Report of the Health & Dental Review Committee to Legislative Council

Submitted 27 March 2016

INTRODUCTION

At the November 19th, 2015 meeting of the Legislative Council, it was resolved that an ad-hoc committee called the "Health and Dental Review Committee" (herein referred to as the "HDRC") be struck with the following purpose:

- A. To review and evaluate the current coverage provided by the SSMU Health and Dental Plan;
- B. To review data regarding the usage of the plan by SSMU members and consult students regarding desired additions to the coverage provided in the current Health and Dental Plan;
- C. To review the costs of various improvements to the plan, particularly legal and mental health coverage, provided by ASEQ;
- D. To investigate the utility of additional coverage options; and
- E. To propose multiple options for changes to the plan to Legislative Council.

More specifically, the primary goal of the HDRC was to examine the possibility of adding mental health coverage and legal coverage to the SSMU Plan.

Committee Membership:

Zacheriah Houston, Vice-President (Finance and Operations), Co-Chair
Adam Templer, Arts Representative, Co-Chair
Chloe Rourke, Vice-President (University Affairs)
Kimber Bialik, Vice-President (Clubs and Services)
Joshua Chin, Medicine Representative
Erin Sobat, Senate Caucus Representative
Gabriel Ning, Arts Representative
Massimo Orsini, Member at Large
Mary Louise Chabot, Representative of the Legal Information Clinic and Member at Large
David Benrimoh, Senate Caucus Representative [Until 13 March 2016]
Valerie Olivier, Law Representative [Until 7 February 2016]

The HDRC met on 11 November 2015, 9 December 2015, 24 January 2016, 31 January 2016, 7 February 2016, 13 March 2016, and 20 March 2016.

¹ <u>Motion regarding the creation of an Ad-Hoc SSMU Health and Dental Committee</u>, SSMU Legislative Council Documents, 19 November 2015.

THE SSMU HEALTH AND DENTAL PLAN

The SSMU Health and Dental Plan (separated into two portions - the Health Plan and the Dental Plan) is an opt-outable insurance plan in which all SSMU members are automatically enrolled. The plan is provided through the Alliance pour la santé étudiante au québec (ASEQ) and the insurance coverage is provided by Desjardins Insurances.

The SSMU Dental Plan covers preventive services (e.g. cleanings, recall exams, fluoride), basic services (e.g. fillings, oral surgery, root canals) and major restorative services (e.g. crowns, bridges, posts). Presently, the maximum per policy year on the insured portion of Dental Plan is \$750. All SSMU members are automatically enrolled in the Dental Plan.

The SSMU Health Plan currently covers prescription drugs, health practitioners, vaccinations, diagnostic services, hospitalizations and home care, accidents and emergencies, medical equipment, vision coverage, travel insurance, and tuition insurance. All SSMU members who are not covered by McGill's Blue Cross coverage (provided to international students) are automatically enrolled in the Health Plan.

The SSMU Health and Dental Plan is opt-outable and allows students to make certain changes to their coverage (e.g. selecting travel insurance only, or opting out of dental coverage). The SSMU plan allows students to make these changes to their coverage regardless of whether or not they are covered by an alternative insurance provider. This is somewhat unique to the SSMU Plan, as most student health plans operated by ASEQ require members to provide proof of alternative coverage in order to opt-out of a specific type of coverage. The SSMU Plan, however, was amended by way of a referendum in 2005 to allow all members to alter their coverage regardless of whether or not they have alternative insurance².

As of Fall 2015, the SSMU had 22,225 members enrolled in at least one type of coverage, with 11,894 enrolled in full coverage. See the *Number of Members with Various Types of Coverage* table below for more detailed information.

Number of Members with Various Types of Coverage

Coverage Choices	Number of Members	Proportion of Membership
Fully Covered	11,894	53%
Health Only (incl. travel and tuition)	139	0.6%
Dental Only	5,268	24%
Travel and/or Tuition Only	95	0.4%
Dental plus Travel and/or Tuition	5	0.02%
Opted-Out Entirely	4,824	22%
Total	22,225	

² SSMU Execs and Referenda, Bull & Bear, 2005.

