
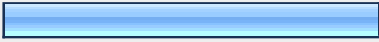
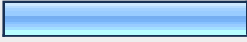
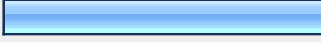
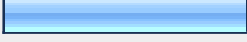
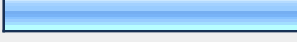


GSC Health Care Survey Fall 2008

1. Gender			Response Percent	Response Count
Male			61.2%	221
Female			38.8%	140
			<i>answered question</i>	361
			<i>skipped question</i>	3

2. Citizenship			Response Percent	Response Count
US Citizen or Resident			69.0%	251
International on Visa			31.0%	113
			<i>answered question</i>	364
			<i>skipped question</i>	0

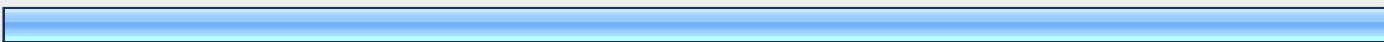
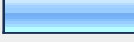


3. Which of the following best describes your 2008-2009 status at Caltech?

		Response Percent	Response Count
1st year grad		1.9%	7
2nd year grad		25.0%	91
3rd year grad		16.2%	59
4th year grad		21.2%	77
5th year grad		16.2%	59
6th+ year grad		19.5%	71
		<i>answered question</i>	364
		<i>skipped question</i>	0

4. How much did Caltech's health insurance plan factor into your decision to matriculate to Caltech vs another institution or job position?

	0, not at all	1, very little	2	3	4	5, very much	Rating Average	Response Count
health insurance factor	36.5% (128)	25.4% (89)	9.4% (33)	14.5% (51)	10.8% (38)	3.4% (12)	1.48	351
<i>answered question</i>								351
<i>skipped question</i>								13

5. If health insurance was a factor in your decision, please indicate which reason(s) below best describes why. (Select all that apply.)

		Response Percent	Response Count
I am in general concerned about health care coverage.		92.4%	183
I have dependents.		8.6%	17
I have a dependent with a serious health condition.		0.5%	1
I have a serious health condition.		5.6%	11
Other		6.6%	13
answered question			198
skipped question			166

6. How satisfied are you with the current (Fall 2007- Spring 2009) Caltech Insurance plan, excluding dental and vision care?

	-5, very dissatisfied	-4	-3	-2	-1	0, neutral/don't know	1	2	3	4	5, very satisfied	Rating Average	Response Count
Current Health Plan	2.3% (8)	2.6% (9)	3.1% (11)	8.0% (28)	10.0% (35)	20.2% (71)	4.6% (16)	10.5% (37)	16.0% (56)	14.8% (52)	8.0% (28)	1.16	351
answered question													351
skipped question													13

7. The Caltech health insurance plan provides limited vision care through the Aetna Vision One discount program. How satisfied are you with the Vision One discount program?

	-5, very dissatisfied	-4	-3	-2	-1	0, neutral/don't know	1	2	3	4	5, very satisfied	Rating Average	Response Count
Vision One	6.0% (21)	3.4% (12)	4.6% (16)	6.6% (23)	3.1% (11)	63.5% (223)	2.6% (9)	5.4% (19)	2.6% (9)	2.0% (7)	0.3% (1)	-0.43	351
Brief Comments on Vision Care													61
<i>answered question</i>													351
<i>skipped question</i>													13

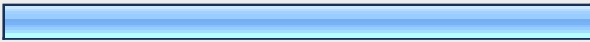

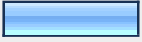





8. How satisfied are you with the current HMO Delta Dental Plan?

	-5, very dissatisfied	-4	-3	-2	-1	0, neutral/don't know	1	2	3	4	5, very satisfied	Rating Average	Response Count
Dental	6.0% (21)	3.1% (11)	5.7% (20)	6.6% (23)	6.0% (21)	39.0% (137)	4.8% (17)	7.7% (27)	11.1% (39)	7.7% (27)	2.3% (8)	0.17	351
Brief Comments on Dental Care													64
<i>answered question</i>													351
<i>skipped question</i>													13

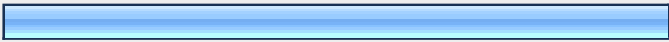





9. Office visit for mental health, including substance abuse/misuse (do NOT include visits to the Counseling Center)

		Response Percent	Response Count
0		84.0%	293
1-5		3.4%	12
6-10		1.4%	5
11-20		2.0%	7
21-30		0.6%	2
31-40		1.4%	5
41-50		2.3%	8
51+		2.0%	7
Don't know or N/A		2.9%	10
		<i>answered question</i>	349
		<i>skipped question</i>	15

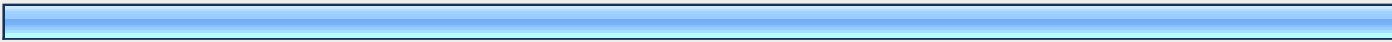



10. Office visit for physical health/well being (do NOT include visits to the Health Center and do NOT include physical therapy)

		Response Percent	Response Count
0		39.3%	137
1-5		44.7%	156
6-10		8.9%	31
11-20		3.4%	12
21-30		1.7%	6
31-40		0.3%	1
41-50		0.0%	0
51+		0.9%	3
Don't Know or N/A		0.9%	3
		<i>answered question</i>	349
		<i>skipped question</i>	15

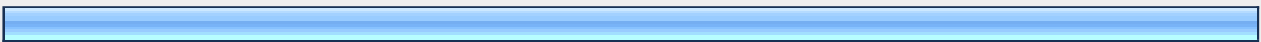
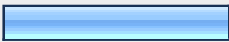

11. Lab Diagnostic and X-rays (including diagnostic tests performed at Health Center)

		Response Percent	Response Count
0		44.4%	155
1-5		48.1%	168
6-10		5.2%	18
11-20		0.9%	3
21-30		0.3%	1
31+		0.0%	0
Don't Know or N/A		1.1%	4
		<i>answered question</i>	349
		<i>skipped question</i>	15

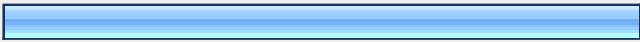
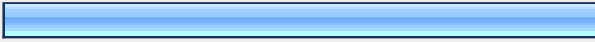
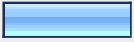
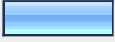



12. Hospitalization

		Response Percent	Response Count
0		93.1%	325
1-2		5.4%	19
3-5		0.3%	1
6+		0.0%	0
Don't Know or N/A		1.1%	4
		answered question	349
		skipped question	15

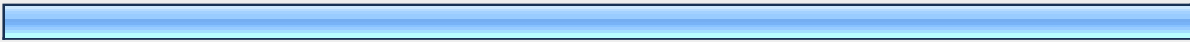
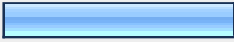



13. Emergency Room or Urgent Care Visit

		Response Percent	Response Count
0		84.0%	293
1-2		14.9%	52
3-5		0.0%	0
6+		0.0%	0
Don't Know or N/A		1.1%	4
		answered question	349
		skipped question	15

