

SENATE COMMITTEE ON STUDENT AFFAIRS
MINUTES OF MEETING
DECEMBER 1, 2004

[In these minutes: Boynton Health Service Update, Student Mental Health Issues]

[These minutes reflect discussion and debate at a meeting of a committee of the University Senate or Twin Cities Assembly; none of the comments, conclusions, or actions reported in these minutes represent the view of, nor are they binding on the Senate or Assembly, the Administration, or the Board of Regents.]

PRESENT: Kristen Denzer, chair, Jennifer Wagner, Kendre Turonie, Jean-Marie Del-Santo, Kim Roufs, Janet Schottel, Maria McCrae, Divya Raman, Michael Rhodes

REGRETS: Gerald Rinehart, Iraj Bashiri, Yasemin Kaygisiz, Carolyn Nayematsu, Matt Painschab

ABSENT: Christina Trok, Christine Ascheman, Shannon Carry

OTHERS: Gabriele Schmiegel, Tina Falkner

GUEST: Dr. Ed Ehlinger, director of Boynton Health Service

I). Kristen Denzer called the meeting to order.

II). Kristen Denzer welcomed Dr. Ed Ehlinger, director of Boynton Health Service, to today's meeting. She noted that Dr. Ehlinger was invited to the meeting to provide members with a Boynton Health Service update.

Dr. Ehlinger began by noting that in the past Boynton Health Service reported directly to the Senate Committee on Student Affairs (SCSA). However, SCSA turned over its Boynton Health Service oversight responsibilities to the Student Health Advisory Committee (SHAC), once it was established.

Next, Dr. Ehlinger provided members with an overview of Boynton Health Service. He highlighted the following:

- Boynton Health Service (BHS) is one of the largest health service organizations in the country.
- To the best of Dr. Ehlinger's knowledge, BHS is the only institution in the State to combine the medical care piece and the public health piece of health care under one umbrella. Boynton Health Service functions both as a primary care clinic for the University community and as a public health agency.
- The BHS philosophy is that health is central to the mission of the University.
- Related to BHS's public health mission, it conducts studies and shares its findings with the University community and beyond. As an example of BHS's public health work, Dr. Ehlinger turned members attention to a tobacco use

brochure, which he had distributed. He added that similar publications on alcohol use and mental health issues will be forthcoming.

- BHS was the first college health service to be accredited and was the first ambulatory care clinic in the Twin Cities to be accredited. It has maintained these accreditations since the 1970s. Quality assurance is very important to BHS.
- BHS typically provides annual flu vaccines to faculty, staff and students. Because there is a vaccine shortage this year, BHS is distributing approximately 20,000 cold kits instead. Cold kits were distributed to members.
- BHS's success is measured by the overall health of the student population.

Insurance issues:

- The Twin Cities campus has a mandatory insurance plan. All degree-seeking students taking 6 credits or more must purchase this health insurance. The goal is to be able to offer this plan on all University campuses statewide. Creating a larger network would reduce risk, lower rates, and possibly allow the University to add additional benefits. Recently, the Duluth administration decided to offer this plan to its students.
- Boynton Health Service put together a health insurance proposal for Academic Health Center (AHC) students, whose health coverage needs are different than other students. The proposal, which has been approved by the AHC administration, requires all health science students to purchase the University sponsored health care plan, unless they have domestic employer sponsored health care coverage.

Other BHS initiatives:

- BHS plans to recommend that there be a year round fee for Boynton Health Service. Reasons for this recommendation:
 - Most students remain in the Twin Cities year round and many assume that they can come into BHS anytime to receive services at no out-of-pocket cost to them. Under the current model, the fees that students pay only cover BHS services during the regular academic year.
 - Often students that are aware that their services will expire at the end of the academic year, bunch up their requests for services. This demand for increased services both at the beginning and end of the school year causes incredible scheduling demands on BHS.
 - Graduating students will be covered until August, which will buy students time to find a job with benefits.

A minimal \$6.25 student services fee increase per semester will allow BHS to provide students with year round services. Dr. Ehlinger noted that the amount of fees received by BHS would remain constant and only the calculation of the per-student fee would change.

Dr. Ehlinger acknowledged that there may be resistance to the year round fee by some students. While Dr. Ehlinger is sensitive to their concerns, he asks these students to think about what is in the best interest of the entire student body.

The next step in getting this proposal approved is to have it go before the Student Health Advisory Committee (SHAC) for a vote.

