

Employer vs. employee perspectives on religious healthcare denials and insurance networks: A mixed methods study



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BACKGROUND

- Most women (60%) access health insurance through employer (theirs/spouse's)¹
- Catholic-affiliated health care institutions restrict provision of reproductive care
- Trends toward smaller provider networks could lead to fewer non-religious options²

AIMS

- Explore how U.S. employers consider health insurance benefits and networks that may include religious health systems
- Explore whether benefits meet employee expectations and needs for reproductive care

METHODS

- Key informant interviews with insurance decision-makers (n=14) for large U.S. employers (Jan-May 2019)
- Employee survey to U.S. adults working at S&P 500 companies who receive employer-based health insurance (Dec 2019 – Jan 2020)
- Dual sampling approach combining nationally representative probability-based sample (AmeriSpeak) with non-probability consumer panel (Dynata)
- English language
- Analyses weighted and adjusted for complex survey design

REFERENCES

1. Women's Health Insurance Coverage. Kaiser Family Foundation, January 24, 2020.
2. Atwood A, Lo Sasso AT. The effect of narrow provider networks on health care use. *J 348 Health Econ* 2016;50:86–98. <https://doi.org/10.1016/j.jhealeco.2016.09.007>.

Large employers have leverage to shape employee access to providers. They expressed willingness to respond to employee feedback on gaps in reproductive health coverage

- More control over benefit design than provider network, but still some leverage
- Few perceived barriers to employees receiving reproductive health services
- Will make plan changes (e.g. infertility coverage), but insurance carrier responsible for provider gaps

“That's 0.001% of people's concern about health care, is reproductive rights and religious affiliations...there's very little to zero noise on that.”

– Benefits manager at machinery company

LIMITATIONS

- Themes from interviews reflect small sample of employers
- Survey used dual sampling approach to reach specific insured population
- Insurance coverage and networks are complex for health consumers; survey relies on self-report

Employees find reproductive health coverage important

77% say contraceptive coverage is important/very important

65% say infertility treatment coverage...

46% say abortion coverage...

Employees experience reproductive health care denials

11%

Reported an insurance denial or in-network provider/hospital denying care

35%

Would feel uncomfortable talking to their employer if they or a family member was unable to get a reproductive health service

CONCLUSIONS

- **Employers may lack awareness** of employees' values and experiences with reproductive health coverage
- **Employer engagement needed** to ensure insurance offerings support employees' health needs, especially given employees' hesitance to voice concerns.
- Large employers may be able to **press insurance carriers** to address gaps in care resulting from religious restrictions.