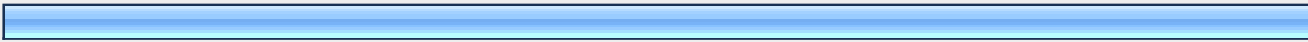






14. Retail Prescription Drugs

		Response Percent	Response Count
0		42.4%	148
1-5		39.5%	138
6-10		8.3%	29
11-20		7.2%	25
21-30		0.6%	2
30+		1.1%	4
Don't Know or N/A		0.9%	3
		answered question	349
		skipped question	15

15. Mail-Order Prescription drugs

		Response Percent	Response Count
0		79.4%	277
1-5		15.2%	53
6-10		2.6%	9
11-20		2.0%	7
21-30		0.0%	0
31+		0.3%	1
Don't Know or N/A		0.6%	2
		answered question	349
		skipped question	15

16. Chiropractic Care/Physical Therapy Visit

		Response Percent	Response Count
0		87.4%	305
1-5		3.7%	13
6-10		2.9%	10
11-20		3.2%	11
21-30		1.1%	4
31+		1.1%	4
Don't Know or N/A		0.6%	2
		answered question	349
		skipped question	15

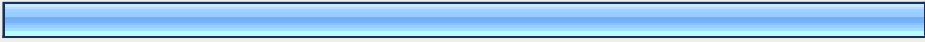
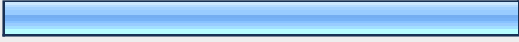


17. Please rate the following services for their importance as part of the Caltech Health Insurance Plan.

	1, less important	2	3	4	5	6	7	8	9	10, very important	Rating Average	Response Count
Mental health office visit (NOT visits to the Counseling Center)	12.4% (42)	6.5% (22)	5.6% (19)	7.1% (24)	12.9% (44)	7.9% (27)	8.5% (29)	9.4% (32)	6.2% (21)	23.5% (80)	6.09	340
Office visit for physical health/well being (NOT visits to the Health Center)	1.5% (5)	0.9% (3)	1.8% (6)	2.9% (10)	10.0% (34)	5.6% (19)	13.2% (45)	13.2% (45)	8.5% (29)	42.4% (144)	8.03	340
Lab Diagnostic and X-rays	0.3% (1)	0.6% (2)	1.5% (5)	0.9% (3)	7.4% (25)	5.0% (17)	11.8% (40)	18.2% (62)	16.2% (55)	38.2% (130)	8.32	340
Hospitalization	0.3% (1)	0.9% (3)	1.2% (4)	2.1% (7)	4.7% (16)	3.3% (11)	7.4% (25)	15.1% (51)	14.5% (49)	50.6% (171)	8.66	338
Emergency Room and/or Urgent Care Visit	0.3% (1)	0.3% (1)	1.5% (5)	0.6% (2)	5.3% (18)	2.1% (7)	6.8% (23)	13.3% (45)	11.8% (40)	58.0% (196)	8.87	338
Retail Prescription Drugs	0.3% (1)	0.9% (3)	1.5% (5)	2.7% (9)	8.3% (28)	4.7% (16)	12.4% (42)	17.1% (58)	16.5% (56)	35.7% (121)	8.16	339
Mail-Order Prescription drugs	5.7% (19)	4.5% (15)	7.5% (25)	4.8% (16)	14.0% (47)	5.7% (19)	11.3% (38)	13.4% (45)	11.0% (37)	22.1% (74)	6.67	335
Chiropractic Care/Physical Therapy	5.0% (17)	2.9% (10)	6.2% (21)	5.9% (20)	17.9% (61)	7.4% (25)	10.6% (36)	15.0% (51)	9.1% (31)	20.0% (68)	6.63	340
	answered question											341
	skipped question											23

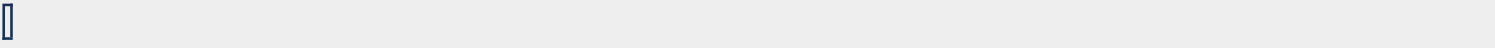
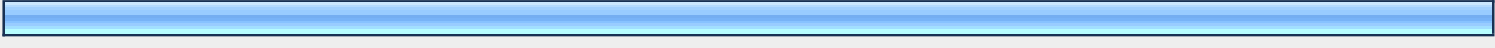
18. Currently our health care plan does not include preventative care coverage for STI/STD, sexually transmitted infections/diseases, screenings or tests, unless a patient has obvious symptoms. Would you be interested in having STI/STD screening coverage?

	-5, very uninterested	-4	-3	-2	-1	0, neutral/don't know	1	2	3	4	5, very interested	Rating Average	Response Count
STI/STD screening	12.6% (43)	1.8% (6)	3.2% (11)	2.1% (7)	2.1% (7)	21.1% (72)	5.0% (17)	11.7% (40)	13.2% (45)	5.9% (20)	21.4% (73)	1.13	341
	<i>answered question</i>												341
	<i>skipped question</i>												23

19. How much more would you be willing to pay annually for STI/STD screening coverage?

		Response Percent	Response Count
\$0		61.6%	210
\$1-\$49		34.3%	117
\$50-\$99		3.2%	11
\$100+		0.9%	3
	<i>answered question</i>		341
	<i>skipped question</i>		23

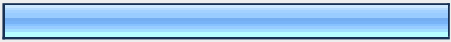
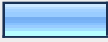

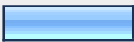
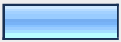



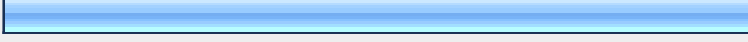
20. Have you ever applied to the Caltech Emergency Fund for health care expenses? For more information: <http://www.gradoffice.caltech.edu/FinancialEmergency.htm>

		Response Percent	Response Count
Yes		0.3%	1
No		99.7%	337
<i>answered question</i>			338
<i>skipped question</i>			26






21. Are there particular health services or benefits you would like to see covered by the standard insurance plan that are not currently included?

		Response Count
		79
<i>answered question</i>		79
<i>skipped question</i>		285


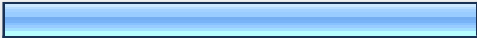

22. If you and any dependents covered under the Caltech plan have seen a new health care provider in the last 12 months, how did you find the provider? (Select all that apply)

		Response Percent	Response Count
Health Center Referral		29.6%	100
Counseling Center Referral		6.8%	23
Aetna/Chickering Website or Customer service		9.5%	32
Student/Colleague Referral		8.6%	29
Family Member/Friend Referral		7.4%	25
Physician Referral		7.4%	25
Other		4.1%	14
Don't know		1.5%	5
N/A		49.7%	168
		<i>answered question</i>	338
		<i>skipped question</i>	26

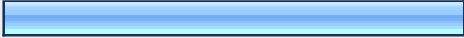
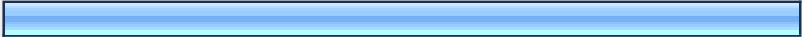
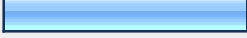
23. If you and any dependents covered under the Caltech plan have received care from an out-of-network health care provider in the last 12 months, please indicate the reason why you went to this out-of-network provider instead of an in-network provider. (Select all that apply)

		Response Percent	Response Count
I have not received care from an out-of-network provider.		70.1%	237
You were traveling for academic related reasons and you couldn't find an in-network provider in the area.		1.5%	5
You were traveling for personal reasons and you couldn't find an in-network provider in the area.		1.8%	6
Your preferred health care provider was not in-network.		9.8%	33
Don't know		17.8%	60
		answered question	338
		skipped question	26

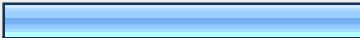

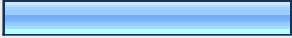


24. As a graduate student for the 2008-2009 academic year, you currently pay \$300 towards your Health Care Plan premium, billed as \$100 per term to your bursar's account. The total annual cost of the premium is \$1,917 per Caltech student, and the remainder—\$1617—is covered by Caltech. The current Health Care Plan deductible is \$150. Note: Deductible is the amount you must pay for services before the insurance plan pays for services, excluding prescriptions. Would you rather not pay towards your annual premium and have a higher deductible (>\$450)?

