A Report Card on the Student Health Insurance Plan and
Health Services at the University of Maryland

By
Michael Besser, Amanda Davis, Erin Earp, and Joshua Gillerman

Beyond the Classroom Living and Learning Program
University of Maryland, College Park
Civic Engagement Report No. 1, December 12, 2008
www.BeyondTheClassroom.umd.edu
TABLE OF CONTENTS

Executive Summary 3
I. Introduction 6
II. Principles for Health Care Coverage 8
   A. Analysis of the University of Maryland and the Health Care Principles 9
   B. Analysis of the University of California-Los Angeles and the Health Care Principles 10
   C. Analysis of the University of Michigan and the Health Care Principles 12
   D. Analysis of the University of North Carolina-Chapel Hill and the Health Care Principles 13
III. Student Health Care Coverage: Respective Insurance Plan Analysis 15
IV. Student Health Care: Analysis of Services Offered at Campus Health Centers 16
V. Recommendations for Improving Health Care Coverage and Services at the University of Maryland 17
   A. Student Health Insurance Coverage 17
   B. Student Health Services 17
Bibliography 19

Charts and Tables

Key Terms 7
Health Care Principles Report Card (Summary) 20
Chart Comparing University Health Insurance Plans and Health Services 21
Executive Summary

A Report Card on the Student Health Insurance Plan and Health Services at the University of Maryland

There is a critical need to understand how the health care crisis affects students on university campuses around the country. According to a report released in March 2008 by the Government Accountability Office, 1.7 million college students are uninsured in the United States. The Maryland Health Care Commission estimates that 19 percent of full-time college students are uninsured in Maryland. In a country where health insurance is a near necessity, students face significant challenges in obtaining affordable health insurance coverage and services.

- What principles and standards should guide health care access and services for college students?
- What constitutes best practice by leading public universities in providing health care coverage and services to college students?
- What positive steps can improve the level of health care coverage and services for college students at the University of Maryland?

To address these important questions, students at the University of Maryland have conducted a research study to compare the student health insurance plan and health services at the University of Maryland with the plans and services provided by peer public universities at the University of California-Los Angeles, University of Michigan, and the University of North Carolina.

After analyzing each university’s student health care plans and services provided at the university health centers, we have come to several key findings. We determined that four criteria are imperative in providing health care on college campuses: affordability, accessibility, comprehensiveness, and transparency. The University of Maryland scored fairly well in terms of the affordability of student health insurance, and the cost of services at the University Health Center. Only the University of California, Los Angeles (UCLA), provided a significantly more affordable insurance plan. However, the University of Maryland ranked fairly low among its peer universities in the accessibility of health information. This finding is largely due, in part, to an enigmatically designed web site that proved difficult to navigate and to decipher essential health information. It is important to note, that, in terms of accessible hours, none of the universities were deemed to provide adequate after-hours care and emergency services after the health center had closed. Only the health center at the University of North Carolina at Chapel Hill (UNC) is open full-time on Saturdays and Sundays.
The University of California, Los Angeles (UCLA) proved to have the most comprehensive insurance plan, offering the largest amount of coverage. The standard University of Maryland plan offers less coverage than the other universities, although it has an option to add more. However, it is unclear whether students who purchase the plan opt for the additional coverage. With regards to services offered, all the universities studied offer a wide array of additional and specialized services, with the University of Maryland scoring well among its peers.

The University of Maryland scored the lowest in transparency. We were unable to determine the cost of a number of health services at the University Health Center despite repeated attempts on-line, on the phone, and in person to find the information. However, information about the University of Maryland’s insurance plan was readily accessible through its web site. Even though the plan is relatively accessible compared to the other universities, it should still be noted that regardless of how easy it is to access the plan itself, it is still difficult for students to understand the terms used to explain the level of coverage and how the coverage works.

In researching the quality of health care at four public research universities, we have developed a number of recommendations to assist the University of Maryland in providing exceptional health care to its students. First, the University Health Center should make a fee schedule available on the web site and in person. Second, the Health Center’s web site should also be easier to navigate, with more information regarding specific ailments and answers to general questions. Third, students must have an advocate who will explain the insurance plan and assist in resolving issues. This recommendation is particularly important because all incoming freshman will be required to have health insurance beginning in the Fall of 2009. We understand that budget constraints have had and will continue to have an impact on the University of Maryland’s ability to adopt these recommendations. However, we feel that as the University of Maryland moves forward with its Strategic Plan to achieve its vision of “a world-class university,” improving the quality of health care for students is of the utmost importance and these recommendations will guide administrators in making the university a national leader in student health care.

