UC SHIP Meeting Minutes, 19 November 2024, 11-12 pm

Attendees- Jill Battikha, Dr. Oluwatosin Jegede, Dr. Stacie San Miguel, Xin Wei, Aimee Basom-Turpin, Dr. Ed Junkins, Kristin Lips, and David Du

Minutes adoption for last meeting's minutes: Kristin moved to adopt the minutes, and Dr. Jegede seconded it.

Discussions:

Renewal cost for 2025/26.

Dr. Jegede inquired about potential changes not only for the upcoming academic year but for subsequent years as well. The importance of balancing medical, ethical, and legal obligations while managing costs was emphasized.

- Suggestions were raised about *reducing offered benefits* to lower costs. However, it was noted that critical benefits, such as coverage for vaccines under the Affordable Care Act, should remain intact.
- Ms. Battikha highlighted the high quality of UCSD's current insurance plan, which is a 'Platinum-Plus' plan and among the best in California when compared to other schools that offer Silver Plus to Gold plans.
- Large claims associated with specific benefits (ER visits and specialty medications) were identified as key drivers of increased costs. Ms. Battikha mentioned that UCSD students benefit from local access to specialized care, which helps control additional travel-related costs.
- Dr. San Miguel highlighted that certain services at UCSD are offered to UC SHIP members at significantly reduced rates, such as urgent care at Student Health Services, which is free, and \$25 at UC San Diego Health. Emergency Room visits cost \$150, while telehealth consultations are available for \$46.
- A proposal to *reduce premiums for students* who did not use the plan in the previous year was discussed but deemed unsustainable. It was explained that the financial stability of the insurance plan relies on pooling contributions from all members to cover high claims.
- Introducing *tiered plans* with varying costs could result in adverse selection, where students opting for cheaper plans increase costs for those in more comprehensive plans, ultimately destabilizing the system.
- The distribution of large claims has been shifting between undergraduate and graduate students, making it challenging to determine which group utilizes the plan more extensively. Both groups show high utilization rates.

- Graduate students pay higher premiums than undergraduates for the same benefits, raising concerns about equity.
- There was a proposal to *separate insurance plans for undergraduate and graduate students,* with the suggestion that graduate students be moved to the UC employee insurance plan while undergraduates remain on UC SHIP. Additionally, it was recommended to determine the cost of premiums if graduate and undergraduate students were to have separate plans under UC SHIP. However, it was noted that graduate students not employed as TAs or GSRs cannot be classified as employees and are, therefore, ineligible for enrollment in employer insurance plans since they are not directly employed by the University of California. Also, employer plans operate on an annual basis, whereas student plans align with academic enrollment, which is often on a quarterly basis.

Presentation by David DU

David Du presented the findings from his Student Health Services Survey, which he conducted as part of his MS practicum. The survey aimed to explore the demographics and factors influencing UCSD students' decisions to use the Emergency Room (ER) instead of Student Health Services (SHS). The respondents were primarily graduate students and undergraduate seniors, with most being domestic students, although a notable proportion of international students were from India and China.

The majority of students reported preferring clinics or primary care visits when they were sick and had visited primary care providers in their home countries. Most students had not used the ER in the past 12 months. Among those who did, the primary reasons for going were injuries, medication refills, and mental health concerns.

The main factors influencing the decision to choose the ER over SHS were cost, time, and convenience. Students who had previously used urgent care or the ER expressed a preference for returning to those facilities rather than seeking care at SHS.

Regarding insurance coverage, the respondents were mainly enrolled in UC SHIP, Medi-Cal, or Kaiser, in decreasing order of prevalence. While 44% of students who visited the ER believed their issues could only have been resolved there, others felt that urgent care might have been an appropriate alternative.

Dr. Jegede noted that further discussion on the findings from David Du's survey would take place at the next meeting.

Next meeting: The next SHIP committee meeting is on the 3rd of December at 1 pm.