		Response Percent	Response Count
No, I would rather continue to pay towards my premium to keep same plan with low (\$150) deductible.		59.3%	195
Yes, I would rather not pay towards my premium and have a higher deductible (more than \$450).		31.6%	104
Don't know		9.1%	30
		<i>answered question</i>	329
		<i>skipped question</i>	35

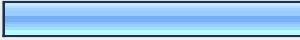

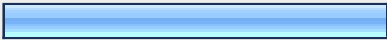
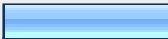
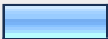




25. With rising Health Care costs, the same Caltech Student Health Care Plan with the same benefits has been costing more to Caltech, and more to you since grad students began paying towards their premium in 2007. If the *same* Health Care plan as we currently have rises in cost again for next year, are you willing to pay more towards your premium to keep the same plan?

		Response Percent	Response Count
No, I would rather have a different plan that costs less than pay more to keep the same plan.		30.6%	53
Yes, I am willing to pay more to keep the same plan.		53.2%	92
Don't know.		16.2%	28
		answered question	173
		skipped question	191

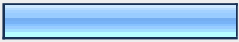
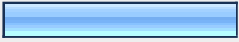
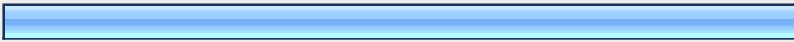

26. If Health Care costs increase for next year and the following year, how much more are you willing to pay per year towards your premium to keep the same Caltech Student Health Care Plan?

		Response Percent	Response Count
\$0		23.7%	41
\$1-\$99		45.1%	78
\$100-\$199		19.1%	33
\$200-\$299		2.9%	5
Don't Know.		9.2%	16
		answered question	173
		skipped question	191

27. Please estimate how much you and any dependents covered under the Caltech plan(s) spent on out-of-pocket costs for health care, including vision and dental, in the last 12 months. To estimate your out-of-pocket costs, consider the amount you paid toward the deductible(s), prescription drug co-pays and coinsurance or fees for in-network or out-of-network care. Do NOT include a plan's premium costs, such as \$60 for Delta Dental enrollment or \$150 for your Health Plan enrollment in 2007-2008 or Dependent enrollment costs.

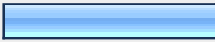
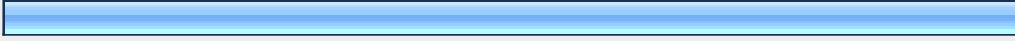

		Response Percent	Response Count
\$0-49		19.8%	65
\$50-249		28.9%	95
\$250-499		25.5%	84
\$500-999		10.9%	36
\$1000-1999		6.7%	22
\$2000-\$3499		2.1%	7
\$3500-\$4999		0.9%	3
\$5000+		0.3%	1
Don't know or N/A		4.9%	16
		<i>answered question</i>	329
		<i>skipped question</i>	35

28. Which type of health services did you and any dependents covered under the Caltech plan(s) spent the most money on (excluding plan premiums) in the past 12 months?

		Response Percent	Response Count
Vision		15.5%	51
Dental		15.5%	51
Standard Health Insurance Care (all other care)		52.9%	174
Don't Know		16.1%	53
		<i>answered question</i>	329
		<i>skipped question</i>	35


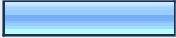
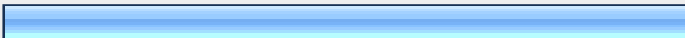


29. If you and any dependents under the Caltech Health Plan spent more than \$150 (per insured) on out-of-pocket health care costs in the past 12-months, *excluding* vision was the most expensive out-of-pocket cost.

General Service Type					
	office visit (mental or physical health)	x-ray or lab diagnostic/screening/test	prescriptions	physical therapy/chiropractic	hospitalization
Most expensive out-of-pocket health care service	18.5% (30)	24.7% (40)	36.4% (59)	6.2% (10)	10.5%

30. For in-network health care provider office visits, how would you generally prefer to pay if you had to pay per visit?			Response Percent	Response Count
Co-insurance, which is when you pay a percentage of the cost of each visit			14.0%	46
Co-pay, which is when you pay a fixed dollar amount per visit			67.8%	223
Don't know			18.2%	60
<i>answered question</i>				329
<i>skipped question</i>				35

31. Please rank the following benefits in order of their importance/preference as part of your Health Care Plan. Note the following terminology: Co-Insurance per Service-- percentage you pay per office visit, lab/x-ray, hospitalization, emergency, prescription, and/or therapy Out-of-Pocket Maximum-- amount you pay out-of-pocket before expenses are covered 100% by insurance, includes deductible and co-insurance payments, does NOT include co-pays						
	4, least preferable/important	3	2	1, most preferable/important	Rating Average	Response Count
Low deductible	28.3% (89)	20.0% (63)	21.6% (68)	30.2% (95)	2.46	315
Low co-insurance per service	24.6% (77)	34.2% (107)	30.7% (96)	10.5% (33)	2.73	313
Low co-insurance or co-pay per office visit	15.0% (48)	33.0% (106)	33.6% (108)	18.4% (59)	2.45	321
Low out-of-pocket maximum	29.4% (95)	12.7% (41)	15.8% (51)	42.1% (136)	2.29	323
<i>answered question</i>						329
<i>skipped question</i>						35

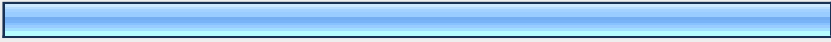
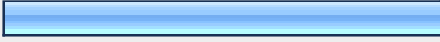
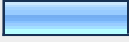


32. Which group of benefits is most important/preferable as part of your Health Care Plan? Note: All scenarios would lower the annual premium rate equivalently compared to current plan.

