

DOCTORAL STUDENTS' COUNCIL



CITY UNIVERSITY OF NEW YORK

Graduate Center Students' Experiences with the NYSHIP Student Employment Health Plan:

A Short Report on the Doctoral Students' Council's 2009–2010 Student Health Insurance Survey

Background

In 2008, the Doctoral Students' Council, Graduate Center administration, and the Professional Staff Congress secured an important victory for Graduate Center doctoral students: affordable employer-based health benefits in parity with SUNY doctoral students. Prior to this agreement, the Graduate Center's student body of more than 4,000 members was forced to obtain benefits through a spouse, partner, or sometimes a parent, or to purchase out-of-pocket insurance, often through GHI at a discounted rate for graduate students; or, if eligible as a teaching adjunct, to obtain benefits through the PSC welfare fund many went without coverage.

Under the 2008 agreement, matriculated doctoral students employed in specific titles (Graduate Assistant A, B, or C; Adjunct Instructor; Adjunct Lecturer; Adjunct College Laboratory Technician (CLT); Non-Teaching Adjunct I or II) and earning at least \$4,122 per year or \$2,061 per semester became eligible to join the Student Employment Health Plan under the auspices of the New York State Health Insurance Plan (NYSHIP). CUNY would contribute 90% of the cost of individual coverage for doctoral students electing to participate in the plan (biweekly deductions of \$6.32 at present rates) and 75% of the additional cost of dependent coverage (for a total of biweekly deductions of \$47.36 at present rates).

During the initial period of fall 2008, over 700 students enrolled in NYSHIP. By Spring 2010, nearly 2,100 were enrolled in individual plans and more than 400 in family plans. Under the NYSHIP umbrella, these students and their families receive benefits through a combination of providers, with

- hospital benefits provided by Empire BlueCross BlueShield,
- medical and surgical benefits provided by UnitedHealthcare,
- managed mental health and substance abuse programs provided by OptumHealth Behavioral Solutions,
- dental care provided by GHI,
- vision care provided by EyeMed, and
- prescription drug coverage provided by UnitedHealthcare and Medco Health Solutions.

Over the initial enrollment and coverage periods, students, staff, and administrators navigated a complex array of issues, including

- communication gaps and lags between the Graduate Center's Office of Human Resources and the University Benefits Office;
- precedent-setting cases, such as re-enrollment when students move between different campuses and titles;
- confusion over deductions for summer coverage taken in advance from spring semester income, which are refunded in the fall if the student works in and has deductions taken from income over the summer; and
- complications with community college adjuncts needing to be transferred to state payroll, often delayed by the lack of timely appointment letters.

The DSC recognizes the NYSHIP Student Employment Health Plan as a hard won victory for the Graduate Center and its students. However, as students began using this health insurance plan they encountered a range of problems that left some in financially and medically precarious positions. This report is an effort to document and communicate these problems toward the goal of improving the protections afforded by the NYSHIP Student Employment Health Plan.

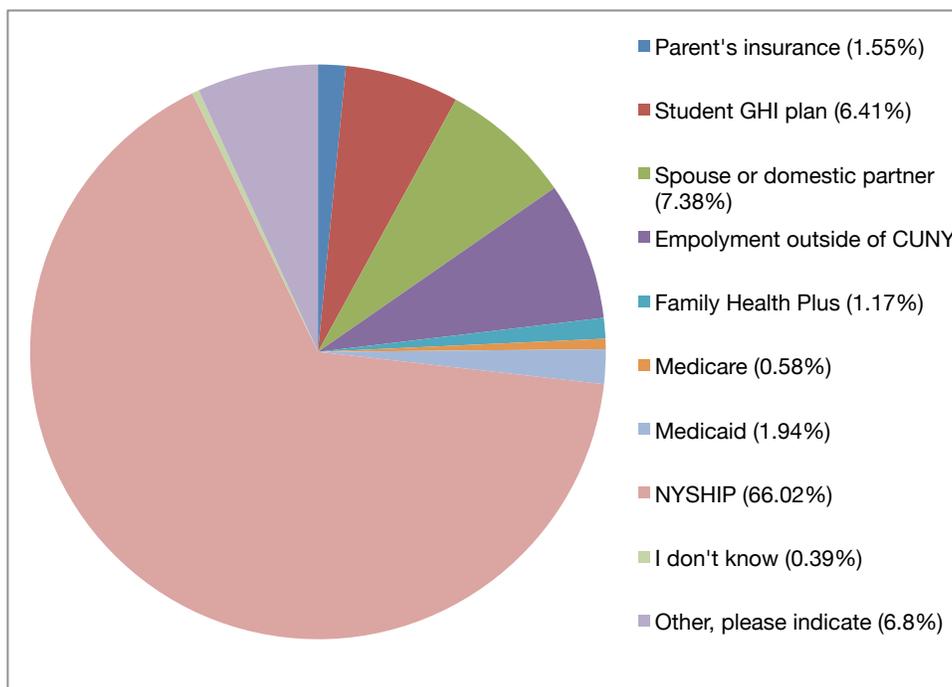
The DSC's 2009-2010 Student Health Insurance Survey

