



University Health Fee Frequently Asked Questions

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University Health Fee Frequently Asked Questions

SECTION I: Recent additions to FAQ

1. Is the health fee a penalty for students who choose not to buy Cornell's Student Health Insurance Plan?

No. Health fees are typically put in place because the university wants to provide all students with access to on-campus care, regardless of restrictions of their private insurance plans. A health fee is not a substitute for insurance, but rather one component of a funding model that will maintain essential programs, such as prevention, public health, regulatory compliance and crisis response. It also provides a "safety net" of services, regardless of individual students' insurance coverage – a safety net that addresses important concerns for the entire campus community (e.g., after hours telephone consultation, communicable disease, sexual health, mental health, alcohol and other drug use).

2. I've heard about a funding gap, a deficit and a debt? Could you clarify?

The purpose of the change in the funding model is to address a funding gap (also called a deficit): the difference between the cost of providing health services and university funding for health services. As described in the statements by President Skorton and Vice President Murphy, in 2009-10 when the university was hit with two major health crises – an N1H1 epidemic and the suicides of several students – the university realized a serious and immediate need to increase medical and mental health services. Since that time, the student population has continued to grow, and the need for these services has only increased. We supported the increase in staffing and services for three years through one-time gifts and reserves.

Since it would be wrong to cut services we know are needed, for the past two years (2013-14 and 2014-15) we bridged the funding gap through a temporary investment from central university funds, incurring a debt.

Beginning in 2015-16, portion of the health fee and increase in the SHIP premium will fill the funding gap allowing us to maintain the current scope of health services, and reduce the chance that we'll see such gaps in the future. In addition, these new resources will pay back the central resources over a 6-year period.

3. Can you provide a breakdown of the health fee? What does the \$350 cover?

All students are contributing (through the health fee or SHIP premium)

- \$130 to sustain the investment in existing program ('deficit')
- \$70 to replenish central funds used to sustain program last year and this year ('debt')

Students paying the health fee are also contributing

- \$150, which provides pre-paid access to on campus services, [limiting out of pocket costs](#) at the time of services to \$10 for most Gannett visits (students enrolled in SHIP already have pre-paid access)

4. Can students "waive" the health fee if they don't use Gannett services?

No. The health fee is one component of a funding model to which all students will contribute, either through the SHIP premium or the health fee. The model maintains essential programs, such as prevention, public health, regulatory compliance and crisis response. It also provides a "safety net" of services, regardless of individual students' insurance coverage – a safety net that addresses important concerns for the entire campus community (e.g., after hours telephone consultation, communicable disease, sexual health, mental health,



alcohol and other drug use).

5. Do other universities have a health fee, and if so, how much?

Yes. Health fees are standard practice among universities. Many of our Ivy Plus peers, including Brown, Chicago, Columbia, Duke, Harvard and Stanford, have fees – most of which have been in place for years. Fees for these institutions range from \$500 to \$1,000. Weill Cornell Medical College has a \$1,400 health fee. In 2011, the State University of New York (SUNY) implemented a new policy that mandated health fees at all SUNY schools.

6. Will I still need to file claims or other paperwork with my private insurance company?

No – not for visits, diagnostic tests, or procedures done within Gannett Health Services (see [covered services](#)). You may want or need to submit a claim for the few services that aren't covered by the fee, for example immunizations (other than flu shots), lab tests that can't be done at Gannett, and pharmacy items (though the Gannett Pharmacy participates with many of the leading [prescription plans](#)). And you will need to submit claims (or providers will need to submit on your behalf) for any services delivered outside of the campus health center.

7. Gannett does not currently take my insurance. Will the fee remedy this issue?

Students come to Cornell with over 1,000 different health insurance plans. It is not feasible for Gannett to contract with such a broad range of insurance plans from across the country, with increasingly regionalized and restrictive provider networks. With the health fee, for just \$10 for most visits, all professional services, in-house lab tests, xrays, and procedures at Gannett, as well as medical supplies related to visits will be covered. The fee will not cover pharmacy items or immunizations (other than flu shots). Review a list of [covered services](#).

8. Will I still need to pay or meet my insurance deductible to receive service at Gannett?

The health fee is not an insurance plan and does not have a deductible. Your insurance deductible will not apply to charges covered by the health fee.

9. Is there a list of prescriptions that are covered by the health fee?

The health fee does not cover any prescription items: you will still need to rely on your insurance plan coverage for prescriptions. However, the Gannett Pharmacy participates with many of the leading prescription plans. Please visit the [Gannett Pharmacy](#) website to learn more.

SECTION II: General

1. What is the Cornell University Student Health Insurance Plan (SHIP)?

The SHIP is a comprehensive, high-value, low-cost health insurance plan – in Affordable Care Act terms, it is [platinum level coverage at a bronze price](#). SHIP is designed specifically to meet the needs of Cornell students living in the Ithaca area and traveling – for study, research, work or pleasure – all over the U.S. and the world. The plan design is reviewed and recommended each year by a committee comprising undergraduate and graduate student representatives, university administrators and Gannett staff, with expert consultation from



Towers Watson. The committee is charged with the responsibility of balancing concern for the health care needs of Cornell students with the costs of the plan.

