

The Importance of Medicare for Women

Medicare is a federal health insurance program that funds basic health care services for 47 million individuals who are elderly and/or have disabilities. Without Medicare, these millions of individuals would have difficulty accessing or paying for hospital care, physician visits, diagnostic testing, preventive services and prescription drugs.

Women constitute more than half of the individuals with Medicare. The program is therefore critically important to preserving the health and well-being of our mothers and grandmothers. Because women, on average, are poorer, live longer and have more health care needs than men, Medicare (sometimes combined with Medicaid) potentially plays a greater role for them in preventing illness and destitution.

The majority of individuals' receiving Medicare are women.

- Women made up 56% of individuals with Medicare in 2009.¹
- Women make up an even larger portion of the oldest Medicare beneficiaries. Women over 80 made up 62% of individuals with Medicare in 2009.²

On average, older women are poorer than older men. Elderly women have lower average incomes and are more likely to live at or near the poverty line than elderly men. This makes paying for health care especially difficult. Medicare (in some cases, combined with Medicaid) therefore serves as a critical source of funding for both health care access and retirement security.

- In 2009, 43% of female Medicare beneficiaries were living in or near poverty compared to 32% of men.³
- In 2007, the average annual income for women 65 and older was \$23,400, much lower than elderly men's average income of \$38,222.⁴
- On average, older women have lower Social Security benefits than men. In 2009, the average annual benefit for women over 65 was \$12,000 compared to nearly \$16,000 for men.⁵
- Because of their lower income, millions of women with Medicare are also "dually eligible" for Medicaid – meaning they qualify for and receive both. Almost three-quarters (70%) of people who receive both Medicare and Medicaid are women.⁶

Older women have more health care needs than older men. Women have more chronic conditions and live longer than men, on average. Therefore, women are especially reliant on the health care services Medicare funds.

- Nationally, 49% of women with Medicare report having 3 or more chronic conditions compared to just 38% of men. Women are more likely to suffer from arthritis, hypertension, and osteoporosis than men and are more likely to report suffering from cognitive impairments and physical limitations.⁷
- Women live longer, on average, than men do, resulting in the need for Medicare-funded services for more years of their lives. Nationally, the life expectancy for women in 2007 was 80.4 years compared to 75.4 for men.⁸
- Women are more dependent on long term care services and supports than men are. Women make up 77% of people with Medicare living in nursing home and other long-term care facilities, and many of these women also receive Medicaid.⁹

The new health care law helps Medicare better address women’s health care needs. The following improvements will allow women to save money and have greater access to preventive services through Medicare.

- The new health care law eliminates Medicare cost-sharing for preventive services and screenings that are important to women such as mammograms, pap smears, and colorectal cancer screenings.
- The law closes the Medicare Part D “donut hole,” which requires seniors to spend large amounts of money for prescription drugs. In 2007, 64% of those affected by the “donut hole” were women.¹⁰
- The new health care law entitles people with Medicare to a one-time “Welcome to Medicare” physical exam and annual wellness visits.

Don’t discount – Demand fair change, not spare change.

Learn more about attacks to the Federal Budget, in general, and Medicaid and Medicare, specifically, please visit our website at www.nwlc.org.

¹ Kaiser Family Foundation, *State Health Facts*, “Distribution of Medicare Enrollees by Gender, 2009,” available at: www.statehealthfactsonline.org (Date Accessed May 23, 2011).

² National Women’s Law Center calculations based on health insurance data for women ages 18-64 from the Current Population Survey’s 2009 Annual Social and Economic Supplement, using CPS Table Creator, http://www.census.gov/hhes/www/cpstc/cps_table_creator.html.

³ *See id.*

⁴ Kaiser Family Foundation, *Medicare’s Roll for Women* (June 2009), available at:

<http://www.kff.org/womenshealth/upload/7913.pdf>

⁵ NWLC calculations from U.S. Social Security Administration, Annual Statistical Supplement to the Social Security Bulletin, 2010, Table 5.J3, available at

<http://www.ssa.gov/policy/docs/statcomps/supplement/2010/index.html>. Benefits are slightly higher for both women and men who receive benefits as retired workers.

⁶ *See supra* note 4.

⁷ *See supra* note 4.

⁸ Jiaquan, Xu et al., Centers for Disease Control, *National Vital Statistics Report* (May 20, 2010), available at:

http://www.cdc.gov/NCHS/data/nvsr/nvsr58/nvsr58_19.pdf.

⁹ *See supra* note 4. 50% of all women in nursing homes are dual eligibles.

¹⁰ U.S. Department of Health and Human Services, *Strengthening the Health Insurance System: How Health Insurance Reform Will Help America’s Older and Senior Women*, available at:

<http://www.healthreform.gov/reports/seniorwomen/index.html> (Date Accessed: April 26, 2010).