

# Essential Health Benefits

Applying a Health Equity Lens

February 24, 2025



# ITUP Mission & Vision



## Mission

ITUP's mission is to promote innovative and workable policy solutions that expand health care access and improve the health of all Californians. ITUP implements its mission through policy-focused research and broad-based stakeholder engagement.

## Vision

ITUP believes that all Californians should have a fair opportunity to live their healthiest lives.

# Essential Health Benefits Background

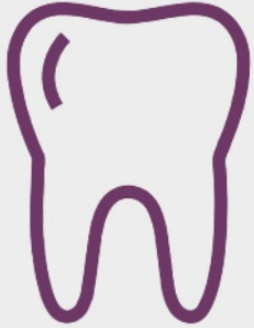


- Definition
  - Essential Health Benefits (EHBs) are a set of health care services that insurance plans must cover under the [Patient Protection and Affordable Care Act \(ACA\)](#). All health plans offered through [Covered California](#), California's health insurance marketplace where individuals and families can purchase affordable health coverage, must comply with the EHB requirements.
- Core Services
  - They include categories such as ambulatory care, emergency services, hospitalization, maternity and newborn care, mental health and substance use treatment, prescription drugs, rehabilitative services, laboratory services, preventive care, and pediatric care.
- State Flexibility
  - While the federal government sets the baseline for EHBs, states have the flexibility to define specific coverage within these categories to meet local health needs.

# Equity, Affordability & Access

- Equity Impact
  - Expanding EHBs can help reduce disparities in access to necessary medical services, particularly for low-income and underserved communities.
- Ensuring comprehensive EHBs improves health care affordability by reducing out-of-pocket costs for essential services. Expanding EHBs could cause increases in premiums for Californians who access coverage through Covered California.
- California is considering expanding EHBs to include adult dental care, hearing aids, durable medical equipment (DME), infertility diagnosis & treatment, chiropractic services, and doula services to promote health equity and improve access to care.





# Adult Dental

- Data
  - Currently, no states include adult dental as an EHB.<sup>1</sup>
  - 28% of insured adults delayed dental care due to cost.<sup>2</sup>
  - Employment Impact:
    - Dental issues correlate with a 7.7% decrease in employment odds.<sup>3</sup>
  - Untreated Decay:
    - 21% of adults aged 20–64 have untreated decay.<sup>4</sup>
    - Higher rates among non-Hispanic Black adults (30.3%) and those in high poverty (39.6%).<sup>4</sup>
- Health Importance
  - Poor oral health links to chronic ailments like Alzheimer's, heart disease, and diabetes.<sup>5</sup>
- Quality of Life
  - Essential for speech, eating, and social interaction; exclusion worsens health disparities.<sup>6</sup>
- Equity Issues
  - Disproportionate impact on underserved populations, e.g., low-income individuals, communities of color, and seniors.<sup>7,8</sup>
  - Ensuring dental coverage would mitigate disparities by improving access to preventive and restorative care. Expanding benefits would enhance economic stability for affected populations by reducing employment barriers. Addressing oral health inequities would contribute to broader public health and economic well-being.



# Hearing Aids

- Essential for Inclusion
  - Hearing aids are crucial for social and professional engagement.<sup>9</sup>
- Health Risks
  - Untreated hearing loss increases risks of cognitive decline and social isolation.<sup>10</sup>
- Data
  - 15% of U.S. adults have hearing loss.<sup>11</sup>
  - Hearing aids cost \$1,000–\$6,000 per device, often uncovered by insurance.<sup>12</sup>
  - 16 states consider hearing aids as an EHB, but not California.<sup>13</sup>
- Disparities
  - High costs of hearing aids create a barrier to communication and social inclusion, disproportionately affecting low-income and aging populations.
- Access Challenges
  - Lack of insurance coverage exacerbates disparities in education, employment, and healthcare access.
- Equity Considerations
  - Coverage expansion would improve social participation, workforce inclusion, and overall quality of life. Increasing access would help reduce cognitive decline and mental health issues linked to untreated hearing loss. California's lack of pediatric hearing aid coverage creates long-term educational and developmental disadvantages.

