



## Corporate Equality Index 2011 Survey

This Word version of the survey was created 4/22/2010. It does not have:

- Your previous answers or data collected by HRC
- Any additional question help information or guidance provided by HRC since 4/22

You can always obtain an updated survey with your previous survey answers by selecting "Print" from the online survey and selecting "Generate PDF" (generates optimal formatting), or by copying and pasting the resulting web page directly into Word (formatted as in this document).

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Status: Draft as of 04/16/10  [Preliminary Rating](#) [Submit to HRC](#)

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[Contributors](#)

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[1. Business and Contact Information](#)

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[2. Non-Discrimination/Equal Employment Opportunity Policy](#)

Do not submit this survey. You must submit by entering your answers online at <http://cei.hrc.org>.

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# 1. Business and Contact Information

Status: Not Yet Started



**Previous answer information:** this information may have been obtained or updated from lists such as Hoover's & Fortune data that is used for reporting purposes and our [online database](#).

**Business name:** The name as it appears on this survey (see the top of this page) will also be used for reporting purposes -- we use AP Style formatting for our records and reports. Please note that we use *legal names* of businesses for most reporting purposes, but we occasionally miss name changes from year to year. If you wish to update our records of your business' name, please contact [cei@hrc.org](mailto:cei@hrc.org) with your request.

## 1. U.S. Headquarters Information

### Business Name

The name as it appears on this survey (see the top of this page) will also be used for reporting purposes. We use legal names of businesses including the type of organization (e.g., Co., Corp., LLP, Inc.) and use AP Style formatting for our records and reports. Our records are updated annually with Fortune 1000 and AmLaw 200 data, which may introduce discrepancies to our data from year to year. If you wish to update your business' name, please select "get help" below and submit supporting information.

\*

### Street Address Line 1

e.g.: 123 Alphabet St.

**Answer: No Answer**

**Previous: 123 Alphabet St**

### Street Address Line 2

e.g.: Suite 123 or Mailstop A-123

**Answer: No Answer**

**Previous: Suite 123**

\*

### City

**Answer: No Answer**

**Previous: 1234City**

\*

### State

**Answer: No Answer**

**Previous: VA**

\*

### Zip

**Answer: No Answer**

**Previous: 33333**

\*

### Main Phone Number

e.g.: 123-456-7890 x123

**Answer: No Answer**

**Previous: 333-444-5555**

## 2.

### Does your business have significant operations in U.S. locations other than the headquarters' location?

*This question is new.* We may add functionality to our Employer Search (<http://hrc.org/employersearch>) and Buyers Guide (<http://hrc.org/buyersguide>) to allow location-based searches.

If you have more than five other locations, try to limit to those locations where your business has the most employees or where it has a significant community presence. Remember, this question is not rated and is for informational purposes only.

Yes

No

**Answer: No Answer**

**2a.**

**If YES to Q2, please indicate the city, state, zip and number of employees for location 1**

You may enter information for up to five additional locations.

Please do not enter information pertaining to your headquarters.

**City**

**Answer: No Answer**

**State**

**Answer: No Answer**

**Zip**

**Answer: No Answer**

**Number of Employees**

**Answer: No Answer**

**2b.**

**If YES to Q2, please indicate the city, state, zip and number of employees for location 2**

**City**

**Answer: No Answer**

**State**

**Answer: No Answer**

**Zip**

**Answer: No Answer**

**Number of Employees**

**Answer: No Answer**

**2c.**

**If YES to Q2, please indicate the city, state, zip and number of employees for location 3**

**City**

**Answer: No Answer**

**State**

**Answer: No Answer**

**Zip**

**Answer: No Answer**

**Number of Employees**

**Answer: No Answer**

**2d.**

If YES to Q2, please indicate the city, state, zip and number of employees for location 4

**City**

**Answer: No Answer**

**State**

**Answer: No Answer**

**Zip**

**Answer: No Answer**

**Number of Employees**

**Answer: No Answer**

**2e.**

If YES to Q2, please indicate the city, state, zip and number of employees for location 5

**City**

**Answer: No Answer**

**State**

**Answer: No Answer**

**Zip**

**Answer: No Answer**

**Number of Employees**

**Answer: No Answer**

**3.\***

**Public Web Address**

e.g.: <http://www.employer.com>

If you have separate web addresses for consumers and for corporate/investor information (e.g.: <http://www.iloveny.com> vs. <http://www.state.ny.us>), please use the corporate address.

**Answer: No Answer**

**Previous:** <http://www.1234.com>

**4.\***

**Number of Full-time U.S. Employees**

e.g.: 123457

**Effective date:** Report number of employees as of Jan. 1 of this year, or as close to Jan. 1 as possible. If you have more recently undergone workforce reductions or expansions, please use the more recent number and provide the appropriate date in the "Notes to HRC" at the bottom of the page.

**Minimum:** Employers not ranked in the Fortune 1000 or AmLaw 200 must have at least 500 full-time U.S. employees to be rated in the Corporate Equality Index -- see What Businesses are Rated and How to Participate: <http://hrc.org/cei-0-3>

**Answer: No Answer**

**Previous:** 1111

**5.**

**Does your business have employees covered under a collective bargaining agreement(s)?**

**Yes**

No

**Answer: No Answer**

**Previous: No info available**

### Number of Union Employees

Please leave blank if there are no union employees.

**Answer: No Answer**

**Previous: No info available**

### Union Names (separated by semi-colons)

e.g.: Union1; Union2; Union3

Please leave blank if there are no union employees.

**Answer: No Answer**

**Previous: No info available**

### 6.

#### Stock Ticker Symbol

Please leave blank if not publicly traded.

**Answer: No Answer**

**Previous: No info available**

### 7.\*

#### Primary Industry

The industry you select will be used (1) in the Corporate Equality Index report, which includes an appendix of employers and their ratings sorted by industry as well as some industry analysis and (2) to sort employers that are named Best Places to Work. Due to space limitations, we are unable to list employers in more than one industry.

**Advertising and Marketing**

**Aerospace and Defense**

**Airlines**

**Apparel, Fashion, Textiles, Dept. Stores**

**Associations and Non-Profits**

**Automotive**

**Banking and Financial Services**

**Chemicals and Biotechnology**

**Colleges and Universities**

**Computer and Data Services**

**Computer Hardware and Office Equipment**

**Computer Software**

**Consulting and Business Services**

**Education and Child Care**

**Energy and Utilities**

**Engineering and Construction**

**Entertainment and Electronic Media**

**Food, Beverages and Groceries**

**Forest and Paper Products**

**Healthcare**

**Healthcare Medical Facilities**

**High-Tech/Photo/Science Equip.**

**Home Furnishing**

**Hotels, Resorts and Casinos**

**Insurance**

**Internet**

**Internet Services and Retailing**

**Law Firms**

**Mail and Freight Delivery**

**Manufacturing**

**Mining and Metals**

**Miscellaneous**

**Oil and Gas**

**Pharmaceuticals**

**Publishing and Printing**

**Real Estate, Commercial**

**Real Estate, Residential**

**Retail and Consumer Products**

**Telecommunications**

**Tobacco**

**Transportation and Travel**

**Unions and Labor Organizations**

**Waste Management**

**Answer: *No Answer***

**Previous:** Mail and Freight Delivery

**<1234 Corp.> notes or additional information for HRC**

**HRC notes to <1234 Corp.>**

## 2. Non-Discrimination/Equal Employment Opportunity Policy

Status: Not Yet Started



- 2011: Criterion #      Questions will count towards your CEI 2011 rating (for this survey, due June 2010).
- 2012: Criterion #      Questions will count towards your CEI 2012 rating (for next year's survey, due June 2011).  
Answers to these questions -- unless also marked as "2011" -- will not affect your rating this year, but they do help calculate your preliminary 2012 rating (see "Preliminary Rating" button on the main menu).
- \*      Question is required; section cannot be saved as *Final* until an answer is provided. Question may remain unanswered when saving the section as *Draft*.

