

[In these minutes: Student National Medical Association Conference, National Primary Health Care Week, Student Health Insurance]

## **ACADEMIC HEALTH CENTER STUDENT CONSULTATIVE COMMITTEE (AHC SCC) MINUTES**

**WEDNESDAY, OCTOBER 8, 2003**

**5:00 - 6:00 p.m.**

**406 CHILD REHAB CENTER**

[These minutes reflect discussion and debate at a meeting of a committee of the University of Minnesota Senate or Twin Cities Campus 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:** Kim Canfield, Chair (Public Health), Leslie Carranza (Medical School – 2<sup>nd</sup> Year), Wesley Kurszewski (Physical Therapy), Tori-Thuy Le (Dental Hygiene), Jeremy Olsen (UMD School of Medicine), David Renstrom (Pharmacy), Leah Van Gorp (Nursing).

### **REGRETS:**

Angela Feneis (Occupational Therapy), Alisa Madson (Dentistry), Kelly Schneider (Mortuary Science), Mark Wiisanen (Medical School – 3<sup>rd</sup> Year), Christopher Zaun (Medical Technology).

**GUESTS:** Barbara Brandt, Dave Golden, Sue Jackson.

## **1. DISCUSSION OF NATIONAL PRIMARY HEALTH CARE WEEK AND STUDENT NATIONAL MEDICAL ASSOCIATION CONFERENCE**

Leslie Carranza began by talking to the committee about the Student National Medical Association Conference on health disparities and minorities being held on campus October 17-19. The conference will include speakers from Mayo and Washington D.C. While the event is being sponsored by medical students, she would like a diverse group of students to attend and therefore asked that members pass the information onto their classmates. Interested students are asked to register on-line.

Kim Canfield then discussed National Primary Health Care Week being sponsored by CHIP and the AHAC. This national event has not been observed at the University until this year. The event is scheduled for October 21-26, with one kick-off event and then a panel discussion with people from each discipline from 12:15-1:15, Thursday, October 23, 2003, focused on a case study. This event is geared towards students, so she encouraged everyone to attend. If students still want to participate in the planning, they should attend the next planning session on Thursday, October 9 from 12:15-1:15 in 488 Child Rehab Building.

## **2. STUDENT HEALTH INSURANCE ELIGIBILITY AND INADEQUACIES**

Kim Canfield introduced Sue Jackson, Director of Student Health Benefits, and Dave Golden, from Boynton Health Services. She noted that Sue Jackson contacted Barbara Brandt last month regarding meeting with students to get input on student health insurance. Since committee members had mentioned the same topic at the last meeting, the topic was scheduled for discussion today.

Sue Jackson said that Senior Vice President Frank Cerra has expressed some concerns that the Student Health Benefit Plan was not meeting the needs of the AHC students. An agreement was made to convene groups of students to look at the plans and provide feedback. She then explained the details of the plan:

- Student health plan is partially self-funded
- Students taking 6 or more credits that count toward the assessment of the Student Service Fees are eligible for the plan
- Funding method and eligibility criteria for the Plan is linked to student service fees, so only Twin Cities students are eligible at this time
- Plan covers 80% of eligible expenses outside Boynton, but student service fees subsidizes the cost of most services at Boynton bringing the benefit level to 100%
- Plan is comprehensible and affordable, at roughly \$98.50 per month

- While most health insurance renewal increases this year were 30-40 percent to keep plan designs as they were, this plan only increased the cost of coverage by 14 percent
- Plan changes were implemented following an RFP three years ago
- Blue Cross/Blue Shield (BC/BS) provides the network for care outside of BHS, provides claims administration services and stop-loss coverage
- Plan includes stop-loss coverage
- While many other student health plans do not cover pre-existing conditions, this benefit limitation was removed from this plan
- Pharmacy benefits are not insured, but are also self-funded when the prescription is filled by Boynton
- Pharmacy coverage includes \$1200 per year maximum, with a \$12 co-pay for generic medications and \$20 for brand-name medications
- Pharmacy costs are the most difficult to maintain in terms of plan costs and structure

Q: How are the pharmacy benefits self-funded?

A:

Boynton makes a projection of the cost for pharmacy benefits based on previous utilization experience and expected increase in the cost of providing pharmacy benefits. A per member cost is calculated with a goal of coming as close as possible to breaking even.

Sue Jackson then talked about the fact that they are looking at needs of student groups that have expressed a desire to be covered on the plan. Some plan expansion considerations that have come from this are:

- Rochester nursing students enrolled in the plan for the first time this semester
- Duluth coverage for its current plan is not as good
- Both programs have been talked to about expansion
- Challenge is to spread the risk evenly so that the plan does not fall in to debt
- Eligibility would need to continue to be tied to student service fees so that students do not just enroll when they need coverage

Q; What is the difference between the student health insurance, private insurance and Graduate Assistant insurance?

