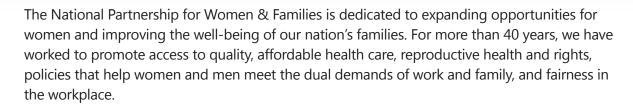
Standing Up for Women & Families in 2016

A Legislative Agenda



The National Partnership works to address all of these issues because women are mothers, daughters and workers, caregivers and breadwinners, and consumers and business owners. We do it because the country needs policies and programs that address the complexities and realities of the lives of women and families today. We do it because when women do better, families do better and our nation prospers.

In 2016, we urge you to stand up for women and families by supporting:

- Paid Sick Days, Paid Family and Medical Leave, and Expanded Access to the Family and Medical Leave Act
- Fair Pay for Women, Fair Scheduling, Reasonable Workplace Accommodations for Pregnant Workers, and an End to Employment Discrimination of All Kinds
- A Secure Safety Net That Protects and Strengthens Social Security, Medicare and Medicaid Benefits
- Comprehensive Reproductive Health Care, Including Contraception and Abortion
- Quality, Affordable Health Care
- Tools and Incentives to Improve the Quality and Value of Maternity Care
- A Fair and Diverse Judiciary



## **Workplace Programs**

It is past time for workplaces to reflect the realities of life for 21st century families.

b Support Paid Sick Days: More than 43 million private sector workers cannot earn a single paid sick day to recover from common, short-term illnesses. This puts the health and economic stability of these workers and their families in jeopardy, and whole communities suffer. We urge Congress and the administration to:



- Support the <u>Healthy Families Act</u>, which would establish a national paid sick days standard and allow workers to earn up to seven paid, job-protected sick days each year.
- Oppose efforts to force workers to choose between time with their families and compensation. Legislation such as the <u>Working Families Flexibility Act</u> offers workers a pay cut without any guaranteed flexibility or time off to care for their own health or their families.
- **Support Paid Family and Medical Leave Programs:** A mere 13 percent of U.S. workers have access to paid family leave through their employers and fewer than 40 percent have employer-provided, short-term disability insurance. Yet at some point, nearly all workers need time away from their jobs to deal with a serious personal or family illness or to care for a new child. We urge Congress and the administration to:
  - Support the <u>Family And Medical Insurance Leave (FAMILY) Act</u>, which would create a national paid leave insurance program to allow workers to earn a portion of their pay while they take a limited amount of time away from their jobs to care for a newborn, newly adopted child or newly placed foster child; care for a family member with a serious health condition; address their own serious health condition; or manage certain military caregiving responsibilities.
  - Support the <u>Federal Employees Paid Parental Leave Act</u>, which would allow federal employees who are eligible for up to 12 weeks of leave under the Family and Medical Leave Act to receive pay for up to six weeks of that time for the birth or adoption of a child.
  - ▶ Support federal grants to assist in the establishment and maintenance of state paid family and medical leave insurance programs.
  - Oppose any paid family and medical leave policy that perpetuates a "boss lottery"

by making access to paid leave entirely dependent on an employer's generosity.

- **Expand the <u>Family and Medical Leave Act</u> (FMLA):** The FMLA has been used by workers more than 200 million times, but about 40 percent of workers are ineligible for the unpaid leave it provides. We urge Congress and the administration to:
  - ▶ Support legislation that expands access to the FMLA to cover: workers in businesses with fewer than 50 employees; part-time workers; leave to care for additional family members, including domestic partners, parents-in-law, adult children, siblings, grandchildren and grandparents; and other uses for leave, including for children's educational activities and elder care needs.
- Promote Fair Pay: Women employed full time, year round are paid, on average, only 79 cents for every dollar paid to men. African American women are paid 60 cents and Latinas just 55 cents for every dollar paid to white, non-Hispanic men. For Asian American women, the gap is narrower but still punishing. Asian American women are paid 84 cents for every dollar paid to white, non-Hispanic men. In addition, women are nearly two-thirds of workers who are paid the federal minimum wage of just \$7.25 per hour. We urge Congress and the administration to:
  - Support the <u>Paycheck Fairness Act</u>, which would update and strengthen the Equal Pay Act by closing loopholes and improving the law's effectiveness. The Paycheck Fairness Act would make it harder for employers to hide pay discrimination, reward employers that have good pay practices, and help train women and girls in salary negotiation.
  - Support the <u>Raise the Wage Act</u>, which would raise the federal minimum wage and the tipped minimum wage.
  - Increase funding for the Department of Labor and the Equal Employment Opportunity Commission to promote robust data collection, investigations and enforcement of federal laws that promote fair pay.
  - Oppose any proposal that only gives lip service to strengthening fair pay laws without providing women new tools to identify or remedy pay discrimination.
- Protect Pregnant Workers:

Despite existing protections, pregnant workers in this country still face discrimination.

Pregnant workers are forced out of their jobs and denied reasonable accommodations that would enable them to continue



working and supporting their families. We urge Congress and the administration to:

- Support the Pregnant Workers Fairness Act, which would help ensure pregnant women have equal access to reasonable workplace accommodations and promote the health and economic security of pregnant women and their families.
- **Support Fair and Predictable Schedules:** When workers do not know when they are scheduled to work, or for how many hours, it can be nearly impossible to manage basic expenses, arrange for child care, continue their education, get a second job, or pursue job training. Two-in-five (41 percent) of workers early in their careers report learning their work schedules with only one week's notice or less.<sup>6</sup> We urge Congress and the administration to:
  - Support the Schedules That Work Act, which would establish national fair scheduling standards that would give workers more control over their schedules and offer them predictability and stability in shifts and work hours.
- Strengthen Retirement Security: Social Security is the largest source of retirement income for most seniors and especially women, helping millions pay for food, housing and other necessities. No other guaranteed wage replacement program, public or private, offers the same level of economic security. Social Security should be strengthened, not cut. We urge Congress and the administration to:
  - Support the Social Security Caregiver Credit Act, which would help to ensure that workers who must take time out of the paid workforce to care for a family member are not penalized for lost wages when it comes time to draw Social Security retirement benefits.

### **Reproductive Health**

Every woman deserves access to comprehensive reproductive health care that includes contraception, abortion, and medically accurate information. When women can make their own decisions about pregnancy and parenting, women and families can thrive

Abortion care is an essential component of women's

**Ensure That All Women Have Real Access to Abortion Care:** reproductive health care, and access to it is vital to both women's health and economic security. Abortion care must remain legal and be accessible for all women regardless of where they live, how much money they make, or where they get their health insurance.



We urge Congress and the administration to:

- Support the <u>EACH</u> <u>Woman Act</u>, which would help ensure all women have health care coverage for abortion, regardless of income or the source of their insurance.
- Support the Women's Health Protection Act, which would combat the onslaught of state abortion restrictions



that impede a woman's ability to make her own health care decisions, make abortion care harder to access, and interfere in the relationship between a woman and her health care provider.

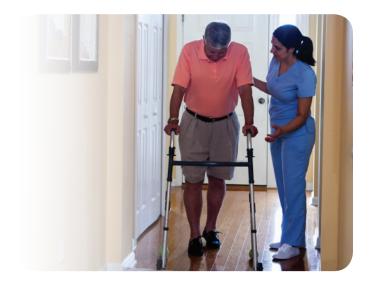
- Oppose attempts to extend, reiterate or codify the harmful and discriminatory
   Hyde Amendment and other restrictions on abortion coverage.
- Oppose any effort to undermine access to abortion care, including proposals that would: increase barriers for specific populations, such as women of color, immigrant women, young women, and low-income women; place unconstitutional bans on abortion; increase barriers for health care providers seeking abortion training; or use religion or personal beliefs to discriminate by denying access to or information about care.
- Oppose the efforts of the Select Investigative Panel targeting abortion providers.
- Ensure Access to Affordable, Effective Contraception: Birth control is basic health care and almost all women will use at least one method of contraception during their lives. Birth control helps women protect their health, plan their families, pursue their education and participate in the workforce. The National Partnership fights to give all women access to contraception. We urge Congress and the administration to:
  - ▶ Support efforts to undo the damage done by the U.S. Supreme Court's decision in *Burwell v. Hobby Lobby Stores, Inc.* and prevent employers from denying coverage for contraception.
  - ▶ Support efforts to increase access to the full range of contraceptive methods, including emergency contraception, and to high-quality contraceptive counseling for all women.
  - Provide robust funding for family planning through Title X and Medicaid.
  - Oppose efforts to defund Planned Parenthood.

