

Purdue Open-Enrollment 2020

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 some of the benefits that are offered, but are also concerned about recent changes to benefits. Employees' attitudes toward benefits are generally neutral to positive and similar to 2018. Regarding open enrollment, employees expressed concerns with a slow response time from human resources during open enrollment, as well as still desiring a longer length for the open-enrollment period.

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

1. Extend the open enrollment period or justify why it will remain the same; communicate realistic expectations regarding open enrollment response times.
2. Justify reasons for benefits changes to employees.
3. Optimize current benefits versus adding new benefits.
4. Continue to showcase improvements made to the Center for Healthy Living.
5. Highlight new employees who have more positive attitudes toward Purdue benefits.
6. Increase awareness of mental wellness resources that are already offered.
7. Reevaluate 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 2019, and early 2020, 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 1,500 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 surcharge policy. Employees at the West Lafayette campus provided their evaluation of the Center for Healthy Living. Questions were also asked about the Healthy Boiler program, mental wellness, and retirement/financial wellness. The data in this report can be used to determine how benefits communication might be improved in the future.

Participants

The average age of employees surveyed was 48.09 (SD = 11.93). The majority of surveys were completed by employees from the West Lafayette campus (84.2%), followed by Northwest (5.8%), Fort Wayne (5.6%), Extension (2.8%), and Other (1.5%).

Participants were members of the following employee groups: professional (35.7%), administrative and operational support (31.4%), management (12.2%), faculty (11.3%), police, fire, and skilled trades (2.1%), executive (.7%), and other (6.6%). 72.1% are married, 66.6% identified as female, and 28.3% 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, open-ended responses, and benefits communication recommendations.

West Lafayette Campus

Usefulness of HR Tools to Help People with Benefits Enrollment (n=1266)

	<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	4.9%	40.0%	42.0%	8.8%	4.3%
Weekly Enrollment Emails	9.1%	45.1%	36.1%	8.0%	1.7%
Healthy Boiler Newsletter	17.3%	41.2%	26.0%	13.1%	2.4%
Home Mailed Benefits Statement	10.8%	28.3%	40.0%	13.4%	7.4%
Purdue Today Articles	10.1%	44.4%	35.4%	8.5%	1.6%
On Campus Presentations	9.2%	9.9%	14.0%	59.7%	7.2%
Online Presentations	8.4%	14.4%	14.9%	52.6%	9.7%
Emailed hr@purdue.edu	11.9%	15.7%	16.7%	51.5%	4.2%
Telephone Assistance	10.7%	8.5%	12.2%	63.0%	5.6%
One-on-One Assistance	7.0%	5.9%	14.0%	66.9%	6.2%
Open Computer Lab	5.5%	5.3%	11.8%	69.8%	7.7%
Benefits Website	6.6%	40.4%	45.9%	6.2%	.9%
Benefits Ambassador	8.3%	5.8%	5.6%	60.9%	19.3%

Attitudes Surrounding Benefits Information (n=1254)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2019 Mean	2018 Mean	2017 Mean
HR Provides me with easy to understand information surrounding benefits offerings	4.8%	5.6%	10.3%	11.3%	30.1%	31.4%	6.5%	4.77	4.68	5.19
I feel knowledgeable about all the benefits Purdue offers	3.4%	7.7%	12.0%	10.3%	33.1%	28.0%	5.6%	4.68	4.66	4.93
I know where to go to find benefits information	3.3%	5.1%	10.1%	6.1%	29.7%	35.6%	10.0%	5.00	5.06	5.34
When I choose my benefits, I feel I know all I need to in order to make the best decision	5.1%	7.4%	13.3%	10.5%	28.5%	28.7%	6.5%	4.62	4.51	4.93
HR could do a better job helping me understand all benefits offerings	2.7%	12.7%	9.5%	29.0%	23.4%	14.1%	8.6%	4.34	4.46	4.10

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

Time Reviewing and Completing 2020 Benefits (n=1328)

	Time Reviewing Benefits	Time Completing Benefits
< 15 minutes	7.6%	10.4%
15-30 minutes	22.8%	36.1%
30-45 minutes	23.4%	27.8%
45-60 minutes	18.7%	13.7%
> 60 minutes	27.5%	12.0%