### 1.\*

**Does your primary non-discrimination or equal employment opportunity policy include the term "*sexual orientation*"?**

2011: Criterion 1a  
2012: Criterion 1b

About Workplace Discrimination and Harassment Policies: <http://hrc.org/cei-2-1>

**Yes, firm-wide**

**No, not firm-wide but in one or more subsidiaries or labor agreements**

**No, but plan to in the next one year**

**No**

**Do not know**

**Answer: No answer**

Previous: *No info available*

### 2.\*

**Does your primary non-discrimination or equal employment opportunity policy include the term "*gender identity or expression*" or "*gender identity*"?**

2011: Criterion 2a  
2012: Criterion 1a

About Workplace Discrimination and Harassment Policies: <http://hrc.org/cei-2-1>

Why "Gender Identity or Expression" is preferred terminology in employment policies: <http://hrc.org/cei-2-2>

**Yes, firm-wide**

**No, not firm-wide but in one or more subsidiaries or labor agreements**

**No, but plan to in the next one year**

**No**

**Do not know**

**Answer: No answer**

Previous: *No info available*

### 3.

#### **Please attach a copy of your employee and job applicant non-discrimination or equal employment opportunity policy.**

2011: Criterion 1a/2a  
2012: Criterion 1a/1b

**Acceptable file formats** include:

- Rich Text Format (.rtf)
- Microsoft Word (.doc or .docx)
- Adobe Acrobat (.pdf) file

A PDF of the policy, including the title, as seen on your public website -- or, alternatively, from the employee handbook -- is preferred.

**Returning participants:** If you are reporting your policy for the first time, or are reporting changes, you must submit a copy to receive credit on Questions 1 and 2. You do not need to submit a copy of your policy if it has not changed since your last survey submission.

**Troubleshooting:** If you experience problems uploading, save this section as "Draft" and try again later. If you continue to experience problems, please fax a copy of the policy to 866-369-3348.

**Answer: *No Attachment***

### 4.

#### **Please provide the specific address (URL) of the page on your business' public website where your non-discrimination or equal employment opportunity policy language is displayed.**

e.g.: <http://www.org.com/eeo.htm>

Please do not provide a link to a page that does not have the actual policy language on it, such as the front page of your site (e.g.: <http://www.org.com>).

**Answer: *No Answer***

**Previous: *No info available***

**<1234 Corp.> notes or additional information for HRC**

**HRC notes to <1234 Corp.>**

### 3. Spousal and Partner Benefits

Status: Not Yet Started



- 2011: Criterion #      Questions will count towards your CEI 2011 rating (for this survey, due June 2010).
- 2012: Criterion #      Questions will count towards your CEI 2012 rating (for next year's survey, due June 2011). Answers to these questions -- unless also marked as "2011" -- will not affect your rating this year, but they do help calculate your preliminary 2012 rating (see "Preliminary Rating" button on the main menu).
- \*      Question is required; section cannot be saved as *Final* until an answer is provided. Question may remain unanswered when saving the section as *Draft*.

#### 1.\*

#### Does your business offer benefits to spouses of benefits-eligible U.S. employees?

Q1a will ask how you define spouses.

Yes, firm-wide

No, not firm-wide but in one or more subsidiaries or labor agreements

No, but plan to in the next one year

No

Do not know

Answer: **No Answer**

Previous: No

#### 1a.

#### If YES to Q1, are same-sex spouses eligible for spousal benefits in states where they are legally recognized?

2012: Criterion 2a+

**States that Recognize Same-Sex Marriages:** As of March 2010, states that recognize same-sex marriages include: CT, DC, IA, MA, MD, NH, NY and VT. General information about Marriage & Relationship Recognition: <http://hrc.org/marriage>

**Example 1:** If an employee married in MA in 2004 is hired in CT, and the employee's same-sex spouse can be enrolled for spousal benefits, select *Yes, firm-wide* for Q1a.

**Example 2:** If an employee married in MA in 2004 is hired in CT, and the employee's same-sex spouse can be enrolled for benefits, but only under the partner benefits structure (without having to complete an affidavit or provide proof of relationship other than the MA marriage certificate), select *No* for Q1a, but *Yes, firm-wide* for Q2d.

**Example 3:** If an employee married in MA in 2004 is hired in CT, and the employee's same-sex spouse can be enrolled for benefits, but only under the partner benefits structure -- and if the employee must complete an affidavit or provide proof of relationship other than the MA marriage certificate, select *No* for Q1a and *No* for Q2d.

**Some Insurance Plans Required to Recognize Same-Sex Spouses** Employers with insurance plans regulated in state(s) that recognize same-sex marriages generally must also follow the state's inclusive definition for "spouse." For example, when the District of Columbia began recognizing same-sex couples married in other states on July 7, 2009, most DC-regulated plans were required to allow individuals who had already married in another state to enroll within 31 days that the law came into effect. Further, DC-regulated plans were also required to allow individuals who married in another state after July 7, 2009 to enroll outside of the open enrollment period.

**Some Insurance Plans are ERISA-Regulated:** These plans are typically self-insured plans, which are typically not subject to state regulations and thus not required to follow any state's definition of spouse. Nonetheless, these plans can define spouse in a way that does not limit it to different-sex spouses, and deal with other challenges such as taxable status separately.

Marriage for Same-Sex Couples -- Considerations for Employers: <http://hrc.org/cei-3-2>

**Yes, firm-wide**

**No, not firm-wide but in one or more subsidiaries or labor agreements**

**No, but plan to in the next one year**

**No**

**Do not know**

**Answer: No Answer**

*Previous: No info available*

### 1b.

**If YES to Q1a, for benefits enrollment and/or audit purposes, does your business require the same dependent eligibility or proof of relationship documentation for same-sex spouses as for different-sex spouses?**

2012: Criterion 2a+

**Example 1:** If both same-sex spouses and different-sex spouses are required to produce a marriage certificate for enrollment purposes, select "Yes".

**Example 2:** If neither same-sex spouses nor different-sex spouses are required to produce a marriage certificate for enrollment purposes, select "Yes".

**Example 3:** If same-sex spouses but not different-sex spouses are required to produce a marriage certificate for enrollment purposes, select "No".

**Yes**

**No, but plan to in the next one year**

**No**

**Do not know**

**Answer: No Answer**

*Previous: No info available*

### 1c.

**If YES to Q1a, please provide your health insurance contract's definition of eligibility for spouse.**

2012: Criterion 2a+

**Which plan to use:** If you have more than one health plan, please provide the definition for the plan with the largest number of employees.

**Finding the right answer:** Check with an insurance administrator familiar with your benefit contract language and eligibility limitations. You may need to first speak to someone in your benefits department to find this individual.

**Answer: No Answer**

### 2.\*

**Does your business offer benefits to partners of benefits-eligible U.S. employees?**

2011: Criterion 3a/3b/3c

2012: Criterion 2a1/2a2/2a3

**Effective Date:** Partner benefits must be announced to employees by Sep. 1 of the current calendar year (in advance of the CEI report's release), and must be in place by Jan. 1 of the coming calendar year to receive credit on this CEI survey. Benefits deadlines on the CEI: <http://hrc.org/cei-3-3>.

About domestic partner benefits: <http://hrc.org/cei-3-4>

Yes, firm-wide

No, not firm-wide but in one or more subsidiaries or labor agreements

No, but plan to in the next one year

No

Do not know

**Answer: No Answer**

Previous: No

### 2a.

**If YES to Q2, do partner benefits include same- and different-sex partners or same-sex partners only?**

This answer affects your answers to Questions 4, 5 and 6.

Same and different-sex partners

Same-sex partners only

Do not know

**Answer: No Answer**

Previous: No info available

### 2b.

**If YES to Q2, please attach a copy of your summary plan documentation's eligibility and definitions section(s) that define who is eligible for benefits, including applicable definitions for spouses and/or partners.**

*This question is new.*

Acceptable file formats include:

- Rich Text Format (.rtf)
- Microsoft Word (.doc or .docx)
- Adobe Acrobat (.pdf) file

A PDF of the policy, including the title, as seen on your public website -- or, alternatively, from the employee handbook -- is preferred.

**Troubleshooting:** If you experience problems uploading, save this section as "Draft" and try again later. If you continue to experience problems, please fax a copy of the policy to 866-369-3348.

**Answer: No Attachment**

### 2c.

**If YES to Q2, for partner benefits enrollment and/or audit purposes, does your insurance plan require dependent eligibility or proof of relationship documentation (e.g., domestic partner affidavit, joint bank account statements, etc.)?**

Domestic Partner Benefit Eligibility -- Defining Domestic Partners and Dependents: <http://hrc.org/cei-3-5>

Yes

No, but plan to in the next one year

No

Do not know

**Answer: No Answer**  
*Previous: No info available*

**2d.**  
**If YES to Q2c, please attach a copy of your affidavit.**  
*This question is new.*

**Acceptable file formats** include:

- Rich Text Format (.rtf)
- Microsoft Word (.doc or .docx)
- Adobe Acrobat (.pdf) file

A PDF of the policy, including the title, as seen on your public website -- or, alternatively, from the employee handbook -- is preferred.

