Ensuring Public Employee Health Benefits Are Inclusive

Timothy K. Eicher

Principal
Slevin & Hart, P.C.
Washington, D.C.

Michelle Jolivet, PHR

Founder and President
DEI Recruiting and Consulting
Dallas, Texas



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Defining "Inclusive" **Health Benefits**

Inclusive Benefits

- Coverage for a wide range of services
- Accessibility for all employees
- Consideration of cultural, social and economic factors

Case Study—CalPERS

- Challenges
 - Diverse members, health disparities, and retirement security for non-traditional career paths
- Strategy
 - Broad compressive healthcare
 - LGBTQ+ programs
 - Wellness programs
 - Financial and retirement wellness
- Results
 - Improved health outcomes
 - High member satisfaction
 - Enhanced retirement security

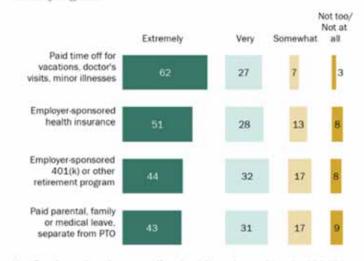
Employer of Choice

- Strengthened recruitment and retention
- Boosted satisfaction and employee engagement
- Decreased absenteeism rates
- Enhanced workplace productivity
- Better health and well-being outcomes
- Inclusive workforce representation
 - LGBTO+
 - Diverse relationship statuses
 - Income levels
 - Ages

Generations at a glance	BOOM	X		7
Born ¹	1946-1965	1966-1980	1981-1996	1997-2012
Ages!	77-58	57-43	42-27	26-11
% of global population	14%	19%	23%	25%
% of U.S. workforce ³	18%	3196	36%	15%
Aspirations*	Job security	Work-life balance	Freedom and flexibility	Security and stability
Company loyalty, teamwork, duty		Diversity, work- life balance, personal- professional interests over company interests	Responsibility, quality of their manager, unique work experiences	Diversity, personalization creativity, individuality
Worldview ^{4,5} Achievement comes after paying one's dues; sacrifice for success		Diversity; quick to leave if needs unmet; resistant to change at work if it impacts their personal lives	Seeking growth and development; fun environment; work-life balance; quick to leave if workplace unwilling to change	Independence, individuality, and diversity; innovative co-workers; concerned about the future
Communication preference ^{s, a}	More formal; in-person or phone call	Informal but direct style; email and text messages	Frequent and timely feedback; text/ chat messages	In-person preferred; video calls

Most workers say it's extremely important to them to have a job that offers paid time off for vacations, doctor appointments, minor illnesses

Among employed adults, % saying it is ____ important to them personally to have a job that offers each of the following, regardless of whether their current job offers it

