



How can we best assess our health benefits for our LGBTQ+ employees?

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QUESTION: Recently, I've had two employees come to me asking whether our health benefits covered specific needs that they have as a LGBTQ+ employee. Truthfully, I wasn't sure how to respond because I realized that I didn't know which benefits they were referring to. What should I do to better understand our benefits and be able to support these employees' needs?

ANSWER: Health benefits can be complicated, and you do not need to be an expert on all of the details. That is why you work with an agent and/or have contacts with your health insurance carrier. Before reaching out to them, list out specific questions based on employee feedback. The following are some potential questions to ask:

1. What is the coverage for domestic partners? Yes, same-sex spousal benefits are the law, but many individuals have not married for various reasons. They may have a domestic partner instead. It is important to understand the carrier's benefits regarding domestic partners so that it can be communicated to employees.
2. What are the mental health benefits? Being LGBTQ+ doesn't automatically mean someone will need to access mental health benefits, but it may mean they're at higher risk of experiencing poor mental health. Therefore, an understanding of the availability of mental health coverage is important.
3. What coverage is available for transgender health care? Does the carrier cover gender-affirming surgeries? Does it cover prescription drug therapies?
4. What is the coverage for IVF and surrogacy? Has the carrier expanded coverage to individuals who do not meet the clinical definition of infertility?
5. Does the carrier have ways to identify physicians and other providers who are knowledgeable and sensitive to the needs of the LGBTQ+ community? Are they able to search for providers who understand the unique needs of this community?

By asking these questions, you will not only better understand your offerings, but you can also assess them and determine if you want to make changes, which may even include switching to a carrier that has more inclusive options.

In general, it is a good idea to periodically check in with staff about the health benefits you offer. Ask whether the coverage meets their needs. You can also ask if there are other benefits or coverages that they wish were offered. You may do this individually through conversation, a survey, or both. Asking the questions doesn't mean that you are promising enhancements or changes, but it is better to operate from

a place of knowledge, especially with a benefit as expensive as healthcare. And the best way to find out is to talk with your employees.

It is also important to be proactive in sharing your benefit offerings with staff. Don't wait until open enrollment time, but instead offer information periodically throughout the year; this may mean highlighting a specific benefit during staff meetings or in your newsletter.

Your health benefits are a key part of your employee recruitment, retention, and engagement strategy. Each employee has a unique situation and while you may not be able to meet everyone's needs, you can continually work to understand the benefits you offer and determine if they can be expanded to better address the desires of your team.