UA Staff Alliance – Staff Health Care Committee (SHCC)
SHCC meeting notes 11-20-15
Gathered by Kathleen McCoy with additions by UAF Staff Council members of the committee


Classified staff comprise 67% of those who use health care benefits and have one person on the JHCC

Key points:
- Erika Van Flein will be invited to all future SHCC meetings.
- Others to invite?
- Sara Rodewald of Healthyroads updated the council on ongoing challenges to earn points for a $600 reduction in premium costs for plan members and spouses. She said wellness program utilization is at about 40 percent; the university would like to see it at 70 percent.
  - Suggestion made to send out more frequent reminders (especially closer to the deadlines) so that those that are participating can continue to do so.
  - Discussed the confusion around 125% Medicare rule and what 100% of covered cost means
- Majority of discussion circled around how to create more informed health plan consumers, given the difficult healthcare climate in Alaska. Ideas included:
  - A flow chart approach showing the path through auxiliary healthcare services [Patient Care, Best Doctors, Teladoc, Nurse Line, Premera Travel Benefit] so as to actively assist our plan members in becoming extremely consumer savvy
  - A consumer-oriented website aimed at plan users with easy-to-find answers for their top healthcare concerns; the group had the sense that UA Benefits, while a thorough catalog for benefits and services the university offers, is still very hard for unfamiliar healthcare consumers to navigate.
  - Poster campaigns, FAQ’s on website, Healthcare 101, better explanation of Wellness Benefits, short webinars, other trainings
- Can we access all through UAOnline employee tab?
- Are there health care advocates on each campus?
- Costs for pharmacy are going up next year
- Costs for health benefit, out of 5 highest cities, 4 are in Alaska
• We discussed that consumers don’t look for the information until they face a situation; they often see and forget the details of information fliers that come intermittently or randomly.

• Kayti Coonjohn of UAS IT offered to virtually connect SHCC members for easier, real-time communication as we work on healthcare communication issues. Councilmembers discussed that this will be a several-year effort, and that the landscape will keep changing. Not an easy task.

• Discussion of phrasing “100% covered” which really means 100% covered of an allowed amount. Member gave example of an $8,000 procedure covered at 100% of the allowed amount of $400, not 100% of the procedure cost. Example of the confusion consumers face.

• Kathleen McCoy provided a short report on the JHCC meeting in Anchorage (Nov. 11-12-13). Committee members asked for easier access to JHCC reports and the group discussed where to find them. [https://www.alaska.edu/benefits/joint-health-care-committ/](https://www.alaska.edu/benefits/joint-health-care-committ/) There are several good reports on our healthcare usage and state of Member health in the reports under the October and November meeting links.

**Action Item**: SHCC voted to recommend that SHCC and JHCC create a joint taskforce to work on solutions to the extremely challenging healthcare climate in Alaska. Kathleen and Gwenna will take that forward to the JHCC meeting Dec. 2, 2015.

**DOODLE POLL** to be sent for meeting in about two weeks, right after JHCC.