A:

Private insurance is purchased separately by students, usually by enrolling on their parents' or spouses' plan. Graduate Assistant insurance is an "employee type" program run by Boynton, but the Graduate School and Human Resources Department actually determines the benefits, and negotiates for it. The University subsidizes this plan so this coverage is the best. The Student Health Benefit Plan is available to students that are required to have insurance but have no insurance of their own. The cost is born by the covered students and not subsidized by the University and it is automatically assessed during the registration process.

Q; What is the difference in enrollment between on and off campus?

A: Off-campus classes are not charged student service fees, so students taking these classes are not eligible to enroll in the plan. Requests have been made to allow these students to enroll, but it is not fair to the other students who fund the program through their student service fee.

Q: Is student health insurance information included in orientation materials?

A: Some schools include information in their orientation packets. The material is also at Boynton with other brochures and at the information desk. Once students are enrolled, they receive the Blue Cross/Blue Shield booklet as well. Boynton can consider changing the marketing approach and uses a color besides white to attract students' attention.

Q; What about enrolling Morris and Crookston in the plan?

A:

Talks are currently taking place with Duluth. Crookston usually goes along with what Duluth does, so the focus has been to start by working with Duluth. Morris has not been approached yet.

Q; What is the coverage for pregnancy and mental health?

A: Both are covered at 80 percent.

Q; Is dental coverage included in the plan?

A:  
Dental benefits are not included, but this is a benefit that many people would like to see included. Boynton does offer a discount of approximately 50 percent on routine dental check ups with x-rays to students paying the SSF.

Q; Duluth students are complaining about the cost to cover dependents. Would this be addressed if the plans were combined?

A: A bigger purchasing group always allows for better pricing. Currently the Twin Cities plan charges under \$1000 per semester for dependent coverage. The issue at Duluth is that any student can purchase insurance, even those taking less than six credits, so many sick people purchase the plan and drive the costs up. It would be difficult for students at the beginning if the plan eligibility was changed, but it would be better for all students in the long run.

Q: Can students receive coverage when they are doing field work, clinicals, or their theses and are not registered for more than six credits?

A: These students are still part of the eligible group and BC/BS can accommodate for these students.

Q: Does coverage extend beyond graduation?

A; If students pay for coverage spring semester, they are technically covered until the start of the next term.

Q; Why are international students required to purchase student health insurance when many have purchased health insurance from their home country?

A:  
International students, regardless of other coverage, are required to enroll in the student health insurance plan because most overseas insurance companies refuse to pay U.S. hospital or clinic bills, and the student does not find this out until they are stuck paying the bill themselves. The few insurance companies in the U.S. that provide coverage for international students and their dependents do not provide adequate or appropriate coverage. There have been some challenges implementing this requirement at the same time as INS changes, but the two are completely unrelated.

Q: Are vaccines for working and studying abroad covered by the plan?

A: Office visits, DPT, and flu shots are covered. All others are not. Students can go outside Boynton for these vaccines, and usually pay less because of the \$200 cap outside Boynton.

Q: Does the plan include travel and medical evacuation insurance?

A: Yes.

Q: Care can be compromised when it takes months to schedule routine visits. Is anything being done to address this need?

A: Most routine services have a six to eight week wait to see a doctor. This is because of the effort made to have more blocks available each day for urgent care needs, of which 90 percent are seen the same day. There currently is a problem with scheduling in the dental clinic due to maternity leave for one hygienist.

Q: Does the plan offer student disability coverage?

A:  
There is no formal disability coverage. The plan offers a one-term medical leave of absence continuation of coverage provision. Students, however, cannot be covered by the plan if they are on leave for more than one semester.

Q: Is there any off-campus pharmacy coverage?

A: The plan does not reimburse for off-campus medications, but Boynton can overnight medications to students.

Q: What is the cost for immunizations?

A: The total cost for pre-AHC students is almost \$400. Hepatitis B is expensive because it is a 3 shot set. The AHC expects most immunizations to be done pre-matriculation, when students are usually covered by another health plan.

Dave Golden said that any changes in plan design should be communicated at this time, prior to the next renewal of the plan. From other groups, the biggest areas of concern are pharmacy and coverage, including a year-round SSF coverage option.

Students then made the following comments about the plan:

- Most students do not understand what is and what is not covered
- More work is needed to educate students
- Immunization coverage should also be considered, especially for AHC students

Sue Jackson and Dave Golden thanked the members for their input. They said that either could be contacted with any other questions. Feedback will also be received from other groups, such as COGS, GAPSA, CHIP, SHAC, and MSA.

With no other business, Kim Canfield thanked the members for attending and adjourned the meeting.

Becky Hippert  
University Senate