



P.O. Box 2008, New Britain, Connecticut 06050
(203) 827-7700

RESOLUTION

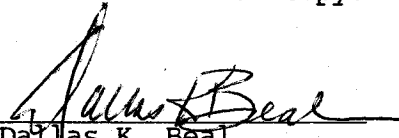
concerning

FEE FOR MANDATORY STUDENT SICKNESS INSURANCE

December 1, 1989

- WHEREAS, Section 10a-99 of the General Statutes provides that the Board of Trustees for the Connecticut State University, subject to the approval of the Board of Governors for Higher Education, shall fix fees for the purposes as the Board of Trustees deems necessary, and
- WHEREAS, The Board has approved a resolution to convert the optional sickness insurance program to a mandatory program with the right to waive coverage when alternate coverage can be identified on a waiver form, therefore, be it
- RESOLVED, That, if the Board of Governors for Higher Education concurs, the fee for mandatory sickness insurance coverage for all full-time students, shall be \$127.00 per year with a Fall semester payment of \$51.00 and a Spring semester payment of \$76.00, effective for the Fall semester 1990, and be it
- RESOLVED, That this fee may be waived if a full-time student provides a properly executed form which affirms that the student has adequate sickness insurance coverage from an insurance carrier licensed to operate in the United States with the identification of the carrier and the policy number of the alternative insurance signed by the student, parent or legal guardian, if the student is a minor.

A Certified True Copy:


Dallas K. Beal
President



Connecticut State University's
Student Accident and Health Insurance
1990 - 1991

On March 7, 1989, Academic Affairs brought together the Insurance Review Committee which consisted of the Health Service personnel from the four campuses; Dr. Myra Rosenstein - CCSU, Dr. Marjorie Shafto - WCSU, Dr. Oliver Winters - SCSU, Ms. Shirley Costello - SCSU. Additionally Dr. Robert Meschanic, Mr. Michael Terazakis, and Dr. Thomas Porter met regularly with this group. Meetings were held on a monthly or more basis.

The medical and counseling personnel immediately began to discuss the fact that there are fewer students with health insurance coverage. They also discussed the fact that students who have illnesses and are covered by their parents' insurance plans, often do not submit to medical services because they do not want their confidentiality breeched by the statement of claim by the insurance company. Further, the increase of suicides, eating disorders, and substance abuse in our society has impacted in a significant degree on our campuses. Unless a patient is insured the physician's and/or counselor's options for referral is frequently limited and often the option is unsatisfactory. All of this is further compounded by the cost of medical services and the discomfort of the area hospitals to absorb the enormous cost incurred by this age group at great expense to the residents of that city and/or the users of that hospital.

The medical and counseling personnel stated that their delivery of good medical practice and referral is great impacted when a student does not have the means (money or insurance) to pay for referred services. They further discussed the need for medical referral and psychological and psychiatric referrals and consultations.

Further, it should be noted of the limited counseling staffing on every campus and without exception the resources for psychiatric evaluations and consultations is limited, if any exists for students. Therefore, if a evaluation is required do to behavioral actions, if the student does not have the money or is not inclined to have the evaluation for any number of reasons, it is virtually impossible to insist unless the institution is willing and able to pay for the service. This is particular significant in situations where there appears to be a danger to the student or to other students. The ability to immediately refer without the hesitation or hindrance of funding consideration is more expeditious and beneficial to the patient and the rest of the campus community. In instances of suspected and/or confirmed substance abuse the medical and psychological referrals can be made with some assurance that the student will not only be treated medically, but that there will be some rehabilitative options for the student also. These factors alone, will enhance the general health of the campus population and the retention factor of Connecticut State University.

The group continued to meet and discuss the needs of each campus and eventually it was decided that the quality delivery of medical and

psychological services on the campuses would be only maintained, if there were some means of impressing the need of health insurance coverage for every student on each of the campuses. Dr. Myra Rosenstein wrote to over two hundred campuses and received over one hundred and forty accident and health insurance plans and policies in response. The group reviewed various plans and policies of like institutions and populations. This review and the ensuing discussions indicated that there was a need to consider mandatory health insurance with a "tight waiver" to insure that each student has some insurance plan or policy. This decision was unanimous and it was further decided to convey this decision to Dr. Porter for his response and action.