**Troubleshooting:** If you experience problems uploading, save this section as "Draft" and try again later. If you continue to experience problems, please fax a copy of the policy to 866-369-3348.

**Answer: No Attachment**

**2e.**  
**If YES to Q2b, does documentation of a state-recognized relationship(e.g., domestic partnership registration, civil union or marriage certificate) qualify as sufficient proof of relationship for partner benefits (i.e., without having to submit an executed affidavit or provide other proof of relationship as indicated in Q2b)?**  
2012: Criterion 2a3

**This question is different from Q1a.** The focus of this question is to ensure that same-sex couples that have already made a legal commitment to each other do not need to meet additional, burdensome requirements in order to be eligible for enrollment in partner benefits.

**Plans that are regulated in states that recognize same-sex relationships** may already be required to extend benefits to these employees.

**For example,** the State of California requires all insurance plans regulated by the state to provide equal benefits to Registered Domestic Partners (RDP's) in the state, and also requires that documentation requirements for RDPs must be the same as those requirements for spouses.

**Yes**

**No, but plan to in the next one year**

**No**

**Do not know**

**Answer: No Answer**  
*Previous: No info available*

**2f.**  
**If YES to Q2, can employees enroll in partner benefits outside of the open enrollment period (e.g., completing or executing an affidavit or obtaining state registration of the same-sex relationship constitutes a qualifying event for enrollment)?**  
2012: Criterion 2a3

**Open Enrollment:** Employees are typically allowed to change their enrollment for themselves and their families for a period (typically 15-31 days in length) before the new plan year begins.

**Qualifying Events for Enrollment:** Employees with newly-eligible dependents (e.g., a newborn or newly-adopted child, a partner that newly meets the eligibility requirements such as completing or executing an affidavit for domestic partnership, obtaining state registration or license of the relationship, etc.) or other special events (e.g., the employee's partner's employer coverage ends, or the employee's previous

employer's COBRA coverage ends, etc.) are typically allowed to change their enrollment for themselves and their families for a period (typically 31 days in length) beginning the date the dependent becomes eligible or the date on which the special event occurs.

**Finding the right answer:** If employees whose partners newly meet your plan's partner eligibility criteria can enroll outside the open enrollment period, select "Yes." If they can only enroll during open enrollment, select "No."

Domestic Partner Benefit Eligibility -- Defining Domestic Partners and Dependents: <http://hrc.org/cei-3-5>

**Yes**

**No, but plan to in the next one year**

**No**

**Do not know**

**Answer: No Answer**  
**Previous: No info available**

## 2g.

**If YES to Q2, does your business allow employees to certify that their partner qualifies as a dependent for federal income and employer payroll tax purposes in a given a tax year (e.g., income tax is not imputed for the value of partner benefits when the employee's partner qualifies as a dependent)?**

2012: Criterion 2a3 (tentative)

**Problem area:** Many employers incorrectly impute their contributions towards partner health insurance as income to all employees enrolled in partner benefits. Both employers and employees generally must pay taxes on imputed income for partner health insurance. However, partners that are qualifying dependents do not require imputed income, and any health coverage premiums paid by the employee may be deducted on a pre-tax basis.

**Finding the Right Answer:** Your payroll manager would know if this is the case. Ask if a form is available for employees to certify that their partner qualifies as a dependent. Ideally, this form would also be referenced in the enrollment information for partner benefits.

See Determining and Tracking Dependent Status: <http://hrc.org/cei-3-6> for more information, including legal references for your counsel's review.

**Yes**

**No, but plan to in the next one year**

**No**

**Do not know**

**Answer: No Answer**  
**Previous: No info available**

## 2h.

**If YES to Q2, does your business "gross up" wages to offset the additional, imputed income tax for employees who receive health benefits for a partner that does not qualify as a tax dependent?**

**Problem area:** Many employers incorrectly assume that they gross up to offset the additional, imputed income tax. This is an uncommon benefit that has received increased attention in the last year. The HRC Foundation expects more employers to implement this benefit in 2010, after uncovering several that implemented this benefit within the last year.

**More information,** including a sample policy: Grossing Up to Offset Imputed Income Tax: <http://hrc.org/cei-3-7>

**Yes**

**No, but plan to in the next one year**

No

Do not know

**Answer: No Answer**

**Previous: No info available**

**2i.**

**If YES to Q2, do employees on the same insurance plans pay equal contribution amounts for partner benefit coverage as employees pay for spousal benefit coverage (not including taxable income for non-dependent coverage)?**

2012: Criterion 2a3 (tentative)

*This is a new question.* HRC has encountered some situations where employees must pay more to cover a partner than their counterparts must pay to cover a spouse.

Yes, firm-wide

No, not firm-wide but in one or more subsidiaries or labor agreements

No

Do not know

**Answer: No Answer**

**2j.**

**Please describe any challenges (legal or other) you encountered or overcame toward providing fully equivalent spousal and partner benefits.**

This information and feedback is vital to HRC addressing challenges that employers face when providing partner benefits.

**Answer: No Answer**

**3.**

**Are the following health insurance benefits offered to spouses and partners of benefits-eligible U.S. employees?**

Please answer these questions only as they apply to **all** U.S. employees. Do not answer with respect to individual subsidiaries or labor agreements.

**3a.\***

**Health/Medical**

2011: Criterion 3a

2012: Criterion 2a1

Yes, benefit offered to spouses & partners

No, benefit offered to spouses only

No, benefit not offered

**Answer: No Answer**

**Previous: No info available**

**3b.**

**If YES to Q4a, in what year did partner health insurance benefits become available?**

This should be the year in which benefits actually began and not when they were first announced.

**Answer: No Answer**  
**Previous: No info available**

**3c.\***

**Dental**

2011: Criterion 3b  
2012: Criterion 2a1

**Yes, benefit offered to spouses & partners**

**No, benefit offered to spouses only**

**No, benefit not offered**

**Answer: No Answer**

**Previous: No, benefit not offered**

**3d.\***

**Vision**

2011: Criterion 3b  
2012: Criterion 2a1

**Yes, benefit offered to spouses & partners**

**No, benefit offered to spouses only**

**No, benefit not offered**

**Answer: No Answer**

**Previous: No info available**

**3e.\***

**Spouse/partner's dependent coverage**

2011: Criterion 3b  
2012: Criterion 2a1

Benefits plan (including dental and vision coverage, if available) also covers dependents of an employee's partner that are not the employee's direct dependents.

Defining Domestic Partners and Dependents -- Documentation: <http://hrc.org/cei-3-5>

**Yes, benefit offered to spouses & partners**

**No, benefit offered to spouses only**

**No, benefit not offered**

**Answer: No Answer**

**Previous: No, benefit not offered**

**3f.\***

**COBRA/COBRA-equivalent benefits**

2011: Criterion 3b  
2012: Criterion 2a1

COBRA benefits are federally mandated for opposite-sex spouses, but may be extended to partners.

**Problem Area:** Because COBRA is required under federal law for different-sex spouses, *No, benefit not offered* is not an available answer option.

COBRA-equivalent benefit: <http://hrc.org/cei-3-8>

**Yes, benefit offered to spouses & partners**

**No, benefit offered to spouses only**

**Answer: No Answer**

**Previous:** No, benefit offered to spouses only

#### 4.

#### **Are the following soft benefits offered to spouse and partners of benefits-eligible U.S. employees?**

Please answer these questions only as they apply to all U.S. employees. Do not answer with respect to individual subsidiaries or labor agreements.

##### 4a.\*

#### **FMLA/FMLA-equivalent benefits**

2011: Criterion 3c

2012: Criterion 2a2

FMLA-equivalent leave can be provided to an employee in order to care for a same-sex spouse, partner or a spouse/partner's dependents.

Because FMLA is required under federal law for different-sex spouses, *No, benefit not offered* is not an available answer option.

See FMLA-equivalent benefit: <http://hrc.org/cei-3-9> for more information, including benchmarking data.

**Yes, benefit offered to spouses & partners**

**No, benefit offered to spouses only**

**Answer: No Answer**

**Previous:** No, benefit offered to spouses only

##### 4b.\*

#### **Bereavement leave**

2011: Criterion 3c

2012: Criterion 2a2

Leave taken in the event of the death of a spouse/partner or their dependents.