For more information about this Civic Engagement Report, please contact:

Beyond the Classroom Living and Learning Program

University of Maryland, 0200 Calvert Hall

College Park, MD 20742-5251

Phone: 301-314-6622  E-mail: btcinfo@umd.edu
## Health Care Principles Report Card

<table>
<thead>
<tr>
<th>University</th>
<th>Affordability</th>
<th>Accessibility</th>
<th>Comprehensiveness</th>
<th>Transparency</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Maryland, College Park</td>
<td>B+</td>
<td>B</td>
<td>C-</td>
<td>B-</td>
</tr>
<tr>
<td>University of Michigan</td>
<td>D</td>
<td>A</td>
<td>B+</td>
<td>C+</td>
</tr>
<tr>
<td>University of California, Los Angeles</td>
<td>A</td>
<td>B</td>
<td>B-</td>
<td>C-</td>
</tr>
<tr>
<td>University of North Carolina, Chapel Hill</td>
<td>B</td>
<td>A</td>
<td>A</td>
<td>A</td>
</tr>
</tbody>
</table>

### Scale

- **A** = A national leader in health insurance plan and/or services among public universities
- **B** = Above adequate health insurance plan and/or services for a public university
- **C** = Adequate health insurance plan or health services for a public university
- **D** = Inadequate health insurance plan and/or services for a public university
I. Introduction

There is a critical need to understand how the health care crisis affects students on university campuses around the country. According to a report released in March 2008 by the Government Accountability Office, 1.7 million college students are uninsured in the United States (United States Government Accountability Office, 2008). In a country where health insurance is a near necessity and is most often provided through full-time employment, students face significant challenges in obtaining affordably priced coverage and services. In addition, over 50 percent of all bankruptcy filings in the United States are related, at least in part, to medical expenses. College students, lacking income and often carrying large student debts, are among the most vulnerable to out of control medical bills that can be incurred by the uninsured and underinsured (National Coalition on Health Care). In response to the problem of uninsured college students, 57 percent of colleges offer student health insurance plans and nearly all offer discounted student health services (United States Government Accountability Office, 2008). However, the health insurance plans and the health services each campus provides vary drastically in their prices and coverage.

In the state of Maryland, the Maryland Health Care Commission estimates that 19 percent of full-time college students are uninsured, a number almost double the national average of about 10 percent (Maryland Health Care Commission, 2008). By fall 2009, all incoming freshman will be required either to prove they have health insurance or acquire the University of Maryland’s plan. The University of Maryland’s new health insurance requirement and the uninsured problem it faces makes it imperative that the University offer comprehensive and affordable health services and coverage to its students.

We have undertaken this study to compare the student health insurance plan and health services provided by our school, the University of Maryland-College Park, to the plans and services of our peer public schools, the University of North Carolina, the University of California- Los Angeles, and the University of Michigan. In this report, we analyze the health coverage provided by each of these schools and present it in a fashion that makes comparisons easy to make. Finally, we conclude with recommendations for improving the health coverage provided by our university. Our greatest hope is that by breaking down the cost and coverage of student health services, we can empower students and administrators so that they may work successfully for reform.

We intend to clearly lay out the indicators for our health coverage comparison as well as the standards and principles we have adopted to help us in drawing conclusions and making our recommendations. In preparing our report, we analyzed the relevant literature and studies, reached out to the appropriate experts and administrators for information, and meticulously researched all of the plans and services offered by each university. It is our hope that the welfare of America’s college students is not forgotten when the new administration and Congress takes up legislation to address our health care crisis. We hope our report will be useful to public officials and university administrators nationwide as they seek to improve the health care coverage of America’s college students.
Key Terms

1. **Premium**: The amount charged for a certain amount of insurance coverage. Each university charges a premium for its prospective health insurance plan.

2. **Tier 1 Drug**: A generic drug.

3. **Tier 2 Drug**: A preferred name brand drug.

4. **Tier 3 Drug**: Non-preferred brand name drug.

5. **Deductible**: The portion of a claim not covered under an insurance plan. The deductible represents the difference that must be paid depending on the coverage provided and costs incurred.

6. **Basic Service**: Any form of service provided by a university’s health center deemed to be covered by the university’s health insurance plan.

7. **Co-pay**: The amount of additional payment required by someone insured by a health plan for a medical expense at the time of a visit.

8. **Preferred Provider**: A third-party health care provider who has agreed to provide health care at reduced rates to the insurer's or administrator's clients.

9. **Reasonable Fee**: The average fee charged by a particular Provider, or paid by the insurance, within a specified geographic area.

10. **Negotiable Fee**: The maximum charge a Preferred Care Provider has agreed to accept for any service or supply for the purpose of the benefits under the Plan.
II. Principles for Health Care Coverage

Affordability

With no end in sight to the rising cost of a college education, students must have access to health care that is affordable on a budget already burdened by increasing tuition, housing, and textbook costs. If the cost of health insurance or a visit to the University Health Center is too high, many students will forego getting the health care they need, putting their health and financial security at risk. Delaying medical treatment could exacerbate a serious condition, and without insurance, a health crisis could lead to bankruptcy. Furthermore, a student’s academic performance will suffer if he or she is battling a health condition without proper medical treatment. The health care services available through the university are irrelevant if they are too expensive for students to access.

Accessibility

Students must also be able to take advantage of health services and information in a straightforward and timely fashion. A wealth of health information and services will go to waste if they cannot be accessed when students need them. This principle focuses on the user-friendliness of the Health Center’s web site, along with the hours of operation of the center. Between classes, work, and extracurricular activities, college students are pressed for time and may not be able to make it to the health center during the day. Additionally, an illness or accident can happen at anytime. Therefore, flexible hours and adequate after-hours services are a must to meet the needs of college students.

