

AMS/GSS Extended Health and Dental Plan Committee

Date: January 28, 2021

Time: 10:02 am - 11:24 am

Venue: Virtual meeting

Present:

Voting Members: Lucia Liang (Chair, AMS VP Finance), Kimani Karangu (GSS President), Nevena Rebic (GSS), Cole Evans (AMS President)

Non-voting Member: Ahmed Mtiraoui (Health Plan Coordinator)

Guests: Nicolas Romualdi (GSS VP University & Academic Affairs), Keith Hester (AMS Managing Director), Bahareh Jokar (Studentcare), Brent Delveaux (Hub International Insurance Brokers), Natasha Norbjerg (Hub International Insurance Brokers), Aleena Sharma (AMS Funds & Grants), Sheldon Goldfarb (AMS Clerk of Council)

Regrets: Kevin Kang (AMS)

Recording Secretary: Sheldon Goldfarb

1. Call to Order

The meeting was called to order at 10:02 am.

2. Agenda

The agenda was approved (Kimani, Nevena).

3. Legal Survey

Lucia:

- Lots of surveys in the AMS.
- Cole is concerned we're violating our own rules and suggested we run this one through social media.
- Maybe instead we can go back to the idea of a targeted survey, to avoid a mass email.
- So do we do a focused one now or hold off?

Nicolas:

- Can we think about it?

Bahareh:

- Studentcare can do a randomized survey from a smaller pool.

Nicolas:

- Think about the expectations.
- If we only do a small pool, others may say: Why didn't you ask me?

Bahareh:

- We need 300 for statistical relevance.
- Mostly a temperature check.

Nevena:

- Referendum for next year.

Lucia:

- Been talking about problems meeting quorum this year if we do an AMS fee referendum.
- Students worry about increasing fees.
- We're concerned about doing fee changes now.

Nicolas:

- The GSS has approved a fee referendum, but we can wait.
- A \$2 fee is different than a \$30 fee.
- If we get severe pushback, it will give us a sense of things.

4. Mental Health Coverage Increase

Lucia:

- Looking to increase to \$1,000 for this year.
- Covered by last year's refund.
- For the following year, wait till we get a usage report: before deciding to keep it at \$1,000 beyond this year.
- Can do \$750.
- Effective January?

Brent:

- Might as well do it for January: a full calendar year.

Lucia:

- Can we go back to September?

Brent:

- Complicated.
- It's not the policy year max; it's the calendar year max.

Nicolas:

- Don't maxes apply to the policy year?

Bahareh:

- Student plans are by policy year.

Nicolas:

- Have to do this for September 1.
- We can tell students to reapply.

Brent:

- I see calendar year, not policy year in the contract.

Bahareh:

- That's not how we understand the plan.

Nicolas:

- Looks like we are all in agreement on raising to \$1,000.

Bahareh:

- Note: \$1,000 will be consequential to long-run costs.
- Is the plan to go to \$1,000 this year, then drop to \$750 next year?

Nicolas:

- We can explain that it's because of the surplus.

Bahareh:

- Can you check with UBC Counselling on usage?

Nicolas:

- People are not on campus.

Bahareh:

- They're doing virtual sessions.

Cole:

- Haven't heard about it being exceptionally low.

Nicolas:

- Don't think this affects the policy.
- We're hearing from students who have capped out and need help.

Brent:

- No matter how well you communicate it, going down to \$750 will be seen as a loss, a change, a negative.
- People will only think you're taking something away; they won't remember you first raised it up.
- If \$750 is what you can afford long term, that's all I'd do, and then deal ad hoc with special cases.

Bahareh:

- Once other benefits start being used again, the cost will go up: you may need to increase the fee.

Nicolas:

- Unlike a traditional employer, we have a duty to do best for students.
- There's a big demand now.
- I'm ready to deal with the PR problems.

Brent:

- The pandemic may last into next year.
- If \$1,000 is right now, then figure out how to stick to \$1,000.
- If you move to \$1,000, stay there; make some decisions about how to keep it.
- If not, it will work against you.

Lucia:

- Do we have enough money in the reserve to absorb increases?

Keith:

- We do, depending on claims.
- I'm also thinking we'll get further credit.
- We do have room.

Lucia:

- \$1.7 million from last year, plus \$500,000.
- That gives us room.
- I'm comfortable setting it at \$1,000 and keeping it at \$1,000 next year.

Nevena:

- I'm supportive of increasing it to \$1,000 and keeping it at \$1,000.
- I'm very excited. This is amazing, transformative.

Nicolas:

- Do we have benchmarks?
- Comparisons to other schools?

Bahareh:

- There are very different models, but \$1,000 would put you ahead of everyone.

Nicolas:

- I'd love to pass this and make an announcement that we provide the most coverage in western Canada.

Brent:

- You can always say \$800 now and \$1,000 later.
- And let us check the policy year/calendar year issue.
- You want to make sure it's a long-lasting benefit.

Bahareh:

- Increasing to \$800 is still not dipping into the reserve.
- Even at \$1,000 still pretty close; dipping into it a bit.
- I'd recommend a little increase to the plan fee instead of none – and then you won't have to make a big jump later.
- By next meeting we can have projections of how much the plan will cost.

Nicolas:

- There's pressure from the student body; that's why I'm ready to go to \$1,000 and figure out how to continue it.
- I don't want to wait anymore.
- I acknowledge a little bit of risk.

Bahareh:

- One is a mid-year benefit adjustment.
- The other is a sustainable level.
- Only 183 students have hit the max this year.
- Not a huge number. Not that you shouldn't increase, but ...

Nicolas:

- There are people close to the cap who won't claim.

Brent:

- I just want to make sure the plan is sustainable.
- You do have that \$1.7 million, plus \$500,000, extra this year.

Bahareh:

- And there's the 5% increase that's allowed.

Nicolas:

- Three years ago we were at \$300.
- This is more than a threefold increase.
- We should really put that out there.

Kimani:

- Was thinking of going slowly, but if we have the money, I am comfortable to go ahead.
- Some people don't even go for counselling because they can't afford it or don't know there is coverage.
- It's like a Christmas gift.

Lucia:

- How long before we clarify the details, e.g., about policy versus calendar year?

Brent:

- I've sent a text to Pacific Blue Cross.
- Will get back to you.

Nicolas:

- Will rejected claims have to reapply?

Brent:

- Will check to see if PBC can automatically readjust.

Nicolas:

- And if the student didn't keep the receipt?

Bahareh:

- Studentcare can work with students on any document issues, but now everything is digital.

Lucia:

- When announcing? Who should do it?

Nicolas:

- Maybe Studentcare can do it.

Bahareh:

- Not a problem. Just need clarification.

Lucia:

- Once we receive all the documents, I can send out the motion for an email vote and then send information to Bahareh.

5. Subsidy Update

Lucia:

- Nothing much done since last time.

Nicolas:

- How many applications?

Ahmed:

- 1,830 to date.
- First time this big a number.
- Lots of First Years are overseas and have never come to Vancouver.
- Should we wait till they come?

Nicolas:

- Can we get UBC to give them a tuition credit?

Lucia:

- I can speak to Enrolment Services.
- For students in financial need, we urge them to opt out if they're out of the country.
- They missed the first deadline, but there's a second one in July, so it's okay.

Nicolas:

- We can't judge bursaries on the basis of whether they may opt out.

Ahmed:

- But we can advise them.

Nicolas:

- Enrolment Services can credit student accounts.

Ahmed:

- Why don't we let local students get the bursaries?
- International students can opt out anyway.
- That will leave more money for the subsidy.

Kimani:

- The end goal is for those who qualify to get the money.
- Let's see how we can sort this out.

Nicolas:

- If we tell international students to opt out, they may not act on the message.
- We still have to assess them if they continue with a bursary application.
- Can we offer the opt-out now instead of in July?

Bahareh:

- If they're an international student, they can opt out in July.
- It's not possible now. They have to do it in July.

Kimani:

- We were not effective in communicating with them originally.
- I know there is a concern about the number of emails, but we need to get correct and clear information sent out.

Lucia:

- Already planning another email to remind them about the opt-out.

Nicolas:

- I said to not do what we did; don't do this.
- There's been confusion about the bursary/subsidy.
- If the choice is give up the plan or get it for free, obviously they're going to choose to get it for free.
- No wonder we're getting so many subsidy applications.
- If we receive applications, we have to process them.
- We can't reject them on the assumption they're going to opt out.

Ahmed:

- Lots of confusion among students.

Nicolas:

- No one's going to withdraw from the bursary process.
- There's no benefit in that for them.
- There's no way I'm okay with arbitrarily removing people from the bursary process.

Ahmed:

- Don't you think it's best to have local students take advantage of the subsidy?

Nicolas:

- Of course.
- But the way we operationalized this ...
- We can ask people to shift to opt-out, but we shouldn't remove them.

Nevena:

- And do we know they're out of the country?

Ahmed:

- We received emails from some.

Nicolas:

- How many?

Ahmed:

- 50-60.

Lucia:

- We can review this.
- Should we ask Enrolment Services to credit their accounts?

Nicolas:

- Yes.
- Let's tell them we have a problem reimbursing and ask if we can give them the money and apply it to students' tuition.

6. Mental Health Coverage Increase Part II

Brent:

- Just received a text from Pacific Blue Cross.
- It is the benefit year, September-August.
- What Bahareh said.
- We'll have something quick.

MOVED COLE, SECONDED NEVENA:

"That the committee approve a mental health benefit increase from \$500 to \$1,000."

... Carried

Brent:

- Still need to check with PBC about readjusting claims.
- Hope to hear today.
- Need to tell students.

Bahareh:

- Will take us till mid next week.

Brent:

- Could just briefly announce good news.

Lucia:

- Over social media.

Nicolas:

- Should make sure we get the information complete.