Core Analytics Attitudes (n=1325)

	Disagree	Neither Agree or Disagree	Agree	Did Not Use/See
Easy to Use	10.3%	23.7%	32.4%	33.6%
Clear Instructions	14.1%	22.2%	33.8%	29.8%
Info and Costs Displayed were Clear	10.4%	18.6%	41.3%	29.6%

Ease of Enrollment Compared to last year (n=1330)

- Easier = 21.5%
- Harder = 19.8%
- Same = 52.6%
- No comparison/not here last year = 6.1%

Did you contact HR about your benefits in the past 12 months? (n=1196)

- Yes = 42.9%
- No = 57.1%

How soon question answered after contacting HR (n=507)
2019 Mean = 3.16 days; (2018 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=511)

	Percentage	Frequency
Difficult (1)	19.0%	97
2	6.7%	34
3	9.0%	46
4	13.3%	68
5	14.5%	74
6	17.4%	89
Easy (7)	20.2%	103

Note: 2019 Mean = 4.31 (2018 Mean = 4.58). A one-sample *t*-test found the 2019 mean value to be significantly above the scale's midpoint at $p=.001$.

Health Benefits Purdue Provides are... (n=1298)

Terrible (1)	5.6%	Too Expensive (1)	11.3%	Not Comprehensive (1)	7.0%	Unfair (1)	6.8%
2	6.4%	2	10.6%	2	7.5%	2	6.3%
3	8.8%	3	15.6%	3	11.4%	3	10.3%
4	22.8%	4	22.4%	4	22.0%	4	27.9%
5	26.5%	5	18.3%	5	20.4%	5	17.2%
6	22.1%	6	14.5%	6	21.9%	6	20.3%
Excellent (7)	7.9%	A Great Value (7)	7.3%	Comprehensive (7)	9.8%	Fair (7)	11.3%
2019 Mean:	4.56*		3.99		4.46*		4.48*
2018 Mean:	4.57*		3.82*		4.51*		4.42*

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

The spousal surcharge policy in effect for the 2020 health plan is... (n=1263)

Bad idea (1)	30.4%	Not necessary (1)	26.4%	Wrong (1)	27.6%	Unfair (1)	27.5%
2	9.5%	2	8.0%	2	8.4%	2	8.1%
3	8.1%	3	8.8%	3	9.5%	3	10.2%
4	27.2%	4	27.9%	4	29.6%	4	27.1%
5	8.6%	5	10.2%	5	8.9%	5	8.8%
6	6.9%	6	8.7%	6	7.1%	6	8.7%
Good idea (7)	9.3%	Necessary (7)	10.1%	Right (7)	9.0%	Fair (7)	9.6%
Mean:	3.32		3.54		3.41		3.46

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 $p<.001$.

The spousal surcharge policy in effect for the 2020 health plan is...
Married Participants Only (n=840)

Bad idea (1)	33.5%	Not necessary (1)	29.1%	Wrong (1)	30.3%	Unfair (1)	30.6%
2	9.5%	2	8.0%	2	9.2%	2	8.2%
3	8.8%	3	10.2%	3	10.7%	3	11.4%
4	23.6%	4	24.6%	4	25.6%	4	23.0%
5	9.4%	5	9.9%	5	9.2%	5	9.6%
6	6.7%	6	8.4%	6	6.5%	6	8.0%
Good idea (7)	8.4%	Necessary (7)	9.8%	Right (7)	8.6%	Fair (7)	9.2%
Mean:	3.19		3.43		3.28		3.33

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

The spousal surcharge policy in effect for the 2020 health plan is...
Non-Married Participants Only (n=301)

Bad idea (1)	20.9%	Not necessary (1)	18.2%	Wrong (1)	18.9%	Unfair (1)	17.8%
2	9.3%	2	6.8%	2	6.1%	2	7.7%
3	6.0%	3	5.8%	3	7.1%	3	7.7%
4	37.2%	4	36.6%	4	39.5%	4	36.7%
5	6.0%	5	9.9%	5	8.4%	5	7.4%
6	8.0%	6	11.0%	6	8.4%	6	10.1%
Good idea (7)	12.6%	Necessary (7)	11.6%	Right (7)	11.5%	Fair (7)	12.5%
Mean:	3.72*		3.93		3.84		3.88

*One-sample *t*-test found this mean value to be significantly below the scale's midpoint at $p = .014$.