Comprehensiveness

As many students today live on or near campus, often far from their hometown and home physician, university health centers must provide a range of services for students who cannot travel home regularly to see a gynecologist, therapist, or other practitioner. For a student unfamiliar with the area, it is difficult to find a local doctor they can trust to fulfill these needs. It is the responsibility of the university to provide these health services. Furthermore, university health insurance should cover the expenses for essential health services, as forcing students to pay out of pocket for needed care will discourage treatment leading to a deterioration of physical and mental health in many cases.
Navigating the health care system is complicated even for adults who have spent years paying for health insurance. For students, many who are on their own for the first time, it may seem like an insurmountable obstacle. Therefore, universities must ensure that their health care plans are laid out in such a way that can be easily understood, so that students know that is covered, what is not, and how much they are expected to pay for services. Even for students who are under a private health plan, universities must be clear about the costs associated with a visit to the health center or other health needs. In addition, there must be a way for students to address problems or concerns they have with the university health insurance or health center, and they must be informed about how to engage in this process.

A. Analysis of the University of Maryland and the Health Care Principles

Affordability

The basic visit fee for students without the student health insurance plan is $10. Additional health services cost extra, although these costs are not easily attainable and vary by the specifics of a given service. According to the University Health Center Director, Dr. Sacared Bodison, students who purchase the University Health Insurance Plan will likely never see a bill from the health center, with the exception of those for some of the center’s more expensive or additional specialized services (Bodison, 2008). The University of Maryland’s student health insurance plan costs students $1,200 (United Health Care Insurance Company, 2008-2009). The coverage provided is up to $150,000 dollars per injury, with a maximum coverage of $250,000. Co-pays for prescription drugs are $40 for a 30-day supply of “tier 2” or preferred generic drugs, and $15 for “tier 1” or generic drugs (United Health Care Insurance Company, 2008-2009).

Accessibility

The University Health Center maintains regular appointment hours Monday thru Friday from 8:00 am to 7:00 pm and limited services hours on Saturday from 11:00 am to 3:00 pm (University of Maryland). Maryland does not have after-hours services at the Center, but students are able to contact an off campus nurse-line for non-emergency concerns. Appointments are currently made by phone with one phone number for basic visits and several other phone numbers for special services (University of Maryland). Currently the university is working on an on-line appointment system that is scheduled to be implemented during Spring semester 2009 (Bodison, 2008).
Transparency

This issue is probably the single greatest area where the University of Maryland needs to make improvements. Among the university’s shortcomings, the specific costs for health services are difficult, if not impossible, to obtain. Also, the University Health Center’s web site is difficult to navigate and lacks comprehensive information about most of the services provided. It is imperative that students can easily access information about the services they need, and that they are made readily available of where they can go if they have questions about specifics. The University of Maryland can improve on both counts. The prospectus for the University of Maryland’s health plan is technical and difficult for the average student to make sense of. Students with questions about the plan, its cost, or the coverage it provides are given a phone number for the business office of the health center where there questions can be answered.

Comprehensiveness

The University of Maryland provides a wide range of health services. This is one area in which University Health Center Director Dr. Sacared Bodison believes Maryland could be a “national leader” (Bodison, 2008). Among some of the health services the university provides, in addition to more common basic health services, are: travel health services, a dental clinic, massage therapy, acupuncture, orthopedic medicine, an allergy clinic, urgent care, mental health treatment, a women’s health center, and a liaison for LGBT concerns (University of Maryland).

B. Analysis of the University of California-Los Angeles and the Health Care Principles

The University of California, Los Angeles (UCLA) requires all enrolled students to maintain some form of health insurance. Students at UCLA automatically pay for the university’s student health insurance plan (SHIP) as part of their initial registration fees (UCLA Ashe Center and the Student Health Insurance (SHIP), 2008-2009). Furthermore, a student must provide proof that they are already covered by a private insurance company, deemed acceptable by the university, if they wish to waive SHIP. Requiring SHIP as a necessary precondition for enrollment in the university has allowed UCLA to provide an expansive amount of health insurance coverage for a relatively low cost ($756). It is important to note, that, currently, only UCLA requires students to buy into their health insurance plan. As such, while evaluation UCLA against the previously defined principles of health care, one should consider the vast amount of resources UCLA has to put toward its health care coverage.
Affordability

In terms of affordability, UCLA’s SHIP stands out as the most affordable health insurance plan among the universities analyzed. UCLA’s SHIP charges students a $756 premium (UCLA Ashe Center and the Student Health Insurance (SHIP), 2008-2009). This premium is, by a significant margin, the least expensive premium. Therefore, UCLA has the most affordable health care plan out of all of the universities studied.

Accessibility

UCLA’s health services are not relatively accessible in terms of flexible hours and after hour’s services. UCLA’s Ashe Center is open less hours during the week than two of the other universities studied, and is the only health center completely closed on the weekends (UCLA: Arthur Ashe Student Health and Wellness Center). Moreover, in terms of after-hours care, UCLA provides nurse line, a help line which can be used to discuss medical issues with registered nurses. However, these nurses cannot physically treat any of the patients who call the line, so aside from support and advice, nurse line is rather limited in its ability to help patients in need after hours. UCLA’s student health web site also allows students to make appointments with UCLA’s Ashe Center on-line. This simple, yet effective innovation allows students to quickly make appointments, thus enhancing UCLA’s degree of accessibility.

