



Risk Strategies Student Health Plan Annual Benchmarking Survey

Executive Summary

The goal of the survey is to establish benchmarks on college demographics and enrollment, features of student health insurance plans, and services offered by student health centers. By conducting this survey every year, we can identify trends that will help colleges and universities manage their student health plans.

The survey was conducted during summer 2021. Risk Strategies developed the survey questions and hired an independent research company to create the survey and tabulate the results. Requests for participation were sent to 1,050 colleges and universities – both clients and non-clients. Eighty-three individuals completed the survey, for a response rate of 8%. The calculated margin of error at a 95% confidence level is +/- 10.3 points.

Survey Highlights

Priorities

When asked to rate 2022 priorities from a list of potential actions, the top priority was managing student health plan costs (74%) and the second most important was improving plan value (60%). Some ways to manage costs can include increasing use of telehealth, (offered by 97% of all plans) making data driven decisions based on claim utilization, and considering alternative networks, offered by a few of the carriers. Regarding the improvement of plan value, effective communications can help students understand the value of a plan designed just for them.

Enrollment/Waiver

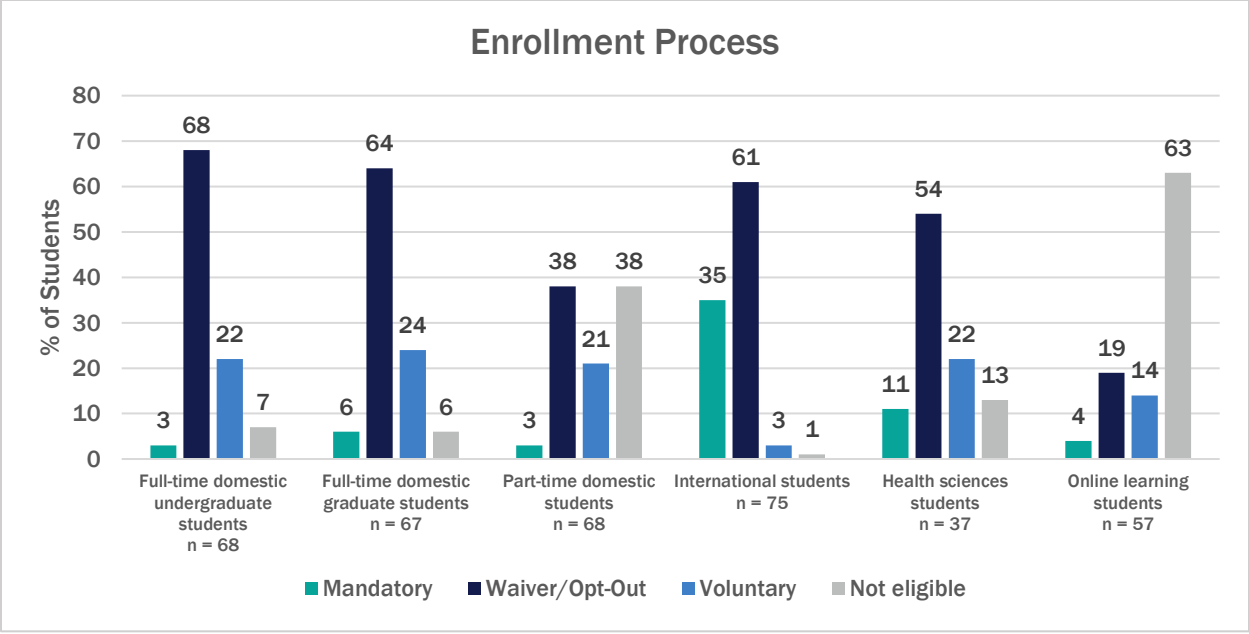
A simple, streamlined enrollment process is key to a successful student health plan. Our survey identified that the dominant process is a waiver/opt-out process. About half verify the insurance coverage that students submit for a waiver. Note that for the international students 35% of plans have mandatory insurance, which is not common for domestic students.