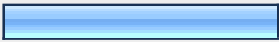

		Response Percent	Response Count
Low deductible, moderate co-insurance rate per service, low out-of-pocket maximum		25.2%	83
Moderate deductible, low co-insurance rate per service, moderate out-of-pocket maximum		11.2%	37
Low co-pay for all office visits, low deductible, moderate co-insurance rate for non-office visit services, low out-of-pocket maximum		45.6%	150
Moderate co-pay for all office visits, moderate deductible, low co-insurance rate for non-office visit services, moderate out-of-pocket maximum		2.4%	8
Don't know		15.5%	51
		<i>answered question</i>	329
		<i>skipped question</i>	35


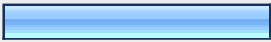
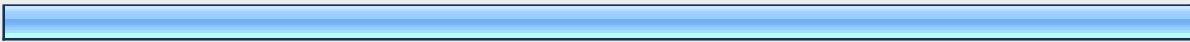
33. Considering the above listed rates, would you be willing to pay more annually in order to make the Caltech Health Care plan for student dependents more affordable?

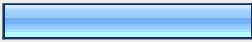

	-5, Very unwilling	-4	-3	-2	-1	0, Neutral/Don't Know	1	2	3	4	5, Very willing	Rating Average	Response Count
Dependents	30.1% (99)	3.0% (10)	8.8% (29)	8.2% (27)	4.3% (14)	20.4% (67)	7.6% (25)	6.1% (20)	4.9% (16)	1.5% (5)	5.2% (17)	-1.43	329
	<i>answered question</i>												329
	<i>skipped question</i>												35




34. How much are you willing to pay annually for Caltech Student Dependents to have lower premium costs?

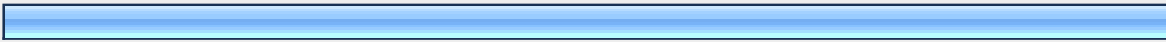
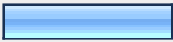

		Response Percent	Response Count
\$0		55.3%	182
\$1-\$49		29.2%	96
\$50-\$99		8.2%	27
\$100-\$199		4.6%	15
\$200+		2.7%	9
	<i>answered question</i>		329
	<i>skipped question</i>		35

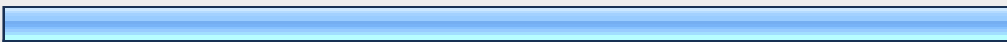
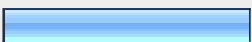

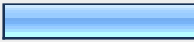
35. Do you have any dependents (spouse/same sex partner and/or children)?			Response Percent	Response Count
Yes			18.2%	60
No			81.8%	269
			<i>answered question</i>	329
			<i>skipped question</i>	35

36. Do you currently participate in the Graduate Office dependent reimbursement program, which partially reimburses your monthly health plan premium costs for dependent coverage? For more information: http://www.gradoffice.caltech.edu/documents_default.htm			Response Percent	Response Count
Yes- I have dependents, and we participate.			3.0%	10
No- I have dependents, and we do not participate.			17.6%	58
N/A- I have no dependents.			79.3%	261
			<i>answered question</i>	329
			<i>skipped question</i>	35

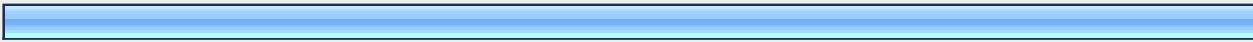
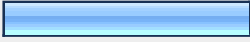
37. Do you have dependents who are NOT enrolled in the Caltech Student Health Insurance plan?			Response Percent	Response Count
Yes, I have one or more dependents who are not enrolled in the Caltech Student Health Insurance plan.			16.4%	54
No, either I have no dependents or my dependents are all enrolled in the Caltech Student Health Insurance plan.			83.6%	275
			<i>answered question</i>	329
			<i>skipped question</i>	35

38. Are your dependents currently insured under a US based health plan?			Response Percent	Response Count
Yes			83.6%	46
No			14.5%	8
Don't know			1.8%	1
			<i>answered question</i>	55
			<i>skipped question</i>	309

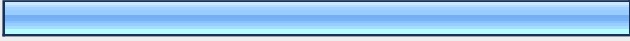
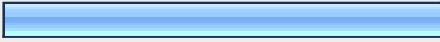




39. If your dependents are NOT under a US based health plan, why not?			Response Percent	Response Count
Too expensive			77.8%	7
Covered by a non US based health plan			11.1%	1
Other (please specify)			11.1%	1
			answered question	9
			skipped question	355


40. Please indicate your current dependent non-Caltech insurance plan.			Response Percent	Response Count
A plan provided by your spouse's employer or school			67.3%	37
An individual policy: Please provide insurance carrier's name below			16.4%	9
Other- please fill in below			3.6%	2
No plan			12.7%	7
			Insurance Carrier/Other	13
			answered question	55
			skipped question	309

41. Please indicate which of your dependents are covered by the health insurance plan in the previous question.

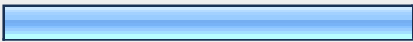
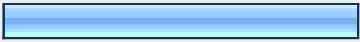
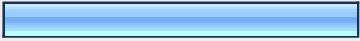




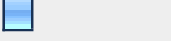
		Response Percent	Response Count
Spouse only		83.6%	46
Child(ren) only		0.0%	0
Spouse and Child(ren)		16.4%	9
		<i>answered question</i>	55
		<i>skipped question</i>	309

42. What do you currently pay PER MONTH toward health coverage premiums for your dependents covered by the non-Caltech plan?

		Response Percent	Response Count
\$0-\$49		41.8%	23
\$50-\$149		29.1%	16
\$150-\$199		3.6%	2
\$200-\$249		7.3%	4
\$250-\$299		0.0%	0
\$300-\$349		1.8%	1
\$350-\$399		1.8%	1
\$400-\$499		0.0%	0
\$500-\$599		0.0%	0
\$600-\$699		0.0%	0

\$700-\$799+		0.0%	0
Don't know		14.5%	8
answered question			55
skipped question			309

43. Please estimate your out-of-pocket expenses for only your dependents covered by the non-Caltech plan in the past 12 months. Do NOT include plan premium costs.

		Response Percent	Response Count
\$0-\$99		27.3%	15
\$100-\$249		23.6%	13
\$250-\$499		23.6%	13
\$500-\$749		5.5%	3
\$750-\$999		1.8%	1
\$1000-\$1499		5.5%	3
\$1500-\$1999		0.0%	0
\$2000+		1.8%	1
Don't know		10.9%	6
answered question			55
skipped question			309

44. Please enter any additional comments or suggestions you have about Caltech health care for graduate students. Or, e-mail the advocacy committee with comments/concerns-- gscadvoc@caltech.edu

		Response Count
		82
	<i>answered question</i>	82
	<i>skipped question</i>	282

45. If you like, you may enter your name and e-mail address for a prize drawing. Our "thank you" for your time to take this survey. All entries are completely separate from anonymous survey responses.

		Response Percent	Response Count
Name	<input type="text"/>	99.7%	300
E-mail	<input type="text"/>	99.7%	300
	<i>answered question</i>		301
	<i>skipped question</i>		63

GSC Health Care Survey Fall 2008

Please enter any additional comments or suggestions you have about Caltech health care for graduate students. Or, e-mail the advocacy committee with comments/concerns-- gscadvoc@caltech.edu

I actually think it's pretty good the way it is. I just got slammed this year with dental expenses and thought the co-insurance was terrible for my root canal.

I really like the current plan. It would be a shame if we had to start paying a co-pay or co-insurance for every office visit, especially for people who see a doctor or therapist on a very regular (weekly) basis.

