



# Student Health Program

**Academic Years 2005-2006 through 2007-2008  
Baseline Report  
November 2009**

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Commonwealth of Massachusetts

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Lieutenant Governor



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# Student Health Program

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# About This Report

The *Student Health Program Baseline Report* is the first comprehensive report on the Student Health Program (SHP) from the Division of Health Care Finance and Policy (DHCFP) and aims to:

- Provide an overview of SHP enrollment and financial performance at Massachusetts colleges and universities,
- Serve as a baseline for SHP comparisons in the future, and
- Improve transparency within the SHP marketplace.

## Major Findings

The major findings of this report include:

- Over 95,000 students purchase health insurance through their schools each year.
- Student Health Program benefits vary greatly by school. While SHPs are required to provide a minimum set of benefits to students, schools often tailor their SHPs to meet the needs of their students.
- The average SHP premium is \$1,216 per year, but there is a wide range of premiums among schools. Some schools achieve lower than average premiums through limiting benefit coverage. Students enrolled in SHPs offering lower levels of coverage may experience significant out-of-pocket expenses due to coverage gaps.
- Student Health Program enrollment is concentrated among a small number of national insurance carriers. This market dynamic may have contributed to the higher average profit margins realized by SHP carriers compared to those seen in private insurance products in Massachusetts.

This report reflects data for the academic years of 2005-2006, 2006-2007, and 2007-2008. It is important to note that premiums reported do not include university/college administrative or health center fees (for schools that have them). Schools also did not include data on services provided at student health centers. A brief description of the analytic methodology relevant to each data table is provided at the bottom of each page. Additional information is available in the Appendix.

DHCFP would like to thank Nancy Turnbull of the Harvard School of Public Health for her strategic and analytic support in the development of this report. We also thank Dianna Welch and Gregory Herrle from Oliver Wyman Actuarial Consulting, Inc. for their support and review of the data. Finally, we thank the staff at schools, insurance carriers, and insurance brokers for their continued timely responses to our requests for data.

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# About the Student Health Program

The Student Health Program (SHP) statute (MGL C. 15A § 18) requires:

- Students enrolled at Massachusetts institutions of higher education to have health insurance, and
- Schools to offer health insurance to their students.

The regulation (114.6 CMR 3.00) sets the requirements for a SHP and the criteria for students with health insurance from another source to waive participation through their school's SHP. The SHP regulation applies to students enrolled in at least 75% of a full-time course load and public or private colleges and universities under the purview of the Massachusetts Department of Higher Education.

Student Health Programs are currently required to offer reasonably comprehensive coverage of health services, including preventive and primary care, emergency services, surgical services, hospitalization benefits, ambulatory patient services, and mental health services. Student Health Programs must provide at least a \$50,000 maximum aggregate indemnity benefit per illness or injury. Any fully insured SHP must also include all Massachusetts mandated benefits. Student Health Programs must also provide coverage for a 52-week period, students who are away from campus for any reason, and Christian Science healing practices.

Student Health Programs may also:

- Contain reasonable exclusions and limitations, including different benefit levels for in-network and out-of-network providers,
- Include reasonable co-payments and deductibles (total annual deductible may not exceed \$250 per year),
- Exclude charges reimbursable by another health plan,
- Exclude coverage for injuries resulting from participation in intercollegiate athletics (if the service is covered under another health insurance of equal or better coverage),
- Provide some or all of its SHP benefits through an on-campus student health service, and
- Exceed the minimum benefit levels.

Schools may tailor SHPs to fit their student population and join with other schools to realize savings through collective bidding of their SHPs.

# Student Health Program Insurance Carriers

- For the academic years beginning 2005-2007, the following 14 insurance carriers underwrote Student Health Programs (SHPs) in Massachusetts:
  - Aetna Life Insurance Company (Aetna)
  - Blue Cross Blue Shield of Massachusetts, Inc. (BCBS)
  - BCS Insurance Company (BCSI)
  - Combined Insurance Company of America (Combined)
  - Gerber Life Insurance Company (Gerber)
  - HPHC Insurance Company, Inc. (HPIC)
  - Markel Insurance Company (Markel)
  - The MEGA Life & Health Insurance Company (MEGA)
  - Monumental Life Insurance Company (Monumental)
  - Nationwide Life Insurance Company (Nationwide)
  - Pioneer American Insurance Company (Pioneer)
  - Security Mutual Life Insurance Company of New York (Security Mutual)
  - Tufts Insurance Company (Tufts)
  - United HealthCare Insurance Company (United)
- Four schools self-fund their Student Health Programs
  - Harvard University
  - Episcopal Divinity School (purchased SHP through Harvard University)
  - Massachusetts Institute of Technology
  - Northeastern University

**Notes:** The report includes data from the 2005-2006, 2006-2007, and 2007-2008 academic years. People's Benefit Life Insurance Company merged into Monumental Life Insurance Company in October 2007; for analysis purposes, schools with People's were considered as part of Monumental. Northeastern University began self-funding their SHP in the 2006-2007 academic year; the 2005-2006 SHP was underwritten by an insurance carrier.

**Source:** DHCFP Student Health Program 2005, 2006, and 2007 Performance Metrics dataset as of 8/25/09.

# Schools by Category (1 of 2)

## Community Colleges (16)

Berkshire Community College  
 Bristol Community College  
 Bunker Hill Community College  
 Cape Cod Community College  
 Greenfield Community College  
 Holyoke Community College  
 Massasoit Community College  
 MassBay Community College  
 Middlesex Community College  
 Mount Wachusett Community College  
 North Shore Community College  
 Northern Essex Community College  
 Quincy College\*

Quinsigamond Community College  
 Roxbury Community College  
 Springfield Technical Community College

## Self-Funded Schools (4)

Harvard University  
 Episcopal Divinity School  
 Massachusetts Institute of Technology  
 Northeastern University

## State Colleges (7)

Bridgewater State College  
 Fitchburg State College  
 Framingham State College  
 Massachusetts College of Liberal Arts  
 Salem State College  
 Westfield State College  
 Worcester State College

## UMass Schools (5)

University of Massachusetts at Amherst  
 University of Massachusetts Boston  
 University of Massachusetts Dartmouth  
 University of Massachusetts Lowell  
 University of Massachusetts Medical School

## Other Schools (86)

See next page for list of schools

There are 118 schools that provided Student Health Program (SHP) performance metrics data for the 2005-2006 through 2007-2008 academic years.

Grouping schools into these categories allows DHCFP to compare data among various public and private schools throughout Massachusetts.

**Notes:** The report includes data from the 2005-2006, 2006-2007, and 2007-2008 academic years. Two state schools (Massachusetts College of Art and Design and Massachusetts Maritime Academy) and 4 other schools (Cambridge College, Marian Court College, Fisher College, and Hellenic College) have not submitted any Performance Metrics data as of 8/25/09. Northeastern University is categorized as an other school for the 2005-2006 academic year and as a self-funded school for the 2006-2007 and 2007-2008 academic years.

\* Municipally funded

**Source:** DHCFP Student Health Program 2005, 2006, and 2007 Performance Metrics dataset as of 8/25/09.

# Schools by Category (2 of 2)

## Other Schools (86)

American International College	Emmanuel College	Olin College
Amherst College	Endicott College	Pine Manor College
Andover Newton Theological Seminary	FINE Mortuary College	Regis College
Anna Maria College	Gibbs College-Boston	Saint John's Seminary
Assumption College	Gordon College	School of the Museum of Fine Arts
Atlantic Union College	Gordon-Conwell Theological Seminary	Simmons College
Babson College	Hampshire College	Simon's Rock College of Bard
Bay Path College	Hebrew College	Smith College
Bay State College	Hult International Business School	Smith College for Social Work
Becker College	ITT Technical Institute-Woburn	Southern New England School of Law
Benjamin Franklin Institute of Technology	ITT Technical Institute-Norwood	Springfield College
Bentley University	Lasell College	Stonehill College
Berklee College of Music	Lesley University	Suffolk University
Blessed John XXIII National Seminary	Longy School of Music	The Boston Conservatory
Boston Architectural College	Massachusetts College of Pharmacy and Health Services	The National Graduate School of Quality Management
Boston Baptist College	Massachusetts School of Law	The New England Institute of Art
Boston College	Massachusetts School of Professional Psychology	Tufts University
Boston Graduate School of Psychoanalysis	Merrimack College	Tufts University School of Medicine
Boston University	MGH Institute of Health Professions	University of Phoenix
Brandeis University	Montserrat College of Art	Urban College of Boston
Caritas Laboure College	Mount Holyoke College	Wellesley College
Clark University	Mount Ida College	Wentworth Institute of Technology
College of the Holy Cross	New England College of Finance	Western New England College
Conway School of Landscape Design	New England College of Optometry	Wheaton College
Curry College	New England Conservatory of Music	Wheelock College
Dean College	New England School of Acupuncture	Williams College
Eastern Nazarene College	New England School of Law	Woods Hole Oceanographic Institute
Elms College	Newbury College	Worcester Polytechnic Institute
Emerson College	Nichols College	

**Notes:** This report includes data from the 2005-2006, 2006-2007, and 2007-2008 academic years. Cambridge College, Marian Court College, Fisher College, and Hellenic College have not submitted any performance metrics data as of 8/25/09. Northeastern University is categorized as an other school for the 2005-2006 academic year and as a self-funded school for the 2006-2007 and 2007-2008 academic years.

**Source:** DHCFP Student Health Program 2005, 2006, and 2007 Performance Metrics dataset as of 8/25/09.

# Schools that Purchase Student Health Programs Together

## All 15 Community Colleges and Quincy College

Berkshire Community College  
 Bristol Community College  
 Bunker Hill Community College  
 Cape Cod Community College  
 Greenfield Community College  
 Holyoke Community College  
 Massasoit Community College  
 MassBay Community College  
 Middlesex Community College  
 Mount Wachusett Community College  
 North Shore Community College  
 Northern Essex Community College  
 Quincy College  
 Quinsigamond Community College  
 Roxbury Community College  
 Springfield Technical Community College

## Six of Nine State Colleges

Bridgewater State College  
 Fitchburg State College  
 Framingham State College  
 Massachusetts College of Art and Design  
 Massachusetts College of Liberal Arts  
 Massachusetts Maritime Academy

## Eight Schools Purchase SHPs through the American College Student Association

Boston Graduate School of Psychoanalysis  
 Cambridge College  
 Caritas Laboure College  
 Conway School of Landscape Design  
 FINE Mortuary College  
 Marian Court College  
 Massachusetts School of Professional Psychology  
 Urban College of Boston

## Other Schools that Purchase Together

Blessed John XXIII National Seminary and Saint John's Seminary  
 Episcopal Divinity School and Harvard University  
 Hebrew College and Simmons College  
 ITT Woburn and ITT Norwood

## Two Schools Offer Students the Same Insurance as the School's Employees

MGH Institute of Health Professionals  
 Woods Hole Oceanographic Institute

The Student Health Program (SHP) regulation allows schools to group together with other schools to pursue savings through a collective purchasing process.

There are a variety of ways schools group together to maximize savings through group purchasing from the 2005-2006 through 2007-2008 academic years.

**Notes:** The report includes data from the 2005-2006, 2006-2007, and 2007-2008 academic years. Massachusetts College of Art and Design, Massachusetts Maritime Academy, Cambridge College, and Marian Court College have not submitted any Performance Metrics data as of 8/25/09.

**Source:** DHCFP Student Health Program 2005, 2006, and 2007 Performance Metrics and Fall Enrollment datasets as of 8/25/09. E-mail from American College Student Association on 6/18/09.



# Student Enrollment Overview

Academic Year	2005-2006	2006-2007	2007-2008
Total Number of Students Subject to Student Health Requirement	360,048	360,437	361,548
Number of Students Covered by Comparable Coverage	262,835	263,119	263,930
Number of Students Enrolled in Student Health Programs	97,213	97,318	97,618
Percentage Students Enrolled	27%	27%	27%

Students must have health insurance coverage in order to attend colleges and universities in Massachusetts.

More than 360,000 students each academic year are required to have health insurance while they attend school in Massachusetts.

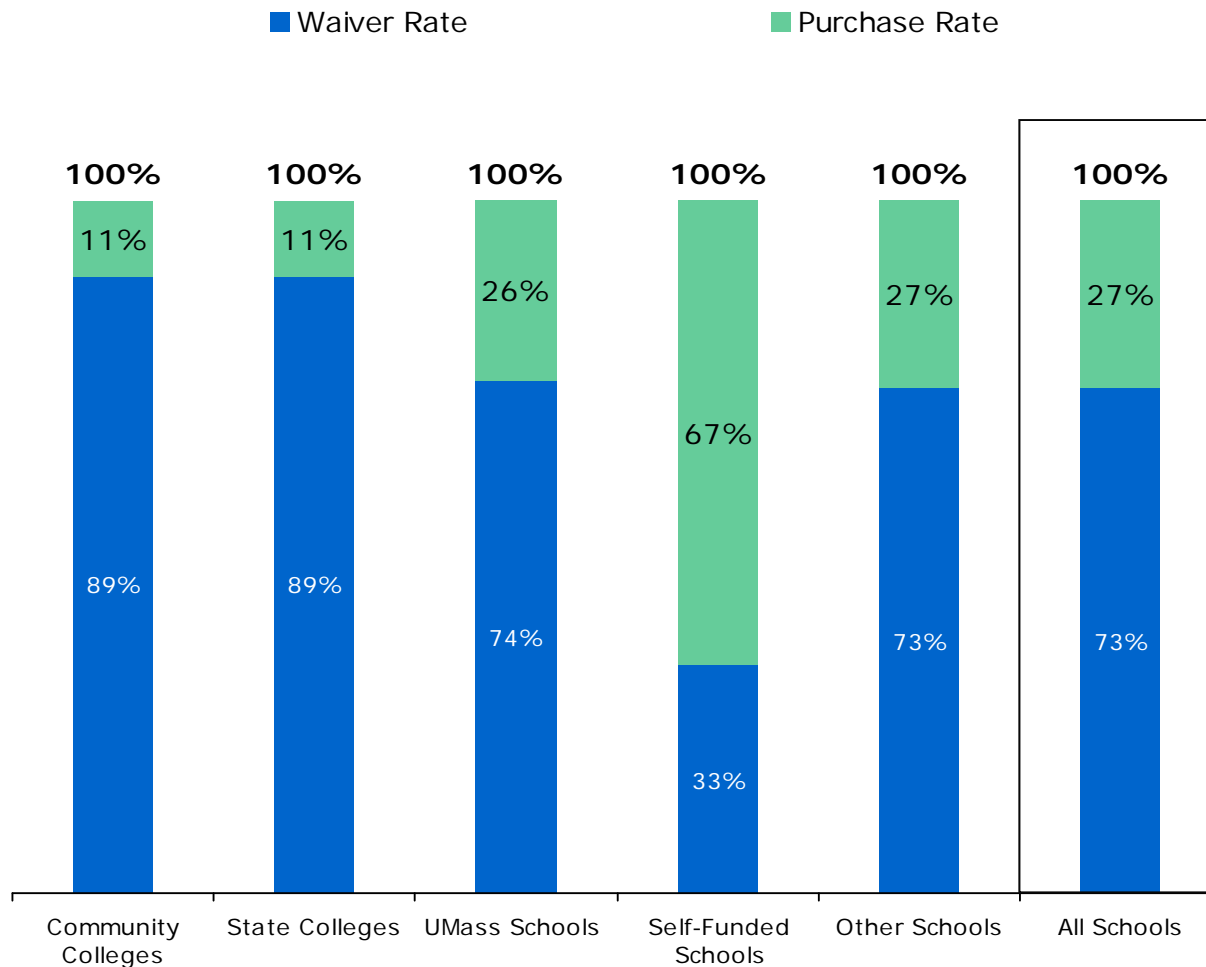
Most students (73%) have health insurance through their parents, spouse, or employer that provides coverage at least comparable to the school's Student Health Program (SHP).