Bahareh:

- Our call centre won't know about the increase yet if you announce right away.

7. Legal Survey Part II

Bahareh:

- Whenever it's finalized, can you send it my way?

Nicolas:

- Can do that easily.

Bahareh:

- Who will do it?

Nicolas:

- The AMS has to decide. It's an AMS survey.

Bahareh:

- Helpful to present at Executive Committee.

Sheldon:

- It has to go to Council.

Cole:

- The Executive will have to discuss this.
- We have a lot of surveys going on.

The meeting adjourned at 11:24 am.

AMS/GSS Extended Health and Dental Plan Committee

Date: February 25, 2021

Time: 10:02 am - 11:06 am

Venue: Virtual meeting

Present:

Voting Members: Lucia Liang (Chair, AMS VP Finance), Kimani Karangu (GSS President), Nevena Rebic (GSS), Cole Evans (AMS President)

Non-voting Member: Ahmed Mtiraoui (Health Plan Coordinator)

Guests: Nicolas Romualdi (GSS VP University & Academic Affairs), Keith Hester (AMS Managing Director), Vivian Tan (GSS General Manager), Bahareh Jokar (Studentcare), Brent Delveaux (Hub International Insurance Brokers), Natasha Norbjerg (Hub International Insurance Brokers), Aleena Sharma (AMS Funds & Grants), Sheldon Goldfarb (AMS Clerk of Council)

Regrets: Kevin Kang (AMS)

Recording Secretary: Sheldon Goldfarb

1. Call to Order

The meeting was called to order at 10:02 am.

2. Agenda

The agenda was approved (Kimani, Cole).

3. Psychology Expansion

Lucia:

- There have been delays, technical difficulties.
- By March 1?

Brent:

- Going to check.

4. Bursary Applications

Ahmed:

- 1,960 applications.
- Same threshold as before, but many more applicants this year.
- Very few Term 2 students.
- Up to the committee to decide where the cutoff point should be.
- Need to start from how much money we have to distribute.
- Every year we have \$50,000.
- Do we want to use more from the reserve fund?
- Is COVID year an exception?

- But we have to think of the years ahead.

Lucia:

- \$50,000 not enough if we full on advertise the bursary.
- There's more advertising now.
- People are starting to know.
- More applications than ever.
- A good thing.

Nicolas:

- The time has come to think about full and partial subsidies.
- As this becomes better known, applications are likely to increase.
- I know there are more students in need.

Lucia:

- First term gave out \$118,000.
- Could transfer surplus money towards this.
- There's a \$189,000 balance in the fund.

Keith:

- The money's there to give to students.

Nicolas:

- Have to balance money coming in and going out.

Keith:

- Yes, no CPI increase this year, and psychology benefits are going to affect things.
- Have to make sure not to give away too much.

Nicolas:

- So there's already \$60,000 in deficit for Term 1..

Lucia:

- I wouldn't call it a deficit.

Nicolas:

- I think we can give \$50,000 now; \$60,000 at most.
- With the understanding that next year we'll administer more conservatively.

Lucia:

- Lots of thought about this bursary in the past.
- Advertising.
- So this is not unexpected.
- I think \$60,000 max.

Nicolas:

- It's been a job well done, getting more people applying.
- Now the question is how to distribute the money.
- Some are \$13,000 in the red; some are only \$2,000 in the red: they shouldn't get the same amount.

Lucia:

- Threshold of full versus partial.
- Every \$5,000 a change in increment.
- That's how the U-Pass subsidy is administered.

Nicolas:

- Right now we need to be more conservative than we would like.
- Not in an ideal situation.

Ahmed:

- Definitely will be seeing a large number of applications.
- More people know.

Nicolas:

- Is there more from the transit subsidy?

Lucia:

- Yes, we allocated \$70,000 but only used \$60,000, so we have \$10,000 left.
- Can we use that \$10,000?
- One worry: why is UBC funding an AMS service?
- But U-Pass is a joint program with UBC.

Nicolas:

- We should give aid to people who are in the red, not in the black.

Lucia:

- Different amounts for those living with their parents and those not living with their parents.

Nicolas:

- If you're in the red, you're in the red, regardless of whether you're living with your parents or away from them.
- If the need is less, give only 50%.

Keith:

- Makes sense.

Ahmed:

- Used to be different cutoffs for with and without parents.

Nicolas:

- We used to give to people who were in the black; now we're only going to give to those in the red.

[Nicolas did calculations. The conclusion was that those with a need of up to \$3,000 would get a 50% bursary; those with more would get a full bursary; those with no need would get no money.]

MOVED NEVENA, SECONDED KIMANI:

"That the committee agree to allocate \$62,000 for the Term 2 Health and Dental Bursary."

... Carried

5. Permanent Opt-Out

Bahareh:

- Spoke of this before to the Executive Committees and AMS Council.
- We proposed moving forward that there be no more permanent opt-outs.
- Permanent opt-outs made sense when it was difficult to opt out, so we provided a way to opt out one time permanently.

- But now we are encountering quite a few cases of students coming back and having to pay a penalty to re-enroll.
- We recommend we move ahead with only annual opt-outs.
- We will grandfather those who have already opted out permanently.

Aleena:

- Maybe the first year or so, have a soft deadline on opt-outs.
- Many students miss the deadline.

Bahareh:

- Two issues here:
- Opt-out deadlines have been the same for both annual and permanent.
- We've been flexible this year, but don't want to confuse the two issues.
- New students won't know about permanent opt-outs.
- Those already doing annual opt-outs will know about deadlines.
- The criteria are not changing. The deadline is not changing.
- Just we're asking all students to do this annually now.
- We're avoiding all the administrative headaches if a permanent opt-out's situation changes and then wants to opt back in.

Nicolas:

- No need for a campaign to say the permanent opt-out is no longer available.
- It's only relevant to those who did opt out permanently in the past.
- If they inquire, tell them they're grandfathered.

Bahareh:

- It's the responsibility of students to read emails and meet deadlines.
- Reluctant to allow beyond the deadline when others meet the deadlines.
- And there are underwriting implications.

Nevena:

- Don't see the need to do any additional advertising.
- Maybe just emphasize that you will have to opt out every year.

Nicolas:

- I agree that it's students' responsibility.
- But it's our responsibility to inform the students.
- Let's be sympathetic because of the tsunami of information.

Bahareh:

- But some students open emails and take no action.
- We need to be consistent with this policy.

Nicolas:

- How many are permanently opted out?

Bahareh:

- We don't get constant updates, but from other institutions, it's mostly annual.

Nicolas:

- A minor concern: If the number of opt-outs increases, will that put a burden on administration?
- If there are 5,000 more opt-outs a year?

Bahareh:

- Not an issue. It's an automated process.

Nicolas:

- We do need to let the University know so they can give correct information to the students.

Bahareh:

- The University administrators just refer to the website.
- But I'm happy to reach out and tell them there are no more permanent opt-outs.

MOVED NEVENA, SECONDED COLE:

"That the permanent opt-out no longer be in place effective September 1, 2021."

... Carried

6. Special May Opt-in

Bahareh:

- Some students in one program want early access to the Health and Dental Plan.
- Through a self-enrollment process.
- We wanted to re-evaluate.
- Would we need a referendum?
- Asking about other programs.
- They get four months of coverage at a pro-rated fee.
- What we did last year made sense.
- We want the committee to give permission for every year.

Nicolas:

- It worked fine.
- Don't want to mess with things that work fine.

Lucia:

- Did any groups email late and miss the deadline?

Bahareh:

- Even if a little late, can be made retroactive.
- The department will contact us.
- We had one instance of that, and we have a procedure in place.

Nicolas:

- If other students start in May, we can just facilitate them to self-enroll.
- But I don't think there's any other category.
- If UBC starts a big program in May ...

Lucia:

- One program starts in June: how does that work?

Bahareh:

- They'd be billed in September.

Lucia:

- Nothing June-September.

Bahareh:

- Not unless there's an overwhelming demand.
- We should just let it lie.

MOVED KIMANI, SECONDED NEVENA:

“That the committee approve the special May intake period for self-enrollment.”

... Carried

7. Psychology Expansion II

Brent:

- Checked with PBC.
- Won't be till March 8.

Bahareh:

- Call centre agents are prepped.
- Waiting to send out the email.

Lucia:

- When can we tell students? March 8?

Brent:

- At earliest mid to late next week.
- The new claims system will be ready March 8.
- PBC has a backlog.
- There needs to be a penalty: they're already late.
- Want something in writing from them.

Lucia:

- Will it be pushed back again?
- What has Studentcare communicated?

Bahareh:

- We will post the protocol for submitting retroactive claims on the website.
- Not looking at a lot of students who've hit the \$500 cap.
- We'll probably get new claims once students hear it's been expanded.

The meeting adjourned at 11:06 am.

AMS/GSS Extended Health and Dental Plan Committee

Date March 25, 2021

Time: 10:07 am - 11:10 am

Venue: Virtual meeting

Present:

Voting Members: Lucia Liang (Chair, AMS VP Finance), Kimani Karangu (GSS President), Nevena Rebic (GSS), Nicolas Romualdi (GSS VP University & Academic Affairs, proxying for AMS President Cole Evans)

Non-voting Member: Ahmed Mtiraoui (Health Plan Coordinator)

Guests: Keith Hester (AMS Managing Director), Vivian Tan (GSS General Manager), Lev Bukhman (Studentcare), Bahareh Jokar (Studentcare), Brent Delveaux (Hub International Insurance Brokers), Natasha Norbjerg (Hub International Insurance Brokers), Sheldon Goldfarb (AMS Clerk of Council)

Regrets: Kevin Kang (AMS), Cole Evans (AMS President)

Recording Secretary: Sheldon Goldfarb

1. Call to Order

The meeting was called to order at 10:07 am.