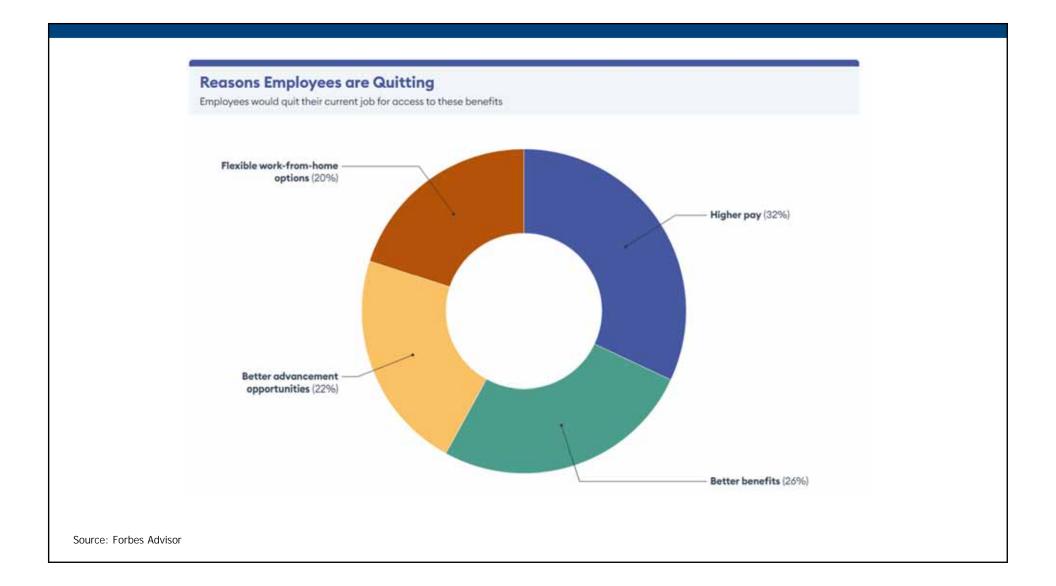


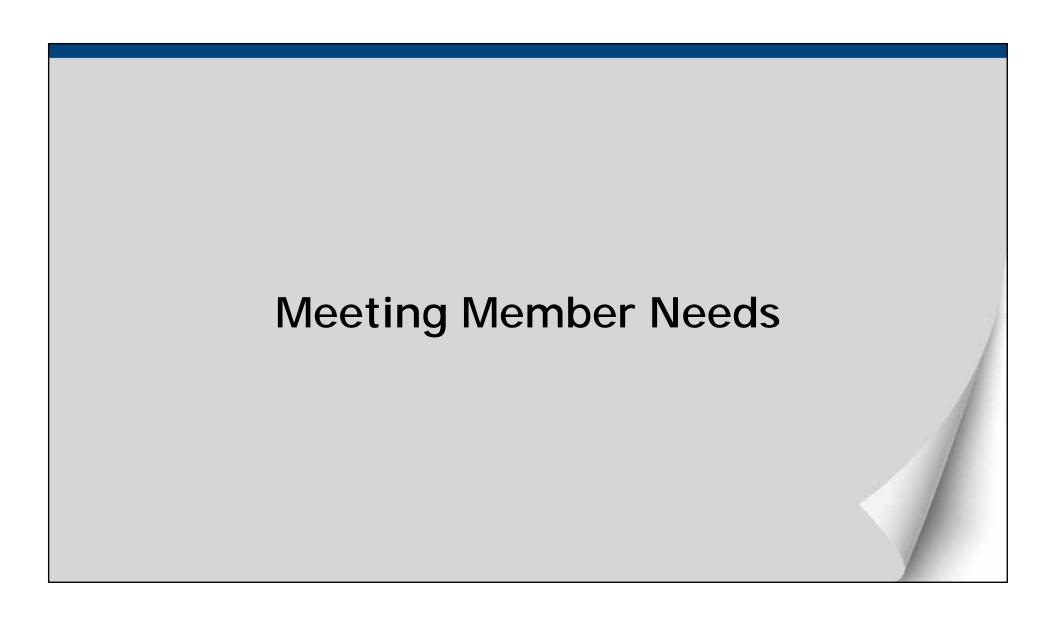
Note: Based on workers who are not self-employed. Share of respondents who didn't offer an answer not shown.

Source: Survey of U.S. workers conducted Feb. 6-12, 2023.

"How Americans View Their Jobs."

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100	5 Benefits Employees Want From Employers s Advisor surveyed employees to find the most desired benefit offerings		Benefits Employers Provide as Advisor surveyed business owners to see which benefits they most commonly offer
Ę	Employer-covered healthcare	1	Employer-covered healthcare
2	Life Insurance	2	Life Insurance
3	Pension and retirement plans	3	Pension and retirement plans
4	Mandatory paid time-off	4	Mental health assistance
5	Mental health assistance	5	Employee discounts

Source: Forbes Advisor

Medical

- Personalized medical insurance
- Family planning
- Reproduction health
- Domestic partner
- Gender-affirming care
- Chronic disease management
- HSA vs. FSA vs. HRA—With matching

PTO and Work Hours

- Flexible time
- Hybrid
- Work from home
- Compassionate leave
- Floating holidays

Professional Development

- Job rotations
- Training and development courses
- Tuition reimbursement
- Professional networking and conferences

Mental Health/Wellness

- Mental health support such as counseling or therapy
- Substance abuse treatment
- EAP—Expanded to include behavioral health
- Meditation apps and mindfulness programs
- Stress management courses
- Spa treatments
- Personal training sessions
- Nutrition counseling
- Wellbeing membership: Gym, meals, ClassPass

Family and Childcare

- Family forming benefits
 - Doulas, midwives and birthing centers
- Parental leave
- Eldercare
- Childcare
 - Subsidized childcare services
 - On-site childcare facilities
 - Dependent care flexible spending accounts
 - Backup childcare

