

Purdue Open-Enrollment 2019

Survey Results of Purdue Employees conducted by Human Resources

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Executive Summary

This report contains results of a survey of approximately 1,500 Purdue employees regarding attitudes toward the benefits offered by Purdue Human Resources. Findings indicate employees appreciate the benefits that are offered, but are concerned about possible future changes to their benefits. Employee's attitudes toward benefits are generally lower than last year. Employees also expressed concerns with how the benefits enrollment process was conducted this last year in terms of timing and communication of benefits changes, as well as the length of the open-enrollment period.

Recommendations from the data, which are listed at the end of this report, are as follows:

1. Improve communication and justification regarding major changes to benefits (i.e., spousal policy) and sending benefits materials out earlier.
2. Extending the open enrollment period.
3. Continuing to promote improvements made to the Center for Healthy Living.
4. Modifying the Healthy Boiler portal.
5. Addressing concerns of employees who do not want to participate in Healthy Boiler.
6. Offering more mental health resources, or emphasizing resources that are already offered.
7. Continuing to increase awareness of the Benefits Ambassadors program.

If you have any questions regarding the analyses of these data, please feel free to contact us.

Sincerely,



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Purpose and Methods

In late 2018, and early 2019, an online survey was sent to all benefits-eligible Purdue University employees asking them to evaluate their experiences with the most recent Benefits Open Enrollment process. Around 1500 employees completed all or most of the survey that assessed their attitudes toward Purdue HR benefits communication and the open-enrollment process. Additionally, employees provided their attitudes toward their own self-reported health, shared concerns and thoughts on the best things about health benefits offered by HR, as well as opinions toward the spousal health insurance policy. Employees at the West Lafayette campus provided their evaluation of the Center for Healthy Living, and views on a potential new facility. Questions were also asked about the Healthy Boiler program and caregiving. The data in this report will be used to determine how benefits communication can be improved in the future, and provide baseline data from which to compare the value of developments in the coming years.

Participants

The average age of employees surveyed was 47.34 (SD = 11.41). The majority of surveys were completed by employees from the West Lafayette campus (78.7%), followed by Fort Wayne (8.2%), Northwest (6.6%), Extension (4.9%), and Other (1.6%).

Participants were members of the following employee groups: professional (33.4%), administrative and operational support (30.2%), faculty (19.1%), management (9%), police, fire, and skilled trades (1.4%), executive (.3%), and other (6.6%). 74.1% are married, 66.8% identified as female, and 27.6% as male.

Results

For ease of understanding, many of the results will be reported based on the employment location of the participants. The report will conclude with general results and open-ended responses that are not necessarily dependent on location, as well as benefits communication recommendations.

West Lafayette Campus

Usefulness of HR Tools to Help People with Benefits Enrollment (n=1222)

	<i>Not Useful</i>	<i>Somewhat Useful</i>	<i>Very Useful</i>	<i>Did not use</i>	<i>Not Aware of Tool</i>
Campus Mailed Enrollment Guide	10.2%	37.7%	40.3%	8.2%	3.6%
Home Mailed Enrollment Guide	23.4%	33.4%	22.3%	15.4%	5.5%
Purdue Today Articles	9.4%	41.5%	35.5%	10.3%	3.3%
On Campus Presentations	7.0%	10.5%	12.2%	64.9%	5.4%
Online Presentations	6.3%	16.0%	13.7%	55.1%	8.9%
Emailed hr@purdue.edu	7.2%	16.7%	20.3%	52.5%	3.3%
Telephone Assistance	8.4%	5.0%	9.3%	71.5%	5.8%
One-on-One Assistance	4.9%	4.1%	10.6%	74.4%	6.0%
Open Computer Lab	4.2%	3.2%	7.3%	76.2%	9.1%
Benefits Website	5.4%	44.3%	43.2%	6.7%	.4%
Benefits Ambassador	7.3%	4.9%	5.4%	65.7%	16.7%

Attitudes Surrounding Benefits Information (n=1193)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2018 Mean	2017 Mean
HR Provides me with easy to understand information surrounding benefits offerings	3.6%	6.7%	12.8%	12.5%	28.9%	30.3%	5.1%	4.68	5.19
I feel knowledgeable about all the benefits Purdue offers	3.0%	8.9%	11.8%	9.3%	33.9%	28.2%	4.8%	4.66	4.93
I know where to go to find benefits information	2.8%	4.8%	8.9%	6.5%	31.4%	35.3%	10.3%	5.06	5.34
When I choose my benefits, I feel I know all I need to in order to make the best decision	6.0%	8.1%	13.9%	10.0%	30.4%	25.8%	5.8%	4.51	4.93
HR could do a better job helping me understand all benefits offerings	2.3%	12.7%	7.5%	28.3%	22.9%	16.2%	10.2%	4.46	4.10

Note. All items were measured on a scale from 1 = strongly disagree to 7 = strongly agree.

Time Reviewing and Completing 2019 Benefits (n=1220)

	Time Reviewing Benefits	Time Completing Benefits
< 15 minutes	5.8%	10.5%
15-30 minutes	18.5%	35.6%
30-45 minutes	22.0%	26.0%
45-60 minutes	20.0%	16.4%
> 60 minutes	33.7%	11.6%

BenefitFocus Attitudes (n=1216)

	Disagree	Neither Agree or Disagree	Agree
Easy to Use	13.0%	28.4%	58.6%
Clear Instructions	18.6%	30.8%	50.7%
Info and Costs Displayed were Clear	14.9%	23.9%	61.2%

Ease of Enrollment Compared to last year (n=1220)

- Easier = 20.6%
- Harder = 21.6%
- Same = 53.2%
- No comparison/not here last year = 4.7%

Have you ever contacted HR about your benefits? (n=1157)

- Yes = 41.6%
- No = 58.4%

How soon question answered after contacting HR (n=463); Mean = 3.29 days

	Frequency	Percent
Same day	114	24.6%
Next day	134	28.9%
2 days later	93	20.1%
3 days later	31	6.7%
4 days later	17	3.7%
5 days later	9	1.9%
6 days later	2	.4%
7 days later	11	2.4%
Longer than 7 days	25	5.4%
Never received an answer	27	5.8%

Getting my questions answered from HR was a(n) _____ experience. (n=475)

	Percentage	Frequency
Difficult (1)	12.4%	59
2	7.4%	35
3	8.0%	38
4	14.3%	68
5	17.1%	81
6	21.5%	102
Easy (7)	19.4%	92

Note: Mean = 4.58. A one-sample *t*-test found this value to be significantly above the scale's midpoint at $p < .001$.

Health Benefits Purdue Provides are... (n=1204)

Terrible (1)	4.4%	Too Expensive (1)	12.0%	Not Comprehensive (1)	6.1%	Unfair (1)	7.3%
2	5.5%	2	12.8%	2	6.8%	2	6.1%
3	10.9%	3	16.8%	3	11.9%	3	11.1%
4	25.1%	4	22.3%	4	23.0%	4	26.1%
5	23.2%	5	17.4%	5	18.5%	5	21.0%
6	23.6%	6	12.9%	6	24.5%	6	19.4%
Excellent (7)	7.3%	A Great Value (7)	5.8%	Comprehensive (7)	9.2%	Fair (7)	9.0%
Mean:	4.57		3.82		4.51		4.42

Note: One-sample *t*-tests found these mean values to be significantly above or below the scale's midpoint at $p < .001$.

Possible changes to the current spousal health insurance policy are... (n=1182)

Bad idea (1)	49.8%	Not necessary (1)	41.6%	Wrong (1)	42.0%	Unfair (1)	42%
2	9.7%	2	10.7%	2	10.6%	2	10.4%
3	6.9%	3	8.6%	3	8.5%	3	8.5%
4	20.2%	4	21.8%	4	25.3%	4	22.9%
5	3.4%	5	6.2%	5	4.5%	5	5.1%
6	4.4%	6	5.1%	6	4.0%	6	4.6%
Good idea (7)	5.6%	Necessary (7)	6.0%	Right (7)	5.1%	Fair (7)	6.4%
Mean:	2.53		2.79		2.72		2.78

Note. These results are from all West Lafayette participants. One-sample *t*-tests found these mean values to be significantly below the scale's midpoint at $p < .001$.

Possible changes to the current spousal health insurance policy are...

Married Participants Only (n=824)

Bad idea (1)	53.6%	Not necessary (1)	44.5%	Wrong (1)	44.4%	Unfair (1)	44.7%
2	10.1%	2	10.2%	2	11.1%	2	10.7%
3	5.9%	3	8.8%	3	8.0%	3	8.4%
4	17.2%	4	19.7%	4	23.3%	4	20.0%
5	3.3%	5	6.3%	5	4.4%	5	5.4%
6	4.5%	6	4.7%	6	4.1%	6	5.4%
Good idea (7)	5.3%	Necessary (7)	5.9%	Right (7)	4.6%	Fair (7)	6.3%
Mean:	2.41		2.71		2.63		2.69

Note: One-sample *t*-tests found these mean values to be significantly below the scale's midpoint at $p < .001$.

Possible changes to the current spousal health insurance policy would affect me and my family in a negative way. (n=839)

	Frequency	Percent
Yes	366	43.6%
No	473	56.4%

Note. These results are only from married participants.

Attitudes Toward Personal Health and Purdue Resources (n=1181)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2018 Mean	2017 Mean
Overall I feel as though I am in good health	.9%	2.1%	5.1%	5.5%	24.0%	48.0%	14.4%	5.51	5.62
It is easy for me to be and stay "healthy"	1.5%	5.1%	12.5%	10.5%	28.0%	33.6%	8.7%	4.94	5.03
I feel I could make better choices to be healthy	2.6%	6.0%	5.8%	11.1%	35.5%	30.4%	8.6%	4.97	5.24
Purdue provides me helpful/useful resources to be and stay healthy	4.2%	8.6%	9.7%	26.3%	25.2%	21.5%	4.5%	4.42	4.88
Purdue should incentivize us to be and stay healthy	8.0%	6.9%	5.8%	21.2%	20.2%	20.2%	17.8%	4.70	5.28

Note. All items were measured on a scale from 1 = strongly disagree to 7 = strongly agree. One-sample *t*-tests found these mean values to be significantly above the scale's midpoint at $p < .001$.

I currently have an established Primary Care Provider (n=1154)

2018-2019		2017-2018	
Yes	No	Yes	No
86.2%	13.8%	76.8%	23.2%

Center for Healthy Living Attitudes (n=1182)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2018 Mean	2017 Mean
I am aware of the CHL	.8%	.5%	.8%	1.1%	4.7%	42.3%	49.8%	6.35	6.30
I know where the CHL is located	2.3%	3.0%	1.4%	1.2%	4.6%	38.0%	49.6%	6.15	6.06
I know all the services the CHL offers	4.1%	10.1%	10.8%	10.8%	26.9%	23.6%	13.6%	4.72	4.68
The CHL is a great place to seek medical care	10.2%	9.3%	10.3%	31.7%	15.3%	14.4%	8.9%	4.11	4.41
It's convenient to seek medical care at the CHL	10.4%	10.6%	9.9%	24.0%	13.0%	19.3%	12.8%	4.28	4.47
It's easy to make an appointment at the CHL	8.3%	7.2%	7.9%	35.0%	13.5%	18.0%	10.1%	4.33	4.50
I can get an appointment quickly with a provider at the CHL	10.1%	7.3%	8.1%	39.7%	12.1%	15.0%	7.7%	4.12	4.23

Note. All items were measured on a scale from 1 = strongly disagree to 7 = strongly agree. One-sample *t*-tests found these mean values to be significantly above the scale's midpoint at $p < .05$.

Overall Attitude toward CHL (n=1171)

Mean = 4.33; 2017 Mean = 4.64

	Percentage	Frequency	2017 Percent	2017 Frequency
Negative (1)	9.6%	112	5.2%	106
2	10.3%	121	5.8%	118
3	8.9%	104	7.3%	148
4	25.4%	298	31.6%	644
5	14.3%	167	16.2%	331
6	17.4%	204	19.3%	393
Positive (7)	14.1%	165	14.6%	298

CHL Knowledge and Behaviors (n=1171)

	2018-2019			2017-2018		
	Yes	No	I don't know	Yes	No	I don't know
Can establish a PCP at CHL	52.7%	3.4%	43.9%	41.6%	3.3%	55.0%
Previously had PCP appt. at CHL	24.2%	72.2%	3.7%	26.6%	64.2%	9.1%
Previously had wellness appt. at CHL	24.4%	69.1%	6.5%	32.6%	57.9%	9.6%

CHL Attitudes Divided by Previously Had Appointment at CHL or Not

Those who visited the Center for Healthy Living in the past 12 months generally have more positive perceptions of the Center for Healthy Living than those who did not visit the Center for Healthy Living in the past 12 months.

CHL is a great place to seek care						
	N	Mean	SD	t	df	p
Had appt.	432	5.01	1.72	15.03	1174	<.001
No appt.	744	3.59	1.47			
Easy to make an appointment at CHL						
	N	Mean	SD	t	df	p
Had appt.	430	5.29	1.63	16.77	1171	<.001
No appt.	743	3.77	1.41			
Can get appointment quickly at CHL						
	N	Mean	SD	t	df	p
Had appt.	432	4.95	1.72	14.32	1174	<.001
No appt.	744	3.64	1.38			
Overall attitude toward the CHL						
	N	Mean	SD	t	df	p
Had appt.	429	5.34	1.69	15.68	1167	<.001
No appt.	740	3.75	1.65			

Note. Items 1-3 were measured on a scale from 1 (strongly disagree) to 7 (strongly agree). Item 4 was measured on a scale from 1 (negative) to 7 (positive).