Approximately 97,000 students (27%) purchase health insurance through their schools.

**Notes:** The analysis excludes schools that did not submit student enrollment data. DHCFP used data from schools' Fall Enrollment filings to supplement missing enrollment data from Performance Metrics; however, there are still some schools that did not provide enrollment data. Percentages are rounded to the nearest whole percent.

**Source:** The number of students who purchased SHP is from DHCFP Student Health Program 2005, 2006, and 2007 Performance Metrics and Fall Enrollment datasets as of 8/25/09. The percentage of students who purchased and waived is from DHCFP Student Health Program 2005, 2006, and 2007 Fall Enrollment dataset as of 8/25/09. The remaining enrollment numbers are calculated using the available data.

# Waiver and Purchase Rates by School Category, Three-Year Average



Students must have health insurance coverage in order to attend colleges and universities in Massachusetts.

Students may either purchase the Student Health Program (SHP) offered by their schools or waive their school's SHP if they have existing coverage that is at least comparable to the school's SHP.

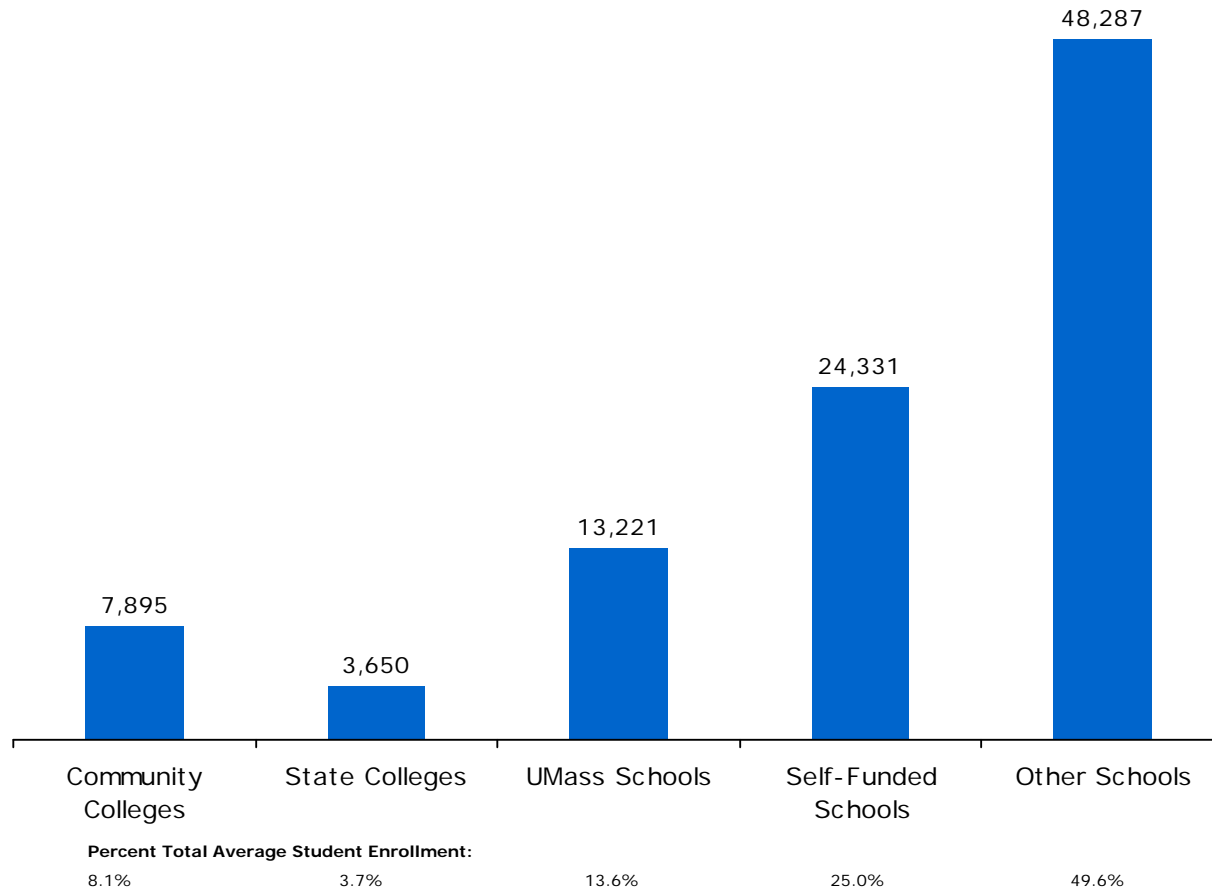
State and community colleges have the highest waiver rate (89%) among schools.

Self-funded schools have the lowest waiver rate (33%), which is likely due to the higher proportion of graduate students at self-funded schools.

**Notes:** Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide student enrollment data. DHCFP used data from schools' Fall Enrollment filings to supplement missing enrollment data from Performance Metrics; however, there are still some schools that did not submit enrollment data. Northeastern University is categorized as an other school for the 2005-2006 academic year and as a self-funded school for the 2006-2007 and 2007-2008 academic years. Percentages shown are a three-year weighted average for the 2005-2006 through 2007-2008 academic years; the weighted average is calculated using the numerical totals for each school category for each academic year and calculating the mean of the three resulting percentages. Percentages are rounded to the nearest whole percent.

**Source:** DHCFP Student Health Program 2005, 2006, and 2007 Fall Enrollment dataset as of 8/25/09.

# SHP Student Enrollment by School Category, Three-Year Average



The four schools who self-fund their Student Health Program (SHP) account for 25% of all students enrolled in SHPs.

Students enrolled in SHPs at the five UMass schools comprise 14% of all SHP students.

Students enrolled in SHPs at the 15 community colleges and Quincy College account for 8% of the SHP enrolled population.

Of the remaining enrolled students, 4% attend state colleges and 50% attend other schools.

**Notes:** Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide student enrollment data. DHCFP used data from schools' Fall Enrollment filings to supplement missing enrollment data from Performance Metrics; however, there are still some schools that did not submit enrollment data. Northeastern University is categorized as an other school for the 2005-2006 academic year and as a self-funded school for the 2006-2007 and 2007-2008 academic years. Numbers shown are a three-year weighted average for the 2005-2006 through 2007-2008 academic years; the weighted average is calculated using the numerical totals for each school category for each academic year and calculating the mean of the three resulting totals. Numbers are rounded to the nearest whole number.

**Source:** DHCFP Student Health Program 2005, 2006, and 2007 Fall Enrollment dataset as of 8/25/09.

# SHP Student Enrollment by Insurance Carrier, Three-Year Average

	Number of Schools	Number of Students Enrolled	Percent of Total Students Enrolled
Aetna	21	32,737	33.3%
Self-Funded	4	24,331	24.7%
Nationwide	40	16,633	16.9%
Combined	11	6,458	6.6%
MEGA	6	4,353	4.4%
HPIC	3	3,835	3.9%
Markel	7	2,041	2.1%
Monumental	4	1,919	1.9%
Security Mutual	6	1,741	1.8%
Tufts	1	1,572	1.6%
BCBS	3	1,364	1.4%
United	5	665	0.7%
BCSI	1	370	0.4%
Pioneer	1	339	0.3%
Gerber	1	62	0.1%

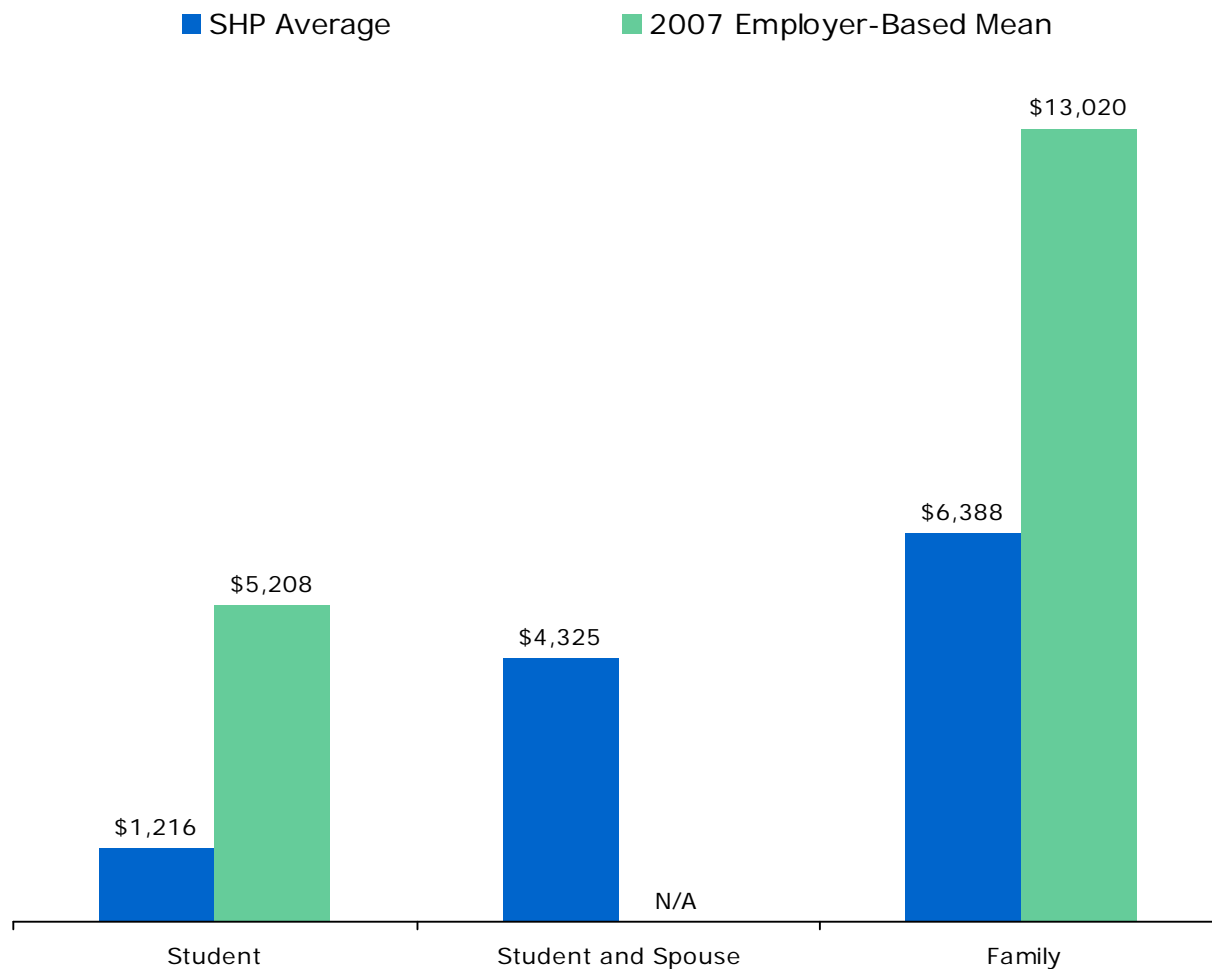
Fourteen insurance carriers underwrite Student Health Programs (SHPs) in Massachusetts.

The majority of students are enrolled in an Aetna, self-funded, or Nationwide SHP, representing 74.9% of the total enrolled student population.

**Notes:** Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide student enrollment and valid insurance carrier data. DHCFCP used data from schools' Fall Enrollment filings and benefit brochures to supplement missing enrollment and missing or inaccurate carrier data from Performance Metrics; however, there are still some schools that did not submit enrollment or carrier data. DHCFCP assumed that schools with Chickering or United HealthCare Student Resources as their carrier had Aetna or United, respectively, as their actual carrier. Numbers shown are a three-year weighted average for the 2005-2006 through 2007-2008 academic years; the weighted average is calculated by computing a numerical total for each carrier for each academic year and calculating the mean of the three resulting totals. The average percentages are calculated using the numerical totals for each carrier for each academic year and calculating the mean of the three resulting percentages. Numbers are rounded to the nearest whole number and percentages are rounded to the nearest tenth of a percent.

**Source:** DHCFCP Student Health Program 2005, 2006, and 2007 Performance Metrics and Fall Enrollment datasets as of 8/25/09.

# Average Annual Premium for All Schools, Three-Year Average



On average, students paid \$1,216 for health insurance each academic year during the three-year period.

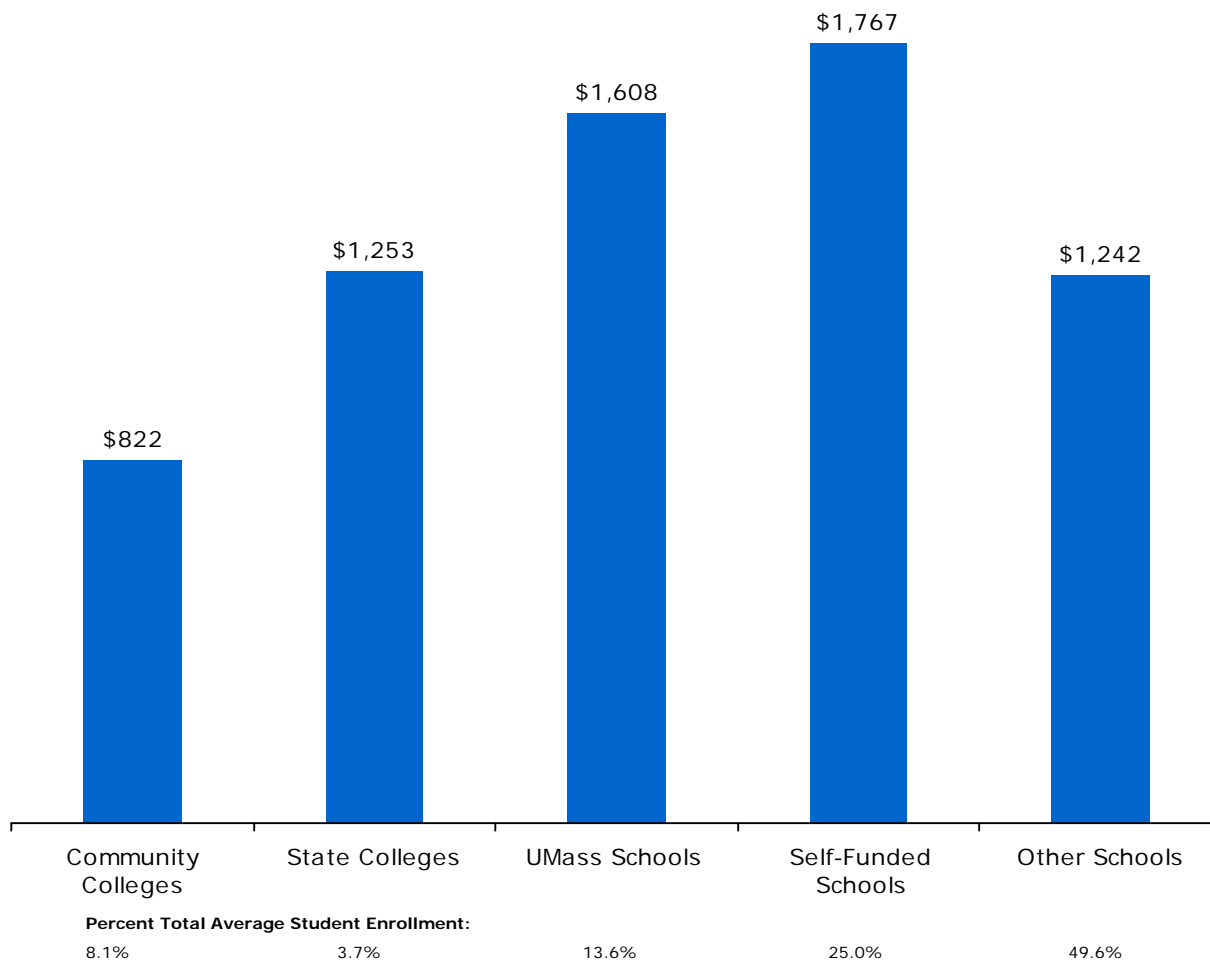
On average, Student Health Program (SHP) coverage for a student and his/her spouse costs \$4,325. The average SHP premium for family coverage is approximately \$6,300.