PRELIMINARY RENEWAL ANALYSIS

Before considering the logistics of adding mental health coverage and/or legal coverage to the SSMU Health and Dental Plan, the HDRC met with ASEQ to review the 2014-2015 Annual Claims Report and the 2016-2017 Preliminary Renewal Analysis.

Annual Claims Report:

The 2014-2015 Annual Claims Report details the premiums paid by SSMU members and the claims made by SSMU members in each month of the 2014-2015 policy year. In 2014-2015, SSMU members paid \$2.30M in premiums, and made \$2.11M in claims, resulting in a loss ratio of 92% for the insurer. Given that insurance companies target a loss ratio of around 85-90%, this suggests that the SSMU plan is not as profitable for Desjardins as it should be, and that premiums will likely increase in the future. Although this could be seen negatively, it is important to note that a high loss ratio suggests that SSMU members are using the plan effectively and taking advantage of their insurance plan, which the committee views as positive. It is also noteworthy that in 2014-2015, the claims per member paid by the insurer increased by 5% over the previous year, demonstrating an overall increase in SSMU members' usage of the Health and Dental Plan.

Preliminary Renewal Analysis:

The Preliminary Renewal Analysis provides an overview of the projected cost of the plan for 2016-2017. The estimates are based on the plan's historical claims, as well as the claims from the first several months of 2015-2016. The projections take into account the inflationary trend, including increases in the cost of health services and changing patterns of use (e.g. increased use in the consumption of certain drugs). The *Projected 2016-2017 Premiums vs. Plan Fee* table, shown below, shows the difference between what the SSMU charges members for the insurance plan and what the SSMU is projected to pay to the insurer (amounts are shown per student).

Projected 2016-2017 Premiums vs. Plan Fee	Health (\$)	Dental (\$)	Total (\$)
Projected Amount Required for 2016-2017	112.69	129.69	242.39
(includes all admin fees)	112.07	127.07	242.57
Projected Plan Fee (charged to SSMU members)	120.00	100.00	220.00
Difference – Over(Short) 7.31 (29.69)			(22.39)
Data obtained from the SSMU Health & Dental Plan: Preliminary Renewal Analysis Report, Jan. 31, 2016			

The above data shows that the SSMU Dental Plan Fee will need to be raised at some point in the near future – as the SSMU is losing \$~30 for every student registered in the plan. Currently, the Health and Dental Reserve Fund (HDRF) has sufficient funds to subsidize this plan for at least the 2016-2017 year, but eventually the Dental Plan Fee will need to be increased substantially in order to catch up to the premiums that the SSMU pays per member.

Note that as an alternative to raising the Dental Plan Fee, the SSMU could decrease the coverage provided in the Dental Plan, and by removing benefits, decrease the overall premiums paid to the

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insurer for the dental plan. This option was presented to students in the Health and Dental Survey but the respondents were generally more in favor of the SSMU raising the Dental Plan Fee rather than removing benefits. For details regarding the aforementioned survey, refer to the *Survey* section following in this report. For more information regarding the cost of the SSMU Dental Plan, refer to the *Dental Coverage* section following in this report.

Regarding the Health Plan Fee, it is still generating a small surplus per year of \$7.31 per member. However, this 6.5% surplus is lower than the 10% recommended by ASEQ, and thus if an increase to the Health Plan were considered, it would be recommended that the SSMU adjust this buffer upward.

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MENTAL HEALTH COVERAGE

<u>History of psychology coverage in the SSMU Health Plan:</u>

At present, the SSMU Health Plan does not include any coverage for psychology services. When the HDRC inquired about the reasoning behind this, ASEQ informed the committee that the SSMU historically chose intentionally to not include psychology coverage in the SSMU Health Plan, as the SSMU viewed this as a responsibility of the University. ASEQ noted that this stance was similar at other student associations in Quebec, however in recent years, there has been a trend toward student societies amending their insurance plans to include psychology coverage as the psychology services offered by the universities are often vastly insufficient.

It is worth noting that the SSMU Plan does include access to a psychology network, known as PsyMontréal. This network consists of specific offices that offer a discount to members of the SSMU Plan. The network psychologists offer 50-minute individual adult therapy or coaching sessions for no more than \$100 (a discount of approximately \$30).