Live Health Online and Telephonic Coaching (n=1502)

Utilization of Live Health Online and Telephonic Coaching within last 12 months

	Live Health Online	Telephonic Coaching
Yes	4.6%	1.0%
No	68.9%	71.0%
I am unaware of LHO or Telephonic	26.5%	28.0%

Areas of telephonic coaching utilized (n=15)

	Frequency	Percent
Pharmacy	1	6.7%
Dietitian	7	46.7%
Health and Wellness Coaching	6	40.0%
Tobacco Cessation	1	6.7%

Benefits Ambassadors Program (n=1196)

	2018-2019		2017-2018	
	Yes	No	Yes	No
Know about the BA program	44.1%	55.9%	37.9%	62.1%
Know who their BA is	15.4%	84.6%	14.5%	85.5%

Demographics**Married: (n=1150)**

- Yes = 73.4%
- No = 26.6%

Highest Education: (n=1142)

- High School / GED = 16.2%
- 2-year degree = 9.5%
- 4-year degree = 30.6%
- Graduate degree = 43.6%

Employee Group: (n=1147)

- Executive = .3%
- Management = 9.2%
- Professional = 32.4%
- Administrative and Operational Support = 31.6%
- Police, Fire, and Skilled Trades = 1.4%
- Faculty = 18.3%
- Other = 6.8%

Gender: (n=1141)

- Male = 28.0%
- Female = 66.3%
- Transgender = 0.1%
- Other = 0.4%
- Prefer Not to Specify = 5.3%

Ethnicity/Race: (n=1142)

- Caucasian = 85.8%
- African American = 1.2%
- Hispanic = 1.7%
- Asian = 1.9%
- Other = 1.8%
- Prefer not to answer = 7.5%

Age: (n=1067)

- Mean = 47.28 years
- Range = 22-84

Fort Wayne Campus

Usefulness of HR Tools to Help People with Benefits Enrollment (n=127)

	<i>Not Useful</i>	<i>Somewhat Useful</i>	<i>Very Useful</i>	<i>Did not use</i>	<i>Not Aware of Tool</i>
Campus Mailed Enrollment Guide	5.6%	34.1%	54.8%	4.8%	.8%
Home Mailed Enrollment Guide	18.4%	30.4%	28.0%	16.0%	7.2%
Purdue Today Articles	11.2%	40.0%	24.0%	20.0%	4.8%
On Campus Presentations	4.8%	16.7%	21.4%	57.1%	0.0%
Online Presentations	5.6%	13.5%	11.9%	65.1%	4.0%
Emailed hr@purdue.edu	8.7%	19.8%	23.0%	45.2%	3.2%
Telephone Assistance	10.3%	4.8%	7.9%	69.8%	7.1%
One-on-One Assistance	7.9%	5.6%	12.7%	67.5%	6.3%
Open Computer Lab	4.8%	3.2%	11.3%	74.2%	6.5%
Benefits Website	3.2%	40.8%	44.0%	9.6%	2.4%
Benefit Ambassador	6.3%	4.0%	4.0%	58.7%	27.0%

Attitudes Surrounding Benefits Information (n=126)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2018 Mean	2017 Mean
HR Provides me with easy to understand information surrounding benefits offerings	1.6%	6.3%	11.9%	18.3%	25.4%	31.7%	4.8%	4.74	5.19
I feel knowledgeable about all the benefits Purdue offers	.8%	8.7%	9.5%	9.5%	31.0%	36.5%	4.0%	4.87	4.90
I know where to go to find benefits information	2.4%	4.8%	11.9%	7.1%	19.8%	43.7%	10.3%	5.10	5.26
When I choose my benefits, I feel I know all I need to in order to make the best decision	4.8%	7.1%	11.9%	9.5%	24.6%	34.1%	7.9%	4.76	5.01
HR could do a better job helping me understand all benefits offerings	1.6%	15.9%	10.3%	26.2%	19.0%	19.8%	7.1%	4.33	4.04

Note. All items were measured on a scale from 1 = strongly disagree to 7 = strongly agree.

Time Reviewing and Completing 2019 Benefits (n=127)

	Time Reviewing Benefits	Time Completing Benefits
< 15 minutes	5.5%	17.3%
15-30 minutes	26.0%	33.9%
30-45 minutes	22.8%	34.6%
45-60 minutes	19.7%	11.0%
> 60 minutes	26.0%	3.1%

BenefitFocus Attitudes (n=127)

	Disagree	Neither Agree or Disagree	Agree
Easy to Use	11.0%	26.0%	63.0%
Clear Instructions	13.4%	30.7%	55.9%
Info and Costs Displayed were Clear	7.1%	22.8%	70.1%

Ease of Enrollment Compared to last year (n=127)

- Easier = 19.7%
- Harder = 14.2%
- Same = 61.4%
- No comparison/not here last year = 4.7%

Have you ever contacted HR about your benefits? (n=124)

- Yes = 46.8%
- No = 53.2%

How soon question answered after contacting HR (n=57); Mean = 3.09 days

	Frequency	Percent
Same day	14	24.6%
Next day	22	38.6%
2 days later	12	21.1%
3 days later	0	0.0%
4 days later	0	0.0%
5 days later	0	0.0%
6 days later	0	0.0%
7 days later	0	0.0%
Longer than 7 days	8	14.0%
Never received an answer	1	1.8%

Getting my questions answered from HR was a(n) _____ experience. (n=58)

	Percentage	Frequency
Difficult (1)	13.8%	8
2	1.7%	1
3	6.9%	4
4	20.7%	12
5	13.8%	8
6	24.1%	14
Easy (7)	19.0%	11

Note: Mean = 4.67. A one-sample *t*-test found this value to be significantly above the scale's midpoint at $p < .05$.

Health Benefits Purdue Provides are... (n=123)

Terrible (1)	2.5%	Too Expensive (1)	10.6%	Not Comprehensive (1)	4.1%	Unfair (1)	3.3%
2	1.6%	2	9.8%	2	2.4%	2	2.4%
3	9.8%	3	13.8%	3	7.3%	3	10.6%
4	24.6%	4	22.0%	4	22.8%	4	21.1%
5	27.0%	5	18.7%	5	22.8%	5	22.0%
6	23.8%	6	18.7%	6	30.9%	6	28.5%
Excellent (7)	10.7%	A Great Value (7)	6.5%	Comprehensive (7)	9.8%	Fair (7)	12.2%
Mean:	4.86*		4.11		4.89*		4.90*

Note: An * indicates one-sample *t*-tests found these mean values to be significantly above the scale's midpoint at $p < .001$.

Possible changes to the current spousal health insurance policy are... (n=122)

Bad idea (1)	46.7%	Not necessary (1)	35.8%	Wrong (1)	37.8%	Unfair (1)	36.4%
2	8.2%	2	9.2%	2	13.4%	2	10.2%
3	7.4%	3	7.5%	3	5.9%	3	6.8%
4	21.3%	4	27.5%	4	26.9%	4	30.5%
5	4.9%	5	3.3%	5	4.2%	5	5.1%
6	5.7%	6	10.8%	6	7.6%	6	4.2%
Good idea (7)	5.7%	Necessary (7)	5.8%	Right (7)	4.2%	Fair (7)	6.8%
Mean:	2.70		3.09		2.86		2.97

Note. These results are from all Fort Wayne participants. One-sample *t*-tests found these mean values to be significantly below the scale's midpoint at $p < .001$.

Possible changes to the current spousal health insurance policy are...

Married Participants Only (n=91)

Bad idea (1)	49.5%	Not necessary (1)	38.2%	Wrong (1)	38.6%	Unfair (1)	39.1%
2	7.7%	2	10.1%	2	15.9%	2	10.3%
3	7.7%	3	5.6%	3	5.7%	3	6.9%
4	22.0%	4	31.5%	4	28.4%	4	32.2%
5	3.3%	5	2.2%	5	2.3%	5	3.4%
6	5.5%	6	7.9%	6	5.7%	6	2.3%
Good idea (7)	4.4%	Necessary (7)	4.5%	Right (7)	3.4%	Fair (7)	5.7%
Mean:	2.56		2.91		2.70		2.80

Note. One-sample *t*-tests found these mean values to be significantly below the scale's midpoint at $p < .001$.

Possible changes to the current spousal health insurance policy would affect me and my family in a negative way. (n=93)

	Frequency	Percent
Yes	43	46.2%
No	50	53.8%

Note. These results are only from married participants.

Attitudes Toward Personal Health and Purdue Resources (n=125)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2018 Mean	2017 Mean
Overall I feel as though I am in good health	0%	2.4%	6.4%	7.2%	24.8%	46.4%	12.8%	5.45	5.57
It is easy for me to be and stay "healthy"	1.6%	8.8%	11.2%	9.6%	34.4%	24.8%	9.6%	4.79	4.96
I feel I could make better choices to be healthy	4.0%	4.0%	4.0%	12.0%	35.2%	29.6%	11.2%	5.04	5.33
Purdue provides me helpful/useful resources to be and stay healthy	2.4%	6.5%	7.3%	26.0%	26.8%	24.4%	6.5%	4.67	4.94
Purdue should incentivize us to be and stay healthy	4.8%	4.0%	5.6%	17.7%	25.0%	22.6%	20.2%	5.02	5.40

Note. All items were measured on a scale from 1 = strongly disagree to 7 = strongly agree. One-sample *t*-tests found these mean values to be significantly above the scale's midpoint at $p < .001$.

I currently have an established Primary Care Provider (n=122)

2018-2019		2017-2018	
Yes	No	Yes	No
86.1%	13.9%	80.4%	19.6%

Benefits Ambassadors Program (n=99)

	2018-2019		2017-2018	
	Yes	No	Yes	No
Know about the BA program	20.2%	79.8%	21.1%	78.9%
Know who their BA is	10.1%	89.9%	8.4%	91.6%

Demographics**Married: (n=121)**

- Yes = 76.9%
- No = 23.1%

Highest Education: (n=121)

- High School / GED = 8.3%
- 2-year degree = 13.2%
- 4-year degree = 23.1%
- Graduate degree = 55.4%

Employee Group: (n=127)

- Executive = .8%
- Management = 10.7%
- Professional = 19.7%
- Administrative and Operational Support = 35.2%
- Police, Fire, and Skilled Trades = 1.6%
- Faculty = 25.4%
- Other = 6.6%

Gender: (n=122)

- Male = 23.8%
- Female = 68.0%
- Transgender = .8%
- Other = .8%
- Prefer Not to Specify = 6.6%

Ethnicity/Race: (n=122)

- Caucasian = 78.7%
- African American = 1.6%
- Hispanic = 1.6%
- Asian = 3.3%
- Other = 2.5%
- Prefer not to answer = 12.3%

Age: (n=113)

- Mean = 47.53 years
- Range = 24-76

Northwest Campus

Usefulness of HR Tools to Help People with Benefits Enrollment (n=102)

	<i>Not Useful</i>	<i>Somewhat Useful</i>	<i>Very Useful</i>	<i>Did not use</i>	<i>Not Aware of Tool</i>
Campus Mailed Enrollment Guide	6.1%	26.3%	57.6%	7.1%	3%
Home Mailed Enrollment Guide	16.3%	25.5%	40.8%	11.2%	6.1%
Purdue Today Articles	16.2%	31.3%	33.3%	14.1%	5.1%
On Campus Presentations	5.1%	16.2%	31.3%	43.4%	4.0%
Online Presentations	7.1%	14.1%	18.2%	49.5%	11.1%
Emailed hr@purdue.edu	4.0%	14.1%	34.3%	42.4%	5.1%
Telephone Assistance	4.1%	6.1%	19.4%	63.3%	7.1%
One-on-One Assistance	4.0%	7.1%	34.3%	52.5%	2.0%
Open Computer Lab	2.0%	5.1%	23.2%	63.6%	6.1%
Benefits Website	3.0%	31.3%	54.5%	11.1%	0.0%
Benefit Ambassador	2.0%	4.0%	7.1%	64.6%	22.2%

Attitudes Surrounding Benefits Information (n=99)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2018 Mean	2017 Mean
HR Provides me with easy to understand information surrounding benefits offerings	3.0%	2.0%	9.1%	7.1%	25.3%	35.4%	18.2%	5.28	5.62
I feel knowledgeable about all the benefits Purdue offers	3.0%	5.1%	8.1%	10.1%	27.3%	33.3%	15.2%	5.08	5.25
I know where to go to find benefits information	2.0%	3.0%	2.0%	7.1%	26.3%	33.3%	26.3%	5.58	5.68
When I choose my benefits, I feel I know all I need to in order to make the best decision	6.1%	4.1%	11.2%	7.1%	21.4%	34.7%	15.3%	4.99	5.28
HR could do a better job helping me understand all benefits offerings	9.2%	28.6%	6.1%	21.4%	18.4%	10.2%	6.1%	3.66	3.74

Note. All items were measured on a scale from 1 = strongly disagree to 7 = strongly agree.

Time Reviewing and Completing 2019 Benefits (n=101)

	Time Reviewing Benefits	Time Completing Benefits
< 15 minutes	3.0%	13.9%
15-30 minutes	32.7%	47.5%
30-45 minutes	15.8%	18.8%
45-60 minutes	22.8%	7.9%
> 60 minutes	25.7%	11.9%

BenefitFocus Attitudes (n=102)

	Disagree	Neither Agree or Disagree	Agree
Easy to Use	11.8%	20.6%	67.6%
Clear Instructions	8.8%	28.4%	62.7%
Info and Costs Displayed were Clear	10.8%	15.7%	73.5%

Ease of Enrollment Compared to last year (n=102)

- Easier = 24.5%
- Harder = 16.7%
- Same = 50.0%
- No comparison/not here last year = 8.8%

Have you ever contacted HR about your benefits? (n=99)

- Yes = 52.5%
- No = 47.5%

How soon question answered after contacting HR (n=52); Mean = 2.06 days

	Frequency	Percent
Same day	32	61.5%
Next day	10	19.2%
2 days later	4	7.7%
3 days later	1	1.9%
4 days later	1	1.9%
5 days later	0	0.0%
6 days later	1	1.9%
7 days later	1	1.9%
Longer than 7 days	1	1.9%
Never received an answer	1	1.9%

Getting my questions answered from HR was a(n) _____ experience. (n=52)

	Percentage	Frequency
Difficult (1)	3.8%	2
2	1.9%	1
3	3.8%	2
4	5.8%	3
5	11.5%	6
6	15.4%	8
Easy (7)	57.7%	30

Note: Mean = 5.96. A one-sample *t*-test found this value to be significantly above the scale's midpoint at $p < .001$.

Health Benefits Purdue Provides are... (n=97)

Terrible (1)	1.0%	Too Expensive (1)	10.2%	Not Comprehensive (1)	3.1%	Unfair (1)	2.1%
2	3.1%	2	12.2%	2	4.2%	2	4.1%
3	5.2%	3	12.2%	3	4.2%	3	5.2%
4	20.8%	4	22.4%	4	24.0%	4	27.8%
5	24.0%	5	12.2%	5	14.6%	5	16.5%
6	24.0%	6	13.3%	6	25.0%	6	19.6%
Excellent (7)	21.9%	A Great Value (7)	17.3%	Comprehensive (7)	25.0%	Fair (7)	24.7%
Mean:	5.23*		4.23		5.18*		5.10*

Note: An * indicates one-sample *t*-tests found these mean values to be significantly above the scale's midpoint at $p < .001$.

Possible changes to the current spousal health insurance policy are... (n=95)

Bad idea (1)	40.4%	Not necessary (1)	34.7%	Wrong (1)	32.6%	Unfair (1)	32.2%
2	8.5%	2	8.4%	2	5.6%	2	5.6%
3	1.1%	3	3.2%	3	7.9%	3	4.4%
4	23.4%	4	23.2%	4	27.0%	4	30.0%
5	4.3%	5	10.5%	5	9.0%	5	6.7%
6	9.6%	6	6.3%	6	6.7%	6	8.9%
Good idea (7)	12.8%	Necessary (7)	13.7%	Right (7)	11.2%	Fair (7)	12.2%
Mean:	3.22		3.40		3.39		3.49

Note. These results are from all Northwest participants. One-sample *t*-tests found these mean values to be significantly below the scale's midpoint at $p < .05$.

Possible changes to the current spousal health insurance policy are...**Married Participants Only (n=72)**

Bad idea (1)	45.1%	Not necessary (1)	38.9%	Wrong (1)	37.3%	Unfair (1)	36.8%
2	9.9%	2	9.7%	2	6.0%	2	5.9%
3	1.4%	3	2.8%	3	9.0%	3	5.9%
4	15.5%	4	13.9%	4	19.4%	4	22.1%
5	4.2%	5	12.5%	5	9.0%	5	7.4%
6	11.3%	6	6.9%	6	6.0%	6	7.4%
Good idea (7)	12.7%	Necessary (7)	15.3%	Right (7)	13.4%	Fair (7)	14.7%
Mean:	3.08		3.33		3.28		3.38

Note. One-sample *t*-tests found these mean values to be significantly below the scale's midpoint at $p < .05$.

Possible changes to the current spousal health insurance policy would affect me and my family in a negative way. (n=76)

	Frequency	Percent
Yes	41	53.9%
No	35	46.1%

Note. These results are only from married participants.