From November 2009–March 2010, the Doctoral Students' Council conducted a survey of all graduate students to determine the status of their coverage, the source of that coverage, and, in many cases, their experiences with NYSHIP. The survey was administered online using the DSC's eBallot software. Students were recruited to participate in the survey through an email sent to all students matriculated for the fall 2009 semester and subsequent emails through program and student listservs. What follows is a report on the findings from this survey with concluding recommendations for improving students' experiences with the NYSHIP Student Employment Health Plan.

Student Health Insurance Survey Respondents

Out of 4,765 matriculated students, 533 (11%) completed the survey. Of these respondents, 93% had health insurance. Figure 1 shows the distribution of sources of health insurance among those who reported having it.

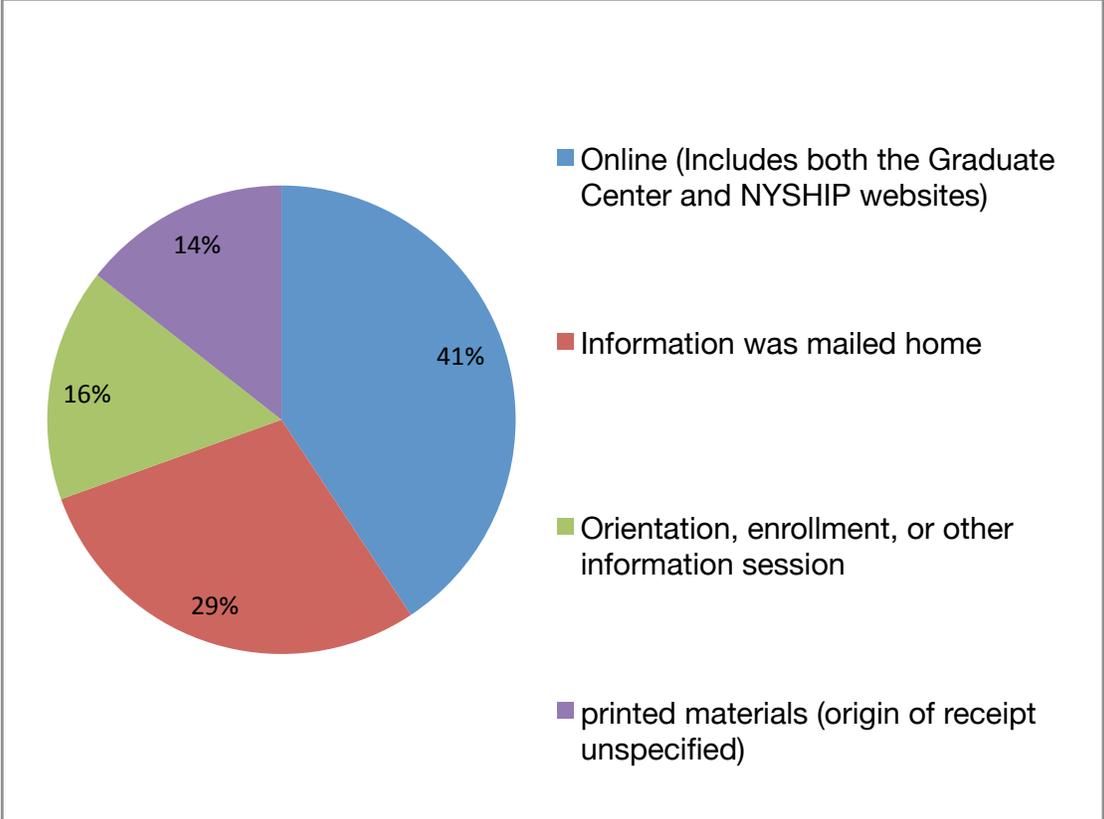
Figure 1. Sources of health insurance among survey respondents