Other Benefits

- Pet insurance
- Tuition or school loan reimbursement
- Rewards Program—Personalize
 - Monetary bonuses
 - Extra time off
 - Gift cards or vouchers
 - Company swag

How to Determine What Members Need

- Engagement
 - Surveys
 - Focus groups
 - Regular feedback loops
- Education and awareness
 - Transparent communication
 - Training session
 - Informational material

Barriers to Inclusive Benefits

- Public plans—Slow in the agile market
- Cost
- Stigma
- Political
- Legal
- Communication

Inclusive Benefits vs. Carve-Outs

- Carve-out
 - Specific benefits separated from the main plan
 - High-cost or specialized service
 - Can create gaps in coverage—Lead to inequities
- Inclusive benefit
 - Comprehensive coverage for all employees
 - Holistic approach to health and wellness
 - Promotes equality and reduces disparities

How to Develop Your Plan

- Review current program and budget
- Engage your employee feedback
- Remove exclusive language
- Review regularly—Be agile
- Develop robust communication— Multiple platforms
- Make part of your overall culture inclusivity

Navigating Legal and Political Landscapes

DEI—A Dirty Word?

D.E.I. Programs Are Getting in the Way of Liberal Education

July 27, 2023



Usersity really has nothing to do with safe travel, kyle Balicy said

When Secret Service puts DEI first, its protectees are endangered

Worship at the unholy altar of DEI has become de rigueur within federal law enforcement's senior executive ranks



Civil rights groups call on Fortune 1000 companies to stop 'abandoning DEI'

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The 'DEI Hire' Trap: How Biden Turned His VP Pick Into Fodder For Critics

Susan Harmeling, Ph.D. Former Contributor ⊙

Harvard-trained Prof. of Global Inclusive Leadership, Thunderbird/ASU

Column: The resignation of Harvard's Claudine Gay is touted as a DEI failure, but that's hardly the case

DEI—A Dirty Word?

- In recent years, conservative critics have seized on "DEI" as a buzzword
 - "Reverse discrimination"
 - Reaction to perceived "woke" policies that gained popularity in 2020
- Pullback by some organizations
 - In July 2024, SHRM announced it would no longer use the term and instead refer to "Inclusion and Diversity"
 - The decision triggered a wave of negative reactions from HR professionals and others
 - "We cannot deny there has been a significant public backlash against the E which threatens to throw the baby out with the bath water."

Source: https://www.forbes.com/sites/sheilacallaham/2024/07/28/does-shrms-removal-of-equity-from-inclusion-equity-and-diversity-point-to-a-new-strategy-or-signal-something-much-bigger/

Special Considerations for Public Plans

- Different laws from private employers
 - US Constitution (Equal Protection Clause, 14th Amendment) and Title VII
 - Freedom of Information Act (FOIA) concerns
 - Public employer plans generally not subject to ERISA—
 No preemption of state laws
 - But they are subject to other parts of the Public Health Service Act
 - Consolidated Appropriations Act/No Surprises Act
 - Transparency in Coverage Rules
 - HIPAA, ACA, MHPAEA

Students for Fair Admissions v. Harvard

- Unconstitutional for universities to consider race as a factor in the admissions process
 - Applies to public institutions under the Equal Protection Clause
 - Under Title VI of the Civil Rights Act of 1964, also applies to private entities that receive federal money
- No direct application to employers, but could lead to an increase in legal challenges to DEI initiatives

Implications of SFFA v. Harvard

- Interview diversity requirements appear to be ok
 - e.g., the "Rooney Rule" in the NFL
- Affinity groups—Consider opening up to all
- Inclusive benefit carveouts
 - To the extent a program is facially available to all, it may be less likely to invite challenge
 - But labeling a benefit as primarily or exclusively for a particular group may present difficulties
 - Example: Fertility benefit programs—For LGBTQ or all?