Transparency

UCLA’s health care information is relatively clear and easy to find. However, although the information can be easily accessed, it is certainly vast and, moreover, rather difficult to sift through. For example, SHIP is explained on-line in the form of a 29-page brochure. The average student probably does not wish to spend a large amount of time reading such a lengthy brochure explaining their health insurance plan. This comment is not to say, however, that there are not summations of basic services and fees clearly outlined. UCLA’s student health web site effectively elucidates important cost and coverage information. All in all, the transparency of UCLA’s health care coverage is relatively high, but it assumes all students understand the vernacular of the health insurance industry.

Comprehensiveness

SHIP certainly is a comprehensive insurance plan. SHIP covers under its plan most basic services and basic visits. Moreover, SHIP offers a lifetime maximum coverage of $500,000 (UCLA Ashe Center and the Student Health Insurance (SHIP), 2008-2009). However, co-pay costs are relatively high compared to the cost of co-pays at other universities. Co-pays for Tier 2
and Tier 3 drugs are significantly higher at UCLA than at the other universities, especially when one considers that these prices are subject to an exorbitant increase after a $50 per year deductible is reached.

C. Analysis of the University of Michigan and the Health Care Principles

Affordability

The University of Michigan student health care plan costs $2,350 per year, and covers up to $250,000 per illness (University of Michigan: University Health Services, 2008-2009). This is the most expensive of the health care plans evaluated, while providing mid-level coverage compared to the other universities. Furthermore, from $1,001 to $50,000 it covers 80 percent of the costs, with the individual paying the additional 20 percent. Under the plan, students pay a $10 co-pay for generic prescriptions, and $20 for brand name drugs. The costs associated with a visit to the doctor or an emergency room are not clear-cut (see Transparency) (United Health Care Insurance Company, 2008-2009).

Accessibility

The University of Michigan’s health center web site provides a detailed list of services provided on-site, and how to access these services (University of Michigan: University Health Services). The center is also open Saturday mornings, which makes it easier for students to fit an appointment into their schedule. However, they are never open later than 5:30 pm during the regular week, prior to which students will have class or work, making it difficult to visit the center at those times. However, the university does have an after-hours hotline and provides information on its web site about where students can go to receive health care when the center is not open (University of Michigan: University Health Services).

Comprehensiveness

The University Health Center provides basic services as well as women’s health and mental health services. Students can go to the center for the HPV vaccine and contraception, however the STD “assessment” requires a doctor to determine whether a student should be tested for these diseases. The center also provides counseling and psychological services, and evaluations for depression, eating disorders and sleep disorders. The cost of these services is covered by the student health service fee. The Center also has a number of specialized clinics in such areas as dermatology, nutrition, travel, and sports medicine (University of Michigan: University Health Services).
**Transparency**

The student health insurance plan uses a number of terms that are not well-defined to explain co-pays for doctor’s appointments and emergency room visits. It states that the individual will pay a “negotiated fee” at a preferred provider, and a “reasonable fee” for a non-preferred provider. These terms do not give students a clear idea of how much they will be paying for services under the plan. It is also unclear what would be considered a new illness, and what would be considered part of a previous condition, for which the plan had already paid out a portion or the entire $250,000 cap. Additionally, the university health center states that “most services [at the health center] are covered by the health service fee,” but does not provide specific details explaining which services are not covered (University of Michigan: University Health Services).

**D. Analysis of the University of North Carolina-Chapel Hill and the Health Care Principles**

**Affordability**

The student health center at the University of North Carolina, Chapel Hill (UNC) is very affordable. The fee for basic and routine visits is covered by the mandatory student health fee. Most fees are covered by the student health fee, but for special services that exceed the routine and basic service, there are additional undisclosed fees.

The University of North Carolina’s student health insurance plan is moderately affordable as well. For $250,000 of coverage, students pay $1,565 and can opt for more coverage if they feel it is needed (Hill, Chesson, & Woody, 2008-2009). All prescriptions filled at the UNC Health Center are $20, but prescriptions filled at In-Network pharmacies are based on a tiered system ranging from $25 for Tier 1 to 25 percent of the total cost for Tier 4. Generally, 80 percent of expenses are covered in-network after the deductible, and 60 percent of total costs are covered for out-of-network facilities after the deductible (Hill, Chesson, & Woody, 2008-2009).

The Health Center offers a wide range of health services, all of which are listed on the web site with instructions on how to make appointments and with whom. The fee schedule is not available on the web site, which hinders complete transparency. Hours, along with information about how to make appointments, and where to find more health information are listed on the web site too (University of North Carolina-Chapel Hill).
Accessibility

The Health Center at UNC is moderately accessible. Because of the easily navigable web site with quick links to important phone numbers, students should be able to find health information as well as make appointments with ease. Appointments can only be made by walking in or calling, however, which some may find daunting. The Appointments link offers the general appointment line as well as specific departments that one can call directly to make appointments (University of North Carolina-Chapel Hill). The web site is clearly laid out and is user friendly. The hours of the Health Center at UNC are exceptional – it is open between 8:00 am and 8:00 pm Monday through Friday, and between 8:00 am and 5:00 pm on both Saturday and Sunday (University of North Carolina-Chapel Hill). The major drawback, in terms of accessibility, is that the Health Center will only see students who have paid the mandatory student health fee – which excludes night students and part-time students.

