

## Student Health Insurance Advisory Committee

Friday, February 12, 2016

NEW LOCATION: Class of 42

1. Review updated medical bids
  - a. Trans benefits update
  - b. Dependent/voluntary enrollment numbers
2. Review dental and vision plan pricing options
3. Review SHIP feedback form response summary to date
4. Narrowing down options

Absent: Liesolette, Elioth

**MINUTES** *Italics are UHS responses to member questions.*

- Presented updated medical bid
- Handed out preliminary survey results ~92 responses to date, mostly grad students
- Would like SHIAC recommendation to narrow down to 2-3 carriers today if have consensus.

### Questions/Notes

- Enrollment in the plan would be upfront like it is now for dependents? Prorating for new babies/adoptees?
  - *We'll check in with Brian*
- These numbers all look the same on dental and vision. How do networks compare?
  - *The companies who specialize in either dental or vision have best networks.*
  - *Broker advice is to keep current dental and vision unless unsatisfied or have good reason to change.*
  - *Only comment we've heard from students about vision/dental benefit changes is to increase cap (currently \$1000 for dental) and improve lasik coverage.*
    - Group is in agreement to look at increasing cap. *Will ask Brian about this option.*
    - SHIAC students reported hearing no complaints on dental and vision from current constituents.
- *Is there agreement is keep the dental and vision we have now?*
  - YES

- Survey deadline Wednesday at midnight 2/17 (*note: changed to Thursday, February 18 at noon*)
- Survey results are largely graduate students thus far. We need more undergrads to participate.
- Individual member ranking
  - D quite strongly. Fairest plan in terms of increases to grad/ug. Really important that voluntary plan members are not overly taxed.
  - D's pricing seems more rational. A and B seem similar. A seems better and have least disruption. Don't like As dependent/voluntary plan pricing.
  - Agree, Ds pricing seems more rational. A and B seem similar. Important that trans benefits should be included. If D can't get on Bay Area Psychiatric, must be excluded.
  - D. A and B.
  - D. A and B. D gives a price reduction for undergrads, which is the spirit of the discussions. For A, need to negotiate that Bay Area emergency group is on it. Ideally any of them need to have have it have Bay Area Emergency Group. Agreed if D can't get on Bay Area Psychiatric must be excluded. B is acceptable. Negotiate with any vision carriers to include UC School of Optometry.
  - B. E. for option 2.
  - B is similar to A, but includes two important providers in network that A doesn't have.
  - D. A and B are very similar. Are you going to try add more providers for A or negotiate price with B? E is a big worry because of unknown costs. Agree that voluntary rates are important. A has less disruptions.
  - D and A.
  - **Final group consensus:**
    - **Top D, A and B.**
    - **Take C and E out.**
- Group discussed networks differences between D, A, and B as well as carriers' involvement in defining/interpreting ACA for student health specifically. Confidential conversation about carrier specifics.
- *If A or B offered a more similar cost split to D would that be of interest?* SHIAC → yes. Other points of concern between carriers:
  - Trans benefits
  - Voluntary rate parity
  - Option 1 preferred but can be something between 1 and 2 in terms of cost-shift.
  - *Will ask Brian about these for next week*

- Looks like A would be more similar to D if we can do further negotiations
- *It would be great if next week if we could have a recommendation from SHIAC for one or top two carriers. Brian will attend next two meetings, by phone if he's available. UHS will invite him.*

#### ACTION ITEMS

- UHS will summarize open-ended comments with final survey results for next Friday.
- Bahar will follow up with Brian on member questions.