Attitudes Toward Personal Health and Purdue Resources (n=99)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2018 Mean	2017 Mean
Overall I feel as though I am in good health	1.0%	0.0%	8.8%	4.9%	26.5%	39.2%	16.7%	5.47	5.38
It is easy for me to be and stay "healthy"	2.0%	2.0%	21.2%	6.1%	24.2%	33.3%	11.1%	4.93	4.74
I feel I could make better choices to be healthy	4.0%	5.1%	4.0%	8.1%	31.3%	27.3%	20.2%	5.20	5.30
Purdue provides me helpful/useful resources to be and stay healthy	0.0%	4.0%	7.1%	19.2%	29.3%	28.3%	12.1%	5.07	5.09
Purdue should incentivize us to be and stay healthy	3.0%	4.0%	3.0%	16.2%	25.3%	23.2%	25.3%	5.27	5.04

Note. All items were measured on a scale from 1 = strongly disagree to 7 = strongly agree. One-sample *t*-tests found these mean values to be significantly above the scale's midpoint at $p < .001$.

I currently have an established Primary Care Provider (n=96)

2018-2019		2017-2018	
Yes	No	Yes	No
84.4%	15.6%	88.0%	12.0%

Benefits Ambassadors Program (n=125)

	2018-2019		2017-2018	
	Yes	No	Yes	No
Know about the BA program	18.4%	81.6%	19.9%	80.1%
Know who their BA is	9.6%	90.4%	12.6%	87.4%

Demographics**Married: (n=96)**

- Yes = 79.2%
- No = 20.8%

Highest Education: (n=97)

- High School / GED = 10.3%
- 2-year degree = 12.4%
- 4-year degree = 19.6%
- Graduate degree = 57.7%

Employee Group: (n=97)

- Executive = 1.0%
- Management = 9.3%
- Professional = 24.7%
- Administrative and Operational Support = 27.8%
- Police, Fire, and Skilled Trades = 2.1%
- Faculty = 30.9%
- Other = 4.1%

Gender: (n=98)

- Male = 28.6%
- Female = 68.4%
- Prefer Not to Specify = 3.1%

Ethnicity/Race: (n=98)

- Caucasian = 76.5%
- African American = 2.0%
- Hispanic = 6.1%
- Asian = 5.1%
- Other = 1.0%
- Prefer not to answer = 9.2%

Age: (n=95)

- Mean = 50.01 years
- Range = 27-72

Extension / Other Campuses

Usefulness of HR Tools to Help People with Benefits Enrollment (n=101)

	<i>Not Useful</i>	<i>Somewhat Useful</i>	<i>Very Useful</i>	<i>Did not use</i>	<i>Not Aware of Tool</i>
Campus Mailed Enrollment Guide	6.1%	26.5%	26.5%	18.4%	22.4%
Home Mailed Enrollment Guide	7.1%	29.6%	49.0%	12.2%	2.0%
Purdue Today Articles	7.1%	42.9%	32.7%	16.3%	1.0%
On Campus Presentations	9.4%	2.1%	2.1%	74.0%	12.5%
Online Presentations	3.0%	14.1%	16.2%	55.6%	11.1%
Emailed hr@purdue.edu	4.1%	14.4%	18.6%	59.8%	3.1%
Telephone Assistance	4.1%	5.1%	9.2%	77.6%	4.1%
One-on-One Assistance	1.0%	3.1%	7.1%	80.6%	8.2%
Open Computer Lab	3.1%	1.0%	1.0%	82.5%	12.4%
Benefits Website	2.0%	34.7%	55.1%	8.2%	0.0%
Benefit Ambassador	2.1%	4.1%	5.2%	69.1%	19.6%

Attitudes Surrounding Benefits Information (n=97)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2018 Mean	2017 Mean
HR Provides me with easy to understand information surrounding benefits offerings	0.0%	1.0%	5.2%	10.3%	25.8%	44.3%	13.4%	5.47	5.34
I feel knowledgeable about all the benefits Purdue offers	1.0%	2.1%	11.3%	5.2%	38.1%	36.1%	6.2%	5.10	4.89
I know where to go to find benefits information	0.0%	2.1%	9.3%	7.2%	29.9%	35.1%	16.5%	5.36	5.35
When I choose my benefits, I feel I know all I need to in order to make the best decision	1.0%	7.2%	9.3%	7.2%	33.0%	36.1%	6.2%	4.97	4.99
HR could do a better job helping me understand all benefits offerings	4.1%	13.4%	11.3%	22.7%	20.6%	22.7%	5.2%	4.31	4.21

Note. All items were measured on a scale from 1 = strongly disagree to 7 = strongly agree.

Time Reviewing and Completing 2019 Benefits (n=100)

	Time Reviewing Benefits	Time Completing Benefits
< 15 minutes	6.0%	11.0%
15-30 minutes	18.0%	43.0%
30-45 minutes	29.0%	24.0%
45-60 minutes	19.0%	15.0%
> 60 minutes	28.0%	7.0%

BenefitFocus Attitudes (n=100)

	Disagree	Neither Agree or Disagree	Agree
Easy to Use	1.0%	28.0%	71.0%
Clear Instructions	4.0%	30.0%	66.0%
Info and Costs Displayed were Clear	4.0%	25.0%	71.0%

Ease of Enrollment Compared to last year (n=100)

- Easier = 27.0%
- Harder = 14.0%
- Same = 50.0%
- No comparison/not here last year = 9.0%

Have you ever contacted HR about your benefits? (n=96)

- Yes = 44.8%
- No = 55.2%

How soon question answered after contacting HR (n=41); Mean = 3.27 days

	Frequency	Percent
Same day	13	31.7%
Next day	12	29.3%
2 days later	7	17.1%
3 days later	2	4.9%
4 days later	0	0.0%
5 days later	0	0.0%
6 days later	0	0.0%
7 days later	0	0.0%
Longer than 7 days	2	4.9%
Never received an answer	5	12.2%

Getting my questions answered from HR was a(n) _____ experience. (n=43)

	Percentage	Frequency
Difficult (1)	9.3%	4
2	11.6%	5
3	2.3%	1
4	0.0%	0
5	11.6%	5
6	34.9%	15
Easy (7)	30.2%	13

Note: Mean = 5.19. A one-sample *t*-test found this value to be significantly above the scale's midpoint at $p < .01$.

Health Benefits Purdue Provides are... (n=99)

Terrible (1)	1.0%	Too Expensive (1)	3.0%	Not Comprehensive (1)	4.1%	Unfair (1)	3.0%
2	4.1%	2	11.1%	2	1.0%	2	1.0%
3	1.0%	3	12.1%	3	5.1%	3	5.1%
4	16.3%	4	18.2%	4	13.3%	4	17.2%
5	26.5%	5	21.2%	5	18.4%	5	18.2%
6	36.7%	6	24.2%	6	43.9%	6	36.4%
Excellent (7)	14.3%	A Great Value (7)	10.1%	Comprehensive (7)	14.3%	Fair (7)	19.2%
Mean:	5.31		4.57		5.30		5.32

Note: One-sample *t*-tests found these mean values to be significantly above the scale's midpoint at $p < .01$.

Possible changes to the current spousal health insurance policy are... (n=95)

Bad idea (1)	28.4%	Not necessary (1)	22.3%	Wrong (1)	22.1%	Unfair (1)	19.1%
2	12.6%	2	10.6%	2	10.5%	2	13.8%
3	10.5%	3	8.5%	3	11.6%	3	6.4%
4	31.6%	4	29.8%	4	32.6%	4	34.0%
5	5.3%	5	14.9%	5	11.6%	5	10.6%
6	7.4%	6	9.6%	6	6.3%	6	7.4%
Good idea (7)	4.2%	Necessary (7)	4.3%	Right (7)	5.3%	Fair (7)	8.5%
Mean:	3.12		3.50		3.41		3.60

Note. These results are from all extension/other participants. One-sample *t*-tests found these mean values to be significantly below the scale's midpoint at $p < .05$.

Possible changes to the current spousal health insurance policy are...

Married Participants Only (n=77)

Bad idea (1)	33.8%	Not necessary (1)	26.3%	Wrong (1)	26.0%	Unfair (1)	22.1%
2	11.7%	2	10.5%	2	11.7%	2	14.3%
3	11.7%	3	6.6%	3	10.4%	3	6.5%
4	28.6%	4	28.9%	4	31.2%	4	33.8%
5	3.9%	5	14.5%	5	10.4%	5	9.1%
6	6.5%	6	9.2%	6	5.2%	6	6.5%
Good idea (7)	3.9%	Necessary (7)	3.9%	Right (7)	5.2%	Fair (7)	7.8%
Mean:	2.92		3.38		3.25		3.44

Note. One-sample *t*-tests found these mean values to be significantly below the scale's midpoint at $p < .05$.

Possible changes to the current spousal health insurance policy would affect me and my family in a negative way. (n=80)

	Frequency	Percent
Yes	35	43.8%
No	45	56.3%

Note. These results are only from married participants.

Attitudes Toward Personal Health and Purdue Resources (n=96)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2018 Mean	2017 Mean
Overall I feel as though I am in good health	0.0%	1.1%	5.3%	2.1%	17.9%	56.8%	16.8%	5.75	5.70
It is easy for me to be and stay "healthy"	1.0%	2.1%	15.6%	7.3%	20.8%	41.7%	11.5%	5.16	5.03
I feel I could make better choices to be healthy	2.1%	3.1%	5.2%	8.3%	34.4%	38.5%	8.3%	5.19	5.36
Purdue provides me helpful/useful resources to be and stay healthy	3.1%	8.3%	8.3%	27.1%	27.1%	20.8%	5.2%	4.50	4.58
Purdue should incentivize us to be and stay healthy	2.1%	4.2%	4.2%	15.6%	19.8%	30.2%	24.0%	5.33	5.42

Note. All items were measured on a scale from 1 = strongly disagree to 7 = strongly agree. One-sample *t*-tests found these mean values to be significantly above the scale's midpoint at $p < .01$.

I currently have an established Primary Care Provider (n=96)

2018-2019		2017-2018	
Yes	No	Yes	No
91.7%	8.3%	84.4%	15.6%

Benefits Ambassadors Program (n=98)

	2018-2019		2017-2018	
	Yes	No	Yes	No
Know about the BA program	20.4%	79.6%	19.6%	80.4%
Know who their BA is	8.2%	91.8%	9.0%	91.0%

Demographics**Married: (n=96)**

- Yes = 91.7%
- No = 8.3%

Highest Education: (n=97)

- High School / GED = 5.2%
- 2-year degree = 2.1%
- 4-year degree = 11.3%
- Graduate degree = 81.4%

Employee Group: (n=96)

- Executive = 0.0%
- Management = 4.2%
- Professional = 69.8%
- Administrative and Operational Support = 10.4%
- Police, Fire, and Skilled Trades = 0.0%
- Faculty = 8.3%
- Other = 7.3%

Gender: (n=96)

- Male = 26.0%
- Female = 70.8%
- Prefer Not to Specify = 3.1%

Ethnicity/Race: (n=97)

- Caucasian = 89.7%
- African American = 3.1%
- Hispanic = 1.0%
- Asian = 0.0%
- Other = 1.0%
- Prefer not to answer = 5.2%

Age: (n=95)

- Mean = 45.21 years
- Range = 23-76

All Campus Results

Knowledge of Common Primary Care Providers (n=1463)

Because the Healthy Boiler program includes having employees establish primary care providers, it is important to determine whether employees are aware that Nurse Practitioners and Physician Assistants can complete many of the same tasks as a doctor (e.g., write prescriptions, diagnose illnesses, and order lab tests). Based on results from the 2017-2018 open enrollment survey indicating that many employees did not know that NPs and PAs can do these tasks, communication was sent to employees to inform them about the tasks NPs and PAs can complete. The results from the current survey suggest employees had a greater level of knowledge about some of the tasks NPs and PAs can complete this year compared to last year.

Responsibility		Provider					
		2018-2019			2017-2018		
		Physician	Physician Assistant	Nurse Practitioner	Physician	Physician Assistant	Nurse Practitioner
Can write prescriptions for meds	True	1439 (98.4%)	822 (56.5%)	1090 (75.1%)	2550 (99.0%)	1301 (50.8%)	1858 (72.5%)
	False	3 (0.2%)	250 (17.2%)	148 (10.2%)	3 (0.1%)	606 (23.7%)	297 (11.6%)
	Unsure	21 (1.4%)	383 (26.3%)	214 (14.7%)	22 (0.9%)	652 (25.5%)	409 (16.1%)
Can diagnose illnesses	True	1431 (97.9%)	849 (58.4%)	1102 (75.8%)	2533 (98.5%)	1300 (50.8%)	1803 (70.2%)
	False	2 (0.1%)	243 (16.7%)	145 (10.0%)	6 (.2%)	604 (23.6%)	325 (12.7%)
	Unsure	29 (2.0%)	361 (24.8%)	207 (14.2%)	33 (1.3%)	653 (25.5%)	439 (17.1%)
Can order lab tests	True	1438 (98.5%)	969 (66.7%)	1184 (76.2%)	2543 (98.9%)	1634 (63.8%)	2009 (78.4%)
	False	0 (0.0%)	134 (9.2%)	71 (4.6%)	2 (0.1%)	325 (12.7%)	140 (5.5%)
	Unsure	22 (1.5%)	349 (24.0%)	201 (12.9%)	26 (0.9%)	604 (23.6%)	415 (16.2%)

Retirement

One survey item asked about confidence in saving for retirement. Employees indicated their level of confidence on a scale from 1 = strongly disagree to 7 = strongly agree (mean=4.47).

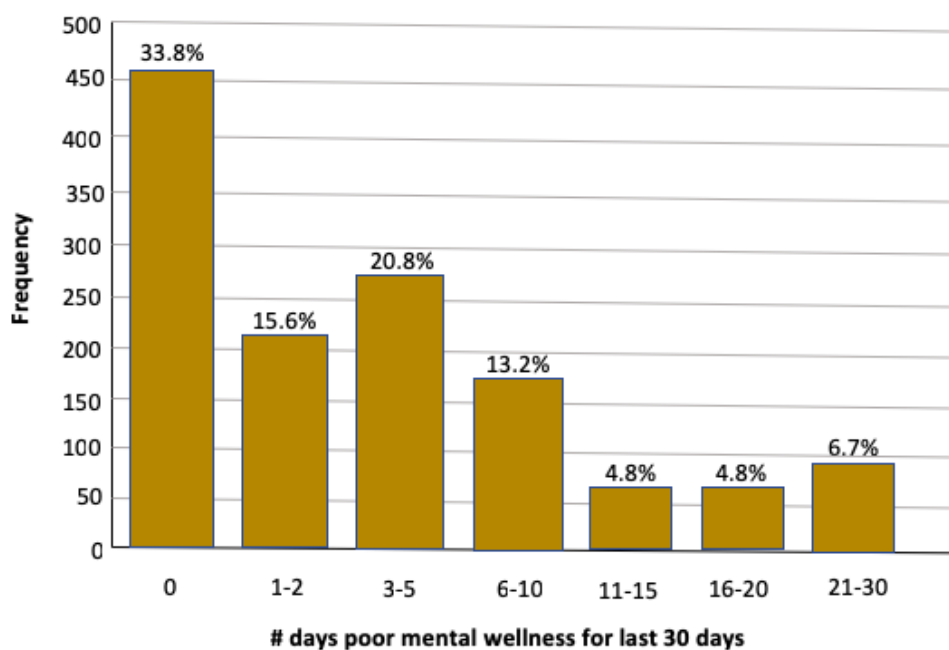
I am confident in my ability to successfully save for retirement (n=1476)

Mean = 4.47; 2017 Mean = 4.63

	Percentage	Frequency	2017 Percentage	2017 Frequency
Strongly Disagree	7.0%	103	5.6%	143
Disagree	10.2%	151	9.5%	242
Somewhat Disagree	14.0%	206	12.0%	304
Neither Agree nor Disagree	9.1%	134	8.8%	223
Somewhat Agree	26.6%	393	27.7%	705
Agree	24.0%	354	26.2%	665
Strongly Agree	9.1%	135	10.2%	259

Mental Wellness (n=1347)

One item asked about how many days over the last 30 days was employees' mental wellness not good on a scale from 0-30 days. The mean value was 5.81 days (median = 3 days). 15% of employees indicated that they experienced poor mental wellness on 15 or more of the last 30 days. Around 40% indicated they had poor mental wellness on 5 or more of the past 30 days.