Mental Health Parity

- Mental Health Parity and Addiction Equity Act of 2008 ("MHPAEA")
 - Prohibits group health plans that cover the treatment of mental health or substance use disorders (MH/SUD) from imposing treatment limitations unless such limitations are comparable to and applied no more stringently than those applied to medical/surgical benefits.
 - Applies to both Quantitative (QTLs) and Non-Quantitative Treatment Limitations (NQTLs)

Mental Health Parity—Government Plans

- MHPAEA does not apply to:
 - Self-insured non-Federal governmental plans with 50 or fewer employees
 - Large, self-funded, non-Federal governmental plans that complete a HIPAA opt-out of the MHPAEA requirements
 - Non-Federal governmental plans offering only excepted benefits
 - Retiree-only plans
 - Plans that incur an increased cost to comply with MHPAEA.
- The CAA of 2023 amended the PHSA to eliminate the ability of self-funded, non-Federal governmental plans to opt out of MHPAEA requirements after December 29, 2022.
 - Prior elections expiring on or after June 27, 2023 cannot be renewed

Mental Health Parity—2024 Final Rule

- Final Rule issued in September 2024 singles out limitations on applied behavioral analysis (ABA) treatment for autism and nutritional counseling for eating disorders as particular areas of concern for DOL
- NQTLs
 - Plans must conduct comparative analyses to measure the impact of NQTLs
 - Includes evaluating standards related to network composition, out-of-network reimbursement rates, and medical management and prior authorization NQTLs
 - Plans prohibited from using discriminatory information, evidence, sources, or standards that systematically disfavor or are specifically designed to disfavor access to MH/SUD benefits as compared to medical/surgical benefits when designing NQTLs

Dobbs v. Jackson Women's Health Org.

- The Court voted 6-3 to uphold Mississippi's 15-week abortion ban
 - Explicitly overrules Roe & Casey and rescinds federal constitutional protection for the right to abortion
 - Holds that abortion restrictions are subject to rational basis review
 - Employers may look for ways to support employees who need to travel out of state to access services
- HIPAA Rule on Reproductive Health PHI

Covering Travel Expenses After Dobbs

- Coverage of travel expenses under an existing plan
 - Coverage through plan or integrated HRA (required for ACA compliance)
- Coverage of travel outside of an existing plan
 - IRC Section 501(c)(9) permits a VEBA to pay for travel benefits
 - Excepted Benefit HRAs
 - Individual Coverage HRAs
 - EAPs
 - Health FSAs
 - HSAs

Covering Travel Expenses After Dobbs

- Amounts received by members of a VEBA (health plan) are excluded from the recipient's gross income if they meet the statutory requirements of IRC §106. See IRM 7.25.9.8 (09-12-2014); 26 CFR § 1.501(c)(9)-6(b).
- IRS definitions of medical expenses (and limits)—IRS Pub. 502
 - Lodging—Can reimburse up to \$50 per person per night; can include lodging for a person traveling with person receiving medical care if accompaniment needed (subject to same \$50 limit; ex. parent and child travel lodging reimbursable up to \$100 per night).
 - Transportation—Can reimburse for bus, taxi, train or plane fares or ambulance services;
 if driving, can reimburse for out-of-pocket expenses such as gas and oil, mileage at standard medical mileage rate (\$0.22 per mile in 7/1/22), and parking and tolls.
 - Meals not included.
- Excess reimbursements would be taxable to recipient. If plan provides more than tax limits, plan will have to issue W-2s or 1099s for excess.

ACA Non-Discrimination

- Section 1557 of the ACA prohibits discrimination on the basis of race, color, national origin, sex, age, or disability in certain health programs or activities
- Applies to insured plans and self-insured funds that receive federal assistance, e.g., retiree drug subsidies or an EGWP
- In *Bostock v. Clayton County* (2020), the Supreme Court held that Title VII prohibits discrimination on the basis of sexual orientation or transgender status.
- Builds on a series of EEOC rulings holding that discrimination because of sex includes sexual orientation and gender identity.

ACA Non-Discrimination—Rules and Litigation

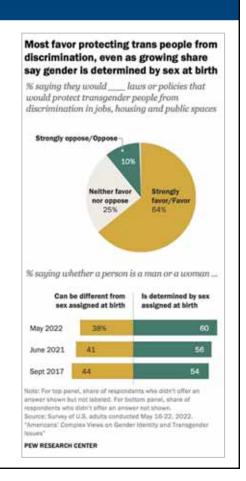
- 2016 Proposed Rule (Obama) defined sex discrimination to include discrimination on the basis of sexual orientation, gender identity and termination of pregnancy.
- 2020 (Trump) Final Rule removes these provisions, but courts in several states enjoin enforcement.
- 2024 (Biden) Final Rule applies nondiscrimination protections to sexual orientation, gender identity, and pregnancy and related conditions
 - Applies to all programs, including telehealth, not just those that receive federal money
 - Appears to signal that gender-affirming care coverage may be required
 - Currently subject to a nationwide injunction from the 5th Circuit