The need for psychology coverage:

McGill Mental Health Service has a wait time of 2 weeks for first appointments, 2 additional weeks to see a Psychiatrist, and then an additional 3-4 months for psychotherapy³.

A 2014 report on student health at McGill University founds that 89% of students report feeling overwhelmed, 38% report feeling so depressed that it was difficult to function, and 53% report feeling overwhelming anxiety. Most concerning is that 7% of undergraduates seriously consider suicide while at McGill⁴, all of which demonstrate the need for additional resources to be dedicated to mental health support.

With the volume of students who require access to mental health services, the mental health services available through the University are unable to meet the high degree of need on campus with the resources currently available to them. The wait times observed at the McGill Mental Health Service are particularly concerning, and with the on-campus mental health services unable to respond to students' needs in a timely manner, it is important that additional access to mental health professionals be available to help students.

Additionally, a report detailing the results of a survey of SSMU plan members conducted by ASEQ in March 2014 noted that "students most often mentioned a desire to see more coverage for mental health"⁵, and it was noted by the HDRC that psychologists with certain specialties (e.g. gender counselling) are not available at McGill.

³ McGill Mental Health Service Advisory Board Minutes, 7 October 2015.

⁴ Student Health at McGill University, Student Services, December 2014.

⁵ Health and Dental Plan Survey Report, ASEQ, March 2014.

Determining the details of the coverage:

Working with ASEQ, the HDRC examined various options for mental coverage. Factors examined were the volume of students seeking help, the cost of students paying privately, and the general increase in usage of the SSMU Health Plan. It was decided that 80% coverage per visit would provide the best value for SSMU members.

The committee requested that ASEQ examine the option of offering 100% coverage per visit for the first visit, in order to help offset the some of the initial barriers faced by students in need of psychology services. Unfortunately, this option was not available from Desjardins. Thus, the HDRC decided on 80% coverage, but requested that ASEQ examine the option of PsyMontréal offering an additional discount for the first one or two visits, which would effectively result in the first visit to a psychologist (per year) being essentially free to SSMU members. At the time of writing, ASEQ is still exploring this option, and thus the HDRC recommends that this option be explored by ASEQ and the SSMU VP (Finance) in 2016-2017.

Desjardins, which the HDRC communicated with via ASEQ, quoted several different options for mental health coverage. All of the options included 80% coverage per visit (up to a "reasonable and customary maximum", which is determined based on the range of usual fees for medical services in the geographic area), and expanded the definition of "psychologist" to include practitioners with a Masters in Social Work and Registered Clinical Counsellors. The price of the different coverage options provided by Desjardins differed based on annual maximum, with the annual maximums ranging from \$500 per policy year to \$1,100 per year. The quotes are listed below.

Psychology Coverage Options Provided by Desjardins

Annual Maximum	Cost of Coverage (annual)
\$500	\$18.60
\$700	\$21.00
\$800	\$23.40
\$900	\$25.80
\$1,000	\$28.20
\$1,100	\$30.60

Note: all options included 80% coverage per visit, and allow the definition of "psychologist" to include MSW's and RCC's.

It should be noted that the estimates above were made by Desjardins based on data regarding the use by SSMU members of other areas of the plan and the use of psychology coverage by the members of other health plans that Desjardins offers, and thus these estimates do not necessary take into account the context of mental health at McGill. It is common that when significant benefits adjustments are made to plans, the premiums may fluctuate unusually for a few years, and thus the health plan fee would need to be increased by approximately 15-25% more than the annual impacts quoted above, in order to account for future fluctuations in the plan premiums caused by the addition of psychology coverage.

The HDRC decided to present several different options to the SSMU membership via a survey, and use the results to decide on which coverage option should be presented in a potential referendum question.

Following the results of the survey (refer to the *Survey* section contained in this report), it was decided to present the option of coverage with a \$500 annual maximum to the student body in a referendum question⁶.

<u>Calculating the Necessary Fee Increase:</u>

In order to add the 80% psychology coverage (with a \$500 annual maximum) to the SSMU Health Plan, Desjardins estimated an annual cost of \$18.60. Prior to adding psychology coverage, Desjardins was predicting premiums of \$113.74 for the 2016-2017 year, and thus the total premiums were projected at \$132.34 for the 2016-2017 year, if psychology coverage were added to the plan.