2. What is a health fee?

A health fee is a per capita administrative fee used to fund on-campus health services. Health fees are typically put in place because the university wants to provide all students with access to on-campus care, regardless of restrictions of their private insurance plans. Cornell's \$350/year [health fee will cover](#) – for \$10 for most visits – professional services and related charges at the campus health center. In comparison, Cornell's "Ivy Plus" peers who have exposed health fees generally charge between \$500 and \$1,000 per year. Weill Cornell Medical College has a health fee of \$1,400.

3. Why don't students who are enrolled in SHIP pay the health fee?

A portion of the SHIP premium (\$2,352 in 2014-15) already provides one component of what will be covered by the health fee: pre-paid access to on-campus health care. Students enrolled in SHIP will not pay the health fee, but through their 2015-16 premium, they will contribute a share of the cost of maintaining campus health services.

4. I currently purchase SHIP because my other insurance doesn't meet Cornell's requirements. Can I just purchase the health fee instead?

No. The health fee is not insurance. Cornell's policy requiring students to have quality health insurance is administered by automatically enrolling all students in SHIP; domestic students can opt out of the coverage if they demonstrate they have other health insurance that meets [Cornell's minimum requirements](#) through the annual waiver process. Only students who waive SHIP pay the health fee.

5. If my insurance meets minimum requirements, why do I have to pay a health fee?

The fee is one component of a funding model that will maintain essential programs (prevention, public health, regulatory compliance and crisis response). It also provides a "safety net" of services, regardless of individual students' insurance coverage – a safety net that addresses important concerns for the entire campus community (e.g., after hours telephone consultation, communicable disease, sexual health, mental health, alcohol and other drug use).

6. What services will be covered by the new health fee and how does this compare to what's covered by SHIP?

Visit the [Caring Community](#) website, [Coverage of Services Chart](#), for more detailed information.

7. Moving forward, how can students provide input into decisions about the health fee?

We plan to form a health fee advisory committee that will include students, faculty and administrators. The committee will function much like the [Student Insurance Advisory Committee](#) does for the insurance plan, providing guidance and recommendations that balance the health resource needs of the campus with costs.



SECTION III: Does the health fee apply to me?

1. I am an international student.

All international students are required to purchase SHIP and therefore will not pay the health fee.

2. I have an internship next semester and will be out of state.

Students who are away from the Ithaca campus for an entire semester will be charged a pro-rated health fee.

3. I will be studying abroad next semester.

Students who are away from the Ithaca campus for an entire semester will be charged a pro-rated health fee. Students should take a fresh look at their insurance coverage when they decide to study abroad – Cornell's Student Health Plan is a good option to consider (coverage includes [worldwide travel assistance](#) and medical evacuation).

4. I will graduate in December 2015.

Students who graduate early will pay a prorated amount.

5. I am a fully funded graduate student.

The university provides SHIP to fully funded graduate students. Since they are enrolled in SHIP, they will not pay the health fee.

6. I am a student planning to enroll in summer courses.

The new funding model does not begin until August 17, 2015. Beginning summer 2016, students who have paid the health fee will have coverage through the summer.

7. Do in absentia students or employee degree students pay the health fee?

These students have limited access to care at Gannett, and therefore the health fee does not apply.

SECTION IV: Gannett Services

1. Does Gannett plan to expand services to include evening and weekend walk-in clinic hours?

Gannett's current hours are:

- Monday to Friday, 8:30 to 5
- Monday to Thursday, 5 to 7: walk-in assessment and consultation
- Saturday, 10 to 4
- 24/7/365: phone consultation with a Gannett health care provider

Gannett always is exploring options to improve student access to services, balanced by operating costs. This type of question can be explored by a health fee advisory committee, collaborating with the Student Insurance Advisory Committee.



- 2. I/my student has had bad experience with Gannett in the past. What assurance do I have that an increased fee will lead to better service?

Gannett’s robust [patient advocacy](#) system, regular patient satisfaction surveys, and [accreditation](#) reviews by a national organization provide critical input that guides changes in services, feedback for staff, substance for continuing education, objectives for planning, and improvement in user experience. A stabilized funding model that keeps pace with enrollment will significantly improve Gannett’s ability to plan for and respond to evolving campus needs.

