

**Medical Task Force Follow-Up
Status as of March 2006**

	RECOMMENDATIONS	EVP	Fin	HR	Med	Status	Comments
	Targeted at the MEDICAL DEPARTMENT						
	Completed and Ongoing - Medical Department						
1	The MIT Administration should express its confidence in and strong support of the MIT Medical Department and its goals.	X				Done	This was affirmed in President Hockfield's letter to the community on 11/8/05
2	There is an urgent need to add resources to the Medical Department's budget quickly to improve access to care and to provide the time and resources required by caregivers to deliver high quality care.				X	Done	FY07 budget included added resources to improve access
3	Explore the adoption of enhanced protocols to reduce queues for specialist referrals, to build flexibility into the system to facilitate responses to more urgent needs, and to use time made available by last-minute cancellations and "no-shows" productively.				X	Done - new hires	The number of triage nurses has increased to five. Their role is to facilitate and coordinate care needs of patients
4	Continue efforts to strengthen the measurement and assessment of objective measures of the quality of care provided by the Medical Department.				X	Ongoing; report semi-annually	
5	Improve education about the availability and effective utilization of mental health care services for students and respond to some students' negative perceptions and concerns about the mental health service.				X	Ongoing	Marketing materials have been developed and deployed on posters in living areas and as ads in The Tech. Brochure for faculty was created to help faculty identify and help students with mental health needs

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6	Enhance efforts to maintain patient privacy and to treat all patients with respect.				X	Ongoing: some changes in place	Current and planned renovations are/will be undertaken with privacy as a major design criterion. A program is being developed to improve communication between patients and providers
7	Improve education about medical benefits, the “smart use” of the MIT Medical Department and the external Boston-area health care system for our students.				X	Ongoing	Efforts are underway to collaborate with DSL and DUE on ways to integrate student health information within the student advising system. A letter to freshmen parents is sent in the Fall with practical suggestions to facilitate access to care
8	Improve education about the process for resolving complaints about access to and quality of services provided by the MIT Medical Department, including the specialist referral process.				X	Ongoing	Patient Advocate program is undergoing some changes that will improve its effectiveness. Information about how to register complaints will be made available.
9	Retain the Lincoln Laboratory medical clinic.		X		X	Done	Financial analysis completed; facility to be maintained
10	Organize an external fundraising program to provide support for the Medical Department.	X			X	Done: action taken toward goal	Targeted fundraising for the Medical Department deemed impractical. A program for more efficiently managing gifts that are directed to the department is established
11	The MIT Administration should adopt a transparent complete “bottoms up” budgeting and financial control system for the MIT Medical Department that relies on a complete specification of revenues from different lines of business and a complete specification of the associated costs.		X		X	Done	New model in place
12	The MIT Administration should work with the Medical Department to manage budgetary decisions from a line of business perspective that matches revenues, costs and target service levels for each line of business.		X		X	Done	New model in place

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13	The Medical Department should enhance its financial management capabilities to interact effectively with the new budgeting and financial management systems that we recommend MIT adopt for the Medical Department.	X			X	Done	New Financial Director has been hired; additional analytical capacity approved for FY07
14	A comprehensive capital budgeting process needs to be developed and implemented.		X		X	Done	New model in place. Funding sources have been identified, and inventories and projected needs assessed. These processes will be actively maintained
15	Expand the participation of the Medical Department in MIT's educational, wellness, environmental, health and safety initiatives, and community outreach programs.				X	Ongoing: some steps taken	An innovative program that focuses on the health and wellness of the MIT community is being developed.
16	Continue efforts to bring SEIP premiums down and take the associated premiums into account in RA/TA and MIT graduate fellowship benefits as well as in undergraduate financial aid awards.				X	Done	For academic year 06/07, premiums unchanged for individuals and decreased for spouses and dependents
17	Create a user-friendly database of names, addresses, phone numbers and email addresses for retirees who are eligible for MIT medical benefits and try to obtain more information about this population's utilization, levels of satisfaction and specific concerns.			X	X	Done	Databases exist for retirees (although there may be HIPPA requirements that limit access)