# Durable Medical Equipment (DME)

- Impact
  - **Independence:** DME is vital for those with disabilities to live independently and avoid institutionalization.<sup>14</sup>
  - **Access:** Limited coverage restricts access to essential devices like wheelchairs and oxygen equipment for affected populations.<sup>15</sup>
- Data
  - California does not include wheelchairs as a type of DME, while 28 other states + DC do.<sup>16</sup>
  - 15% of adults with disabilities delayed or didn't get needed DME.<sup>17</sup>
- Health Equity Implications
  - **Access Barriers:** Individuals with disabilities and chronic conditions face significant obstacles in obtaining necessary medical devices.
  - **Equity Considerations:** Expanding coverage would promote independence and quality of life for people with disabilities. Addressing access barriers could reduce hospitalizations and long-term healthcare costs. Equitable DME access is critical to ensuring that all Californians, regardless of income or ability, can fully participate in daily life.
  - **Autonomy Impact:** Delayed or denied access to DME increases dependence on institutional care, reducing autonomy.
  - **Compounded Disparities:** Economic and racial disparities compound access challenges, particularly for Medicaid beneficiaries.



# Doula Services

- Impact
  - **Maternal Health:** Doula support can reduce complications, cesarean rates, and preterm births, especially for Black and Indigenous women.<sup>18</sup>
  - **Holistic Support:** Provides trauma-informed care for communities of color and LGBTQ+ individuals.<sup>18</sup>
- Data:
  - Since January 2023, California residents can receive doula services through the Department of Health Care Services (DHCS).<sup>18</sup>
  - Women with doula care had 52.9% lower odds of cesarean delivery.<sup>18</sup>
  - Since 2019, California has had at least ten doula pilot programs focusing on Black pregnant people and Medicaid enrollees.<sup>18</sup>
- Current Access
  - Since January 2023, California residents can receive doula services through DHCS.
  - Women with doula care had 52.9% lower odds of cesarean delivery.
- Equity Considerations:
  - Expanding access would address racial disparities in maternal health outcomes and enhance reproductive justice. Integration into essential benefits would improve overall perinatal care quality.







# Diagnosis & Treatment of Infertility

- Data:
  - 1 in 8 California couples experience fertility issues.<sup>19</sup>
  - \$20,000 average out-of-pocket cost per In vitro fertilization (IVF) round.<sup>20</sup>
  - 10M beneficiaries – Californians to benefit from Senate Bill 729.<sup>21</sup>
    - California's new IVF coverage law (SB 729) mandates coverage for large group health plans starting July 2025, covering 3 egg retrievals and unlimited embryo transfers. This law increases access for Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ+) individuals but faces opposition from insurers due to cost concerns.<sup>22</sup>
- Health Equity Implications
  - Infertility treatment is often financially inaccessible, disproportionately affecting low-income individuals.
  - Racial disparities in infertility rates and access to treatment further exacerbate reproductive health inequities.
  - LGBTQ+ individuals often face additional barriers due to heteronormative insurance policies and limited provider inclusivity.
- Equity Considerations:
  - Expanding coverage would allow all individuals, regardless of financial status or identity, to access family-building services.
  - Addressing racial and socioeconomic disparities in fertility care would contribute to reproductive justice.
  - Equitable infertility care would improve mental and emotional well-being for those affected by fertility challenges.



# Chiropractic Services

- Coverage Overview:
  - Most CA health insurers offer full or partial coverage for chiropractic services.<sup>23</sup>
- Access Disparities:
  - Communities of color and rural populations often have reduced access to non-pharmacological pain management.<sup>24</sup>
  - Lack of non-pharmacological pain management continues to fuel the opioid epidemic.<sup>25</sup>
- Equity Considerations:
  - Expanding chiropractic coverage would offer a cost-effective, non-invasive alternative for pain management.
  - Greater access would support workforce participation and could reduce disability-related job loss.
  - Coverage equity would help address disparities in chronic pain treatment and opioid dependency.

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# Thank You!



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