

RACHEALTH Meeting July 26, 2007

Attendees:

Betsey Neely	Leslie Cottrell	Troy Spicer	Joanne Nobles
Cori Loftis	Jill Miller	Alice Loper	Karen Blackburn
Tonya Lam	Kathryn Siggelko	Sonja Chafin	Janet Prough
Jean Chin	Anne Nichols	Gloria Jones	
Johnnie Pollard	Cindy Smith	Allison Kerr	

Guests – Rocky and Carolyn Pearce, Pearce & Pearce Insurance

The meeting was opened with the introduction of Betsey Neely, Associate Vice Chancellor for Legal Affairs.

She provided the group with a copy of a memo that went to the Chancellor regarding the USO Risk Management Task Force, with an added emphasis on student mental health.

This committee is generated and managed by the office of legal affairs.

The BOR is aware that student mental health is a complex issue involving confidentiality, ethical, and legal relationships regarding students. They also acknowledge that Health Centers are being asked to do a lot with a little regarding mental health.

This task force has been charged with developing protocols for crisis management of student behaviors. MCG has offered their services to help with this process. Leslie Cottrell from W. Ga. said they have effective protocols for this situation and will send them to the group. Leslie will also send a copy to Betsey.

It was shared that the University presidents would be surveyed in 2008 for their needs.

Betsey would like this group to review their own procedures, assess the needs and email her back on the status of their campus. She has asked for heightened priority on this request.

Things to consider are:

- Your institutions mission statement and what it covers and does not cover.
- Developing a “worry list” and a team to address students who appear on the list.
- A process for tagging “Medical Withdrawal” students and what their reentry requirements would be.
- Reinstatement letter should include that they could withstand living in residence halls, withstand the pressures of college life.
- An appeal process should be developed for students denied readmission.
- How is the student tracked after reentry.
- What happens if the student does not meet the reentry condition(s).
- Checking the BOR policy sec. 400 a student may be enrolled or be enrolled only after meeting requirements of the institution.

- Striking a balance between risk management and student needs.
- Educate faculty on what to do, what is available.
- Training

It was determined that issues are the same across campuses, but resources may vary.

All of these items may be addressed in the W. Ga. Protocols, but we need to be thinking about how each of our institutions is handling these types of issues.

Betsey did ask for a list of all Health Center Directors. Cori can send this to Betsey.

Tonya polled the group on having a combined CAPS Directors and Health Center Directors meeting. Full agreement was expressed.

If you want to volunteer to facilitate a medical workshop please let Betsey and Tonya know.

Cindy shared that they are working with emergency rooms and mental health centers to identify students that are coming back to campus.

Malpractice

The questions asked were: What is covered? Who is covered?

DOAS carries insurance for activities performed within the scope of their job. Betsey will check into employee status (temp, PT or Perm, who is covered).

BOR has access to special assistants to the attorney general to help w/malpractice.

Private malpractice insurance may be a problem because you may be required to use the attorney provided by the insurance company and lose the right to be represented by the attorney generals office.

Betsey did clarify that if you volunteer, it is separate and not covered.

Since all Universities are different, please email Betsey with specific details regarding your question of coverage for malpractice and she will research with DOAS and answer you back.

Discussion ensued and it seems that the employee status determines if they are covered.

Two possible solutions were to look within the system (USG) for alternate physician or to hire the alternate physician for a small amount of money so they get a paycheck and are coded as a University employee.

Health Insurance

Carolyn and Rocky Pearce spoke at length about the student health insurance. All brochures are now on-line and hard copies of the brochures have been shipped.

If you have not received any brochures for your area, please email Carolyn (cpearce@pearceandpearce.com) and she will send you as many as you request.

You can also customize your website. Take a look at Macon State's website for ideas.

The prescription portion of the plan is being handled by Xpress Scripts.

There was a long discussion regarding coding. Issues are:

Code for suspicious moles for removal. Jill from MCG gave code# 238.8 for uncertain behavior neoplasm.

Code for genital wart removal

Code that encompasses gonorrhea and Chlamydia since many institutions use 1 test for both diseases.

Why is a PPD not covered? Is there a code?

It was also asked of P&P to put the Georgia Mandates on the website.

Carolyn has been sent a memo addressing these issues and asked to get back to the group with her findings.

Riders

There are 3 new riders for this year. They are:

Wellness - \$174 annually

Accident (Needle stick) - \$16 annually

Athletic – 10k or 40k (excluding football)

If an institution wants any of these riders, it would apply to all mandatory plans.

Tonya has asked the group to reply back to the BOR on the following issues for health insurance:

- What changes do you want as Health Centers?
- Any additional riders?
- Do we want to recommend hard waivers?

Please send these answers to Cori.

Pearce and Pearce have information from other schools that went to hard waivers regarding enrollment etc.

Immunizations

A long discussion ensued regarding immunizations. The key points and decisions are:

RACHEALTH will write a recommendation to the BOR stating we feel all students are to provide documentation immunization. Anne will send a draft to the group. Tonya has a memo she is taking to the November meeting that will change the BOR policy to state all students must provide immunization documentation.

Tonya would like this group to come up with a Best Practice for documentation that is accepted for proof of immunization. A long discussion about chickenpox documentation came up. The Best Practice would be a minimum recommendation with institutions able to write their own policy about what they will and will not accept.

Next Meeting

The next meeting will coincide with the fall Pearce and Pearce meeting in Florence SC. The date and time are to be announced.

Respectfully submitted on July 27, 2007 by Kathryn Siggelko
RACHEALTH Secretary