1.) I urge you to look at the issue of health care in terms of preventing financial disasters for students. I suspect the majority of students don't use the health insurance much and would prefer to have low premiums. However, for students who run into significant physical or mental health problems (and that can be anyone), the insurance is a critical lifeline. Given our meager stipends, paying out of pocket is simply not an option. I hope that you will not succumb to the "tyranny of the majority" who might want a few extra dollars in their pockets, and instead will focus on providing much-needed medical and financial protection for everyone.

2.) The faculty are fond of saying that we have a ridiculously good plan (better than theirs); however, my wife's plan is as good or better than Caltech's student plan, and it costs us much less. In my experience, institutions that expect to hire high-caliber people generally offer very good insurance. Simply put, attracting good employees (or students) requires good benefits. It's also worth noting that \$2,000 per year is an excellent premium; Caltech probably contributes more than that to the faculty's plan, even though the resulting insurance is not as good.

3.) Caltech should be embarrassed the cost of dependent care.

4.) I believe the answers you get to question 29 will be hard to interpret. It's unclear whether a rank of "least preferable / important" should mean the idea ranks lowest on our scale of preferences (i.e. "least important") or whether it represents the option that is least palatable ("least preferable"). Also, it wasn't clear how "low copay" and "low coinsurance for office visits" differed.

I think I'd be happy to help pay for insurance costs for the children of other graduate students. Spouses should be responsible enough to either find their own jobs with their own health insurance, or something along those lines.

It will be really helpful not to see any further rise in the health insurance premium that we pay annually. While the cost of everything is constantly going up, the graduate student stipend, unfortunately does not follow the same trend.

Speaking for students with family: Please do not decrease benefits and coverage for dependents. Health care in USA is extremely unaffordable, specially for graduate students that support a family. I know we are a minority, but we still are here and need plans like the current one at no higher premiums.

This past year I had numerous problems with the current health care provider, culminating with their refusal to cover part of my health care expenses. As a result, I was left with an additional, unexpected burden of hundreds of dollars. Personally, I would support a change in care provider.

An important additional consideration is the cost coverage for international medical visits and hospitalizations. It would be great to increase the rate covered by the insurance and to include evacuation to the closest facility that can provide the needed level of care.

current plan is very good. i would like to keep it if possible.

\$300 one year is too high, esp. for the majority of students who usually keep good health condition

It would be great if it were cheaper to insure my daughter with the same Aetna PPO that I have as a grad student.

For how many people at this school wear glasses or contacts, you'd really think we'd have a good optical insurance program. My old school had one where I paid \$2 a month and it would pay for a substantial amount of my lenses and frames.
Considering that graduate students' compensation is already quite low, excellent health insurance is absolutely essential to make it possible for those with serious conditions to finish their PhDs!
My wife was covered under the dependent program for a pregnancy this year. We were faced with paying for costs because the hospital that was covered did not have doctors in the hospital who were covered under the plan. There were no anesthesiologists in the hospital who participated in the student plan. We therefore had no choice but to pay for an out of network provider. We also feel that student plan should cover an annual preventative physical exam. I went to the Health center for a skin exam for cancer prevention and was referred to a specialist who then charged us the entire amount because preventative care is not covered under the plan. I filed a complaint to the Health Center that I should have been told at the Health Care center that the dermatologist visit would not be covered. I commend the Health Center for understanding my complaint and clearing my financial obligations with the dermatologist.
The dependent coverage is too expensive to be affordable on a student stipend.
Graduate students are paid very little. The least the university can do is make health expenses as small as possible. I think this is particularly important for mental health, because I have seen more people at Caltech than anywhere else I've been put either themselves or others at risk due to mental instabilities. We all benefit from those people getting the help they need.
It should be more clear how we go about enrolling in the Dental care insurance plan. Health insurance is automatic but that isn't...
The current plan seems to work pretty well, with two exceptions. 1) an annual physical could be covered and 2) the \$250k max per individual sickness/injury is a bit low, \$500k - \$1mil would be better.
appreciate the work you're doing, willing to pay a little more to make sure that all grad students get good coverage, but money is pretty tight so can't afford a whole lot extra per term
I think health insurance should be used to prevent financial catastrophes, not to make the cost of health care seem invisible. Higher deductibles and copays are fine as long as someone who gets cancer is properly treated without breaking the bank.
Please consider the following; if a Caltech couple have a child (assuming that the mother will have to give up work to take care of the child or spend ~\$1500-\$2000 /month for daycare), then the couple being paid graduate pay will have to: a: compromise research with another job, b: not have wife or child medically covered, or c: pay 30% of monthly pay for coverage (\$610/\$2100). Graduate research should not inhibit having a family, ever.
The health center on campus is excellent and can take care of most of my health needs. I very rarely see a doctor outside of the health center.
I think it's ridiculous that you don't let us opt out of an insurance plan we don't use.
I appreciate that students at Caltech have such great health insurance and coverage
Information should be made available to all students about the possibility for using emergency funds to help pay for medical needs. Many students likely have a chronic illness or severe disease that needs constant monitoring and medication for in order to stay alive. Since the cost of living is so high right now and stipends are the bare minimum for students, it is very hard to make ends meet when it comes to paying bills and having to pay for medical needs. I'm a student who doesn't get help from my parents to pay for all my medical needs. If I could get a 2nd job I would but my PhD advisor demands too many hours a week to work in the lab.
When I entered Caltech in the fall of 2006, I was promised a health care plan that would cost me \$0. I find it really appalling that Caltech is going back on that promise now. It makes me even angrier when I see how much money they give to undergrads for things like Interhouse!