Student Health Insurance Survey Responses

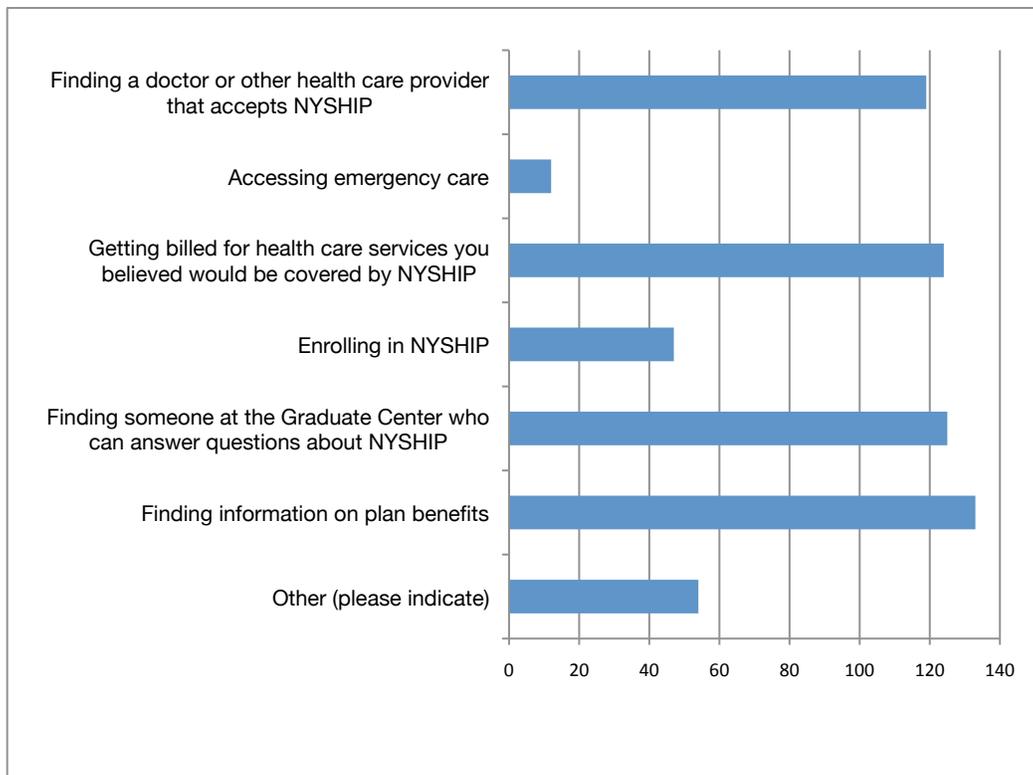
Accessing information about NYSHIP Student Employment Health Plan benefits is essential for students to understand what kinds of health care services their insurance affords them access to and what responsibilities they have to ensure they are protected from unexpected medical bills. The survey asked if student had read the description of plan benefits and where they accessed that information. Of students that have health insurance through the NYSHIP Student Employment Health Plan, 68% had read the description of plan benefits. Of those that read the description of health plan benefits, most students accessed this information online (41%), through a mailing received at home (29%), at an orientation or enrollment session (16%), or through a hard copy (14%).

Figure 2. How students accessed information about their health insurance benefits?



Toward the goal of making suggestions about how to improve the NYSHIP Student Employment Health Plan, the survey also gathered information about the types of difficulties that students encountered with this health insurance. Figure 3 provides more detail about the percentage of students experiencing certain types of difficulty with this health insurance.

Figure 3. Student responses to “Have you had any difficulty with the following?”



Students that responded “other” or chose to write in an open-ended response to this question reported a range of issues summarized below.

Insurance Cards

Students reported delays in receiving their insurance cards and some reported having not received their cards at the time of the survey. Students who received insurance cards reported difficulty using the cards with their health care providers and pharmacies because the cards do not include specific information about which insurance providers to bill for various types of care or medication. Also, students reported that their cards were unrecognizable to health care providers, even when they were in-network.