Caregiving

Several items asked about employee caregiving, whether they are currently caring for someone at home, and whether or not they plan to engage in caregiving in the near future. The greatest number of employees indicated that they are caring for children. Regarding services Purdue could provide for assistance, participants desire employee and supervisor training about acceptable leave and work adjustment policies, and information sessions on relevant topics.

Currently caring for someone at home (*n*=1482)

	Frequency	Percent
Yes	365	24.6%
No	1117	75.4%

Plan on caring for someone at home in next 2 years (*n*=1117)

	Frequency	Percent
Yes	98	8.8%
No	1019	91.2%

Who employees are caring for (*n*=365)

	Frequency	Percent
Child(ren) under 18	244	66.85%
Adult child(ren)	38	10.41%
Adult under 65	46	12.60%
Adult over 65	78	21.37%
Individual(s) with illness and/or disability	165	45.21%

Who employees plan to care for

	Frequency (<i>n</i> =98)
Child(ren) under 18	35
Adult child(ren)	4
Adult under 65	8
Adult over 65	58

Note. Percentages add up to over 100% because participants could select more than one option.

Services Purdue could provide to help with caring for loved one (*n*=365)

	Frequency	Percent
Onsite childcare	101	27.67%
Onsite adult daycare	35	9.59%
Offsite childcare	76	20.82%
Offsite adult daycare	35	9.59%
Info sessions on topics (insurance, FMLA, disease specific info, etc.)	133	36.44%
Counseling	104	28.49%
Care coordinator services	80	21.92%
Supervisor training about acceptable leave & work adjustment practices	118	32.33%
Employee training about acceptable leave & work adjustment practices	138	37.81%
Other	47	12.88%

Note. Percentages add up to over 100% because participants could select more than one option.

Benefits Attitudes by Employee Classification

I feel that the health benefits that Purdue currently provides are...	Means (SD)					ANOVA
	Management (n=131)	Professional (n=486)	Admin. & Op. Support (n=432)	Faculty (n=274)	Other (n=119)	
(1) Terrible/ (7) Excellent	4.88 _a (1.41)	4.82 _a (1.38)	4.82 _a (1.41)	4.33 _b (1.66)	4.46 _{ab} (1.64)	$F(4,1423) = 6.94, p < .001$
(1) Too Expensive/ (7) A Great Value	4.03 _a (1.63)	4.06 _a (1.69)	4.05 _a (1.75)	3.49 _b (1.74)	3.77 _{ab} (1.93)	$F(4,1436) = 5.96, p < .001$
(1) Not Comprehensive/ (7) Comprehensive	5.01 _a (1.50)	4.87 _a (1.53)	4.74 _a (1.49)	4.21 _b (1.79)	4.24 _b (1.83)	$F(4,1420) = 11.19, p < .001$
(1) Unfair/(7) Fair	4.84 _a (1.51)	4.72 _a (1.55)	4.68 _a (1.52)	4.20 _b (1.68)	4.28 _{ab} (1.88)	$F(4,1422) = 7.10, p < .001$

Note. Items were measured on a scale from 1 (negative) to 7 (positive). Row means with different subscripts differ at $p < .05$ using the Sidak post-hoc test. The “Other” category includes Executive, and Police, Fire, & Skilled Trades. In general, faculty have more negative attitudes toward benefits.

Please rate your level of agreement with the following statements:	Means (SD)					ANOVA
	Management (n=132)	Professional (n=485)	Admin. & Op. Support (n=441)	Faculty (n=276)	Other (n=122)	
Purdue HR provides me easy to understand info about benefits offerings	5.06 _a (1.28)	4.91 _{ac} (1.40)	4.95 _a (1.40)	4.27 _b (1.59)	4.51 _{bc} (1.64)	$F(4,1448) = 13.30, p < .001$
I feel knowledgeable about all the benefits offered to me through Purdue	5.29 _a (1.04)	4.81 _b (1.40)	4.87 _b (1.44)	4.26 _c (1.63)	4.50 _{bc} (1.54)	$F(4,1447) = 14.25, p < .001$
I know where to go to find benefits info if I need it	5.51 _a (1.03)	5.20 _{ac} (1.34)	5.28 _{ac} (1.32)	4.68 _b (1.68)	4.93 _{bc} (1.55)	$F(4,1450) = 11.53, p < .001$
When I choose my benefits I know all I need to in order to make the best decision	5.10 _a (1.27)	4.64 _b (1.55)	4.80 _{ab} (1.53)	4.11 _c (1.81)	4.43 _{bc} (1.70)	$F(4,1448) = 11.90, p < .001$
Purdue HR could do a better job helping me understand all the benefits Purdue offers	4.27 _{ab} (1.53)	4.42 _{ab} (1.51)	4.18 _a (1.58)	4.67 _b (1.64)	4.49 _{ab} (1.65)	$F(4,1449) = 4.58, p = .001$

Note. Items were measured on a scale from 1 (strongly disagree) to 7 (strongly agree). Row means with different subscripts differ at $p < .05$ using the Sidak post-hoc test. The “Other” category includes Executive, and Police, Fire, & Skilled Trades. In general, faculty feel least informed about their benefits.

Comments About Open Enrollment (n=680)

About 45% of employees who completed the survey provided comments regarding their experience with 2018-2019 benefits open enrollment. Common themes present in the responses are listed below.

Longer open enrollment period. Employees most frequently mentioned they wanted more time to enroll. Employees expressed that they only had two weeks this year and in years past they had more time (i.e., 3 weeks). For instance, “Please increase the length of time back to where it was prior;” and “A longer time frame to review and to do enrollment. Felt it was too short this year.” Example of other comments included:

- “Benefits enrollment period is far too short. My spouse's employer (a large national company) offers 6 weeks for open enrollment.”
- “Give us more time than two weeks.”
- “Shortening the enrollment to two weeks was a very frustrating choice - I had long-standing travel plans for most of that period which made it difficult to use several resources.”
- “Should have open enrollment for a whole month, not 2 weeks.”
- “The enrollment period is too short. Why would we only be allowed two weeks to enroll? We received much longer in the past. I am in a position that during the month of October, I am out of town for work and extremely busy working 60-80 hour weeks. To give me only two weeks to enroll is insane.”
- “The enrollment time was not long enough this year. Prior years offered nearly 3-4 weeks to review and submit benefit options. This year only offered 2 weeks. I was on vacation (with no access to enroll) so did not have much time to review everything to enroll for the current year. I normally would review my current year's medical costs, but didn't feel I had enough time to this year.”

Want more warning for benefits changes and materials sent sooner. In addition to wanting more time to enroll, participants desired to be forewarned about benefits changes much sooner and receive benefits enrollment materials earlier. For example, “Do NOT announce major changes to benefits (e.g., spousal access to healthcare insurance) right before open enrollment. This causes undue stress and could be rolled out much more judiciously if done WELL IN ADVANCE of open enrollment.” An example of wanting to receive materials sooner included: “At a minimum provide all needed materials to review AT LEAST one week prior to open enrollment so we can have plenty of time to review options with our spouse. This year was very

stressful with materials not arriving until Open Enrollment began, and having a shortened time frame to complete.” Other sample quotes are listed below:

- “Do not release the changes to the program so close to when the open enrollment process occurs. Employees need more time to make decisions about their healthcare.”
- “It would be useful to receive the mailed benefit booklet a month before enrollment begins. Receiving it the day enrollment began was not a good idea.”
- “Need to do a better job of announcing changes. Providing information the Friday afternoon before Monday am enrollment was horrible. Several individuals did not see the actual changes until they arrived on Monday. Actual announcement changes should go out at least 2 weeks before enrollment period. Allow individuals to prepare accordingly.”
- “Policy and premium changes need to be communicated much earlier. Notifying employees of changes a week before open enrollment is not acceptable.”

Issues with benefits enrollment process. Some employees struggled with the benefits enrollment process, commenting on issues such as struggling with the benefits website or not being able to get help from HR. For instance, “I found this year’s computer program difficult to use, challenging to move in and out of enrollment to review/compare benefits.” An example of struggling to get help included: “I could never get anyone on the phone from HR. When I did speak to someone they told me they are very short on people working in the department.” Other sample comments were:

- “Especially for young employees with little previous benefits experience, the enrollment process is extremely confusing. I attended an enrollment workshop when I first arrived but still felt like I had no idea what I was doing. New colleagues since I arrived say the same thing to me. Information about what proportion of Purdue employees select various options might be helpful.”
- “Here is an example of the problem: the system says to upload the appropriate documentation for dependents, but NOWHERE does it tell you what that documentation is. It required a lot of searching and following multiple links before I accidentally stumbled across the relevant information. If documentation needs to be uploaded, then the screen that tells us to upload it should also list the type of documentation that will be accepted.”
- “I called a few times about the spousal coverage and never got ahold of anyone in HR.”
- “I didn’t feel the website was very user-friendly. I wasn’t sure when I was making a new selection vs. what was showing from last year.”
- “I found that some of the steps as you progressed through the enrollment process seemed off or unclear, I had to click out to look things up and back in again. I had to ask a coworker who had recently completed enrollment to help me through it.”
- “On campus HR seemed unprofessional during presentations and did not seem to want to answer questions, cut people off, laughed at people, and didn’t leave adequate time to answer any questions. Also have a reputation for not answering emails/phone calls in a timely manner if at all. Overall, I do not feel comfortable asking campus HR questions about benefits.”
- “The website is cumbersome, not intuitive, and does not confirm that you have enrolled by email.”

Spousal policy not communicated well/many people still want spousal coverage.

Many employees felt the spousal policy was not communicated as early as it should have been, and several of them requested to keep spousal coverage. A sample comment for communication of the policy included: “Communication for benefits was poor this year compared to last year. I work with faculty who were unaware that changes were made to spousal coverage even three days before final enrollment.” A sample comment regarding the desire to keep spousal coverage is: “Please don’t drop the Spousal Coverage.” Other thoughts from this category are as follows:

- “I am hopeful that spousal insurance will continue and is not stripped from Purdue employees.”
- “I am very concerned about the spousal coverage. I carry my spouse as he works for a very small company who does not offer health insurance. I am fearful in the future I will be penalized for this by either 1-not being able to cover him or 2-made to pay an outrageous amount to cover him. I would also recommend more transparency when making large changes to our insurance coverage.”
- “I really don't want the spousal coverage to change, unless the coverage is increasing. Thank you!”
- “Please continue spouse insurance, It is one reason I have continued to work here for 21 years. Fearing I may have to find a job that will cover my spouse.”
- “It is quite concerning that Purdue would inform us of information that they are going to change about our benefits only a few weeks prior to open enrollment. Especially the spousal coverage to name 1 thing. It caused a lot of undue stress to a lot of people.”
- “One significant change: COMMUNICATION. Sneaking a change to the spousal policy with a 2-day notice for employees was completely underhanded, and very very clearly planned in advance as the portal was all ready to go with the changes in place after a Friday meeting with the board of trustees. This was a flat-out ambush, and the people who planned it absolutely know this. This was a shameful act, and needs to stop. Communicate with your employees, treat them well, and you'll get so much more from them.”

Easy to get help/materials were easy to understand. Some participants indicated that the enrollment process was very smooth, and they found all of the benefits enrollment materials provided to be clear. For instance, “I appreciated all the communication that was provided regarding open enrollment times, due date reminders, and open labs. All documents that were provided were very self-explanatory and easy to read!”

- “Being a new employee at Purdue I really appreciated all the information provided to me in the mail before open enrollment. I was able to make informed decisions.”
- “Easy and very good process.”
- “I attended a one on one session and walked away so much more knowledgeable about benefits!”
- “I really like seeing the side-by-side comparison of my current elections, and the new elections.”
- “I think the new streamlined website for enrollment was a very positive step forward. The process of enrollment was clearer and much more straight-forward this year.”

- “The HR reps at the open labs are very helpful in guiding employees through the process of completing the form. I was done in less than a half-hour, and that was with the HR people helping about a half-dozen other employees!”
- “The mailings had the information about open enrollment clearly laid out.”

Need more salary tiers. The final theme regarding the open enrollment process was that a number of employees do not find the current salary tier system for premiums to be equitable. Many suggested having more than two tiers as another option. For example, “In terms of the costs of enrollment, it seems it would be fairer to Purdue employees to have more than two tiers for insurance cost (under \$44,000 and above \$44,000). I would say 2-3 more tiers should be added to spread the insurance cost.” Other comments suggesting modifications to the tiered system were:

- “If Purdue is going to continue with a "tier" insurance plan, there needs to be more tiers. Someone making over \$400,000 is paying the same amount for their benefits as someone making \$45,000. This doesn't seem right to me. I personally feel the cutoffs should be more like 0-\$50,000, \$50,001-\$100,000, \$100,001-\$200,000 and \$200,001 and above. This is more of a tier than the two levels we have now.”
- “If the benefit cost threshold is within the power of the university to change, it should be reviewed. It is completely unfair for employees making \$44,000 to pay the same amount in benefits as someone making \$100,000 and upwards per year.”
- “It is a hardship when staff reach the \$44,000 level and their benefits costs raise significantly.”
- “Please consider adding lower premiums for those making under \$75,000 per year and for those making \$75,000-\$99,999 per year. There is a huge jump in individual premiums for singles under \$45,000 and for those making in the mid to upper \$40s through \$90s, but ESPECIALLY for those making \$46,000-\$75,000. Since we do not receive cost of living raises and tiny, if any, merit raises, insurance is taking a larger and larger percentage of paycheck and out-of-pocket costs. Thank you.”
- “Please make a 3rd tier and possibly a 4th tier level of costs to employees for insurance. Should a person who makes \$44K really be paying the same amount as a person who makes \$150K or \$200K? At a minimum, please put those who make \$100K or more in a different tier. I think this is what makes employees feel the system is not fair and promotes anger within the ranks. Some of the exorbitant salaries and raises and these employees pay the same as a \$44K employee?”

Best Things About Purdue Benefits (n=1309)

Over 80% of participants responded to a question asking them to describe the best things about Purdue health benefits in terms of what to continue or expand. Employees listed a variety of benefits and types of coverage that they appreciated, from the comprehensive nature of coverage, to the Center for Healthy Living, to the affordability of plans and coverage for preventive care.

Comprehensive healthcare coverage. The most prevalent theme for what employees believe is the best thing about Purdue health benefits is the extent of their healthcare coverage. Within this larger category are sub-categories of employees appreciating that they have dental, vision, and prescription coverage, as well as having a good variety of provider/in-network options and multiple plan options for health insurance. Sample comments included: “Comprehensive coverage (eye, dental, health, etc.);” “Dental and vision benefits are amazing;” “Prescription drug coverage with CVS;” and “A good many plan options, the large number of in-network doctors.”