The spousal surcharge policy affects me and my family in a negative way. (n=863)

	Frequency	Percent
Yes	274	31.7%
No	589	68.3%

Note. These results are only from married participants.

Spouse and Spousal Surcharge Policy Information

	Spouse works outside Purdue (n=870)		Spouse has access to healthcare coverage at their employer (n=564)		Enrolled spouse in Purdue health benefits for 2020 (n=388)	
	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	565	64.9%	392	69.5%	154	39.7%
No	305	35.1%	172	30.5%	234	60.3%

Note. These results are only from married participants.

Attitudes Toward Personal Health and Purdue Resources (n=1236)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2019 Mean	2018 Mean	2017 Mean
Overall I feel as though I am in good health	.8%	2.8%	6.3%	7.1%	25.6%	46.3%	11.0%	5.37	5.51	5.62
It is easy for me to be and stay “healthy”	1.5%	7.0%	12.5%	10.0%	31.2%	31.6%	6.2%	4.82	4.94	5.03
I feel I could make better choices to be healthy	1.9%	5.8%	6.0%	8.8%	32.3%	34.8%	10.4%	5.10	4.97	5.24
Purdue provides me helpful/useful resources to be and stay healthy	3.1%	7.8%	6.9%	21.1%	28.1%	28.5%	4.5%	4.67	4.42	4.88
Purdue should incentivize us to be and stay healthy	6.0%	4.0%	4.4%	20.3%	22.6%	25.3%	17.4%	4.95	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=1198)

2019-2020		2018-2019		2017-2018	
Yes	No	Yes	No	Yes	No
87.9%	12.1%	86.2%	13.8%	76.8%	23.2%

Benefits Ambassadors Program (n=1256)

	2019-2020		2018-2019		2017-2018	
	Yes	No	Yes	No	Yes	No
Know about the BA program	37.2%	62.8%	44.1%	55.9%	37.9%	62.1%
Know who their BA is	10.4%	89.6%	15.4%	84.6%	14.5%	85.5%

Center for Healthy Living Attitudes (n=1229)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2019 Mean	2018 Mean	2017 Mean
I am aware of the CHL	.2%	.3%	.8%	1.1%	4.6%	44.6%	48.6%	6.37	6.35	6.30
I know where the CHL is located	1.6%	3.4%	1.1%	1.5%	4.6%	37.1%	50.7%	6.18	6.15	6.06
I know all the services the CHL offers	3.0%	9.4%	10.0%	10.5%	29.7%	25.5%	11.8%	4.78	4.72	4.68
The CHL is a great place to seek medical care	6.8%	8.0%	7.7%	30.5%	17.2%	17.1%	12.7%	4.46	4.11	4.41
It's convenient to seek medical care at the CHL	8.0%	9.7%	9.1%	24.9%	12.6%	19.0%	16.7%	4.48	4.28	4.47
It's easy to make an appointment at the CHL	7.5%	6.6%	8.1%	32.2%	13.6%	18.1%	13.8%	4.48	4.33	4.50
I can get an appointment quickly with a provider at the CHL	9.3%	6.5%	9.0%	38.8%	12.3%	14.4%	9.7%	4.20	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 $p < .001$.

Overall Attitude toward CHL (n=1216)

2019 Mean = 4.64; (2018 Mean = 4.33; 2017 Mean = 4.64)

	2019 Percent	2019 Frequency	2018 Percent	2018 Frequency	2017 Percent	2017 Frequency
Negative (1)	6.7%	82	9.6%	112	5.2%	106
2	7.6%	92	10.3%	121	5.8%	118
3	8.6%	105	8.9%	104	7.3%	148
4	25.7%	312	25.4%	298	31.6%	644
5	13.8%	168	14.3%	167	16.2%	331
6	18.2%	221	17.4%	204	19.3%	393
Positive (7)	19.4%	236	14.1%	165	14.6%	298

CHL Knowledge and Behaviors (n=1224)

Compared to the last two years, more participants who completed the 2019-2020 open enrollment survey knew that they can establish a primary care provider at the CHL and reported that they previously had an appointment at the CHL. This is likely due to the communication the CHL has been using to promote the CHL over the last few years. A majority of participants were not aware of the cost to visit the CHL for a non-preventive visit. Over one-third of participants who visited a provider outside the CHL for a non-preventive visit indicated that they would have visited the CHL if they knew the cost for a non-preventive visit.