- Oppose refusal provisions that allow health plans, medical institutions, employers or others to deny women access to contraceptive coverage and services.
- **Support Comprehensive Sex Education for Our Nation's Young People:** Investing in comprehensive sexuality education improves public health and equips young people with the knowledge and tools they need to make informed decisions about their health and personal relationships. We urge Congress and the administration to:
  - Support efforts to increase access to medically accurate, comprehensive sex education that is free from gender stereotypes and inclusive of the needs of young people regardless of sexual orientation and gender identity. It should provide the information and skills necessary to make informed, responsible and healthy decisions to promote healthy sexuality and reduce unintended pregnancy, intimate partner violence and sexually transmitted infections, including HIV.
  - Provide robust funding for the Teen Pregnancy Prevention Initiative, the Personal Responsibility Education Program, and the Centers for Disease Control and Prevention Division of Adolescent and School Health.
  - Oppose funding for abstinence-only-until-marriage programs.

### **Health Care**

All Americans deserve access to quality, affordable health care that is coordinated and patientand family-centered.

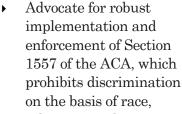
Complete Implementation of the Affordable Care Act (ACA) and Continue to Invest in Improving Health Care Delivery: The ACA is the greatest advance for women's health in a generation. It is moving us closer to the day when all women and families



have health insurance, prevention is a priority, and care is coordinated so family caregivers don't have to shoulder unmanageable burdens. We urge Congress and the administration to:

- ➤ Support adequate resources for all departments and agencies that are administering and enforcing the ACA and overseeing enrollment in coverage. Oppose any attempts to derail implementation of this essential law.
- Support new ways of paying for and delivering health care to provide bettercoordinated, patient- and family-centered care that improves quality and increases the value of every health care dollar. Legislative and administrative

initiatives to promote health care delivery system and payment reform should emphasize engagement of patients and their families as co-creators of new models of health care delivery and payment.



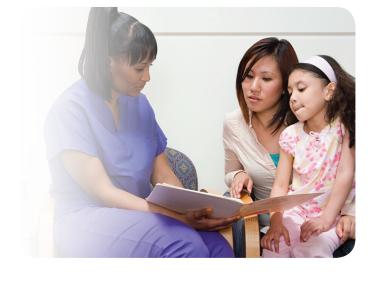


color, national origin, sex, age and disability in federally funded health programs or activities – including in the health insurance market and the provision of health services.

- Ensure that eligible lower-income pregnant women are able to enroll in the coverage option that best suits their needs, whether it is Medicaid, the Basic Health Program, a subsidized Qualified Health Plan or multiple programs, and that ACA benefits for pregnant women and new parents are easily accessible.
- Protect Medicare's Promise for Women: Medicare is the primary source of health care and the lynchpin of financial independence for millions of older women and women with disabilities. Any changes to Medicare must be made in ways that guarantee the promise of affordable, quality health care and make the program stronger for current and future generations. We urge Congress and the administration to:
  - Promote the transition toward value-based payment models that link provider payment to better care for patients and families, better health outcomes and smarter use of health care resources. Patients and families should be central participants in policymaking to reform how Medicare reimburses for health care services, including implementation of the Medicare Access and CHIP Reauthorization Act (MACRA).
  - Oppose policies that delay access to Medicare, such as raising the age of eligibility.
  - ▶ Oppose efforts to undercut Medicare's social insurance compact, such as premium vouchers or means-testing.
  - Oppose attempts to shift additional financial burdens to Medicare beneficiaries, such as excessive copays for needed services.
- Strengthen Medicaid's Safety Net: Without Medicaid, millions of women and children would not have access to health care services and millions of older women and men would

