# WHAT STUDENTS VOTED ON: THE OFFICIAL REFERENDUM LANGUAGE

#### **Election Results**

The "Safeguard Student Health Care" fee referendum was held March 8-10, 2005. The official results of the election were as follows:

9,384 students voted in the election (29.6% of registered students; 20% minimum voting requirement was met)

6,350 Yes votes (67.7%) (50% + 1 vote required for passage)

3,034 No votes (32.3%)

#### Official Referendum Language

To protect and improve student access to high quality, on-campus medical and mental health care, do you approve a mandatory fee to support Berkeley's student health and counseling services?

The fee will exclusively support student health and counseling programs and services available to all registered Berkeley students, even those who do not enroll in the Student Health Insurance Plan (SHIP).

The fee is intended to supplement but not supplant the portion of UC Berkeley's Registration Fee income currently allocated to University Health Services, Tang Center.

As the cost of health care continues to rise, this fee will ensure that Berkeley students have direct access to affordable, reliable, quality health care on-campus.

The fee is subject to the following costs and conditions:

- Collection of the fee will begin in Fall 2005 and will be assessed as a \$43 charge each Fall and Spring semester and as
  a \$31 charge for students registered in Summer Sessions. The fee is subject to annual adjustment within the limits
  described below.
- An independent student health advisory committee will work with campus health officials, to ensure that fee money is
  allocated to meet students' changing health care needs in the areas of urgent care, basic medical care, mental health
  care, specialty medicine, lab and pharmacy services, and preventive health education.
- By February of each year, the independent student health advisory committee will recommend any increase or decrease in the fee rate to campus health officials. Increases in any one year may not exceed health care inflation rates for physician and clinical services published annually by the U.S. Bureau of Labor Statistics (currently 5-7% per year).
- In accord with campus policy, one-third of fee revenues will be returned to financial aid to help offset the cost of this fee for the needlest students who are eligible for campus-based financial aid.

Do you approve this mandatory fee of \$43 per semester and \$31 dur	ring Summer Session to support Berkeley's student
health and counseling services?	
Yes	
No	

#### About the Referendum

From March 8th to 10th, all UC Berkeley students will have the opportunity to vote online in the Safeguard Student Health Care referendum. This measure would establish a new mandatory fee (\$43 per semester, \$31 for summer session enrollees) to safeguard access to student health and counseling services on the Berkeley campus.

Voting for this referendum will be conducted online, via Bear Facts (a secure campus server). A majority of student voters must approve the fee before it can be implemented.

What new services would the fee provide?

For 2005-06, the fee will be allocated for the following student health priorities:

Urgent Care and Medical Services:  More medical appointments available each week Longer Urgent Care hours- Open until 6pm Expanded Pharmacy hours- Open Saturday Faster service at the Pharmacy Extended Lab and X-ray hours	\$15	
Mental Health Services Additional same-day urgent drop-in appointments Shorter wait for on-campus counseling appointments Shorter wait for on-campus psychiatry appointments	\$8	
Information Systems & Technology Online scheduling for medical appointments Improved phone scheduling of medical appointments	\$5	
Preventive Health Services Expanded prevention programs and services for health topics critical to optimal student health	\$1	
Allocations are based on student demand, as indicated by student surveys and health care utilization data. These allocations may change annually based on input from an independent student health advisory committee.		
Financial Aid Component  One-third of the fee is directed to financial aid to help offset the cost of this fee for the needlest students who are eligible for campus-based financial aid.	\$14	

## What do I lose if the fee fails?

Consequences for students if the fee fails will include some or all of the following:

What could happen:	What you need to know:
New visit fees ("co-payments") of \$20-35 per visit for every medical or Urgent Care visit to the Tang Center.	These fees may not be covered by financial aid, and may deter some students from seeking treatment when they need it, worsening their medical condition.
Increased user fees for all students who access health services at Tang.	These fees may not be covered by financial aid, which means that some students will face barriers to accessing health care.
Premium increase for SHIP (the Student Health Insurance Plan) beyond projections based on current plan use.	When primary health care services are not provided by the campus, student health insurance has to pay for it, which drives up health insurance costs for students.
Reduced number of appointments for counseling and psychiatry at the Tang Center.	More students would be referred off campus, resulting in delayed care and higher costs for counseling and psychiatry visits.
Reduced hours of operation at the Tang Center.	Less access to convenient, on-campus medical care when you need it most.

