



## Health Benefits Survey Comments– Spring 2009

1) Are you interested in returning to the tiered health purchase system instead of the current composite rate?

(MAYBE – EXPLAIN):

- *If we move to CalPERS*
- *I would need more information.*
- *Probably not*
- *I want the ability to opt out of Cuesta's health plan*
- *If it results in lower rates for singles*
- *The links provided do not help much. The SISC information tells about benefits that come from each plan*
- *if couples pay less it's ok but I don't want families with more than one child to pay more per additional child.*
- *Simply because at this time my kids qualify for healthy families so we would just include my husband and myself on Cuesta's.*
- *I don't know. It would help if we were send narrative information about the pros and cons of each--kind of like ballot measures. I'm not really sure how to assess this information on the spot at the end-of-the-semester*
- *Only if part-time faculty have greater job security aka seniority and bumping rights.*
- *Not sure of details of the teired system*
- *Whatever allows me to pay a single rate rather than family rate..*
- *WHICHEVER IS CHEAPER WITH DECENT COVERRAGE*
- *depends on the rate increase. it needs to be very small.*
- *I take insurance from Cuesta. But I'm covered elsewhere.*
- *I am not interested in HMO plans but I can see where it would benefit other Cuesta employees. I am not completely against having the service available*

2) Other concerns / issues related to your existing SISC plan (600 char max):

- *SISC plans keep getting thinner and thinner. They cut expensive benefits that only affect a few people, but if you are one of those few people, then your medical costs go way up. We buy health insurance to cover the expensive things, but when the health insurance companies keep whittling away at those more expensive things, it becomes more expensive for us and more of a problem.*
- *SISC outsources its plan & often denies claims cleary covered in policy. This requires 4-6 hours my time to fight for reimbursement. SISC does not cover preventive health. New SISC changes include more claim review by non medical people. SISC pays substandard MD reimbursement.*

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- *I've had to go to a naturopathic doctor for my son. She is not an in-network doctor.*
- *Cost is a huge concern. With monthly premiums in excess of fringe, co-pays, high deductibles, and 80% coverage on many things (and inadequate coverage for other things, like chiropractic care), even routine medical is now something I have to budget for or put off. When it all gets added up, our medical coverage still means shelling out about as much as I do for food and utilities each month--and we are healthy!*
- *My partner has the same SISC plan at Hancock, and we are BOTH required by our colleges and this insurance company to pay the full premium and deductibles. We have no kids, yet we are required to pay double the health care costs of most people. This is incredibly costly!*
- *Physical therapy for a head injury cost me a copay plus an additional 50%. I was not aware of the extra charge until I recieved a bill for \$400.*
- *"For physicians who are partially covered (i.e., the only pediatric neurologist in this area), SISC forces the member to ""renew"" that partial coverage every 3 months; meaning, that I cannot get anything covered if ever I forget to call SISC prior to seeing the neurologist--which only happens once every 6 months. Why 3 months? Why not once a year? Or only once, period? "*
- *Because I was unaware of the decreased coverage, I'm interested in knowing where the changes were made. Also, I'm concerned about not being able to return to a tiered system and staying with the composite one. I do not want to continue with the composite system.*
- *Being required to have SISC coverage has caused 'identity' problems because my work name at Cuesta is different than my married name that was used for previous insurance purposes. Now my insurance history is mixed under 2 or 3 different names. This has never happened in my 25 years of marriage and has caused some confusion and missing records.*

3) *I am interested in the following CalPERS Medical Plans. CalPERS has both HMO and PPO options (select all that apply) – Comments regarding CalPERS:*

- *No difference between Select and Choice other than cost? In the comparison chart*
- *I would only be able to use one of the plans if it were HSA compatible*
- *Switching to Cal PERS allows faculty a choice between Blue Cross and Blue Shield. Opting out of SISC to another vendor requires faculty to choose a non Blue Cross option.*
- *I can't tell from the link what select and choice offer--only how much the premiums are. What happens if I want to use providers outside the SLO area?*
- *The cost for a family of 5 for similar coverage would more than double on CalPERS. I understand that retirement coverage is important*
- *I want insurance when I retire!*

