

[00:05] **Intro Voiceover:** Welcome to Health Unscripted, brought to you by the Cigna Group, a podcast featuring real, raw conversations with some of the most knowledgeable experts in the healthcare industry.

[00:19] **Julia Huggins:** Welcome to the Health Unscripted podcast. My name is Julia Huggins. And I'm the senior vice president of US commercial and president of our specialty Solutions. For more than 30 years, I've been an advocate for helping leaders improve the health and vitality of their employees. And today, I am privileged and honored to be sitting down for a conversation on ways employers can advance LGBTQ plus equity and inclusion with my colleague, Dr. Renee McLaughlin.

[00:49] **Dr. McLaughlin:** Really a pleasure to join you on this podcast. I am Renee McLaughlin. I am our national medical executive for provider based relationships. I work on our ACO and our value based care models, and probably more in line with today's conversation, I'm also Cigna's National Medical Director for Transgender Health. I've been with the company for longer than I care to remember now. It's actually been a great 18 years, so that's who I am and what I do with the company.

[01:20] **Julia Huggins:** Let's jump right in. You've spoken about your personal connection to equity and inclusion for the LGBTQ plus community. Do you mind sharing a bit more about your journey?

[01:31] **Dr. McLaughlin:** Sure. And that's a great place to start. My connection to the LGBTQ community is really threefold. One, as a healthcare provider, as a physician myself, I'm passionate about caring for people, caring for all people, no matter who they are, who they love, what they look like. Number two, LGBTQ health is an area of academic interest to me, as well as professional interest within the company. Given my role and really, to be totally transparent, those two come about because I'm part of the community as well. I'm transgender. I transitioned, and we can have a whole other conversation around what that means. I underwent a gender transition while being employed here at the company. It'll be ten years this June. So coming up fairly quickly, if you want to understand the realities, the challenges of a diverse population, become a member of that diverse population.

[02:29] **Julia Huggins:** Taking a step back, can you talk a bit about the current state of LGBTQ plus equity and inclusion in America?

[02:37] **Dr. McLaughlin:** Well, I think that great sage Charles Dickens summed it up really well these were the best of times, these were the worst of times. That really applies to the environment for LGBTQ people. On the one hand, best of times. It's an amazing era, particularly in the United States, to be an out and proud LGBTQ person or an ally. We have greater freedoms, greater acceptance. We're, in many respects, really just viewed as part of the normal social fabric of our environment more so than ever before, and we've got legal protections to back that up and closer to our heart as a business. 842 other businesses just like Cigna, have received a perfect score on the HRC Corporate Equality Index. Yet no time in my life have I seen more vitriol, more animosity directed towards LGBTQ people.

[03:35] **Julia Huggins:** So as we hone in on inclusion and equity in the workplace, what are some of the most common questions you hear from clients in regards to advancing LGBTQ plus equity and inclusion?

[03:48] **Dr. McLaughlin:** Yeah, I mentioned the HRC Corporate Equality Index, and I think that's a really important point for all of us in the employer health benefits workplace to be aware of, because that is a tool that many employers are using to assess and further the quality of the workplace environment for their LGBTQ people. So that's one thing to be just kind of generally aware of. And if you're not, HRC organization has great resources on their website specific to your question. So the two things I'm asked most commonly by employers as they're seeking to advance workplace equity for LGBTQ people are, how should I think about benefits for LGBTQ people, and what can we do to improve access to care? Both of those are our areas of conversation and challenge. So that's really where the conversation is today.

[04:43] **Julia Huggins:** I'm curious to know your thoughts on the topic of allyship for those not part of the LGBTQ plus community. What are some appropriate ways employers and colleagues can help foster a sense of belonging?

[04:57] **Dr. McLaughlin:** Let's tackle that by differentiating allyship from supporter. And I'd make that distinction because, on the one hand, supporting LGBTQ people, supporting people who are different than I is one thing, but being an ally is actually, in my mind, a contact sport. And what I mean by that is you have to be willing to stand up, to speak up for others that you are an ally to. When you're hearing conversations that are disrespectful or worse, towards an LGBTQ colleague or friend, you need to have the courage to intervene. The other point to make is it's important to actively engage with those people you seek to support. Let them know that you're there. Let others know that you're there for them. One of the things that really sticks in my memory, and this was going back, it was probably seven or eight years ago, I was working in our office in Chattanooga, Tennessee. That's where my office was. Our employee resource group had an initiative where we distributed rainbow flags, pride flags, and those who were supportive put the flag on their office door, on their cubicle, or what have you, and you could just immediately see them. It was like a rainbow. There was so many people, and they were supportive. So being active in being willing to show your support, I think that those are just a couple thoughts that I have around allyship and support for LGBTQ people in the workplace.

[06:32] **Julia Huggins:** And you mentioned a bit about benefits. Could you share advice for employers and benefit managers? What are some other ways employers can foster an inclusive workplace?

[06:42] **Dr. McLaughlin:** Yeah, two general categories that are specific to LGBTQ people now realizing that the vast majority of health care needs are those of any other human being teen care, preventative care, urgent care, et cetera. But there are some specific needs where benefits play an important role. Fertility benefits are really important and really, maybe even the better way to phrase that would be family formation benefits. When you think about same sex couples, the problem isn't fertility. The problem is family formation. Working with clients, benefit managers to think more broadly than a diagnosis of fertility being required to access family formation benefits. Especially important and I think more challenging sometimes is thinking about family formation benefits for same sex male couples. You start to talk about surrogacy or adoption and things that maybe we get a little uncomfortable thinking about in a health benefit context. But we need to kind of think past that because these are really important benefits that we should be considering for all of our folks. So that's one area of benefit consideration.

