



## Minutes from Staff Senate Monthly Meeting of September 15, 2016

Location: Newcomb Hall

Time: 11:00 AM–1:00 PM

Attending: See pages following minutes.

### Meeting Summary

<b>Welcome and Announcements</b>	<b>Maggie Stein</b> , Co-Chair <b>Jessica Wenger</b> , Co-Chair
<b>UHR Updates</b>	<b>Kelley Stuck</b> , VP and Chief Human Resources Officer <b>David King</b> , Retirement Plan/Financial Wellness Program Manager <b>Joanne Hoagland</b> , Health & Welfare Benefits Program Manager
<b>Senate Business</b>	Co-Chairs

### Welcome and Announcements

**Maggie Stein**, Co-Chair; **Jess Wenger**, Co-Chair

- Maggie introduced Jess for this, her first official meeting as Co-Chair.
- Remember to check-in for attendance tracking and get a parking validation pass if you need one.
- **Action:** A reminder in Staff Senate meetings: please introduce yourself by first and last name prior to asking questions. This is a best practice that helps colleagues, guest speakers, and the secretary.

### Guest Speakers

**Kelley Stuck**, Vice President and Chief Human Resources Officer

- **About Kelley:** Kelley is in a new role, overseeing both Academic and Medical Center Human Resources. To accept the position, she and her family, including her parents, moved from Missouri. Her willingness to doing so is indicative of her commitment to and excitement for the future of Ufirst at UVA. Her undergrad degree is in Marketing Communications, and her Masters is in Administration with a Human Resources Concentration. Kelley has diverse professional experience, working in healthcare, managing health plan communications, consulting, and working in higher education at the University of Missouri. She specializes in change management and transformation of systems. She feels UVA is an impressive organization and sees the potential that if we do well with Ufirst that it could be a model for higher education organizations. (Read more about Kelley at <http://executivesearch.virginia.edu/kelley-stuck>).

**Q & A from the Senate:**

**Q:** Does Kelley foresee future satellite centers for HR or Finance if UVA's Medical Center purchases additional facilities?

**A:** Kelley is not sure yet. She explained her philosophy. When considering localized versus centralized service providers, effectiveness and efficiency of serving staff determines what will work best. People who do something all day every day become extremely efficient and proficient. For some roles/duties, this work is easily done in a centralized location. Other services are better provided when employees can conveniently interact with HR professionals face to face. She believes there's room for both coordinated or consolidated services as well as localized. The balance of the two is what must be determined, and she thinks Ufirst will help figure out that mix at UVA.

**Q:** It was mentioned that UVA may move away from having Aetna as our health plan administrator. Is that something that's under consideration?

**A:** This idea is something being discussed but is a "brainstorming" idea at this point. Plan administration is just part of the multimillion dollar costs of Aetna's services. The biggest cost related to the health plan is claims. Discussion of moving from Aetna is more of an opportunity for jobs and not about money spent. The insurance market consolidates, with a few big players. Part of what to consider is can UVA provide the level of services, analytics, and bells and whistles that staff expect? This idea is under preliminary discussion, but not vetted or decided upon yet.

**Q:** A senator saw state employee salaries released via a newspaper outlet. At UVA, the average annual salary is \$77,000 and the median is \$60,000. The majority of income categories, however, are under \$50,000. How do we ensure equity for largest group of staff (making \$50K and under) and assure that advancement to higher pay is possible?

**A:** At the University of Missouri, 70% of staff made under \$50,000. Kelley is aware that the cost of living is about 10% higher in Charlottesville. We can do two things to steward staff making \$50K or less. First, we ensure they are paid fairly compared to others based on market range. This approach is applied for those in the upper end of salaries to the lower ranges. We need to have a disciplined approach to trying to pay people comparatively to what they'd receive in other areas for similar jobs/work. Second, we need to have employee development opportunities—help people map career paths, whether that be advancement in their current career area or moving to others. Kelley has spoken to UVA stakeholders about how we can continue to provide professional development opportunities and support staff.

**Q:** Another senator stated that staff want to know what steps to take to continue to develop skills and earn more. Sometimes people take a class or get training and it doesn't result in pay adjustments. How do we make the path less convoluted? Clearly outline steps for staff? *(conversation occurred re: pay band adjustments. Maggie mentioned a document she would share to clarify pay ranges).*

**A:** Kelley said that UVA compensation experts coming to talk to the senate would be the best resource for specific information about salaries. Regarding pay for expanded skills, the determining factor is if the job requires specific training, meaning do newly acquired skills or insights get applied in employees' work. Pay changes are made based on training/skill acquisition necessary for the job.