4) *Any other comments regarding health insurance (600 char max):*

- *CalPERS is MUCH more expensive for families with no real gain in benefits. I have no interest in switching. There would have to be a HUGE increase in fringe for me to even consider it. Given the budget, I don't see any chance of this happening.*
- *I would like to get lifetime benefits like Cal Poly.*

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- *I \*HATE\* that I am required to have a health insurance plan through Cuesta! My spouse's plan is better coverage at a better rate and we both use that plan. So, basically the district is paying for a medical plan that is never, and will never be used. Please give us the ability to opt out- I would opt out even if I did NOT receive the fringe as an equivalent monetary amount.*
- *Given the state of the economy, I am not interested in paying more right now even if it means better coverage; I may be more interested in it in the future. In particular, I am a long way from retirement, but would be interested in switching to a plan that has the option for coverage into retirement AT SOME POINT in the future.*
- *Cuesta's current composite rate is absolute lunacy that is manifestly unfair for those of us who are single. The premise of group insurance is that risk is spread across a population of INDIVIDUALS: some who are old, some who are young, some who are ill, some who aren't. It was never meant to mix single-person households with couples or families with children; that's precisely what family plans are for! Please end this gross injustice!*
- *I want to have coverage when I retire and I am willing to pay more as I go along but I am worried that I could end up paying into the system for many years and then having the college change the policy in the future thus leaving me with no coverage when I will need it most.*
- *Wow, and extra \$6,000 per year in health premiums? That is an awful lot. Why do we only get \$680 per month in fringe? At my last college, I made more salary and had \$1000 per month in fringe, and that was in 2002! When we do salary comparisons for the contract, it would be helpful to incl. benefits as well.*
- *Thanks for providing us the opportunity for input. You are awesome!*
- *We need to go back to a tiered system to be fair to everyone. I'm tired of single payers bearing the burden.*
- *Cuesta as a County employer provides the least quality health benefits of all the county employers in the county. This affects hiring of quality staff in a already high cost of living region. Prevention is important and keeps costs down. We need 100% participation for medical, vision, and dental. I am not willing to forego step and column for any benefits improvement. The composite rate discriminates against one group of faculty.*
- *If I were to use healthy families for my kids then calpers insurance would be cheaper for us. If I were to keep my family on insurance, then Cuesta/SISC works better for us.*
- *I am only interested in switching to a CalPers plan if it is a PPO and costs less than BC Plan B for the same or better coverage. Otherwise, I have no interest in switching. BC is not good (with 80% coverage and all the other expenses), but I don't want something that costs more and/or has more restrictions--such as only SoCal providers. Thank you for the survey.*
- *Part-time faculty should have pro-rata fringe benefits. If they teach a 60% load they should get 60% of the fringe benefit. If they teach a 10% load they should get 10% of the fringe benefit. Since part-time faculty have no job security they should be allowed to receive their fringe benefits in cash and use it as they see fit.*
- *A cost increase of insurance without an increase in fringe would be very difficult to handle and so I'd probably continue opting out of buying Cuesta insurance until a later date. I'm still young and will be at Cuesta for a long time. I'll get CalPers later if it's too expensive now. I definitely want Cuesta to move to CalPers though so that we have the option of benefits after retirement.*

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- *It is crucial that I have insurance when I retire in about 5 years. I will have no insurance under my spouse at that time and will be uninsured until I am 65 (about 8 years)! It is essential that we have the PERS medical benenefit for retirees!*
- *Get the district to increase fringe money! Don't let them cheap out on us anymore.*
- *At least lets go to a tiered system!*
- *Until we can navigate to a national health care plan, I think the union should be aggressively working on options to provide employees with access to preventive care, reasonable medications, and health care that willnot bankrupt them!*
- *I do take my fringe and opt out of Cuesta's plan and instead use my spouse's.*
- *I am one of the few remaining part-time employees who opt out of the health insurance and get the fringe.*
- *You should mention at the beginning of the survey that people should review the PERS offerings prior to doing the survey*
- *As a single member, I don't want to continue paying the composite rate.*