Prescription Drugs

Students reported that the prescription benefits provided through the NYSHIP Student Employment Health Plan are inadequate for people with chronic or life-threatening conditions because of the \$3,000 maximum annual drug benefit. For example, one student reported

reaching the limit in four months. In addition, the plan does not cover medications for basic conditions such as allergies, and students reported that there was no advance notice given when they were approaching the annual drug benefit limit and thus could not effectively consult with their physicians about the most cost effective drug treatments for their conditions before having to pay out-of-pocket for medication.

Preventive Care

A major limitation reported by students is that the NYSHIP Student Employment Health Plan does not cover annual physicals or preventive care such as testing for sexually transmitted infections (STIs). These services are some of the most important and necessary kinds of health care for (typically young) adult graduate students.

Billing

Difficulties with billing through NYSHIP Student Employment Health Plan were some of the most common complaints reported by survey participants. Numerous students reported receiving bills for treatment they believed would be covered by the insurance plan. These bills ranged from a few hundred to thousands of dollars. In many cases, the bills were incurred when students went to in-network physicians for treatment and then their laboratory tests were sent (without their knowledge or the knowledge of their physicians) to out-of-network labs, or where, during treatment from an in-network doctor, they also received some medical service from an out-of-network provider such as an anesthesiologist. Troubling inconsistencies emerged across student responses. For example, some students reported having to pay for treatment up front and out-of-pocket and later had difficulty getting reimbursed, while others reported having payments for medical services sent as checks addressed to them instead of to their physicians. In some cases, the billing errors were correctable through calling the insurance provider or after filing written appeals. In others, students had to pay the fees even after taking such measures.

Information, Access and Communication

Students found it difficult to access information about plan benefits and find in-network providers. For example, numerous people reported finding physicians through the plan directory only to find at the time of their appointment that these doctors were no longer considered in-network. Students also found it very difficult to locate dentists who would accept the plan.

Generally, students found the insurance plan benefits and the process of accessing information about them to be confusing. Some students were unsure of where to look for information or who to contact when they had a problem. They were confused about how to handle routine events such as continuing coverage from semester to semester. In some cases, they reported receiving inconsistent information from the health plan and the Graduate Center. (Readers should keep in mind that these data were collected before the NYSHIP Coordinator position was created in the Office of Student Affairs and communication and administrative services were centralized for the first time).

Recommendations

Based on the results of this brief but informative survey, the DSC recommends the following actions to ensure that the hard-won victory of providing health insurance for graduate student workers at The City University of New York can deliver the protections that students and administrators hoped for.

1. The DSC Health Issues Committee should conduct an annual Student Health Insurance Survey to monitor levels of health insurance coverage among the student body at large and track changes in the experiences that students have under the NYSHIP Student Employment Health Plan.
2. The Graduate Center's Student Health Services and Office of Student Affairs should collaborate to create a billing system within our on-site health care facility that would bill NYSHIP for medical services provided to students. This would generate income to support the expansion of our current health services. It would also provide a convenient place for students to access care paid for with their insurance without having to fear unexpected bills. The services provided on-site should be tailored to work within the limits of the NYSHIP Student Employment Health Plan while providing the best care possible.
3. The Office of Student Affairs should conduct educational outreach to students enrolling in NYSHIP Student Employment Health Plan and to prospective students so they understand the limitations of the plan have realistic expectations about this health insurance.
4. The Graduate Center administration should collaborate with the Research Foundation, the 501(c)(3) organization that manages the University's research investments, and other entities to place students paid through grant funding or other non-tax-levy monies on state payroll in NYSHIP-eligible titles meeting minimum earning requirements. This would have the additional benefit of extending to them protections granted under the New York State Public Officers Law for activities conducted in the course of their employment.
5. The Professional Staff Congress should include demands for improving the NYSHIP Student Employment Health Plan in the upcoming contract negotiations. Demands should be made for
 - an annual limit to total out-of-pocket medical expenses that is reasonable within the income range for typical graduate student workers
 - increasing the annual limit on prescription drug benefits
 - increasing payment standards for in-network physicians so that more doctors will participate in the plan
 - coverage for preventive services such as STI testing and for annual check-ups
 - streamlining and providing more consistency in billing procedures
 - and providing insurance cards that arrive in a timely manner and display all of the information health care providers find necessary to effectively bill for treatment.