Call to Order 7:20 p.m. by Jerry Overton GSS Chair

Reading and Approval of the Minutes: (May 5, 2013) Minutes not approved. Sen. 34 notes the minutes of the May 5, 2013 meeting are not available on-line for review. Sen. 95 moves the decision to approve or disapprove the minutes of May 5, 2013 be postponed until the September 8, 2013 meeting. Second Sen. 25. No objections.

Officer Reports:
- Chair - NR
- Vice-Chair - NR
- Secretary - NR

Committee Reports:
- Academic Affairs – NR
- Development & Philanthropy - NR
- External Affairs - NR
- Human Diversity - NR
- Internal Affairs - NR
- Problems & Projects - NR
- Public Relations - NR
- Ways & Means - NR

Special Orders:
- Open to student concerns
  Due to the inability to discuss the following bills by the GSS Executive Council… Move by Sen. 28, second Sen. 39 to bring GS13-36 to the floor to be discussed by the General Assembly as a committee of the whole. No objections, GS13-36 is brought to the floor for discussion. Floor turned over to author John Montgomery.
  JM – This legislation will basically give a raise to two of our staff members who have worked here for a very long time and for the past several years they have received no raise. We felt a raise is necessary and I yield the remainder of my time for questions.
  Sen. 2 – How many years have they gone without raises?
  JM – My understanding was three?
  Sen. 75 – How many other departments in the University provided raises for their employees this past year?
  JM – None, but the assistants work strictly for SGA and it is a government wide issue. These positions are in the code annotated for SGA and how SGA works so this is one area where we have a direct opportunity to change legislation like this.
Sen. 75 – Why have we not given these people raises for three years?
JM – you would have to talk to my predecessors.
Sen. 34 – Do you know how much money is in the general fund for this?
JM – Roughly 90 to 100 thousand dollars.
Sen. 34 – This is for SGA access?
JM – Correct
Sen. 34 – So do we have the money to cover this?
JM – Yes
Sen. 39 – Move to pass GS13-36 by unanimous consent.
Sen. 37 – Second
No objections.

- **GF13-36** “Salaries and Stipends Amendment Act of 2013” Approved by unanimous consent.
- **GF13-37** “SGA Directors Appointment Act” – not brought to the floor due to the absence of the author.
- Sen. 75 requested opportunity to address the assembly to read a letter from a constituent. The letter is posted below.

Old Business:

New Business:

Announcements:

- Nominations open for GSS Secretary – we will vote on this position at the next meeting.
- Next meeting 9/8/13 Sarkeys Energy Center, Room A235 7:00 p.m. Remember, committee meetings take place at 6:30 and count as part of your attendance requirement for your department to remain in compliance for grant funding.

Adjournment – Move to adjourn Sen. 98. Second Sen. 97. No objections. Meeting adjourned 7:41 p.m.

*Printing funded by SGA*
Copy of Letter read to GSS by Senator Jacob Vidourek

August 18, 2013
Dear French Faculty,
I hope that you have had an enjoyable summer and that you are looking forward to the new semester. I write to you to address serious GTA concerns about changes in the insurance policy provided with our assistanceships. Many GTAs were already unhappy with our former insurance plans and, while some of the changes are for the better in the new plans, other benefits have been reduced. At Thursday’s departmental orientation, Donna Benge from HR presented information about the changes. This was the first time many of us had heard of them. There had been no prior communication from the University about changes, and the new policies take effect on Monday, August 19. The general reaction from the TAs was one of confusion and frustration.
As you may be aware, the University automatically enrolls us in a basic insurance plan and we have the option of upgrading to a better plan for an additional fee. Below is a comparison of the old policies from Macori and the new policies from Academic Health Plans by Blue Cross Blue Shield (hereafter AHP).

