The Student Health Plan Advisory Committee (SHPAC) was initially formed in 1994 with the approval of the Senior Vice President. The SHPAC was established to provide a direct means of communication and interaction between the university, University Health Services, and the students covered and served by the student health plan. In 2015, a complementary entity to the SHPAC, the Student Health Fee Advisory Committee (SHFAC), was established by the Vice President for Student and Campus Life to advise on the health fee and to provide a direct means of communication and interaction between the university, UHS, and students served by the health fee. Since SHPAC and SHFAC have the same purpose – facilitating communication about health care access, delivery, and cost between the university, UHS, and students – both of these committees have been combined to make the Student Health Benefit Advisory Committee (SHBAC).

Committee membership will ideally include four to six students identified by the Student Assembly, two or three graduate or professional students identified by the Graduate and Professional Student Assembly, and one member from the University Assembly each with a two-year staggered term. Ex-officio membership includes the Student Health Benefits Administrator, Associate Director for Business and Finance from Gannett Health Services, the Director of Risk Management & Insurance, and representatives from University Human Resources Benefit Services, International Student and Scholars Office, Graduate school, Professional School, and other administrative offices as deemed appropriate from time to time. The chair is appointed by the Vice President for Student and Campus Life.

The committee will secure Cornell community guidance, assist in communicating information to the community, and make recommendations related to Student Health Plan policy, benefits and cost to the members. The committee also will be responsible for keeping the on-campus benefits of the Student Health Plan and the health fee aligned. In turn, the chairs of SHBAC will bring recommendations forward to the Vice President of Student and Campus Life and the Vice President of Finance and Chief Financial Officer.

The student health plan impacts local health providers and their representative organizations and may directly influence the delivery of local health care. As a result, the committee should consider the short- and long-term impact of its recommendations and activities on the local medical community and the University’s employee plans. It is important for the committee to understand and take into account the options and strategies for health care coverage in the employee plans when making recommendations for student health plan coverage.

Generally, the Student Health Benefit Advisory Committee is responsible for:

1) Reviewing and evaluating the Student Health Plan options, coverage and costs annually;
2) Reviewing and evaluating annually the health fee benefits and costs;
3) Obtaining community input including, but not limited to, meetings with the SA, GPSA, UA and other organizations and university offices and meetings with Gannett and community health providers; and
4) Disseminating information to the community on health plan concerns including, but not limited to, meetings with the SA, GPSA, and various university offices.

In particular, the committee has addressed and will continue to review a number of topics including:

- Ensuring that the end product health plan package provides adequate health care for students (e.g. students are not forced to drop out of Cornell due to minimal coverage);
• Addressing operational issues (e.g., policy notification and billing dates, waiver schedule and cutoff dates, hard waiver vs. soft waiver options);
• Review cost and scope of coverage provided by Gannett Health Services;
• Ensuring that the effects of the plan’s parameters are monitored (e.g., capitation/health fee, premium vs. plan usage costs, expected enrollment);
• Reviewing undergraduate and graduate payment plans and schedules;
• Ensuring that increased cost sharing be considered in the context of clinical and plan management best practices; and
• Ensuring that updates on key decisions and brief progress reports be communicated to the AVP of Campus Health and the cognizant Vice President.

The timing of the recommendations of the committee will be coordinated with any approvals needed by the senior administration or trustees related to cost of attendance and/or creation of the university budget.

Updated 09/16