Premiums vary significantly across schools. These differences result, at least in part, because of benefit differences.

Additional premium information for individual schools is available in the Appendix.

**Notes:** The analysis excludes schools that did not provide annual premium data for each of the categories. Schools are not required to offer SHPs to spouses or families. Premiums may vary due to the range of benefits covered by the SHP and the scope of services provided at on-campus student health centers. Student health centers may lower premiums, as some medical expenses will be covered exclusively through school, and not insurance carrier, resources. Employer-based premiums are total premiums including both the employer and employee share. SHP numbers shown are a three-year weighted average for the 2005-2006 through 2007-2008 academic years; the weighted average is calculated by computing a numerical total for each school category for each academic year and calculating the mean of the three resulting totals. Premiums are rounded to the nearest whole dollar.  
**Source:** DHCFP Student Health Program 2005, 2006, and 2007 Performance Metrics dataset as of 8/25/09. Employer-based mean comparison data from 2007 DHCFP Employer Survey.

# Student Premiums by School Category, Three-Year Average



Premiums may vary due to the level of health benefits covered by each Student Health Program (SHP).

On average, community college students pay the lowest premiums for health insurance each academic year.

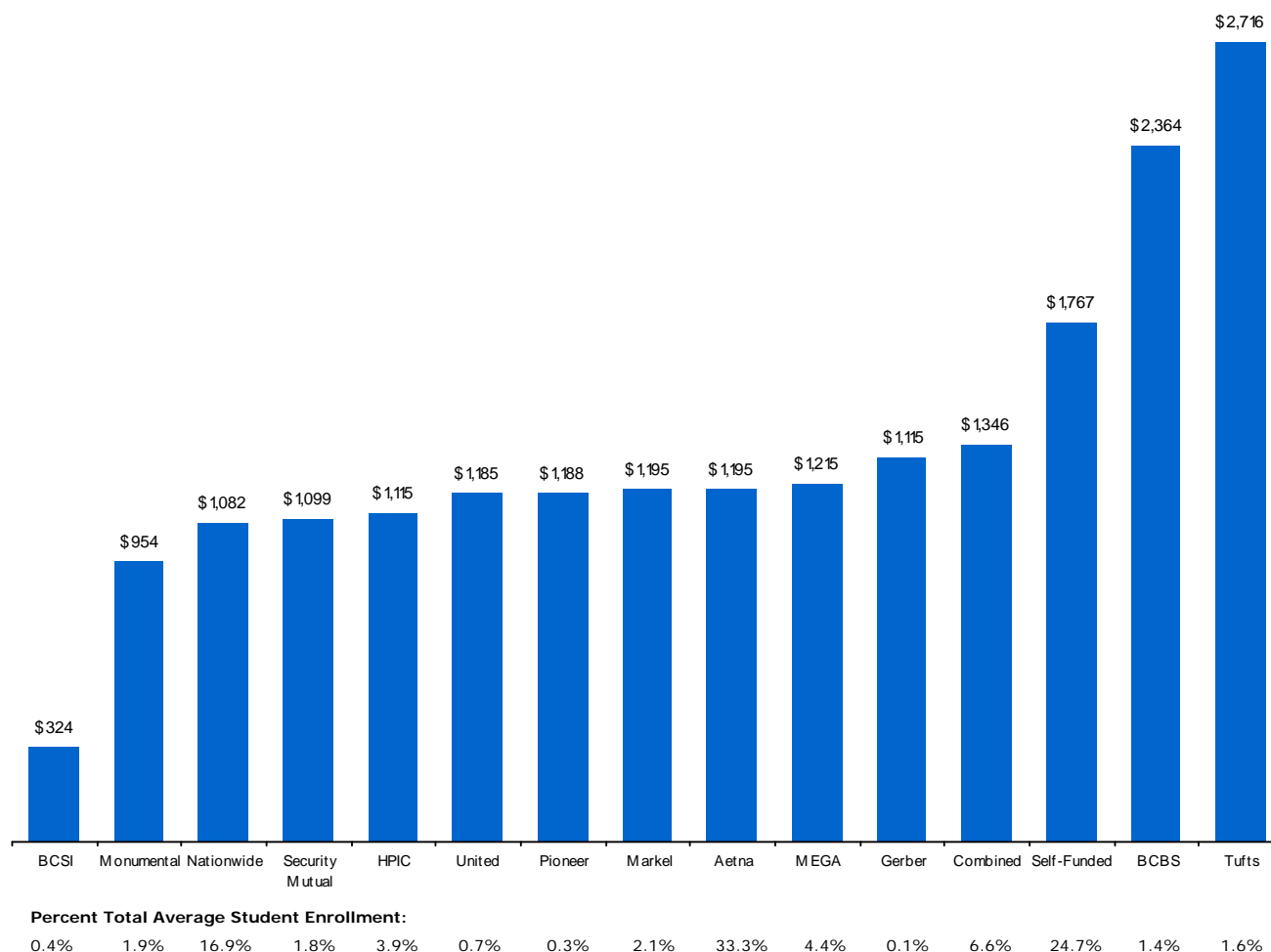
Students enrolled at schools who self-fund their SHP pay the most for health insurance each year.

Additional premium information for individual schools is available in the Appendix.

**Notes:** Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide annual premium data for students only. Premiums may vary due to the range of benefits covered by the SHP and the scope of services provided at on-campus student health centers. Student health centers may lower premiums, as some medical expenses will be covered exclusively through school, and not insurance carrier, resources. Northeastern University is categorized as an other school for the 2005-2006 academic year and as a self-funded school for the 2006-2007 and 2007-2008 academic years. Numbers shown are a three-year weighted average for the 2005-2006 through 2007-2008 academic years; the weighted average is calculated by computing a numerical total for each school category for each academic year and calculating the mean of the three resulting totals. Premiums are rounded to the nearest whole dollar.

**Source:** DHCFCP Student Health Program 2005, 2006, and 2007 Performance Metrics dataset as of 8/25/09.

# Student Premiums by Insurance Carrier, Three-Year Average



The three-year average premium by carrier for a Student Health Program (SHP) ranged from \$324 to \$2,716 per student per year.

Premiums vary due to the range of benefits covered by the SHP. Schools may provide benefits that exceed the minimum regulatory requirements.

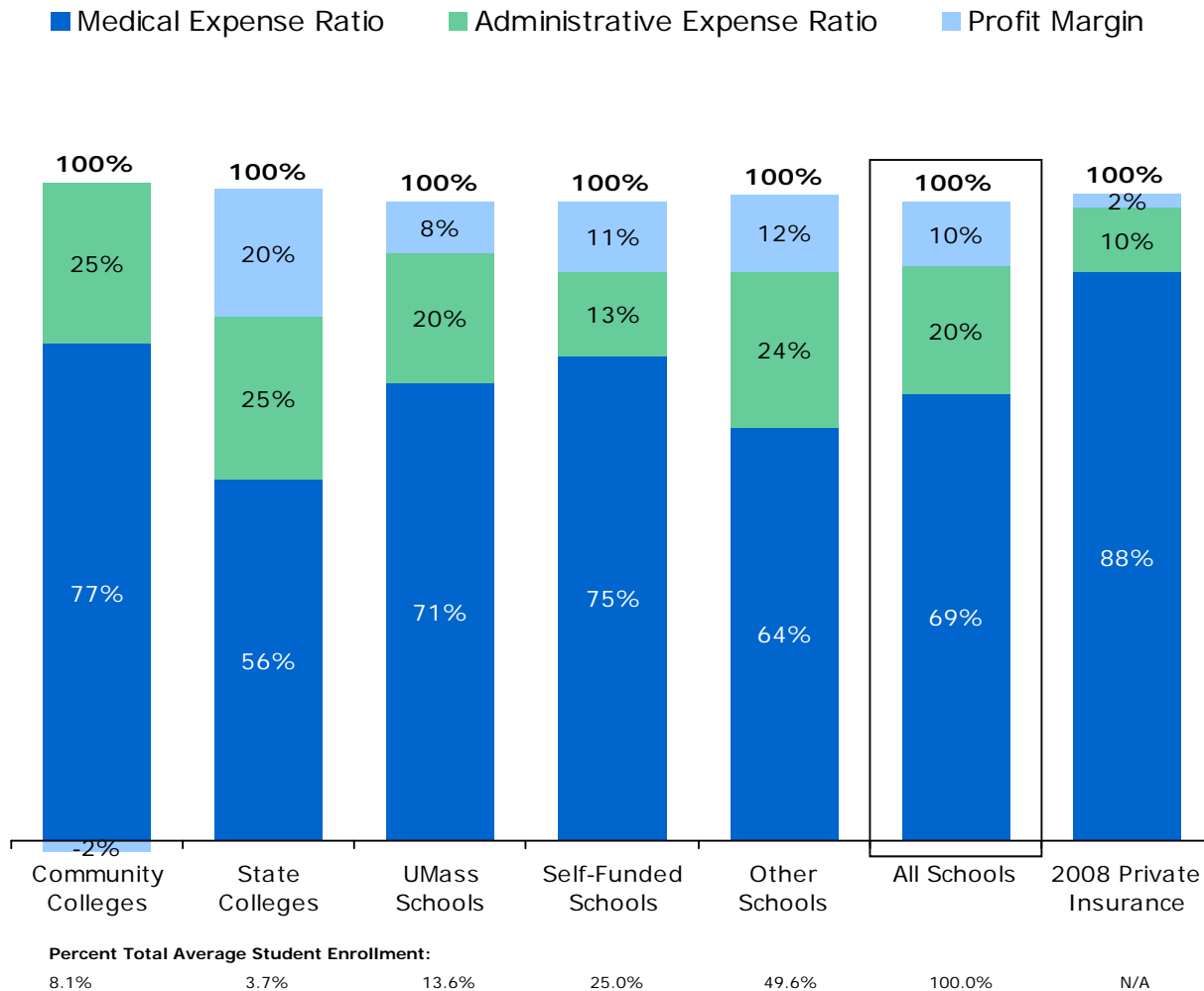
It is also important to note that some SHP carriers cover only a small number of students; most students (75%) are covered by an Aetna, self-funded, or Nationwide SHP.

Additional premium information for individual schools is available in the Appendix.

**Notes:** Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide annual premium data for students only and valid insurance carrier data. Division used data from schools' Fall Enrollment filings and benefit brochures to supplement missing or inaccurate carrier data from Performance Metrics; however, there are still some schools that did not submit carrier data. DHCFCP assumed that schools listing Chickering or United HealthCare Student Resources as their carrier had Aetna or United, respectively, as their actual carrier. Premiums may vary due to the range of benefits covered by the SHP and the scope of services provided at on-campus student health centers. Student health centers may lower premiums, as some medical expenses will be covered exclusively through school, and not insurance carrier, resources. Numbers shown are a three-year weighted average for the 2005-2006 through 2007-2008 academic years; the weighted average is calculated by computing a numerical total for each school category for each academic year and calculating the mean of the three resulting totals. Premiums are rounded to the nearest whole dollar.

**Source:** DHCFCP Student Health Program 2005, 2006, and 2007 Performance Metrics and Fall Enrollment datasets as of 8/25/09.

# Expense Ratios and Profit Margin by School Category, Three-Year Average



Student Health Program (SHP) medical expense ratios are lower than private insurance products.

SHP administrative expense ratios are unfavorable compared to private insurance products. This may be due, in part, to SHP premiums being lower than private insurance products. With fewer premium dollars to pay for fixed expenses, administrative costs will account for a larger percentage of total premiums.

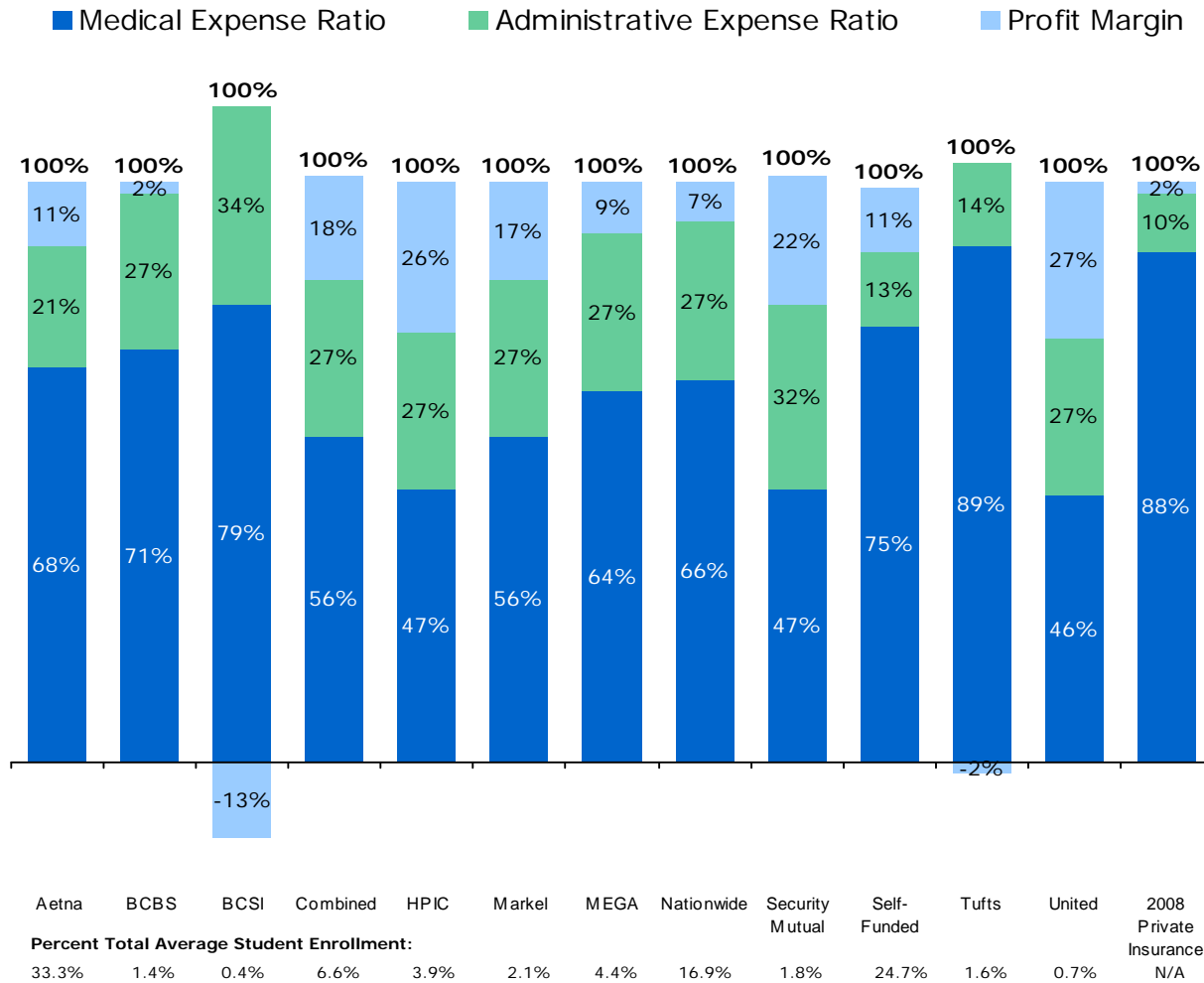
SHP profit margins are generally much higher than private insurance products.

