

UC SANTA BARBARA

Student Health Service

Student Health Advisory Committee (SHAC) Spring Meeting 2 Minutes

Tuesday, 05/21/2024, 3:30 pm – 4:45 pm, SHS Conference Room

Members Present

Graci Novack (Co-Chair)	Student Advisor to The Executive Director of SHS
Dr. Vejas Skripkus (Co-Chair)	Executive Director of Student Health Services
Dr. Erin Moore	Student Health Medical Director
Dr. Edwin Feliciano	Director of Behavioral Health
Dr. Jackie Kurta	Director of the Alcohol and Drug Program
Kristen Rogers	Director of Nursing
Randy Lina	Director of Pharmacy
Buster Buchanan	Health and Equity Advocate
Stephanie Luong	Goodspeed Intern
Jada Moore	A.S. Health Care Initiatives Coordinator
Daniel Samie	EOB Undergraduate Representative
Mandy Shihadeh	Greek Life Representative
Carolyn Aronson	Recreation Department Student Representative

1.) Call to Order

- a.) Co-chair Novack called the meeting to order.

2.) Spring meeting one minute's approval

- a.) Approved by SL, seconded by VS

3.) Nursing updates

- a.) New nursing station location
 - i.) Moved to the old pharmacy location
 - ii.) Must schedule an appointment to be seen with nursing
- b.) Lobby remodel in progress early planning stage
- c.) Expansion of services to handling asynchronous vaginitis and emergency contraception completed
- d.) Collaboration with Health and Wellness for “tiny teach” sessions with their

interns

- i.) Health promotion/public health notices through health and wellness
- e.) Fall immunization clinic planning
- f.) Training MAs for “point of care” testing ongoing

4.) SHS website updates

- a.) Emergency/ After-hours Care changes
 - i.) PDF has been [updated](#), reflected on website
 - (1) Inaccuracies removed
 - (2) Information on how to use Sydney Health and Delta Dental app added
 - (3) Also added to the MyHealth portal under appointments
 - ii.) After-hours pop up added to home page during clinic closure
 - (1) Demoed to committee on TV
 - (2) Committee approved
 - (3) Webmaster Andrew asked the committee for input on the top green bar on the SHS website.
 - (a) Emergency/after hours care at the top. Followed by the current order of other linked categories
 - (b) Replacing COVID-19 on top with no-cost services
 - (c) Coloring: color can be fixed
 - (i) Green → blue
 - (d) All white category boxes, keep emergency box red
 - (i) Webmaster WIP
 - (4) Committee member suggested changing the order of items listed on the Emergency/ after hours page
 - (a) Having emergency (red) section first followed by current order
 - iii.) General [page update](#)
 - (1) Waived ambulance fee for UC SHIP holders added
 - (2) Reviewed and approved by the committee
- b.) Registered Dietitian added to [nutrition counseling page](#)
 - (1) Completed
- c.) Reminder, free services are listed on both the [SHS website](#) and the [Wellbeing website](#)

5.) MyHealth portal updates

- a.) Emergency/after-hours additions to the portal
 - i.) Shown to committee, approved
- b.) No-cost services addition

- i.) Work in progress
 - (1) Goal is to have as an option under appointments
 - (a) Committee agrees
 - (2) Portal demonstration
- c.) Verbiage change from “appointments” to “get care”
 - i.) Approved by committee

6.) Changes to GAP and Waived office visits

- a.) Increasing GAP membership cost and visit fees to \$200 per quarter
- b.) Reason (GAP) – Cost incurred from GAP insurance being low-cost
- c.) Reason (Waived) – Waived office visits haven't been adjusted in over a decade
 - i.) \$70 → \$100 per PCP visit
- d.) Beginning Fall quarter
- e.) Rx for async visits
 - i.) Async appointments ending in rx and some nursing visits will no longer be free for waived however still reduced cost compared to normal visit
 - (1) \$50 appointment cost for waived
- f.) Committee opinion on GAP name change
 - i.) Explanation of GAP provided
 - ii.) “Gaucho care” suggested
 - iii.) Committee member reminded that the “Care” acronym is already used on campus
 - (1) Concerned about redundant names
 - (2) Change won't be effective this fall will table for more discussion
 - iv.) Gaucho Access Program suggested
 - v.) Committee member inquiry regarding fees for waived student seeing nurses, free as of now.
 - (1) Many visits will start having \$50 charges

