Before you get that next surgery, it’s not your spouse or best friend who may ask you to get a second opinion — but your employer.

Companies are increasingly encouraging workers to seek additional medical opinions before proceeding with expensive medical treatments — and they’re using both financial carrots and sticks. For example, getting a second opinion before surgery might earn someone a lower deductible on their health insurance; failing to get one could mean higher premiums or lower reimbursement.

While employers say they want their workers to make informed medical decisions, experts say the second opinions also often convince people to choose less invasive or cheaper treatments. So-called second-opinion companies like Advance Medical and Best Doctors provide additional medical opinions to health-plan members at dozens of big companies — and say they recommend an alternate treatment in 60% of cases. While the new recommendations aren’t necessarily cheaper, they often suggest more conservative options that don’t include surgery or other big-ticket procedures — many of which would be unnecessary, the companies say.

These second-opinion services, which employers provide to employees for free, ask independent specialists to remotely review medical case files and recommend a course of treatment. In most cases, employees never see the doctor at all. While experts say the programs stop short of “prior authorization,” which insurance companies commonly require as justification before covering expensive procedures, the monetary incentives may force employees to reconsider.

The second-opinion programs aren’t new — several companies, hospitals and health insurers began offering them as far back as the late 1980s — but experts say employers have increasingly begun integrating them as part of their employee benefits programs in just the last few years. The second-opinion companies say their programs are designed as an antidote to America’s rampant misdiagnosis problem, and that their additional opinions save patients — and the employers who pay their health claims — thousands of dollars in needless health spending. “We’re catching errors,” says Gary R. Yeamans, executive vice president for Advance Medical. “Employers say, ‘I want to make sure this doesn’t happen to my employees,’” says Evan Falchuk, vice chairman of Best Doctors.

More employers are looking to second opinions as a potential solution to their onerous health bills, as well as a way to keep workers healthier. Best Doctors signed 37 corporate clients in 2012, including Red Bull North America and International Paper, according to the company, which also increased revenue 24% to more than $150 million that year. Health insurer Cigna also began offering second opinions to some of its U.S. plan members through a trial partnership with the respected Cleveland Clinic in 2008, but has continued the program due to positive feedback. “Our medical directors are frankly quite high on it,” says Joe Mondy, a Cigna spokesman.

Employers determine whether and how they will incentivize employees to seek second opinions, and experts say rewards for doing so have been more effective than penalizing those who don’t. For example, a company may designate six conditions
for which employees are required to complete an online education course about their treatment options or pay more. Others reward employees for seeking additional opinions before proceeding with surgery in the form of money deposited into their health savings account.

Some health experts question whether changing a treatment plan or recommending less treatment necessarily means better care. The third-party opinion companies sell their services to employers based on their value, so they may be biased when choosing doctors to review employees’ cases. “If you were running a second-opinion program and you had to recruit specialists and physicians to participate in it, would you have a tendency to recruit physicians who are more conservative or less?” says Francois de Brantes, executive director for the Health Care Incentives Improvement Institute. (Cigna, for its part, says its MyConsult program has not resulted in high rates of treatment switching, and the doctors providing the second opinions are all hired by the Cleveland Clinic — not recruited by the insurer.)

Health plans and companies counter that their aim is to help employees get the best possible medical treatment — even if studies and anecdotal evidence show that second opinions often result in cheaper, more conservative care. Second-opinion service WorldCare, for example, cites an independent study showing that second opinions canceled 73% of surgeries at the Elizabeth Wende Breast Clinic — saving $984,000 when patients opted for less invasive treatments. Advance Medical cites the case of a patient whose doctor recommended spinal-fusion surgery, but not to have it after seeking a second opinion through the company: “It illuminated a surgery that the patient didn’t have to have and saved the employer money,” says Yeamans. See: The Value of Second Opinions

Still, the second-opinion services say it can be hard to convince employees that they might be better off with a treatment plan other than the one their doctor recommended. “How do you convince someone who thinks they need back surgery that the best thing to do is lose a little weight, or do exercises, in a world in which someone says look, you’re just trying to do this to save money?” says Falchuk. And employees generally don’t expect or trust their company to make medical decisions for them: Only 2% believe their employer is a completely trustworthy source of health information, according to a 2011 survey of employee attitudes by the National Business Group on Health. “We don’t want to make it the kind of requirement that triggers employees thinking this isn’t in their best interest, because it is,” Falchuk says.