**Yes, benefit offered to spouses & partners**

**No, benefit offered to spouses only**

**No, benefit not offered**

**Answer: No Answer**

**Previous:** No, benefit offered to spouses only

##### 4c.\*

#### **Employer-provided supplemental life insurance**

2011: Criterion 3c

2012: Criterion 2a2

Offered for the spouse/partner.

**Yes, benefit offered to spouses & partners**

**No, benefit offered to spouses only**

**No, benefit not offered**

**Answer: No Answer**

**Previous:** No, benefit offered to spouses only

**4d.\***

**Relocation/travel assistance**

2011: Criterion 3c

2012: Criterion 2a2

**Yes, benefit offered to spouses & partners**

**No, benefit offered to spouses only**

**No, benefit not offered**

**Answer: No Answer**

**Previous:** No, benefit not offered

**4e.\***

**Adoption benefit (separate from an Employee Assistance Program, e.g., reimbursing costs associated with an employee's adoption)**

2011: Criterion 3c

2012: Criterion 2a2

Adoption benefits that reimburse costs incurred by an employee's spouse should also cover those incurred by an employee's partner.

- *Yes, benefit offered to spouses & partners* indicates you reimburse adoption-related costs incurred by an employee's spouse or partner. These costs are unqualified.
- *No, benefit offered to spouses only* indicates you reimburse adoption-related costs incurred by an employee's spouse. These costs are unqualified.
- *No benefit not offered to spouses or partners* indicates you only reimburse adoption-related costs incurred by an employee. These costs are qualified.

See Adoption Benefit Programs -- LGBT Considerations for Employers: <http://hrc.org/cei-3-10> for more information.

**Yes, benefit offered to spouses & partners**

**No, benefit offered to spouses only**

**No, benefit not offered**

**Answer: No Answer**

**Previous:** No, benefit not offered

**4f.\***

**Employee discounts**

2011: Criterion 3c

2012: Criterion 2a2

Available to spouse/partner.

**Yes, benefit offered to spouses & partners**

**No, benefit offered to spouses only**

**No, benefit not offered**

**Answer: No Answer**

**Previous:** No, benefit not offered

**4g.\***

**Employee assistance program**

2011: Criterion 3c  
2012: Criterion 2a2

Available to spouse/partner.

**Yes, benefit offered to spouses & partners**

**No, benefit offered to spouses only**

**No, benefit not offered**

**Answer: No Answer**

**Previous:** No, benefit not offered

**5.**

**Are the following retirement benefits offered to spouses and partners of benefits-eligible U.S. employees?**

Please answer these questions only as they apply to **all** U.S. employees. Do not answer with respect to individual subsidiaries or labor agreements.

**5a.\***

**Defined benefit plan: Qualified joint and survivor annuity (QJSA) for spouse/partner**

2011: Criterion 3c  
2012: Criterion 2a2

If your business has a defined benefit plan (these are increasingly less common), federal law requires it to provide a QJSA for different-sex spouses. It is possible to provide a QJSA for same-sex partners and spouses.

Pension Survivor Annuities: <http://hrc.org/cei-3-11>

**Yes, benefit offered to spouses & partners**

**No, benefit offered to spouses only**

**No, benefit not offered**

**Answer: No Answer**

**Previous:** No, benefit not offered

**5b.\***

**Defined benefit plan: Qualified pre-retirement survivor annuity (QPSA) for spouse/partner**

2011: Criterion 3c  
2012: Criterion 2a2

If your business has a defined benefit plan (these are increasingly less common), federal law requires it to provide a QPSA for different-sex spouses. It is possible to provide a QPSA for same-sex partners and spouses.

Pension Survivor Annuities: <http://hrc.org/cei-3-11>

**Yes, benefit offered to spouses & partners**

**No, benefit offered to spouses only**

**No, benefit not offered**

**Answer: No Answer**

**Previous:** No, benefit not offered

**5c.\***

**Hardship distribution option**

2012: Criterion 2a2

The Pension Protection Act of 2006 made it possible for employers to extend this benefit to any beneficiary the employee names on the plan, which can include same-sex partners and spouses. This benefit is optional for employers, but if it is available to different-sex spouses it should also be made available to same-sex partners and spouses.

Hardship Withdrawal Option for Retirement Plans: <http://hrc.org/cei-3-12>

**Yes, benefit offered to spouses & partners**

**No, benefit offered to spouses only**

**No, benefit not offered**

**Answer: *No Answer***

**Previous:** No, benefit not offered

**6.**

**Please describe any other benefits offered to an employee's same-sex partner.**

Information provided here will not affect your rating, but helps define emerging best practices.

**Answer: *No Answer***

**<1234 Corp.> notes or additional information for HRC**

**HRC notes to <1234 Corp.>**

## 4. Transgender-Inclusive Benefits

Status: Not Yet Started



- 2011: Criterion # Questions will count towards your CEI 2011 rating (for this survey, due June 2010).
- 2012: Criterion # Questions will count towards your CEI 2012 rating (for next year's survey, due June 2011). Answers to these questions -- unless also marked as "2011" -- will not affect your rating this year, but they do help calculate your preliminary 2012 rating (see "Preliminary Rating" button on the main menu).
- \* Question is required; section cannot be saved as *Final* until an answer is provided. Question may remain unanswered when saving the section as *Draft*.

### 1.\*

**Does your business have at least one health insurance plan that *does not exclude* coverage for the medically necessary health care services that transgender people need, including transition-related treatment such as genital surgeries, hormone therapy and mental health counseling?**

2012: Criterion 2b1

Transgender people access health care for all the same reasons anyone else does, but sometimes their transgender status is regarded by insurance carriers (and some care providers) as a barrier to care, even when that care is not related to a transition (i.e., reconstruction and alignment of sex characteristics from male to female, or from female to male, through the use of hormones and/or surgical interventions). When a transition is in process, it may involve one or more types of medically necessary treatments. Most of these types of treatments are typically covered for other medical diagnoses, but *many health insurance policies specifically exclude sex affirmation/reassignment-related treatments*. The effective scope of those exclusions can vary significantly from one insurance plan to another. See Benefits for Transgender Employees and Dependents: <http://hrc.org/transbenefits>.

**Finding the right answer:** This question requires a benefits manager experienced with the plan's exclusions and limitations to coverage for specific treatments and services, or an affirmative answer from your insurance administrator in response to the following question: *"It is our understanding that our health plan will now cover the healthcare needs of transgender and transsexual individuals without exclusion as for any other individual, including routine, emergent or urgent care as well as services related to sex affirmation or reassignment. More specifically, that we have no explicit exclusions in our insurance plan contract that specifically preclude such treatment or that any exclusion we do have is no longer applicable. Is this the case?"*

**Examining your plan's exclusions:** You must find the insurance policy contract and examine the list of coverage exclusions or limitations for transgender-specific language. A complete list of exclusions will be found in the insurance contract, and partial lists are usually found in summary plan documents. See <http://hrc.org/cei-4-2> for example exclusionary language.

**Confirming with your plan administrator.** Having no explicit contractual exclusion does not guarantee that transition-related services will be considered medically necessary and covered. Further, contractual exclusions may not reflect current, actual implementation if the insurance administrator or relevant laws and regulations have changed to consider transition-related services as medically necessary and covered.

**Understanding "medically necessary":** Many insurance administrators maintain clinical guidelines or medical policy that indicate what treatments the plan considers medically necessary (e.g., reconstructive and not cosmetic) and conditions under which treatment will be covered. An insurance administrator's clinical guidelines *will generally not apply* if your plan has transgender exclusions. If you have determined that exclusions do not apply to your plan, this survey will ask for applicable guidelines and whether they are consistent with the World Professional Association for Transgender Health (WPATH, formerly known as Harry Benjamin International Gender Dysphoria Association or HBGDA) Standards of Care as part of Q1c and Q1d. The WPATH SOC reflect the current medical consensus regarding effective treatment and medically indicated or necessary care for treatment of transsexualism.

**Effective Date:** Transgender-inclusive benefits must be announced to employees by Sep. 1, 2010 (in advance of this year's CEI report release), and must be in place by Jan. 1, 2011 to receive credit on this CEI 2011 survey and report. Benefits deadlines on the CEI: <http://hrc.org/cei-3-3>.

- Yes, firm-wide**
- No, not firm-wide but in one or more subsidiaries or labor agreements**
- No, but plan to in the next one year**
- No**

**Do not know**

**Answer: No Answer**

**Previous: No**

**1a.**

**If YES to Q1, in what year did transgender-inclusive health insurance benefits first become available?**

Please indicate the year that the benefits became effective. For example, if the benefits become effective Jan. 1, 2011, enter "2011."