Dr. Porter wrote a memorandum to Ms. Bascetta regarding this recommendation by this Insurance Review Committee. The memorandum requested Ms. Bascetta to evaluate whether the implementation of this would be possible for 1990 to 1991. Ms. Bascetta response was positive realizing that this would greatly increase the demand on the campus Bursars and Cashiers. However, in as much as the "tight waiver" would not require any investigatory or research aspects it was viewed as possible. It was also decided that there would be some review and discussion of this aspects of the mandatory plan with members of the campus finance personnel. Later Mr. Frank Resnick, Mr. Thomas Lehman, Mr. James Blake from Finance and Messrs. Chuck Letizia and John A. Taylor were asked to attend a meeting for purposes of information and discussion of the handling of the mandatory aspect of the health insurance.

The Insurance Review Committee invited the Admission Directors of the four campuses to meet and discuss their view of the impact of the mandatory aspect on the cost and therefore their recruitment of students. The Directors agreed that this approach would have a significant impact on retention and therefore a positive effect on the enrollment. The Admissions Directors agreed with the rationale and approach of the Insurance Review Committee.

The Insurance Review Committee invited members of the Financial Aid area to address the recommendation of mandatory. Mr. John Taylor attended and explained that this recommendation would have an impact on the pool of funding now available. He also convey to the group that Dr. Stephen Mitchell had some concern about the effect of this increase in the cost of attending CSU would have on socio-economically middle-class students. The other concern of Dr. Mitchell's was that the work load created by the mandatory insurance would be excessive due to the effects of retirement on that area of staffing. The committee listened and reviewed the concerns raised by each of the discussants.

The information regarding the progress of this committee was presented to the Deans of Students and the Academic Vice Presidents during one of each groups' meeting. The Deans of Students were invited to attend the Insurance Review Committee meetings and the discussions of mandatory "tight waiver" costs and benefits.

Winston E. Thompson was invited to discuss the considerations and recommendations of the Insurance Review Committee with the members of the

Student Advisory Board on September 14th. The students attending this Advisory meeting represented all of the campuses except Eastern Connecticut State University. The mandatory aspect of the health insurance was discussed including the provision of the "tight waiver". The students requested that an estimate cost be extended to them for their consideration. The range of cost presented was One hundred and Fifty dollars to Three hundred dollars. The students stated that although they understood the increase would greatly effect some students, they also recognized the benefits for many more students by this plan. The students gave their approval to the mandatory with "tight waiver" and asked that they be advised of the cost when the committee made its recommendation.

The specifications for the bids were mailed to interested companies on September 14, 1989. The date announced for the closing of the bids was October 2, 1989. The specifications and benefits were stated as follows:

SUMMARY OF INCREASED BENEFITS REQUESTED for 1990-91

Plan III Sickness Medical Expenses Benefits

	<u>1989-90</u>	<u>1990-91</u>
Hospital Expense Daily Benefit	250.00	300.00
Basic Benefit	500.00	700.00
Surgical Expense Maximum Benefit	1,000.00	2,000.00
Payment Factor	10.00	20.00
Outpatient Expense Maximum Benefit	250.00	500.00
Maximum Mental or Nervous Disorder Benefit	2,500.00	3,000.00
Maximum Sickness Benefit	21,000.00	25,000.00"

Additionally these increases were proposed:

"1989-90 Mental Nervous Disorder (In-patient) Maximum Benefit	2,500.00
1990-91 Mental or Nervous Disorder (In-patient, out-patient, or partial hospitalization) (No-deductible, no copay)	3,000.00"

The specifications also requested "Because of uncertainty regarding the costs of the coverage, we request quotes for three alternate approaches to our student insurance program:

(1) A continuation of accident insurance benefits and coverage to be purchased by Trustees for all fulltime students as at present with the sickness insurance remaining optional but with benefits increased to adjust to inflation as indicated -----. There would be no coverage for out-patient mental health counseling.

(2) Accident insurance to be purchased by Trustees as at present. Sickness insurance to be mandatory for full-time students, with a tight waiver provision. Benefits increased to adjust to inflation as indicated in attachments. There would be no coverage for out-patient mental health counseling.

(3) Accident insurance to be purchased by Trustees as at present. Sickness insurance to be mandatory for full-time students, with tight waiver provision. Benefits increased to adjust to inflation as indicated in attachments. Coverage for out-patient mental health counseling would be included.