I think they need to manage their money more intelligently and give us what they promised in the first place, and only charge fees on incoming students who are told BEFORE they matriculate how much they will have to pay for insurance. Essentially, Caltech lied to my class, and it makes me angry.
A PPO dental plan option would be better than being forced to take the HMO.
I would really like to have the plan for dependents more affordable, as currently it is way too expensive, and when my wife stops working we will have to look for an individual policy that is cheaper.
Re: question 28 -- I strongly prefer no copay to 'low' copay. For those of us who have to see doctors often, the copays can add up really quickly. It doesn't affect people who don't go often, so they think that a lower premium's better but it can be killer for those of us who don't have that option. PLEASE PLEASE consider this when increasing the copay.
It would be very nice if dependent coverage was cheaper. It does not make sense that annual price for a student is \$1900, and for a spouse it is \$4100.
I would be willing to pay low copay to not spend the extra \$300 a year that caltech doesn't want to spend.
I am really opposed to having to pay more to cover someone else's dependents! I chose not to be married or have kids in grad school for financial reasons-- i shouldn't be burdened by their decisions!
The mental health component of the insurance plan is very expensive. I don't require those services and would like to not pay for 52+ office visits a year for others. Also, I was promised my coverage would be paid for when I enrolled here and that promise has not been kept. A compensatory raise for those who enrolled when fully paid health care was part of the offer should be put in place.
The premium for 2+ dependents is absolutely unacceptable. I've recently moved my wife and children to an independent plan on another carrier because I could not afford Caltech's insurance premium. It's ridiculous to expect a graduate student to pay more than 50% of their take-home income just on the premium, with no alternative plans available (lower premium/higher deductible, HMO, etc). My previous employer had a comparable plan, yet I only had a \$100 monthly premium for the whole family (forget that I made 4x as much and didn't have to pay \$40/month for parking...). I'd imagine most grad students are young and reasonably healthy, with little other than the expense of yearly checkups, and at least for me that means I would much rather have a higher deductible and lower premium. While it's unlikely I will ever reach the deductible, it's also given that I'm not down \$9k from the start. Our new plan has a > 5x lower premium and a max out-of-pocket (including deductible) about equal to Caltech's premium alone. How is this the best we can do?
I do not think that it should be necessary for graduate students to enroll in the Caltech health insurance. Perhaps some sort of a standard can be set for what a student's own health insurance must provide, and those students should be allowed to opt out of the Caltech health insurance. \$300 per year for something I never use seems inappropriate.
I don't like the fact that I came in under one system where we didn't have to pay a premium for our health care and then I started being charged \$300/year and I didn't even use the plan in the whole year, which means I paid \$300 for nothing
When I was accepted to Caltech in 2007, the acceptance clearly indicated that insurance premiums would be covered by Caltech. Then I show up and this is not the case. This was misleading and amounts to a breach of contract. The only reason I have not pursued it is because I figured paying part of the premium and having a better plan was better than a bad plan that was fully covered. Just turning the other cheek to this misleading information was the lesser of two evils. Also, you don't provide nearly enough information in question 24 (a very important question): i.e. would our contribution continue to double every year as it has the last two years?! And ">\$450" is pretty vague, maybe a \$550 deductible would be ok if we contributed less to the premium, but \$1000 would be too much.
I hope the GSC is open about the negotiations of the new health care plan. This survey is a great start, but the wider grad student population

<p>should be involved throughout the process. For example open and well publicized meetings on the subject, frequent email updates on the process, as well as solicitation of further anonymous/electronic feedback would be desirable.</p>
<p>I like the one we have!</p>
<p>thanks for doing this</p>
<p>i would like to be able to go to my usual dentist back in my home state (not CA) & have insurance cover that.</p>
<p>Question about office visits was very ambiguous, does that mean a specialist consult or just a primary care preventative visit. These are very different things and the later can be obtained at the health center where as in general the former cannot.</p>
<p>I would strongly support encouraging Caltech administration to take a serious stand against rapidly increasing health care costs. I would be willing to help them write letters to our Representatives regarding the urgent problems of untenable year-over-year increases in health care costs. It must be stressed that in only a few more years (at current rates of increase) graduate students will be suffering dramatic reductions in effective salary available for living expenses. If our stipends don't go up much faster than health care costs, our standard of living will go down very quickly. Although I am over half way through my PhD here, I have no intention of remaining a graduate student at Caltech if the recent unreasonable increases in health care cost (\$0 to \$150 to \$300 per year...) are not reversed. Health care and free parking were among the few benefits offered in the package that I accepted when I decided to come to Caltech. However, Caltech administration and faculty have shown no concern for how the gradual reduction/elimination of these benefits have impacted my life. That is very disappointing and does little to foster goodwill on my part to the Institute.</p> <p>Also, I think that it is very important that coverage NOT BE DECREASED. I expect Caltech administration and faculty to stand firm in supporting high quality health care at NO MORE THAN INFLATION-adjusted increases.</p> <p>Lastly, any changes to undergraduate health plan (i.e. allowing undergraduates to opt out) that impact graduate student health care costs should NOT BE THE RESPONSIBILITY of graduate students--we can't afford it!!!</p>
<p>I don't think we need 52 mental health visits per year.</p>
<p>Has Caltech also investigated PPO coverage plans?</p>
<p>I think it is important to keep a PPO plan, as opposed to an HMO (not sure if that is under consideration?). Most of the doctors/therapies I have been to told me that they don't take HMOs, implying that I would not be able to get the care I preferred if enrolled in one of those.</p>
<p>please do not increase the premium just so other parts of the plan are more affordable, it doesn't make sense</p>
<p>Given that the health plan went up from \$0 to \$300 in two periods and service hasn't improved at all, I am very unwilling to pay any more. Co-pays are VERY undesirable.</p>
<p>Over all it is good, but i think there needs to be a way to opt out of dental coverage without being covered elsewhere. I would rather not have dental than have to pay for bad dental coverage.</p>
<p>providing cheaper dependent insurance for students' children would be good.</p>
<p>Why are health insurance costs increasing at this rate?</p>
<p>I feel that as it is MANDATORY for us to be enrolled in caltech health insurance, we should not have to pay for the premium at all (like the year 2006). This cost should be absorbed through the university, unless the university would allow allow students to obtain their own individual coverage outside of school and once they have proven they have sufficient coverage, caltech releases the some 1,600\$ dollars or so that it pays for the students insurance right back to the student.</p>

The state of the Caltech graduate student health insurance is not acceptable. We need better dental coverage (delta PPO) and no deductible on a plan with many routine tests more accessible to students. Many students can barely afford to get by and may skip routine tests to avoid the currently high deductible charges. While they are considered low on a national average when compared to our yearly salary these figures are not so low. I find it interesting that there currently is money to erect 6 new buildings around campus but not enough money to fund better health insurance for our student population. It is clear where the administration's concern is here, and it is not with the health of the students. This is interesting because Caltech is not a for profit business, yet we get worse coverage than most companies which are out there for profit. The administration is there to support us so that we are properly able to do research and produce for the university efficiently. I find it a problem when the very people who are funded by the overhead of our grants start putting priority into their ego petting by embellishing the university rather than providing the service to the scientists that they were hired to do. Something here has gone awfully wrong is this is the case that we are allowing this to happen, really we're being taken for a ride. How is it more important to cut our funding for health insurance and other student programs than constructing several buildings in an already over crowded university? I am also disappointed with the argument that other employees of caltech are charged for the health insurance and therefore students should also pay a premium, as students we do not get 401k and we do not get to CHOOSE a plan like other employees of caltech, so they really should be careful about calling us employees or students when convenient because if they want to treat us as employees there's other benefits that they should tag along with that premium. These are just a few ideas on leverage points that we can use to obtain better health insurance, if the GSC needs a hand researching what other top schools offer their students so that we can compare it to our current plan I would be willing to put in some time.

Thanks,
Gilberto DeSalvo
gilberto@caltech.edu

please buy a PPO dental plan and a good vision plan. The current ones don't cover our cost well.

If all those options listed result in the same cost to Caltech, but with different coverage, why not offer all those options and allow us to choose, rather than one option that 2/3 will be unhappy with?

N/A

Caltech is an extremely stressful environment and NEEDS to be able to render excellent physical/mental health services to its students. Without the reasonably ample coverage that the health plan has provided to me during my grad years, I would not have been able to take care of myself properly. Please don't make it more difficult than it already is!! Caltech expects excellence from its students and students deserve (at the minimum!!) excellent health benefits at an affordable price.

I think the mental health insurance coverage is too substantial - one should not require 52 visits... Additionally, I think Caltech should pay the increasing cost because I was told the Health Insurance was completely paid for when I got here.

question 31 requires you to answer even if you have no preferences.