2. Agenda

The agenda was approved (Kimani, Nicolas).

3. Minutes

MOVED NICOLAS, SECONDED KIMANI:
"That the past minutes be approved."

Lucia:

- I just sent out the minutes for the past year, but people may not have had a chance to read them yet.
- We can postpone.

MOVED NICOLAS, SECONDED KIMANI:
"That the past minutes be approved."

... Postponed

4. Pacific Blue Cross update

Lucia:

- PBC proposed a 4.3% premium increase.
- Brent and Natasha have negotiated that down.
- The money from the subsidy is still there.
- The money owed to the Plan is still there.
- A good buffer; we're in a good spot.

Brent:

- Been able to reduce the increase to 1.98%.
- Dental is driving this.
- PBC is concerned about mental health claims.
- But we have a verbal commitment now to, basically, 2%.
- There's the agreement to refund international students who don't come:
 - We assume that's a small percentage.
 - It could impact the final number.

Lev:

- Should point out that there is another reserve fund: the claims fluctuation reserve held by PBC.
- So there's:
 - Internal reserve
 - PBC reserve
 - Student fees.
- And then there's the claims being paid out.
- In normal times there's a reasonably controlled process in which the premium is just pre-payment to the insurance company.
- The question is how much do you want to pre-pay versus later?
- Then how do you fit this in to the political context of fees?
- Reserve funds are there for a purpose; it's legitimate to ask if any fee increase will be required.

Brent:

- The PBC reserve is \$1.524 million, fully funded, 15% of the premium.
- It's a rainy day fund if something extraordinary happens.
- If we had a \$2 million deficit and left PBC, they'd eat the \$500,000 – but that wouldn't be a great partnership action.
- In a perfect world you want to break even.
- In the pandemic this is a good arrangement: you're guaranteed never to overpay.
- The only issue is the mental health increase.
 - If claims are higher than projected, it could impact the financial position.
- It would really need something extraordinary to happen to deplete the reserves.

Lucia:

- 2% is really good; that's a big difference.

Brent:

- It's all meant to balance out, break even.
- If claims go higher, they dip into the reserve.
- If lower, you get your money back.
- It's an excellent situation.

Nicolas:

- If the amount we collect is \$10.8 million and the expenses are \$11.7 million, then there's a shortfall of \$800,000.
- Then there's the PBC reserve of \$1.5 million and the internal reserve of \$2.6 million.
- I'd project a couple of years forward.

- I don't want to put the plan in a position where the annual 5% increase next year is not enough to cover the shortfall.

Lucia:

- 5% should be enough.

Brent:

- I'm super-conservative.
- I'd have some sort of increase this year.
- Although I feel comfortable with the analysis, how mental health claims will affect things raises questions.
- We should have a buffer for that.
- I'd probably go as close to a full increase as you can do.

Lev:

- Between the reserve funds, there's \$4.1 million.
- That's 35% of the total premium, which is getting up there.
- Students may ask why these reserve funds exist: are they necessary?

Brent:

- Could be a wide range of outcomes from mental health benefits.
- I'm more concerned about a COVID rebound of claims.

Nicolas:

- If we increase the fee, we should increase it as much as we need.
- Either we don't increase or we increase enough to keep self-sufficient.

Lucia:

- If we under-collect, we have the reserve.
- But I'd like to see how many more claims we're going to get.
- We doubled the mental health claims before.

Lev:

- It's a political decision.
- The COVID impact on the health side is that claims are down and they haven't bounced back.
 - Difficult to predict this year, but nothing much has changed, so I expect a bounceback.
- On the dental side there was a big drop then; now a big bounce up.
- Refund accounting has worked well for you in this COVID year.
- Financially from my perspective, it's okay either way: increase or not.
- The mechanism (refund accounting) is working exactly as it's supposed to work.
- It's okay if the reserves draw down to pay for increased claims.
- That's how you got a surplus this past year.

Keith:

- The auditors are criticizing the situation, saying the reserves are increasing too much.

Nicolas:

- I'm okay with not increasing the fee.

Brent:

- Still some uncertainty.
- Would there ever be consideration of spending from the reserve but also increasing the fee?

Nicolas:

- There's no sense in building a rainy day fund, and then if it rains, you don't use it.
- We have a reserve with money in it equal to 35-40% of the plan.
- It's highly unlikely that we'll get that big an increase.
- We were over-collecting even before COVID.
- Next year we can make a more informed decision.

Bahareh:

- The reserve may be used for the next two or three years.

Lev:

- When the committee makes a decision to draw down the reserve, it should document it.
- People may see it as a negative thing rather than as the mechanism working as it's intended to work.
- That can be forgotten, so we need a record of this.

Brent:

- From a political standpoint, you could increase the fee to cover benefits, but have the AMS cover it from the reserve.

Nicolas:

- If there's an increase, no messaging will work: it's just an increase.

Bahareh:

- The COVID experience has been extraordinary.
- We assume a return to normal eventually.
- We anticipate psychological benefits to have an impact: the reserve can help offset that.
- If we increase the cost of the plan, we could look at enhancing coverage/benefits.
- A healthy reserve could be used to adjust.
- If there's no increase this year, then next year there will have to be one.

Nicolas:

- Not going to even consider increasing benefits until things have settled down.
- I still think it makes no sense to go halfway.
- Use the reserve: there's no way to bankrupt the reserve.
- Want to look at what will happen in the next few years.
- A 5% increase would cover a 2% and a 2.5% premium increase.

Brent:

- This year's going to be an interesting year.
- And hearing from Keith about what the auditors said, maybe we do have to spend from the reserve.
- The plan's run really well: we don't need to overthink.
- If you decide no increase for one year, you'll be fine.

Nicolas:

- Worst case is a 1% deficit.

Bahareh:

- Looking at numbers for the future, with a 5% annual increase in the premium, we would have a deficit of \$10.78 million.

Nicolas:

- If the premium increases by 5%, we never catch up.

Brent:

- But except for one year we've never seen a 5% increase in the premium.
- We haven't seen 5% inflation.
- Of course, that doesn't guarantee the future, especially with the new mental health benefits.

Bahareh:

- With a 4% annual premium increase, the deficit becomes \$353,562.

Nicolas:

- We could close the gap in three years.

Bahareh:

- Future committees will have to recognize they have to increase the fee.
- It's a healthy reserve: \$4.1 million.

Brent:

- There was a surplus last year, plus \$500,000 was given back.
- You're using last year's surplus to subsidize the rate this year.
- In insurance you're always looking at risk.
- I think the no-change is the right decision politically.

Kimani:

- I'm torn.
- We can utilize the money we have to fill the gap.
- We need to document what we're doing.
- I do not want to see an increment this year.

Nevena:

- I'm more for giving back to students.
- Having gone through what we've gone through, it's a safe action not to increase.
- We won't be over-collecting.

Nicolas:

- If we have a reserve, it's to use it.

MOVED LUCIA, SECONDED KIMANI:

"That the Health and Dental Committee recommends that there be no fee increase for 2021-22."

Lev:

- This will be the first time in 20 years without an increase.

Nicolas:

- I'm confident we've thought this through.
- We're not being irresponsible.

Brent:

- You're doing what you wanted to do last year.

Bahareh:

- We couldn't logistically refund students from the surplus, so this is another way of doing that: using the surplus to avoid a fee increase.

MOVED LUCIA, SECONDED KIMANI:

“That the Health and Dental Committee recommends that there be no fee increase for 2021-22.”

... Carried

The meeting adjourned at 11:10 am.

AMS/GSS Extended Health and Dental Plan Committee

Date April 15, 2021

Time: 10:05 am - 11:28 am

Venue: Virtual meeting

Present:

Voting Members: Lucia Liang (Chair, AMS VP Finance), Kimani Karangu (GSS President), Nevena Rebic (GSS), Cole Evans (AMS President)

Non-voting Member: Ahmed Mtiraoui (Health Plan Coordinator)

Guests: Alex Thomas (AMS Indigenous Engagement Facilitator), Tara Drage (UBC Enrolment Services), Corey Wesley (UBC Enrolment Services), Nicolas Romualdi (GSS VP University & Academic Affairs), Keith Hester (AMS Managing Director), Vivian Tan (GSS General Manager), Bahareh Jokar (Studentcare), Natasha Norbjerg (Hub International Insurance Brokers), Aleena Sharma (AMS Funds & Grants), Sheldon Goldfarb (AMS Clerk of Council)

Regrets: Kevin Kang (AMS)

Recording Secretary: Sheldon Goldfarb

1. Call to Order

The meeting was called to order at 10:05 am.

2. Agenda

The agenda was approved (Nevena, Kimani).

3. Minutes

The minutes were tabled to the end of the meeting.

4. Opt-out for Indigenous Students

Lucia:

- Cole and I have talked to Tara and Alex about the opt-out period for Indigenous students.
- The process now has issues.
- Indigenous students are being put on financial hold because of missing deadlines.

Tara:

- Indigenous students have extended medical coverage through the First Nations Health Authority (FNHA).
- They are also covered by Pharmacare.
- Indigenous students have to opt out of the AMS/GSS Health & Dental Plan by September 30 by uploading a copy of their status card.
- Some say they can't; others forget.
- September 30 is a quick turnaround, and if they miss the deadline, they are required to pay for coverage they don't need (the AMS/GSS plan).

- Some self-identify as Indigenous but don't have a status card – they then require AMS health and dental coverage.
- Some may want the AMS coverage in addition to FNHA coverage.
- But among those who don't, some miss the opt-out deadline and don't realize they will then have a large sum to pay (\$270).
- Many have never had to deal with premiums.

Corey:

- Indigenous students don't even get an insurance card.
- They have no visual evidence of being part of a plan.
- Things just magically happen; there's no indication of how the structure works; it just occurs.
- Different from non-Indigenous students.
- Indigenous students don't engage with MSP (the BC Medical Services Plan).
- Nobody in an Indigenous family knows either.