There were several Additional Specifications extended to the proposal. They were as follows:

1. Students will be admitted to the insurance plan at two periods in the calendar year: In September for the Fall and Spring Semesters and in January for the Spring Semester.
2. The insurance company will provide a claims report twice a year to Connecticut State University in January and June. This report will delineate the nature of the claims paid and a breakdown of premiums and claims paid for each institution.
3. Prescription services and coverage provided under the outpatient benefit for sickness should be clearly stated and the procedures delineated in detail. This coverage has been extended to policyholders under Out Patient Benefits.
4. It will be required that the company awarded this contract for the Student Insurance Program at Connecticut State University maintain an agency within Connecticut (near the University) with a toll free telephone number to process and forward student claims to the insurance company for payment. This agency must inform students of payments made to Health Service providers on their behalf.
5. The company shall prepare a brochure describing the insurance program and shall also provide an I.D. for each student covered indicating the name of the company, address, and a toll free number for policy verification purposes. The brochure shall be made available for distribution to all students no later than May 22, 1990.
6. The insurance company will provide the expense of all printing and shipping of brochures to each of the institutions of Connecticut State University.
7. Brochures shall be printed after the review and approval of Dr. Thomas Porter's office.
8. Brochures should include the following:
 - a. Insurance Date of availability
 - b. Insurance cost

- c. Insurance coverage for various conditions and situations.
- d. Duration of coverage
- e. Instructions for filing claims
- f. Contact person for information and toll free telephone number for claim processing, information,, and clarification.

9. The mental health coverage will include coverage for the services of Certified: Psychotherapists, Independent (Psychiatric) Social Workers (CISW).

10. This policy must provide coverage for pregnancy, childbirth, false pregnancy, miscarriage, and recovery there from in the same manner and under the same policies as any other temporary disability. This coverage was recently added to the previous optional insurance program used in 1988-89. It was added to meet the Civil Rights Restoration Act of 1987, Public Law No. 100-259,102 Stat. (1988). This bid must reflect the inclusion of this specification.

11. In the event of illness a full time student is entitled to receive medical care of the University Health Service. This sickness insurance policy provides benefits to help cover costs for care that cannot be provided by the University Health Service for treatment. During the academic year when classes are in session, authorization by the University Health Service is required for all services obtained outside the Health Center. Should a consultation in any area of medicine or surgical discipline be sought independently, full or partial coverage will not be guaranteed. In event of the need for immediate emergency medical attention or in the event that the Health Service offices are closed and prior authorization cannot be obtained, one needs to obtain authorization from the University Health Service within 72 hours after the accident or commencement of illness.

Note: The same approach will be used with Counseling Services as with the "gatekeeping" of the Health Services.

These specifications and statements of proposed benefits were forwarded to prospective suppliers.

The following companies responded to our proposal on or before October 2, 1989 as noted below:

Goodwin, Loomis & Britton, Inc.;

Cigna Special Benefits Division

Option I:

Sickness Benefits

Hospital Expense	Daily Benefit	\$	300
	Basic Benefit		700

Surgical Expense	Maximum Benefit	2,000
	Payment Factor	20
Outpatient Expense	Maximum Benefit	500
Maximum Sickness Benefit		25,000

All other Accident and Sickness benefits remain the same as 1989/1990 plan year.

Student Only:

Mandatory Accident	Annual Cost	\$ 51 Full Excess
Voluntary Sickness	Annual Cost	159 Primary
Voluntary Sickness	Annual Cost	143 Full Excess

Spouse and children coverage available at appropriate rates

Option II:

Same as Option I but with Tight Waiver Sickness

Mandatory Accident	Annual Cost	\$ 46.50 Full Excess
Tight Waiver Sickness	Annual Cost	111.00 Primary
Tight Waiver Sickness	Annual Cost	94.00 Full Excess
Mandatory Accident (with Tight Waiver Sickness Excess)	Annual Cost	45.00 Full Excess

Spouse and children coverage available at appropriate rates

Option III:

Same as Option II but with 100% on Outpatient Mental & Nervous up to \$3,000 Maximum Benefit

Declined to quote

Option IV:

Same as Option II but with Outpatient Mental & Nervous covered at 50% after a \$100 plan year deductible up to \$3,000 Maximum Benefit

Declined to quote

Option V:

Original; Same as Option II but with Outpatient Mental and Nervous covered at \$50 per visit, Maximum 20 visits per plan year.