- “A wide selection of in-network providers.”
- “Additional offerings like vision and dental.”
- “Comprehensive benefits coverage/options.”
- “Decent choices/options of plans.”
- “Good network of doctors and hospitals nationwide.”
- “It’s great that all generic prescription drugs are covered.”
- “Purdue has a well-rounded menu of benefit offerings!”
- “That Purdue covers health, dental and vision. Also all the extra insurances that Purdue covers and that we can add.”

Center for Healthy Living. Many participants stated that they appreciate on-campus access to care with the CHL. They frequently stated it is affordable and convenient. Exemplar comments included: “Having the clinic on campus that we can use at a fair price;” and “Low-cost services through CHL.”

- “Access to care on campus.”
- “Although I’ve only used it twice, the CHL is a nice perk.”

- “Availability of Center for Healthy Living.”
- “Center for Healthy Living has a lot of great services, and it would be nice if their services were expanded (either type of service, or hours, or both).”
- “I also very much like that the co-pay for HSA plans at the Center for Healthy Living has dropped to \$25--it is much more affordable, and makes me much more willing to go to the doctor when I need to.”
- “I like the breadth of coverage provided. I particularly like how the Purdue Health Plan covers most preventive care (like diagnostic testing) and requires no deductible for mental health appointments.”

Affordability of benefits. Another theme among the responses was that Purdue health benefits are relatively low cost. A sample comment included: “I am very grateful for the relative affordability of our health insurance.” Other statements indicating appreciation of low cost benefits were as follows:

- “Relatively low employee cost (as compared to employees acquiring their own comparable insurance coverage).”
- “Affordability”
- “Affordable options”
- “Continue to keep costs low (to offset our already low salaries)”
- “Continue to offer medical insurance at a more reasonable cost, which should include deductibles and co-pay.”
- “Cost is reasonable”
- “Reasonable deductibles and out-of-pocket limits.”
- “I appreciate that Purdue still offers (and pays) for part of our health insurance.”
- “I appreciate that Purdue works with health care providers to keep costs at the reasonable and customary prices so any overage is written off.”
- “I really love the low cost (though I am under the 44,000).”

Employer HSA contribution and Healthy Boiler program. A common response to the question about things employees appreciate about benefits was to mention offering an HSA, Purdue’s contribution to the HSA, or mentioning the corresponding incentives through the Healthy Boiler program. For instance, “Access to a Health Savings Account, which provides us with more choice;” “Employer HSA contribution;” and “Adding in the healthy boiler program was a great idea and incentive.”

- “Biometrics screening and HSA incentive.”
- “Continue to contribute to our HSAs. It helps all of us when we also have our employer contributing to that.”
- “Also, free HSA funds that roll over each year are a huge bonus (in some ways better than a salary increase of the same amount).”
- “I also like incentives for being healthy - I'd like to see that expanded.”
- “Healthy Boiler incentives to participate in exercise and programs and earn a reward for doing so.”

- “HSA is great!”
- “I am very thankful for the Healthy Boiler program. I would encourage Purdue to continue to expand health-promoting activities/behaviors that reward employees with financial incentives.”
- “I like healthy boiler as it gives money back to us.”

Spousal coverage. Presumably because employees feared spousal coverage would be taken away, many of them mentioned how thankful they are to have spousal coverage and mentioned their desire to keep spousal coverage in the future. For example, “Keep the benefits for spouses!” and “Being able to cover spouses in plans who are not eligible for other plans.”

- “Covering spouses even if they are offered benefits at their employment as Purdue insurance is more affordable than small business insurance.”
- “Coverage of spouses.”
- “Again, I love the spousal benefit because my family can all go to the Center for Healthy Living for healthcare. Losing this benefit would mean he would have to look for and go to another healthcare provider.”
- “One of the best things has been the spousal coverage and I feel it was made very apparent in the town hall meetings that there is strong support for it.”
- “Spousal and dependent health benefits provide peace of mind, reduce costs for employees and result in healthy families.”
- “Spousal coverage - even if there is a fee associated with opting to have them included in the future would be best for my family.”

Complete coverage for preventive care. A final theme that arose from participant responses was their appreciation for 100% coverage of preventive care. Sample quotes are: “No cost preventative care options;” and “100% coverage for preventive services is great.”

- “Incentives for preventive healthcare have been good. I would like to see these expand, especially as a way to keep the costs down, but without demonizing those who have chronic health problems.”
- “Free wellness exams & preventable medical testing. Free blood tests & 100% coverage after deductibles are met.”
- “I do like that routine check-ups are paid at 100%, I like that flu shots for me and my family are free.”
- “Preventative care is free affordable for a family.”
- “The coverage for preventative medicine drugs/procedures without meeting deductible.”

Benefits Purdue Should Offer (n=983)

Almost two-thirds of employees provided a response to the item about suggestions for other benefits Purdue could offer. The two most frequently mentioned suggestions were free CoRec or other gym memberships and better dental insurance.

Free or reduced cost gym membership. The most frequently desired benefit was a gym membership that is free or low cost, whether at the CoRec on Purdue's campus or at other local gyms. A sample comment includes: "Free or discounted prices for the corec or other gyms in the area."

- "A more cost effective work out area. As an hourly employee, I cannot afford the employee rates at the recreation centers."
- "An annual gym membership so employees can afford to get healthier by exercising."
- "Co-Rec membership. I feel that the rewards from encouraging healthy activity would be great, and result in fewer health claims."
- "Discount on gym memberships at the gym of your choice. The Co-rec is a great facility for students. If you do not live in West Lafayette it is not a convenient choice for faculty. It is also very expensive when all you want is a treadmill 3 times a week. If you are really serious about health and wellness of faculty and staff giving us an allowance for a gym membership would be a great step."
- "I would like to see the co-rec offered to employees and immediate families at no cost. This would help everyone to get in shape and would eventually help to lower health costs."

Improved dental insurance. Regarding improvements to benefits, dental insurance was most frequently mentioned in terms of a benefit needing to be enhanced. For instance, "Purdue's dental coverage is currently not a very good value for the money - it's costly and doesn't provide much coverage. There's a lot of room for improvement there." Several participants also mentioned the desire to cover orthodontics. For example: "An expanded dental program that covers orthodontics would be nice (the current upgrade costs \$500 and gives \$500 worth of benefit - not a good deal)."

- "A solid dental plan. You should see the teeth around here."
- "Additional dental insurance beyond just cleaning."
- "Better dental coverage."
- "Better coverage on orthodontics."
- "It would be nice to have a higher amount towards braces. Only offering \$500 is way below standard for any other company I have seen. Most offer at least \$1500."

- “More dental under regular insurance and not under dental insurance. Good dental care is important for good health in general.”
- “Purdue ought to raise the cap for dental. It's only 1K, hardly enough for the kind of work that is often required.”

Expanded or additional mental health benefits. Participants indicated that they would like more access to or coverage for benefits related to mental health. For example, one comment included: “Mental health benefits should be expanded.” Another participant stated that they desired “additional mental health support.”

- “Better mental health coverage.”
- “Easy access, easy to use mental health care.”
- “I didn't see 100% coverage for mental health services offered this year as I did last year. Mental health is very important, and the cost coverage reduces a barrier for individuals to seek help.”
- “More clearly stated mental health options. I understand that this is a covered benefit for our plans, but I think in this era of high stress and still stigmatized mental health challenges, Purdue should be a leader in highlighting the importance of mental health.”
- “More free counseling sessions for those with problems with stress.”
- “More support for mental health and counseling services.”
- “Perhaps easier access to mental health services, or if the services are available, a better way of making it known that they are available.”

Lower cost of health insurance. Rather than mentioning new benefits, many employees expressed that they want to pay less for health insurance, whether in premiums, co-pays, out of pocket maximums, or especially deductibles. Sample comments exemplifying this theme are: “The deductibles are absolutely insane. I would like to see lower deductibles and out of pocket expenses;” and “I don't think there are any benefits that are desired that are not available. The major concern is the 6% increase in premiums PLUS the increase in deductible and out of pocket max this year when we only received a 2% cost of living increase in pay this year! It's impossible to keep up!”

- “I personally do not crave more benefits as I would simply like to keep the ones I have at a reasonable cost.”
- “I think the benefits are adequate, but the increasing costs are problematic, particularly when our pay is not increased accordingly.”
- “Just keep the costs down. No need to add more services, in my opinion.”
- “Lower cost of health insurance for employees, comparable to other Big 10 schools or other similar institutions in this region (contrary to the messages you've been sending, I've done my research and our insurance is one of the more expensive offerings for employees compared to other institutions...so you can quit lying to the staff any time). Or consider a better tier system for

healthcare costs. It's pretty asinine that someone making \$44,100 per year is paying the same premium and has the same deductible and out of pocket max as someone else making \$250,000 per year."

- "More affordable coverage. Again health care costs continue to increase as do premiums. Over the last 6 years health care coverage seems to have gotten worse every year."

Better prescription coverage. Though employees were thankful to have prescription coverage, many desired to have more coverage. For instance, "better prescription coverage;" and "I think whatever prescription your Dr. orders should be covered, preferred or generic. Just because there is a generic I don't think a preferred prescription should be denied if that's what the Dr. specifically orders." Other sample comments included:

- "More comprehensive prescription coverage. I have had to choose alternatives three times this year based on cost. In one instance, I have to change medications entirely from a maintenance prescription I have taken for years due to a change in coverage."
- "Better prescription coverage . . . prescriptions by mail are not a reasonable option when there are ongoing efforts to find the right balance of medications. Our family has experienced this for medication for mental health diagnoses. Overall, I am happy with the health benefits EXCEPT for the prescription issues as noted above."
- "I think our prescription coverage should be expanded"

More Healthy Boiler incentives. The last theme for additional benefits Purdue should offer is to offer more incentives for the Healthy Boiler program. A sample comment was: "More incentives to participate in to add more money to the HSA." Some people generically made the suggestion without specific suggestions while other employees had ideas for other incentives. For instance, "It would be nice if there were other types of incentives for making healthy choices, like fit bits or other types of health monitoring devices."

- "Additional incentives for staff making cost conscious health care choices and practicing healthy lifestyle behaviors"
- "Come up with some new incentive programs that more people can participate in."
- "I would like to see Purdue revert back to the 2018 HRA plan, when it comes to HRA fund allotment and Healthy Boiler incentive."
- "More incentives to being more health conscious. Maybe more money or even paid time off if you complete certain task."

Key Concerns to Benefit Changes (n=1423)

A large majority of employees responded to the question asking about concerns to benefit changes (92%). Participants most often mentioned concerns regarding the cost of benefits continuing to rise, and concerns that the spousal policy may be changing.

Cost/expense of benefits. Many employees expressed that they were worried about the cost of insurance going up, especially in areas of premiums, deductibles, copays, and out of pocket maximums. Employees were especially concerned because they see the cost as difficult on employees with low incomes, and the fact that raises are not keeping up with the increased benefits cost. For example, “Costs for the employee. I understand the rising cost of healthcare, BUT...when our salaries don't increase accordingly (6% healthcare increase vs. 2% salary increase), it becomes VERY frustrating.” Another cost concern was prescription prices. For instance, “The coverage of prescription drugs or lack thereof.” Finally, some employees again mentioned a concern with the tier setup for premiums. A sample comment includes: “Health care cost has to be lower to employees especially the ones earning below \$44,000.”

- “I'm concerned that the costs will keep going up, and that employees will continue to have to cover more of those costs; I'm concerned that Purdue's HSA contributions will continue to decrease.”
- “1. Cost to Employees 2. Purdue doesn't pay well but attracted employees because of the excellent benefits. This (the benefits) is no longer true.”
- “Increase in costs and diminished HSA contribution, coupled with minimal merit raises, translate in a net pay cut.”
- “It must be affordable, meaning not a burden on lower paid employees.”
- “There should be several tiers above and below the \$44,000.00 threshold that determine the amount the university and/or the employee contribute for health benefits. The lower the employee's salary, the lower the direct costs to the employee should be up and down the entire compensation scale. The Purdue "middle class" - those salaried employees just above the minimum threshold - likely bear the burden for the higher/highest paid salaried employees in regard to insurance premiums, etc.”
- “Concern that premiums continue to go up, deductibles continue to go up, yet pay increases do not come close to making up the difference.”
- “I feel like Purdue employees are funding the "no tuition increase" incentive. I've worked here 34 years, and we used to have by far the best health benefits in the big 10. Now I feel like we are at or below the average.”
- “My main concern is increased cost. I understand that costs need to increase, but having premiums, deductibles, etc. increase within the same year AND employer HSA contributions decreasing is difficult.”

- “Our medical benefits get worse each year. In the last 40 years Purdue was the place you could work and not make a top salary but you had great benefits, now we have lousy benefits and low salaries. I think more and more people will move to industry. You have to have one or the other to keep good people. The \$44K median salary is a ridiculous cut-off for the higher benefit costs. Why is someone that makes \$44K/year paying the same for their benefits as someone who make \$400K? Everyone should pay a percentage of what they make.”

Spousal policy. The second most common theme was employees being worried about changes to the spousal policy; specifically, they are concerned it will create a financial burden for some employees, and will negatively influence recruitment and retention of quality employees, and create a reputation of Purdue not being family friendly. For instance, “Removal of spousal benefits. This will be a negative for both retention and recruitment of faculty and staff. Purdue needs to remain family friendly;” and “#1 concern is dropping spousal coverage. My spousal coverage would cost me an extra \$3000 a year from her employer! Wiping out my yearly raise and then some.” Other exemplar comments included:

- “It will impact recruiting. It has the potential to create inequality if faculty/staff are required to “dump their spouse” off the plan, but others are given an exemption as part of recruiting. It could cause negative perceptions of Purdue in the community. It could impact reasons why faculty/staff stay or look elsewhere. Can't say we are family friendly if we are kicking family off of benefits.”
- “Ending/changing spousal coverage will create a significant financial hardship. One main reason I chose to come to Purdue was for the benefits. This is no longer an attraction. My spouse is offered vastly inferior insurance at his/her employer.”
- “An Employee should be able to maintain coverage for their family and SPOUSE! Regardless of the spouses insurance options. It could be that the spouse's employee has comparable insurance or it may not. But the PU employee should have the option to insure their spouse - regardless!”
- “I am concerned about the spousal coverage and how that will negatively effect our family financially.”
- “My wife needs to be on my insurance. She is a cancer survivor and needs coverage. Removing her from my coverage leaves her prey to the wolves with their substandard coverage and “if” policies concerning pre-existing conditions.”
- “Not covering spouses who have an option for coverage through their own employer is concerning for several reasons. 1 - We would have to prepare to cover two deductibles/max out of pocket expenses. 2 - Premium expenses would greatly increase for my family. 3 - It is inconvenient to manage two different insurance plans and providers.”

Fewer benefits and decline in quality or coverage of benefits. In addition to being concerned about the cost of benefits going up, employees are concerned about getting less for their money because of a decline in benefits or decrease in quality or value of benefits. For example, “Fewer benefits &/or decline in quality.” Participants also mentioned that Purdue is

worse in benefits offerings compared to other Big 10 universities, and/or that benefits offerings used to be better than they are now. For example one employee expressed frustration because of “continually costing employees more for less and less coverage.”