The student health plan at UNC is less accessible. A list of costs of coverage for different types of students is easily found, but when trying to find a specific fee schedule for health services, one may find it to be more difficult. Only after significant searching was the pharmacy fee found buried in one of the many links about the student health plan. Much of the language associated with this insurance plan is technical and could be confusing to college students.

Transparency

The student health insurance plan at UNC is transparent in terms of the basic health services that are covered and up to what maximum amount. Although the information proved difficult to find, pharmacy fees with the student health insurance plan are listed as well as percentages of what expenses are covered at in- and out-of- network facilities. Coverage amounts and plan costs are readily accessible through the web site.

Comprehensiveness

The Health Center at UNC offers many health services including women’s health, mental health, and basic and routine services (University of North Carolina-Chapel Hill). In addition to what is available at the Health Center, there is a large network of UNC hospitals, one of which is located directly next to campus for any services that the Health Center may not offer. The web site, www.campushealth.unc.edu, is very comprehensive and includes a “model” virtual health library that one can navigate through to find information about specific ailments and to answer general questions.
III. Student Health Care Coverage- Respective Insurance Plan Analysis

Currently, 19 percent of students within the University of Maryland System do not have health care coverage of any form (Maryland Health Care Commission, 2008). However, last year, in an effort to combat the growing number of students without health care coverage, the University Senate passed legislation at the University of Maryland requiring all students to have health insurance beginning in fall 2009. Essentially, if they are not covered by a private plan at the time of admission, they are required to acquire the university’s plan. Furthermore, because health insurance is required by the University of Maryland, it is extremely important to analyze the amount of health care coverage the university’s insurance plan provides students with. In order to ensure that the University of Maryland’s health insurance plan is adequate, we compared the cost of student health care coverage of the University of Maryland’s plan with the University of California, Los Angeles, the University of Michigan, and the University of North Carolina.

Each of the universities studied offer health insurance plans with varying costs and varying amounts of maximum coverage. These will be the two main categories focused upon when breaking down each university’s student health insurance plan. Also being analyzed will be co-pay costs for prescription medication within each plan as well as the fee for a basic visit.

The University of Maryland’s student health insurance plan costs students $1,200 (University of Maryland: University Health Services, 2008-2009). The coverage provided is up to $150,000 dollars per injury, with a maximum coverage of $250,000. As far as co-pays are concerned with the insurance plan, “Tier 1”, or generic drugs have co-pays of $15, and “Tier 2”, preferred-name brand drugs, have co-pays of $40. Finally, a basic visit to the University Health Center would cost students $10 out of pocket (University of Maryland).

The University of California, Los Angeles’ student health insurance plan, “SHIP”, costs students $756. This health insurance plan provides a lifetime maximum coverage of $500,000. Co-pay costs are as follows: $15 for “Tier 1” drugs, $30 for “Tier 2” drugs, and $45 for “Tier 3”, non- preferred non- generic drugs. Basic visits are free under UCLA’s “SHIP” plan (UCLA Ashe Center and the Student Health Insurance (SHIP), 2008-2009).

The University of Michigan’s student health insurance plan costs students $2,350. Maximum coverage provided under the plan is $250,000. The plan is broken up however, in that it covers 80 percent of expenses incurred up to $50,000, and 100 percent of expenses incurred from $50,000 to $250,000. Co-pay costs are as follows: $10 for “Tier 1” drugs, and $20 for “Tier 2” drugs. Basic visits are free for students under the plan (University of Michigan: University Health Services, 2008-2009).

The University of North Carolina’s student health insurance plan costs students $1,565. Maximum coverage provided under the plan is $250,000 per injury. All co-pays are covered under the student health insurance plan. Basic visits are free for students under the plan (Hill, Chesson, & Woody, 2008-2009).

The University of Maryland’s health insurance plan costs students less than at the University of Michigan or the University of North Carolina, but is significantly more expensive than the plan provided at the University of California, Los Angeles. Moreover, UCLA offers the
largest amount of coverage, which is especially important to note considering this level of health insurance coverage comes at the lowest cost to students. The University of Maryland also lags behind UCLA in terms of basic visits, charging students $10 out of pocket for basic visits, while basic visits are free under UCLA’s student health insurance plan. Furthermore, the University of Maryland’s co-pay fees are on par with UCLA, but are significantly higher than Michigan and North Carolina, which both cover prescription medications completely under their insurance plan.

IV. Student Health Care: Analysis of Services Offered at Campus Health Centers

The University of Maryland’s Health Center provides many health services that exceed the basics, but still falls short when compared to the University of California-Los Angeles, the University of Michigan, and the University of North Carolina-Chapel Hill. For basic health services, the University of Maryland’s University Health Center is up to par with its national peers, but beyond that, it needs to improve its level of service with regards to specialized care.

Women’s health at the University of Maryland Health Center is adequate, but beyond routine services and simple testing, it does not exist. At each of the other schools, routine women’s health services are provided as well as additional services. At the University of Michigan, for example, the new HPV vaccine that claims to prevent cervical cancer is provided upon request through the Allergy, Immunization and Travel Health Clinic. At UNC, specialized women’s health care is exceptional, ranging from routine to specialized care. Women’s health care at the University of Maryland is not up to par with its peer universities because of the limited number of women’s health services offered.

