Student Health Insurance Advisory Committee

Friday, February 19, 2016
Location for this week: Section Club

Agenda

- Review SHIP Feedback Form Summary
- Review updated medical bids for Top 3 carrier
  - Answers to SHIAC’s carrier questions from last week
- SHIAC formal recommendations on selection parameters:
  - Dependent parity
  - Cost-shift level
  - Transgender benefits/providers importance
  - Voluntary parity importance/tolerance
- Next week: review updated dental and vision plan options w/ chosen carriers

Absent: Elioth

MINUTES  *Italics are UHS responses to member questions.*

- Review SHIP Feedback Form Summary
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  - Answers to SHIAC’s carrier questions from last week
- SHIAC formal recommendations on selection parameters:
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  - Voluntary parity importance/tolerance
  - Added: network coverage inclusivity
- Next week: review updated dental and vision plan options w/ chosen carriers

Questions/Notes

- Reviewed network coverage for top carriers. Question: Can we as students advocate to Bay Area Psychiatric to get them to accept Carrier D?
  - *Bahar will follow up with her contact there to see their openness to Carrier D.*
How common is it in insurance to pay all upfront vs. monthly?

○ Broker: In the individual market, there is an open enrollment period, so you can only join certain times of the year.

■ In student insurance world, signing up for only certain parts of the year, but still need to have them enroll for the entire semester. When monthly, they are more likely to pop in and out of the market when they need it. And then it’s not really “insurance” with shared risks.

Wouldn’t the insurance company be the one who pays the consequence if monthly folks don’t pay?

○ Broker: Yes but they will put it back on the University to pay upfront, because of the reasons we already explained above.

Would the University be a third party to help offset the costs/billing to assist in the upfront semester cost?

○ Not likely.

Could we have prorated dependent plan arrangement like new children?

○ There has been some flexibility. Case by case currently.

Question about what we think Carrier D’s lower price means. Any idea how that would impact future rate increases?

○ Broker: Don’t have confidence that lower price will be consistent long term. May be looking at bigger increase in future.

Can you speak to Carrier A’s likelihood to change prices also in the future.

○ Broker: We’ve also talked about this before. Don’t think they will raise prices significantly. Refer to the negotiations they have given us about evergreen provisions.

■ Moving forward our carriers will have better data from the last 2 years compared to what our current carrier got from UC SHIP when we left the systemwide plan.

Can we have a guarantee that dependent plan stays in place? Can the University create an MOU?

○ It’s always going to be an option from the carrier. Decision is whether students and campus payers have tolerance for the prices/cost impact.

○ The University won’t create an MOU. But I think we are in a good situation. It’s not as unpredictable as it was in the past. We have a good sense that the volatility has calmed. Plan to offer dependent plan for the foreseeable future.

SHIAC formal recommendations on selection parameters:
○ Dependent parity
  ■ Yes, unanimous

○ Cost-shift level
  ■ Does SHIAC formally support some cost shift?
    ● Yes, unanimous
      ○ Rule out option 2
  ■ What level of tolerance?
    ● UG reps: Keep increase at 4% or less, but can tolerate ~5% if necessary.
      ○ Ideally keep increase to $100 or less for UG.
    ● Grads reps: Can tolerate 12% increase, but 15% feels too high.

○ Transgender benefits/providers importance
  ■ Yes, is worth including, unanimous

○ Voluntary parity importance/tolerance
  ■ UGs: Yes, as long as it doesn’t overburden undergrads and stays consistent with
    the tolerance for increases expressed above.
  ■ GA resolution supports parity for voluntary members.
  ■ Grads: Want parity, consistent with tolerance for increases expressed above.
  ■ Q: can we split the UG/Grads in terms of voluntary parity? (e.g. offer it for
    voluntary grads but not voluntary undergrads?)
    ● Broker: Carriers would be hesitant.

○ ADDED: network coverage inclusivity
  ■ Note: Emergency groups don’t generally join network.
  ■ Network coverage needs to include Bay Area Psychiatry.

**Action items/Follow up**

- Bahar will contact Bay Area Psychiatric to see if open to Carrier D?
  ○ Bahar will contact them.

- Waiting for Carrier B to send voluntary parity offer next week.
  ○ Bahar will update the group when possible.