	2019-2020			2018-2019			2017-2018		
	Yes	No	I don't know	Yes	No	I don't know	Yes	No	I don't know
Can establish a PCP at CHL	57.4%	3.9%	38.7%	52.7%	3.4%	43.9%	41.6%	3.3%	55.0%
Previously had PCP appt. at CHL	29.6%	67.7%	2.7%	24.2%	72.2%	3.7%	26.6%	64.2%	9.1%
Previously had wellness appt. at CHL	26.5%	69.6%	3.9%	24.4%	69.1%	6.5%	32.6%	57.9%	9.6%
Visited PCP outside CHL for non-preventive	62.9%	36.0%	1.1%	-	-	-	-	-	-

Cost to visit CHL for non-prev (n=948)	Correct Response	Incorrect Response
Actual cost = \$25	29.6%	70.4%

Knowing cost of visiting CHL, would you have visited CHL? (n=759; people who visited PCP outside CHL in last 12 months)	
Yes	35.4%
No	64.6%

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	<i>t</i>	<i>df</i>	<i>p</i>
Had appt.	478	5.41	1.58	17.96	1224	<.001
No appt.	748	3.85	1.43			
Easy to make an appointment at CHL						
	N	Mean	SD	<i>t</i>	<i>df</i>	<i>p</i>
Had appt.	478	5.39	1.65	16.53	1224	<.001
No appt.	748	3.90	1.47			
Can get appointment quickly at CHL						
	N	Mean	SD	<i>t</i>	<i>df</i>	<i>p</i>
Had appt.	478	4.94	1.78	13.33	1222	<.001
No appt.	746	3.73	1.37			
Overall attitude toward the CHL						
	N	Mean	SD	<i>t</i>	<i>df</i>	<i>p</i>
Had appt.	472	5.62	1.60	16.76	1214	<.001
No appt.	744	4.03	1.62			

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).

CHL Attitudes Divided by When Started Working at Purdue

Those who started working at Purdue in the last 3 years generally have more positive perceptions of the Center for Healthy Living than those started working at Purdue before that.

CHL is a great place to seek care						
	N	Mean	SD	t	df	p
2016 or before	893	4.47	1.71	2.00	1128	<.05
2017 or later	217	4.71	1.40			
Easy to make an appointment at CHL						
	N	Mean	SD	t	df	p
2016 or before	893	4.46	1.77	1.75	1128	n.s.
2017 or later	237	4.68	1.45			
Can get appointment quickly at CHL						
	N	Mean	SD	t	df	p
2016 or before	893	4.17	1.72	2.24	1127	<.05
2017 or later	236	4.44	1.42			
Overall attitude toward the CHL						
	N	Mean	SD	t	df	p
2016 or before	888	4.623	1.81	3.24	1120	=.001
2017 or later	234	5.04	1.54			

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=1224)

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

	Live Health Online	Telephonic Coaching
Yes	5.9%	.2%
No	64.0%	68.8%
I am unaware of LHO or Telephonic	30.1%	31.0%

Areas of telephonic coaching utilized (n=3)

	Frequency	Percent
Pharmacy	1	33.3%
Health and Wellness Coaching	2	66.7%

Demographics**Married: (n=1197)**

- Yes = 72.7%
- No = 27.3%

Highest Education: (n=1190)

- Never Graduated High School = .3%
- High School / GED = 20.1%
- 2-year degree = 10.9%
- 4-year degree = 31.5%
- Graduate degree = 37.2%

Employee Group: (n=1184)

- Executive = .7%
- Management = 12.1%
- Professional = 35.6%
- Administrative and Operational Support = 32.1%
- Police, Fire, and Skilled Trades = 2.4%
- Faculty = 10.8%
- Other = 6.4%

Gender: (n=1190)