The Emergency Services provided is another shortcoming of the University of Maryland Health Center. Although there is a nurse-line for after hour care, the nurses can only provide basic information, answer questions, and suggest questions to ask one’s doctors. The University Michigan also offers inadequate emergency services to its students. UNC and UCLA have the same nurse-line system, however, because there is a hospital on or very near campus, in the event of a real emergency, these schools are much better equipped to provide emergency services to their students than at University of Maryland and the University of Michigan.

A university’s proximity to hospitals is a good indicator of its ability to handle crises in a real emergency. The University of Maryland is located in Prince George’s County, and the two closest hospitals to this campus are Washington Adventist and Prince George’s Hospital Center. The former is now moving to another potentially more distant location from campus, and the latter faces the uncertain prospect of being shutdown due to high debt and lack of funding. Because the surrounding community lacks reasonable services in the case of an emergency and will further lack these services when the respective move and potential shutdown of these area hospitals take place, The University of Maryland Health Center needs to assume greater responsibility for its students by providing adequate emergency services.

Mental Health Services at the University of Maryland Campus Health Center is more comprehensive than women’s health services, and compares favorably with the other three
institutions. There is a vast number of counseling programs such as sexual health and eating disorder therapy. Massage is also available as well as substance abuse counseling and nutrition counseling. UCLA, UNC, and the University Michigan have these programs as well. The University of Maryland offers mental health services on par with its national peer universities.

UCLA, UNC, and the University of Michigan offer additional health services that the University Maryland presently does not offer. The University of Michigan offers a dermatology clinic, while UNC offers a needle stick and exposure clinic, and UCLA provides a vision clinic. The University of Maryland does not offer any health services that the other three schools do not offer as well.

V. Recommendations for Improving Health Care Coverage and Services at the University of Maryland

We acknowledge that budget constraints may limit the University of Maryland’s ability to carry out the following recommendations, but that going forward the University of Maryland should attempt to balance budgetary concerns with the following improvements to the best of its ability.

A. Student Health Insurance Coverage

1. There needs to be an advocate for students who will explain the health insurance plan and help dispute charges and resolve other issues. Such an advocate should be well-advertized to the student body, particularly in light of the upcoming fall 2009 health insurance requirement for all incoming freshmen.

B. Student Health Services

1. The University Health Center should make a fee schedule that is available on the web site and in person. Co-pays and other charges need to be clear before appointments take place so students know whether or not they can afford to be seen.

2. Hours should be extended to be on par with other University Health Centers. This should particularly include extended weekend hours and services.

3. The University Health Center’s web site needs to be made easier to navigate. It also needs more information about specific ailments as well as answers to general questions. Such an improvement could be made by the University Health Center by hiring a student intern with web site design skills at little or no cost. The Health Center should continue in its efforts to make the system electronic which would aid in appointment making, reminders for appointments, and quality of care survey availability and collection.
4. The front desk attendants at the University Health Center need to be better trained to perform their jobs. The University’s quality assurance report from November 2008 shows that this is an area of common dissatisfaction among visiting students.

5. Emergency services need to be re-evaluated given the lack of quality outside health services and coverage for uninsured students. The University Health Center needs to work with the surrounding community to identify viable options available for students with a need for health care during those hours that the facility is not open. Because of important concerns about the future of emergency services offered by hospitals in the surrounding community, other options need to be explored and made available to the 35,000 students at the University of Maryland.
Bibliography

Bodison, Sacared. (2008). Interview with the Director of the University of Maryland’s University Health Center. December 2. (M. Besser, Interviewer)


## Health Care Principles Report Card

<table>
<thead>
<tr>
<th>University</th>
<th>Affordability</th>
<th>Accessibility</th>
<th>Comprehensiveness</th>
<th>Transparency</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Maryland, College Park</td>
<td>B+</td>
<td>B</td>
<td>C-</td>
<td>B-</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>A-</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>B</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>D</td>
</tr>
<tr>
<td>University of Michigan</td>
<td>D</td>
<td>A</td>
<td>B+</td>
<td>C+</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>B-</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>D</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>C-</td>
</tr>
<tr>
<td>University of California, Los Angeles</td>
<td>A</td>
<td>B</td>
<td>B-</td>
<td>C-</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>A</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>B+</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>B-</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>B</td>
</tr>
<tr>
<td>University of North Carolina, Chapel Hill</td>
<td>B</td>
<td>A</td>
<td>A</td>
<td>A</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>B</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>A</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>C+</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>C</td>
</tr>
</tbody>
</table>