The Health Plan Fee was \$120, meaning that the SSMU would need to increase the Health Plan Fee by \$12.34 just to match the estimate for 2016-2017 premiums. However, in order to allow the coverage to be sustainable in the long-run, the Health Plan Fee needed to be increased further – setting the Health Plan Fee higher than the estimated premiums ensures that the fee will not need to be increased again for several years. Additionally, because premium estimates for new benefits are made without actual data on the usage of those benefits by the plan members, it is possible that the premiums will fluctuate for the first few years or will increase faster than usual, and thus the 10% buffer allows the SSMU Health Plan to remain stable in light of these fluctuations and/or increases.

Note that any surplus resulting from an excess of the fees charged over the premiums and admin. fees paid is retained in the Health and Dental Reserve Fund (HDRF) for use in future years.

At the recommendation of ASEQ, the HDRC decided that the Health Plan Fee should be set at 110% of the projected 2016-2017 premiums – i.e., the Health Plan Fee should be \$145.577. Rounding down to the nearest five, the HDRC proposed a \$25 increase to the SSMU Health Plan Fee.

Referendum Results:

The referendum question passed with 1477 members voting "Yes" (73.6%), 531 members voting "No" (26.4%), and 17.8% of voters abstaining. Only SSMU members eligible to pay the Health Plan Fee were considered eligible to vote on the referendum question.

The 2016-2017 Vice-President (Finance) will be responsible for working with ASEQ to ensure that the psychology coverage is added to the plan benefits for the 2016-2017 policy year.

⁶ Motion regarding the Increase of the SSMU Health Fee for the Addition of Mental Health Coverage, SSMU Legislative Council documents,

⁷ Target amount for the Health Plan Fee = [(2016-2017 estimated premiums without psychology coverage) + (estimated 2016-2017 cost of psychology coverage)] * 110% = [(113.74)+(18.60)]*110% = \$145.57

⁸ Results - SSMU Winter 2016 Elections & Referendum, SSMU Simply Voting, 18 March 2016.

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LEGAL COVERAGE

The HDRC was mandated to examine the feasibility and desirability of adding legal coverage to the SSMU Health and Dental Plan. Legal coverage is currently in place at four schools in Quebec, and is still in a trial period. Notably, the SSMU would be first English student association to implement this coverage.

About legal coverage:

The legal coverage provided by ASEQ includes two main segments: legal representation and a legal hotline. Legal representation provides plan members with a practicing lawyer to represent them in matters related to tenant issues, employment issues, and academic issues (regarding expulsion only). The legal hotline allows members to speak to a practicing lawyer, within 48 hours of calling the hotline, to obtain legal advice on everything except criminal law – this is particularly useful for areas such as immigration law, on which only lawyers are allowed to give advice. An interesting disclaimer is that this plan does not allow SSMU employees to use their legal coverage for representation in legal proceedings against the SSMU.

In terms of implementation, legal coverage could potentially be implemented as part of the Health Plan (as is the case for travel insurance, tuition insurance, and vision coverage) or as stand-alone coverage (as with the dental plan). However, stand-alone coverage would likely be significantly more expensive and has not yet been tried. The legal services are provided primarily by 2 law firms, and the claims are filed directly by the lawyer, meaning that there is no need for plan members to pay out of pocket and file for reimbursement. The coverage would be 100% per instance, up to an extremely high maximum – a maximum that ASEQ said one would almost never reach.

The HDRC requested quotes on the legal coverage from ASEQ, and it was estimated that this coverage, if wrapped into the Health Plan, would cost \$25/year.

Impact on the Legal Information Clinic at McGill:

The HDRC invited the Legal Information Clinic at McGill (LICM), represented by Executive Director Mary Louise Chabot, to a meeting to discuss the potential impacts on the LICM if legal coverage were added to the SSMU Plan.

Following a briefing from ASEQ on the details of the legal coverage, it was noted by the LICM that many of their services would not overlap with potential SSMU legal coverage. For example, student advocacy, commissioner of oaths, and presentations/workshops are all services provided by the LICM that would not overlap with legal coverage.

