

## **Faculty Senate Executive Committee Report: Observations and Considerations Regarding Healthcare Benefit Selection for the University of Central Oklahoma**

prepared by Keith Webb

As requested by the Vice President, Erika Cerda, and charged by the President of the Faculty Senate, I have had the opportunity to meet with the Benefits Advisory Group and the solicitors that made presentations regarding UCO's healthcare strategies. While all the presentations were professional and qualified groups, I agree with the members of the Benefits Administration and BOK that the two strongest candidates were Aetna and Healthcare Highways. Having now seen behind the curtain, I have gained a better understanding of the immense challenge and responsibility it is to those charged with the selection process. I have also had the privilege to meet the teams and individuals involved in this area of the administration and recognize the hard work and dedication they have to our university and to the people who serve it.

While, thankfully, it is not my position to make such a difficult decision, here are the benefits and concerns I have been asked to address regarding our current provider, Aetna, and Healthcare Highways' proposals. My comments are limited regarding the two providers and based on the information provided. They include strengths and weaknesses and the anticipated benefits to the university and those of our employees.

At this stage of the selection process, significant unknown variables are missing that make it difficult to evaluate both providers clearly, especially to the novice Benefits Advisory Group members such as myself. It would be helpful to have samples of policies, access to the Healthcare Highways app beyond the splash page, full access to the HCH website, and an indication of expected price increases for coverage in the policy tiers. It's understood that policy costs cannot be determined at this time because they are negotiated by BOK and the Benefits team in the process of policy design while factoring in the changing demographics of the UCO population and vendor costs. Likewise, both insurance providers must also anticipate and negotiate on behalf of the individual university coverage needs.

### **Considerations**

- Aetna is the current insurance incumbent provider. The UCO population's familiarity with their current plan(s) cannot be disregarded. Making a change is an important consideration given the current climate and the challenges we face in the university. A moving to a different provider will undoubtedly cause pushback by some who have become comfortable with Aetna, even though there is always an annual expectation that there will be policy changes and increased costs regardless of which selected provider. Changing to Healthcare Highways will require careful, deliberate, and generous discrimination of information by the Benefits Office to the UCO population. It was mentioned several times that both companies would provide onsite quarterly contact on campus. Additional energy will be needed to quell any pushback from the population if the Benefits Office and BOK recommend changing to HCH.

- Name Recognition

The Aetna brand is recognized within the general population as a quality provider and is a plus compared to the lesser-known Healthcare Highways brand. While this does not necessarily impact the university's institutional fiduciary responsibility or those of the individual policyholder, employee perception may be that the university has elected to move to a provider with lesser coverage while paying increased out-of-pocket and deductions. Again, this is where educating the UCO population about the advantages of changing providers will be necessary.

- Aetna's Integris Hospital Preferred

This is both a pro and a con. While the healthcare network's reputation remains highly ranked among Oklahoma hospitals, Integris has only recently opened emergency care in the Norman area. Healthcare Highways seems to be able to provide and include a broader range of resources that can be tailored to the individual member.

- Familiarity with app and website interfaces for policyholders. This is most likely the second resource after a referral from their primary care provider. Members will turn to the insurance provider's website and app for further information regarding coverage and specialty care. As mentioned, this is important in how their insurance provider is perceived and, conversely, what the university provides. At this time, HCH's user interface is unknown regarding its app. After further investigation, the HCH website does include a searchable doctor, hospital, and specialty care search. However, other content is still unknown compared to the accessible Aetna website and app. This would be important to know for several reasons. Content and medical provider resources are primary considerations. The ease of user interface will affect the perception of the quality of the provider, which may, in turn, either decrease or increase the outlook and pushback from the decision the Benefits team makes.

- Benefits and BOK have indicated that Aetna has limitations with the Integris Preferred plan. Faculty and Staff who wish to go to other medical providers are limited, especially with those wanting to access the OU and Mercy Health System. HCH seems to include more fluidity in allowing our personnel the ability to choose their preferences.

- With the increased need and concern for mental wellbeing, the benefits team recognizes the importance of providing more robust resources in this area. Currently, it seems under-supported with what we have through Aetna. This is not to say that this cannot change as the Benefits team moves forward in its negotiations with either company. HCH has made a better presentation regarding what might be possible. If the strength of HCH is its more inclusive medical care flexibility, I hope that mental health resources might also follow suit.

Again, these are my observations and opinions based on the information gleaned from meeting with the Benefits Advisory Group. Additionally, I urge the Benefits team and BOK to consider insurance fatigue of constantly changing providers and how to address that to the university's population. Definitely choosing one provider at this point is difficult without all the information referred to earlier in this summary. However, given what we know, Healthcare

Highways may be a better selection for UCO if the concerns of employee education -how changing providers advantages our employees, service, and most importantly, cost vs. care.

Respectfully,

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