### Scale

- **A**: A national leader in health insurance plan and/or services among public universities
- **B**: Above adequate health insurance plan and/or services for a public university
- **C**: Adequate health insurance plan or health services for a public university
- **D**: Inadequate health insurance plan and/or services for a public university
<table>
<thead>
<tr>
<th></th>
<th>University of Maryland, College Park</th>
<th>University of California, Los Angeles</th>
<th>University of Michigan</th>
<th>University of North Carolina, Chapel Hill</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Size of Student Body</strong></td>
<td>Undergrad: 25,857 Grad: 10,157</td>
<td>Undergrad: 25,958 Grad: 11,548</td>
<td>Undergrad: 26,083 Grad: 14,959</td>
<td>Undergrad: 17,628 Grad: 8,177</td>
</tr>
<tr>
<td><strong>Price of Student Insurance (Individual)</strong></td>
<td>$1,200 ($1,420 for added coverage)</td>
<td>$756 (additional $174 for dental)</td>
<td>$2,350</td>
<td>$1,565 ($1653 for added coverage)</td>
</tr>
<tr>
<td><strong>Maximum Coverage</strong></td>
<td>$150,000 per illness (250,000)</td>
<td>$500,000 Lifetime Maximum</td>
<td>$250,000 per illness (from $50,000 to $250,000 it covers 100%)</td>
<td>$250,000 per illness (Unlimited)</td>
</tr>
<tr>
<td><strong>Co-Pays</strong></td>
<td>Prescription Drugs: $15 for Tier 1 drugs $40 for Tier 2 drugs Generally 80% of expenses covered in network and 60% covered out of network.</td>
<td>Prescription Drugs: Filled at the Ashe Center: $15 for Tier 1 drugs $30 for Tier 2 drugs $45 for Tier 3 drugs In-Network Pharmacy: After a $50 per year deductible is reached $25 for Tier 1 drugs $50 for Tier 2 drugs $75 for Tier 3 drugs</td>
<td>Prescription Drugs: $10 generic, $20 brand. Doctors Visits: $15 co-pay and negotiated fee at Preferred Provider Reasonable fee after $50 deductible for Non-Preferred</td>
<td>Prescription Drugs: $20 if filled at UNC Health Center In-Network Pharmacy: $25 for Tier 1 $35 for Tier 2 $50 for Tier 3 25% of Tier 4 (min of $50, max of $100) Generally 80% of expenses covered in network after deductible and 60% covered out of network after deductible.</td>
</tr>
<tr>
<td><strong>Hours of Services</strong></td>
<td>M – F: 8 am – 7 pm Sat: 11 am -3 pm</td>
<td>M – F: 8 am-6:30 pm Sat &amp; Sun: Closed</td>
<td>M - W: 8 am – 5:30 pm Th: 9 am – 5:30 pm F: 8 am – 4:30 pm Sat: 9 am – 12 pm</td>
<td>M – F: 8 am - 8:00 pm Sat &amp; Sun: 8 am - 5:00 pm</td>
</tr>
<tr>
<td><strong>Web Site &amp; Web Site Accessibility</strong></td>
<td><a href="http://www.health.umd.edu">http://www.health.umd.edu</a> Poor access, offers little health information.</td>
<td><a href="http://www.studenthealth.ucla.edu">http://www.studenthealth.ucla.edu</a> Excellent access to information, but difficult to sift through.</td>
<td><a href="http://www.uhs.umich.edu">http://www.uhs.umich.edu</a> Comprehensive list of services provided and how to access them</td>
<td><a href="http://campushealth.unc.edu">http://campushealth.unc.edu</a> Very Accessible, Virtual Health Library provides vast amounts of health information.</td>
</tr>
<tr>
<td><strong>Basic Visit Fee</strong></td>
<td>University of Maryland, College Park</td>
<td>University of California, Los Angeles</td>
<td>University of Michigan</td>
<td>University of North Carolina, Chapel Hill</td>
</tr>
<tr>
<td>---------------------</td>
<td>---------------------------------------</td>
<td>---------------------------------------</td>
<td>-----------------------</td>
<td>------------------------------------------</td>
</tr>
<tr>
<td><strong>$10 for Students</strong></td>
<td>SHIP: Free Without SHIP: $12</td>
<td>Students pay through tuition fees.</td>
<td>Students pay through tuition fees.</td>
<td></td>
</tr>
<tr>
<td><strong>Fees for Specific Services</strong></td>
<td>No specific fees are listed either on the web site or can be easily obtained in person at the health center.</td>
<td>No charge for basic visits or triage visits with Ashe Center clinicians</td>
<td>Most services covered by the health service fee. Other fees not listed.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Optometry visit charges vary depending upon the service (<a href="#">LINK to Optometry FAQ</a>)</td>
<td>- Each visit to Physical or Occupational Therapy in Ashe is $65 until the yearly academic SHIP deductible is met. Then each visit will be 20% of total cost.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- $20 co-pay for EACH non-core lab test.</td>
<td>- Immunizations, injections, devices, casts and acupuncture services are charged at full cost until the yearly academic SHIP deductible is met. Then each visit/service will be 20% of total cost.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Chair massage is $10 for every 10-minutes.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>After Hours</td>
<td>University of Maryland, College Park</td>
<td>University of California, Los Angeles</td>
<td>University of Michigan</td>
<td>University of North Carolina, Chapel Hill</td>
</tr>
<tr>
<td>-------------</td>
<td>--------------------------------------</td>
<td>----------------------------------------</td>
<td>-----------------------</td>
<td>------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>There is an after hours “nurseline” staffed by nurses outside of Maryland who can provide info on: -Minor injuries -Common illnesses -Recent diagnoses -Chronic conditions -Choosing appropriate care -Self-care tips &amp; treatment options -How to take medication safely -Men's, women's &amp; children's health -Questions to ask your doctor -Illness prevention -Nutrition &amp; fitness</td>