Alex:

- A lot of First Nations students don't know what they're covered for.
- For instance, wisdom tooth removal is not fully covered by the FNHA; it might be useful in that case to also have the AMS coverage.
- Sharing information with students would help.

Nicolas:

- Thanks for bringing this up and explaining the problem.
- One issue is how the system is set up: would a possible solution be extension of the opt-out period?
- It sounds like Indigenous students have never had to engage with the health care system, so they won't know how the parts of the system work with each other.
- When an Indigenous student registers, is there a more pro-active way to let them know what they need? Through workshops, emails?

Tara:

- On the AMS side, how can you make it easier for students?
- And better communications.
- I'm going to be working with the UBC Health Office.
- Maybe there could be a Canvas course on health care coverage.
- We need to be collaborative with AMS/GSS and Studentcare.
- This is a big issue.
- It's important that students understand; we have to try to get out ahead of it.

Nicolas:

- I'm almost ashamed we didn't think of this ourselves.
- How much value is being added for Indigenous students?
- Should we look at how our coverage could be more complementary?
- Missing the email to opt out is a problem across the board.
- But you were saying people were unable to opt out?

Tara:

- Well, that's anecdotal, third-hand.
- Students are unsure what's required.

- It would be good to make things clearer.
- I've heard some have applied and been denied.

Nicolas:

- The opt-out process is designed to work.
- If it doesn't, I'd like to fix that.
- For status, if the only accepted proof is the status card, can we put something on the website to say that?

Bahareh:

- It's already there.

Nicolas:

- Can we get reports on how many attempted opt-outs fail? If it's 10%, that's different from 80%.

Bahareh:

- It's definitely not 80%.
- Can't pull a general report on this.
- Can look up specific students.

Nicolas:

- How many students fail in their attempts to opt out?

Bahareh:

- If a student attempts, but doesn't complete the process, we email to remind them they haven't completed it.

Tara:

- That's helpful to know.
- This primarily affects sponsored students: students sponsored by a First Nation.
- There are 480 at UBC Vancouver.
- Many sponsors cover tuition, but not U-Pass or health and dental (because FNHA covers that).
- Students don't know to opt out, so they are charged the fee and end up on financial hold when they don't pay it.
- Which means they can't see their exam schedule or change courses or access transcripts.
- Sometimes we try to resolve this, but it's too late: they owe \$270, plus interest, and can't register for second term.
- It's this fee that's causing the problem.
- Maybe an additional reminder to opt out would help.
- Maybe we could pull a list of sponsored students and send it to you to opt them out.
- Possible solutions:
 - Extend the deadline (but that may cause challenges if we do it for just one group).
 - Can they opt out throughout the year? If Indigenous, a retroactive opt-out?
 - Could the AMS administrative staff do this?
 - Maybe a better use of bursaries or subsidies?

Alex:

- Workshops are a great idea.
- If the Longhouse is interested, it would be a good way to create relationships.

Bahareh:

- We are very cognizant of these concerns.
- Studentcare wants a simplified process.
- Our objective is to enhance and support services to Indigenous students; we're in research and development on this now.
- To opt out, all that the student has to do is provide proof of status: upload proof of coverage.
- Just have to do that once.
- To modify the change of coverage period (the opt-out period) for one group is difficult.
- But we are looking at the change of coverage period for all students.
- There is also an exceptional opt-out process for special circumstances.
 - We don't encourage use of this, but it is available.
- Indigenous students don't pay their own tuition (their band does).
- We are very lenient for Indigenous students.
- Opt-outs shouldn't be rejected for technical reasons.
- Sometimes people don't click the final confirm button – but we reach out to those.

Nicolas:

- There are two deadlines here: the opt-out (September 30) and the financial hold.
- If the financial hold triggers before September 30, Enrolment Services can tell the student, You still have one week to opt out.

Tara:

- Financial hold is usually after the Add/Drop day.
- Many times it takes time for the sponsor to send in the form.
- There could be delay by the student or the band.
- If sponsored, the tuition deadline is deferred.
- The financial hold is not usually flagged, but we can work on that.

Nicolas:

- If the student self-identifies as Indigenous, is that the time to speak to them?

Bahareh:

- Maybe we can create a point of contact for Indigenous students: if they have alternative coverage, they can opt out.
- I'd like to connect with Enrolment Services staff and do some high level training, especially for the eight of you dealing with Indigenous students.
- Talking about 400 students shouldn't be difficult.
- We want students to know what their coverage is.
- Would love to connect to the Indigenous Student Working Group.
- We want to make sure we connect with niche groups: Can Studentcare be there at a special orientation for Indigenous students?
- Indigenous students have to be part of the plan; they can't be removed except by themselves.
- We can't pull a list of Indigenous students, but we can create a custom email for Enrolment Services to send them information.

Tara:

- Didn't know about the exceptional opt-out process.
- Definitely interested in bringing you to our team meetings.

- We are the main people who work with students on health programs.
- Can also connect you to Orientations.
- And the Indigenous Wellness Committee may be more useful than the more general Indigenous Student Working Group.
- To Nicolas's question, when is the time to communicate to students?
- Would love to see a custom email from Studentcare, telling students they don't have to opt out, but if they don't, there's \$300 to pay.
- When a student does access the exceptional opt-out, is it partial or full?

Bahareh:

- Full, but it has to be in the same term.
- If intake is in September, the student cannot wait till January.
- The idea is to mitigate as soon as possible.

Nevena:

- It's challenging to navigate for anyone; there's a lot more we can do to make this accessible.
- What about the people who don't have a status card? What is the prevalence of that? How do you apply for one? Can we discuss this requirement?

Alex:

- I have always had a status card and never had to apply.
- Now they're official government cards.
- Used to be the bands doing it.
- With the government doing it, that slows things down.
- I've been waiting for two years for a renewal.
- I know some people who have just applied; there are lots of issues; proof of ancestry is required.
- Is coverage possible without a status card?
- There are people falling through the cracks.
- It's stressful.
- Right now the government is not renewing, because of the pandemic.
- Expired cards still work, though.

Nevena:

- People lose documents all the time.
- Can Studentcare or Pacific Blue Cross do something then?

Bahareh:

- If there's a lack of current physical documentation, we support the student.
- We don't reject if the card's expired: your status isn't going away.
- For students still waiting for access to status, that's a completely different issue: beyond our scope.

Nicolas:

- Insurance plans have deadlines.
- They pull money together and pay claims from that money.
- If we don't collect, we don't have money to pay.

Bahareh:

- There's also logistics.
- We're automated; it reduces human error.

- It's difficult for Indigenous students who think their band is paying for everything.

Nicolas:

- Can't opt out in Term 2 for Term 1: that would affect the financial integrity of the plan.
- I'm concerned about grad students: intake for them is any time of the year.
- It's already difficult to communicate with them.
- I wonder how poorly we're doing with Indigenous graduate students.

Bahareh:

- Most graduates have undergraduate experience.
- If there are issues, we can facilitate.
- But this is more an undergraduate issue.

Tara:

- We email all Indigenous students, grads included.
- Sponsored students make up 35-40% of the Indigenous students.
- The 480 number was just the sponsored students.
- There are about 1300 Indigenous students overall.

Bahareh:

- Those with status but no band financing are more cognizant and cost-conscious: they're paying their own tuition.

Lucia:

- I think Tara and Bahareh should touch base.

Nicolas:

- Can we do an Indigenous version of the plan?

Bahareh:

- You're jumping two years ahead.
- It's something we've thought of and are looking into.
- There are conversations on the national level.
- We encourage people to make decisions for themselves.
- I thought FNHA covered everything; I'm discovering it's not true.
- Would like to connect with Tara and the Indigenous Wellness Committee.
- Would also like to increase the duration of the change of coverage period this year: not just for Indigenous students.

Tara:

- I will reach out to continue the conversation.
- Will research the exceptional opt-out process.
- Happy to have had this conversation.
- Thanks to Alex for arranging it.

Nicolas:

- Apologies from the GSS for not seeing this problem before.

Lucia:

- Cole and I were shocked to discover the situation.
- On behalf of the AMS, I would also like to apologize.

Corey:

- If anyone has questions about what's like to be status, I have unique experiences, having moved from province to province.

Lucia:

- Can we work on a survey on this?

Bahareh:

- Absolutely.
- This would be part of a larger engagement piece: getting student feedback.

5. Minutes

Nicolas:

- Let's postpone these to next week.

The meeting adjourned at 11:28 am.

AMS/GSS Extended Health and Dental Plan Committee

Date: May 19, 2021

Time: 3:03 pm – 3:33 pm

Venue: Virtual meeting

Present:

Voting Members: Mary Gan (Chair, AMS VP Finance), Kimani Karangu (GSS President), Nevena Rebic (GSS), Cole Evans (AMS President)

Non-voting Member: Ahmed Mtiraoui (Health Plan Coordinator)

Guests: Keith Hester (AMS Managing Director), Vivian Tan (GSS General Manager), Bahareh Jokar (Studentcare), Natasha Norbjerg (Hub International Insurance Brokers), Elaine Zhang (AMS Funds & Grants), Sheldon Goldfarb (AMS Clerk of Council)

Recording Secretary: Sheldon Goldfarb

1. Call to Order

The meeting was called to order at 3:03 pm.

2. Introductions

Mary had the committee members introduce themselves.

3. Agenda

The agenda was approved after an amendment to add last year's minutes (Kimani, Mary).

4. Mindful Employer Program

Natasha:

- Canada Life has brought this program to our attention.
- It provides grants for mental health initiatives.
- Only \$2,000, so they won't go far, but could be used for marketing: e.g., printing posters about increased psychology coverage.
 - Or for a consultant fee.
- Deadline is June 5: maybe someone should apply.