A concern was noted that legal coverage could discourage students from using LICM, since legal advice may be seen as "better" than legal information. It was also noted that students already pay \$9/year for LICM, and neither the HDRC nor the LICM would want legal coverage to jeopardize the existence referendum for the LICM.

Regarding the impact on the volume of users of the LICM's legal information services, because the LICM serves so many members of the Montreal community that are not SSMU members, it seems unlikely that the addition of a legal advice hotline to the SSMU plan would significantly decrease the volume of calls received by the LICM.

<u>Decision regarding legal coverage:</u>

Following the results of a survey of SSMU members (refer to the *Survey* section contained in this report), it was decided not to run a referendum question on the addition of legal coverage at this time.

The HDRC notes that the amount of information regarding coverage that can be provided in a survey is limited, and that it would make sense for further consultation regarding legal coverage to take place at a later time.

The HDRC recommends that the 2016-2017 HDRC continue to examine whether or not legal coverage would be desired by SSMU members.

Other notes:

The HDRC noted that if the SSMU were to move forward with legal coverage, the committee should confirm that the advice and representation are able to be provided in both French and English, and should examine whether or not advice on common law is available. Additionally, the development of any plan to implement legal coverage should consider how to differentiate the legal coverage from the services offered by the Legal Information Clinic at McGill. Finally, the HDRC notes that the Committee should continue to keep the Legal Information Clinic at McGill involved in future discussions regarding legal coverage and any developments therein.

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DENTAL COVERAGE

The SSMU Dental Plan Fee is currently set at \$100.00. For the 2015-2016 year, the premiums are \$105.56 (after tax). When administrative fees are factored in, the amount required per student is \$109.16. Thus for the current year, with 17,223 members enrolled in the Dental Plan, the SSMU is subsidizing the Dental Plan by approximately \$158K⁹ per year. This subsidy depletes the Health and Dental Reserve Fund, which has built up a large surplus over the period of time when the fee charged was larger than the premiums paid.

For the 2016-2017 policy year, the amount required per student for dental coverage is projected to increase substantially, to \$129.69 (incl. taxes and admin. fees). As the fee charged to SSMU members is only \$100, the SSMU will be subsidizing the Dental Plan by almost \$30 per student, or around \$517K, assuming that plan enrollment does not substantially change.

The HDRC determined that the Health and Dental Reserve Fund can afford this subsidy for the 2016-2017 year, however the HDRC recommends that in 2016-2017, the VP (Finance) or the HDRC meet with ASEQ early in the year to determine if benefits adjustments and/or fee increases will be required for the 2017-2018 year.

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 $^{^{9}}$ Subsidy = (Amnt Req'd – Fee)*Enrollment = (109.16-100.00)*17,223 = 157,762.68 ≈ 158,000

SURVEY

The HDRC conducted a survey that asked the opinion of members on several matters related to the plan. The survey contained questions regarding basic demographic info (e.g. faculty, residency status, year), the potential addition of mental health coverage to the plan, the potential addition of legal coverage to the plan, the perceived overlap between legal coverage and the services offered by the LICM, and preferences regarding adjustments to dental coverage and/or the Dental Plan Fee. The response trends are summarized in this section.

Note that in this section, proportions of responses have been adjusted to remove responses of "I am indifferent", or "Undecided". Refer to *Appendix A* for more detailed data regarding the survey results.

Additionally, note that questions regarding mental health coverage and the health plan were not asked to international students (excluding students from France) due to their ineligibility for the health coverage.

Dental Coverage:

When surveyed about the SSMU Dental Plan, students were generally in favour of at least maintaining the current level of dental coverage, despite this resulting in a fee increase of approximately \$35. Approximately 72% of students were in favour of this option. The HDRC views this as a positive indicator that the SSMU should attempt to maintain current levels of dental coverage in the future. By comparison, only 21% of students responded that the SSMU should decrease coverage in order to maintain the current \$100.00 fee, and only 7% of students felt that SSMU should decrease coverage significantly in order to decrease the Dental Fee to less than \$100.00.

Of the 72% of students who responded that the SSMU should maintain current levels of dental coverage, 53% felt that the SSMU should increase the Dental Plan Fee *above* \$135.00, in order to increase overall coverage beyond what is currently offered. Although this is less than a majority of students overall, it is still a significant portion and thus the HDRC considered it noteworthy.