Many of these questions are meaningless. How can we know which plan is better without knowing the specifics? Truly, what matters is how much we pay for how much coverage. Whether we have to pay that as we go or as a fixed amount is not meaningful without specific numbers.

Furthermore, the dental HMO is a disgrace. In my experience the dentists in our network are very bad as well as expensive. We should at least

be able to opt in to a more expensive PPO.
The one bright spot of my health care experience here has been the health center. I have found their services to be useful as well as convenient, and the staff to be helpful and kind.
we with kids are paying so much for health care -- it is really a stress..
It is absurd to push the "increasing health insurance costs" onto the student population. This indicates extremely poor planning on the part of the Institute.
In my opinion, health insurance is to pay for emergencies. I don't care about having a very high deductible 1000-3000 dollars. However, if I were to need long term care (hit by a truck, mental illness), I would like insurance to entirely cover this.
The vision plan really sucks, and I have not used it although I have very bad eyesight.
My general opinion about our current health plan is: it covers essentially everything I need; the cost is reasonable; if keeping the same plan in future years means paying more (whether in the form of a higher deductible, co-pay, co-insurance, etc.), then so be it.
I know that the cost of insurance is going up but the amount we are getting paid as graduate students is relatively stable. Where do you think we are getting the extra money for health care?
thanks for putting this survey together.
The price for insuring spouses is ridiculously high. It is also shooting yourself in the foot not to cover STI screening. ESPECIALLY for women, not screening for STIs because of the price increases the chances of getting long-term, severe effects that will take more money to treat later on down the line and reduce productivity as a student.
Health care is extremely important. Nevertheless, when we contribute to the costs of health insurance, I feel like I'm living in a Pullman Car world -- where we're paid and then charged by the same hand.
It would be useful to have more options - most employers offer several different plans that are right for different people. For example, as someone who is healthy apart from some routine appointments (eye care, dental), I would have no issues with a high deductible plan that cost me less. I would also like to strongly encourage a different dental provider and preferably a non-HMO provider. HMO providers lock one into a very select group of dentists and I have not heard anything good about the current list of dentists available through Delta. I would rather pay double the price for dental coverage and get access to a larger network (like a preferred provider plan) than the current plan. Having found a dentist who is good but does not accept Delta, I will not be subscribing to any dental plan that does not offer more selection than Delta.
It is important students are covered for major expenses. Students should never leave school with debt due to accidents or unfortunate health situations. It is also important students feel able to see a doctor for what might be a situation, but has no real immediate impact. By this I mean preventative maintenance is important - it will cost students a lot later in life if it is hard to see a doctor now. It is hard enough to just find the time, there should be no other barriers. I have been avoiding seeing a doctor for a while, but I need to. why don't I go? time and money.
Hi, I was in an accident in 2006 where I was hospitalized and required tens of CTs/MRIs. I saw (and continue to see) neurosurgeons, neurologists, orthopaedic surgeons, cardiologists, I don't even know who else. If we had co-insurance where I paid a percentage of the total cost, I would be bankrupt. Honestly, how low can you set the maximum out-of-pocket? \$100k? \$50k? How many grad students have this amount in their bank account? Please keep the co-insurance and maximum insurance low for this reason-to protect the students from catastrophic events. By the way, I wasn't do any high-risk activities-just crossing the street.
I am someone who does not get sick very often. However, I do have bad teeth. I only go once a year and I went to years ago, were I felt that I had to pay almost everything out of pocket. I need free cleanings and free basic coverage so that I don't wait until I have a major expensive

problem.
I think it is very good and important that visits to the health center don't cost any extra. Also both the fact that visits to the counseling center are fully covered, and that the physical therapy is covered so well, has meant a lot to me personally.
I am currently covered by my wife's firm's plan, which provides far superior coverage for NO premium, NO deductible, \$5 copay. I recognize that Caltech is unable to provide such superior coverage; however, I think that the scrimping and cost-cutting that has taken place in this area in the past several years is inexcusable. At the time I matriculated, I was not married, and university-provided healthcare was a concern for me. The stipend offered by Caltech at the time was far inferior (by nearly 50% dollar value) than that offered by other schools where I had been admitted, but I chose to matriculate at Caltech because I felt the research opportunities here outweighed that. However, if the healthcare package then were as poor as it is now (esp. including the fact that students now MUST pay part of their premium!), I would have gone to another university! Also, given that I am now covered by my wife's plan, I am upset that I am not allowed to opt out of the \$300 per month--it seems equally like a waste of money that Caltech is needing to pay \$1613 to insure me when I would be happy to sign something saying that I don't want/need the coverage. Also, save the "prize" money and put it towards healthcare.
I would be interested to know the health care plans and costs at comparable schools. I think it is very important to keep the maximum out of pocket costs low given how low our yearly stipends are, one event could be very costly if we switched to a % of service plan.
I understand why the Caltech student health insurance plan is not optional for students registered at Caltech: the assumption is that they are living in Pasadena. However, I am in an unusual situation that has made this a huge nuisance. I am a registered Caltech student on detached duty at MIT (my advisor moved to MIT in 2007, and I moved with her. I will return to Caltech to defend in February 2009). Because Massachusetts law has specific health insurance coverage requirements, my advisor has paid for me to be on the MIT student plan, so now I am being charged for the Caltech plan even though I don't use it at all. If the requirements for registered Caltech students could be modified so that students who have to have other insurance (by law) because they are living elsewhere could opt out, that would be great! Please contact me if you have any advice on how I can change my status so that I am not charged.
Caltech should spend less money on activities and events (many that are of questionable worth) and spend more money helping their poor students and their families afford health care.
I view insurance as a means of paying large medical bills that otherwise could not be afforded. In addition to what was asked about in the survey, I believe we should be sure to have an adequately high maximum that our insurance will pay for serious illness or injury. When I first joined Caltech, it was only \$250k, I believe since then it was raised. I would like that value to be \$1m+.
I have not used the Health Plan at all yet, so I have not that much insight to offer.
The one thing I don't understand is why Caltech doesn't just deduct from our stipends to defray health care costs. Basically, it's a salary cut for grad students - why do they bother paying us and then just ask for the money back? I really don't think it is too much to ask for them to cover ALL of our health care costs. They should stop nickel and diming us.
I have a secondary insurance plan under my parents which covers costs not covered under the caltech plan. I have nonetheless been very happy with the caltech plan.
I still have other health insurance coverage which is better than this Aetna coverage, so the annual \$300 is a complete waste of money for me.
I think it is crazy that Caltech requests over 5K/yr from me to insure myself and my wife when they only pay me 24K/yr (before taxes). That is over 25% of my take home pay. This was particularly horrible when my wife could not work. It is strange to me that we can get her International insurance, which when you add the deductible to the yearly cost comes out to be less than the minimum of what Caltech charges whether we use the the health care or not. And under the given health care plan she can use just about any doctor, go to any hospital, and have any tests done anywhere in the world. I wonder if Caltech chose a plan with a high deductible that covered all costs beyond that and just

paid half the deductible for the students (if they even needed it which I suppose most don't) if the health care plan would not be significantly better.

