

1. Define problem - demand vs need
 - a. Humboldt State University students are facing a healthcare shortage on campus and within the community. We believe we have a responsibility to fix it – wait times are increasing and there is insufficient capacity to meet student needs. Most students will use medical, counseling, or health education services during their time at HSU, and a healthier campus has a positive effect on the success of every student. With limited community resources, HSU's on-campus Health and Wellbeing Services are the only resource for many students.
 - i. Nearly 25% of our students have unmet mental health needs
 - ii. 68% of students at HSU screen positive for anxiety (This is significantly higher than all other CSUs)
2. Solution proposal - health fee adjustment to support medical, counseling and health education
 - a. \$93/semester would allow us add additional services and decrease wait times.
 - i. Can be all at once in Fall 2018 or incrementally
 - b. \$66-\$78 (repair-new building)
3. What we need your help
 - a. Prioritizing funds i.e. which needs to be met immediately
 - i. Counseling? Building Needs? Health Education Needs (Oh Snap,Check It Peer Health Education? Etc?)
4. Here is how you can provide your input
 - a. Website - survey
 - b. National College Health Assessment - Check email Feb 19
 - c. Open forums - interactive activities
 - i. 2/23 5-6:30 Great Hall
 - ii. 3/5 noon - 1:30 Pizza lunch provided

5. Address FAQs

- a. Why should students have to foot the bill?
 - i. We don't think they should. However we are working within a system in which Student Health & Wellbeing Services (across CSUs) budget is funded in majority by student fees. Given the current situation we see a fee adjustment as our only option to meet the demands of student medical and counselling needs. Which is why we need your help in prioritizing services. I.e more doctors, more psychiatrists. Refer back to
- b. Why not bill insurance?
 - i. Billing Insurances doesn't increase Health Center Budget. It would have no effect on wait times, number of service providers, or types of healthcare. Additionally, billing insurance still leaves room for expensive services. The system we have right now, the one that DOES NOT bill insurances, provides reasonably affordable care services.
 - ii. The last critical issue to consider in billing insurance is access and social justice. Currently about 1/3 of our students use Kaiser and another 1/3 are underinsured or uninsured. This could leave anywhere from 3000-6000 students unable to access services at the same level as other students. And, it will be the most vulnerable and underprivileged students who are most affected.