Mental Health Coverage:

When surveyed regarding the addition of mental health coverage to the SSMU Health Plan, respondents were generally in favour of this addition – within certain limits. Survey respondents were presented with the following three options, shown in the *Psychology Coverage Options Presented in the Survey* table, below.

Psychology Coverage Options Presented in the Survey

Option	Annual Maximum	Resulting increase in SSMU Health Fee
A	\$500	\$19
В	\$800	\$24
С	\$1,100	\$30

Of the options presented, options A and B were the best received by students, with 72% and 54% of respondents saying that they would be in favor of option A and B, respectively.

Although 72% of respondents were in favor of the option for psychology coverage with a \$500 annual maximum, the option in the survey was presented with a cost of \$19/year. However, as the HDRC continued to examine the different options, it was decided that a buffer would be necessary to sustain the coverage for the next few years. Thus, the final option presented to students in a referendum question was psychology coverage with a \$500 annual maximum and a cost of \$25/year. Despite the higher cost in the referendum question, the final result was significantly in favour of the coverage, with 73.6% of students voting in favour 10.

One final option (shown as "Option C" above) was presented in the survey – the option for psychology coverage with a \$1,100 annual maximum at a cost of \$30/year. This option was the least well received with 57% of students responding "No".

The HDRC notes that a significant bias likely exists in the survey responses due to all three options for psychology coverage being presented at once. It is possible that students who would have voted yes to a referendum question presenting only option B may have answered "No" to option B because of the anchoring effect resulting from seeing option A first – in other words, because respondents were presented with multiple options, they may have been more inclined to answer "Yes" to the cheapest option. This is supported by the fact that only 53% of respondents answered "Yes" to question B (Should the SSMU add psychology coverage with an \$800 annual maximum for \$24/year?) in the survey, but 72% of students voted in favor of the final referendum question (psychology coverage with a \$500 annual maximum for \$25/year), which was comparatively worse coverage. In order to avoid the potential for the aforementioned bias in the results of future surveys, the HDRC would recommend that future surveys ask each respondent about only one coverage option (selected randomly).

Further, it is notable that the results of the survey for those in favour of adding mental health coverage (with a \$500 annual maximum) to the SSMU Health Plan was accurate within 2% of the Referenda results, with 72% of survey respondents answering "Yes" and 74% of students voting "Yes" in the referendum. These similar percentages suggest that the survey was an accurate representation of what students want from the SSMU Health and Dental Plan.

Legal Coverage:

When surveyed regarding the addition of legal coverage, two-thirds of respondents answered that they would not be willing to pay \$25/year for legal coverage. The HDRC felt that in light of this response, legal coverage should not be prioritized and would be better investigated at a later date. Thus it was decided that the HDRC would prioritize the addition of mental health coverage to the SSMU Health Plan.

¹⁰ Results - SSMU Winter 2016 Elections & Referendum, SSMU Simply Voting, 18 March 2016.

FUTURE OF THE COMMITTEE

Striking a standing Health and Dental Review Committee:

The HDRC recommends that the Committee be institutionalized as a standing committee of Council. The Health and Dental Review Committee would exist to monitor the usage of the Health and Dental Plan as well as its financial sustainability, its use by members, and to explore ways in which the Plan could be further tailored to student needs. The HDRC recommends that the standing Health and Dental Review Committee be struck with Terms of Reference as outlined in *Appendix B* of this report.

Students' awareness of the SSMU Health and Dental Plan:

The HDRC recommends that in 2016-2017, the Health and Dental Review Committee investigate ways to increase awareness of the SSMU Health and Dental Plan among students.

Currently, ASEQ is largely responsible for raising awareness of the plan and providing information about the plan via the I Have a Plan website, ASEQ pamphlets, and other initiatives. The HDRC should explore ways to better inform students, especially first year students, of the existence of the plan and the specifics of their coverage. This could include steps taken directly by the SSMU and/or advice given to ASEQ for better advertisement of the plan.