**Q:** Why are patient costs for the same service at one hospital/facility different than at another?

**A:** This is a problem throughout America; it's not a problem unique to UVA. The cause is a convoluted billing system. Billing influences how things are paid, and how things are billed to insurance companies varies by provider/hospital. As a consumer this is frustrating and can make it very hard to determine costs. Aetna provides the best info they can for us, but it's best to shop for MRI, x-ray, etc. or look for bundled services. This issue will not get better until medical billing is more consistently handled across organizations.

- **Contact Kelley:** Kelley invited senators to contact her with questions, issues, etc. She values conversation and is happy to connect as things come up.

**David King**, Retirement Plan/Financial Wellness Program Manager (**Barry Schmitt**, Senior Vice President/Financial Advisor, from CAPTRUST and **Leora Friedberg**, Associate Professor of Economics and Public Policy, accompanied Dave)

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- **Changes to the Investment Fund Lineup:** Dave introduced Barry and Laura. Barry has been a financial advisor for UVA for over 13 years. Staff should have received an at-home mailing regarding retirement fund changes. All plans except VRS and 457 plan will be affected. Changes affect current staff, retirees, those who've left but retain retirement funds still with UVA. *See presentation for more info; get more information on the web here:* <http://www.hr.virginia.edu/other-hr-services/hooswell/financial-wellness/retirement-fund-lineup-change/>.
- **Reasons for Change:** Changes have been made to simplify retirement savings choices, reduce fees, provide uniformity between 401(a) and 403(b) programs, and improve retirement communications.
- **Action: Effected staff have until Feb. 1 to self-select new fund options.**
  - After Feb. 1, 2017, if staff members have not made selections, investments (both accumulated balance and future contributions) will be rolled over to a similar investment option (when available) or a default fund if a comparable investment option is no longer available.
  - The updated fund menu will be available for affected staff starting Sept. 26.
  - TIAA and Fidelity will have an increased presence on Grounds in the next few months: staff are encouraged to contact their representative to check in about retirement.
  - Remember that staff are able to change investment fund choices at any time, meaning it need not be during Benefits Open Enrollment for you to make changes.

#### **Q & A from the Senate:**

**Q:** Did I see that if we don't choose anything, the choice will be made for us? Our investments will be transferred to a similar fund?

**A:** If staff don't self-select, investments will be rolled over after that Feb. 1, 2017 deadline. There are 380 fund options, so there's not always a true like-to-like fund to move investments to. For example, say you have Fidelity Select China Fund and our new options don't have a China fund. Those funds would be mapped (meaning transferred) to the Vanguard Target Retirement Fund for the year closest to when the employee turns 65. Other existing funds are not going away. The Fidelity

Freedom funds will no longer be the default. The Fidelity Vanguard funds are passively managed while the Freedom funds are actively managed; the passive management means decreased fees.

**Q:** Will fees part of the information provided?

**A:** Performance info in the user interface is net (after fees). Click on a fund name; it will show the expense ratio. Dave added a PDF with the tiered structure and expense ratio info at Investment Lineup page [here](#).

**Q:** When you say self-select, are we locked into a specific tier based on what we have now?

**A:** No. You are able to do your own research and decide where you want to go. You are able to create your own allocation and divide up your investments between funds, including funds in different tiers. The tiers are something we're trying out to make communication about investing clearer/easier to understand.