- “If the university decides to scale these benefits back even further, it will have a truly negative impact on many employees who have stuck around the university. If the university is really interested in retention of employees at all levels, they should seriously consider the other negative ramifications of trying to save money by changing health benefits.”
- “After reading the WLFI article, I compared Purdue's benefits to peer institutions and other BIG 10 universities. We rank near the bottom. Last year Purdue health insurance dropped coverage for a prescription that is \$180. This year, you know what you did. I'm pending a procedure because I don't have \$2500, and I'm worried what I'll lose next year so that students can have frozen tuition.”
- “COST COST COST. It costs me more to work at Purdue every year, because raises are not commensurate with increased cost of living, including but not limited to: health insurance (6% this year; 7% a couple of years ago), parking, etc.”
- “Cutting benefits and raising costs.”
- “I am concerned that Purdue will decrease the value of the health plans that they offer.”

Concerns with HSA contributions and Healthy Boiler program. Some employees mentioned that they are troubled with the idea of personal data being shared with Purdue or a third party, and choose not to participate in the Healthy Boiler program as a result. For example, “Changes to HSA contributions requiring us to share health information with the university in order to receive a benefit we have been receiving is not appreciated.” These employees do not believe it is fair to only get HSA money upon sharing health information. Other employees mentioned the effort required to receive the HSA contributions, seeing it as too much of a hassle. A sample comment includes: “I do not like the cumbersome process of receiving incentive money through healthy boiler and then going through Payflex.” Some employees were just concerned that the HSA contributions will be reduced. For instance, “I’m concerned that Purdue’s HSA contributions will continue to decrease.”

- “Comparing Purdue to other large universities (IU, for example), the employer contribution to an employee's HSA was already incredibly low. Essentially cutting it in half was a frustrating move when employees are constantly nagged about making sure they stay on top of their health care needs.”
- “Concern: being pushed to participate in the Healthy Boiler program - I'm just not comfortable sharing my health information in that manner. My health and wellness is between me and my health care provider.”

- “Additionally, the fact that my medical information is tied to Healthy Boiler is invasive. Why does Purdue, or an agent require that information? Purdue's portion of HSA contributions is being held hostage. For 2018, Healthy Boiler HSA bonus was a true bonus; this year and in the future, it's forcing employees into a box to share private medical information. Therefore, I have to pay more into my HSA out of my own pocket in order to cover the expense that Purdue previously provided as a "benefit." It's none of your freaking business, and truly, there is no transparency as to what the information is being used for.”
- “I am concerned that we will lose more of our HSA benefits.”
- “I appreciate the university's contribution to my health savings account, but I'm not thrilled that there are now strings attached to getting that contribution.”
- “I think it is ridiculous to have us enroll in the "healthy living" to keep receiving our HSA that we currently receive. People do not have the time nor do they want their medical info out there for a "3rd party". I nor my husband have the time to participate.”
- “To me the most egregious recent proposed change is regarding the HSA contributions. It is invasive to demand participation in the Healthy Boiler program. Moreover, it is extremely dishonest to claim that we can earn extra HSA contributions through the program. In fact, you are reducing this benefit, not offering the ability to gain extra funds.”

Communicate benefits changes sooner. Similar to previous questions, participants again mentioned the desire to have a longer time to enroll and have any major benefits changes communicated much sooner. For instance, “**EXTREMELY UPSET** that we were not well informed of all the changes in a timely manner two weeks before the roll out is not sufficient time for families to look at making adjustment.” Another example is: “Changes need to announced early in the process.” Other sample statements included:

- “Ample time to review the benefits before the deadline. I'd like enough time to have a discussion with my doctor and plan ahead before changes are made. Specifically who will be allowed to be covered. Providing lots of time for us to review the new package would also remove the switch you made after the announcement of not covering spouses. That was frustrating and changed everything for me and my family. The switching made us feel like we were being jerked around, then we only had a couple of weeks to make decisions. You had all year to decide, why do we only get a few days?”
- “Changes need to be communicated sooner than just a few days prior to enrollment to allow employees to fully understand the changes, why the changes, and put a plan in course for changes for their family.”
- “Communication is **KEY!** Please don't announce a change 2 weeks prior to open enrollment & then receive backlash in the form of feedback. Engage faculty & staff early (now) about potential changes to benefits.”
- “I was disappointed to hear from CVS about prescription coverage changes that begin January 1, 2019. This announcement came after the enrollment period closed. It would have been best if announced before the open enrollment.”
- “Letting all staff know what is going to happen before it is actually done. This year I feel like human resources was trying to be sneaky with the spouse insurance information and then it gets reversed. Staff is going to find out one way or another so you might as well be upfront about issues and that has not been the case.”
- “We need to know ahead of time the changes that are being made to our benefits instead of telling us when the package comes out.”

Opinions Toward the Center for Healthy Living (n=918)

About 75% of West Lafayette employees answered the question asking about their opinions toward the Center for Healthy Living. A variety of opinions were provided, ranging from positive, to neutral, to negative. The two biggest concerns listed were the turnover among providers and the difficulty of getting an appointment. Overall it seems as though negative perceptions from past experiences are still lingering, but positive perceptions are also forming among employees who visited the CHL more recently.

Concern with providers. The most common issue mentioned by participants regarding the CHL was turnover of providers. For instance, “I do not like the fact that the doctors change almost every year. I basically have to start over with a doctor once a year, and that is why I have switched to an IU Health PCP.” Other provider concerns listed were that there are not enough providers, and a perception that providers may not be qualified. For example, “Have to question the quality of doctors—why are they working for a company like this? – and whether they will even be around a year or two from now;” and “Good program but need more physicians if you plan to push this as an affordable option for employees.”

- “I used the center for my primary care when I first started working at Purdue (5-years ago) but there has been so much turn-over in the center since then I'm just not comfortable changing doctors all the time.”
- “Because of the regular turnover, it's been impossible to meet with the same person more than once so each time you have to explain and describe your health.”
- “You should add more Doctors and Nurse Practitioners to accommodate use.”
- “The sentiment is that Purdue needs to hire more competent providers.”
- “I stopped going there, they changed doctors too much, so every time you would have to tell them your life story over again.”
- “More physicians are needed. And they need to be retained. I was seeing a physician there, but she left and I haven't gone since.”
- “Please improve the quality of the providers, and reduce the turnover. A female physician is needed.”
- “I do not always have confidence that I am receiving the best exam or healthcare.”

Hard to get an appointment. A perception still lingers that the CHL has poor availability. For example, “Have never been able to see doctor when I actually needed to - no

appointments available for multiple days. Haven't been able to use as "urgent care" due to no appointments open;" and "Availability was very poor last time I checked." Another concern is the difficulty in using the online portal to schedule appointments. For instance, "I HATE the online portal for scheduling appointments. And no information is on there. You should be able to see past history and update your information and no information is available. I cannot stress enough how much I abhor the portal for scheduling appointments." Other comments about difficulty in scheduling an appointment were as follows:

- "I am a FORMER patient of the Center for Healthy Living and have since left there since I called to make an appointment for what I deemed to be a serious health matter & the receptionist said the earliest they could "work me in" was 3 weeks out!!! I left the center right then and there for an outside doctor that I wouldn't have to wait 3 weeks to get an appointment."
- "Unless you call at 7am you are likely not getting a same day appointment which is frustrating."
- "I've heard many people say it is hard to get an appointment with CHL. If you have a need that you can't wait for, you'll never get in."
- "When I tried to schedule an appointment for my flu-like symptoms, it was going to be 3 weeks before I could be seen. Useless."
- "Wish more slots were available for day of sickness."
- "When it first opened I tried getting an appointment it was going to take weeks. By then I would no longer need appointment. I have never tried again."
- "Recently I've been trying to make an appointment with the center for healthy living and cannot get an appointment. I feel like their new online portal isn't helpful."
- "The online portal to make appointments is frustrating and annoying."

Positive perceptions. Many participants listed positive experiences with the CHL, such as the staff being friendly, the CHL being low cost, convenient, and fast. Many employees use the CHL most often for the lab and for flu shots. Sample comments include: "Convenient for lab work;" "Great! Easy access, very nice staff, low cost to me and my family;" and "Much improved from previous years."

- "Easy to get an appointment. Terrific staff and medical providers. Great follow-up."
- "Easy to get to, care is good, especially for the everyday health issues."
- "Extremely valuable tool for Purdue community! Easy to access, use if needed. Friendly helpful staff!"
- "Good place for lab work, flu shots, and minor medical issues."
- "I appreciate that the Center for Healthy Living is a one-stop shop. I can do everything there that does not require a specialist. Overall, the staff is friendly and helpful, and the wait times for appointments aren't too bad."
- "I like how convenient it is. It has been very easy to get an appointment/flu shot/etc."

- “I love the Center for Healthy Living. The ladies that work in the office part are amazing! Always so nice, helpful and friendly. I brought my daughter in to have blood drawn and she has a huge fear of needles, but this lady was so sweet and kind and my daughter said she was the first person who ever made her feel like she wasn't crazy for having that fear. The way she treated my daughter meant so much to the both of us!”
- “I think it's a great benefit--it makes going to the doctor for sick visits easy and affordable, and helps me to get treated when I need to be, which reduces the amount of sick time I have to take. It also makes it very easy to get my healthy boiler tasks done.”
- “It is easy and convenient and provide excellent service. I have had bloodwork done there, health coaching, and taken part in classes offered. Everyone is friendly, helpful and has a wealth of knowledge.”

No opinion/do not know much. Some participants seemed to be neutral about the CHL based on their comments. For instance, “Fairly neutral. I hear that it is under staffed and can be difficult to get an appointment;” and “Great idea. I have just not explored them yet.”

- “I am neutral, but slightly positive. The times I have helped others to use it have been good experiences and helpful. I have not had much need myself, but will be exploring this more this next year.”
- “I am not for or against it. I have a primary doctor already and do not want to switch. I will not switch my children from their primary doctor, because she already knows their medical history. I may consider using the Center for Healthy Living if they cannot get into their doctor or it is a more routine visit.”
- “I am not sure that it is more convenient than going to my doctor. I really don't know much about what the center for healthy living offers.”
- “I don't have an opinion of the Center for Health Living as my Primary Care Physician isn't there.”
- “I don't really know what I can use them for, or if my family could use it as well. Just not clear how it compares and also integrates with my current PCP.”
- “I haven't formed much of an opinion because I have not used the services. I have heard that it can be difficult to get an appointment, but I don't know for certain. I also wouldn't let a comment impact my opinion without firsthand knowledge.”

Bad experience or heard of bad experience from others. Many employees indicated they refuse to attend the CHL because of having bad experiences in the past or hearing from other employees that they should not visit the CHL. For instance, “Negative experience. Unfortunate because it is so close to campus and affordable, but I am seeking primary care elsewhere. Reasons: Called and gave me the wrong test results. Not prompt with results/follow up communication. Difficult to schedule an appointment. I don't trust the provider.” Another example is “I have not heard good things about it, so I have not gone yet.”

- “A friend of mine was ill-treated there when she was very sick. I will never use it.”
- “Have not used the facility based on comments from co-workers regarding the many staff changes at the center, lost health records and unable to schedule an apt when needed.”

- “I am very disappointed in the care my daughter received there. They did not listen to her, and I felt they were basically unqualified to help her on something that should have been quite standard. She was instead able to get help at Purdue. They also violated her HIPAA rights by announcing to the waiting room why she was there, which embarrassed her. I feel like the facility has suffered since it recently changed management. I did not have these negative experiences before.”
- “I have avoided services at the Center for Healthy Living because of the costs and negative comments I have heard from other employees.”
- “I have utilized the Center several times, and each time I have been more dissatisfied than the last. The doctors are not knowledgeable, and several times I have been treated incorrectly, and had to pay more money to see a doctor at IU Health. It is very difficult to get an appointment as they don't take walk-ins. The sign says they do, but when I have tried to walk-in, I have been told that the walk-in appointments are full.”
- “I went in once. It was a joke. Maybe it's better now, but I prefer to keep my primary care doctor.”
- “Very negative. Appointments weren't kept in a reasonable time. Can't establish relationship with doctor, as when go back, they're no longer there. Doctor care questionable when it was received as made judgment with no prior history of patient. Can't get lab results, appointments not always available. After a few tries to make this work, I've given up and definitely don't trust the medical care there.”
- “I received poor care at the Center for Healthy Living. The physician misdiagnosed my illness, I was given inappropriate medicine that resulted in an eight-month c. dif infection. When my symptoms became worse and I needed additional appointments, it was increasingly difficult to get an appointment at the Center for Healthy Living.”

Want extended hours. Employees would like for the CHL to have extended hours in the evenings and on weekends. For example, “I wish they had longer/more hours, including evenings and the weekends.”

- “I feel the hours should be expanded”.
- “I wish they had longer/more hours, including evenings and the weekends. If Purdue wants us to utilize this center more it needs to be more available.”
- “It's a relatively easy option during business hours. Not really helpful in an emergency situation off hours.”

Ideas for new health facility (n=894)

A majority of respondents from West Lafayette provided ideas of services or qualities for a new health facility (73%). Suggestions included adding more staff such as doctors, expanding services, expanding hours, and having an employee gym, among others.

Additional doctors. Many responses revolved around the need for more doctors, specifically more qualified doctors, and more female doctors. For instance, “better qualified doctors;” “female doctors;” and “Keep what you are doing with more doctors and NPs.” Some also suggested having a few specialists. A sample comment includes: “There should be specialists too like ob-gyn and other common specialists.”

- “DOCTORS!!!! More than one Doctor that faculty can use as a PCP must be available. This is the most essential!!!! At the very least PCPs and OBGYNs which are the ones that faculty use for the annual checkups. DOCTORS not RNs. Although Nurse Practitioners can fulfill many similar items that doctors do they should not be our only resource for a PCP. And even if the one doctor could become our PCP, we should not only see the Nurse Practitioner and not our doctor.”
- “First and foremost, have multiple MDs on staff. Have both women and men. Just please get more doctors on staff.”
- “Greater number of qualified primary care providers (women!)”
- “Greater variety in the backgrounds of physicians. Have some specialists would be helpful.”
- “I like the idea. I think it would be important to have an ample supply of physicians and nurse practitioners so that there are not long wait times for appointment or waiting room times. I think it is also important for it to have laboratory and radiology facilities on site as well as some specialist such as ENTs, etc.”
- “It would be great to have more specialized services (e.g., ob-gyn, dermatologist, pediatrician) at the Center for Healthy Living. If Purdue insists on our deductibles and premiums being so high, then they should offer a way for us to see a specialist at reduced costs through the Center for Healthy Living.”

Walk-in clinic or urgent care with extended hours. Respondents mentioned they would like the CHL to function as an urgent care clinic, with some even mentioning 24/7 access. For instance, “Walk in clinic;” “Apt. times before/after work hours;” and “24x7 urgent care.”

- “24 hour emergency care or at least 8am-8pm Sunday through Saturday hours.”
- “It’s probably not practical, but an urgent care center with evening and weekend hours would be great.”
- “Evening hours would be helpful as it is difficult to leave during a lunch hour.”
- “Increased times - kids don’t get sick M-F 8-5”
- “The Lab hours should be expanded from the current hours at the Center for Healthy Living. Perhaps 6 a.m. - 8 p.m. on weekdays with limited hours on Saturdays.”
- “Urgent care walk-up hours beyond 8-5 M-F.”

- “I think an urgent care type of facility would be great in case you get ill suddenly during the day, etc.”
- “Increased hours and more urgent care appointments. Could consider combining with PUSH to offer 24-hour care.”

