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Refresher: Inclusive benefits review – goals and objectives



Do our current benefit programs meet the needs of a diverse workforce?



How do benefits impact our ability to attract and retain employees?



Does the current benefits package support an inclusive and diverse culture, and align with the State's Diversity, Equity, and Inclusion goals?



Are there opportunities to improve the wellbeing of State employees (financial, physical, and/or emotional wellbeing)?

Support Development of GHIP Future State

Meaningful Choice – Several medical plan options that are meaningfully different in terms of price tags and benefit value (including an IRS-qualified HSA plan)

Personalized Benefit Offerings – After-tax Lifestyle Savings Account aimed at meeting the participants' life needs in any given year (e.g., child/elder care, student loan repayment, pet insurance, etc.)

Voluntary Benefits – Strategic approach driven by employee demographics, supported by robust benchmarking, market knowledge and enrollment services

Flexible Subsidization – Employees receive fixed amount towards suite of core and voluntary benefit offerings such that employees can purchase based on their own unique needs

Meets Variety of Needs – Scope of benefit offerings are flexible to meet the needs and preferences of the State's diverse workforce



Refresher: Inclusive benefits review – overview of process

Health benefits reviewed

- Family forming benefits
- Gender-affirming care / LGBT+
- Women's health
- Mental health / emotional wellbeing
- Broad wellbeing
- Dental

Areas for potential future study/review

- Disability plan and policies
- Leave/time off programs
- Retirement readiness and benefit offerings
- Caregiving benefits
- Perks/ancillary benefits
- Benefits education, communications and resources

Benefits are reviewed on a "good, better, best" scale for select provisions through a DEI lens, using:

- Corporate indices, such as Human Rights Campaign's Corporate Equality Index
- Published clinical guidelines and best practices (e.g., WPATH)
- Employer prevalence data and surveys
- Employee surveys and input



Strengths in current offerings

Health benefit reviewed	Strengths
Family forming benefits	 Generous fertility benefit implemented in August 2019 with medical and Rx maximums above benchmark for members that meet requirement of demonstrated infertility
Gender-affirming care / LGBT+	 Transgender surgery coverage generally aligned with WPATH¹ Standards of Care v.7 based on Aetna and Highmark's standard policies
Women's health	Current benefits cover many services to support women's health and wellbeing at all life stages
Mental health / emotional wellbeing	Robust mental health and substance abuse support through Aetna, Highmark, CVS and ComPsych EAP
Broad wellbeing	 Robust clinical programs and wellbeing offering to support members in managing physical health through best-in- class partnerships Workplace Wellbeing Policy executed in July 2022
Dental	 Current dental benefits aligned with most best practices through DEI lens, recognizing that the State has more flexibility with the Delta Dental plans vs. Dominion HMO

^{1.} The World Professional Association for Transgender Health (WPATH) is currently the main group creating evidence-based guidelines for treatment of transgender individuals.



Opportunities to better align with strategic objectives

Health benefit reviewed	Short-term considerations (FY24)			Long-term considerations	Examples (Short-term considerations unless otherwise noted)
	Communications	Reporting / Monitoring	Plan Design / Coverage	(FY25+)	(Onort term considerations amess otherwise noted)
Family forming benefits	X	X	X	X	 Communications: Develop/Expand targeted communications outlining family forming support available
					 Reporting: Monitor utilization of current fertility benefit by race/ethnicity, location, income and other family forming benefits administered by the State
					 Plan Design/Coverage: Explore with TPAs ability to ad coverage, cost impact, etc. of removing demonstration of infertility requirements for opposite sex, same sex and transgender couples, and single parent by choice
Gender-affirming care / LGBT+	X	X	X	X	 Communications: Review/enhance supervisor toolkit and training to support employees who are transitioning
				 Reporting: Work with PHRST, Merative, Aetna, and Highmark to determine acceptance of non-binary gender markers in vendors' coding system and reporting 	

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	Communications	Reporting / Monitoring	Plan Design / Coverage	(FY25+)	(Onort term considerations amess otherwise noted)
Women's health	X		X	X	Communications: Ensure contraception benefit is adequately promoted; reduce barriers to getting contraception through appropriate promotion of family planning and related resources
					 Plan Design/Coverage: Enhance coverage for wigs for any treatment, illness or injury resulting in hair loss and align benefit maximum across Aetna and Highmark (e.g., \$1,000)
					 Long-term consideration: Incorporate preventive care metrics by gender, race/ethnicity, location, and income in overall measurement strategy (assuming this data is collected and tracked in the future)
Mental health / emotional wellbeing	X		X	X	 Communications and Coverage (short and long- term): Work with Aetna and Highmark to evaluate provider network diversity (e.g., race and language) and ability for members to find culturally competent providers (race/ethnicity, LGBT+, etc.)
				Plan Design/Coverage: Explore enhanced EAP models with higher session limit	

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Broad wellbeing	X		X	X	 Communications: Leverage the State's benefits website or other digital "hub" strategy bring together all wellbeing-related support and education, with tailored messaging and content for targeted cohorts and life events
					 Plan Design/Coverage: Expand hearing aid benefit to adults over age 23/24
					 Long-term Consideration: Where possible, review wellbeing program participation and engagement data by race/ethnicity, location, income, etc.
Dental	X		X	X	Communications: Ensure consistent administration and communication of ability to receive extra cleanings and information for members who self- report as having a qualifying chronic condition (e.g., diabetes, heart disease, pregnancy) across dental carriers
					 Plan Design/Coverage: Expand coverage for all missing teeth (no limitations) and include coverage for prefabricated crowns for primary/permanent tooth without age limitations

Inclusive benefits review – next steps

- Some additional research with the GHIP vendors is ongoing to determine the ability and/or cost to implement the specific opportunities noted in this review
- Starting with the October Subcommittee meeting, further review and discussion of specific opportunities by type of health benefit reviewed will be covered
- Health Policy & Planning Subcommittee may choose to further explore some or all recommendations
 including additional vetting of cost impact, member impact, administrative impact, vendor capabilities, etc.
- Changes do not need to be adopted immediately consider prioritizing changes for implementation in FY24,
 FY25, or a future year
- Findings will be considered in the context of compliance requirements (e.g., Mental Health Parity and Addiction Equality Act) and any other Benefits Modernization efforts (e.g., employee survey)