### **Joanne Hoagland, Health & Welfare Benefits Program Manager**

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- **2017 Open Enrollment:** Benefits Open Enrollment will take place October 10–28. *See presentation for more info.*
- **Claims Costs (slide 16):** As Kelley said, claims costs are a substantial portion of our Aetna costs. To be mindful of claims costs rising, UVA is focusing on wellness and proactive health efforts. Prescription costs, as with national trends, are increasing, but we are able to leverage our assets and prescription plan decision-making tools to help with this. UVA is in a good position to not be affected by the ACA upcoming “Cadillac Tax” of employers providing high-cost benefits.
- **Healthcare Costs (slide 17):** Years ago, UVA opted to leave CoVA (Virginia’s medical plan). Annual health plan costs have slightly decreased in the past 3 years for UVA employees compared to an 8-10% increase for participants in CoVa and other health plans.
- **Open Enrollment Changes (slides 19 & 20):** Several changes occurred, including 100% coverage for preventative annual skin screenings, increases to out-of-network costs, and the Spousal Affidavit only needing be completed if adding an eligible spouse (as opposed to annually). Some additional changes occurred to the medical plan design (*see slide 20*), but the plan design for the UVA dental plan and Davis Vision remain the same.
- **Insurance Terms Explained:** UHR will soon share a new video that explains commonly used insurance terms (such as copay, coinsurance, deductible, etc.) and will also have a hard copy version of the resource. More to follow on that resource.
- **Premium Changes (slides 21 & 22):** Health plan premiums (except for Basic Plan Employee or EE+Child(ren)) increased. Increases range for \$0.75/mo. to \$29.50/mo. Dental and vision plan premiums also increase slightly (except for Basic Dental Plan for Employee, EE+Child(ren), and EE+Spouse), with the increase range being from \$0.16-\$1.75/month.
- **HSA/FSA Auto-reenrollment & Enrollment Minimums Reduced (slide 23):** For those currently enrolled in a Health Savings Account (HSA) or Flexible Spending Account (FSA), you will be automatically reenrolled, meaning you will be defaulted to have the same account with the same dollar amount as the previous year for 2017. Also, to accommodate those hired later in the benefit year, the minimums have been reduced.

- **ORP Life Insurance (slide 24):** This will change for 2017, so it is a good time to review to ensure adequate coverage. It will be possible to enter beneficiaries as you enroll (no paper form needed). Rates vary based on coverage amount.
- **Actions:**
  - **Attend Health Expo/Fair:** Staff are encouraged to attend the Health and Benefits Expo (10/12/16) or Medical Center Health Fair (10/13/16). See more info at [Hoo's Well](#).
  - **Complete Fall Challenge (Earn Money):** Staff have until 10/28/16 to complete steps of the Hoo's Well Fall Challenge.
  - **Get Text Alerts:** To receive Benefits Open Enrollment reminders via text, send UVABOE to 88202. Recipients will receive 4 texts—an enrollment confirmation and three reminders during the open enrollment period in October. Feel free to encourage others in your household to sign up for the text alerts if you'd like them to be aware of OE updates.
  - **Review or Modify Benefits:** Make sure you review or change your benefit elections before Open Enrollment ends on Oct. 28.

#### **Q & A from the Senate:**

**Q:** How did changes because of the National Affordable Care Act affect UVA?

**A:** The ACA didn't affect UVA very much. Most of our plan changes were made based on benchmarking compared to similar places and review of questions/feedback HR received from Staff and Faculty Senates.

**Q:** Is the Fall Fitness Challenge replacing the \$20/paycheck health reward?

**A:** The per paycheck reward is not an option next year. We're trying out having the fall challenge rewards delivered in a lump sum. When looking at the dollar amount, we were mindful of the amount changing negatively for staff based on the distribution method and also tax implications of a lump sum versus a per-paycheck delivery method. We hope that the lump sum will give staff more flexibility to use the funds. A lump sum payment was received well for the spring challenge.

**Q:** What about when we're onboarding new staff who may get hired too close to or after challenge deadlines? How will this change affect new staff?

**A:** There are multiple challenges available for new staff throughout the year, in case they miss eligibility deadlines. Also, for the fall challenge, we uncoupled rewards to provide more accommodation and choice, meaning staff used to have to complete all of the challenges steps to receive the reward but now they may choose to do part or all of the challenge. Hiring is constantly ongoing, so it is hard to choose the cut off. When onboarding new staff, just let them know to be on the watch for the next challenge available to them.

**Q:** A senator noticed on the HSA/FSA slide (slide 23) that there's an "age 55 catch-up." What is that?

**A:** If you're in the Basic (high deductible) plan, you are allowed to increase your own contribution and have a different max if you're older. HSA funds carry over from year to year.