- BHS will be investing in an electronic medical recordkeeping system. A Return On Investment (ROI) study was conducted, which indicated that the original investment of \$500,000 should be able to be recouped in three years. This proposal will go before the Board of Regents in early 2005. Assuming the request is approved, system implementation is planned for summer 2005.
- A proposal to offer an occupational health services for the University community is being developed.
- The AHC is considering building new clinical space and would like BHS to be apart of this initiative. In Dr. Ehlinger's opinion, the AHC wants BHS to partner with them in order to help pay for the new space. BHS, however, likes its current location and so do students. Over the years, BHS has developed some of its own funding streams e.g. eye clinic, pharmacy, x-ray, lab, etc. that help to keep student fees down. Many years ago, student service fees made up approximately 85% of BHS's budget. Now, student service fees make up only 30% of BHS's budget. Dr. Ehlinger's concern is that if BHS moves to this new space it would lose its funding streams, which would likely be earmarked to help pay for the new space. This, in turn, would likely lead to increased student service fees for health insurance.

Dr. Ehlinger thanked members for the opportunity to provide a BHS update and asked if there were any questions/comments. Members had the following questions/comments:

- Does student health insurance cover major items like surgery, cancer treatment, etc.? Dr. Ehlinger explained that all students taking six credits or more must pay the student service fee and have additional health insurance above and beyond BHS coverage. The health portion of the student service fee allows students to be seen at BHS without incurring any out-of-pocket costs. A student's additional health insurance would pay for services that BHS cannot provide e.g. surgery, etc. He added, with respect to international students, they are mandated to purchase the University sponsored student health benefits plan.
- With regard to the proposed year round fee model, do summer students pay anything additional? No, as long as a student paid the health portion of the student fee during spring semester there would be no additional fees during the summer.
- Do coordinate campus student health insurance plans transfer between campuses? The Twin Cities student health benefit plan, which Duluth recently adopted, is administered by Blue Cross/Blue Shield (BCBS). Any BCBS provider will

accept this insurance on an 80/20 basis. However, it is not possible, at this time, for Duluth students to receive free services at BHS.

- If the year round fee model is approved, when will it take effect? If approved, it would go into effect fall semester 2005.
- A mandatory fee for students that do not use BHS does not seem fair. Dr. Ehlinger explained that BHS records indicate that it serves approximately 50% of the student body each year, and, over the course of a four-year period, BHS serves approximately 90% of students at least once. Even if students never use the service, they are paying to make sure the services are there if they do need them. Dr. Ehlinger equated paying the health portion of the student service fee to paying taxes. Student service fees are a tax that students place on themselves to have a range of services available e.g. recreation sports, The Minnesota Daily, Student Legal Services, etc.

III). Other Business: A member voiced concern over the student suicide that took place on Wednesday, November 24th. What should a faculty member do if they believe a student is having mental health problems? Dr. Ehlinger suggested:

- Call the BHS Mental Health Clinic Help Line.
- Call University Counseling and Consulting Services (UCCS).
- Tell the student about resources that are available.
- Contact BHS and/or UCCS to arrange in-service training for staff who deal with students that may have mental health or behavior issues.

Dr. Ehlinger noted that mental health is an ever-increasing issue. The number of students that have been diagnosed with depression has increased steadily over the years.

A member suggested that if the student lives in a residence hall, that the hall director be contacted. If a faculty member has a fear for a student's well-being, it allows that faculty member permission to contact other University officials who could intervene. Faculty members actions are governed under the Family Education Rights and Privacy Act (FERPA). The Act states that faculty members can share information about a student on a need to know basis within the institution.

Another member suggested faculty and staff use caution when making emergency health and safety decisions on their own. Renee Dempsey, Senate staff, was asked to contact Vice Provost Rinehart to find out a contact name within the Emergency Response Team as another avenue for getting the University community involved in making health and safety decisions.

A couple faculty members suggested that the University develop guidelines to assist faculty in dealing with student mental health/behavior issues. Kendre Turonie referred members to the Office of Student Affairs website as a resource:

<http://www.osa.umn.edu/resources/index.html>.

A Duluth member noted that UMD Health Services Director Katherine Morris has developed a PowerPoint presentation to educate faculty and staff on student mental health

issues. This presentation has helped to raise the comfort level of UMD faculty and staff in recognizing and dealing with student mental health issues.

IV). Hearing no further business, Kristen Denzer adjourned the meeting.

Renee Dempsey
University Senate