Mary:

- My team and I can look into this.
- Can always use more publicity.

5. Goals:

Mary:

- Mental Health Subsidy.
- Mental Health Support Network.
- Perhaps changing some service coverage: chiropractic, massage therapy.
 - Increase coverage per visit.

Keith:

- Chat with Lorris (AMS Senior Manager of Student Services) about mental health services.
- Talk of partnering with Campus Lightbox.

Mary:

- They want to be incorporated into AMS Services.

Keith:

- They want us to invest in them; they wanted a lot of money.

Mary:

- We've recommended they apply to AMS funds.

Keith:

- We may need to raise the \$50,000 for subsidies for health and dental.

Ahmed:

- Last year we received 2,000 subsidy applications.
- More people are applying.
- It used to be a couple of hundred.

Mary:

- Definitely a discussion for the future.

Ahmed:

- It opens in September, and there's another round in January.
- Last year we allowed all students to apply in January:

Mary:

- That was an exception?

Ahmed:

- Yes, for the last two years.
- We had a surplus.
- For the last two years we allowed those who didn't apply in September to apply in January.
- It's up to the committee.
- Depends on how many apply.
- The committee in the past decided to give students a second chance (in January) if they missed application deadlines in September.

Mary:

- Probably okay to make the exception.
- But starting this year, if back to normal, best to stick to strict dates, as long as there is communication to get the word out.

Bahareh:

- Virtual stakeholder conferences from Studentcare.

6. Minutes

MOVED COLE, SECONDED KIMANI:

"That the minutes from April 2020 through April 2021 be approved."

... Carried

The meeting adjourned at 3:33 pm.

AMS/GSS Extended Health and Dental Plan Committee

Date: June 16, 2021

Time: 3:07 pm – 3:58 pm

Venue: Virtual meeting

Present:

Voting Members: Mary Gan (Chair, AMS VP Finance), Kimani Karangu (GSS President), Nevena Rebic (GSS), Cole Evans (AMS President)

Non-voting Member: Ahmed Mtiraoui (Health Plan Coordinator)

Guests: Keith Hester (AMS Managing Director), Vivian Tan (GSS General Manager), Sophia Haque (Studentcare), Bahareh Jokar (Studentcare), Natasha Norbjerg (Hub International Insurance Brokers), Elaine Zhang (AMS Funds & Grants), Sheldon Goldfarb (AMS Clerk of Council)

Recording Secretary: Sheldon Goldfarb

1. Call to Order

The meeting was called to order at 3:07 pm.

2. Studentcare Introduction

Sophia provided background on Studentcare:

- Studentcare's whole world is student health insurance.
- Many at Studentcare have student government experience (Sophia and Bahareh were both AMS Executives).
- Studentcare now has a global footprint across the country.
- Studentcare manages the student health and dental plan experience, providing reports, ensuring efficient opting-out, etc.
- Always set up as a call centre system and transitioned to working from home during COVID.
- Manage networks, promotion, security.
- Provide orientations for Enrollment Services.
- Emphasize strong outreach.
- A shift away from the more traditional model of keeping costs low by being quiet about a plan (so there would be few claims).
- We have found that if we are not offering a benefit, people will leave the plan, so we keep awareness high, which does mean high utilization, but also high satisfaction.
- We reach out in various ways: emails, social media, newspaper ads, orientations, a table at Clubs Days.

Sophia also provided background on the committee:

- The committee is the student voice.
- You evaluate member appeals and reports.
- The AMS/GSS committee is the gold standard on reviewing requests and developing case procedures.
- You are the champions of plan awareness and you make plan policy decisions.

Sophia also reported on the current status of the plan:

- 44,000 UBC members.
- \$7.8 million in claims last year, even during the lockdowns.
- Prescription drugs make up the majority of health claims.
- The newly enhanced psychological benefit has led to more mental health coverage.
- One of the biggest costs is dental.
- There is travel coverage which will be available to students once things open up.

Bahareh:

- The increase here in psychological coverage has led to others pursuing this.
- It has had an impact.

Sophia:

- The change of coverage period provides an opportunity to opt out if you have alternative coverage. It is also the time to enroll spouses and dependants.
- This year it has been extended: will run from August 23 to September 29.
- The extension was made after discussions with the University and Indigenous students.
- Indigenous students are in a special situation: they often don't realize what fees they are being charged because most of them are paid by other parties.
- Distinction between Plan Fees and Plan Premiums:
 - The Plan Fee is what students pay.
 - The Plan Premium is the amount paid to the insurer.
 - There are reserves to cover differences.
- Projected Claims + Inflation Trend + Administrative Expenses = Plan Cost.

Bahareh:

- Networks:
 - A way to save money by working directly with the service providers.
 - National networks of dental providers, pharmacies, physiotherapists, etc.
 - \$15 million in savings annually across the country.
 - The Plan covers 70% of dental preventive; the networks cover 20%; so 90% total is covered.
 - Students can go to any practitioner, but if they go to a network practitioner, they save more.
- COVID:
 - Transitioned to remote work.
 - Also reopened new office in the Nest (in the old SASC space).
 - Enhanced psychological benefit to \$1,000.
 - COVID-19 premium holiday.
 - Retroactive international student opt-out: this July for the 2020-21 year.

Sophia:

- The Year Ahead:
 - July: Communications strategy. Targeting second years who weren't on campus last year.
 - September: Orientation events.
 - Review service options, plan coverage.
- This summer:

- o Review Indigenous student supports.
- o New services: Sexual Assault Survivor Support, Telemedicine services.

Bahareh:

- We look to feedback from you.
- It's your prerogative to guide.
- We appreciate this monthly forum.

Sophia:

- Have you outlined your Executive priorities and whether they touch on health and wellness?

Mary:

- My focus is on a mental health subsidy.
- Want to see how much money is left.
- Also a number for therapy/counselling.
- Mental Health services.

Kimani:

- Key areas for the GSS:
 - o Mental health and well-being.
 - o Sexualized violence on campus.
 - o Training: maybe using the networks; access.
 - o Important to see how Studentcare deals with issues like racism.
 - o EDI (equity, diversity, inclusion) is prominent in our agenda.

Nevena:

- Reviewing the plan coverage.
- Access points, barriers, hardships.
- People are not familiar with the fact that they have to register for Pharmacare separately.

Ahmed:

- Subsidy for September.

Mary:

- Same time as Change of Coverage period?

Ahmed:

- A longer period.
- Something to talk about.

Keith:

- Also should look at the size of the subsidy.
- It's been \$50,000 forever.

3. Minutes

MOVED NEVENA, SECONDED KIMANI:

"That the minutes from May 19 be approved."

... Carried

The meeting adjourned at 3:58 pm.

AMS/GSS Extended Health and Dental Plan Committee

Date: July 28, 2021

Time: 3:07 pm – 3:55 pm

Venue: Virtual meeting

Present:

Voting Members: Mary Gan (Chair, AMS VP Finance), Kimani Karangu (GSS President), Nevena Rebic (GSS), Grace Li (AMS)

Non-voting Member: Ahmed Mtiraoui (Health Plan Coordinator)

Guests: Keith Hester (AMS Managing Director), Vivian Tan (GSS General Manager), Sophia Haque (Studentcare), Bahareh Jokar (Studentcare), Natasha Norbjerg (Hub International Insurance Brokers), Elaine Zhang (AMS Funds & Grants), Sheldon Goldfarb (AMS Clerk of Council)

Regrets: Cole Evans (AMS President)

Recording Secretary: Sheldon Goldfarb

1. Call to Order

The meeting was called to order at 3:07 pm.

2. Agenda

The agenda was approved (Kimani, Mary).

3. Health Plan communication

Sophia:

- The committee discussed this last year. If anything changes, let me know.
- Reopening, in person.
- The GSS has often done in person communication; the AMS not as much.

Bahareh:

- There's talk of tabling during Imagine Day.

Keith:

- Tabling or booting at the residences on Move In Day.

Sophia:

- Does the AMS already have a table?

Keith:

- Something new we're doing: a table for Services.
- Might be good to do one for Health and Dental.
- You can coordinate with our Services people (Lorris and Mitchell).

Sophia:

- Absolutely.
- Any other tabling? Clubs Days?

Keith:

- First Week events.

Mary:

- Can ask about a table at Clubs Days.

Ahmed:

- Can add subsidy information to communications.

Sophia:

- Can look into emails or social media.

Mary:

- Information about change of coverage period?

Sophia:

- Definitely. Communication will be as follows in first term:
 - Introductory email.
 - Reminder email before the end of the change of coverage period.
 - Pharmacare email.
 - Vaccination/Rexall.
 - Claims deadlines reminder email.
 - Network emails: vision, psychology.
- Then in January the same pattern for new students.
- Then a summer email for graduating students if they want to extend their coverage because they don't have a job with coverage.

Mary:

- Helpful to register on the Pacific Blue Cross (PBC) website to see benefits, claims.
- Can we promote that?

Sophia:

- There's a fine balance between letting everyone know enough and not sending too many emails.
- Last year we were told to cut back.
- There's information on the website and Facebook about PBC.
- We could expand on that.
- Understanding how the insurance works is helpful.
- I know the GSS coffee meetings are useful.
- Students are inundated with information at the beginning.
- October is a good time for a coffee social or webinar.

Bahareh:

- We did something with Eric (AMS Communications) last year. Happy to do more.

Mary:

- Maybe a video.

Nevena:

- You can get kicked off Pharmacare, aging out of your parents' plan.
- Do we have communication on that?
- You need to register for your own plan.

Sophia:

- There are advantages to students starting separate Pharmacare plans in any case.
- Maybe an FAQ would be a good solution.

Grace:

- I'm a Pharmacy student and can provide information.

Bahareh:

- Clinics?

Grace:

- The UBC Pharmacy clinic is open and offering vaccinations.