Improving plan value



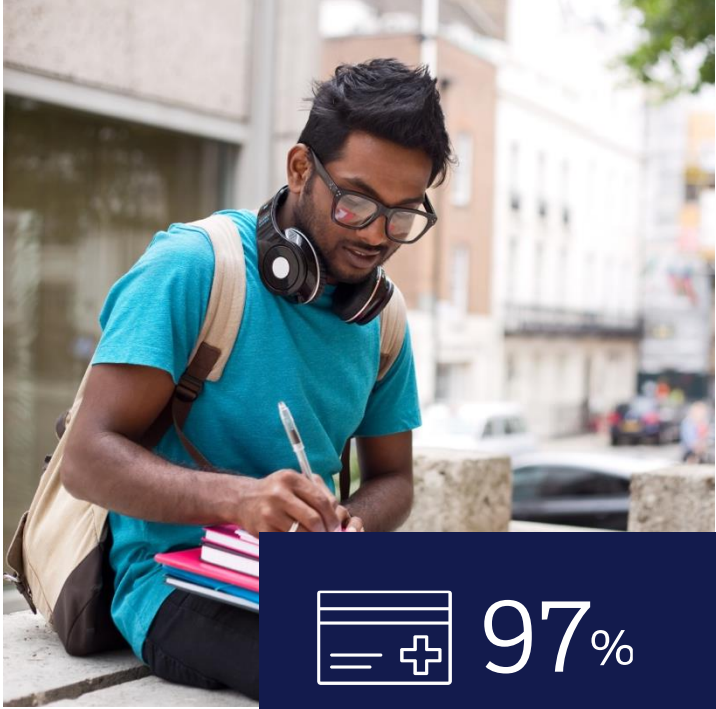
Managing student health costs



The percentage of eligible students that enroll in the plan varies by size of eligible students, ranging from 17% to 40% at small schools. The overall average enrollment across all segments is 22%.

Plan Features

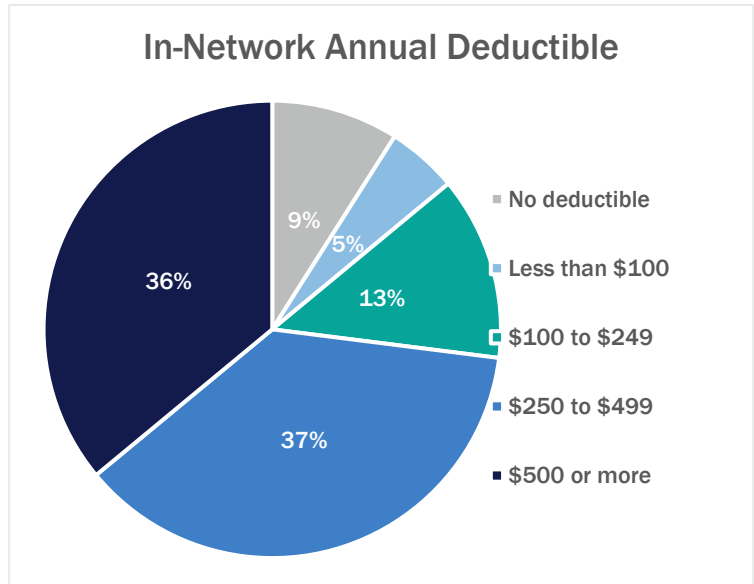
Virtually all (97%) of the plans offered are PPO plans, and most (84%) are fully insured. The top two insurance carriers are Blue Cross Blue Shield (Anthem) and Aetna.



97%

Offer a PPO plan


The calculated average in-network deductible is \$341, although this does vary by region. This is very low compared to the fact that employer sponsored high deductible plans continue to gain popularity. These plans have a minimum deductible of \$1,350 per person. Only 9% report no deductible.



For in-network primary care office visits, 80% of plans have a copay, and the calculated average copayment is \$19. Almost all (95%) of plans have an emergency room copay. The average copay of \$116 has remained stable and almost two-thirds of plans have a copy of \$150 or under.

Copays for a hospital admission are not prevalent - two-thirds of plans do not require one. Of those that do, the prevalent copay is under \$250.



 **95%**
Include telemedicine

The typical in-network coinsurance is 80%, as reported by almost 80% of the plans. The prevalent out-of-pocket expense maximums reported by 50% of the plans range between \$5,000 - \$7,500.

Nearly all (95%) plans included telehealth visits covering both physical and behavioral health, and the calculated average cost per visit is \$15. However, 42% have offer a program with \$0 copay.

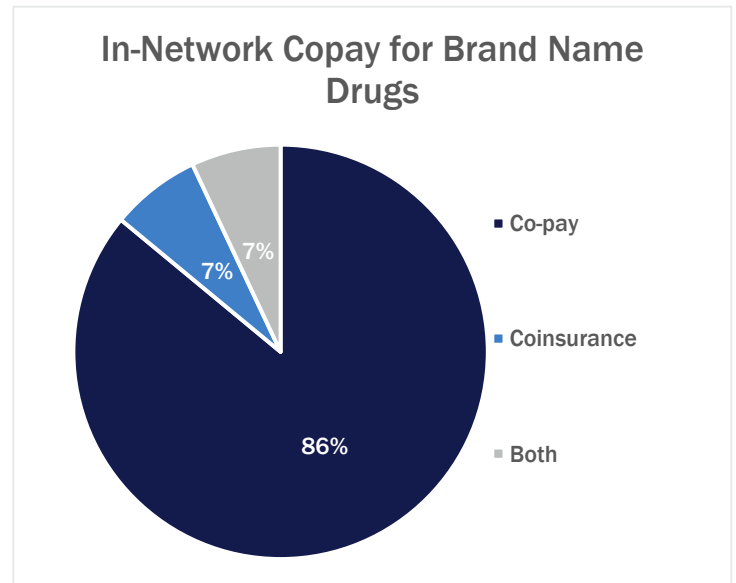
Generic prescription drug copayments remain low with an average calculated copay of \$11. A small number (7%) of institutions have moved to coinsurance for brand and specialty drugs.



