

Agenda of the AMS Health & Dental (Date: Jan. 24, 2019)**Attendance:**

Present: Kuol (AMS VP Finance), John Ede (GSS President) Ahmed (Health and Dental Plan Coordinator), Keith (AMS Managing Director, Bahareh (StudentCare)

Regrets: Amy (AMS Councillor), Soheila(GSS Councillor), Brent (TRG), Natasha (TRG),

Guest(s): Chris Hakim, AMS VP Administration

Recording Secretary: Jon Tomalty

Call to Order:

The meeting was called to order at ...

Guest(s):**Call to Order:**

The meeting was called to order at 11:09am.

Motion to adopt the agenda

Moved: Marium

Seconded: John

The motion passes, the agenda is adopted

Agenda:

1. **General \Updates**
2. **Psychology Coverage**
3. **Survey**
4. **A.O.B.**

1. General Updates

Lack of applicants to the bursary, will need to wait until next meeting to get a final number. Only have one right now and we usually get ten.

Bahareh: I have a survey about the health and dental plan that we will be making a decision about whether or not to pursue.

Marium: No general updates. Has circulated the survey to the rest of execs

Keith: Looked into the psychology upgrade

John: Went with student care to montreal in November. Mental health and wellbeing is central to our priorities for the rest of the year.

2. Psychology Coverage

Keith: In october the committee meant to discuss increases in the additional \$3.12.....(get numbers)

Kuol: is that an increase per member?

Keith: yes

Bahareh: I know that TRG quoted in october, has the price changed since then

Keith: potentially but likely not by much

Chris: I would like to raise the psychology coverage by \$500. 300 will only cover a couple of sessions, which might not even be enough to diagnose, \$500 will be able to provide four visits which will allow patients to get a better idea of their own condition and form a plan for their own care. Online or phone counselling does not fill this gap. These services are suitable for crisis situations and

Marium: Do we have usage statistics?

Bahareh: Psychology coverage specifically has gone up by 20k over the past year.

Kuol: So it's roughly in the range of 200k, do we have statistics about the number of visits.

Bahareh: we can request that information from Pacific Blue Cross.

Kuol: What is the maximum that will be paid out by the program under our proposal if everyone used the full amount of their coverage.

Bahareh: It's hard to predict the amount of usage from students, and we know that when coverage is increased, students use it. 600 cases of empowerme usage this year

Kuol: Could you go over EmpowerMe?

Bahareh: Functions as a crisis line and also will route individuals to a masters in social work With 5 years experience

Kuol: Can EmpowerMe replace some psychology coverage?

Bahareh: No, this was never meant to replace psychology coverage, it can supplement that coverage.

Marium: The stats from EmpowerMe were very encouraging because the demographic of 24 years and beyond, it was on par with that of the demographic of below 24. It is also something that commuter students use as a resource. The impact of EmpowerMe will not be seen for a while.

Bahareh: Results indicate that the usage of this program has been far more successful than we expected it to be.

Kuol: Keith, I know the plan normally will give us back the remainder of the funds that weren't paid out to members, would it be possible to use these funds to fund a trial of this coverage? Is it possible to increase healthcare fees without a referendum?

Keith: Council can increase health and dental fees by up to 5% without referendum. We could use the reserve to fund this but it's not what that fund is intended for.

Bahareh: We need to maintain reserves at a certain level

Marium: Only pilots we should try out are very minor changes that wouldn't impact the student body if they were taken out.

Bahareh: One of the key cost triggers for the plan are heavily used services like dental, if you increase these services, you can be fairly confident that it will have an impact on the cost of the program. If we can start these conversations now, AMS and GSS councils will be more comfortable with a 5% increase.

John: Looking at the 5% increase in premiums, and seeing an increase in psychology coverage as well, this will be a large increase. We will need to start a conversation on the 5% in GSS council. I'll still need to model the increase from 300 to 500, despite the fact that it's only around three dollars.

Chris: If the issue is that it will be a three dollar increase to tuition that is already high, increasing the psychology coverage will be well worth the three dollars for grad students.

John: I agree that psychology coverage will benefit grad students, but we should look at other levers to raise funds for it other than fees.

Marium: Are there areas where we can cut coverage to pay for this coverage? Will EmpowerMe be funded by UBC, and what happens to our allocation when they do?

Bahareh: If you have areas that are underutilized, cutting them doesn't save money. EmpowerMe is not being collected and is being paid out of the reserve. It's hard to see

Kuol: Let's come up with alternatives to this. One option is the Empower me funding. Another option is the reserve.

Marium: With psychology coverage, we would need to make it part of the premiums eventually to fund it sustainably. We need to decide that we are asking for the 5% increase and that we will be also seeking another amount for the psychology coverage.

Keith: I have asked Brent whether or not

Bahareh: I will reach out to PBC to see some statistics on students who hit the cap along with other statistics.

Keith: Can we see usage between dependants and non-dependants?

Bahareh: Yes, it likely won't be super consequential as there are few dependants on the plan

John: The numbers on the usage among grad students

Bahareh: We are currently trying to change the way we do reporting to actually ask the question of whether or not the individual is a grad student.

3. Survey

Bahareh: We try to keep this short so that students will be willing to complete it. We are looking for feedback on the areas that are the most important to students for coverage.

Kuol: Is this the first time we've done this

Bahareh: we try to do this every two years, but the last time it has been done was either 2015 or 2016.

Keith: If we could get the results from the previous survey that would be great. In addition to this, you should use the AMS's language for the sex/gender question

John: Who does this go out to, why does everyone not get an opportunity to fill this out.

Bahareh: We need it to be a randomized sample.

Kuol: Can we do both?

Bahareh: I will look into best practices about this with my team.

Kuol: I would like all students who pay for the plan to have an opportunity to fill out the survey.

Bahareh: We also survey members who opt out, as we would like to get their feedback as well.

Marium: When we do the AES, we survey everyone but then scale back the results to match the UBC population later. A randomized sample is more statistically robust though.

Kuol: How is the sample collected? What groups are represented.

Bahareh: I'm not sure exactly what variables are looked at when selecting the sample, but sex is certainly one of them.

Marium: The first four questions can be used to randomize.

Kuol: when do you want this circulated

Bahareh: I would prefer it to be circulated in February, but if we need to wait until the next meeting of this committee that wo

BIRT that the Health and Dental Committee accept the survey questions as amended.

Moved: John

Seconded: Marium

The motion carried unanimously

4. A.O.B

John: what will happen if we don't raise the fees?

Keith: We will begin to need to pull from the reserve to fund the program. It will begin to cost us.

Kuol: when will we be able to know if the 5% will be able to cover the increases to the plan

Keith: I sent the email during this meeting, hopefully it will get back to us soon.

Next Meeting:

The next scheduled meeting is TBA.

Meeting Adjourn: 12:05pm

There being no further business the meeting was adjourned at_____.