Sophia:

- There's already an FAQ on Pharmacare.
- We're open to ideas on how to promote it.

Nevena:

- If there are advantages to moving off your parents' plan, it might be useful to put that information up.

Kimani:

- We can try to look into other creative ways to communicate important information.
- Look at platforms like TikTok to reach younger students.

Nevena:

- Or grad-specific communication for those in the 25-plus bracket.

Sophia:

- Making a note for GSS coffee socials.

Mary:

- The \$1,000 mental health benefit: would it be possible to promote it more?

Sophia:

- I will take that back and submit it to our team.

4. Subsidy

Mary:

- In previous years the subsidy fund gave out \$50,000.
- Is it possible to increase it?

Keith:

- It can be whatever we want.
- Years ago the committee decided on \$50,000 a year.
- Currently we have \$237,000 in the fund.
- Could increase the annual amount given out.

Ahmed:

- Last year we got way more applications than usual.
- We'd made it easier to apply.

Keith:

- We haven't distributed the whole \$50,000 every year.

Ahmed:

- Last year we gave out more than \$50,000, but before that, less.

Keith:

- It's more visible now.

Mary:

- Is it that people didn't need it or didn't know about it?

Keith:

- People didn't know.
- We're doing a better job at letting people know.

Ahmed:

- Have to decide threshold.

May:

- \$75,000 this year?
- How many applicants were there last year?

Ahmed:

- 1,860. Close to 2,000.

Elaine:

- Can there be partial subsidies?

Ahmed:

- Yes, we did that last year.

Mary:

- Or \$100,000?
- Then we could benefit more than 400 people – if we have some at 50% subsidy.
- Because of COVID, things are difficult financially; jobs are hard to find.

Kimani:

- Time to give back to students.
- How do we inform applicants?

Ahmed:

- Two standard emails: one for those who qualify and one for those who do not.

Kimani:

- Those who are turned down: do they write?

Ahmed:

- Some write to ask why.
- We tell them it's based on their assessed need.
- People fill out a form listing their expenses and income.
- Last year it was online and there was a security issue concerning the supporting documents.
- We rank the applicants; the committee sets the threshold; all below the threshold get a subsidy; those who are positive do not get.

Keith:

- If we increase to \$100,000, can we say we'll review it in a year's time?
- Right now the fee we collect (from the students) and the premium we pay (to the insurance company) are the same.
- Will be burning through the reserve.

Mary:

- \$100,000 for this year only, subject to review next year.

Ahmed:

- Should we request all the supporting documents?
- Proof of expenses, tuition fees, income.
- If no proof, how do we know it's correct?
- Last year we didn't require proof because of COVID.

- In previous years we did require it: if not provided, the application was declined.

Mary:

- I'm thinking CampusBase will be secure enough for online submissions instead of handing in documents in person (if COVID restrictions return).

Ahmed:

- It's much easier for me if applicants can upload their documents.

Kimani:

- In the past we wanted to look into a secure method.
- What happened with that?

Ahmed:

- There was back and forth about it.

Kimani:

- We may need to address this, find a secure way to submit online.
- See what UBC is doing: how they keep documents safe.
- If a student applies for \$200, they need that.
- We're looking for ways to make their lives easier.
- If we can't establish who needs the money more, we're not doing our job.
- We need to get the supporting documents.
- Can this committee task itself to create a platform to deposit the documents and authenticate who needs and who doesn't need the money?

Ahmed:

- Last year we were told the system was not secure.
- Last year we just accepted what we were told by the applicants, but maybe they weren't always accurate.

Mary:

- CampusBase collects information.
- It should be secure. I'll check.
- If it's used for AMS subsidies, we should be able to use it for Health and Dental.
- Let's pass a motion now to set the subsidy at \$100,000 for 2021-22.

Keith:

- The reserve should last for two years. Can say 21-22 and 22-23.

MOVED MARY, SECONDED KIMANI:

"Be it resolved that \$100,000 be approved for the AMS/GSS Health and Dental Subsidy for 2021/22 and 2022/23, with the condition that the subsidy amount be re-evaluated in future years."

... Carried

The meeting adjourned at 3:55 pm.

AMS/GSS Extended Health and Dental Plan Committee

Date: August 18, 2021

Time: 3:02 pm – 3:34 pm

Venue: Virtual meeting

Present:

Voting Members: Mary Gan (Chair, AMS VP Finance), Kimani Karangu (GSS President), Cole Evans (AMS President), Nevena Rebic (GSS)

Non-voting Member: Ahmed Mtiraoui (Health Plan Coordinator)

Guests: Keith Hester (AMS Managing Director), Vivian Tan (GSS General Manager), Sophia Haque (Studentcare), Natasha Norbjerg (Hub International Insurance Brokers), Elaine Zhang (AMS Funds & Grants), Sheldon Goldfarb (AMS Clerk of Council)

Regrets: Grace Li (AMS)

Recording Secretary: Elaine Zhang/Sheldon Goldfarb

1. Call to Order

The meeting was called to order at 3:07 pm.

2. Agenda

The agenda was approved (Mary, Kimani).

3. Minutes

The minutes of July 28, 2021 were approved (Kimani, Mary).

4. Document requirements for subsidy

Mary:

- We do other subsidies through CampusBase.
- The issue is maintaining security for confidential documents submitted in support of subsidy applications.
- If CampusBase can't do this, are there any other platforms?

Keith:

- Will have to create one.
- Had a conversation with CampusBase, but they weren't able to ensure security.

Mary:

- There's not enough time.

Kimani:

- We need to have something in place.

Keith:

- Need to assign this to someone.
- We discussed this last year, but no one was tasked with doing it, so it did not get done.

Mary:

- Who should be responsible? My team or in conjunction with GSS?

Ahmed:

- Maybe we can collaborate with AMS IT.

Mary:

- My team does not have the capacity or knowledge base to construct a secure platform.

Keith:

- We would need a programmer to do this; even our IT department couldn't do it.
- We need to find someone outside who would do this for us.

Mary:

- We can reach out to IT to look into options.
- But for this year, what platform should we put it on?
- Dates are already finalized.
- Can we use the GSS server that was used before?

Kimani:

- No, we used to have someone, who was based in Toronto, in charge of this, but he is not connected any more.

Ahmed:

- I would suggest keeping it the same as last year, and not require any documents.
- For January we can look into other avenues.

Mary:

- Not require any documents for Term 1 and see what we can do for Term 2?

Ahmed:

- That's what we did last year (not requiring documents).

Cole:

- Fine with me.

Nevena:

- Just to clarify, we aren't going to require that documents be submitted, but we're okay with the server we use to collect data?

Mary:

- Right now we collect information on CampusBase and it is okay.
- We collect information about dependents, and dollar amounts, but do not require documents.
- We can keep everything the same for this term and then see if we can get another server to host for future years.
- I will look into it and see if we can make it happen.

5. Subsidy amounts

Mary:

- This year we should have plenty of money to accept everyone.

Keith:

- Yes.

Kimani:

- Looking at the documents Ahmed sent about the criteria, the last updates were in 2013-2014, meaning it has not been revised for eight years now.

- I think with the changing economic trends in Vancouver, we can revise the criteria and re-evaluate the need assessment for students.

Mary:

- We may be cutting it close for the Term 1 subsidy, but for Term 2, we can revise the criteria and application, so it reflects the current situation more.

Ahmed:

- We can actually revise the criteria for next meeting and make changes to the acceptance for this year because it does not relate to application submissions.

Nevena:

- I was looking at the minimum requirements, rent and clothing etc.
- It would be prudent to have a discussion about the criteria, to look at the minimums, because life looks a little different now than years ago.
- Not sure where to go for the numbers.

Ahmed:

- We can update the criteria for the next meeting.
- We can get new numbers, no problem.

Mary:

- If we are changing the criteria, do we need to adjust the application as well?

Ahmed:

- We can adjust the criteria at our next meeting. It has nothing to do with the application.

Mary:

- That sounds good.
- The subsidy will be released on August 23 and be available till September 29, in conjunction with the change of coverage period.

6. Promotions

Mary:

- Want to promote the Health and Dental Plan more.
- I'm going to be working on this with the AMS Communication Department and Events.
- Primarily I want to focus on the mental health coverage increase, from \$500 to \$1000.
- Does anyone else have any other ideas?

Sophia:

- I had a chat with Lorris (AMS Senior Manager of Student Services) and talked about reaching out to residences for back to school and collaborating with AMS Services to hold orientations.
- It would be helpful for Foodbank, Safewalk and even Tutoring to know the counselling coverage that is available in the Health and Dental Plan because students using those services will likely benefit from these supports.
- We are coordinating this with AMS services.
- I just received the Social Media content for the upcoming year.
- I will review that before I send it out to the committee before distribution, to see if we can add any content specifically around the mental health coverage.

Mary:

- I do see a lot of people who don't know about the mental health coverage.

- Hopefully, we can boost awareness about it this year.
- We also want to boost awareness about subsidies and the change of coverage period to avoid last minute exceptions.

Nevena:

- As part of advertising, we can also develop quick orientations and workshops on how to submit claims and get reimbursed.
- The initial step of registering can be really daunting for people who are not familiar with how insurance works.
- It's important to overcome the mental barriers to submitting claims

Sophia:

- It is also daunting to try and find a counsellor.
- We can develop short videos that students can access on their own time to teach them how to submit claims and so on.

Mary:

- I've been talking to AMS Communications about videos to make things more digestible.

Nevena:

- We might also make a video about how to register for Pharmacare.

Sophia:

- How will Imagine Day look this year?

Cole:

- It will be both virtual and in-person.

Sophia:

- Are there any opportunities there?
- Maybe a booth?
- We'd be happy to provide resources and materials if that would be helpful.

Mary:

- I can connect you to the VP Admin; they would know more.