not have access to long-term care. We urge Congress and the administration to:

- Actively promote Medicaid expansion and support Medicaid enrollment efforts.
- Support the introduction of innovative new models of care delivery in Medicaid that ensure high-quality, patientand family-centered



care. Promote the transition toward value-based payment models that link provider payment to better care for patients and families, better outcomes and smarter use of health care resources.

- Oppose policies that would block grant Medicaid, cut funds for the program or impose a per capita cap.
- Oppose policies that would reduce federal obligations or arbitrarily shift costs to states or to Medicaid enrollees.
- Promote the continued expansion of Medicaid family planning services through the Medicaid state plan amendment process and oppose any attempts to undercut family planning services provided through Medicaid.
- Enhance the Quality and Value of Maternity Care: Despite the billions of dollars spent on maternity care in the United States each year much of it Medicaid dollars key indicators of maternal and infant health show that much can be done to improve the quality of this care. This includes increasing the use of evidence-based maternity care practices and reducing unnecessary medical interventions that can harm women and newborns. We urge Congress and the administration to:
  - Support the <u>Quality Care for Moms and Babies Act</u>, which would establish a core set of quality measures for childbearing women and infants covered by Medicaid and the Children's Health Insurance Program (CHIP). Support the development of new quality measures and support maternity care quality collaboratives.
  - Support Medicaid coverage of doula services through various state arrangements (such as Delivery System Reform Incentive Payment waivers and state Medicaid plan preventive services) and for greatest impact by mandating coverage of this high-value service for childbearing women covered by Medicaid.
  - Advance testing of innovative maternity care payment and delivery models to foster better care, outcomes and value, and scale up effective innovations.

- Support the development and use of survey measures that assess the experiences of childbearing women and newborns.
- Reduce disparities by improving access to and the quality of maternity care for Medicaid and CHIP beneficiaries.
- Continue to Promote the Adoption of Health Information Technology That Facilitates Better Health and Health Care: Robust use of health information technology (health IT) is essential to collaborative patient and family engagement and to better health and care. As primary managers of their families' health care, women will benefit directly from the increasing adoption and use of health IT, particularly the ability to access and use health information online and communicate electronically with providers. Online access helps improve patients' knowledge of their health, ability to communicate with doctors, and desire to do something about their health empowering them to make better health care decisions and manage their care more effectively. By leveraging health IT to inform and engage patients and families, providers position themselves for success in new payment and delivery models that reward high quality and improved outcomes. We urge Congress and the administration to:
  - Preserve and advance policies that promote patients' online access to and use of their up-to-date health information compiled across providers and settings of care. This access should be easy to understand, secure, and free of charge.
  - ▶ Ensure that new models of delivering and paying for health care (including those created under MACRA) integrate the robust use of health IT and electronic data exchange for better care coordination between providers, patients and families.
  - Oppose proposals to delay rulemaking or implementation of future stages of the electronic health record (EHR) "Meaningful Use" Incentive Program, a federal effort that gives Medicare and Medicaid health care providers financial incentives to adopt and use EHRs. Delay would jeopardize critical advances for patients and providers'

successful transitions to new models of care under MACRA.

Ensure that health IT adoption includes traditionally underserved communities and benefits all patients, regardless of race, ethnicity, sex, language, disability status or sexual orientation or gender identity.