The HDRC also noted that there is little information regarding the Health and Dental Plan available on the websites operated by McGill Student Services (e.g. Office for Students with Disabilities, Student Health Services, Healthy McGill, Campus Life and Engagement), and that it may be beneficial for the SSMU to explore collaborating with various Student Services to better disseminate information regarding the SSMU Health and Dental Plan.

Coverage for international students:

As was noted previously, only Quebec and Canadian students are eligible for the SSMU Health Plan. Instead of the SSMU Health Plan, international students are automatically enrolled in McGill's Blue Cross Plan, which costs around \$900/year and includes equivalent coverage to the provincial RAMQ as well as supplemental coverage that is similar to the SSMU Health Plan. Notably, the Blue Cross plan includes coverage for psychology services.

According to ASEQ, this structure is unique to Quebec and is due to provincial legislation regarding health care for international students. The HDRC noted that the distinction between the SSMU Health Plan and the McGill Blue Cross Plan is not widely understood by students.

The HDRC identified the lack of student representation in decision making as one issue with the international student health plan. Currently, McGill does not regularly review coverage for the plan except in its administration through International Student Services (ISS). In addition, only the ISS Advisory Board solicits general feedback on structure and coverage. Thus, the HDRC would like to work with McGill toward the creation of a formal University advisory committee on the international student health plan. The membership for this proposed committee would include the SSMU Vice-President (Finance), the McGill Director of International Student Services, the McGill health

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insurance administrator, a representative of the plan broker, a representative from the PGSS, and other international student representatives. Furthermore, this advisory committee should be mandated to meet at least once per year.

Additionally, McGill has not done a call to tender for a new insurance broker in several years. The HDRC noted that if ASEQ were to become the broker for international student health insurance, then it would be easier for students to get information about their plan as all information would come from ASEQ, though the coverage would still differ based on residency status. In order to investigate this option, the Vice-President (University Affairs) contacted International Student Services to ask that a Request for Proposal (RFP) be made through Procurement Services for a new broker on the international student health plan.

At the time of writing, the SSMU is working with McGill to form an advisory committee on the international student health plan beginning in the 2016-2017 year. In addition, it is likely that an RFP for an insurance broker can be placed through Procurement Services by early Summer 2016. While the University has demonstrated its willingness to pursue both of these requests, the HDRC recommends that the 2016-2017 committee monitor their progress and that the Vice-President (Student Life) be responsible for communication with the University on these issues.

Coverage exceptions:

While exploring McGill's Blue Cross coverage, the HDRC noted that the Blue Cross coverage contains exceptions for injuries resulting from self-inflicted harm and injuries incurred as a result of public demonstrations and protest. The HDRC recommends that in 2016-2017, the Committee investigate what exemptions exist under the SSMU Health and Dental Plan, and work with ASEQ to remove them (if applicable).

SUMMARY OF RECOMMENDATIONS

The following is a summary of the recommendations prepared by the ad-hoc Health and Dental Review Committee:

- 1) THAT the SSMU Legislative Council strike a standing Health and Dental Review Committee.
- 2) THAT the aforementioned Health and Dental Review Committee be struck with Terms of Reference as outlined in *Appendix B*, and that the Committee Terms of Reference Book be updated to reflect this change.
- 3) THAT the 2016-2017 Health and Dental Review Committee receive mandates to:
 - a) Investigate the need for increasing the buffer in the SSMU Health Plan Fee in order to ensure its financial sustainability for the foreseeable future;
 - b) Investigate the expansion of the PsyMontreal Network to include 100% coverage for the first visit per policy year;
 - c) Conduct further consultation regarding SSMU members' interest in legal coverage and liaise with the LICM regarding any developments that could impact the operations of the LICM;
 - Meet with ASEQ early in Fall term to determine if adjustments to benefits and/or fee increases will be required for the 2017-2018 year, and prepare for a referendum if necessary;
 - e) Investigate ways to increase awareness of the SSMU Health and Dental Plan among SSMU members;
 - f) Monitor the progress of the formation of a McGill advisory committee on the international student health plan;
 - g) Monitor the progress of a Request for Proposal for an insurance broker for the international student health plan; and
 - h) Investigate whether or not any exceptions exist in the SSMU Plan for injuries resulting from self-inflicted harm, exceptions for injuries resulting from public demonstrations, or similar exceptions, and to investigate the feasibility of removing these exceptions (if applicable).