Coverage Continuation

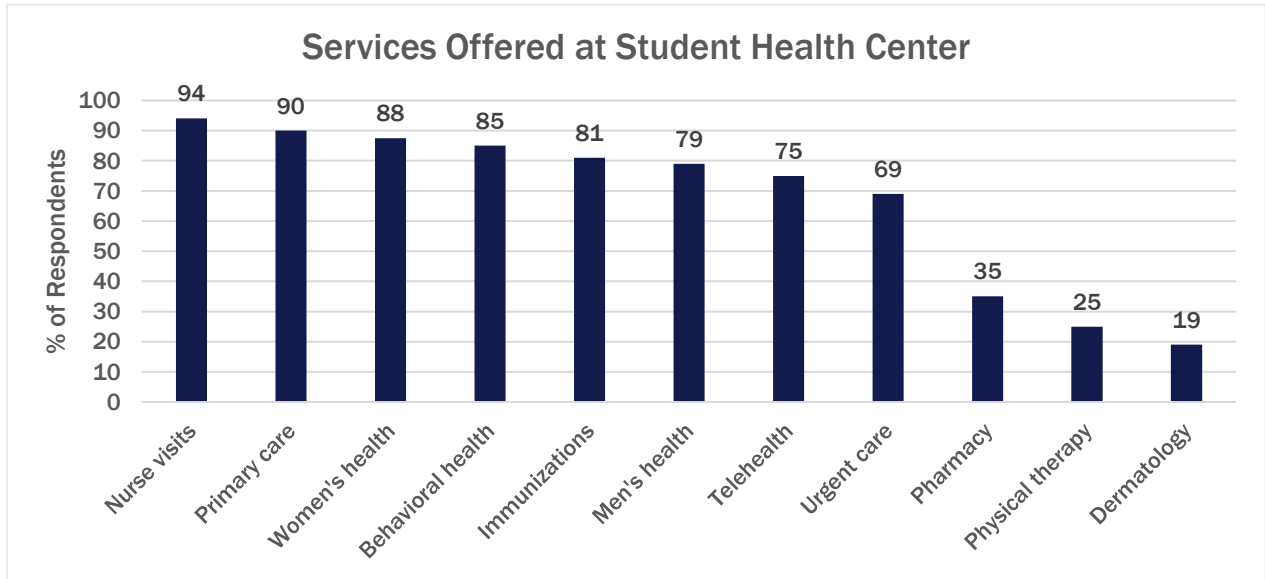
For students who graduate, coverage continues to the end of the semester in which they have enrolled, and then coverage ends. Fewer than one quarter (22%) allow graduates to continue coverage on a voluntary basis from 3 months to 6 months. Most plans (78%) offer no continuation.

Similarly, for students who need to take a leave of absence from school due to personal reasons or illness, coverage could end when it is most needed. Just under a quarter (24%) of plans extend coverage on an approved leave and most of those allow one semester.



Student Health Centers

Most (87%) of respondents have a student health center on campus, generally open 3 to 5 days a week. Over two-thirds offer primary care, including nurse visits, women's and men's health, behavioral health, immunizations, telehealth, and urgent care. Only 22% of schools require a referral from the health center when the student is on campus.



Additional Health Plans

More than half (60%) of institutions offer a dental plan. Of those most (84%) are voluntary, and the remainder (16%) are included with medical coverage.

Vision plans are also common with just under 60% of institutions offering a plan. The majority (80%) of these plans are also voluntary, while 20% are included with medical coverage.



Three out of five (60%) schools offer a dental plan, with most (84%) being voluntary



Three out of five (59%) schools offer a vision plan, with four out of five (80%) being voluntary

Student Health Plan Costs

For some institutions, student plan costs vary by segment for undergraduate, graduate, and international students, with the overall average calculated at just under \$3,000.

The average calculated rate increase across all plans for the 2021-22 plan year was 5%, with over half reporting an increase of 10% and just under 25% reporting a flat rate or no increase. Rate increases for student plans represent a challenge, and this may be driving the trend to manage plan costs as the top priority.