Nevena:

- Do you connect with collegia, to reach commuter students?

Sophia:

- We do have a presence at Clubs Days, which is one way to reach commuter students.
- Virtual social media and email campaigns can also be good ways to reach students who are not on campus all the time.
- And even commuter students come to the Nest.
- I'm open to other ideas.
- Posters at the bus loop?

Mary:

- Not sure they allow posters anymore.

Nevena:

- Exploring first year collegia spaces might be a good idea.
- There are college-specific programs, advisors; there's one in Ponderosa.

The meeting adjourned at 3:34 pm.

AMS/GSS Extended Health and Dental Plan Committee

Date: September 29, 2021

Time: 3:06 pm – 3:27 pm

Venue: Virtual meeting

Present:

Voting Members: Mary Gan (Chair, AMS VP Finance)

Non-voting Members: Ahmed Mtiraoui (Health Plan Coordinator), Amy Deutscher (Regent College), Shadia Qubti (VST)

Guests: Keith Hester (AMS Managing Director), Sophia Haque (Studentcare), Natasha Norbjerg (Hub International Insurance Brokers), Elaine Zhang (AMS Funds & Grants), Sheldon Goldfarb (AMS Clerk of Council)

Regrets: Kimani Karangu (GSS President), Cole Evans (AMS President), Nevena Rebic (GSS), Grace Li (AMS)

Recording Secretary: Sheldon Goldfarb

Quorum was not present.

1. Call to Order

The meeting was called to order at 3:06 pm.

2. Flu Cap

Mary:

- Proposal to increase flu cap from \$25 to \$29.
- A lot of students are eligible for free vaccinations, but some pay.

Sophia:

- There's a history of this to do with Shoppers and their flu shots.
- Their ask is not unreasonable, but it is setting a precedent of Shoppers getting us to change our cap.
- And there are free vaccine clinics on campus.

Mary:

- My thought is to keep the cap the same since access elsewhere is easy.
- Having Shoppers influence the committee to change the cost is not ideal.

Sophia:

- Will UBC be having flu vaccine clinics?

Mary:

- There's no new information on that.
- Last year they didn't, but nothing's been announced for this year.

3. Bursary Fund criteria and Application numbers

Ahmed:

- Updating standard living allowances.
- Changing the monthly amount for rent from \$648 to \$922.

Mary:

- Even \$922 is low for someone living on their own.

Ahmed:

- Only 555 applicants so far.
- Last year we had close to 2,000.
- Maybe extend the time.

Mary:

- Any cons to extending?

Ahmed:

- The other option is to leave it for now and then in January do what we did last year: allowing retroactive applications.

Mary:

- If we want to give out \$100,000, could extend or do the retroactive applications.

Shadia:

- Are these subsidies also for students at the affiliated colleges?
- Can send notification to the students there.

Ahmed:

- Of course.

Mary:

- Can the affiliate students access the UBC CWL?

Shadia:

- Yes.

4. Mental Health Support Networks

Mary:

- Can we do research into psychologist networks (like for dentists and other health practitioners)?

Sophia:

- Our emphasis has been on the mental health product, but I can touch base on the network idea.

5. Minutes from August

To be approved over email.

6. Students abroad

Ahmed:

- Can students abroad apply for the subsidy?

Mary:

- Are they planning to come here?

Ahmed:

- They don't know.

Mary:

- I don't think we have a rule stopping them.
- But if they're out of Canada, can they use the plan?

Ahmed:

- Anyone who pays for the plan can receive the subsidy.

Sophia:

- If they are staying abroad, they need an MSP-equivalent to access the plan.

The meeting adjourned at 3:27 pm.

AMS/GSS Extended Health and Dental Plan Committee

Date: October 27 2021

Time: 3:04 pm – 4:15

Venue: Virtual meeting

Present:

Voting Members: Mary Gan (Chair, AMS VP Finance), Kimani Karangu (GSS President), Cole Evans (AMS President), Nevena Rebic (GSS), Grace Li (Pharmacy)

Non-voting Member: Ahmed Mtiraoui (Health Plan Coordinator)

Guests: Keith Hester (AMS Managing Director), Vivian Tan (GSS General Manager), Sophia Haque (Studentcare), Natasha Norbjerg (Hub International Insurance Brokers), Elaine Zhang (AMS AVP Funds), Sheldon Goldfarb (AMS Clerk of Council), Brent Develeux (HUB Hub International Insurance Brokers), Alex Golovko (Studentcare), Amy Deutscher (RCSA President), Cole Evans (AMS President).

Regrets:

Recording Secretary: Elaine Zhang

1. Call to Order

The meeting was called to order at 3:04 pm.

2. Agenda

The agenda was approved (Mary, Kimani).

3. Minutes

4. Dialogue Virtual Care Pilot Program

Presentation by Sophia and Alex

Sophia:

- **Reasons for interest in this service:**

1. A way to better use the internal funds available

2. Access to Virtual healthcare becoming increasingly important during pandemic times

- From feedback surveys done in the past, particularly the 2019 Student Health Listening Report, these are the concerns identified in Campus healthcare services as well as navigating the Canadian healthcare landscape :

- Long wait times and limited hours of operations impeding their access to healthcare services.

Systemic inability to handle seasonal spike in demand during break seasons (Exam periods and breaks)

- Difficulty navigating health information on campus

- Lack of diversity in the healthcare professionals on Campus

- Domestic students are using Healthcare services more (On-campus clinics etc). International students often end up in Emergency Services. This discrepancy in utilization in domestic and

international students showed that it can be confusing for International students to understand and navigate the Canadian healthcare landscape.

Alex:

- **Virtual Healthcare Service with Dialogue**

- This program allows for students to consult with medical practitioners (Doctors, nurses) virtually.

- Services include:

1. 24/7 access to medical care, care navigation and concierge
2. Access on-the-go from anywhere in Canada,
3. Video consultations
4. Referrals to physical facilities when necessary
5. Prescription drugs deliveries
6. Follow ups and continuity of service/care

- Approx 30% will revolve around medical and mental health segments

Sophia

- Member experience and demo

Q&A

1. When you use the app can you choose your practitioner position or preferences

- Alex: Questionnaire will connect students to a nurse practitioner, then, students will have the opportunity to outline practitioner preferences, who they want to see etc

2. Brent: Will the physicians have access to the plan? Will they know your coverage details?

- Alex: Yes, both sides will know about student coverage

- Alex: Case note history will be documented for each students so different practitioners can have more insight and information regarding the student

3. Keith: Why partner with Dialogue?

- Alex: Dialogue is student centric, other providers are not student specific solutions. There are other providers with Canada life but they have no communication, case history documentation, concierge, follow-up and navigation etc.

- Alex: Most importantly, they have no mental health support.

- Alex: Focus on mental health, user experience, student friendliness, follow up and healthcare navigation are extremely important in provider selection.

- Sophia: While many other providers offer virtual healthcare, the experience would not be the same

- Alex: Main concern is utilization. Other providers would not be able to provide the same student centric experience so students will not use it. Dialogue is the only provider that is able to provide a student specific and not off the shelf product.

4. Brent: Is pricing reviewed on an annual basis and adjusted year over year according to utilization rate? And is it constant across all schools?

- Alex: It is the same price across all universities (3.25)
- Alex: Price is current agreement with Dialogue. Utilization rate will not affect it

Sophia

Cost

- Cost is \$3.25 +tax per member per month
- There is a more affordable program available and if cost is the issue, we can discuss this alternative.
 - Examples from other student associations on how they met the cost obligations
 - Using Internal Funds
 - Conducting survey and using referendum
 - Referendum of a separate standalone fee with an unconditional opt-out provision
 - Build into plan coverage
 - Considerations for the AMS
 - Run a 4 month pilot using internal funds. Giving students a trial period before voting on the referendum
 - We are willing to engage in a lower rate than the \$3.25 for the pilot period. It could be possible

Q&A&Comments Cost

Mary: What will be the cost for the Pilot period?

Sophia: around the \$2.75 range

Mary: Too late to implement for November, something to consider for Dec

Kimani: I'm in favor of a pilot program, and I think we do have the ability to deliver. To better student experiences, we would want to try and see.

Mary: For the pilot program, it will likely be taken out of our internal funds. Cole can you confirm if you heard anything from SUDS about expensing this program.

Cole: No, nothing.

Mary: The AMS is launching a student survey with questions regarding this program. Hopefully, we can identify student feedback. With the cost, we will not be able to consistently support this program year after year without increasing student fees. If students are interested, we would have to run a referendum.

Grace Li: Regarding prescription drug delivery, some drugs need to be freezed or come with an ice pack, how would that work? Which pharmacy company did you partner up with to deliver?

Alex: I will follow up with you through email. I would assume that the logistics are taken care of in a way that the medication are delivered safe and sound. Me or Sophia will follow up.

Sophia: Deliveries can also be made to the nearest pharmacy

Mary: Is there any chance to cap the number of participants for the pilot program? To reduce cost.

Sophia: What to you would be a price that makes sense?

Brent: To follow up on the utilization rate, what would be a successful rate?

Alex: To me, real success comes from bumps in the utilization not based from email campaigns but from actual student feedback (reddit threads from students' authentic thoughts). Utilization for some of our counterparts is 1%. In our experience, in year 1, we see 10% sign up rate from the get go and on average 3-4 sessions for the 10% of individuals who sign up.

Natasha: What type of data is required at implementation (Names? Student numbers)

Alex: Student names, emails, and DOB

Natasha: Is this managed the same way as the Opt-outs

Alex: Exactly the same way as the HD plan

Sophia: We can make it possible to launch in Mid-November. There will also be a rexall sponsored flu clinic on Nov 17. Other schools that have launched the pilot will be using that opportunity for outreach.

Mary: We will discuss with Cole and Keith, hopefully we can do an email vote or others later.

