

## SHCC Notes from the September 22, 2011 meeting.

At the last meeting there were several items discussed.

1. There are no plan changes for FY-13.
2. The forms for the Smoking policy were reviewed. I am still getting questions and suggestions on the forms that I have forwarded to committee members. The administration plans to move forward with this policy. I am not sure that the methods for obtaining information on non-smokers are the best. As things stand now, each of us will have to submit signed documents to HR stating that we are tobacco free. This is an increase in workload for human resources. The surcharge for tobacco will be done on a per pay period basis; prorated 9m – 12m. To have fee waived, employees must submit a waiver form during open enrollment. If anyone in a family is using tobacco, employee will be charged only one fee (not per family member). If employee provides false info on waiver form, what will happen – Beth no “witch hunt” but if informed someone is using tobacco will review all information on a case by case basis. Forms submitted ARE legal documents. Document investigations will be done, gentle to employees. Surcharge forms part of the employee’s official file and will be retained as such.
3. We can anticipate an increase in our bi-weekly contributions for our health insurance. No actual figures are available at this time.

There are items still recommended for consideration;

- a. Surgical Travel Health Care
- b. Establish an onsite medical clinic in Fairbanks or Anchorage. A medical clinic staffed with UA-employed MDs or physician assistants and staff could be located on or close to campus to serve university employees and their dependents. This would present a major investment due to the need for a facility and staff for such a clinic. However, universities and other organizations that have opened their own clinics are better able to control medical costs, while offering services conveniently close to the workplace. There has not been much discussion on this issue; the committee is trying to keep it as a future option.
- c. Charging part-time employees an increased employee charge for health care is still under consideration. More research is needed.
- d. Possible Tiers for number of dependents is still under consideration. More research is needed.
- e.

I received a number of concerns about Win collecting (biometric) information from individuals when participating in the IHP sessions. WIN does not share this information with the University in a format

where the information can be tied to an individual employee. Charts and statistics are given to the university.

Yearly preventative checks - make sure the code used by your provider are coded with a "V". Diagnosis codes are not preventative and patient will be charged for the visit. Work with your provider at the time of your visit to make sure it is coded correctly.