**Answer: No Answer**

**Previous: No info available**

**1b.**

**If YES to Q1, please attach summary plan documentation (or summary material modification documentation) readily available to all employees that explicitly indicates that coverage is available.**

2011: Criterion 2c

2012: Criterion 2b1

**Summary language:** does not need to discuss the benefit in exhaustive detail, but should signal to an employee that coverage is available and how to find out more information without disclosing confidential medical information directly to the employer. See Communicating Availability of the Benefit: <http://hrc.org/cei-4-9> for sample Summary Plan Description language.

**New benefits:** if transgender-inclusive benefits will be available Jan. 1, but documentation is not yet available to employees, please provide the most current version of these documents.

**Acceptable file formats** include:

- Rich Text Format (.rtf)
- Microsoft Word (.doc or .docx)
- Adobe Acrobat (.pdf) file

**Troubleshooting:** If you experience problems uploading, save this section as "Draft" and try again later. If you continue to experience problems, please fax a copy of the policy to 866-369-3348.

**Answer: No Attachment**

**1c.**

**If YES to Q1, does the plan cover the full range of medically necessary services and treatments as outlined by the current World Professional Association for Transgender Health Standards of Care (WPATH SOC)?**

2012: Criterion 2b2

**Finding the right answer:** This question requires examination of applicable clinical guidelines utilized by your insurance administrator, or an affirmative answer from your insurance administrator in response to the following question:

*"It is our understanding that our health plan covers the full range of medical procedures related to the process of sex affirmation or reassignment that are considered medically necessary by the current World Professional Association for Transgender Health Standards of Care (WPATH SOC v.6 2001 and WPATH Clarification on Medical Necessity 2008), when such treatment is medically indicated for the individual and is consistent with the WPATH SOC. Is this the case?"*

**Covered services and treatments** should include those in the WPATH Standards of Care v.6 of 2001 and as reiterated by the WPATH Clarification Statement from June 2008. About WPATH: <http://hrc.org/cei-4-4>

WPATH Standards of Care and Clarification on Medical Necessity: <http://hrc.org/cei-4-5>

**Yes**

**No, but plan to in the next one year**

**No**

**Do not know**

**Answer: No Answer**

**1d.**

**If YES to Q1, is the plan implemented (e.g., prior authorization, utilization management, etc.) in a manner consistent with the WPATH SOC with respect to diagnosis, assessment and appropriate treatment plans?**

2012: Criterion 2b2

**Finding the right answer:** this question requires an affirmative answer from your insurance administrator in response to the following question:

*"It is our understanding that, with regard to coverage determinations, our health plan will follow the current Standards of Care from the World Professional Association for Transgender Health (WPATH SOC) regarding sufficient documentation of clinical decisions and treatment plans. Specifically, diagnosis, assessment and treatment conforming to the current WPATH SOC v.6 2001, as appropriately documented by the treating provider(s) as per the WPATH SOC, will guide determinations of eligibility for a specific treatment, prior authorization/certification, and other utilization management decisions. Is this the case?"*

**Verifying your answer:** Many health plans may refer to the WPATH SOC in their guidelines without actually conforming to these standards. Therefore answers that qualify the statement above in some way may indicate significant gaps in implementation.

About WPATH: <http://hrc.org/cei-4-4>

WPATH Standards of Care and Clarification on Medical Necessity: <http://hrc.org/cei-4-5>

**Yes**

**No, but plan to in the next one year**

**Sometimes/in some cases**

**No**

**Do not know**

**Not applicable**

**Answer: No Answer**

**1e.**

**If YES to Q1, please attach a copy of any applicable medical policy or clinical guidelines.**

2011: Criterion 3c

2012: Criterion 2b1/2b2

**A common mistake** is to assume that clinical guidelines specific to sex reassignment posted on the insurance company/third party administrator's website automatically apply to a particular health insurance plan administered by the same insurance company. If you have already determined that your health insurance plan covers medically necessary transgender-related treatment such as breast/chest, genital and other reconstructive surgeries (Q1), and you understand that the clinical guidelines apply to the administration of the same health insurance plan, please submit them here.

**Also known as:** "Clinical guidelines" are also sometimes called a combination or derivative of "medical policy," "utilization management guidelines," etc.

**Acceptable file formats** include:

- Rich Text Format (.rtf)
- Microsoft Word (.doc or .docx)
- Adobe Acrobat (.pdf) file

**Troubleshooting:** If you experience problems uploading, save this section as "Draft" and try again later. If you continue to experience problems, please fax a copy of the policy to 866-369-3348.

**Answer: No Attachment**

**1f.**

**If YES to Q1, is coverage for any of this benefit partially or fully self-insured?**

What does this mean: See Availability of Inclusive Insurance among Fully- and Self-Insured Plans: <http://hrc.org/cei-4-6> for more information.

**Yes**

**No, but plan to in the next one year**

**No**

**Do not know**

**Answer: No Answer**

**Previous: No**

**1g.**

**If YES to Q1, and if coverage for any of the benefit(s) is capped at a maximum lifetime dollar amount specific to transgender treatments, please indicate that cap amount.**

2012: Criterion 2b2

Please leave blank if there is no cap specific to transgender treatments.

Do not list a cap amount that applies to a health plan overall.

**Answer: No Answer**

**Previous: No info available**

**1h.**

**If YES to Q1, what insurance carrier(s) or third party administrator(s) manages or administers the plan?**

**Answer: No Answer**

**Previous: No info available**

**1i.**

**If YES to Q1, what is the contract state (i.e., where is the plan sited)?**

**Answer: No Answer**

**Previous: No info available**

**2.**

**Are the following health insurance benefits offered to employees and do they cover medically-necessary treatment of transsexualism, gender dysphoria or gender identity disorders?**

This question requires examining your insurance policy's list of coverage exclusions.

Answering "Yes, benefit offered, transgender treatment covered" for the following benefits indicates that **medically necessary care for sex reassignment would be covered** under one or more insurance plans available to your employees, or through some form of self-insurance.

Benefits for Transgender Employees and Dependents: <http://hrc.org/transbenefits>

**2a.\***

**Mental health counseling**

2011: Criterion 2c

2012: Criterion 2b1

e.g., gender dysphoria or transsexualism diagnoses

**Problem Area:** An employee assistance program (EAP) is insufficient for the purposes of this wellness benefit, which speaks to ongoing mental health treatment over an extended period of time, with mental health providers experienced with transgender issues.

So-called "reparative" therapy would be similarly insufficient. See <http://hrc.org/cei-4-7>

**Yes, benefit offered, transgender treatment covered**

**No, benefit offered, but transgender treatment excluded**

**No, benefit not offered**

**Answer: No Answer**

**Previous:** No, benefit not offered

## 2b.

**If YES to Q2a, is this mental health benefit only available through an Employee Assistance Program (EAP)?**

2011: Criterion 2c

2012: Criterion 2b1

**Problem Area:** If the answer to this question is YES, then the answer to Q2a must be indicated as NO.

**Yes**

**No**

**Answer: No Answer**

## 2c.\*

**Pharmacy benefits (e.g., hormone therapy)**

2011: Criterion 2c

2012: Criterion 2b1

e.g., hormone therapy

**Yes, benefit offered, transgender treatment covered**

**No, benefit offered, but transgender treatment excluded**

**No, benefit not offered**

**Answer: No Answer**

**Previous:** No, benefit not offered

## 2d.\*

**Medical visits and lab procedures**

2011: Criterion 2c

2012: Criterion 2b1

e.g., to monitor the effects of hormone therapy and associated lab procedures, or to assess the patient prior to treatment (e.g., surgical procedures).

**Yes, benefit offered, transgender treatment covered**

**No, benefit offered, but transgender treatment excluded**

**No, benefit not offered**

**Answer: No Answer**

**Previous:** No, benefit not offered

**2e.\***

**Surgical procedures**

2011: Criterion 2c

2012: Criterion 2b1

e.g., hysterectomy, as part of sex reassignment

**Yes, benefit offered, transgender treatment covered**

**No, benefit offered, but transgender treatment excluded**

**No, benefit not offered**

**Answer: *No Answer***

**Previous:** No, benefit not offered

**2f.\***

**Paid short-term leave**

2011: Criterion 2c

2012: Criterion 2b1

**More information:** see Short-Term Disability and Leave for Transgender Workers: <http://hrc.org/cei-4-8>

**Yes, benefit offered, transgender treatment covered**

**No, benefit offered, but transgender treatment excluded**

**No, benefit not offered**

**Answer: *No Answer***

**Previous:** No, benefit not offered

**3.**

**Please describe challenges or other limitations to benefits available to transgender employees.**

Please list exclusionary language as found in the insurance plan contract itself, rather than language from a Summary Plan Document or other abstraction of the insurance plan.