7.) Colored map update

- a.) Office of Budget and Planning sent their updated map
 - i.) We can either use their updated one or edit the SHS created map
 - (1) Use the SHS created map
 - (a) Approved by the committee, will update EH&S and continue process of adding to MyHealth Portal after appointment is made, find a location on the SHS website, and get printed for the main check in area
 - (b) Add main entrance check-in to the SHS routing map

- (c) Add student accessible bathrooms (all gender neutral)
- ii.) Send office of Budget and Planning map to Buster once updated
 - (1) If Budget and Planning map used change Gyn→ PCP
- iii.) Change courtyard entrance phrasing to IV/ jargon that indicates location better than “courtyard”

8.) Student-led initiative to improve medical/health literacy on campus

- a.) Working with a student to create a sub-committee within the AS- BCU Public and Mental Health Commission (PMHC)
 - i.) Described the general mission of the sub-committee– to utilize a task-force-based model to create informative messaging and programming to help students learn more about preventative health measures, common health issues within our student body, alongside information on how to navigate the healthcare system.
 - ii.) Approved by the Executive Director to edit the job description of the Student Advisor position at SHS to include being the Student Health liaison for this sub-committee. Facilitating communication between SHS and AS- sub-committee
- b.) Student health provider-approved information
 - i.) The student advisor will be POC and keep the committee updated
- c.) Interested students informed to reach out to Graci for more information

9.) Follow up

- a.) Student feedback for SOGI survey sent to Buster
 - i.) “Are you intersex?” added as a question
 - ii.) Buster explained SOGI survey to the committee
 - iii.) Going out to students mid-early summer
- b.) Termination of Lyra
 - i.) Explanation of Lyra provided
 - (1) Students on Lyra were directly messaged regarding the pilot termination
 - (2) CAPS has sent out their own messaging regarding termination and accessibility to therapy on and off campus
 - ii.) Student input requested
 - iii.) Offer Lyra to all students with an opt-in fee? Option to send letter to chancellor's office to advocate for utilization
 - (1) Committee member suggested asking Lyra utilizing students if they would be willing to pay an opt-in fee
 - (2) Committee member asked if students could opt-in to Lyra at any point in the year

- (a) Requires more research
- (3) Committee member pointed out the need to prove utilization and future need by students
 - (a) University would likely need to subsidize visits
 - (i) Lyra costs \$200 per visit. Students asked if they would be willing to have a copay to offset this cost
 - 1. Student feedback– yes, if its low/lower than their copay on insurance
 - (b) Suggestion to think about visit limits
 - (c) Ideal application would be a low copay (<\$40) for all students regardless of insurance
 - (d) Committee member relayed that demand for this could be huge
- (4) All students with insurance have access to behavioral health visits, how would providing Lyra to all be different/ worth the effort?
 - (a) Pros
 - (i) Lyra is more accessible
 - (ii) Quicker access to provider, more tele-therapy options than other platforms by report
 - (b) Cons
 - (i) Lyra is costly for students, would require university subsidy
 - (ii) Would require chancellor approval and proof of that it would be highly utilized
- iv.) Committee member asked if utilization was high due to Lyra being free with UC SHIP
 - (1) Committee agreed that this was a large factor alongside quick accessibility to a provider (typically within a week)
- v.) Lyra facts from data provided by Alliant at EOB
 - (1) 8 visits on average on per student utilizing Lyra
 - (2) Lyra was incentivized, broadly advertised to students
- vi.) Committee member inquired about alternative options to Lyra that could be less expensive
 - (1) Potentially offer a similar program to students with an opt-in fee
 - (2) Rula health is also included with UC SHIP (\$0) and accepts other insurances but is not highly advertised

- (a) Provides similar services to Lyra including tele-therapy and tele-psychiatry with quick availability
 - (b) Will look more into this and see how we can better advertise to students
- vii.) Utilization could be limited to students who are needing behavioral health benefits (since it won't be free)
 - (1) Students opt-in if/when they decide they need these services
 - (2) \$20-40 copay per visit
- viii.) Student member input requested– Would they be willing to pay a \$40 copay
 - (1) Student input— Those with alternate insurance would be more inclined to use their personal insurance for behavioral health visits if Lyra copays were more expensive than their insurance
- ix.) Committee has decided to first see how students adjust to Lyra termination before letter to the chancellor

10.) Open floor discussion

- a.) No comments

11.) Adjournment

- 1) 4:45 pm