**Notes:** Medical expense ratio is calculated by dividing the total medical expenses by total premiums earned. Administrative expense ratio is calculated by dividing the total administrative expenses (including commissions) by total premiums earned. Profit margin is calculated by dividing the difference between the total premium and sum of total medical and administrative expenses (including commissions) by total premiums earned. Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide total earned premium, total medical expense, and total administrative expense data. Northeastern University is categorized as an other school for the 2005-2006 academic year and as a self-funded school for the 2006-2007 and 2007-2008 academic years. Percentages shown are a three-year weighted average for the 2005-2006 through 2007-2008 academic years; the weighted average is calculated using the numerical totals for each school category for each academic year and calculating the mean of the three resulting percentages. Percentages are rounded to the nearest whole percent and may not sum to 100% due to rounding.

**Source:** DHCFP Student Health Program 2005, 2006, 2007 Performance Metrics dataset as of 8/25/09. QSHIP Minimum Benefits Analysis for the Massachusetts Division of Health Care Finance and Policy from Oliver Wyman Actuarial Consulting, Inc. on October 30, 2009. Comparative private insurance information derived from data included on pages 17 through 19 of *Health Care in Massachusetts: Key Indicators*, May 2009.



# Expense Ratios and Profit Margin by Insurance Carrier, Three-Year Average



Student Health Program (SHP) expense ratios and profit margins vary significantly across carriers participating in the SHP market.

It is also important to note that medical expense ratios can vary significantly from year to year, particularly for schools with fewer students enrolled.

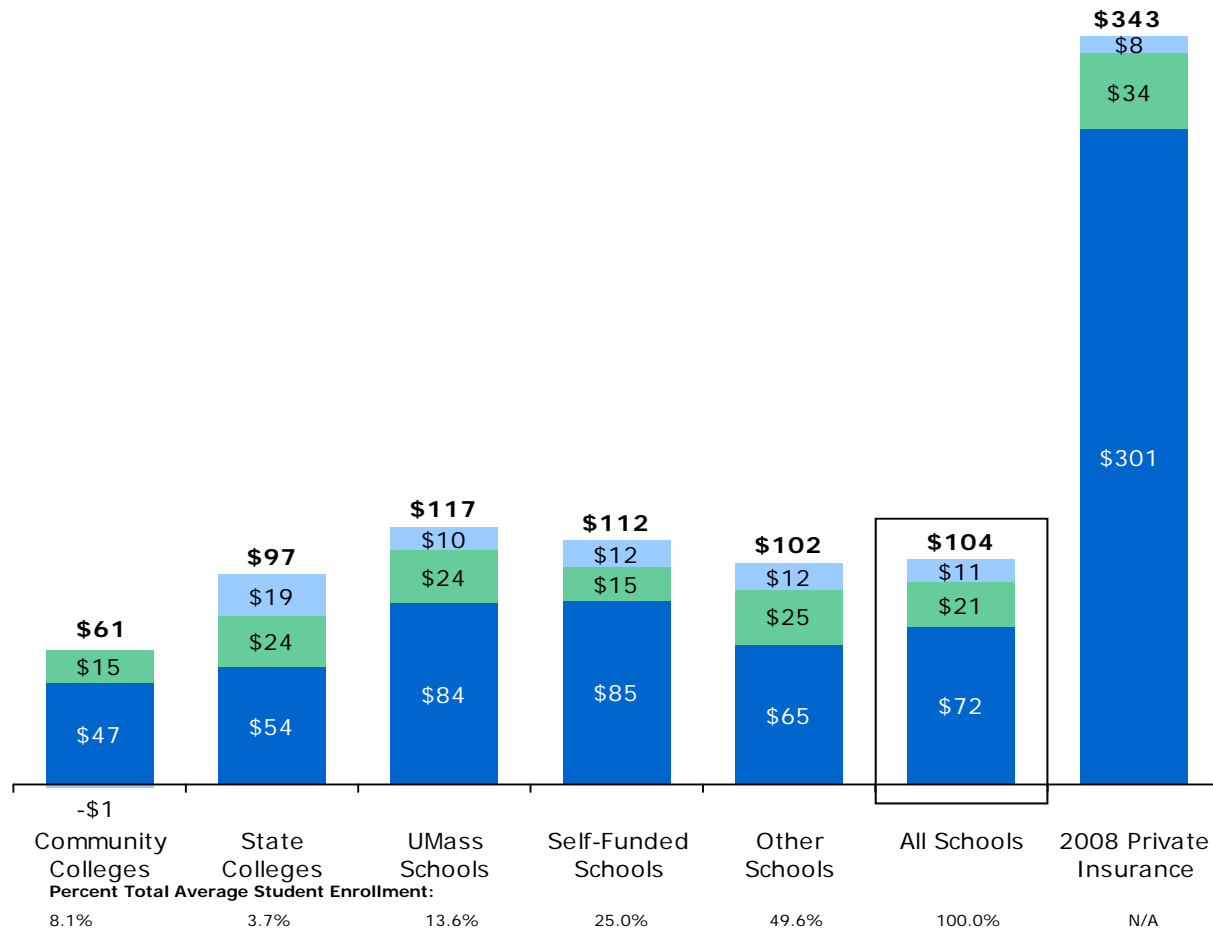
It is also important to note that some SHP carriers cover only a small number of students; most students (75%) are covered by an Aetna, self-funded, or Nationwide SHP.

**Notes:** Medical expense ratio is calculated by dividing the total medical expenses by total premiums earned. Administrative expense ratio is calculated by dividing the total administrative expenses (including commissions) by total premiums earned. Profit margin is calculated by dividing the difference between the total premium and sum of total medical and administrative expenses (including commissions) by total premiums earned. Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide total earned premium, total medical expense, total administrative expense, and valid insurance carrier data. DHCFCP used data from the Fall Enrollment filings and benefit brochures to supplement missing or inaccurate carrier data from Performance Metrics; however, there are still some schools that did not submit carrier data. DHCFCP assumed that schools with Chickering or United HealthCare Student Resources as their carrier had Aetna or United, respectively, as their actual carrier. Percentages shown are a three-year weighted average for the 2005-2006 through 2007-2008 academic years; the weighted average is calculated using the numerical totals for each school category for each academic year and calculating the mean of the three resulting percentages. Percentages are rounded to the nearest whole percent and may not sum to 100% due to rounding.

**Source:** DHCFCP Student Health Program 2005, 2006, 2007 Performance Metrics and Fall Enrollment datasets as of 8/25/09. *QSHIP Minimum Benefits Analysis for the Massachusetts Division of Health Care Finance and Policy* from Oliver Wyman Actuarial Consulting, Inc. on October 30, 2009. Comparative private insurance information derived from data included on pages 17 through 19 of *Health Care in Massachusetts: Key Indicators, May 2009*.

# PMPM Expenses and Profit by School Category, Three-Year Average

■ PMPM Medical Expenses ■ PMPM Administrative Expenses ■ PMPM Profit Margin



Student Health Program (SHP) per member per month (PMPM) medical expenses are lower than private insurance products. This may be due to students being younger and healthier, and SHPs offering fewer benefits.

SHP administrative PMPM expenses are lower than private insurance products. This may be due to lower claims and administrative processing expenses for this population.

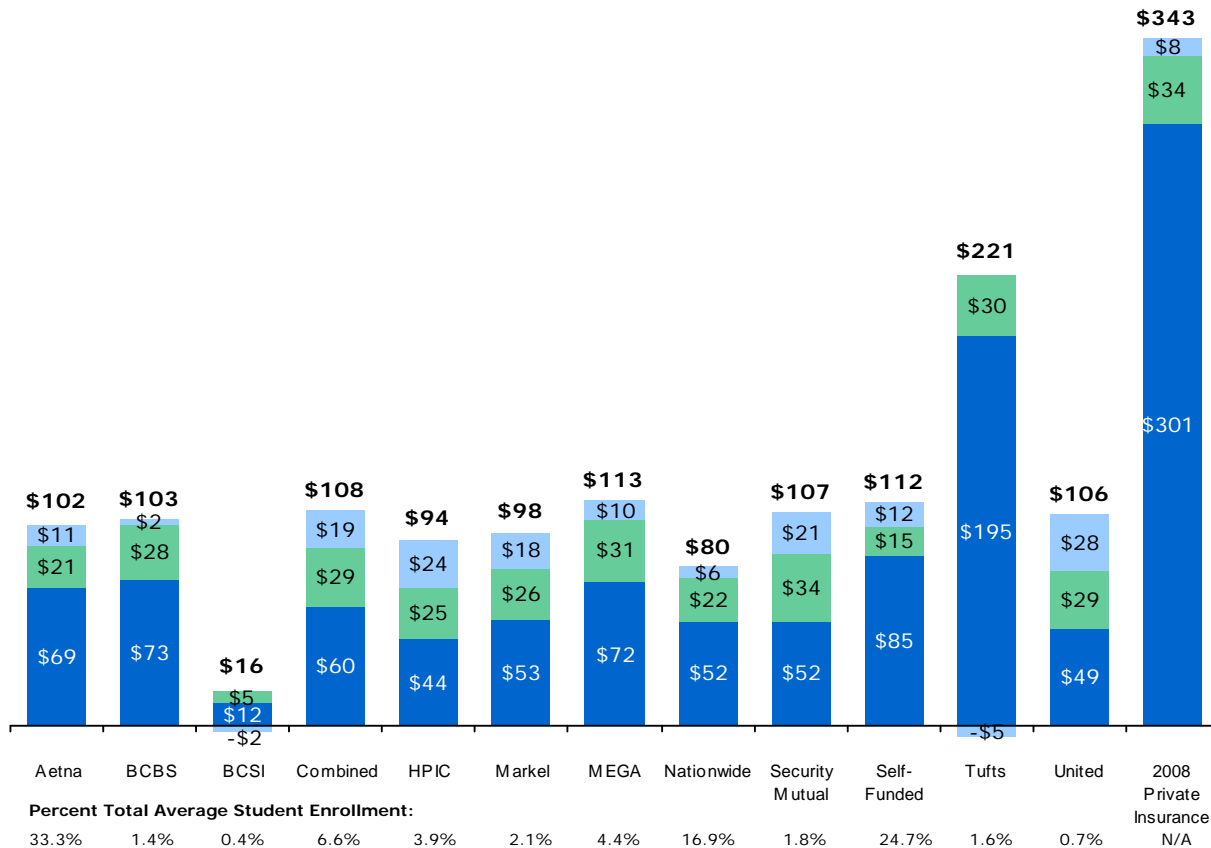
SHP profit margins per member are generally higher than private insurance products, despite SHP premiums per member being generally lower than private insurance products in 2008.

**Notes:** Medical expense can vary significantly from year to year, particularly for small schools. Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide total earned premium, total medical expense, total administrative expense, and total membership data. DHCFCP used data from schools' Fall Enrollment filings and benefit brochures to supplement missing enrollment data from Performance Metrics; however, there are still schools that did not submit enrollment data. PMPM expenses and profits are calculated by dividing the total earned premium, total medical expenses, total administrative expenses, and total profits by the total covered lives, then reducing the yearly per member expenses and profits to monthly per member expenses and profits. Northeastern University is categorized as an other school for the 2005-2006 academic year and as a self-funded school for the 2006-2007 and 2007-2008 academic years. Numbers shown are a three-year weighted average for the 2005-2006 through 2007-2008 academic years; the weighted average is calculated using the numerical totals for each school category for each academic year and calculating the mean of the three resulting totals. Expenses and profits are rounded to the nearest whole dollar and may not sum to total due to rounding.

**Source:** DHCFCP Student Health Program 2005, 2006, 2007 Performance Metrics dataset as of 8/25/09. *QSHIP Minimum Benefits Analysis for the Massachusetts Division of Health Care Finance and Policy* from Oliver Wyman Actuarial Consulting, Inc. on October 30, 2009. Comparative private insurance information derived from data included on pages 17 through 19 of *Health Care in Massachusetts: Key Indicators*, May 2009.

# PMPM Expenses and Profit by Insurance Carrier, Three-Year Average

■ PMPM Medical Expenses ■ PMPM Administrative Expenses ■ PMPM Profit Margin



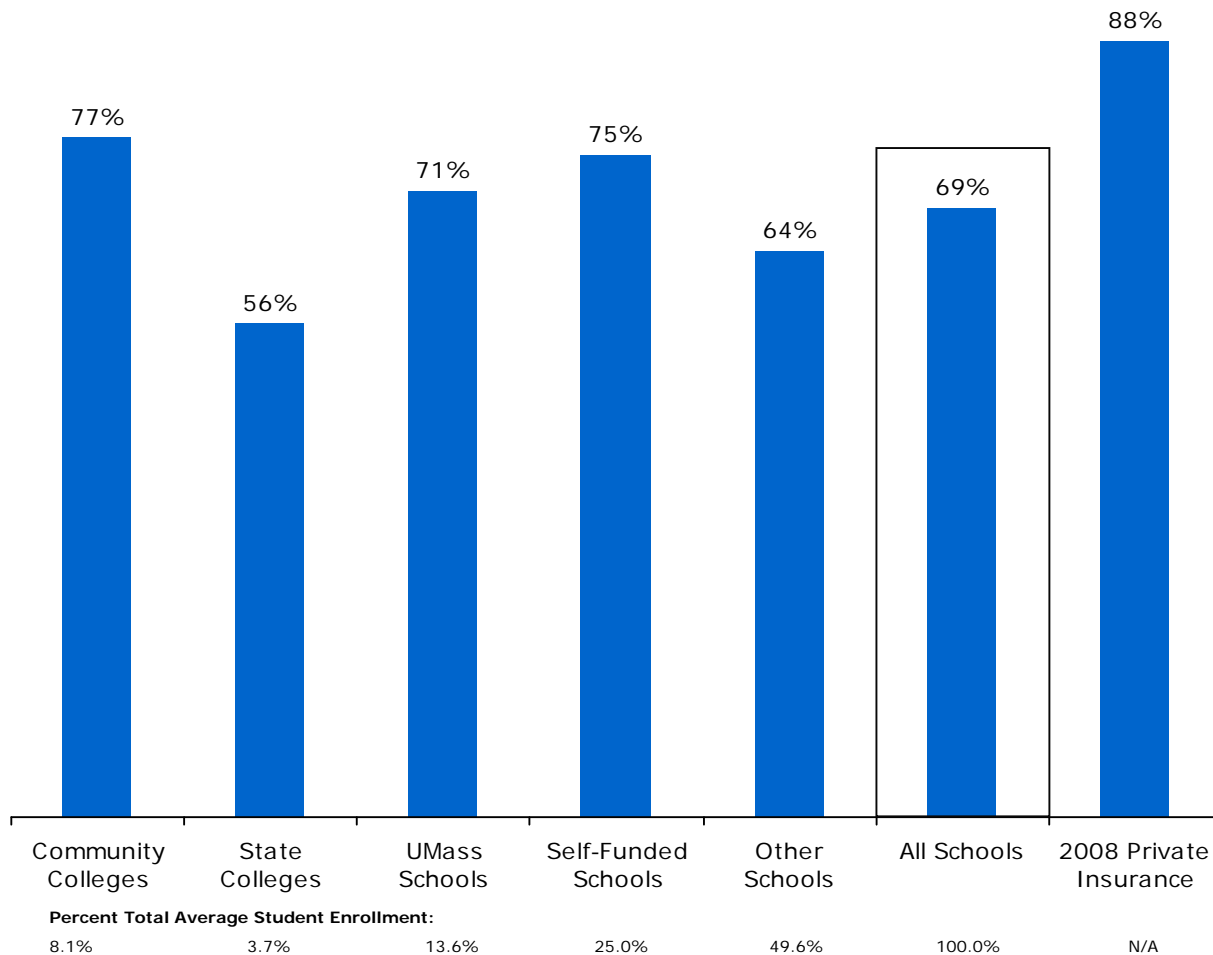
Student Health Program (SHP) expenses and profit margins, on a per member per month (PMPM) basis, vary significantly across carriers participating in the SHP market.

