

**Meeting Minutes****March 8, 2011****443 Food Science Building, 1:00 p.m. to 2:00 p.m.**

Members: Terri Cravenar, Rhonda Demchak, Scott Harkcom, Tara Homan, Glenn Myers, John Pecchia, Kim Ripka, Donna Warner

Vice Chairwoman: Rhonda Demchak called the meeting to order at 1:00 p.m.

New Business:

Meeting with Jill Musser – Employee Benefits
Health Care Changes

Jill Musser, Employee Benefits, went over the recent changes to the University Health Care Benefits that went into effect on January 1, 2011. She noted that rates had to go up due to the National Health Care Reform that President Obama passed. \$17 million was shaved from the University Budget.

The following changes were made:

- The co-pay went from \$15 to \$20
- Emergency room fee went from \$50 to \$100 per emergency room trip if not admitted. If you were not admitted to Mt. Nittany Hospital, they will bill a 23 hour observation code in which the individual would be responsible for paying the ER co-pay.
- In-Network deduction is \$250/individual and \$500 per family. Note: A family will never have more than \$500 deductible for the entire family.
- In-Network deduction for single parents with children is \$375
- Single participants are responsible for 10% of the Highmark allowance or \$1000 out of pocket after deductible
- Family participants are responsible for 10% of the Highmark allowance or \$2000 out of pocket after deductible
- Office visits are not included in the deductible and there is no accumulation of office visits.
- One of the other changes for 2011 is in regard to the Highmark preventive schedule. Routine services such as mammogram, colonoscopy, lipid panel profile are billed as routine check-ups. However, if you have a pre-existing or previously diagnosed condition, it will not be billed off of the routine code (examples, diabetes, high blood pressure, etc.). Once there is a diagnosis, individuals will

have to pay the deductible (if it hasn't been met) and co-pay. Here are some examples:

- A yearly mammogram would be covered. However, if they find something on the first mammogram and schedule a second follow-up mammogram, that would be coded as a diagnosed condition and the deductible and co-pay would be charged to the second test.
- A doctor's visit where they do a strep test. Because the strep test is a lab service, it would be billed separately from the office visit.
- A female is experiencing hair loss. If the doctor indicates on the claim that it is alopecia and nothing else, then the claim will get denied. If the alopecia is a result of a thyroid problem, then the doctor needs to code it properly to ensure it can get covered by the insurance.
- Individuals are going to have to watch what their doctor's turn in to the insurance because anything termed "diagnosis" gets their bills paid quicker. The best thing to do is to contact Highmark directly and be sure you have your diagnosis code or procedure code to find out what is covered or not. Due to HIPAA, usually Penn State's Employee Benefits office cannot assist with these matters. There is a preventive schedule on the OHR website. In addition, they are working on putting together a list of what is not covered which will be released this spring.
- Highmark records all phone calls. Be sure to get a contact name of the person you spoke with because if they provide you with wrong information, they can go back to that recorded message and will uphold whatever they had previously told a patient.
- Flex Plan Benefit - One of the most under-utilized benefits is that of Flex Pay. It is a tax free way to put money aside for medical expenses, braces, lasik eye surgery, prescription bills, etc. Through 2012, individuals can put up to \$8,000 in their Flex Plan account that is tax free dollars (NOTE: Do not to overestimate what to put into your account; anything not utilized will not be reimbursed and will go into the University General Funds). Starting in 2013, individuals will only be able to put \$2,500 into their Flex Pay account due to health care reform. She recommended keeping track of your expenses in 2011 to determine how much to allocate in 2012. Over-the-counter medicine is not prohibited this year in the flex plan.
- Jill noted that you can appeal your medical bills but need to be sure you have been denied before filing. She advised the University does not get involved with the appeals but the Employee Benefits office may be able to help guide individuals. In many instances, claims are overturned.

A few pointers Jill indicated when at the doctor's office:

- Ask for sample medication if you are prescribed anything. They usually have samples
- Negotiate on a discount from the doctor's office.
- Take advantage of the free wellness programs the University has to offer. Express Know Your Numbers will be coming to campus in the direct future. Please visit the website. <http://ohr.psu.edu/health-matters>
- Educate yourself and ask questions at your appointments

- The Employee Assistance Program (EAP) is still available and is under-utilized by most employees. This is a strictly confidential program administered through an outside agency. People should take advantage of this when dealing with stressful situations such as elderly parents, marriage counseling, divorce, eating disorders, financial counseling, etc.

Jill Musser left at 2:00 p.m.

The committee suggested that Jill Musser speak for 30 minutes and then 15 minutes of Q & A. Scott noted that the Dean should have as much time as needed due to the predicament the College is currently dealing with.

The committee decided to postpone writing a letter to the Dean regarding the Ag Futures Process. In light of Gov. Corbett's budget message today, the committee decided to wait until after the Dean puts out his proposal to everyone on March 18th. Gov. Corbett is proposing a 52% cut.

It was noted that we need to give the Dean a time frame for his presentation at the Spring College Wide meeting on May 11, and plenty of time for Q&A. The committee is anticipating a lot of questions and Jill Musser's presentation may be hindered.

Terri Cravener noted that she will inform Dr. Elkin that he needs to appoint a new SAC member since Terri's term is over. Glenn Myers took Kathy Walker's position on the committee.

The committee decided that they want to talk about the budget and consolidation with the Dean on April 26th. The committee would like to inquire with the Dean how departmental staff can be more actively involved with the issues and decision-making process that the College is facing. There is speculation of the College going to a more centralized administrative structure which will likely have a drastic negative impact on many different levels. It is imperative that the committee be more involved to represent the staff at large during the College's decision-making process.

The meeting closed at 2:25 p.m.

Respectfully submitted,
Rhonda R. Demchak
College Relations Office