Revised; Same as Option II but with Outpatient Mental and Nervous covered up to \$100 for first visit, \$75 for second visit and \$50 per visit for 18 additional visits to a maximum benefit per plan year of \$1075 per person.

Mandatory Accident	Annual Cost	\$ 46.50 Full Excess
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Tight Waiver Sickness Annual Cost (Original)	122.00	Primary
Tight Waiver Sickness Annual Cost (Revised)	127.00	Primary
Tight Waiver Sickness Annual Cost	103.00	Full Excess
Mandatory Accident Annual Cost (with Tight Waiver Sickness Excess)	45.00	Full Excess

Spouse and children coverage available at appropriate rates

Option VI:

Renewing with no changes in benefits from the 1989-1990 school year.

Student Only

Mandatory Accident Annual Cost	\$ 50.50	Full Excess
Voluntary Sickness Annual Cost	155.00	Primary
Voluntary Sickness Annual Cost	141.00	Full Excess

Spouse and children coverage available at appropriate rates

Fred S. James of New England, Inc.

Student Annual Premium

Option 1	\$ 381.
Option 2	305.
Option 3	330.

Second Semester rates are 66% of the full year cost.

Explanation:

Option 1 includes Optional enrollment with the benefit enhancements were listed in the bid specifications.

Option 2 is the Tight Waiver enrollment with the benefit enhancement listed in the bid specifications.

Option 3 is the Tight Waiver enrollment with the benefit enhancements listed in the bid specifications. The out-patient Mental & Nervous benefit contains a one visit deductible if the student is not referred by the University Counseling staff. There is a \$50 per visit and a \$500 overall maximum.

Parker & Parker Consultants, Inc.:

Option 1 ; A continuation of accident insurance benefits and coverage to

be purchased by Trustees for all full-time students as at present with the sickness insurance remaining optional but with benefits increased to adjust to inflation as indicated in attachments. There would be no coverage for out-patient mental health counseling.

Student Accident	\$ 52.00
Student Opt. Sickness	380.00

Option 2 ; Accident insurance to be purchased by Trustees as at present. Sickness insurance to be mandatory for full-time students, with tight waiver provision. Benefits increased to adjust to inflation as indicated in attachments. There would be no coverage for out-patient mental health counseling.

Student Accident	\$ 52.00
Student Opt. Sickness	266.00

Option 3 ; Accident insurance to be purchase by Trustees as at present. Sickness insurance to be mandatory for full-time students, with tight waiver provision. Benefits increased to adjust to inflation as indicated in attachments. Coverage for out-patient mental health counseling would be included.

Student Accident	\$ 52.00
Student Opt. Sickness	325.00

Alternate Quotes

1. Student Health Center Referral Required: - 4% premium decrease.
2. Pre-certification Required: - 4% premium decrease.

The Insurance Review Committee reviewed the various proposals and options within the proposals. The members attended a meeting where the representatives from these three companies presented highlights of their companies' proposals and availed themselves to the committee for information and clarification. The meeting was held at the BOT Board Room on October 19, 1989 and it began at 1pm. Each presenter was given twenty minutes to present their proposal, the remaining portion was available to committee members to ask questions regarding the proposed coverage. The members attending were: Jane Ferriss, WCSU representing Dr. Marjorie Shafto, Ms. Sheila Wachtel, ECSU, Dr. Myra Rosenstein, CCSU, Ms Shirley Costello, SCSU, Mr. Michael Terezakis, CCSU, Dr. Thomas A. Porter, CSU and Winston E. Thompson, CSU. Also attending was Mr. James Blake, CSU representing Ms. A. Bascetta, and Mr. John A. Taylor, CCSU. Dr. Oliver Winters could not attend, but he indicated his vote by phone. Mr. Del Kinney regretted that he was unable to attend this meeting.

The committee members voted after the three presenters had completed their explanations and clarifications. The six members of this committee unanimously recommended that the mandatory with tight waiver Option V Revised of Goodwin, Loomis, & Britton, Inc. be submitted to the next level for further review and consideration. The committee was extremely pleased that this option had been presented and the members were