It is also important to note that some SHP carriers cover only a small number of students; most students (75%) are covered by an Aetna, self-funded, or Nationwide SHP.

**Notes:** Medical expenses can vary significantly from year to year, particularly for small schools. Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide total earned premium, total medical expense, total administrative expense, total membership, and valid insurance carrier data. DHCFCP used data from schools' Fall Enrollment filings and benefit brochures to supplement missing enrollment data and missing or inaccurate carrier data from Performance Metrics; however, there are still schools that did not submit enrollment or carrier data. DHCFCP assumed that schools listing Chickering or United HealthCare Student Resources as their carrier had Aetna or United, respectively, as their actual carrier. PMPM expenses and profits are calculated by dividing the total earned premium, total medical expenses, total administrative expenses, and total profits by the total covered lives, then reducing the yearly per member expenses and profits to monthly per member expenses and profits. Numbers shown are a three-year weighted average for the 2005-2006 through 2007-2008 academic years; the weighted average is calculated using the numerical totals for each school category for each academic year and calculating the mean of the three resulting totals. Numbers are rounded to the nearest whole dollar and may not sum to total due to rounding.

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# Medical Expense Ratio by School Category, Three-Year Average



Medical expense ratios (MER) show the portion of total premiums paid by students that is used to pay medical expenses.

The average Student Health Program (SHP) MER is 69%, which is significantly lower than that of private insurance products in 2008.

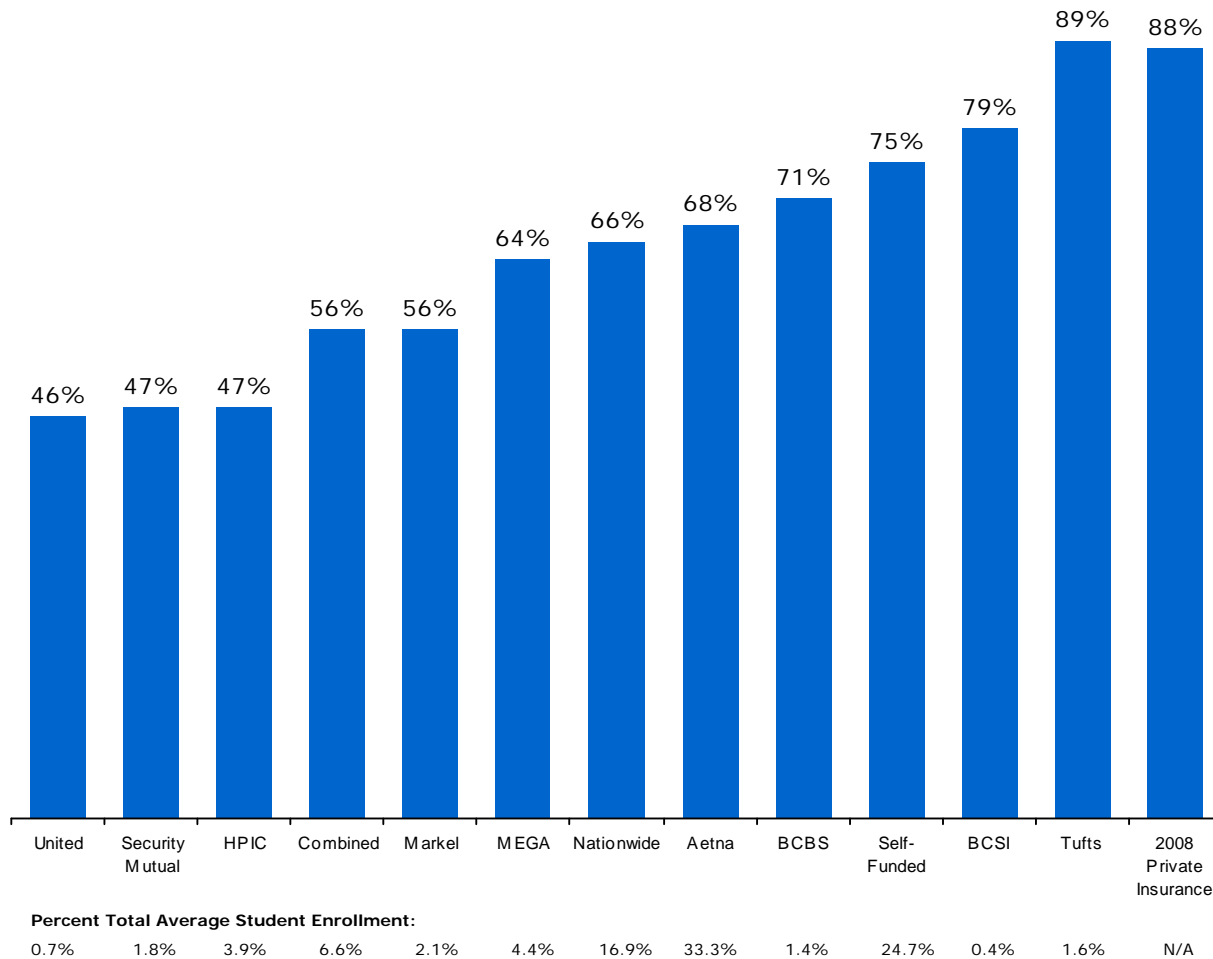
Community colleges, UMass schools, and self-funded schools have higher than average SHP MERs.

MERs can vary significantly from year to year, particularly for schools with fewer enrolled students.

**Notes:** Medical expense ratio is calculated by dividing the total medical expenses by total premiums earned. Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide total earned premium, total medical expense, and total administrative expense data. Northeastern University is categorized as an other school for the 2005-2006 academic year and as a self-funded school for the 2006-2007 and 2007-2008 academic years. Percentages shown are a three-year weighted average for the 2005-2006 through 2007-2008 academic years; the weighted average is calculated using the numerical totals for each school category for each academic year and calculating the mean of the three resulting percentages. Percentages are rounded to the nearest whole percent.

**Source:** DHCFCP Student Health Program 2005, 2006, 2007 Performance Metrics dataset as of 8/25/09. *QSHIP Minimum Benefits Analysis for the Massachusetts Division of Health Care Finance and Policy* from Oliver Wyman Actuarial Consulting, Inc. on October 30, 2009. Comparative private insurance information derived from data included on page 17 of *Health Care in Massachusetts: Key Indicators, May 2009*.

# Medical Expense Ratio by Insurance Carrier, Three-Year Average



The average medical expense ratio (MER) for all Student Health Programs (SHP) for any carrier is 69%.

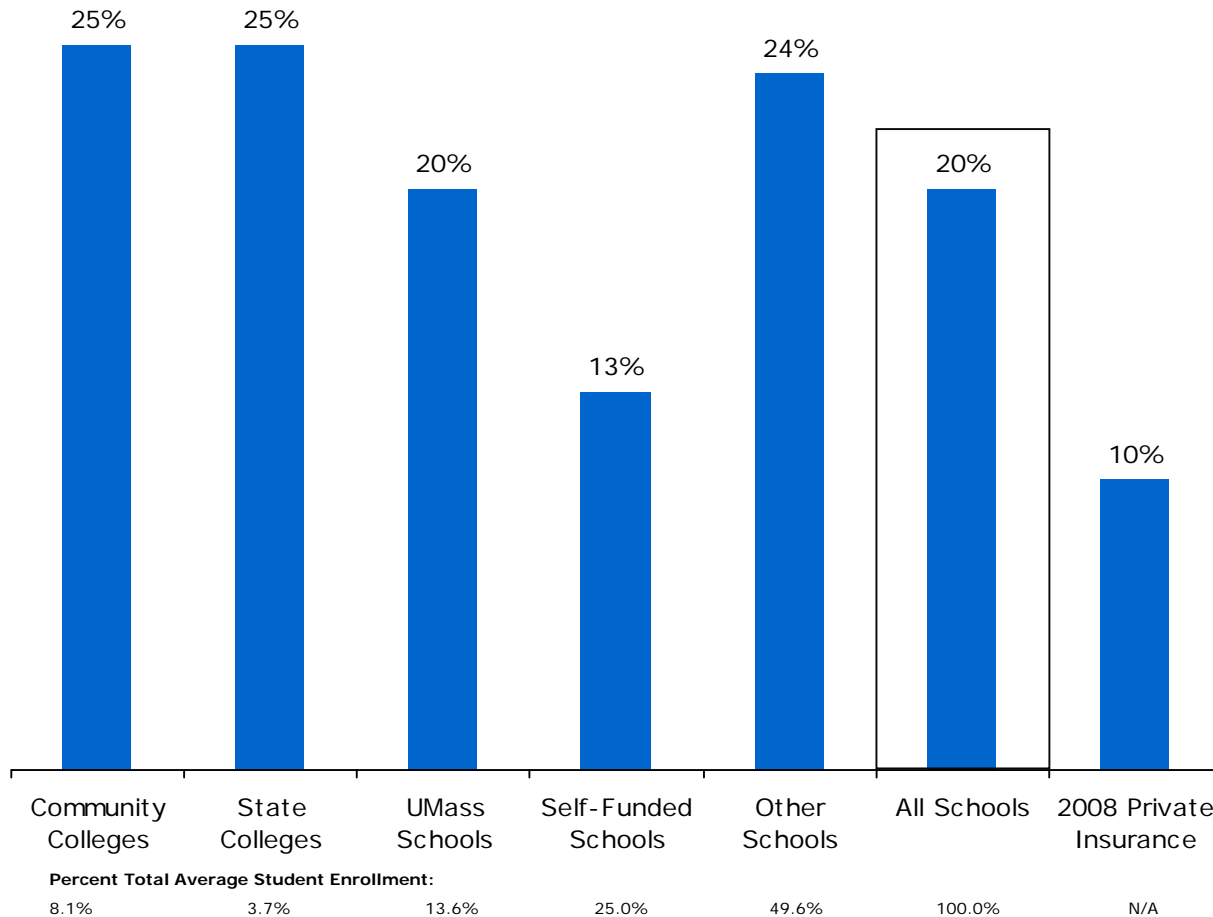
The lowest MER is 46%. The highest MER is 89%. MERs for SHPs are generally lower than those of private insurance products in 2008.

It is also important to note that MERs can vary significantly from year to year, particularly for schools with fewer enrolled students. Additionally, some SHP carriers cover only a small number of students; most students (75%) are covered by an Aetna, self-funded, or Nationwide SHP.

**Notes:** Medical expense ratio is calculated by dividing the total medical expenses by total premiums earned. Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide total earned premium, total medical expense, total administrative expense, and valid insurance carrier data. DHCFP used data from schools' Fall Enrollment filings and benefit brochures to supplement missing or inaccurate carrier data from Performance Metrics; however, there are still some schools that did not submit carrier data. DHCFP assumed that schools listing Chickering or United HealthCare Student Resources as their carrier had Aetna or United, respectively, as their actual carrier. Percentages shown are a three-year weighted average for the 2005-2006 through 2007-2008 academic years; the weighted average is calculated using the numerical totals for each school category for each academic year and calculating the mean of the three resulting percentages. Percentages are rounded to the nearest whole percent.

**Source:** DHCFP Student Health Program 2005, 2006, 2007 Performance Metrics and Fall Enrollment datasets as of 8/25/09. *QSHIP Minimum Benefits Analysis for the Massachusetts Division of Health Care Finance and Policy* from Oliver Wyman Actuarial Consulting, Inc. on October 30, 2009. Comparative private insurance information derived from data included on page 17 of *Health Care in Massachusetts: Key Indicators*, May 2009.

# Administrative Expense Ratio by School Category, Three-Year Average



Administrative expense ratios (AER) show the portion of the total premiums paid by students that is used for Student Health Program (SHP) administration, including insurance broker commissions.

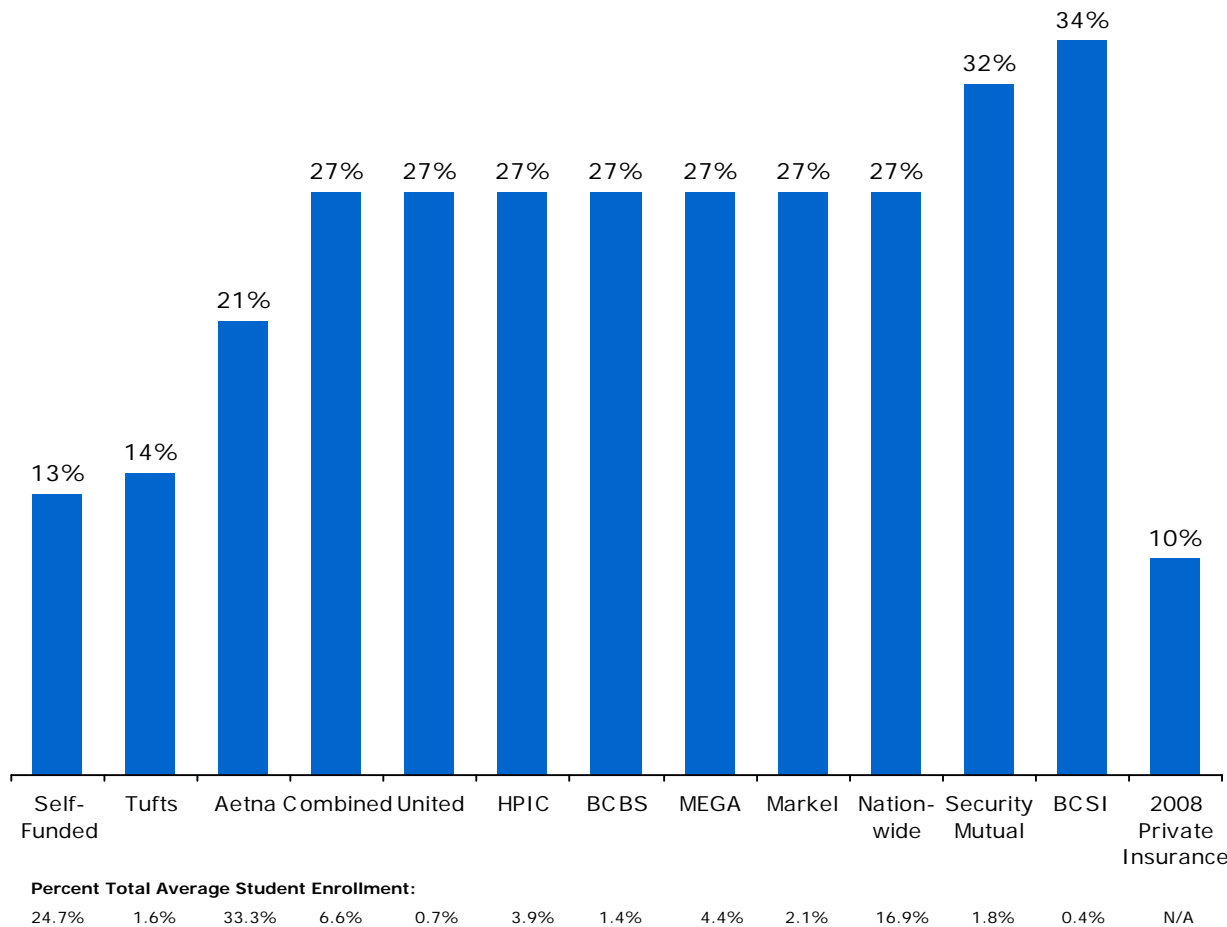
The average AER for schools is 20%. Only schools who self-fund their SHPs have a lower AER.