Mental health services. A common theme among responses was the desire for more mental health resources for employees to be offered with the new health facility. A sample comment included: “Mental health facilities that are helpful, confidential, compassionate, and easy to get an appointment with;” and “Better (more) options for mental health care (therapy sessions) from qualified providers.”

- “Adequate mental health space and resources.”
- “Mental health counselors.”
- “Mental health services should be available.”
- “I think it would be beneficial to have more mental health services. I also think it would be better to offer the mental health services such as counseling for longer than the 6 visit time frame. There is a shortage of mental health professionals in the United States but especially in Indiana and when the person is released to outside counsel after establishing a relationship with one of the CFHL counselors it is hard to go through all of that over again after having to wait months to get in to a new psychologist. Offering different types of mental health therapy would be good as well. Cognitive Behavioral Therapy to work on retraining your brain is really beneficial to those with anxiety disorders as well as mindfulness. I think it would be beneficial for those stressful positions or people who tend to let stress run their attitude. This would be beneficial for maintaining an enjoyable work environment. I have been blessed with the individuals that I work with on a regular basis but I have witnessed and know of other people on campus who don't have that luxury.”

Comprehensive facility. Some employees mentioned generically that they would like the facility to be comprehensive, like a one stop shop with everyone in one place. For example, “One stop facility;” and “A comprehensive facility for all preventative and minor check-ups (e.g., everything but specialist options).” One specific element that was often mentioned is having lab facilities that contain an x-ray or other imaging machines. For instance, “It should have the necessary facilities like X-ray.”

- “A one stop clinic where you could get medical tests, blood work, complete medical care just short of what a full hospital would provide.”
- “Comprehensive healthcare available - with multiple onsite physicians and specialists and health coaches. Onsite labs, diagnostics, imaging and pharmacy.”
- “Comprehensive healthcare including maternity and child”
- “I would be nice to have all needed services (except hospitalization) offered in a single location.”
- “It would be great if there were some medical imaging services available as well.”

- “I would encourage a new facility for faculty and staff and would like to see MRI and Ultrasound and CT Scans with Xray available with Lab services all under one roof.”
- “It would be amazing if we could get not only routine physicals, but eye exams, Xrays, and mental health treatment as well at one location. Emergency services like stitches etc. would be great as well. I like the idea of a one stop shop for the whole person.”

Keep what is there (and expand). Many participants seem to be pleased with what the CHL already offers, either wanting to keep things as they are or keeping what is offered and adding more to what is currently offered. For instance, “Keep everything that is currently in CHL;” “As similar as possible to the old one;” and “Everything currently at CHL, including full lab facilities, X-ray and imaging, urgent care.”

- “I would like to see the programs currently offered by CHL to continue (such as health counseling, physicals, etc.) and for some things to be expanded, such as access to mental health care, Tier 2+ lab testing in-facility. I would very much like to see women's health expanded.”
- “I like the current services and set up. No additional suggestions for future facilities.”
- “I think just the Center for Healthy Living expanded. More counselors, more health related activities that you could engage the employees and students alike, all kinds of physical therapy things, or chiropractic care, maybe combining PUSH and the Center.”
- “Like the CHL, but bigger. With diagnostic imaging and lab. And pharmacy.”
- “Something similar to the Center for Healthy Living, but with the ability to provide more services that we currently have to do off-campus (scans, etc.)”

Employee gym. A prevalent theme was the desire for an employee-only gym facility. For example, “A gym for adult faculty and staff only, but not for a fee. We don't want to work out with undergrads.” Other comments expressing the desire for a gym included:

- “As much as I want to make myself go to Rec sports, I am intimidated by the size of the place. I am pretty sure students don't want to see me in my work out gear. I would be interested in a facility with easy access and adult type trainers and equipment appropriate for those over 25.”
- “Easy access to a free gym would be great!”
- “Exercise-Equipment galore including cardio machines.”
- “Faculty/staff gym or group exercise classes outside of what the co-rec offers in addition to what's already provided by CHL.”
- “If the center had both health care and exercise facilities (treadmills, small gym, walking/running track) that was part of the Healthy Boiler program (somewhat central to most campus facilities) I would like that. It would duplicate the CoRec but for fac/staff only. Alternatively, free membership in the CoRec would be nice.”
- “It would include a fitness center staffed by a kinesiologist to instruct people in ways to move and increase wellness. If Purdue really wants people to be more active, they need to provide training in safe effective exercise and several places for people to work out off campus because parking on campus is arduous at best.”
- “I cannot afford the costs to use the recreation facilities available to me due to the hourly wage I earn. If a fitness area, with coaching, was available through the center, I would use it. I don't need a pool or some of those facilities. An exercise room with weights and some basic equipment would benefit my health.”

On-site pharmacy. One service employees are interested in having is prescription services on campus with a pharmacy. For instance, “A pharmacy might be nice;” and “It would be great if the healthcare facility could include the Purdue Pharmacy with it or very near to it.”

- “Pharmacy similar in cost to PU Retail Pharmacy &/or employing PU pharmacy students to cut costs.”
- “Also, since Purdue has an amazing Pharmacy school it would be really great to set up a pharmacy at the Center. This would allow students a great opportunity for learning and by using a Purdue based pharmacy there could be a greater savings/value for employees as well as the university.”
- “Maybe a built in pharmacy.”
- “The current facility is nice - but it would be great to be able to do prescriptions on sight, especially since we already offer that to students.”

Physical facility location and parking. Many participants mentioned that they wanted the new facility to be more centrally located on campus than the current CHL facility, as well as desiring that the new building have good parking options. Sample comments were: “more centrally located;” and “adequate and easy parking.”

- “It would be nice to have it closer to the middle of campus.”
- “Easy access and good parking facility.”
- “Easy access. The location of it now is very odd. It looks like a defunct strip mall and the fact that it is sandwiched between DQ and papa john's is really odd. Doesn't really promote healthy living. Ideally I would be able to walk to it from central campus easily. I want to be able to walk there from my office. Overall, it doesn't look like a pleasant place to work or receive health care. I did go once and overall not a pleasant place to be in.”
- “Please be located more centrally on campus than Purdue West (I have no idea where you could possibly build, but I can dream, can't I?), or at least on a major bus route.”
- “Decent parking is a must, as I, and others, have mobility issues. It seems as though the university continues to build facilities without any regard to where people are going to park. Not everyone on campus is a young person with no physical hindrances, and there seems to be no consideration given about how the inability to walk for any distance affect those who live with this situation. Quite frankly, parking issues affect pretty much every aspect of my life--at work and at home--and decisions about the activities in which I choose to be involved hinge pretty much mostly on this, so it is a very important concern for me.”
- “More convenient location, walking distance for most of campus, so one does not have to drive & lose prime parking & spend an hour looking for a parking spot when one returns to work.”

Do not support idea of new facility. Finally, a handful of employees believe building a new facility is not a good idea, seeing it as a waste of money. A comment illustrating this perspective was: “I don't believe this is a good, cost-effective idea. There are already many health options in the community and I do not see acceptance of a university-owned health clinic, especially from faculty members. Perhaps consider how PUSH and the School of Nursing

Family Health Clinics might become partners in the care of faculty, staff, and families.” Other example comments include:

- “Bad idea. Don't do it. You can't compete with the local hospitals and providers on depth of care, and it will be a big waste of the money you claim you are losing on health care.”
- “Don't spend the money.”
- “Forget building a healthcare facility and repair the buildings we have that are in disgraceful state, such as Heavilon Hall. Use the money to maintain and repair what we have.”
- “I believe the current building is underused and building a new one would be pointless. Get better doctors, not a better building.”
- “I do not think Purdue needs to have their own facility; IMO, Purdue doesn't need to be in this business, and collect health data on its employees.”
- “I have mixed feelings about this. How much would constructing this facility cost, and could we spend that money in ways that would more immediately support faculty and staff?”
- “I think it's already great and new facility is not needed.”
- “I think this would be a waste of money. A lot of your faculty and staff don't live near campus and probably would rather use their own PCP instead of trying to use a new one at their work. The ideal facility would not be a facility, it would be appropriate salaries and better insurance for your staff.”

Healthy Boiler Program

Most employees are aware of the Healthy Boiler Program, though only a slight majority of participants actually participate in the program. Among those who do participate in the program, many seem to find the Healthy Boiler Portal difficult to use, with about 20% of participants selecting the lowest possible option for ease of use of the portal; the mean is 3.41 on a scale of 1-7.

Awareness of Healthy Boiler program (n=1505)

	Frequency	Percent
Aware	1427	94.8%
Unaware	78	5.2%

Participation in Healthy Boiler Program (n=1504)

	Frequency	Percent
Already a participant	849	56.4%
Plan to be participant	329	21.9%
Not planning on being participant	326	21.7%

I find the online “Healthy Boiler” portal easy to use (n=842); Mean = 3.41

	Frequency	Percent
Strongly disagree	172	20.4%
Disagree	142	16.9%
Somewhat disagree	149	17.7%
Neither agree nor disagree	83	9.9%
Somewhat agree	170	20.2%
Agree	95	11.3%
Strongly agree	31	3.7%

Changes to Healthy Boiler Portal (n=528)

Among participants in the Healthy Boiler program, 62% provided an open-ended response to provide their opinion about the portal. Overall, comments were negative, as employees seemed to struggle with using the portal.

Portal is confusing. Generally, participants found the Healthy Boiler portal difficult to use; they mentioned it being “confusing;” “overwhelming;” “clunky;” and “not intuitive.” Other sample comments included: “Clearer navigation and instructions. Way too many tabs and steps;” “Complete redesign!! The site needs streamlined and much easier to use;” and “The portal is a disaster. Very hard to understand.”

- “Website is cumbersome and difficult to figure out what you need to be doing.”
- “Compared with many other websites, the Healthy Boiler site is clunky.”
- “Easier navigation is an absolute must in the future.”
- “Easy accessibility. No one can find anything on the site. Everything seems to be hidden.”
- “Have to poke around to find what I’m needing.”
- “I didn’t find the portal to be user friendly or intuitive and I had to call for help. I also found it a little bit complicated to confirm that my spouse and I had met all the requirements, and I’m someone who uses a computer all day long. I don’t know how to tell anyone to fix the portal but there must be a better way.”
- “It is one of the most confusing and difficult to figure out websites I’ve ever experienced.”
- “Navigation needs a lot of improvement. Lots of nested pages and nested menus, with very similar naming conventions made it confusing to find what you needed.”
- “Throw it out and start over. I’m computer savvy and could barely navigate the site. Some employees won’t be able to figure it out. Too many tabs one has to enter data in. Data I entered disappeared.”

Time consuming to enter in information. Some respondents indicated it was too much work to enter in information, especially exercise, finding the process to be “cumbersome.” For instance, “I find it annoying that we have to input daily each exercise we do. I am too busy for this.” Another common complaint was getting forms signed by doctors. For example, “requires paper forms signed by doc that takes me/them time/effort.”

- “Easier to log in your work-out hours and session hours. It wasn’t calculating mine correctly.”
- “Easier to use and not so many steps.”
- “Eliminate need for laborious logging of exercise data.”
- “Entering completed tasks for HSA reimbursement were somewhat cumbersome and confusing. The multi-step process wasn’t always clear.”

- “Entering in the 150 ours of activity/week was a horrible experience.”
- “I’m not going to record info on every time I walk for 15 minutes or workout. Too much record keeping.”
- “Took way too long and is a burden.”
- “My Dr. doesn't want to fill out more forms!!! I go to get a physical every year, but I don’t have my Dr. do more work trying to verify that fact for me. It should be on an honor system, or find a better way for the employee to verify.”
- “My husband just won’t do it because it is so much hassle. Not user friendly at all.”
- “Too much tracking. NO time to do such detail tracking.”

Hard to tell if received credit. A specific element about the portal that was confusing for many participants was the fact that they could not tell if they received credit and were not informed of when they would receive their HSA reimbursements. Comments of this nature included: “Difficult to track where you are as far as completing goals; Purdue did not notify you that you had completed the goals and were qualified for the extra HRA money;” and “Can’t understand if things are uploaded well. No feedback on whether you got paid.”

- “Email acknowledgement, the information entered into the portal has been received.”
- “Can’t tell if my info for incentives has gone through and no one responds to questions via email or phone message.”
- “Confusing interface to understand progress that has been made. No easy way to check to know if incentives have been approved and paid to HSA account.”
- “Difficult to know when complete with tasks.”
- “I didn’t receive a confirmation after submitting my paperwork for a wellness visit and bloodwork so I don’t know if I ever got credit for completing them.”
- “I would like it to show me what I have completed and what I still need to do as far as the incentives go.”
- “Inform us the status of our incentives. For example, I participated last year, I don’t know when and how I would get the \$250 prize.”
- “The Healthy Boiler portal NEVER made it clear to me if or when I would receive any of the financial incentives for completing Healthy Boiler programs. Even when I called up to find out whether I had or would receive any of the incentives for having completed wellness programs, I couldn’t find anyone who could answer my questions. Consequently, I have absolutely no idea whether or not I received any of the incentives and will not waste my time with them in the future.”

Confusion with spouse login. The last theme brought up by participants was that there was confusion regarding the spouse login to the portal. These employees recommended to have spouses use the same login as the employee in the future. Sample comments include: “At the beginning of last year, it was confusing when trying to register my spouse, so I gave up and we

didn't participate;" and "HR was not aware of my spouse's completion of Healthy Purdue and several telephone calls were needed." Additional comments were:

- "Better communication that my spouse needed his own username and password."
- "Confusing connection between employee and spouse. My spouse login shows my name."
- "Have spouses in the same log-in window. They don't have Purdue email addresses which also makes it difficult."
- "Having the spouse part of my account and not having to create a separate account for them."
- "I did not realize that I had to make a separate account for my husband. That was not clear. I made numerous phone calls to try to figure out the system, and nobody had any answers. I finally met with somebody in HR to see what I was doing wrong. They were able to help me-finally!"
- "I had a hard time determining that my wife needed her own account. This should be made clear. It might be easier for spouses to be accessed from the same account."
- "I could NEVER figure out how to enroll my spouse, even after asking I could not get him enrolled."

Why Employees are not participating in Healthy Boiler (n=297)

Over 90% of respondents indicating they will not participate in healthy boiler provided comments for their reasoning. Common themes were wanting to provide sensitive information, not having time or believing it is too much work, believing they are already healthy, not wanting to feel forced into it, and some employees said they are not eligible.

Privacy concerns. The most frequently mentioned reason for not participating in Healthy Boiler was concerns with Purdue and/or a third party organization having access to health information. Employees believed this was "intrusive" and "unethical." A sample comment included: "I believe in HIPAA, and that means keeping my health care and status private."

- "Asking for biometrics of employees is intrusive and unethical IMO."
- "Because I have no intention of giving my protected health information to anyone that is not my physician, no matter how anonymous you assure me it is. I would happily participate in some of the incentives if the requirement to give biometric data were not there."
- "Do not want to share my health information."
- "Health information should remain confidential."
- "I disagree with the requirement of surrendering personal health information."
- "I do not believe that benefits should be contingent on providing personal data to employer or contracted third party. Data management and privacy are important."
- "I don't want my employer involved in my health. While I engage in many of the recommended practices, I would never want to report such activities and no amount of money/incentive would change this. Employers should not act as big brother."
- "I fear that the information about me will be used against me and/or sold to a third party."
- "It is none of your business who my medical provider is, my biometrics, etc. Purdue is my employer only."