On some of the "would you be willing to pay different amounts for different services" questions, I really can't give an answer without specific details on the cost and services. These questions are too vague to be useful gauges.

GSC Health Care Survey Fall 2008

Question 7 Notes: The Caltech health insurance plan provides limited vision care through the Aetna Vision One discount program.
Brief Comments on Vision Care.
don't use or need
not useful -- more expensive than alternative (universal) discounts
these benefits are not widely publicized
Discounts are great, but most plans also provide some reimbursement
need to pay a lot of copay
Wasnt recognized by the eye doctors I found in Pasadena. Paid 150 dollars for eye exam/contact lens prescription.
A better vision plan would be nice
Haven't made use of it yet
I wish there was more coverage
the coverage is minimal
I had trouble getting an exam for contact lens prescription because optometrists wanted me to have a routine eye exam since it's been over two years -- two years ago, I finally agreed to the eye exam.
not good for contact lenses
Should be better advertised - don't know what is available
I wish we could get the discount when we pay for the appointment, rather than having to wait for a reimbursement check from Aetna (if they decide to send one at all).
Is just a discount plan, and it turns out to be very expensive anyway.
Not used
We need actual vision coverage not just discounts.
I wear contacts, and my eye care costs me about \$300 per year.
Covers very little
Can get cheaper glasses on sale than with coverage.
not utilizing it (don't really know much about it)
Contact lenses and glasses are still VERY expensive after "coverage"
don't use it
I have contacts and see my eye doctor yearly, but never use Vision One because it was too much hassle.
It would be helpful if the Health Center could provide recommendations for good doctors in the area. I had a hard time finding the eye doctor I visited and wasn't terribly pleased once I was there.
No need.

I have my own eye insurance.
Unused
don't need it
it would be nice to get better lasik coverage
Does not help much with vision care costs.
I do not require vision care
it seemed ok - it didn't seem super well publicized
Need better vision care.
Have not used.
If i can't get vision coverage I am just as disabled as if I can't walk, it is really important
I didn't know this was included!
For glasses, not affiliated store is cheaper than discounted from affiliates shop.
It is not advertised well enough
almost worthless when you look at the overall plan vs. not having the plan
n/a
It does the job
Not a big discount on glasses -- I still have to pay quite a bit for my frames.
I don't get an appointment because of bad coverage
I get cheaper prices at costco. I have never used this service.
basically the same as no insurance
It's quite sad that we don't have a legitimate vision plan. It ultimately means that we go longer without eye exams and stay with the same crappy glasses for way too long. Very pathetic.
I am interested in having full coverage for yearly eye care appointments
haven't used it
Should cover the price of glasses (>10%!)
My previous vision care (VSP) was better.
Something is better than nothing. But a lot of people at Caltech need glasses, so it would be good to have a more comprehensive optical/oftalmic insurance
just buy my own glasses and pay out of pocket
Have not used it as of yet (plan to in the near future)
I was unaware any vision care was covered
I got a larger discount on my glasses than I had expected :)
needs to cover contact lens too
never used
There are only a few providers available.

Pretty poor coverage

I used it once; it seemed to be OK

GSC Health Care Survey Fall 2008

Question 8 (How satisfied are you with the current HMO Delta Dental Plan?)
Brief Comments on Dental Care.

I had to get a root canal and it cost me \$2000

Most of the listed dentists are very, very bad. I finally found a good one and then the plan is good

I paid out-of-pocket rather than use this plan

I would be willing to pay more if it were possible to upgrade to the better Delta plan.

need to pay a lot of copay

Haven't made use of it yet

Free check-ups are great. But can't comment on more serious dental issues.

My very first cavity has started developing because of the lack of coverage and quality dental professionals on the plan. 24 years without ever having a cavity.

The coverage is mostly for accidental damage to healthy teeth, I would think thats mostly the case but infact they are very restrictive on what they cover.

Last year, they forgot to enroll me and I have no idea why. I had to sort it out at my first dental visit.

Terrible! besides being expensive, changing providers is very difficult

The plan's network doesn't include my dentist.

The preventive care is excellent, but I have heard horror stories of how expensive it can get if you need anything beyond a filling.

No coverage for decent (non-amalgam) resin dental fillings

My favorite dentist isn't part of the plan.

glad its available but don't have much to compare it to

I did not waive coverage for 07-08 because I wanted to be enrolled (which should happen by default), but HR messed up and did not enroll me, so I had no coverage this year!!!

a ppo option would be nice

Dentist on plan seem to be bottom of the barrel from all dentist options out there when comparing both public reviews and training/facilities.

I was recently told by my dentist that I should have sealants put on my molars. This practice is currently not covered under the insurance plan. A more comprehensive dental plan would be nice.

Previous dentist not in network; haven't found a good one who is

I have my own dental insurance.

Unused

I don't like that all the good dentists are full and not taking anyone else with our plan

wish it would cover outside of CA, so when I go home for x-mas and visit the dentist I would be covered

I would prefer a PPO plan so that I can choose my own dentist.

I have not used the current plan
haven't used
terrible to talk to, lots of dentists are crap, not enough choice, very hard to switch
Need delta PPO plan, the HMO doctors are not up to par.
It only covered silver fillings which are a health risk in themselves, it needs to cover enamel fillings
prefer a non HMO plan
Group dentists are limited
HMOs in general almost only attract poor dentists/doctors. 3 of 3 of the dentists I've tried under this plan have been of extremely poor quality.
their recommended dentists are terrible, and make you feel like you're in a used car dealership
Even if a cavity is evidently present (pain and corroboration by 2 dentist), my insurance wouldn't cover it because it didn't appear in the X-ray. This is ridiculous.
The dentists on the list in our area are terrible. I was recommended to Green Street Dental. They are extremely unprofessional and unhygienic. It was a scary experience.
all the nearby dentists are awful
Doesn't have enough coverage
No frills, but it works
Some of the dentist (eg Dental Plus on Lake) is famous for being terrible -- we need recommendations for good ones.
doesn't cover preventative care
Haven't used it in a while
dental plus abuses the dental plan
limited number of dentists and high deductibles
No good dentists available, which is why I don't subscribe to it
Coverage should be more extensive.
poor reviews of dentists in directory
It meets my needs.
just see my own dentist and pay out of pocket
Too many out of pocket expenses, insurance doesn't cover very much
Have not used it as of yet (plan to in the near future)
Would be helpful if students had the option for the PPO plan. Most of the doctors in the HMO plan have very poor ratings - this is not the fault of Delta in particular but a problem with all HMO dental accepters.
Don't like that they force 6 months between teeth cleaning rather than simply 2x per year
Had to pay \$220 for cleaning!
really more of a discount plan than an insurance plan
The assigned dental groups are generally very poorly reviewed
Plan cannot be used outside California, which makes it very difficult to have urgent dental care when you are travelling or spending extended

time at other research institution/university.
Good choice of providers. I'm satisfied with my current facility though, initially, there was an annoying mixup.
Poor providers, no help in deciding which ones are actually decent.
there's not nearly enough coverage
Don't like dentists in plan
does not cover damage due to wear, but does cover damage due to decay
haven't used it