SHP AERs are higher than those of private insurance products; however, the per member dollars spent on administrative expenses are generally lower for SHPs than private insurance products.

**Notes:** Administrative expense ratio is calculated by dividing the total administrative expenses (including commissions) by total premiums earned. Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide total earned premium, total medical expense, and total administrative expense data. Northeastern University is categorized as an other school for the 2005-2006 academic year and as a self-funded school for the 2006-2007 and 2007-2008 academic years. Percentages shown are a three-year weighted average for the 2005-2006 through 2007-2008 academic years; the weighted average is calculated using the numerical totals for each school category for each academic year and calculating the mean of the three resulting percentages. Percentages are rounded to the nearest whole percent.

**Source:** DHCFP Student Health Program 2005, 2006, 2007 Performance Metrics dataset as of 8/25/09. *QSHIP Minimum Benefits Analysis for the Massachusetts Division of Health Care Finance and Policy* from Oliver Wyman Actuarial Consulting, Inc. on October 30, 2009. Comparative private insurance information derived from data included on page 18 of *Health Care in Massachusetts: Key Indicators, May 2009*.

# Administrative Expense Ratio by Insurance Carrier, Three-Year Average



The average administrative expense ratio (AER) for Student Health Programs (SHPs) is 20%.

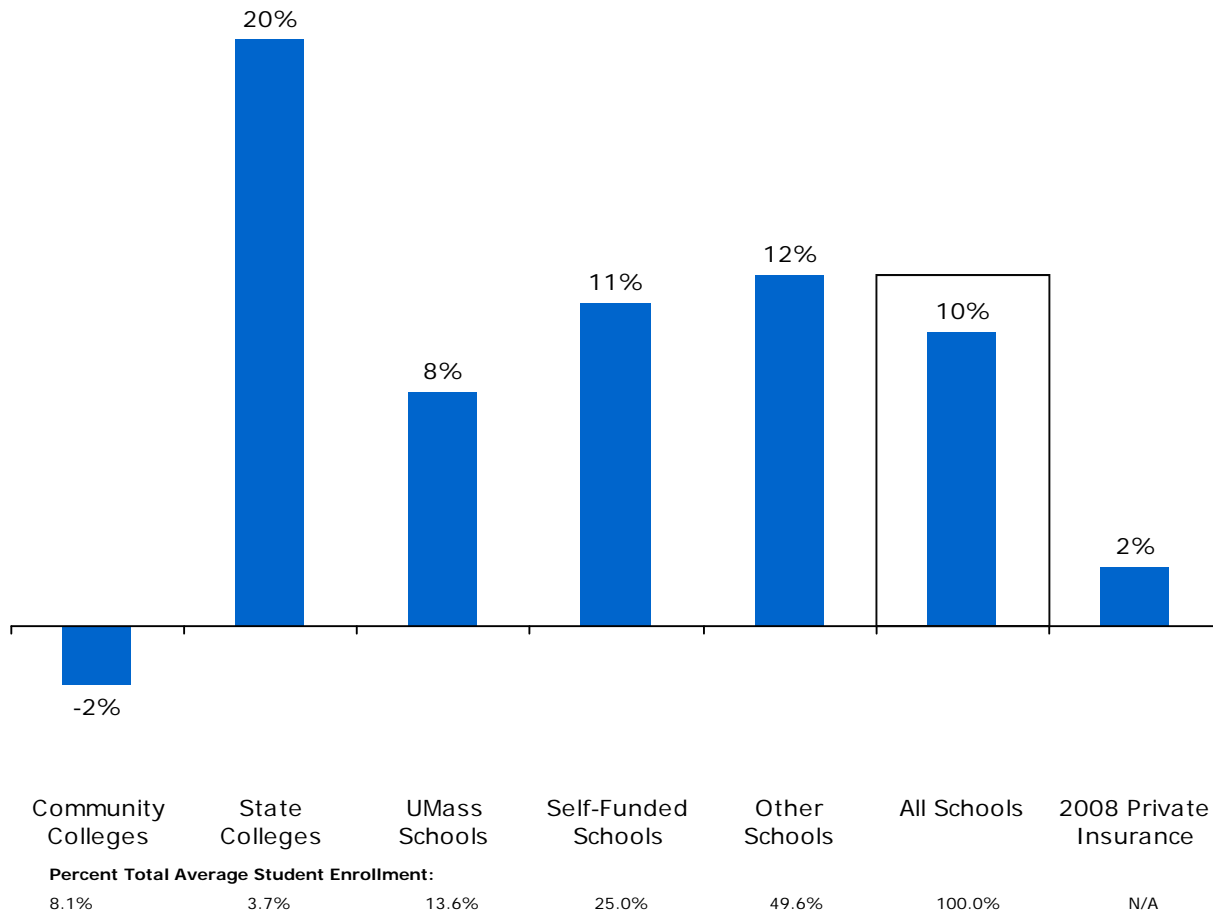
While SHP AERs are higher than private insurance products, the per member dollars spent on SHP administration are generally lower than those of private products in 2008. This may be due in part to SHP premiums being lower than private products.

It is also important to note that some SHP carriers cover only a small number of students; most students (75%) are covered by an Aetna, self-funded, or Nationwide SHP.

**Notes:** Administrative expense ratio is calculated by dividing the total administrative expenses (including commissions) by total premiums earned. Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide total earned premium, total medical expense, total administrative expense, and valid insurance carrier data. DHCFP used data from schools' Fall Enrollment filings and benefit brochures to supplement missing or inaccurate carrier data from Performance Metrics; however, there are still some schools who did not submit carrier data. DHCFP assumed that schools listing Chickering or United HealthCare Student Resources as their carrier had Aetna or United, respectively, as their actual carrier. Percentages shown are a three-year weighted average for the 2005-2006 through 2007-2008 academic years; the weighted average is calculated using the numerical totals for each school category for each academic year and calculating the mean of the three resulting percentages. Percentages are rounded to the nearest whole percent.

**Source:** DHCFP Student Health Program 2005, 2006, 2007 Performance Metrics and Fall Enrollment datasets as of 8/25/09. *QSHIP Minimum Benefits Analysis for the Massachusetts Division of Health Care Finance and Policy* from Oliver Wyman Actuarial Consulting, Inc. on October 30, 2009. Comparative private insurance information derived from data included on page 18 of *Health Care in Massachusetts: Key Indicators*, May 2009.

# Average Profit Margin by School Category, Three-Year Average



Profit margin is the portion of the total premiums paid by students that is not spent on medical or administrative expenses.

The average profit margin for all schools is 10%. Only community college and UMass Student Health Programs (SHPs) have a lower profit margin.

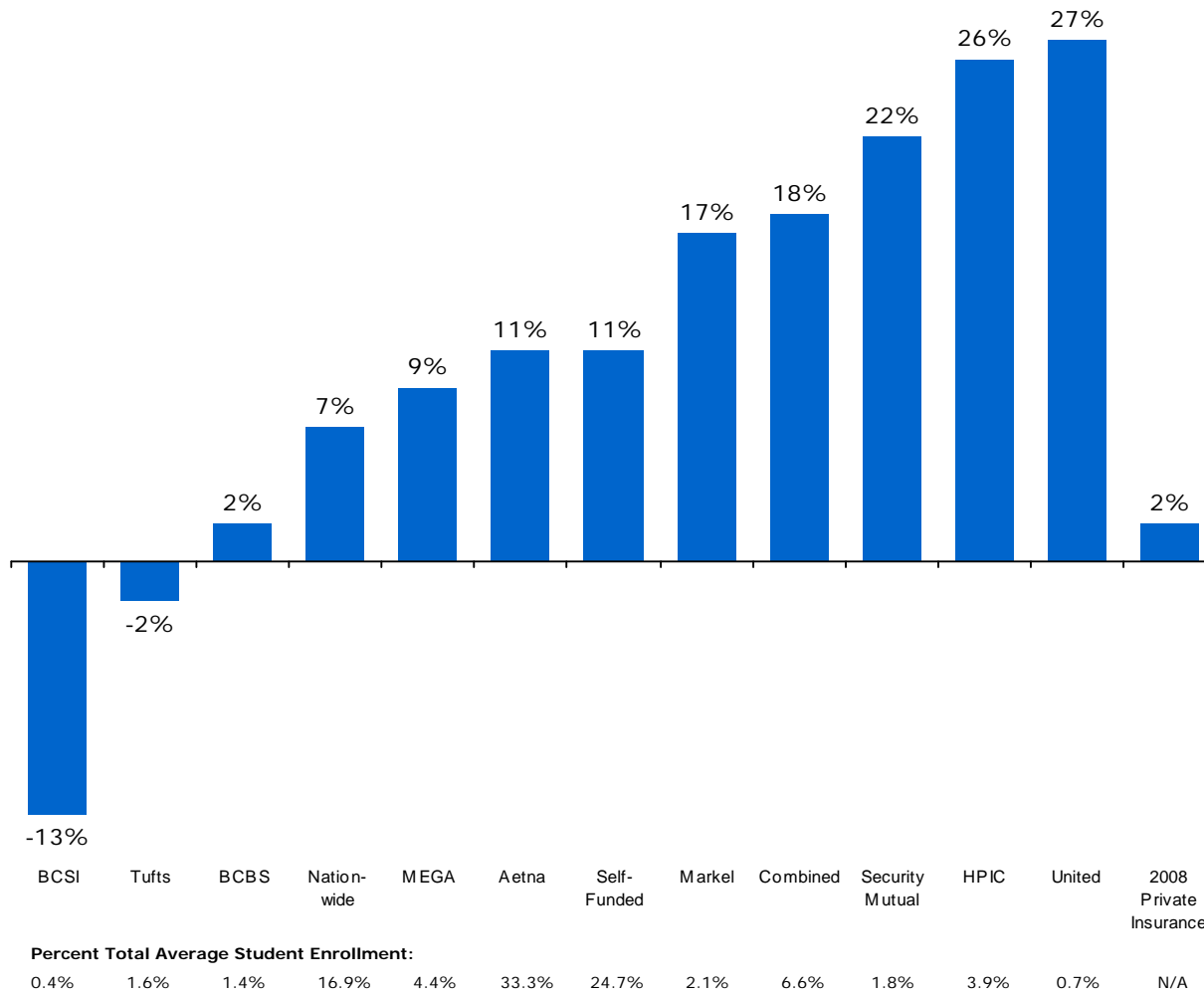
SHP profit margins for all but one school category are much higher than those of private insurance products in 2008.

**Notes:** Profit margin is calculated by dividing the difference between the total premium and sum of total medical and administrative expenses (including commissions) by total premiums earned. Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide total earned premium, total medical expense, and total administrative expense data. Northeastern University is categorized as an other school for the 2005-2006 academic year and as a self-funded school for the 2006-2007 and 2007-2008 academic years. Percentages shown are a 3-year weighted average for the 2005-2006 through 2007-2008 academic years; the weighted average is calculated using the numerical totals for each school category for each academic year and calculating the mean of the three resulting percentages. Percentages are rounded to the nearest whole percent.

**Source:** DHCFP Student Health Program 2005, 2006, 2007 Performance Metrics dataset as of 8/25/09. Comparative private insurance information derived from data included on page 19 of *Health Care in Massachusetts: Key Indicators*, May 2009.



# Profit Margin by Insurance Carrier, Three-Year Average



The average profit margin for all plans is 10%. The lowest profit margin is -13%. The highest profit margin is 27%.

Student Health Program (SHP) profit margins are generally much higher than those of private insurance products in 2008.

It is also important to note that some SHP carriers cover only a small number of students; most students (75%) are covered by an Aetna, self-funded, or Nationwide SHP.

**Notes:** Profit margin is calculated by dividing the difference between the total premium and sum of total medical and administrative expenses (including commissions) by total premiums earned. Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide total earned premium, total medical expense, total administrative expense, and valid insurance carrier data. DHCFP used data from schools' Fall Enrollment filings and benefit brochures to supplement missing or inaccurate carrier data from Performance Metrics; however, there are still some schools that did not submit carrier data. DHCFP assumed that schools listing Chickering or United HealthCare Student Resources as their carrier had Aetna or United, respectively, as their actual carrier. Percentages shown are a three-year weighted average for the 2005-2006 through 2007-2008 academic years; the weighted average is calculated using the numerical totals for each school category for each academic year and calculating the mean of the three resulting percentages. Percentages are rounded to the nearest whole percent.

**Source:** DHCFP Student Health Program 2005, 2006, 2007 Performance Metrics and Fall Enrollment datasets as of 8/25/09. Comparative private insurance information derived from data included on page 19 of *Health Care in Massachusetts: Key Indicators, May 2009*.

# Students Exceeding Annual Benefit Maximums by School Category

	<u>2005-2006</u>		<u>2006-2007</u>		<u>2007-2008</u>	
	# Students Exceeding	% SHP Enrolled Students Exceeding	# Students Exceeding	% SHP Enrolled Students Exceeding	# Students Exceeding	% SHP Enrolled Students Exceeding
Community Colleges	16	0.2%	14	0.2%	3	0%
State Colleges	0	0%	0	0%	1	0%
UMass Schools	0	0%	3	0%	0	0%
Self-Funded Schools	0	0%	0	0%	0	0%
Other Schools	13	0%	26	0.1%	16	0%
<b>All Schools</b>	<b>29</b>	<b>0%</b>	<b>43</b>	<b>0%</b>	<b>20</b>	<b>0%</b>

Student Health Programs (SHPs) must provide annual benefit maximums of at least \$50,000 per illness or injury. Some schools offer SHPs with higher or unlimited benefit maximums.

Students generally do not exceed their schools' annual benefit maximum.

Most students who exceed the maximum aggregate indemnity are enrolled at community colleges and other schools.

**Notes:** Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide student enrollment and number of students exceeding their annual benefit maximums data. DHCFP used data from schools' Fall Enrollment filings to supplement missing enrollment data from Performance Metrics; however, there are still some schools that did not submit enrollment data. Northeastern University is categorized as an other school for the 2005-2006 academic year and as a self-funded school for the 2006-2007 and 2007-2008 academic years. Percentages are rounded to the nearest tenth of a percent; percentages that round to 0.0% are shown as 0%.

**Source:** DHCFP Student Health Program 2005, 2006, and 2007 Performance Metrics and Fall Enrollment datasets as of 8/25/09.

