

UC SHIP Meeting Minutes 2/2/2024 1-2pm

Attendees: Dr. Oluwatosin Jegede, Norah Park, Jill Battikha, Dr. Gina Fleming, Dr. Stacie San Miguel, Tes Nebrida, David Du, Erika Yu, Evi Iswanti, Ed Junking, Samantha Bano, Vaishnavi Ventrapragada
Absences: Dr. Sarah Clavell Storer, Karin Omark

Discussion:

- Adoption of January 19, 2024 Meeting Agenda
- Highlights from the EOB held on January 23, 2024:
 - Eligibility for voluntary insurance was discussed.
 - Students who have graduated or are on Filing Fee status: voluntary enrollment is limited to 1 quarter or semester
 - Students who are on Planned Educational Leave (PELP) status: Voluntary enrollment is limited to two quarters or one semester
 - The student must have been enrolled in UC SHIP in the term immediately before the voluntary coverage period.
 - Students who withdraw or cancel their registration, or who have been dismissed are not eligible to enroll in voluntary coverage
 - Voluntary insurance may drive large claims (Voluntary enrollment was 0.27% of total membership but was responsible for 2.0% (\$7.3M) of UC SHIP's total claims expense last year).
 - From the Student Caucus Meeting, many students were worried about taking away voluntary coverage, and most campuses were against this proposal.
 - Tosin mentioned that it may be better to focus on finding ways to forestall problems arising from overutilization and mitigate negative balance in the coming years.
 - Dr. San Miguel mentioned that although deficits were presented by Alliant during EOB meetings, they were not recognized by members during the presentation. Another challenge encountered was in dealing with insurance companies for prompt claims submissions, as numerous claims were not paid until the end of the plan year. Lastly, regarding forecasting, premium adjustments, and plan modifications were finalized before claims submission in some instances, rendering premium forecasting less reliable.
 - There is a need to focus on data/analysis but also on Anthem to make sure that claims are submitted promptly.
 - The main drivers of high prices are pharmaceutical costs; however, this is more common at specialty clinics and ERs. If there's anything we can do to prevent unnecessary ER and specialty visits, that would be huge. Dr. San Miguel suggested having David educate international students about SHIP and going to SHS or CAPS over the ER to save money for both the plan and the students.
 - Program renewal for 2024/25 AY (Partial risk pooling method was used)
 - Pooled medical renewal (includes coverage for GLP-1 and excludes the cost for Lyra program) = 28.83% (20.1 - 36.0%). This is exclusive of any benefit changes.
 - **OPTIONS:**
 - Continue the Lyra pilot (include the cost of Lyra in the renewal) and discontinue coverage of GLP-1 weight loss meds for morbid obesity: **-0.44%**
 - Continue the Lyra pilot with an 8 visit/year limit (include the cost of Lyra in the renewal) and discontinue coverage of GLP-1 weight loss meds for morbid obesity: **-1.9%**
 - Discontinue coverage of GLP-1 weight loss meds for morbid obesity and discontinue Lyra pilot: **-3.21%**
 - Continue the Lyra pilot, include the cost of Lyra in the renewal and continue coverage of GLP-1 weight loss meds for morbid obesity: **+2.80%**
 - Data on Lyra from Dr. Park:
 - 801 student utilization to 6591 claims costing \$1.47M
 - Undergraduates: 483 students, 3608 claims, \$877k paid
 - Graduates: 319 students, 2728 claims, \$581k paid