<table>
<thead>
<tr>
<th>Comparison Between Old and New GTA Health Insurance Plans*</th>
<th>AHP Basic</th>
<th>Macori Plan I</th>
<th>AHP Enhanced</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost for 1 Student**</td>
<td>$915</td>
<td>$1,155</td>
<td>$1,540</td>
</tr>
<tr>
<td>% covered of medical visits to Goddard (no deductible)</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Deductible</td>
<td>$250 (inpatient) + $250 (outpatient)</td>
<td>$750</td>
<td>$250</td>
</tr>
<tr>
<td>Co-insurance after deductible at hospital (within PPO)</td>
<td>Usually 75% (75% at emergency room)</td>
<td>50% (50% at emergency room after $35 copay)</td>
<td>80% (100% at emergency room after $10 copay)</td>
</tr>
<tr>
<td>Doctor’s Office visit (PPO) after deductible</td>
<td>75%</td>
<td>50%</td>
<td>100% after $10 copay</td>
</tr>
<tr>
<td>Medical services outside of PPO</td>
<td>Most not covered</td>
<td>Most covered at 50% if with a referral (30% or not covered without)</td>
<td>Many have 50% coinsurance</td>
</tr>
<tr>
<td>Maximum lifetime benefit</td>
<td>$50,000 per condition (Unknown)</td>
<td>(None according to Donna Benge)</td>
<td>$1,000,000 lifetime (None according to Donna Benge)</td>
</tr>
<tr>
<td>Annual limit on covered benefits</td>
<td>None</td>
<td>$15,000</td>
<td>$5,000</td>
</tr>
<tr>
<td>Annual out-of-pocket maximum with referral</td>
<td></td>
<td></td>
<td>$10,000</td>
</tr>
</tbody>
</table>

*This is a summary and therefore a slight simplification. AHP information from 2013-2014. Macori information from 2011-2012 (2012-2013 not available on their website). For full details, I can send PDF brochures of the plans.

**Note: The University provides Plan II/AHP Basic. To upgrade, students pay the difference between Plan I and Plan II ($625) or the Enhanced Plan and the Basic Plan ($379).
In italics above are the parts of the new AHP plans which are admittedly improvements over the Macori plans. The limit per condition for Plan II was relatively low in the case of grave illness, and the lack of an out-of-pocket maximum made it likely that a student would max out the plan in such a case. The new AHP Basic plan does serve as a safety net for extreme situations.

The only obvious improvement in the new AHP Enhanced plan compared to Macori’s Plan I, which had a much higher limit than Plan II, is the disappearance of the lifetime limit. It is my understanding, though, that such limits were made illegal under the Affordable Care Act (ACA). I know that somehow Macori fit into a loophole of the ACA, and AHP has a notice at the beginning of their plan stating that it may not be in full compliance with the ACA.

**Problems: Upgraded Plan**

Although it now costs less to upgrade to the Enhanced Plan to the Basic Plan than it had to upgrade from Plan II to Plan I, the upgrade offers no apparent benefit until the full deductible has been paid. Given the $500 increase in the deductible from Plan I to the Enhanced Plan, the student would effectively be paying $250 more ([AHP upgrade cost $379 + deductible $750 = $1129] minus [Macori upgrade cost $625 + deductible $250 = $875]) before AHP would pay co-insurance. Even more disappointing is the increase in the annual out-of-pocket limit from $5,000 to $10,000, especially given that the annual income of an MLLL GTA teaching one class each semester is roughly $10,000. Doctor’s visits outside of Goddard and emergency room visits at Norman Regional are also covered at a lower rate. For those of us who had been paying for Macori’s Plan I, this change is an unwelcome reduction of benefits.

**Problems: Basic Plan**

While resolving key past concerns about the low per condition lifetime limits and the lack of an annual out-of-pocket maximum, the new Basic Plan compromises by reducing important benefits available under the old Macori Plan II. The deductible is higher and co-insurance for nearly everything in-network with a referral is lower (emergency room visits, doctor’s office visits outside of Goddard, etc.). Although this plan provides a safety net for the most extreme circumstances, it discourages students from seeking other necessary medical treatments out of fear of high bills. I know very few graduate students who have chosen to upgrade insurance plans in the past. Many feel that they cannot afford the extra expense, especially considering that MLLL GTA pay for one 5-hour class in a semester is $5,731 (before tax), and that course fees for 6 credit hours are approximately $900. However, nor can they afford the increased deductible or the reduced co-insurance. These students feel trapped and as if they do not actually have a choice. For those of us who choose to make the short-term financial sacrifice to upgrade, the increased deductible and the increased out-of-pocket maximum mean that the new upgraded plan leaves us vulnerable to much higher medical costs than the old Macori Plan I. There is no option to upgrade further.

My hope is that the University would consider (a) modifying the existing plans or (b) automatically providing the Enhanced Plan GTAs. In the latter case, it would then be preferable for a further upgrade to be available which would equal or surpass the benefits of the original Plan I.
Thank you for your attention to this matter. I would appreciate any support you can give the other GTAs and me as we seek to understand this decision by the University’s administration.

Sincerely,

Kelsey Madsen
French Graduate Teaching Assistant