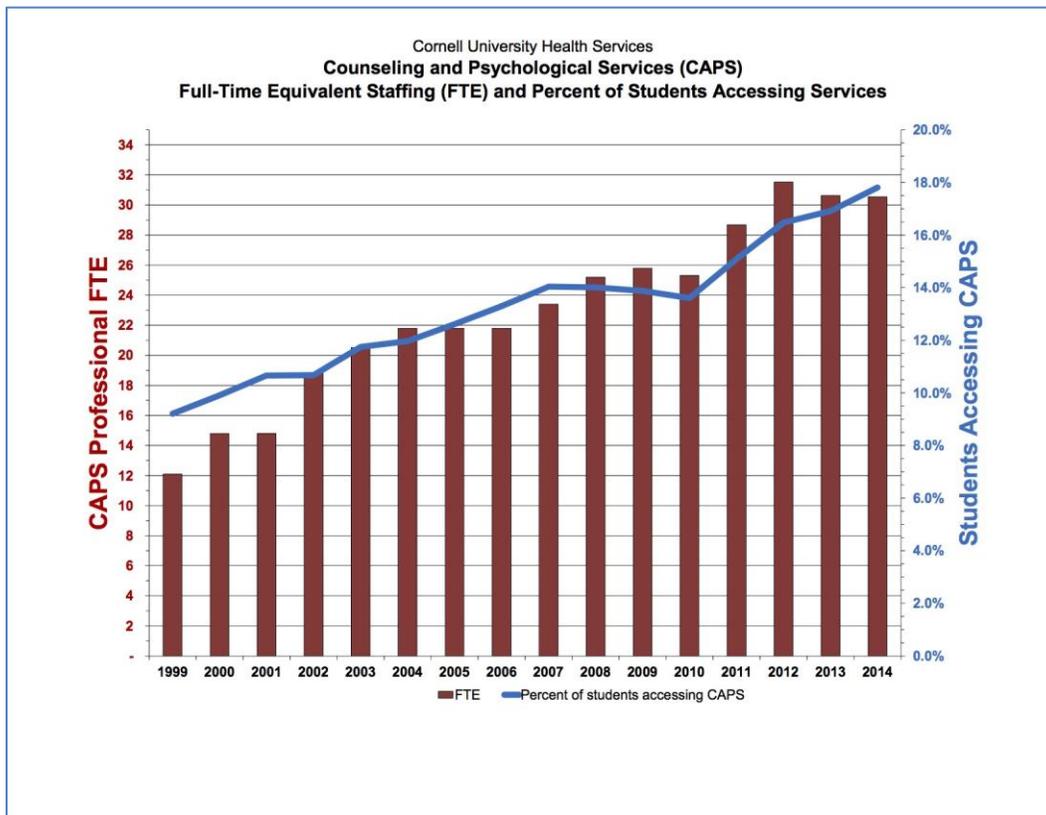
- 3. How many providers are there and how will this fee stay in line with anticipated demand?

We maintain health services staffing to meet campus needs, patient demand and crisis response. Gannett currently has a wide range of professional and support staff, including 32 FTE mental health providers, 15 FTE medical clinicians and 28 nurses.

A stabilized funding model that keeps pace with enrollment will significantly improve Gannett’s ability to plan for and respond to evolving campus needs.

- 4. What evidence do we have that Gannett is using funding to improve student access to mental health services?

As indicated in the chart, mental health service needs have increased steadily over time. The University has added more mental health providers to meet that need and to reach more students.





SECTION V: Other Questions

1. Is the fee paying for the facility renovation/expansion?

No, the UHS facility project is being funded by generous gifts from our alumni and friends, by Student and Academic Services, and by contributions from all of the colleges and administrative units.

2. Is the health fee covered by financial aid? Is there any assistance available for students for whom this is a financial hardship?

No. However, health-related expenses (like the SHIP premium and the health fee) can be covered by loans (on request). Any change to this practice would require additional financial aid funding that does not currently exist.

3. Why can't Gannett bill my insurance and/or why doesn't Gannett take all insurance providers?

Students come to Cornell with over 1,000 different health insurance plans. It is not feasible for Gannett to contract with such a broad range of insurance plans from across the country, with increasingly regionalized and restrictive provider networks. Even if it were, average student out-of-pocket costs would increase due to rising copayments, coinsurances and deductibles, worsening financial barriers.

4. If I am on my family insurance policy and I go to Gannett to receive care, is that information shared with my parents?

Health records at Gannett (or any health care provider) are strictly confidential. However, when you (or your provider) submit a claim to insurance, an Explanation of Benefits (EOB) statement is sent *by the insurance company* to the primary policy holder. For many Cornell students without SHIP, that policyholder is their parent/guardian. EOB statements often include information that reveals the nature of services delivered. As a result, some students avoid seeking care for sensitive health issues. Others pay out of pocket to avoid parental notification. [Learn more about this challenge at www.gutmacher.org/pubs/confidentiality-review.pdf]

5. With the health fee, will my privacy be improved?

Yes. For example, sexually transmitted infection screening at Gannett will be covered by the health fee (as it already is covered by SHIP), and there will be no need to submit claims to insurance. To see what else is covered, review [these charts](#).

6. How do you know that students avoid care at Gannett based on financial concerns?

In a fall 2014 survey, 30 percent of students covered by private insurance said they delayed or avoided care due to financial concerns at least once in the past year. Lower income students were even more likely to avoid seeking care. This avoidance behavior is likely influenced by the fact that over 35 percent of Cornell students with private insurance have deductibles of \$1,000 or more (consistent with national trends).

We also know that Gannett clinicians encounter students on a daily basis who are struggling to make hard health care choices because they can't afford recommended testing or procedures.



Cornell University

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