- Male = 28.6%
- Female = 65.9%
- Transgender = 0.1%
- Other = 0.3%
- Prefer Not to Specify = 5.2%

Ethnicity/Race: (n=1186)

- Caucasian = 84.8%
- African American = 1.5%
- Hispanic = 1.4%
- Asian = 2.0%
- Native American = .3%
- Pacific Islander = .3%
- Other = 1.4%
- Prefer not to answer = 8.3%

Age: (n=1149)

- Mean = 47.99 years
- Range = 20-75

Fort Wayne Campus

Usefulness of HR Tools to Help People with Benefits Enrollment (n=81)

	<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	2.5%	33.8%	55.0%	7.5%	1.3%
Weekly Enrollment Emails	15.0%	51.2%	28.7%	3.8%	1.3%
Healthy Boiler Newsletter	13.8%	46.3%	30.0%	8.8%	1.3%
Home Mailed Benefits Statement	12.3%	33.3%	32.1%	13.6%	8.6%
Purdue Today Articles	21.3%	45.0%	17.5%	10.0%	6.3%
On Campus Presentations	8.9%	16.5%	27.8%	43.0%	3.8%
Online Presentations	10.4%	14.3%	24.7%	44.2%	6.5%
Emailed hr@purdue.edu	10.3%	14.1%	11.5%	53.8%	10.3%
Telephone Assistance	9.0%	7.7%	2.6%	71.8%	9.0%
One-on-One Assistance	7.7%	3.8%	15.4%	64.1%	9.0%
Open Computer Lab	7.6%	6.3%	15.2%	65.8%	5.1%
Benefits Website	8.8%	25.0%	55.0%	11.3%	0.0%
Benefits Ambassador	10.0%	6.3%	6.3%	51.2%	26.3%

Attitudes Surrounding Benefits Information (n=80)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2019 Mean	2018 Mean	2017 Mean
HR Provides me with easy to understand information surrounding benefits offerings	6.3%	5.0%	12.5%	8.8%	26.3%	36.3%	5.0%	4.72	4.74	5.19
I feel knowledgeable about all the benefits Purdue offers	3.8%	5.1%	10.1%	7.6%	35.4%	34.2%	3.8%	4.84	4.87	4.90
I know where to go to find benefits information	6.3%	3.8%	10.1%	2.5%	17.7%	46.8%	12.7%	5.13	5.10	5.26
When I choose my benefits, I feel I know all I need to in order to make the best decision	3.8%	6.3%	8.9%	10.1%	29.1%	34.2%	7.6%	4.87	4.76	5.01
HR could do a better job helping me understand all benefits offerings	5.1%	7.6%	13.9%	25.3%	29.1%	7.6%	11.4%	4.34	4.33	4.04

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

Time Reviewing and Completing 2020 Benefits (n=88)

	Time Reviewing Benefits	Time Completing Benefits
< 15 minutes	3.4%	18.2%
15-30 minutes	19.3%	30.7%
30-45 minutes	29.5%	25.0%
45-60 minutes	17.0%	14.8%
> 60 minutes	30.7%	11.4%

Core Analytics Attitudes (n=88)

	Disagree	Neither Agree or Disagree	Agree	Did Not See/Use
Easy to Use	3.4%	23.9%	40.9%	31.8%
Clear Instructions	8.0%	22.7%	40.9%	28.4%
Info and Costs Displayed were Clear	10.2%	20.5%	40.9%	28.4%

Ease of Enrollment Compared to last year (n=88)

- Easier = 18.2%
- Harder = 12.5%
- Same = 61.4%
- No comparison/not here last year = 8.0%

Did you contact HR about your benefits in the past 12 months? (n=75)

- Yes = 49.3%
- No = 50.7%

How soon question answered after contacting HR (n=37)

2019 Mean = 2.14 days; 2018 Mean = 3.09 days

	Frequency	Percent
Same day	12	32.4%
Next day	8	21.6%
2 days later	8	21.6%
3 days later	4	10.8%
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	5.4%
Never received an answer	3	8.1%

Getting my questions answered from HR was a(n) _____ experience. (n=37)

