

University of Oregon  
HEALTH CENTER  
**Student Health Advisory Committee Meeting**  
November 9, 2007

<b>Appointed Members:</b>	<b>Alternates</b>	<b>Interested Students</b>	<b>ExOfficio Members:</b>
* Charron, Julie	L Chiu, Shih-Han	E Kehdi, Norma	E Davenport, Edel
* Davis, Kate	E Le, Mai	E Ronco, Noelle	E DeHaven-Murdoch, Daralyn
* Hok, Sreang "C"	* McKague, Dustin	L Soetan, Folake	E Leith, Ramah
* Kunerth, Alison	E Michan, Elizabeth	E Wintermute, Ben	E Megerssa, Becky
* Lent, Jonathan	* Smith, Leila	E Wu, Angela	* Pressman, Ernie
E Malasig, Cheryl	Yam, Sarah	<b>Faculty:</b>	* Ryan, Tom
* McCauley, Lauren		* Lynn, Holly	* Staight, Paula
E Smith, Kaylie		* Olson, Deborah	
* Wee, Brett		* Pangburn, Micheal	
		E Russell, Chantelle	

The meeting was called to order at 3:00 p.m.

1. **Approval of Minutes** – The minutes of the previous meeting were approved as distributed.
2. **Insurance 101** – Brian Corcoran provided the Insurance 101 update today on the student health insurance plan and to take it into the bigger more global picture. He puts together a handout to get students up to speed quickly on what is going on with insurance. The U.S. remains the only industrialized country that does not guarantee health coverage to all its citizens so one method for students is to get it is through their university plans. This is one of the richest countries in the world yet we are ranked among the bottom of industrialized countries on healthy life expectancy at age 60 meaning Americans spend more years lived in poor health resulting from chronic illness or disability.

Students are increasingly unable to access community health care resources without insurance. Financial debt, often related to medical expenses, is the most common reason for students dropping out of college. Uninsured students and their families have overwhelmed many community health facilities with unpaid medical debts. This is why students are having so much trouble accessing health care services in the community. Debbie Alley stated that the medical community thinks the university should make sure that students have health insurance since we are the reason they are here. Should there be universal health care for all students? This is a big debate right now and requires asking hard questions and finding the answers to them.

In looking at the benefit summary of what is being provided through the student health insurance plans, international students have better coverage and a lower rate. A fair amount of the reasons for that are the kinds of services they need and that the international plan is required where for domestic students are not required to be covered by insurance to attend school here. Universal coverage for domestic students would provide them better coverage and lower rates also—dollar-wise it does make a difference. International student claims for mental health are far less than domestic students. Conversely international students are spending much more on maternity benefits.

In general the student health plan rates have been going up at a lower pace than the community, however, there is a lower rate of enrollment by students. Why is the enrollment rate dropping? Debbie Alley stated that if you have been healthy you can get a private insurance plan for less than the student plan, maybe with a higher deductible. The student plan gets all the people who have been turned down by the private insurance plans. People are self selecting so we get people with ongoing medical conditions, serious and not so serious—those who are spending the most. On the other hand, there are just less international students coming to the U.S.

What this means is we are providing a very valuable service to a very small pool of students. Insurance companies only watch how much is being paid out versus how much they are taking in. If the loss ratio stays low it will be reflected in next year's rate. This year there were about half of the amount of large claims than there were last year. We got lucky but still need to take advantage when we can.

As mentioned earlier, a lot of work is being done around requiring that students have health insurance if they attend the university; Universal health insurance for all students in the OUS system.

Q: How is this going to be funded, by driving up student fees?

A: There is a lot of discussion on this part.

Q: Wouldn't the rates be cheaper if all of the 20,000 enrolled?

A: Yes, a larger pool does bring the insurance premium down. This is not only a university problem. This same debate is going on throughout the U.S. The government is looking at universal health care for everyone. The question is, do you pay for it through insurance premium or through taxes?

Brian used clips of the movie, Sicko to bring out the point of whether there should be universal health care. Health Care insurance companies are there to finance health care. Student health insurance does not ask the questions that private insurance companies ask. If you want the insurance you get the insurance if you pay the premium. A lot of insurance companies will not accept people just because of pre-existing conditions, but in Oregon there is a safety net pool for people who cannot get insurance from any insurance companies; however, this is funded by the State legislature and could end. Insurance is state regulated so every state can have its own regulations.

Payment on a claim is a loss to the insurance company, the more they pay the less money they make. When claims are less than the loss ratio set by the insurance company the premium increase should be less or even zero. Our goal is to try and keep to keep the two bars equal (total premium: total claims). We did what they expected and got the most benefit possible. A lower expected claims ratio should equal a lower increase.

We do not have a system where everything is covered. There are difficulties not only in getting insurance but once you do have it not everything is covered. If there is a claim that is not getting paid students have the advantage of having Debbie Alley here to help students get their claims paid. Brian is there to help make sure that the laws are followed.

What is really important is that there are different ways to do things and we need to participate in the conversations.

### 3. **Updates:**

a) **International Coffee Hour** – Kaylie Smith and Allison Kunerth will be putting together the SHAC sponsored ISA Coffee Hour. If you are interested in volunteering to serve on the subcommittee please email Kaylie, Allison, or Kim. If no one volunteers the whole group will be working on this.

### 2. **Upcoming Business:**

a) **Budget** – Tom Ryan

### 3. **Items Not on the Agenda:**

a) **Civil War Blood Drive** – Mobile units from both the Red Cross and Lane Memorial Blood bank will be at the EMU Tuesday through Friday from 10:00 a.m. to 4:00 p.m. The blood drive actually runs from November 1-17, 2007 and everybody who registers to donate blood at any blood drive in Oregon during this time period may cast a vote for their team. In addition, all donors will be entered into a drawing for two tickets to the Civil War Game in Eugene. The Beavers have dominated the contest for the past several years, and the Ducks are determined to change that trend.

Leila Smith stated that the blood drive is that it is now being organized by a club on campus. Also that they are going to be holding blood drives once a month for 3-4 months. It would be really exciting if we could start tabling with them.

4. **Adjournment** – The meeting was adjourned at 4:00 p.m.

Kim Barker, Recorder

**\*\*Next Meeting\*\***  
**November 16, 2007**

**Health Center Medical Library**