# Students Exceeding Annual Benefit Maximums by Insurance Carrier

	<u>2005-2006</u>		<u>2006-2007</u>		<u>2007-2008</u>	
	# Students Exceeding	% SHP Enrolled Students Exceeding	# Students Exceeding	% SHP Enrolled Students Exceeding	# Students Exceeding	% SHP Enrolled Students Exceeding
Aetna	2	0%	6	0%	0	0%
BCBS	0	0%	0	0%	0	0%
BCSI	0	0%	0	0%	-	-
Combined	0	0%	4	0.1%	9	0.1%
HPIC	-	-	-	-	0	0%
Markel	0	0%	11	0.4%	1	0.1%
MEGA	0	0%	3	0%	0	0%
Monumental	0	0%	0	0%	0	0%
Nationwide	23	0.1%	16	0.1%	10	0.1%
Pioneer	-	-	1	0.3%	-	-
Security Mutual	4	0.2%	2	0.1%	0	0%
Self-Funded	0	0%	0	0%	0	0%
Tufts	0	0%	0	0%	0	0%
United	-	-	0	0%	0	0%
<b>All Insurance Carriers</b>	<b>29</b>	<b>0%</b>	<b>43</b>	<b>0%</b>	<b>20</b>	<b>0%</b>

Student Health Programs (SHPs) must provide annual benefit maximums of at least \$50,000 per illness or injury. Some schools offer SHPs with higher or unlimited benefit maximums.

A relatively small number of students exceed the annual benefit maximum for their SHP; however, students who exceed this benefit maximum may be exposed to significant out-of-pocket expenses.

Most of the students who exceeded this benefit limit were enrolled in Nationwide SHPs.

**Notes:** Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide student enrollment, number of students exceeding their annual benefit maximums, and valid insurance carrier data. DHCFP used data from schools' Fall Enrollment filings and benefit brochures to supplement missing enrollment and missing or inaccurate carrier data from Performance Metrics; however, there are still some schools that did not submit enrollment or carrier data. DHCFP assumed that schools listing Chickering or United HealthCare Student Resources as their carrier had Aetna or United, respectively, as their actual carrier. Percentages are rounded to the nearest whole percent.

**Source:** DHCFP Student Health Program 2005, 2006, and 2007 Performance Metrics and Fall Enrollment datasets as of 8/25/09. *QSHIP Minimum Benefits Analysis for the Massachusetts Division of Health Care Finance and Policy* from Oliver Wyman Actuarial Consulting, Inc. on October 30, 2009.

# Students Exceeding Inpatient Benefit Limits by School Category

	<u>2005-2006</u>		<u>2006-2007</u>		<u>2007-2008</u>	
	# Students Exceeding	% SHP Enrolled Students Exceeding	# Students Exceeding	% SHP Enrolled Students Exceeding	# Students Exceeding	% SHP Enrolled Students Exceeding
Community Colleges	0	0%	0	0%	0	0%
State Colleges	0	0%	0	0%	0	0%
UMass Schools	0	0%	0	0%	0	0%
Self-Funded Schools	0	0%	0	0%	0	0%
Other Schools	0	0%	8	0%	6	0%
<b>All Schools</b>	<b>0</b>	<b>0%</b>	<b>8</b>	<b>0%</b>	<b>6</b>	<b>0%</b>

Schools may include reasonable exclusions and limitations in their Student Health Programs (SHPs), which may include inpatient benefit limits. Inpatient benefit limits vary by school.

The vast majority of students do not exceed inpatient benefit limits for their SHPs.

However, students who exceed these limits may be exposed to significant out-of-pocket costs.

**Notes:** Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide student enrollment and number of students exceeding their inpatient benefit limits data. DHCFP used data from schools' Fall Enrollment filings to supplement missing enrollment data from Performance Metrics; however, there are still some schools that did not submit enrollment data. Northeastern University is categorized as an other school for the 2005-2006 academic year and as a self-funded school for the 2006-2007 and 2007-2008 academic years. Percentages are rounded to the nearest tenth of a percent; percentages that round to 0.0% are shown as 0%.  
**Source:** DHCFP Student Health Program 2005, 2006, and 2007 Performance Metrics and Fall Enrollment datasets as of 8/25/09.

# Students Exceeding Inpatient Benefit Limits by Insurance Carrier

	<u>2005-2006</u>		<u>2006-2007</u>		<u>2007-2008</u>	
	# Students Exceeding	% SHP Enrolled Students Exceeding	# Students Exceeding	% SHP Enrolled Students Exceeding	# Students Exceeding	% SHP Enrolled Students Exceeding
Aetna	0	0%	0	0%	0	0%
BCBS	0	0%	0	0%	0	0%
BCSI	0	0%	0	0%	-	-
Combined	0	0%	1	0%	3	0%
HPIC	-	-	-	-	0	0%
Markel	0	0%	0	0%	0	0%
MEGA	0	0%	6	0.1%	2	0%
Monumental	0	0%	0	0%	0	0%
Nationwide	0	0%	0	0%	0	0%
Pioneer	-	-	1	0.3%	-	-
Security Mutual	0	0%	0	0%	0	0%
Self-Funded	0	0%	0	0%	0	0%
Tufts	0	0%	0	0%	0	0%
United	-	-	0	0%	1	0.1%
<b>All Insurance Carriers</b>	<b>0</b>	<b>0%</b>	<b>8</b>	<b>0%</b>	<b>6</b>	<b>0%</b>

Schools may include reasonable exclusions and limitations in their Student Health Programs (SHPs), which may include inpatient benefit limits. Inpatient benefit limits vary by school.

The vast majority of students do not exceed inpatient benefit limits for their SHPs.

However, students who exceed these limits may be exposed to significant out-of-pocket costs.

**Notes:** Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide student enrollment, number of students exceeding their inpatient benefit limits, and valid insurance carrier data. DHCFCP used data from schools' Fall Enrollment filings and benefit brochures to supplement missing enrollment and missing or inaccurate carrier data from Performance Metrics; however, there are still some schools that did not submit enrollment or carrier data. DHCFCP assumed that schools listing Chickering or United HealthCare Student Resources as their carrier had Aetna or United, respectively, as their actual carrier. Percentages are rounded to the nearest whole percent.

**Source:** DHCFCP Student Health Program 2005, 2006, and 2007 Performance Metrics and Fall Enrollment datasets as of 8/25/09.

# Students Exceeding Outpatient Benefit Limits by School Category

	<u>2005-2006</u>		<u>2006-2007</u>		<u>2007-2008</u>	
	# Students Exceeding	% SHP Enrolled Students Exceeding	# Students Exceeding	% SHP Enrolled Students Exceeding	# Students Exceeding	% SHP Enrolled Students Exceeding
Community Colleges	334	3.6%	257	3.1%	188	3.1%
State Colleges	62	1.6%	48	1.3%	44	1.3%
UMass Schools	156	1.2%	155	1.2%	28	0.2%
Self-Funded Schools	185	0.9%	197	0.8%	83	0.3%
Other Schools	802	2.3%	866	1.9%	608	1.3%
<b>All Schools</b>	<b>1,539</b>	<b>1.8%</b>	<b>1,523</b>	<b>1.5%</b>	<b>951</b>	<b>0.9%</b>

Schools may include reasonable exclusions and limitations in their Student Health Programs (SHPs), which may include outpatient benefit limits. Outpatient benefit limits vary by school.

Many more students exceed their SHP's outpatient benefit limits than inpatient benefit limits.

Although the percent of total students is quite small, students who exceed this benefit limit may be exposed to significant out-of-pocket expenses.

**Notes:** Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide student enrollment and number of students exceeding their outpatient benefit limits data. DHCFP used data from schools' Fall Enrollment filings to supplement missing enrollment data from Performance Metrics filings; however, there are still some schools that did not submit enrollment data. Percentages are rounded to the nearest tenth of a percent; percentages that round to 0.0% are shown as 0%.

**Source:** DHCFP Student Health Program 2005, 2006, and 2007 Performance Metrics and Fall Enrollment datasets as of 8/25/09.

# Students Exceeding Outpatient Benefit Limits by Insurance Carrier

	<u>2005-2006</u>		<u>2006-2007</u>		<u>2007-2008</u>	
	# Students Exceeding	% SHP Enrolled Students Exceeding	# Students Exceeding	% SHP Enrolled Students Exceeding	# Students Exceeding	% SHP Enrolled Students Exceeding
Aetna	731	2.0%	400	1.3%	233	0.8%
BCBS	0	0%	0	0%	0	0%
BCSI	0	0%	0	0%	-	-
Combined	0	0%	217	3.2%	106	1.7%
HPIC	-	-	-	-	43	1.2%
Markel	0	0%	25	1.0%	9	0.7%
MEGA	3	5.3%	147	2.1%	47	1.1%
Monumental	26	2.1%	31	2.0%	42	2.7%
Nationwide	529	2.9%	454	2.7%	350	2.4%
Pioneer	-	-	24	7.1%	-	-
Security Mutual	65	2.9%	28	1.8%	16	1.1%
Self-Funded	185	0.9%	197	0.8%	83	0.3%
Tufts	0	0%	0	0%	0	0%
United	-	-	0	0%	22	1.5%
<b>All Insurance Carriers</b>	<b>1,539</b>	<b>1.9%</b>	<b>1,523</b>	<b>1.6%</b>	<b>951</b>	<b>1.0%</b>

Schools may include reasonable exclusions and limitations in their Student Health Programs (SHPs), which may include outpatient benefit limits. Outpatient benefit limits vary by school.

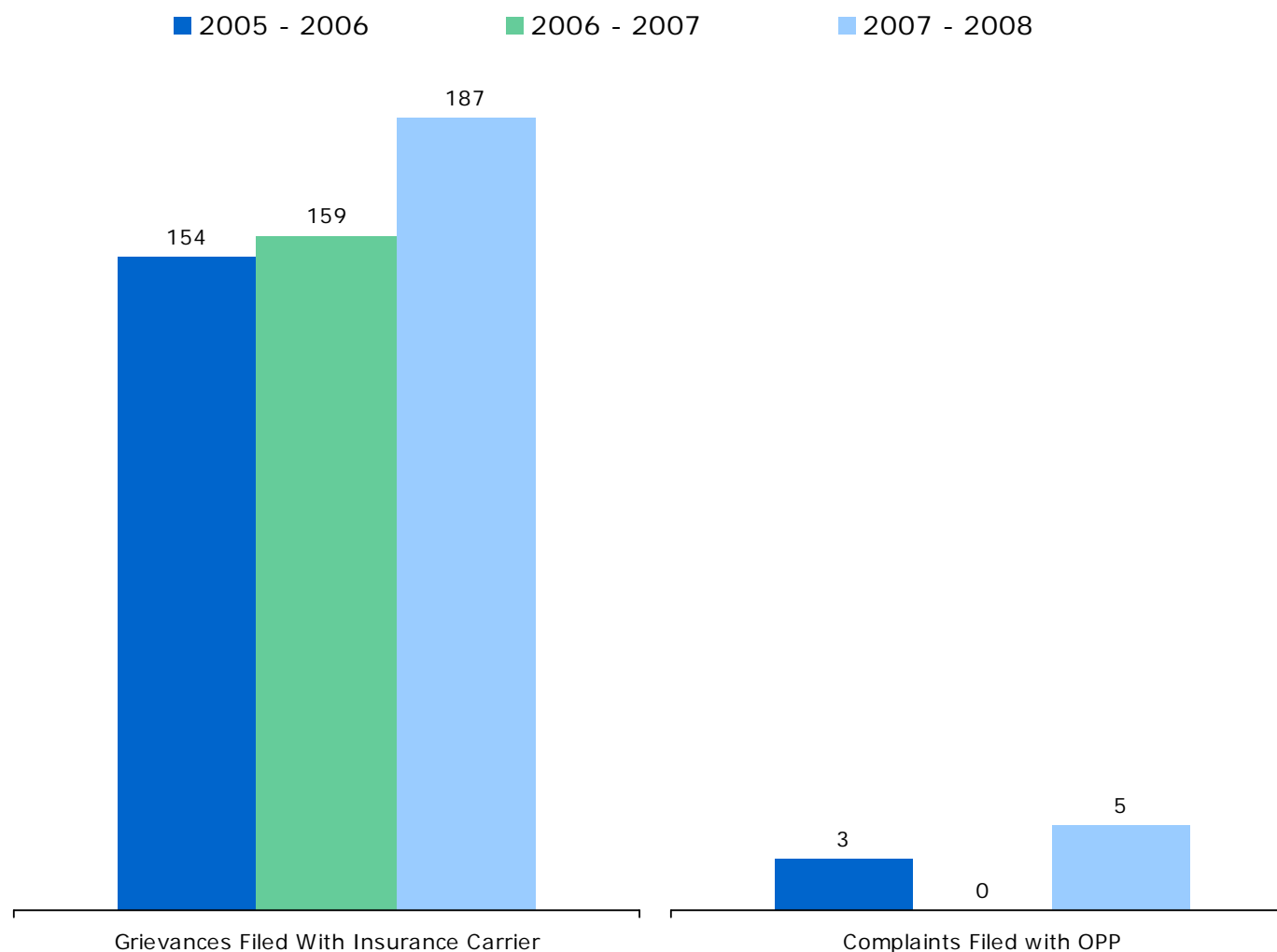
When combining data over the three school years, Aetna and Nationwide have the highest number of students exceeding their SHP's outpatient benefit limits.

Although the percent of total students is quite small, students who exceed this benefit limit may be exposed to significant out-of-pocket expenses.

**Notes:** Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide student enrollment, number of students exceeding their outpatient benefit limits, and valid insurance carrier data. DHCFCP used data from schools' Fall Enrollment filings and benefit brochures to supplement missing enrollment and missing or inaccurate carrier data from Performance Metrics; however, there are still some schools that did not submit enrollment or carrier data. DHCFCP assumed that schools listing Chickering or United HealthCare Student Resources as their carrier had Aetna or United, respectively, as their actual carrier. Percentages are rounded to the nearest whole percent.

**Source:** DHCFCP Student Health Program 2005, 2006, and 2007 Performance Metrics and Fall Enrollment datasets as of 8/25/09.

# Student Health Program Grievances and Complaints Filed



All but one of the grievances over the three academic years were filed against Aetna or schools who self-fund their Student Health Programs (SHPs). It is important to note that most students are covered by either an Aetna or self-funded SHP.

Only Aetna had formal complaints filed with the Office of Patient Protection (OPP) in the Massachusetts Department of Public Health. The OPP investigates appeals filed by consumers when insurance claims or access to services are denied.

**Notes:** There was one grievance filed in the 2006-2007 academic year against the SHP offered at Boston Baptist College; however there was no carrier information associated with that one grievance. Self-funded SHPs are an arrangement in which a school provides health benefits to students and assumes the insurance risk for claims payment; an insurance carrier may act as a third party administrator but is not at risk for medical costs. Self-funded schools likely purchase reinsurance for very large claims. The analysis excludes schools that did not provide data on student enrollment, number of formal grievances filed against the insurance carrier, and number of complaints filed with the OPP. DHCFCP used data from schools' Fall Enrollment filings and benefit brochures to supplement missing enrollment data from Performance Metrics; however, there are still some schools that did not submit enrollment data.

**Source:** DHCFCP Student Health Program 2005, 2006, and 2007 Performance Metrics and Fall Enrollment datasets as of 8/25/09.



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# Methodology

The Division of Health Care Finance and Policy (DHCFP) analyzed Student Health Program (SHP) data submitted by schools for the 2005-2006, 2006-2007, and 2007-2008 academic years. The report shows aggregated three-year trends to minimize year-to-year data fluctuations. Schools who have changed carriers or funding structures during the three years are grouped by their SHP experience for each year; thus, the number of schools in any category may vary from year to year.