# Why is this fee needed now?

Right now, colleges and universities across the country are facing the same health care crisis that all Americans are experiencing. Unprecedented health care inflation rates (nationwide)- along with severe cuts in campus funding and increased student demand for care- have eroded the essential on-campus medical and mental health services we rely on. As members of the student Health Fee Advisory Committee, we are willing to pay \$43 a semester in order to protect and improve our access to health care in Berkeley. We hope that you will join us.

# What's happening on other campuses?

Students on 3 UC campuses have voted to pay mandatory health fees- like this one- to stabilize access to essential

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student health services in the wake of the national health care crisis and State and UC budget reductions. Another 3 UC campuses have built access fees into their student major medical health insurance premiums.

If I already have health insurance, why should I pay this?

Student health insurance, like SHIP, pays mostly for major medical care, like surgery or hospitalization after a traffic accident. To keep the cost of insurance affordable for students, it does not typically pay for basic or primary health care needs.

As a result, some students are faced with heavy out-of-pocket costs for basic health services- particularly when low-cost, on-campus health care is not available (for example when the Tang Center is closed).

To minimize out-of-pocket costs, the mandatory Safeguard Student Health Care fee would provide additional funding to University Health Services, to restore staffing for services and to make improvements in the student health resources available at the Tang Center. It protects equal access to health services for all Berkeley students- so that you can afford high quality health care, no matter how much pocket money you have.

#### What about summer?

Students will be charged for campus medical services during the summer, depending on their summer registration status and whether or not they have the Student Health Insurance Plan (SHIP). The following chart explains the fee schedule that would begin in summer 2006 if the Safeguard Student Health Care Fee is approved.

	If you are registered in Summer Sessions	If you are NOT registered in summer
If you have SHIP	\$31 Safeguard fee	Low co-payments for each primary and urgent care office visit
If you do NOT have SHIP	\$31 Safeguard fee	Higher rates for office visits and other services

Non-UC students registered in Summer Sessions will pay a separate rate but will receive the same level of access as UC students registered during the summer.

What efforts have been made to find funding elsewhere?

Given the recent decline in campus support available to support health services, the Tang Center has sought additional funding from federal grants, one-time gifts, and donor support. It has also implemented innovative measures to improve efficiency in its clinics and administrative offices.

However, without additional funds, continued increases in costs for on-campus student health services will result in additional fees for services, fewer operating hours, and reduced access to health care for some students.

# Background

By paying Registration Fees, every currently registered Berkeley student has access to clinicians, counselors and services at the Tang Center, regardless of which health insurance they have. Many basic health services are provided at no additional charge to registered students.

Each year, 74% of Berkeley's 32,000+ undergraduate and graduate students access basic and urgent health care on campus. Over 100,000 visits per year are made by students to the Tang Center.

Services at the Tang Center currently include:

- Same day appointments for medical and mental health concerns
- Urgent care and triage
- · Women's health care
- · Counseling and psychological care
- Psychiatry consultations
- Pharmacy (prescription and non-prescription medications)
- Laboratory and x-ray

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- Physical therapy and sports medicine
- Nutrition counseling
- Immunizations for flu, hepatitis, meningitis, travel, etc
- Night and weekend phone service for medical referrals
- Dermatology
- Counseling for substance abuse, eating disorders, sexual health
- Consultations with specialty MDs

### The Fine Print

This referendum states that funds would be used to supplement but not supplant current campus funding for University Health Services. Students understand this to mean that the campus cannot protect UHS from across-the-board cuts to Registration Fees but will protect campus Health Services from differentiated cuts.

Each year, the independent student health advisory committee overseeing this fee may recommend changes in the allocation of fee revenues, to meet the evolving health needs of Berkeley students.

The committee may also advise on adjustments to the fee level. Any fee increase recommended by the committee may not exceed the rate of increase for per-capita health care expenditures for physician and clinical services, published annually by the U.S. Bureau of Labor Statistics.