

Unintended Health Inequity: Using the Relationship Between the Social Determinants of Health and Employer-Sponsored Health Insurance as a Catalyst for Organizational Development and Change

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Abstract : Employer-sponsored health insurance (ESI) strategic decision-making processes rely on financial analysis to guide leadership in choosing plans that will produce optimal organizational spending outcomes. These financial decision-making methods have not abated ESI costs. Previously unrecognized external social determinants, the impact on ESI plan spending, and other organizational strategies are emerging and are important considerations for organizational decision-makers and change management practitioners. The purpose of this study is to examine the relationship between the social determinants of health (SDoH), employer-sponsored health insurance (ESI) plans, and the unintended consequence of health inequity. A quantitative research design using select employee records from an existing employer human capital management database will be analyzed. Statistical regression methods will be used to study the relationships between certain SDoH (employee income, neighborhood geographic living area, and health care access) and health plan utilization, cost, and chronic disease prevalence. The discussion will include an application of the social gradient of health theory to the study findings, organizational transformation through changes in ESI decision-making mental models, and the connection of ESI health inequity to organizational development and change diversity, equity, and inclusion strategies.

Keywords : employer-sponsored health insurance, social determinants of health, health inequity, mental models, organizational development, organizational change, social gradient of health theory

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