- Medical Students: 11 students, 57 claims \$14k paid
 - Dr. San Miguel mentioned that students need to be more aware of available options. Lyra is helpful in areas where there isn't access to mental health services like UC Merced and Santa Cruz. It's also important to note that some of Lyra's mental health care providers may receive more money when students go to them directly compared to if they get a referral from CAPS.
 - Dr. Fleming said that SHS can bridge care for students. However, given the financial status of the current plan, it may be better to consider the options we have available.
 - GLP-1's are currently not FDA-approved so do we want to cover them at a time when we want to be careful with how to utilize SHIP funding? Based on utilization rates as well as costs, it seems like GLP-1 weight loss medications are not something essential to the plan.
 - Dr. Gina mentioned that we used to keep our UC SHIP plan very low and that UC SHIP, though somewhat forced upon the campuses, later became a good thing. Also, UCSD has always managed the plan very well.
 - Regarding GLP-1, the difference in percentages of adding it to the premium translates to a lot of money, students are therefore advised to keep the plan low.
 - How can we better disseminate information to guide students in responsibly utilizing their insurance benefits?
 - Emails, newsletters, etc.; however, many newsletters get buried, and the information is so small that most students just don't read the newsletters. Jill mentioned she would ask Karin about how to bring Healthcare Insurance information into the spotlight.
- Highlights from the Student Caucus meeting held on February 2, 2024:
 - CAPS vs. Lyra
 - Tosin mentioned that many other campuses have difficulties with CAPS especially relating to waiting times. Some ideas that were suggested at the Student Caucus Meeting are:
 - Cheaper alternatives to Lyra (other telehealth options)
 - Student governments might suggest that UC Regents provide funding for LYRA or enhance alternative resources such as CAPS.
 - Vaishnavi mentioned that other factors like the pandemic and higher wait times in CAPS could be a factor as to why Lyra was necessary last year. Therefore, it might be helpful to investigate turnover time and find providers that can accept patients sooner as well as compare CAPS with Lyra for the current year.
 - Dr. San Miguel liked this idea and stated that CAPS has grown, but our campus has also grown a lot; some medical students are using a different program as well, and we may use that to complement CAPS.
 - Risk pooling and mitigation – UCSD grad students receiving a large chunk of the money this year (36%) is due to partial pooling. UCSD grad students will not be eligible for partial pooling next year and premium changes will be close to the average increase. Tosin emphasized that we need to think about how to mitigate deficits in the SHIP plan in the future.
 - Building reserve over time - \$55M deficit added to renewal this year
 - One option is to have this reserve built over time.
 - Dr. Fleming mentioned that in 2012-13 there was a similar strategy of building a reserve bit by bit.
 - Dr. San Miguel also stated that from surpluses over time, we had built up large reserves. After the pandemic, people started utilizing their benefits which led to the current issue.
 - Grad students' overutilization makes it hard to predict utilization for the next year (which is what created the deficit). The premiums that were used to set this year's premiums were data from February and March before we knew that there was going to be a big gap. We need to look at the data from Alliant and see if the claims that are being submitted are more than what students paid for SHIP. This year (2023/24) we will also have a deficit. Jill mentioned we are running \$3M over per month.
 - Again, going back to premiums coming from incomplete data, we need to find a way to stabilize and decrease costs.
 - The more we can make people come to facilities the less the claims to the plan. Therefore, we need to encourage people to understand that students should go to the Student Health Center.
- Matters arising from the previous SHIP meeting held on January 19, 2024:
 - Update on the use of shuttle buses for urgent care visits – the shuttle does not take students to that area (not interested in changing routes), but the metro can. Tosin mentioned that previously, UC SHIP offered complimentary Uber transportation to students requiring assistance in commuting to health centers. This

service was financed from SHIP reserves. However, it was terminated due to the feedback received from students indicating that the contracted company frequently canceled ride confirmations, resulting in students incurring clinic appointment cancellation fees despite missing their clinic appointments.

- Update on the UC SHIP website: it is in the works!
- Updates on students with BMI > 35 with co-morbidities
 - We have 17 students with a BMI \geq 35. We will review the charts to see how many of these students have co-morbid conditions to qualify for GLP-1.

Initiatives/Future Steps:

- Look into more ways of spreading information about ER utilization.
- Gather more information at the February EOB meeting to finalize decisions on Lyra and GLP-1s.

All Other Updates:

The meeting was adjourned at 2 pm. The next EOB meeting will be held on Tuesday, February 1, 2024, from 11 am to 1 pm. The next UC SHIP meeting will be on Friday, March 1, 2024 from 1 to 2 pm.