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	Work in Progress - Medical Department						
18	The MIT Administration should put a highly skilled professional in charge of “Medical Care for the MIT Community” with the responsibility to implement a health care strategy that advances MIT’s mission in a comprehensive and sustainable way. This individual would work with a team drawn from the MIT Medical Department, Human Resources, the Dean for Student Life and the Executive Vice President for Finance Administration to lead the development and implementation of a consistent set of health care policies that advance the goals that we articulate in this report.	X				In progress	
19	The mechanisms through which mental health care services are provided to MIT Health Plan subscribers and their families’ needs to be reevaluated immediately.				X	In progress	
20	Strengthen the reporting and governance arrangements that apply to the MIT Medical Department and improve procedures for evaluating and communicating major changes in services provided by the Medical Department.	X			X	In progress	
21	Continue efforts to identify and take advantage of opportunities to reduce costs without reducing the quality of care.				X	In progress	

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22	Continue efforts to bring modern information and communication technology into the Medical Department to improve the quality, expand access to care, and to reduce the costs of medical records, to facilitate exchanges of medical information within the department and with outside providers and to help assessments of objective measures of the quality of care.				X	In progress	
23	Address issues regarding access to specialists within and outside the Medical Department.					In progress	
24	Evaluate whether and how MIT can make more effective use of the resources available in the Boston medical community by developing a closer partnership with one of Boston's major hospital groups (Partners or Care Group).					In progress	
25	Reevaluate the role of the Primary Care Physician in student health care.				X	In progress	

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	Targeted at the HEALTH INSURANCE & GENERAL PROGRAM						
	Completed and Ongoing - Health Insurance & General Program						
1	The MIT Administration should express its confidence in and strong support of the basic model for medical care and medical insurance that has served the Institute so well for many decades.	X				Done	This was affirmed in President Hockfield's letter to the community on 11/8/05. "I want to assure you that we intend to retain the present basic model of on-campus health care for our community, even as we examine the specific recommendations of the task force."
2	Review the performance of the Express Scripts prescription drug benefit and respond to concerns raised by subscribers to the BC/BS and Tufts plans.			X		Ongoing quarterly reviews	Express Scripts produces and delivers quarterly management reports which include metrics on participation, utilization and participant feedback. Protocols have been implemented to manage and monitor performance and resolve participant issues. Communication program is under review.
3	Reevaluate the coverage limits of the Delta Dental insurance plan.			X		Reviewed annually	2005 enhancements: improved dependent eligibility to include non-students and expanded coverage to age 25; increased levels of plan payments for certain services and expanded provider networks.
4	Consider whether MIT can purchase/arrange for a catastrophic dental insurance policy that it can make available to students.			X		Done	Products do exist for this population, but are generally not affordable for grad students.
	Work in Progress - Health Insurance & General Program						
5	Bring the services provided to retirees in the Medical Department into fiscal balance.		X		X	In progress	

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6	Reevaluate the current formula for sharing costs between MIT and employees from a total compensation and benefit package perspective.	X	X	X	X	In progress	
7	Improve MIT's ability to implement its self-insurance strategy effectively.			X		In progress	
8	Continue to refine the proposals made by the Strategic Review of Benefits Committee and seek additional community input on them.			X		In progress	
9	Consider whether and how the MIT Health Plans, the BC/BS plans, and the Tufts plan can be redesigned to make more effective use of creative co-payment structures.			X	X	In progress	
10	Reevaluate whether it makes sense to continue offering the Tufts Health Plan as an MIT health insurance option.			X		In progress	
11	Evaluate whether MIT should offer a catastrophic health care option with a high deductible and co-payment provisions, perhaps in conjunction with a Health Savings Account (HSA).			X		In progress	
12	Enhance the availability of information about access to emergency medical care for students and employees who are traveling to other countries.			X		In progress -due FY07/Q1	
13	Reevaluate health insurance options for faculty members on sabbatical leaves.			X		In progress -due FY07/Q1	

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14	Provide employees with more information about the availability of the long-term care insurance plan that MIT offers and provide education about the value of the coverage options.			X		In progress -due FY07/Q1	Program scheduled for Fall 06
15	Improve the availability of information about MIT resources that are available to help employees with health insurance coverage and reimbursement problems.			X		In progress FY07/Q2	
16	There is a wealth of information contained in the surveys that were performed by the Task Force, especially in the thousands of written comments that we received. We recommend that resources be devoted to reviewing this information in more detail, consistent with privacy and confidentiality commitments that we have made to the community, to identify key themes that can inform future decisions by Human Resources and the Medical Department.					In progress	