**Answer: *No Answer***

**<1234 Corp.> notes or additional information for HRC**

**HRC notes to <1234 Corp.>**

## 5. Diversity Management and Training

Status: Not Yet Started



The following questions are aimed at assessing the integration of LGBT diversity and inclusion efforts with other diversity and inclusion programs (such as those that are centered on race, ethnicity, gender and other forms of diversity). We are measuring parity in the inclusion of LGBT diversity and are not attempting to prescribe any single approach to diversity and inclusion. This section will be updated to expand the options available as more best practices emerge.

- 2011: Criterion #      Questions will count towards your CEI 2011 rating (for this survey, due June 2010).
- 2012: Criterion #      Questions will count towards your CEI 2012 rating (for next year's survey, due June 2011).  
Answers to these questions -- unless also marked as "2011" -- will not affect your rating this year, but they do help calculate your preliminary 2012 rating (see "Preliminary Rating" button on the main menu).
- \*                              Question is required; section cannot be saved as *Final* until an answer is provided. Question may remain unanswered when saving the section as *Draft*.

### 1.

#### If you provide diversity awareness training, what topics are covered and who is required to attend?

Topics may be covered as part of a general overview of diversity, or in topic-specific sessions.

Diversity Training on Sexual Orientation and Gender Identity: <http://hrc.org/cei-5-1>.

#### 1a.\*

##### Sexual orientation

2011: Criterion 1b

Credit on this question is provided for any training that is offered, irrespective of attendance requirements.

**Yes, all required to attend**

**Yes, but only managers/supervisors required to attend**

**Yes, but only some employees required to attend**

**Yes, but employee attendance not required**

**No, training not offered (to these personnel)**

**Answer: No Answer**

**Previous: No, training not offered (to these personnel)**

#### 1b.\*

##### Gender identity or expression

2011: Criterion 2b

Credit on this question is provided for any training that is offered, irrespective of attendance requirements.

**Yes, all required to attend**

**Yes, but only managers/supervisors required to attend**

**Yes, but only some employees required to attend**

**Yes, but employee attendance not required**

No, training not offered (to these personnel)

**Answer: No Answer**

**Previous:** No, training not offered (to these personnel)

**2.\***

**Do you require new hires to attend training that clearly states that your non-discrimination policy includes gender identity and sexual orientation and provides definitions or scenarios illustrating the policy for each?**

2012: Criterion 3a

May be part of a broader training.

A "Yes" answer indicates that *both* "gender identity" and "sexual orientation" are covered.

Yes

No, but plan to in the next one year

No

Do not know

**Answer: No Answer**

**Previous:** No

**2a.**

**If YES to Q2, please briefly describe the training, and how it incorporates sexual orientation and gender identity.**

2012: Criterion 3a

**Answer: No Answer**

**3.\***

**Do you require supervisors to attend training that clearly states that your non-discrimination policy includes gender identity and sexual orientation and provides definitions or scenarios illustrating the policy for each?**

2012: Criterion 3a

May be part of a broader training.

A "Yes" answer indicates that *both* "gender identity" and "sexual orientation" are covered.

Yes

No, but plan to in the next one year

No

Do not know

**Answer: No Answer**

**Previous:** No

**3a.**

**If YES to Q3, please briefly describe the training, and how it incorporates sexual orientation and gender identity.**

2012: Criterion 3a

**Answer: No Answer**

**4.\***

**If your business integrates any diversity or cross-cultural competency training with any other professional development, skills-based or other leadership training, does the diversity component include the topics of gender identity and sexual orientation?**

2012: Criterion 3a

A "Yes" answer indicates that *both* "gender identity" and "sexual orientation" are covered.

**Yes**

**No, but plan to in the next one year**

**No**

**Do not know**

**Not applicable, we do not integrate diversity training with other development trainings**

**Answer: No Answer**

**Previous: No**

**4a.**

**If YES to Q4, please briefly describe the training, who is required to attend, and how it incorporates sexual orientation and gender identity.**

2012: Criterion 3a

**Answer: No Answer**

**Previous: No info available**

**5.\***

**Does your business have written gender transition guidelines documenting supportive policy or practice on issues pertinent to a workplace gender transition?**

2011: Criterion 2b

2012: Criterion 3a

Supportive policy or practice should include guidance on restroom and facilities access, dress code and internal recordkeeping that fully recognize an employee's full-time gender presentation and maximize privacy for the employee.

Gender transition guidelines: <http://hrc.org/cei-5-2>

**Yes**

**No, but plan to in the next one year**

**No**

**Do not know**

**Answer: No Answer**

**Previous: No**

**5a.**

**If YES to Q5, please attach a copy of the guidelines.**

2011: Criterion 2b

2012: Criterion 3a

If you are reporting guidelines for the first time, you must submit a copy to receive credit for this criterion.

**Confidentiality:** Guidelines will be evaluated for scoring purposes and will not be shared. To grant the HRC Foundation permission to distribute or place these guidelines on our website (<http://hrc.org/cei-5-2>), please explain so in the "Additional notes to HRC" section at the end of this page.

If you experience problems uploading the file, save this section as "Draft" and try again later. If you continue to experience problems, please fax a copy of the policy to 866-369-3348.

**Answer: No Attachment**

**6.\***

**If your business includes diversity and inclusion metrics (i.e., metrics that target race, ethnicity, gender and other forms of diversity) in senior management/executive performance evaluations, are LGBT diversity and inclusion metrics included?**

2012: Criterion 3a

Some businesses include diversity and inclusion measures (or efforts) as part of their overall performance evaluation: senior leaders can submit efforts such as non-profit board participation, conference support, leading internal diversity and inclusion initiatives, etc. If your business utilizes similar metrics, do the options include any LGBT metrics?

**We are not asking** if all senior leaders or executives are required to submit LGBT diversity and inclusion metrics, but whether or not LGBT metrics are available as an option.

**Yes**

**No, but plan to in the next one year**

**No**

**Do not know**

**Not applicable, we do not include any diversity metrics in executive performance evaluations**

**Answer: No Answer**

**Previous: No**

**7.\***

**Does your business have an officially recognized LGBT employee group?**

2011: Criterion 4

2012: Criterion 3b

LGBT Employee Groups: <http://hrc.org/cei-5-3>

**Yes**

**No, but plan to in the next one year**

**No**

**Do not know**

**Answer: No Answer**

**Previous: No**

**7a.**

**If NO to Q7, would your business allow LGBT employees to use its facilities, electronic and other resources to form a group if one expressed interest?**

2011: Criterion 4 (half credit)

2012: Criterion 3b (half credit)

**Note:** because of your answer on Q7, you have skipped Q7a-b.

**Yes**

**No, but plan to in the next one year**

**No**

**Do not know**

**Answer: No Answer**

**Previous: No info available**

### 7a.

**If YES to Q7, please provide contact information for the group.**

**Information will be public:** Employee group contact information provided here will be made available on our website at [hrc.org/employersearch](http://hrc.org/employersearch) and can be updated at any time by e-mailing [cei@hrc.org](mailto:cei@hrc.org).

**Name of group**

**Answer: No Answer**

**Previous: No info available**

**Phone, including extension if applicable**

e.g.: 123-456-7890 x123

**Answer: No Answer**

**Previous: No info available**

**E-mail**

e.g.: group@employer.com

**Answer: No Answer**

**Previous: No info available**

**Public Website**

e.g.: <http://www.employer.com/group>

Please only provide a specific link to a public website.

