

Insurance Coverage among Women of Reproductive Age in the District of Columbia

The Affordable Care Act established several provisions aimed at reducing the uninsurance rate, and the number of uninsured women of reproductive age (15–44) in the United States fell from 12.7 million in 2013 to 7.5 million in 2017.

In the District of Columbia, which expanded Medicaid under the Affordable Care Act, the uninsurance rate fell from 6.4 percent in 2013 to 3.0 percent in 2017. Despite these gains, approximately 6,000 DC women of reproductive age remained uninsured in 2017.

Uninsurance Rate among Subgroups of Women in the District of Columbia and the US, 2017

Uninsured women are vulnerable to well-documented access, affordability, and health problems associated with lacking insurance coverage, including potentially limited access to family planning and other reproductive health services.

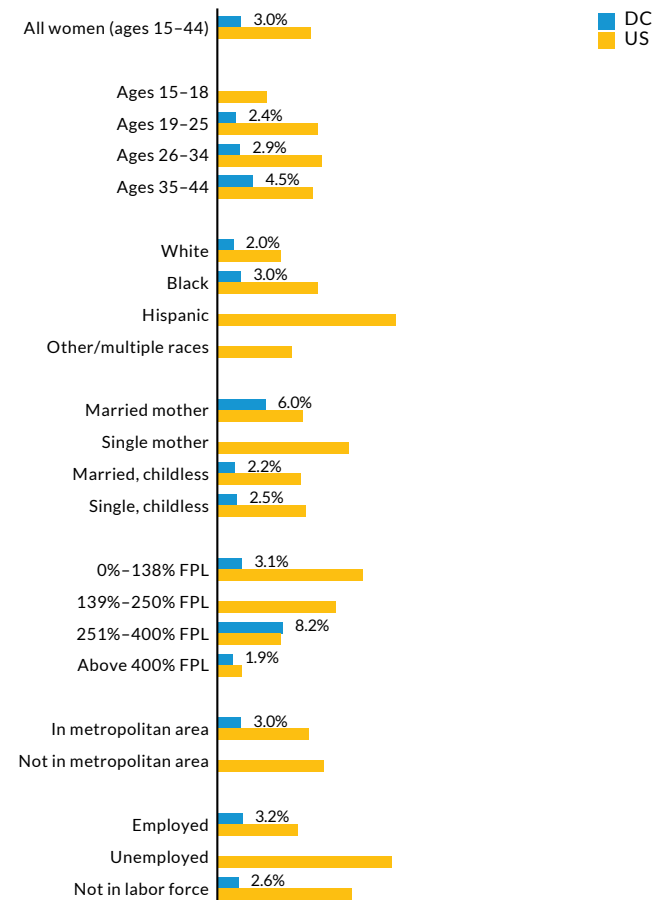
- Women of reproductive age in the District of Columbia had a lower uninsurance rate (3.0 percent) than similar women nationwide (11.7 percent) in 2017 (figure 1).
- Within the District of Columbia, women with incomes between 251 and 400 percent of the FPL had a higher uninsurance rate than the state average for all women of reproductive age in 2017.

Looking Ahead

Reducing the uninsurance rate among women of reproductive age in the District of Columbia may require further expanding access to Medicaid or other highly subsidized insurance, as well as targeted outreach and enrollment efforts to subgroups of already eligible women with the highest uninsurance rates. It will also be critical to track women's ability to access the general and reproductive health services they need, including monitoring the availability and capacity of community health centers and Title X clinics.

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FIGURE 1
Uninsurance Rate among Subgroups of Women of Reproductive Age in the District of Columbia and the US, 2017



Source: Urban Institute analysis of 2017 American Community Survey.
Notes: FPL is federal poverty level. White, black, and other/multiple race are non-Hispanic. Subgroups with no state estimate had a sample size smaller than 200. Differences reported in text are significant at $p < 0.05$.