Bostock v. Clayton County

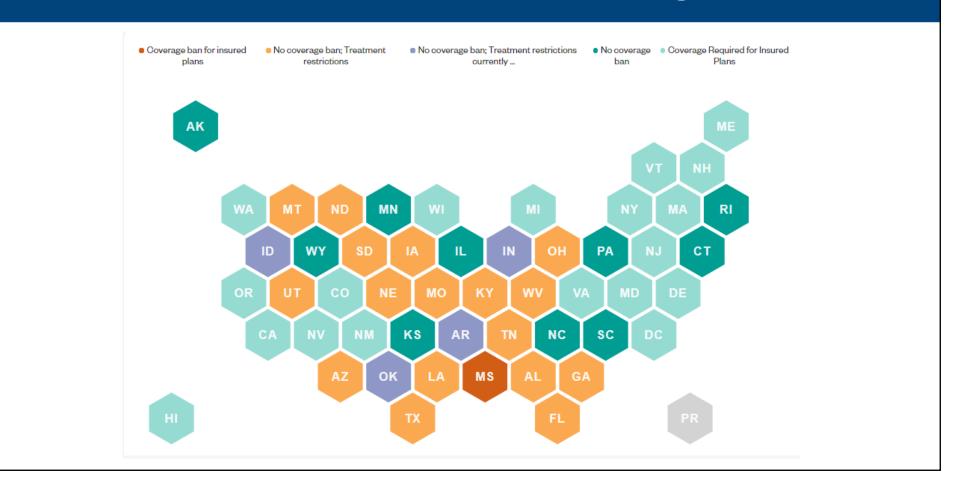
- Under Title VII, which prohibits workplace discrimination based on sex, religion, race, national origin
- Builds on a series of EEOC rulings holding that discrimination because of sex includes sexual orientation, gender identity
- Court rules 6-3 that discrimination based on gender identity or sexual orientation is necessarily also discrimination "because of sex"
- Employers accept a certain conduct (e.g., attraction to women, wearing a skirt to work) in one sex but not the other
- Opinion by Gorsuch rooted in the statutory text of Title VII
 - Some courts an agencies have interpreted the ruling broadly to apply to any discrimination based on sexual orientation or gender identity
 - But it is unclear how the reasoning would apply to a facially neutral law e.g., a state law banning all gender surgery below a certain age

Transgender Healthcare

- June 2022 Pew study—Most Americans favor protecting trans people from discrimination (jobs, housing, public spaces)
- However, the percentage who said man/woman is determined by the sex assigned at birth increased
- What does this mean for employee benefits?



State Laws on Gender-Affirming Care



Gender-Affirming Care—Litigation

- Fletcher v. Alaska (2020)—District Court rules that denial of coverage for gender affirmation surgery of a state employee violates Title VII
- Toomey v. Arizona (pending)—Class action against state of Arizona for its exclusion of "gender reassignment surgery"
- Lange v. Houston Cnty. (11th Cir. 2024)—Court vacates and agrees to rehear panel's holding that an employer violated Title VII because its plan excluded coverage for gender-affirming surgery

Gender-Affirming Care for Minors

- Over the past three years, 26 states have passed laws restricting gender-affirming care for minors
- A Tennessee law enacted in 2023 bans genderaffirming care such as hormone treatments and gender-transition surgeries for patients under 18
- SCOTUS will hear challenge to the Tennessee law in Fall 2024, with a decision likely by Summer 2025

Fertility Coverage—An Emerging Issue

- Many medium/large employers have begun offering IVF and surrogacy coverage (Facebook, Apple, Salesforce, Spotify)
- "Infertility" requirement
 - 12 months of unprotected sex or 6-12 cycles of donor insemination
 - Requires same-sex couples to pay for costly procedures before they are eligible for the same coverage as a straight couple—"Queer tax"(?)
- Class action suit against Aetna
- Gay couple in NYC files EEOC complaint against the city and have filed suit in Federal court



Key Takeaways

- Making benefits more inclusive can help attract and retain talent
- Public employers face unique structural and legal challenges in implementing and maintaining inclusiveness
- But there are many options for meeting member needs
- Recent legal trends highlight the importance of nuance in how DEI initiatives are communicated and implemented

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