**Answer: No Answer**

**Previous: No info available**

**Contact's First Name**

**Answer: No Answer**

**Previous: No info available**

**Contact's Last Name**

**Answer: No Answer**

**Previous: No info available**

**Contact's Group Role or Title**

**Answer: No Answer**

**Previous: No info available**

### 7b.

**If YES to Q7, does the group have a senior executive champion or sponsor (e.g., Vice President or higher)?**

**Yes**

**No, but plan to in the next one year**

No

Do not know

**Answer: No Answer**

**Previous:** *No info available*

**7c.**

**If YES to Q7b, please provide the champion's name and job title.**

**Confidentiality:** This information will *strong* not be made public.

**Answer: No Answer**

**Previous:** *No info available*

**8.\***

**Does your business have a firm-wide diversity council or working group with a mission that specifically includes LGBT diversity?**

2011: Criterion 4

2012: Criterion 3b

Diversity Councils: <http://hrc.org/cei-5-5>

Yes

No, but plan to in the next one year

No

Do not know

**Answer: No Answer**

**Previous:** No

**8a.**

**If NO to Q8, does your business have another, non-LGBT-specific firm-wide diversity council or working group?**

Yes

No, but plan to in the next one year

No

Do not know

**Answer: No Answer**

**Previous:** *No info available*

**9.\***

**Does your business have anonymous employee surveys such as employee engagement surveys where employees can voluntarily disclose their gender identity and sexual orientation along with other demographic questions such as race and gender?**

2012: Criterion 3c

Surveys should be of all employees or a random sample of all employees.

Self-identification of LGBT employees: <http://hrc.org/lgbtselfid>

Not applicable, we do not conduct anonymous employee surveys

Yes

No, but plan to in the next one year

No

Do not know

**Answer: No Answer**

**Previous:** No

**9a.**

**If YES to Q9, do you ask individual questions about sexual orientation and gender identity, a single broader question about LGBT identity, or another type of question?**

Yes, gender identity and sexual orientation

Yes, LGBT identity

No, gender identity only

No, sexual orientation only

No, we ask a different question (please describe below)

**Answer: No Answer**

**Previous:** No info available

**10.\***

**Do you have confidential human resources data systems where employees can voluntarily disclose their gender identity and sexual orientation (along with other demographic questions such as race and gender)?**

2012: Criterion 3c

These self-identification programs can be used for retention, mentorship and leadership development programs. Self-identification of LGBT employees: <http://hrc.org/lgbtselfid>

Yes

No, but plan to in the next one year

No

Do not know

**Answer: No Answer**

**Previous:** No

**10a.**

**If YES to Q10, do you ask individual questions about sexual orientation and gender identity, a single broader question about LGBT identity, or another type of question?**

Yes, gender identity and sexual orientation

Yes, LGBT identity

No, gender identity only

No, sexual orientation only

No, we ask a different question (please describe below)

**Answer:** *No Answer*

**Previous:** *No info available*

<1234 Corp.> notes or additional information for HRC

HRC notes to <1234 Corp.>

## 6. External Engagement

Status: Not Yet Started



- 2011: Criterion #      Questions will count towards your CEI 2011 rating (for this survey, due June 2010).
- 2012: Criterion #      Questions will count towards your CEI 2012 rating (for next year's survey, due June 2011). Answers to these questions -- unless also marked as "2011" -- will not affect your rating this year, but they do help calculate your preliminary 2012 rating (see "Preliminary Rating" button on the main menu).
- \*      Question is required; section cannot be saved as *Final* until an answer is provided. Question may remain unanswered when saving the section as *Draft*.

### 1.\*

**During the past year, has your business engaged in marketing or advertising to the LGBT community (including sponsorships of LGBT organizations and events)?**

2011: Criterion 5  
2012: Criterion 4

Although firm-wide efforts are preferred, efforts from a particular segment of the firm are accepted.

LGBT Marketing and Advertising: <http://hrc.org/cei-6-1>

**Yes**

**No**

**Do not know/Info Not Available**

**Answer: No Answer**

### 1a.

**If YES to Q1, please describe a maximum of three such efforts.**

#### #1.

**First Marketing Effort**

**Name of campaign and/or partnering organization or event**

**Answer: No Answer**

**Please provide (a) the location of effort including applicable cities or states and indicating "Online" if web-based and (b) a brief description of the effort, including the number of months or years your business has engaged in this effort.**

**Answer: No Answer**

**Creative content: If the effort involved any promotional media referencing your business, did such media use imagery, language or people to indicate LGBT content?**

**General audience (no specific LGBT content)**

**LGBT content**

**Not applicable**

**Answer: No Answer**

**#2.  
Second Marketing Effort**

**Name of campaign and/or partnering organization or event**  
**Answer: *No Answer***

**Please provide (a) the location of effort including applicable cities or states and indicating "Online" if web-based and (b) a brief description of the effort, including the number of months or years your business has engaged in this effort.**  
**Answer: *No Answer***

**Creative content: If the effort involved any promotional media referencing your business, did such media use imagery, language or people to indicate LGBT content?**

General audience (no specific LGBT content)

LGBT content

Not applicable

**Answer: *No Answer***

**#3.  
Third Marketing Effort**

**Name of campaign and/or partnering organization or event**  
**Answer: *No Answer***

**Please provide (a) the location of effort including applicable cities or states and indicating "Online" if web-based and (b) a brief description of the effort, including the number of months or years your business has engaged in this effort.**  
**Answer: *No Answer***

**Creative content: If the effort involved any promotional media referencing your business, did such media use imagery, language or people to indicate LGBT content?**

General audience (no specific LGBT content)

LGBT content

Not applicable

**Answer: *No Answer***

**1b.  
If YES to Q1, attach an example of creative content.**  
**Answer: *No Attachment***

**1c.  
If YES to Q1, please provide any additional information about your business' advertising campaigns.**  
**Answer: *No Answer***

**2.\***

**During the past year, has your business provided philanthropic support(financial or in-kind) to LGBT health, educational, political or community-related organizations or events (not including matching gift programs)?**

2011: Criterion 5  
2012: Criterion 4

Although firm-wide efforts are preferred, efforts from a particular segment of the firm are accepted.

Matching contributions for employee donations are not accepted.

Philanthropic Support of LGBT Organizations: <http://hrc.org/cei-6-2>

**Yes**

**No**

**Do not know/Info Not Available**

**Answer: No Answer**

**2a.**  
**If YES to Q2, please describe a maximum of three such efforts.**

**#1.**  
**First Philanthropic Effort**

**Name of campaign, organization or event**  
**Answer: No Answer**

**Type of LGBT organization or event (if applicable)**

**Community**

**Education**

**Health**

**Political**

**Answer: No Answer**

**Please provide (a) the location of effort including applicable cities or states and indicating "Online" if web-based and (b) a brief description of the effort, including the number of months or years your business has engaged in this support.**

**Answer: No Answer**

**Type of support**

**Cash Grant**

**In-Kind**

**Other**

**Answer: No Answer**

**#2.**  
**Second Philanthropic Effort**

**Name of campaign, organization or event**  
**Answer: *No Answer***

**Type of LGBT organization or event (if applicable)**

- Community
- Education
- Health
- Political

**Answer: *No Answer***

**Please provide (a) the location of effort including applicable cities or states and indicating "Online" if web-based and (b) a brief description of the effort, including the number of months or years your business has engaged in this support.**  
**Answer: *No Answer***

**Type of support**

- Cash Grant
- In-Kind
- Other

**Answer: *No Answer***

**#3.**  
**Third Philanthropic Effort**

**Name of campaign, organization or event**  
**Answer: *No Answer***

**Type of LGBT organization or event (if applicable)**

- Community
- Education
- Health
- Political

**Answer: *No Answer***

**Please provide (a) the location of effort including applicable cities or states and indicating "Online" if web-based and (b) a brief description of the effort, including the number of months or years your business has engaged in this support.**  
**Answer: *No Answer***

**Type of support**

Cash Grant

In-Kind

Other

**Answer: No Answer**

**2b.**

**If YES to Q2, please provide any additional information about your business' philanthropic support.**

**Answer: No Answer**

**3.\***

**During the past year, has your business engaged in targeted recruiting efforts to the LGBT community such as LGBT career fairs?**

2012: Criterion 4

Although firm-wide efforts are preferred, efforts from a particular segment of the firm are accepted.

LGBT Recruiting -- Best Practices and Case Studies: <http://hrc.org/cei-6-4>

List of LGBT Professional Recruitment Events: <http://hrc.org/cei-6-3>

Yes

No

Do not know/Info Not Available

**Answer: No Answer**

**3a.**

**If YES to Q3, please describe a maximum of three such efforts.**

**#1.**

**First Recruiting Effort**

**Please provide (a) the location of effort including applicable cities or states and indicating "Online" if web-based and (b) a brief description of the effort, including the number of months or years your business has engaged in this effort.**

**Answer: No Answer**

**#2.**

**Second Recruiting Effort**

**Please provide (a) the location of effort including applicable cities or states and indicating "Online" if web-based and (b) a brief description of the effort, including the number of months or years your business has engaged in this effort.**

**Answer: No Answer**

**#3.**

**Third Recruiting Effort**

**Please provide (a) the location of effort including applicable cities or states and indicating "Online" if web-based and (b) a brief description of the effort, including the number of months or years your business has engaged in this effort.**

**Answer: No Answer**

**3b.**

If YES to Q3, and this effort had a tracked recruiting component, how many candidates were formally interviewed as a result?