**Comment:** While the HSA rolls over, a senator didn't realize the FSA funds were "use-it-or-lose-it." The senator learned too late that there is an FSA Store for participants can by a variety of

items, from Band-Aids to pull-ups. Prices may be higher than other stores, but the items are shipped to your home. It's convenient and a good way to spend FSA funds if you have quite a bit left near the end of the benefit year. (FSA Store: <http://www.chard-snyder.com/fsastore>)

**Comment:** Contributions into an FSA can be modified outside of open enrollment for qualifying events or hardships. The virtual benefits counselor ([Ask Alex video](#)) helps work through health plan use and other available resources, such as the FSA or HSA.

**Q:** There's a substantial cost difference going to UVA doctor vs. other doc. Patients incur more costs with specialists because staff can't get an appointment in a timely manner, even through the UVA Care Connection. Is that something that will be looked at?

**A:** Yes, this is something that is on peoples' radar to look at.

**Q:** Can people on any health plan have an HSA?

**A:** No. On participants in the Basic (high deductible) plan can have an HSA. If you switch to another health plan, you retain your existing HSA and can use that money. However, you can't contribute more to the HSA if you change to a health plan other than Basic. If you leave employment, you still keep and can use the HAS accumulated funds.

**Q:** The Dependent Day Care FSA has an age limit, right? Since HSA/FSA enrollment will roll over in OE this year, how do people avoid getting burned by that?

**A:** Dependent age will be looked at in rollover based process, but it's best if staff are aware of the age cutoffs and make decisions based on it. FSA users are able to pay for care costs right up to the birthday when dependents lose eligibility, so it's important to be mindful of that when choosing deductions.

**Q:** A senator noticed on one the Additional Changes for UVA Health Plan Options slide (#20) that the UVA contribution for family HSAs is decreasing by \$500 this year. Is that correct?

**A:** Yes. UVA decided to follow in line with the IRS structure. It will make it easier to communicate, but \$500 loss for some staff. By individually choosing to put more into the HSA, staff can save more on their taxes.

**Q:** The HSA is a bank account, right, and earns interest?

**A:** Yes. HSAs earn interest. If/when they reach a certain balance, the opportunity to put money in some investment options also becomes available. While it certainly doesn't replace other retirement programs, there are different ways an HSA can earn for you.

**Comment:** A benefit of the HSA is that you never pay tax on it, not when the money goes in or comes out. There are different ways you can draw/use funds when you reach certain age markers.

- **Contact Joanne:** Have more questions? Reach out to Joanne.

## Senate Business (co-chairs)

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- **Introductions:** The co-chairs have received feedback that senate participants would like more of an opportunity to get to know one another. To start to address that, we did brief intros with attendees stating their name and work location (or preferred work location if they have more than one).
- **Overview of Responsibilities & Committees**
  - **Email from Amy:** All Senators and Alternates should have received a letter from Amy Muldoon near the end of August with a lot of helpful information and resources.
  - **Meetings:** Did everyone receive calendar invite to this meeting? If not, contact [Jess](#).
  - **Staff Senate Collab:** Everyone has access. If you're not familiar, there are trainings available. Access it [here](#).
  - **Staff Senate Website:** New website under construction, with all content updated there. Some info on old site is outdated but resources put toward getting new site up to date. Updates to follow when the new site launches.
  - **Communicating with Constituents:** See Amy's email. Minutes and summary should be coming within a week. Senators can share in advance benefit info. Everyone will receive an email list with your constituents. Bill Corey gets a master list and divides by units; lists are updated roughly quarterly. Let us know if you are concerned you don't have the most up-to-date list.
  - **Committees:** Now is the time to sign up for a committee or change your committee if you wish. In October, Staff Senate will have a working meeting and set concrete plans this year. Organizational Excellence (OE) will help facilitate the working groups at the October meeting. *See presentation for more information on committees.*
  - **Coordinators:** These roles support areas that require attention but not necessarily a committee. School of Medicine senators and alternatives, you'll hear from your coordinators.
  - **Education Benefits Special Meeting:** The Advocacy Committee's efforts have contributed to reevaluation of current staff educational benefits. Alison Miller from UHR requested the Staff Senate provide feedback about potential upcoming changes to the education benefits.
    - **Action: The meeting is scheduled for Oct. 13 at 10 a.m. in the Newcomb Hall South Meeting Room.** Attend if you're able and invite others from your constituency. This will be a productive time for Alison's team to get specific feedback from Staff Senate.

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Next Meeting:

**Thursday, October 20, 2016**

**Newcomb Hall, South Meeting Room**

11:00 AM–1:00 PM

**NO GUEST SPEAKER – Working Meeting**