<td>Says to call 911 for emergency. Answering service similar to the University of Maryland.</td>
<td>Answering service similar to The University of Maryland. Also lists other locations for health care.</td>
<td>Answering service similar to the University of Maryland. Also lists other locations for health care.</td>
</tr>
<tr>
<td>Emergency Services</td>
<td>The heath center has an Urgent Care section where students can visit without an appointment when the center is open. After closing students must use local hospital resources.</td>
<td>Scholastic emergency services connects UCLA SHIP students with doctors, hospitals, pharmacies and other services when faced with a medical emergency while traveling 100 miles from your permanent residence or campus or abroad.</td>
<td>Can handle minor emergencies such as cuts or broken bones during open hours.</td>
<td>There is a hospital on or right next to campus, so emergency services are available nearby, but the Health Center can only handle minor emergencies such as cuts or broken bones during open hours.</td>
</tr>
<tr>
<td><strong>Women’s Health</strong></td>
<td>University of Maryland, College Park</td>
<td>University of California Los Angeles</td>
<td>University of Michigan</td>
<td>University of North Carolina, Chapel Hill</td>
</tr>
<tr>
<td>-------------------</td>
<td>--------------------------------------</td>
<td>-------------------------------------</td>
<td>-----------------------</td>
<td>------------------------------------------</td>
</tr>
<tr>
<td>Provides routine pelvic exams, Pap smears, contraception, treatment of sexually transmitted diseases, pregnancy testing and counseling, and emergency contraceptive pills.</td>
<td>“The Women's Clinic provides care for routine women's health needs and treatment of gynecological problems. Family planning services are available, as are testing, counseling and referral for pregnancy.”</td>
<td>Routine exams, contraception, diagnosis for women’s health concerns, HPV vaccine, emergency contraception, STD “assessment” and testing (depending on assessment).</td>
<td>Annual gynecological exams, Breast exams, Pap smears, Contraception, Emergency Contraception, Pregnancy diagnosis, All-options pregnancy counseling, Prenatal / Postnatal care, Infertility evaluation, Sexual Assault Response, Colposcopy, Breast disorders, Obesity and disordered eating, STIs, Infections, Genital rashes, Bartholin’s cyst, Absent or irregular menstrual cycles, Menopause issues, Excess body hair, Ovarian cysts, Endometriosis, Uterine fibroids</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Mental Health</strong></th>
<th>University of Maryland, College Park</th>
<th>University of California Los Angeles</th>
<th>University of Michigan</th>
<th>University of North Carolina, Chapel Hill</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provides psychiatric evaluations for depression, panic &amp; anxiety disorders, &amp; other psychological problems - assessments, group &amp;short-term individual therapy, family therapy, assessment &amp; treatment of sexual problems, &amp; medication evaluation, treatment, &amp; follow-up</td>
<td>All insured students are covered for behavioral health services including clinical services, specialty clinics, inpatient care and utilization and case management.</td>
<td>Evaluation of anxiety, depression, eating disorders, and sleep disorders. Treatment options, including medication. Medication management for confirmed diagnoses of ADD/ADHD. Prescription renewals. Referrals for UHS psychiatrist or Counseling and Psychological Services. Cost covered by student health service fee.</td>
<td>Helps students by providing: Human Sexuality Services Substance Abuse Services Nutrition Services Massage Services Outreach and Events</td>
<td></td>
</tr>
<tr>
<td>Additional Services Offered</td>
<td>University of Maryland, College Park</td>
<td>University of California, Los Angeles</td>
<td>University of Michigan</td>
<td>University of North Carolina, Chapel Hill</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>--------------------------------------</td>
<td>---------------------------------------</td>
<td>-----------------------</td>
<td>-----------------------------------------</td>
</tr>
<tr>
<td>- Sports Medicine</td>
<td>Immunizations</td>
<td>Dermatology Clinic</td>
<td>Sports Medicine</td>
<td></td>
</tr>
<tr>
<td>- Accupuncture</td>
<td>Men's &amp; Women's Services</td>
<td>Allergy Immunization and Travel Clinic</td>
<td>Needle stick /exposure Clinic</td>
<td></td>
</tr>
<tr>
<td>- Massage Therapy</td>
<td>Nutrition</td>
<td>Audiology Clinic</td>
<td>Nutrition Clinic</td>
<td></td>
</tr>
<tr>
<td>- Travel Clinic</td>
<td>Optometry</td>
<td>Nutrition Clinic</td>
<td>Immunizations</td>
<td></td>
</tr>
<tr>
<td>- Nutrition Services</td>
<td>Physical &amp; Occupational Therapy</td>
<td>Neurology Clinic</td>
<td>Travel Clinic</td>
<td></td>
</tr>
<tr>
<td>- Laboratory</td>
<td>Specialty Clinics</td>
<td>Sports Medicine Clinic</td>
<td>Therapy</td>
<td></td>
</tr>
<tr>
<td>- Drug Treatment</td>
<td>Student Psychological Services</td>
<td></td>
<td>Laboratory</td>
<td></td>
</tr>
<tr>
<td>- Physical Therapy</td>
<td></td>
<td></td>
<td>Drug Treatment</td>
<td></td>
</tr>
<tr>
<td>- Dental Health</td>
<td></td>
<td></td>
<td>Dental Clinic</td>
<td></td>
</tr>
<tr>
<td>- Immunizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>