## **Fall Enrollment Dataset**

Schools are required to submit enrollment and basic insurance carrier information to DHCFP by November 1 of each academic year. This survey includes questions on SHP enrollment, student waivers, and basic SHP information including premiums and insurance carriers.

The response rate for the fall enrollment submission varies by year. In 2005, 95% of schools submitted data. In 2006, 97% of schools submitted data. In 2007, 82% of schools submitted data.

## **Performance Metrics Dataset**

DHCFP solicited SHP enrollment, annual premiums (without health center or administrative fees), financial performance, benefit limit, and customer service information from schools through a special data request in June 2009. Schools did not include services provided at student health centers in the data submitted.

This was the first time DHCFP collected such information. Schools were required to submit data on a survey (developed by DHCFP, in consultation with the SHP Technical Advisory Group which includes schools, students, consumer advocates, carriers, and brokers) for the 2005-2006, 2006-2007, and 2007-2008 academic years. DHCFP did not ask for data for the 2008-2009 academic year because SHP coverage for the year was still ongoing at the time the survey was due.

The response rate from schools was 95%. However, not all schools who submitted a survey provided information for all data elements requested.

# Summary Data by School (1 of 5)

School	2007-2008 School Category	2007-2008 Insurance Carrier	2007-2008 Annual Premium	2007-2008 Annual Student Enrollment	2005-2008 SHP Medical Expense Ratio	2005-2008 SHP Administrative Expense Ratio	2005-2008 SHP Profit Margin
American International College	Other	Nationwide	\$725	392	49%	31%	20%
Amherst College	Other	Combined	\$950	715	81%	27%	-8%
Andover Newton Theological Seminary <sup>2</sup>	Other	United	\$944	56	N/A	N/A	N/A
Anna Maria College	Other	Markel	\$1,052	98	38%	27%	35%
Assumption College	Other	Aetna	\$827	95	106%	45%	-51%
Atlantic Union College <sup>2</sup>	Other	Monumental	\$988	124	N/A	N/A	N/A
Babson College	Other	Nationwide	\$916	970	57%	26%	17%
Bay Path College	Other	Combined <sup>3</sup>	\$1,730	157	67%	29%	4%
Bay State College <sup>1</sup>	Other	Security Mutual	\$1,335	143	2%	20%	78%
Becker College	Other	Markel	\$1,773	176	36%	27%	37%
Benjamin Franklin Institute of Technology	Other	Nationwide	\$375	129	27%	31%	42%
Bentley University	Other	Aetna	\$975	976	65%	21%	14%
Berklee College of Music	Other	BCBS <sup>3</sup>	\$1,334	1,891	63%	27%	10%
Berkshire Community College	Community	Nationwide	\$881	173	104%	25%	-29%
Blessed John XXIII National Seminary <sup>2</sup>	Other	Nationwide	\$1,695	10	N/A	N/A	N/A
Boston Architectural College	Other	Nationwide	\$898	273	84%	31%	-15%
Boston Baptist College	Other	Aetna <sup>3</sup>	\$87	105	16%	38%	46%
Boston College <sup>1</sup>	Other	MEGA	\$1,678	3,340	63%	27%	10%
Boston Graduate School of Psychoanalysis <sup>2</sup>	Other	United	\$2,545	3	N/A	N/A	N/A
Boston University	Other	Aetna	\$1,412	9,767	68%	20%	11%
Brandeis University	Other	HPIC <sup>3</sup>	\$1,464	1,465	62%	27%	11%
Bridgewater State College	State	Aetna	\$1,241	908	48%	23%	29%
Bristol Community College	Community	Nationwide	\$881	389	70%	25%	4%
Bunker Hill Community College	Community	Nationwide	\$881	1,258	52%	25%	23%

**Notes:**

<sup>1</sup> Relevant data was not available from the school for at least one of the academic years for which data was collected; the average ratios and profit margins shown are based on less than three years of data.

<sup>2</sup> Relevant data was not available from the school for all three academic years for which data was collected; the average ratios and profit margins are not available (N/A).

<sup>3</sup> The school has changed insurance carriers over the three-year period for which data was collected; the insurance carrier shown is the carrier for the 2007-2008 academic year.

Two state schools (Massachusetts College of Art and Design and Massachusetts Maritime Academy) and four other schools (Cambridge College, Marian Court College, Fisher College, and Hellenic College) have not submitted any Performance Metrics data as of 8/25/09. The analysis excludes schools that did not provide total earned premium, total medical expense, and total administrative expense data. Student Health Program (SHP) ratios include data for the 2005-2006 through 2007-2008 academic years; the ratio is calculated by summing the total earned premium, total medical expense, total administrative expense, and profit for each school across the three academic years and calculating the ratios using the aggregated expense and profit totals. Percentages are rounded to the nearest whole percent and may not sum to 100% due to rounding.

**Source:** DHCFFP Student Health Program 2005, 2006, and 2007 Performance Metrics dataset as of 8/25/09.

# Summary Data by School (2 of 5)

School	2007-2008 School Category	2007-2008 Insurance Carrier	2007-2008 Annual Premium	2007-2008 Annual Student Enrollment	2005-2008 SHP Medical Expense Ratio	2005-2008 SHP Administrative Expense Ratio	2005-2008 SHP Profit Margin
Cape Cod Community College	Community	Nationwide	\$881	305	152%	25%	-77%
Caritas Laboure College <sup>2</sup>	Other	United	\$1,330	7	N/A	N/A	N/A
Clark University	Other	Nationwide	\$1,021	582	65%	28%	8%
College of the Holy Cross <sup>2</sup>	Other	Monumental	\$685	318	N/A	N/A	N/A
Conway School of Landscape Design <sup>2</sup>	Other	United	\$1,305	5	N/A	N/A	N/A
Curry College	Other	Aetna <sup>3</sup>	\$505	351	83%	35%	-17%
Dean College	Other	Nationwide	\$807	276	53%	29%	17%
Eastern Nazarene College <sup>1</sup>	Other	Nationwide	\$736	171	75%	27%	-2%
Elms College	Other	Security Mutual	\$1,425	76	58%	30%	12%
Emerson College	Other	Aetna	\$1,035	1,153	66%	20%	14%
Emmanuel College	Other	Nationwide	\$1,495	161	53%	29%	18%
Endocott College	Other	Markel	\$923	214	73%	27%	0%
Episcopal Divinity School <sup>2</sup>	Self-Funded	Self-Funded	\$2,788	26	N/A	N/A	N/A
FINE Mortuary College <sup>2</sup>	Other	United	\$1,305	0	N/A	N/A	N/A
Fitchburg State College	State	Aetna	\$1,241	307	62%	23%	15%
Framingham State College	State	Aetna	\$1,241	199	103%	23%	-26%
Gibbs College-Boston <sup>1</sup>	Other	Monumental <sup>3</sup>	\$436	148	79%	34%	-13%
Gordon College	Other	Security Mutual	\$1,140	248	59%	30%	11%
Gordon-Conwell Theological Seminary <sup>1</sup>	Other	Nationwide	\$1,255	488	88%	26%	-14%
Greenfield Community College	Community	Nationwide	\$881	255	114%	25%	-39%
Hampshire College <sup>1</sup>	Other	Combined	\$1,129	661	62%	21%	16%
Harvard University	Self-Funded	Self-Funded	\$1,362	13,819	78%	12%	10%
Hebrew College <sup>2</sup>	Other	United	\$944	38	N/A	N/A	N/A
Holyoke Community College	Community	Nationwide	\$881	321	82%	25%	-7%

## Notes:

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<sup>2</sup> Relevant data was not available from the school for all three academic years for which data was collected; the average ratios and profit margins are not available (N/A).

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Source: DHCSP Student Health Program 2005, 2006, and 2007 Performance Metrics dataset as of 8/25/09.

# Summary Data by School (3 of 5)

School	2007-2008 School Category	2007-2008 Insurance Carrier	2007-2008 Annual Premium	2007-2008 Annual Student Enrollment	2005-2008 SHP Medical Expense Ratio	2005-2008 SHP Administrative Expense Ratio	2005-2008 SHP Profit Margin
Hult International Business School	Other	Aetna	\$1,400	104	53%	35%	12%
ITT Technical Institute-Norwood and Woburn <sup>1</sup>	Other	Security Mutual	\$1,180	233	15%	30%	55%
Lasell College	Other	Combined <sup>3</sup>	\$1,330	168	37%	28%	35%
Lesley University	Other	Combined	\$1,379	695	48%	27%	25%
Longy School of Music	Other	Markel <sup>3</sup>	\$1,971	118	67%	28%	5%
Massachusetts College of Liberal Arts	State	Aetna	\$1,241	203	55%	23%	22%
Massachusetts College of Pharmacy and Health Sciences <sup>2</sup>	Other	Monumental	\$1,460	946	N/A	N/A	N/A
Massachusetts Institute of Technology	Self-Funded	Self-Funded	\$1,440	7,260	75%	13%	12%
Massachusetts School of Law	Other	Nationwide	\$2,180	45	37%	31%	32%
Massachusetts School of Professional Psychology <sup>2</sup>	Other	United	\$1,596	28	N/A	N/A	N/A
Massasoit Community College	Community	Nationwide	\$881	303	64%	25%	11%
MassBay Community College	Community	Nationwide	\$881	420	90%	25%	-16%
Merrimack College	Other	Combined <sup>3</sup>	\$1,223	168	41%	27%	32%
MGH Institute of Health Professions <sup>2</sup>	Other	BCBS	\$5,389	130	N/A	N/A	N/A
Middlesex Community College	Community	Nationwide	\$881	357	81%	25%	-6%
Montserrat College of Art	Other	Aetna	\$1,089	58	42%	35%	23%
Mount Holyoke College	Other	Combined	\$1,530	933	49%	27%	24%
Mount Ida College	Other	Combined	\$1,087	327	45%	27%	28%
Mount Wachusett Community College	Community	Nationwide	\$881	260	69%	25%	6%
New England College of Finance <sup>2</sup>	Other	N/A	N/A	N/A	N/A	N/A	N/A
New England College of Optometry <sup>2</sup>	Other	HPIC	\$950	260	N/A	N/A	N/A
New England Conservatory of Music <sup>1</sup>	Other	Combined <sup>3</sup>	\$1,572	367	56%	27%	16%
New England School of Acupuncture	Other	Nationwide	\$3,100	34	54%	29%	17%
New England School of Law	Other	Aetna	\$1,941	458	63%	26%	11%

**Notes:**

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**Source:** DHCSP Student Health Program 2005, 2006, and 2007 Performance Metrics dataset as of 8/25/09.

# Summary Data by School (4 of 5)

School	2007-2008 School Category	2007-2008 Insurance Carrier	2007-2008 Annual Premium	2007-2008 Annual Student Enrollment	2005-2008 SHP Medical Expense Ratio	2005-2008 SHP Administrative Expense Ratio	2005-2008 SHP Profit Margin
Newbury College	Other	Aetna	\$873	173	50%	34%	17%
Nichols College	Other	Nationwide	\$1,200	67	108%	31%	-39%
North Shore Community College	Community	Nationwide	\$881	312	90%	25%	-16%
Northeastern University	Self-Funded	Self-funded <sup>3</sup>	\$1,825	5,241	72%	19%	9%
Northern Essex Community College	Community	Nationwide	\$881	371	97%	25%	-22%
Olin College	Other	Aetna	\$682	90	89%	35%	-24%
Pine Manor College	Other	Security Mutual	\$1,050	153	39%	32%	29%
Quincy College	Community	Nationwide	\$881	391	94%	25%	-19%
Quinsigamond Community College	Community	Nationwide	\$881	306	84%	25%	-9%
Regis College <sup>2</sup>	Other	MEGA	\$421	963	N/A	N/A	N/A
Roxbury Community College	Community	Nationwide	\$881	332	21%	25%	54%
Saint John's Seminary	Other	Nationwide	\$1,356	59	54%	30%	16%
Salem State College	State	Aetna	\$1,248	1,116	55%	25%	20%
School of the Museum of Fine Arts	Other	Nationwide	\$1,765	164	43%	31%	26%
Simmons College	Other	Nationwide	\$1,495	645	57%	29%	14%
Simon's Rock College of Bard	Other	Nationwide	\$655	401	53%	35%	12%
Smith College	Other	Combined	\$1,780	927	54%	27%	19%
Smith College for Social Work <sup>1</sup>	Other	Combined	\$3,465	127	63%	27%	10%
Southern New England School of Law <sup>2</sup>	Other	United	\$1,289	65	N/A	N/A	N/A
Springfield College	Other	Aetna <sup>3</sup>	\$1,259	2,976	55%	31%	13%
Springfield Technical Community College	Community	Nationwide	\$881	406	60%	25%	15%
Stonehill College	Other	Combined	\$750	123	50%	27%	23%
Suffolk University	Other	Nationwide	\$1,457	2,108	61%	28%	11%
The Boston Conservatory	Other	Combined	\$1,409	256	74%	27%	-1%

**Notes:**

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**Source:** DHCFFP Student Health Program 2005, 2006, and 2007 Performance Metrics dataset as of 8/25/09.

# Summary Data by School (5 of 5)

School	2007-2008 School Category	2007-2008 Insurance Carrier	2007-2008 Annual Premium	2007-2008 Annual Student Enrollment	2005-2008 SHP Medical Expense Ratio	2005-2008 SHP Administrative Expense Ratio	2005-2008 SHP Profit Margin
The National Graduate School of Quality Management <sup>2</sup>	Other	N/A	N/A	N/A	N/A	N/A	N/A
The New England Institute of Art	Other	Security Mutual	\$635	558	56%	34%	10%
Tufts University	Other	Aetna	\$1,535	2,186	63%	22%	14%
Tufts University School of Medicine	Other	Tufts	\$2,940	1,588	88%	14%	-2%
University of Massachusetts at Amherst	UMass	Aetna	\$2,061	6,120	76%	20%	4%
University of Massachusetts Boston	UMass	Aetna	\$1,335	3,533	68%	20%	12%
University of Massachusetts Dartmouth <sup>1</sup>	UMass	BCBS <sup>3</sup>	\$1,173	1,163	62%	20%	18%
University of Massachusetts Lowell	UMass	HPIC <sup>3</sup>	\$930	2,110	53%	22%	25%
University of Massachusetts Medical School <sup>1</sup>	UMass	BCBS <sup>3</sup>	\$2,917	681	75%	20%	5%
University of Phoenix <sup>2</sup>	Other	United	\$857	17	N/A	N/A	N/A
Urban College of Boston <sup>2</sup>	Other	United	\$1,305	0	N/A	N/A	N/A
Wellesley College	Other	United <sup>3</sup>	\$1,280	860	43%	27%	30%
Wentworth Institute of Technology	Other	Nationwide	\$777	676	63%	31%	6%
Western New England College <sup>1</sup>	Other	Markel	\$1,785	412	50%	27%	23%
Westfield State College	State	Nationwide	\$1,270	250	56%	26%	18%
Wheaton College	Other	Markel	\$1,023	447	54%	27%	19%
Wheelock College	Other	Nationwide	\$1,495	100	66%	29%	5%
Williams College	Other	Combined <sup>3</sup>	\$1,011	784	56%	27%	17%
Woods Hole Oceanographic Institution <sup>2</sup>	Other	BCBS	\$402	5	N/A	N/A	N/A
Worcester Polytechnic Institute <sup>2</sup>	Other	United	\$940	456	N/A	N/A	N/A
Worcester State College	State	Nationwide	\$1,280	283	49%	29%	22%

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**Source:** DHCFFP Student Health Program 2005, 2006, and 2007 Performance Metrics dataset as of 8/25/09.

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