5. Subsidy Application evaluation

Ahmed: We need to discuss and finalize on how much money we have to distribute. Last year it was \$178,000 for Sept-Jan.

Mary: For assessed needs, students who are in the negative get priority over students in the positive?

Ahmed: Yes, it varies from year to year. Depends on how much money we have and how many applications we got.

Mary: Why was the subsidy total so high.

Ahmed: Because we had student reserves and last year because of Covid, the committee extended T2 subsidies to T1 students as well.

Mary: We will discuss through email

Ahmed: How much money we can distribute

Mary: Perhaps around 65,000-75,000 for t1 and the remainder for T2.

Ahmed: Should we say that anyone who is in the negative should get it?

Mary: Yes, anyone who are in the negative should get it. I will play around with the numbers and pitch some ideas. Students who are in surpluses likely don't need it as much as those in deficits.

The meeting adjourned at 4:14 pm.

AMS/GSS Extended Health and Dental Plan Committee

Date: December 8 2021 **Time:** **Venue:** Virtual meeting

Present:

Voting Members: Mary Gan (Chair, AMS VP Finance), Kimani Karangu (GSS President), Cole Evans (AMS President), Nevena Rebic (GSS), Grace Li (Pharmacy)

Non-voting Member: Ahmed Mtiraoui (Health Plan Coordinator)

Guests: Keith Hester (AMS Managing Director), Vivian Tan (GSS General Manager), Sophia Haque (Studentcare), Natasha Norbjerg (Hub International Insurance Brokers), Elaine Zhang (AMS AVP Funds), Sheldon Goldfarb (AMS Clerk of Council), Brent Develeux (HUB Hub International Insurance Brokers), Alex Golovko (Studentcare), Amy Deutscher (RCSA President), Cole Evans (AMS President).

Regrets: Ahmed Mtiraoui, Vivian Tian

Recording Secretary: Elaine Zhang

1. Call to Order

The meeting was called to order at 3:06 pm.

2. Adoption of Agenda

The agenda was approved by Mary and Kimani

3. Health and Dental Subsidy discussion

Mary: Allow students who began their studies in T1 to apply for the T2 subsidy as well. This was done last year.

No objections, this topic was discussed and passed.

4. Approval of H&D Minutes ((Aug 18, Sept 29, Oct 27 2021)

Minutes were approved by Mary and Grace

5. Alternative plans to the Health and Dental Plan

Brent: We did the quotes and the paramedicals, not including mental health, other practitioners have a \$20-\$400 participant maximum. pricing was based on \$30, \$40, \$50, \$60, \$70. Moving to \$30 is a 1.9% increase. However, as participant maximum goes up, cost also increases significantly to the point where the 5% referendum becomes an issue. I recommend baby steps.

\$30 -> 1.9% cost increase

\$40 ->3.43%

\$50 -> 4.69%

\$60 -> 5.78%

\$70 -> 7.09%

Mary: We can definitely use funding from the reserve. Would we multiply enrolled students by the percentage increase to get the final pricing?

Brent: Yes, but if we want this increase to be permanent, we may run into a deficit once the reserve runs out.

Brent: We also looked at the psychology coverage. PBC was hesitant on providing accurate pricing to the uncertainty in the amount of claims. Increasing to \$1250 will result in a 2.6% increase in cost. Increasing to \$1500 would result in a 4.74% increase in cost.

Brent: For dental, increasing to \$1000 would result in a \$43.50 increase to cost. We can also check the cost for increasing to \$800 but it would still be a big increase. Give us a sense of what you want to do to get a more accurate price point and strategize around that.

Cole: What is included in the paramedical coverage?

Natasha: Athletic therapist, Chiro, Dietitian, Massage etc.

Cole: What is the claim percentage for paramedical?

Brent: I will send after

Cole: Coverage for paramedical is not great right now. I would focus additional coverage on high usage/claim areas. The 35% usage rate for psychology coverage is a good indicator for us to focus additional funding in that area, even if it's temporary. I would be in support of targeting one area, like increasing mental health coverage to \$1500 as opposed to adding minimal amounts to each area.

Mary: Dental is another huge area of usage. Although I would want to increase it to \$1000, it is definitely pricey in the long run.

Brent: For dental, it's pricey because we are increasing the principle by 33% and people will hit the maximum.

Cole: Can we increase the proportion of the claim? Instead of getting 50-70% of cost covered, we can cover 100%

Brent: If we move to 100% coverage, people will still hit \$750. they're just hitting it faster. We can definitely change the proportions

Cole: I'd love to see data on the frequency for dental visits per year. If students are only seeing the dentist for a minimal amount of times per year, it would be more beneficial to students to cover 100% of cost.

Brent: We can talk to PBC to get the data.

Natasha: There's additional savings for going to the StudentCare network. it is 90% coverage.

Cole: I would love to also see data on the amount of claims under the network. Most students will probably go to the dentist that is most convenient as opposed to choosing from the network. Data on StudentCare Network usage would also be helpful.

Mary: We can consider just making one change to the Mental Health Coverage.

Grace: I would suggest reaching out to more dental clinics and adding them to the network.

Telus Virtual health care Presentation (John and Vince)

John Provided background on Telus Virtual HealthCare

- EQ care is a virtual healthcare solution acquired by telus a year ago, it is one of several platforms acquired
- Platform offered to UBC is combination of everything
- Factors that make telus superior
 - 4 billion investment in healthcare over the last 10 years
 - Telus owns pharmacies and clinics across Canada
 - Goal is to revolutionize how Canadians access healthcare and integrate technology.
 - Telus is able to provide a holistic overall patient experience other startups don't have the breadth to do.

John also provided description of the Telus Virtual healthcare platform

- 100% human interaction with a qualified health professional
- 24/7 true, on-demand service, french and english
- Electronic medical records system integration
- Support for spouse and dependents
- Every interaction is rated.
- Care advocate/concierge
 - A professional that the user interacts with. They will ask probing questions to get information and they will be able to make appointments, refer on behalf of the user
- In-house specialists
 - Users will first be connected to a consultant, the consultant will refer users directly to in-house specialists and start a treatment plan. Users will be able to skip the long waiting periods and referral system that is in the current Canadian healthcare system.

Grace: Do users need to have an in person assessment before getting treatment?

John: It will depend on the patient, platform and what is needed. In-person treatment is not necessary at all times.

Mary: Can specialists on the platform prescribe medicine for mental health related issues? Or does it have to be a psychiatrist?

John: Most clinicians can prescribe almost anything but there may be hesitancy. In cases where they can't, user will be referred to a specialist.

Mary: For the 30min period, is this the waiting period?

John: This is the entire consultation period. Users may not be able to interact with a psychiatrist dependent on availability. They will consult with a nurse or other professional and then be referred.

John: If users have specific preferences for professionals, they can request (eg. a language other than French or English or female practitioner). User may have to wait depending on availability.

Kimani: How will users with disability be accommodated? For example, people who don't have the ability to see or hear.

John: I can look into it further. The platform is available on PC. There may be functions users can leverage.

Keith: Are you also able to access the PBC files

John: PBC files are not seamlessly integrated as the EMR but will look into it further. The platform will be able to access coverage information.

Vince: The partnership with PBC is able to provide customization reporting. We can ensure customized visibility at the end of the day.

John: The Telus Life Journey is built into the platform and provides mental health counselling, financial advice, and legal advice.

John gave a demo on how the platform works.

Maple Virtual health care Presentation (William and Samantha)

William provided an overview of the Maple Virtual HealthCare Platform

- Access to primary care, on an unlimited basis.
- 24/7 access to physician, every interaction is with a physician
- Monthly proactive check ins.
- Partnership with Headspace app
- Care concierge
 - Helps users navigate available resources and next steps.
- Questionnaire for mental health related issues, that gives the student a score on their wellness.
- Prescription drugs sent to pharmacy or individual home
- Monthly data reports (ratings, length of consultation, wait times etc)

William gave a demo on how the app is used and its features.

William: Whatever the care the student need, we provide direct access to it

William: Customized survey is available to gauge need

Sam provided an overview on account management for the AMS.

- AMS will have a dedicated account manager offering support (set up, eligibility, reporting, promotional campaign etc.)
- Good feedback from users.

William gave an overview on pricing, coverage is flexible

- Unlimited access to primary care visits, care concierge, headspace etc.
- 8 visits per year for psychotherapy
- App can be customized to show AMS logo

Grace: How does the regularly checkins work. Does the physician review case file regularly?

William: Check ins are self screening tools. Students are prompted with questionnaires on a monthly basis. It encourages students to seek care when needed. Students have to engage with the checkin results and seek care. It is not provided automatically.

William: Our goal, as a private healthcare provider is to reduce barriers in our current healthcare system, such as long wait times, and having to speak to multiple providers. Our app allows users to engage with healthcare through headspace and proactive check in.

Discussion

Mary: I like Telus is better just because the resources they have is more bountiful

Grace: What is the relationship between Telus, Maple and Dialogue?

Mary: They are all separate providers

Grace: Dialogue is around \$3?

Mary: Dialogue was \$3.25

Brent: Telus is around \$2.98 and Maple is \$1.98. They are the top providers for Virtual Health Care

Mary: Any favorites?

Grace: I like Maple better. I've worked with some pharmacies that work with Telus and they're not the best

Brent: Telus is huge and has expanded into everything.

Kimani: I like Dialogue better because they emphasized on care for dependents and that's a big part for GSS members. I like telus as well. Don't have a very strong feeling for Maple. Maple seems cost effective because Headspace requires \$20 per month

Grace: Are all headspace features included for free or do we have to pay additional fees?

Brent: I think it's all-inclusive but will double check.

Mary: A survey went out to check whether students want Virtual Healthcare, we will consider the results when they come in.

Adjourn

The meeting was adjourned at 4:49 pm.