Answer: *No Answer*

3c.

If YES to Q3, please provide the public web address for your business that is devoted to LGBT recruitment, if one exists.

Answer: *No Answer*

Previous: *No info available*

3d.

If YES to Q3, please provide any additional information about your business' recruiting efforts.

Answer: *No Answer*

4.\*

During the past year, has your business publicly supported LGBT equality under the law through local, state or federal legislation or initiatives (e.g., made statement or communicated in favor of LGBT legislation or opposed legislation that would limit the rights of LGBT people)?

2012: Criterion 4

Although firm-wide efforts are preferred, efforts from a particular segment of the firm are accepted.

Business Support for LGBT Equality Under the Law: <http://hrc.org/cei-6-7>, including

- Business Coalition for Workplace Fairness <http://hrc.org/bcwf> and
- Business Coalition for Benefits Tax Equity <http://hrc.org/bcbte>

Yes

No

Do not know/Info Not Available

Answer: *No Answer*

4a.

If YES to Q4, please describe a maximum of three such efforts.

#1.

First Effort

Name of campaign, organization or event

Answer: *No Answer*

Please provide (a) the location of effort including applicable cities or states and (b) a brief description of the effort, including the number of months or years your business has engaged in this effort.

Answer: *No Answer*

#2.

Second Effort

Name of campaign, organization or event

Answer: *No Answer*

Please provide (a) the location of effort including applicable cities or states and (b) a brief description of the effort, including the number of months or years your business has engaged in this effort.

Answer: *No Answer*

#3.

Third Effort

**Name of campaign, organization or event**

**Answer: No Answer**

**Please provide (a) the location of effort including applicable cities or states and (b) a brief description of the effort, including the number of months or years your business has engaged in this effort.**

**Answer: No Answer**

**4b.**

**If YES to Q4, please provide any additional information about your business' public support for LGBT equality under the law.**

**Answer: No Answer**

**5.\***

**Does your business seek out certified LGBT-owned businesses as part of a supplier diversity program?**

2012: Criteria 4

LGBT Supplier Diversity Programs: <http://hrc.org/cei-6-5>

**Yes**

**No, but plan to in the next one year**

**No**

**Do not know**

**Not applicable, we do not have a supplier diversity program**

**Answer: No Answer**

**Previous: No**

**5a.**

**If YES to Q5, please indicate how you have engaged LGBT suppliers in the past year.**

2012: Criteria 4

e.g.:

- worked with XX certified LGBT-owned businesses in 2009
- partnered with local/national LGBT chamber of commerce to recruit certified LGBT-owned suppliers

**Answer: No Answer**

**6.**

**Does your business require your suppliers to prohibit discrimination consistent with the protections provided by your EEO or non-discrimination policy?**

Essentially, do you require suppliers to prohibit discrimination based on "sexual orientation" and/or "gender identity or expression."

Supplier Standards -- Discrimination Policies: <http://hrc.org/cei-6-6>

**Yes**

**No, but plan to in the next one year**

**No**

**Do not know**

**Answer: No Answer**

**Previous:** *No info available*

**<1234 Corp.> notes or additional information for HRC**

**HRC notes to <1234 Corp.>**

## 7. International Operations

Status: Not Yet Started



This section is for informational purposes only. Answers to these questions are not required and will not be rated.

U.S. corporations increasingly have an overseas presence or are multinational in character. Employers should expand their LGBT policies and benefits globally to the extent legally allowable in any country of operation. Since many multinational businesses have decentralized human resource divisions, it may be difficult to answer some of the questions regarding operations in all global locations.

The HRC Foundation is interested in understanding how LGBT-related policies and benefits extend to overseas operations, and highly encourages companies to perform an audit of all policies and benefits for LGBT employees in all international locations, and to compile the information centrally in an effort to compare and expand policies as appropriate, wherever local law does not prohibit, to ensure consistency across all global platforms.

A leading practice among many employers is to approach this topic not as trying to change the culture of places they do business, but defining and communicating what is acceptable behavior and practice within their organization.

If necessary, please work with your international counterparts to answer the following questions to the degree that information is currently available.

1.\*

**Does your business have operations outside the United States (including those of parent or sibling business entities in other countries)?**

**Related Business Entities:** Until now, all CEI Survey questions have focused on U.S. operations only. Some CEI participants are legally structured as U.S. entities that are closely partnered with sibling business entities in other countries or wholly-owned by a larger international business entity. The next question will ask about the nature of your relationship to such entities.

International LGBT Workplace Considerations <http://hrc.org/cei-7-1>

Yes

No, but plan to in the next one year

No

Do not know

**Answer: No Answer**

**Previous: No**

1a.

**If YES to Q1, please briefly describe the nature of your international operations, including significant name variations, the formal relationship to the foreign entities and whether employees interact or transfer between these entities.**

*This question is new.*

**Answer: No Answer**

**Previous: No info available**

1b.

**If YES to Q1, does your non-discrimination policy apply to all global operations, where it is not expressly prohibited by law, and does it include non-U.S. citizens based abroad?**

Yes

No, but in one or more offices outside the U.S.

No, but plan to implement in the next one year

No

Do not know

**Answer: *No Answer***

**Previous:** Do not know

**1c.**

**If YES to Q1, does your business offer partner benefits to employees in all locations, where it is not expressly prohibited by law, and where spousal benefits are generally offered?**

Yes

No, but in one or more offices outside the U.S.

No, but plan to implement in the next one year

No

Do not know

**Answer: *No Answer***

**Previous:** Do not know

**1d.**

**If NO to Q1b, what are the impediments to offering such partner benefits?**

**Answer: *No Answer***

**1e.**

**If YES to Q1, in locations where offering equal benefits is expressly prohibited by law, has your business made efforts to discuss this limitation with local authorities or with other companies doing business in those countries? Have you been able to arrange any special provisions or understandings with the host government to provide partner visas or other accommodations?**

**Answer: *No Answer***

**1f.**

**If YES to Q1, are there established chapters of your LGBT employee group in your global operations?**

Yes

No, but in one or more offices outside the U.S.

No, but plan to implement in the next one year

No

Do not know

**Answer: *No Answer***

**Previous:** Do not know

**1g.**

If YES to Q1 is there a formal opportunity for LGBT employees based outside of the U.S. to participate in your employee resource group?

Yes

No, but in one or more offices outside the U.S.

No, but plan to implement in the next one year

No

Do not know

**Answer: No Answer**

**Previous:** *No info available*

2.\*

Does your business expressly recruit LGBT people and advertise its nondiscrimination policies in its recruitment efforts for international operations?

Yes

No, but plan to in the next one year

No

Do not know

**Answer: No Answer**

**Previous:** *No info available*

2a.

If YES to Q2, do you have targeted recruiting events for LGBT professionals?

Yes

No, but plan to in the next one year

No

Do not know

**Answer: No Answer**

**Previous:** *No info available*

2b.

If YES to Q2, do you prominently display your inclusive non-discrimination policy in recruitment materials?

Yes

No, but plan to in the next one year

No

Do not know

**Answer: No Answer**

**Previous:** *No info available*

**2a.**

**If NO to Q2, why not?**

**Answer: *No Answer***

**Previous: *No info available***

**<1234 Corp.> notes or additional information for HRC**

**HRC notes to <1234 Corp.>**

## 8. Additional Information

Status: Not Yet Started



**1. Please include any other information that would illustrate how your business views lesbian, gay, bisexual and transgender employees, consumers or investors.**

This could include information on innovative business practices, products or services that affect the LGBT community; notable employee programs; etc.

**Answer: No Answer**

**2. Do you plan to apply for the Award for Workplace Equality Innovation 2011?**

Award for Workplace Equality Innovation: <http://hrc.org/innovation>

Yes

No

Do not know

**Answer: No Answer**

**3. If you have any additional information or supporting documents you would like to submit, please attach the file here.**

**Answer: No Attachment**

<1234 Corp.> notes or additional information for HRC

HRC notes to <1234 Corp.>