Approval of this report shall constitute approval of the above recommendations.

Respectfully submitted,

On behalf of the Health and Dental Review Committee, Zacheriah Houston, Vice-President (Finance and Operations) Adam Templer, Arts Representative

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<u>Appendix A – Summary of Survey Results</u>

The results to the questions found most relevant by the HDRC are summarized below. The full results have been archived through the office of the Vice-President (Finance and Operations).

Note that "Adjusted Percent" refers to the percentage of respondents that answered the survey with a given response, excluding responses of "indifferent" and/or "undecided" from the calculation.

What is your faculty/school?

Response	Percent
Arts	28.12%
Science	17.41%
Nursing	12.95%
Medicine	11.61%
Law	10.27%
Engineering	8.93%
Arts and Science	4.46%
Other	6.25%

Have you used the plan during your time at McGill?

Response	Percent
No	31.28%
Yes, between two and five times	24.64%
Yes, more than five times	20.85%
Yes, once	19.43%
Unsure	3.79%

What is your residency status?

Response	Percent
Quebec Student	49.11%
Out-of-Province Canadian Student	33.48%
International Student (excl. France)	13.84%
French Student	3.57%

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What should SSMU do with the Dental Plan?

Response	Percent	Adjusted Percent
Maintain current coverage, resulting		
in an increase to the Dental Plan Fee		
by approximately \$35	54.46%	72%
I am indifferent	24.11%	
Decrease coverage, only as much as		
necessary to maintain the current		
\$100 fee	16.07%	21%
Decrease coverage significantly, in		
order to decrease the overall		
amount of the Dental Plan Fee	5.36%	7%

Should the SSMU increase the amount of the Dental Fee by *more* than \$35, in order to increase overall coverage beyond what is currently offered?

Response	Percent	Adjusted Percent
Yes	39.34%	53%
No	34.43%	47%
Undecided	26.23%	
Note that this question was only asked to studental plan	dents who did not feel that the SSMU should de	ecrease coverage in the

Would you be willing to pay approximately \$19 additional per year for 80% coverage per visit of Mental Health services up to a \$500 annual maximum of coverage?

Response		Percent	Adjusted Percent
Yes		62.18%	72%
No		23.83%	28%
Undecided		13.99%	
Note that this question wa	s not asked to international stu	dents, as they are not eligible	e for the Health Plan.

Would you be willing to pay approximately \$24 additional per year for 80% coverage per visit of Mental Health services up to a \$800 annual maximum of coverage?

Response	Percent	Adjusted Percent
Yes	44.04%	54%
No	37.31%	46%
Undecided	18.65%	
Note that this question was not asked to international students, as they are not eligible for the Health Plan.		

Would you be willing to pay approximately \$30 additional per year for 80% coverage per visit of Mental Health services up to a \$1,100 annual maximum of coverage?

Response	Percent	Adjusted Percent
Yes	34.72%	43%
No	46.63%	57%
Undecided	18.65%	
Note that this auestion was not asked t	o international students, as they are not eliaible f	or the Health Plan

Would you be willing to pay a \$25/year fee for the above mentioned legal coverage?

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Response	Percent	Adjusted Percent
Yes	26.34%	34%
No	51.43%	66%
Undecided	22.32%	

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Appendix B – Health and Dental Review Committee Terms of Reference

GENERAL. The Health and Dental Review Committee shall review the Health and Dental Plan and propose options for improvements to the plan.

FUNCTIONS. The Health and Dental Committee shall:

- A. Review and evaluate the coverage provided by the SSMU Health and Dental Plan;
- B. Review data regarding the usage of the plan by SSMU members;
- C. Approve any changes to the coverage provided in the current Health and Dental Plan;
- D. Receive and review the ASEQ annual claims report;

MEMBERSHIP. The Health and Dental Review Committee shall consist of:

- A. Vice-President (Finance)
- B. Medicine Representative
- C. Dentistry Representative
- D. Councillor (1)
- E. Members at Large (3)
- F. Vice-President (Student Life) [Advisory]

CHAIR. The Chair of the Health and Dental Review Committee shall be appointed by the Committee.