of Indiana County  
Indiana, Pennsylvania

**T**he Pennsylvania home health care company Linda Bettinazzi runs is charged about \$6,800 per worker for health insurance—\$2,000 more than the national average for single coverage. One reason: nearly every one of her 175 employees is a woman.

“There is something inherently wrong in charging more just because my workers are all women,” said Linda. “There’s a great sense of unfairness,” she added, “and it makes me angry.”

Gender rating is the norm in our current health care system, part of a complex formula of risk factors—including health status, age, and group size—insurers say has been necessary to fairly price policies. But charging more for women than men, and setting rates according to group size, is discriminatory.

“Insurers say women under the age of 55 cost more to cover because they use more health services,” said Linda. “So in essence, women are being penalized for bearing children and otherwise taking care of themselves.”

## Eliminating Gender Ratings and Other Discriminatory Practices Can’t Wait

Health care reform that eliminates gender rating cannot come soon enough for employers like Linda, whose company’s health care premiums now equal eight to ten percent of its annual revenue. Health reform will:

- **End Discrimination.** Reform legislation will ensure that being a woman is no longer treated as a pre-existing condition. Women will no longer be charged more for coverage simply because they



Public Option

Affordability

Good Benefits

**Insurance  
Market Reform**

Exchange

are women, nor will policies exclude essential services like maternity care.

- **Lower Costs for Employers.** Many providers of eldercare and disability services—those who employ direct-care workers—depend on government funding. This means they have limited budgets, and cannot afford the rising costs of health care. Eldercare and disability services providers will benefit from insurance reforms that eliminate current rating practices. These employers would also benefit from access to an Exchange, where cost and coverage standards would be controlled and participants would benefit from pooling as well as the competition between plans.

## Eliminating Discriminatory Practices Is Essential to Insurance Market Reform

The PHI Health Care for Health Care Workers campaign urges Congress to level the playing field and ban gender rating and other discriminatory practices that disadvantage direct-care workers.

We ask Congress to:

- Eliminate unfair and discriminatory practices, such as gender rating, by applying reforms broadly across the individual market and for all groups of all sizes.
- Ensure that essential health services, such as maternity care, are included in all health insurance policies whether through the Exchange, an employer, or in other group plans.
- Prohibit insurers in the individual market from rejecting applicants or excluding coverage for “pre-existing conditions” such as pregnancy, being a survivor of domestic violence, or having had medical treatment following a sexual assault.

By 2016, direct-care workers will number 4 million, America’s single largest occupation. Health care reform that is good for direct-care workers is good for America.

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[www.PHInational.org/policy](http://www.PHInational.org/policy)



Health Care for Health Care Workers ([www.coverageiscritical.org](http://www.coverageiscritical.org)), an initiative of PHI, seeks to expand health coverage for workers who provide support and assistance to elders and people living with chronic conditions and/or disabilities. These consumers need a skilled, reliable, and stable direct-care workforce to provide quality long-term care services. We believe that one way to ensure a quality direct-care workforce is to provide quality direct-care jobs—jobs that offer health coverage and pay a living wage.



PHI ([www.PHInational.org](http://www.PHInational.org)) works to improve the lives of people who need home and residential care—and the lives of the workers who provide that care. Using our workplace and policy expertise, we help consumers, workers, employers, and policymakers improve long-term care by creating quality direct-care jobs. Our goal is to ensure caring, stable relationships between consumers and workers, so that both may live with dignity, respect, and independence.