It's too much work or I don't have time. Some employees mentioned that the Healthy Boiler program is too much work, or that they believe they do not have enough time for the program. One employee stated they do not participate "Because it's too much work!" continuing with, "I am overworked as it is and enrolling in a 'program' is more WORK." Another sample comment is "Do not have time for it."

- "The workload does not allow me to spend time on this."
- "Another thing to do in an already packed schedule."
- "Don't want to jump through the hurdles to participate."
- "I am a busy person and the incentive is not enough to take more of my time."
- "I think it is extra work on my end to get signed up and to get the proper information submitted to receive the extra monetary benefits."
- "I think the process is too difficult to get the incentives for HSA or HRA, so why bother."
- "I tried participating in the program last year and the tools to track/use were too time consuming."
- "Too busy."

Already take care of myself. Some respondents appeared to find the program unnecessary for them because they are already healthy. For instance, "I already work out/run 5 days a week. I have to document that or take courses? I just ran a half marathon. I go to the doctor annually;" and "Already do a personal exercise program and weight maintenance program and calorie/carb counting." Other comments indicating employees are already healthy were:

- "I know more about my health and health in general than what I have seen portrayed in this program."
- "I already walk 4-6 miles a day (use Fit Bit), record daily calorie intake, do not use tobacco or drink excessively, and keep my weight steady. Anyway, I am probably healthier than a lot of people my age but I am not interested and do not have the time to be monitored by Purdue."
- "I am a runner and I do P90X, eat well, am not overweight, exercise 6 days a week."
- "I am already a runner, and extremely healthy."
- "I control my own health, I have annual exams, I am up on all vaccines for my age, I eat right and I belong to and go to a gym (NOT the co-rec), I try to limit stress which I'm not always successful."
- "I don't need this. I know how to take care of my health and well-being. It is not rocket science!"
- "I feel as though I do what I need to stay healthy. I eat right, most of the time, and I exercise."

Feel as though it is being forced on them. There was a perception among some participants that the Healthy Boiler program coerces employees into participation. A comment reflecting this perception was: "The "Healthy Boiler" program is now becoming a kind of "Big Brother"--requiring people to participate in order to earn full HSA contributions from Purdue. I

don't want my employer to be a kind of police officer. I'd rather have reasonable job expectations that don't create excessive stress that then leads to unhealthy habits.” Other employee feedback from this category is as follows:

- “Because am healthy and don't appreciate been forced to do so.”
- “I should not be forced into Purdue's program to receive the amount of benefits I did previously.”
- “It feels coercive.”

Not eligible or do not have HSA. Lastly, some employees are not eligible for an HSA or do not want/have one, so it would not make sense for them to participate in the Healthy Boiler program. For example, “I am not eligible given my status;” and “I don’t have an HSA.”

- “Because I do not qualify for the Purdue contributions.”
- “Because I will not use an HSA plan. They're not good.”
- “I am not covered by a Purdue health insurance plan, so I am not eligible. I had planned to participate this year, so when I found out I could not, I was a little bummed about that.”
- “I am not on an HSA plan.”
- “I don’t have an HSA.”

What could Purdue do to help you be healthy? (n=891)

About 57% of employees provided a response describing things Purdue could do to help them become healthier. Most often participants mentioned more mental health services, promotion of work/life balance and flexibility in hours, and a more positive work environment.

More mental health services. Many respondents suggested the need for more mental health services, especially desiring more resources related to counseling. For instance, “Offer more mental health services;” “Offer better access to counseling;” and “Allow ‘mental health’ days instead of sickness only days.”

- “Expand mental health benefits on our insurance plans.”
- “Access to mental health care should be covered in full (i.e., exempt from the deductible).”
- “Counseling and support at an affordable price. Mental therapy is so expensive.”
- “Cover mental health in full. Do not force us to meet our \$5,000 deductible in order to see a therapist. Numerous studies have shown that academics are prone to anxiety and depression. Making those services available to use at a reduced (or no) cost would help keep Purdue’s employees healthy.”
- “Have trained counselors for faculty and staff.”
- “Maybe more discussions about mental wellness with special group sessions on topics such as: work-life balance, financial stress --personal stress, introduction to mental health for those who don’t believe in mental health, you get the idea!”
- “Make mental health care more accessible and affordable. I don’t think twice about seeing my PCP when I need to because I have a manageable co-pay. When I see my mental health professional I need to decide if I can afford to pay a fee 5 times more, possibly for several visits.”

Promoting work/life balance and flexibility. Employees seem to desire the encouragement of work/life balance by having more days off or flexible hours to decrease their stress. Sample comments illustrating this theme included: “Flexible hours and the ability to work remotely = better work/life balance;” and “Some services for dealing with stress.”

- “Create a work environment that better fosters work/life balance.”
- “Actively promote a work-life balance. And not just seminars, but incorporate it into promotion and tenure. Too many people work too hard.”
- “Allow as much flexibility as possible for hourly workers. I understand that accruing vacation time is easy for a computer to track, however hourly workers are often most in need of flexibility than those in other salary classes to deal with unexpected issues that must be handled during M-F 9-5 hours. If all or a portion of those hours could be advanced, it would be incredibly helpful.”
- “Allow flex time. If I work every Saturday in June let me adjust my schedule temporarily to Tuesday-Saturday. Teach management to encourage and practice work-life balance. That means not sending me an email that says in the event of a snow day I need to take a personal day and work from home. It should be one or the other! Allow and encourage staff to use vacation days

and not feel obligated to check email while on vacation. Create a culture where people are not on email all hours of the night sending messages at 1AM or bragging about how they worked 60+ hours for so many weeks straight. It's not a contest and turnover results when new employees realize that is not what they signed up for."

- "Flexible work schedule."
- "I feel as if I am being asked to take on more and more responsibilities, and these added responsibilities create more stress and less time to cook healthfully and exercise. Being overburdened at work (I'm faculty) leads to a tremendous amount of burnout during the academic term."
- "Flexible working schedules and benefits to allow staff to stay home when needed for family."

More positive work environment. On a related note, participants explained that they desire a healthy work environment. For example, "Less stressful work environment;" and "Employee morale is very low. People can't take days off, because their work just piles up while they're gone. People feel guilty about getting the flu and needing to stay home. Want me to feel better? Treat me like a human being." Other sample comments were:

- "So many departments are extremely high stress environments and if there is no incentive to put processes in place to change things and to promote wellness from within, then nothing about going to a one-hour seminar on wellness is going to change that."
- "Encourage a work culture and environment of collegiality."
- "Have a positive work environment and not a totalitarian work environment."
- "Lessen the stress. Purdue has become very stressful over the last few years."
- "Not be such a crappy, demoralizing place to work. The university does not treat its faculty and staff as valued members of the community."
- "Purdue can be a very stressful environment to work in. One is the lack of communication to all staff. Like sneaking the spousal insurance issue in at the last minute. If you don't think that caused stress among staff you are wrong."

Gym membership or exercise facility. As has been indicated in other parts of the survey, participants would like cheaper or free access to a gym including fitness classes. A comment demonstrating this theme is: "Free membership to the Co-rec or a similar facility would be extremely helpful." An example of the desire for fitness classes is: "Offer fitness classes for faculty and staff only at the co-rec. Waive the co-rec fee for faculty and staff."

- "I think the reduced costs to be a member of the COREC would be awesome. Working out regularly will help with your mind and body."
- "Better options for paying for gym memberships."
- "Free gym membership."
- "Provide exercise facilities and other types of exercise opportunities inside and around each building where staff work. The biggest threat to my health is sitting at a desk for hours."

More pay/higher salary. Some participants indicated they would like a higher salary in order to be healthier. For instance, “Better pay. Raises/promotion by merit/fair distribution of raises between upper management and technicians.”

- “Increase wages for low-earners across campus.”
- “Provide annual raises that are actually going to keep up with annual cost of living increases and inflation, so it doesn't continue to feel as though every year is a demotion.”
- “Increase salary and reduce health cost.”
- “Offer cost of living salary increases.”
- “Pay me more.”
- “Provide employees, especially staff, competitive pay. Provide cost of living pay increases, and merit increases with clear standards and transparency.”

More nutritious food options on campus. Participants felt that it would be helpful to have more nutritious food options available on and around campus. An example response was: “Continue to improve high-quality nutritious food availability all over campus.”

- “Have a better salad place on campus.”
- “Have less expensive healthier food choices at the student union.”
- “Offer healthy meals for affordable purchase.”
- “Offer healthier options at all of the onsite Campus dining sites.”
- “Pay attention to nutrition at on campus eateries.”
- “Provide decent meal and coffee options at various places on campus. There is only one measly Dunkin' Donuts near Tippecanoe Mall. On campus there's a very expensive LaVazza in the Marriott that is open at odd hours and then an overpriced Starbucks in the bowels of PMU. Not helpful for people who work near the Vet school. I need to be able to access healthy options ON CAMPUS, in WALKING DISTANCE, that are open the hours that faculty work. There's nothing in this vast wasteland that isn't difficult to get to and/or is only open until 2:30 PM. These options don't work at all. I prefer DD coffee (vs. Starbucks and LaVazza) and want it nearby. Same with campus eateries.”
- “Provide in building healthier snacks instead of high carb, high sugar drinks.”

Train supervisors in communication. Several employees believe that it would be helpful to have training for supervisors to improve their communication. For instance, “Train supervisors and directors to support open & healthy communication for all staff/faculty persons.”

- “Educate supervisors on how to treat and talk to people with mental wellness issues. We don't want them pushing employees too far and break them.”
- “Have fairer or at least "trained" supervisors in the academic area.”
- “I think supervisors are poorly trained. They bring a lot of stress and I think it's due to poor training on how to manage and supervise.”
- “Mandatory training for supervisors on the effect of stress on their employees.”
- “Most of my anxiety and stress the last several months has been triggered by work politics/culture and an administrator in my department. I think communication training, conflict management training, and general leadership training for supervisors would help this dramatically.”

Key Recommendations

Based on the quantitative and qualitative responses provided in this year's open enrollment survey, some key recommendations emerge from the data. Many of these suggestions can be addressed with communication.

1. Communicating major changes to benefits and sending benefits materials out earlier, and if changes are made to the spousal policy, providing clear evidence and justification:

Employees indicated that they wanted to receive benefits information earlier, and that they were upset because major changes to benefits were not communicated sooner. For instance, many employees stated that they needed more time to make adjustments upon hearing of benefits changes and obtaining benefits materials.

Specific to potential modifications to the spousal insurance policy, employees had concerns about how these potential changes were communicated, with some of them indicating that it caused them a lot of unnecessary stress. For instance, several employees explained that not having their spouses covered would result in a significant financial burden for their families, and pleaded that spousal coverage be maintained. Over 50% of married participants believed the potential changes to the spousal policy are a bad idea, and selected the lowest possible option for that item. Employees also stated that they are concerned that getting rid of the current spousal policy will result in decreased recruitment and retention of high-quality faculty and staff, and tarnish Purdue's reputation of being family friendly.

Thus, it is suggested that significant modifications to benefits be communicated weeks, if not months, before the start of the open enrollment period. Additionally, ensuring employees have open-enrollment materials (such as the mailed benefits guide) well before the start of open enrollment would also be helpful to employees. Because so many employees are concerned about possible changes to the spousal insurance policy, if coverage is to be dropped, it would be essential to communicate this fact to employees with plenty of advance notice. Providing clear evidence and justification for why the decision was made to modify the spousal policy would be necessary for employees to better understand the reasoning behind the decision.

2. Extending the open-enrollment period:

Many employees stated that they were upset that the open-enrollment period was shortened this year compared to what it had been in the past. Specifically, they indicated that the open-enrollment period was only two weeks when in the past it had been three weeks or more. Generally, employees wanted more time to enroll in benefits. This shortened enrollment period was especially difficult for employees who happened to be on vacation during all or part of this enrollment period.

Therefore, it would be useful to extend the open-enrollment period to three or four weeks for employees in the future, and/or back to what it had been in years past.

3. Continuing to promote improvements made to the Center for Healthy Living:

Employees have a variety of perceptions of the Center for Healthy Living, ranging from excellent, to neutral, to poor. Those who have had one bad experience or

who have heard bad things from others are not willing to visit. The most prevalent negative perception of the CHL is that there is too much provider turnover. Yet, those who visited the Center for Healthy Living in the last 12 months have more positive perceptions of the CHL than those who have not visited in the last 12 months. Though there are some negative perceptions still lingering, positive perceptions are starting to form as well.

Building on the positive perceptions that are being created, increased promotion of the improvements made to the CHL would be beneficial. A specific strategy that could be used could be to include patient testimonials from employees who have had a recent positive experience at the CHL.

4. Modifying the Healthy Boiler Portal:

Healthy Boiler participants found the portal hard to use in terms of being very challenging to navigate, and found the process for entering information to be cumbersome. They said the portal was confusing, and especially found the process for entering physical activity to be too much work. Another issue mentioned by several participants was the difficulty in getting spouses registered and logged in to the portal. Finally, it was difficult for employees to determine if they had completed all requirements and to figure out when they would be reimbursed.

To address the concerns mentioned by the Healthy Boiler participants, consider re-designing the Healthy Boiler portal, and simplifying the process of entering health information. It would also be useful if there could be the incorporation of a confirmation into the portal for employees to determine when their requirements are met and notify them when they will receive the HSA funds into their accounts. Once these changes are made, they should be communicated to Healthy Boiler participants (or even all employees), to indicate that their feedback has been addressed.

5. Addressing concerns of employees who do not want to participate in Healthy Boiler:

While a majority of employees who completed the open enrollment survey indicated that they participate in the Healthy Boiler program, many other employees indicated that they will continue to refuse to participate in the program. The most frequent reasons for not wanting to participate in the Healthy Boiler program were privacy concerns, believing they are already healthy, feeling coerced into participation, or believing it is too much work.

To encourage more employees to participate in the Healthy Boiler program, some of these concerns mentioned by participants could be addressed in communication to employees about the program. For instance, an FAQ could be added to the website or sent out in promotional materials. Regarding specific content of communication, Human Resources could consider sharing what employees' biometrics data is used for. For employees who think participating in the Healthy Boiler program is too much work, it could be useful to have current participants share testimonials about the program indicating it is not too time intensive to participate. Additionally, biometrics data and visiting a primary care provider might be able to be separate incentive earning activities. CHL staff could set-up sessions around campus (similar to flu shot clinics) to collect biometric data, thereby helping employees earn a partial incentive. To receive an

additional incentive, employees could make an appointment with a primary care provider to discuss results.

6. Offering more mental health resources or emphasizing resources that are already offered:

A theme that was mentioned in multiple areas of the survey is a concern for mental wellness among employees and a desire for more mental health resources. For instance, about 40% of participants indicated they experienced poor mental wellness on 5 or more days in the past 30 days. Some employees mentioned issues such as: unequal work/life balance or a stressful or negative work environment. A few employees explained that coverage for mental health is extremely expensive. Employees mentioned that they would like more mental health resources in general, but this is also something they would like to be included in the new Center for Healthy Living facility.

7. Continuing to increase awareness of the Benefits Ambassadors program:

Though the Benefits Ambassadors program has been in existence for three years, a majority of employees did not know about the Benefits Ambassadors program, and very few knew who their Benefits Ambassador was. Benefits Ambassadors can potentially be the key drivers of benefits information to employees, especially those whom are hard to reach with HR's mass communication methods.

There is an opportunity for more promotion about the Benefits Ambassadors program to increase employees' awareness of it and help them become better educated about their benefits.