- ▶ Support Funding for Quality Measure Development and Endorsement: Quality measures are used to evaluate how well providers and care models are performing. Measures are also used to link provider payment to better care for patients and families, better health outcomes and smarter use of health care resources. We urge Congress and the administration to:
  - Ensure delivery system and payment reform legislation promotes a multistakeholder, consensus-based quality measure endorsement and selection process.

# A Fair and Diverse Judiciary

The federal courts remain critical to protecting women's rights.

Prioritize Confirmation of Qualified Judges With a Demonstrated Commitment to Equal Justice to Every Level of the Federal Judiciary: Appointed for life, the decisions made by federal judges and justices will affect women and

families for decades to come. The National Partnership



recognizes that the appointment of federal jurists is critical to women and families. We urge the Senate and the administration to:

Nominate and confirm qualified judges to fill all vacancies, focusing on individuals who increase diversity and whose records demonstrate that they understand the needs of women and families, including access to abortion and contraceptive services, fair pay, family and medical leave, comprehensive health care, and the ability to compete equally in workplaces and live free of discrimination.

<sup>1</sup> U.S. Bureau of Labor Statistics. (2015, July). National Compensation Survey: Employee Benefits in the United States, March 2015 (Table 6). Retrieved 8 February 2016, from http://www.bls.gov/news.release/pdf/ebs2.pdf (Based on 39 percent of a private sector workforce of 112 million people)

<sup>2</sup> U.S. Bureau of Labor Statistics. (2015, September). Employee Benefits in the United States National Compensation Survey: Employee Benefits in the United States, March 2015 (Tables 32 and 16). Retrieved 8 February 2016, from http://www.bls.gov/ncs/ebs/benefits/2015/ownership/civilian/table16a.pdf

<sup>3</sup> Abt Associates Inc. (2012, September). Family and Medical Leave in 2012: Technical Report. Retrieved 8 February 2016, from http://www.dol.gov/asp/evaluation/fmla/FMLA-2012-Technical-Report.pdf

<sup>4</sup> U.S. Census Bureau. (2015). Current Population Survey, Annual Social and Economic (ASEC) Supplement: Table PINC-05: Work Experience in 2014 – People 15 Years Old and Over by Total Money Earnings in 2014, Age, Race, Hispanic Origin, and Sex. Retrieved 8 February 2016, from http://www.census.gov/hhes/www/cpstables/032015/perinc/pinc05\_000.htm (Unpublished calculations based on the median earnings of all men and women who worked full time, year round in 2014)

<sup>5</sup> National Women's Law Center. (2014). Our Issues, Minimum Wage. Retrieved 8 February 2016, from http://www.nwlc.org/resource/fair-pay-women-requires-increasing-minimum-wage-and-tipped-minimum-wage

<sup>6</sup> Lambert, S., Fugiel, P., & Henly, J. (2014, August). Precarious Work Schedules among Early-Career Employees in the US: A National Snapshot. Employment Instability, Family Wellbeing, and Social Policy Network at University of Chicago Publication. Retrieved 12 February 2016, from https://ssascholars.uchicago.edu/sites/default/files/work-scheduling-study/files/lambert.fugiel.henly\_precarious\_work\_schedules.august2014\_0.pdf

<sup>7</sup> National Partnership for Women & Families. (2014, December). Engaging Patients and Families: How Consumers Value and Use Health IT (p. 29). Retrieved 12 February 2016, from http://www.nationalpartnership.org/research-library/health-care/HIT/engaging-patients-and-families.pdf

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# Get to Know the National Partnership for Women & Families

We believe that actions speak louder than words.

For more than four decades, we have fought for every major policy advance that has helped women and families.

Today, we promote fairness in the workplace, reproductive health and rights, access to quality, affordable health care, and policies that help women and men meet the dual demands of work and family.



Founded in 1971 as the Women's Legal Defense Fund, the National Partnership for Women & Families is a nonprofit, nonpartisan 501(c)3 organization located in Washington, D.C.

### **For More Information**

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