[07:55] **Julia Huggins:** On the topic of health equity and access to care, what are some things employers can do in terms of improving access?

[08:02] **Dr. McLaughlin:** Sure. And when I think about access to care, I generally think of access to care as two sides of the same coin. One side is financial access to care, and that's the benefit conversation that we just had. The other side is actually clinical access. Finding a doctor for LGBTQ people, finding a health care provider. That is we use the phrase clinically and culturally competent, meaning I know the health care issues, needs, risks, strategies, barriers. I know that. And I actually want to care for these folks and I understand the nuances of their cultural environments so that I can do it in a trustworthy and trusting environment that creates the sense of trust. That's a challenge. Why is it a challenge? There are some studies from a number of years ago that highlight the fact that many healthcare providers and these were surveys of healthcare trainees residents who had no interest. They just didn't want to serve that population, which, as a doctor myself, who are these folks? That's not why we went to medical school. So that's one starting point. And then the next point is unlike or finding an orthopedic doctor or a cardiologist or any other of the multitude of medical specialties that are residency trained, who have fellowships, who have formal credentials, those things don't really exist for healthcare providers that support LGBTQ people. There aren't any formal residencies. There aren't any certified fellowships. So finding doctors that are credentialed is a real challenge. We have long recognized that as a problem. It's one of the most common things that our customer support teams work with. We've done some really foundational work to help close that gap. So while we shouldn't be and we don't run residencies, what we can do is we can, as part of our credentialing process, we can seek out and ask providers directly. Do you find yourself to be clinically and culturally competent. Those who test to that, we recognize them in our provider directory so our customers can find them. Is that the be all, end all? Heck no. That's the starting point. But every journey starts with the first step. Effective health care is founded on trust. As a patient, we are entrusting one of our most precious resources, one of our most precious assets to someone else. We're giving it to them, and that's our health. And so we have to trust that the person on the other side of the table has our best

interests at heart and understands our unique needs. So that is absolutely critical. A lot of really good studies, recent studies that show that that level of trust, that level of engagement is actually higher when a healthcare provider shares at least some cultural or racial or ethnic background with their patients. So really important. And that's not to say so just because I'm LGBTQ doesn't mean I can't care compassionately for a non LGBTQ person. But conversely, as an LGBTQ person, if I'm talking to a provider who is of the same community or tackless, just be honest, even has a rainbow flag on their door, that gives me that sense of trust that maybe I can open up a little bit. You have a deeper level of knowledge and compassion for people like me.

[11:52] **Julia Huggins:** What role can an employer play, if any, in helping to make those very.

[11:57] **Dr. McLaughlin:** Important connections, whoever someone's health plan might be? Start with your health plan provider directory. For our capabilities, we will have right there in the directory listing that statement of clinical and cultural competency for LGBTQ health. So that's one place to start. At the same time, that's, as I said, not the be all, end all. I think it's important to leverage whatever other resources you have within the health plan. One of the things that I'm really proud that we've stood up here at Cigna is we have a dedicated, I mean, dedicated customer support team for transgender customers specifically. And why trans not more broadly LGBTQ? Well, frankly, that's where the need has been most acute and the knowledge base is most specialized. So we have a dedicated customer support team. Dedicated 800 number connects you to customer service experts who know this space, who are directly connected with our case managers who could actually do that legwork for a patient to find a provider. So, for example, I live in a rural area, and a provider with a Cigna LGBTQ designation is 7 hours away. Believe it or not, no, I don't live on the moon, but closed. So how do I find care? Well, I can spend the day on the phone calling or we call them our personal champion team. Our personal champions can do that for me. We don't sell that service. That's just something we believe in. We provide it, make it available to all of our clients. Beyond that, there are organizations out there that are really helpful. GLMA, formerly known as the Gay and Lesbian Medical Association, has a really good provider directory. We're actually partnering together with them as another source for information. So, just to reiterate, from an employer perspective or a workplace perspective, I think the Human Rights Campaign is really a terrific resource with a lot of capabilities and information. A really great organization, particularly for parents of an LGBTQ child, is an organization known as PFLAG PF L-A-G-P. Flag has chapters in most even medium metropolitan areas. From a legal perspective, Lambda Legal, it's really an important legal advocacy organization. And then for LGBTQ youth, Trevor Project and there are many, many others, more regional. So that is just a handful for you.

[14:36] **Julia Huggins:** As our discussion comes to a close and a discussion I've very much enjoyed, would you like to share any final thoughts on anything we've discussed today?

[14:45] **Dr. McLaughlin:** There are always opportunities for us to do better. One of the areas where we need progress is engaging providers to really work more closely with us as a health plan. Anyone who has accessed healthcare before knows there's a difference between in network and out of network providers. One of the hurdles that we have, this type of health care is very expensive. We have a lot more work to do in developing robust networks. Where we have great opportunity is similar to how we look at highly specialized care like transplant care or complex cardiac care. We designate centers of excellence. I think that's a big opportunity going forward is to develop these center of Excellence relationships with the providers who really do this. The high degree of excellence that's on the frontier, but work that we need to accomplish.

[15:40] **Julia Huggins:** Thank you, Dr. McLaughlin. I've really very much enjoyed our time together. This has been a truly insightful conversation that gives us all a lot to think about. That brings us to the end of this episode of the Health Unscripted podcast.

[16:01] **Outro Voiceover:** Thank you for listening to this episode of Health Unscripted, brought to you by The Cigna Group. If you enjoyed today's show, please take a moment to subscribe wherever you get your podcasts.