	Percentage	Frequency
Difficult (1)	10.8%	4
2	16.2%	6
3	2.7%	1
4	16.2%	6
5	8.1%	3
6	16.2%	6
Easy (7)	29.7%	11

Note: Mean = 4.62

Health Benefits Purdue Provides are... (n=87)

Terrible (1)	4.7%	Too Expensive (1)	6.9%	Not Comprehensive (1)	6.0%	Unfair (1)	7.1%
2	3.5%	2	12.6%	2	6.0%	2	2.4%
3	3.5%	3	11.5%	3	8.3%	3	2.4%
4	21.2%	4	19.5%	4	20.2%	4	27.4%
5	38.8%	5	20.7%	5	28.6%	5	28.6%
6	22.4%	6	18.4%	6	20.2%	6	20.2%
Excellent (7)	5.9%	A Great Value (7)	10.3%	Comprehensive (7)	10.7%	Fair (7)	11.9%
2019 Mean:	4.76*		4.31		4.63*		4.76*
2018 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 $p < .001$.

The spousal surcharge policy in effect for the 2020 health plan is... (n=81)

Bad idea (1)	23.5%	Not necessary (1)	26.9%	Wrong (1)	21.5%	Unfair (1)	22.8%
2	7.4%	2	5.1%	2	6.3%	2	6.3%
3	8.6%	3	3.8%	3	8.9%	3	6.3%
4	21.0%	4	23.1%	4	26.6%	4	26.6%
5	12.3%	5	15.4%	5	11.4%	5	11.4%
6	18.5%	6	14.1%	6	15.2%	6	16.5%
Good idea (7)	8.6%	Necessary (7)	11.5%	Right (7)	10.1%	Fair (7)	10.1%
Mean:	3.81		3.83		3.86		3.87

Note. These results are from all Fort Wayne participants.

The spousal surcharge policy in effect for the 2020 health plan is...**Married Participants Only (n=51)**

Bad idea (1)	29.4%	Not necessary (1)	33.3%	Wrong (1)	24.5%	Unfair (1)	28.6%
2	9.8%	2	6.3%	2	6.1%	2	6.1%
3	5.9%	3	2.1%	3	8.2%	3	6.1%
4	23.5%	4	25.0%	4	32.7%	4	30.6%
5	11.8%	5	12.5%	5	12.2%	5	8.2%
6	13.7%	6	14.6%	6	12.2%	6	16.3%
Good idea (7)	5.9%	Necessary (7)	6.3%	Right (7)	4.1%	Fair (7)	4.1%
Mean:	3.43		3.46		3.55		3.49

The spousal surcharge policy in effect for the 2020 health plan is...**Non-Married Participants Only (n=18)**

Bad idea (1)	11.1%	Not necessary (1)	11.1%	Wrong (1)	11.1%	Unfair (1)	11.1%
2	5.6%	2	5.6%	2	5.6%	2	5.6%
3	0.0%	3	0.0%	3	0.0%	3	0.0%
4	5.6%	4	5.6%	4	5.6%	4	5.6%
5	22.2%	5	22.2%	5	16.7%	5	16.7%
6	33.3%	6	22.2%	6	27.8%	6	27.8%
Good idea (7)	22.2%	Necessary (7)	33.3%	Right (7)	33.3%	Fair (7)	33.3%
Mean:	5.11		5.22		5.28		5.28

One-sample *t*-test found these mean values to be significantly above 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=53)

	Frequency	Percent
Yes	43	39.6%
No	50	60.4%

Note. These results are only from married participants.

Spouse and Spousal Surcharge Policy Information

	Spouse works outside Purdue (n=54)		Spouse has access to healthcare coverage at their employer (n=42)		Enrolled spouse in Purdue health benefits for 2020 (n=32)	
	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	42	77.8%	32	76.2%	13	40.6%
No	12	22.2%	10	23.8%	19	59.4%

Note. These results are only from married participants.

Attitudes Toward Personal Health and Purdue Resources (n=79)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2019 Mean	2018 Mean	2017 Mean
Overall I feel as though I am in good health	1.3%	2.5%	5.1%	8.9%	31.6%	43.0%	7.6%	5.27	5.45	5.57
It is easy for me to be and stay “healthy”	3.8%	5.1%	12.8%	16.7%	32.1%	28.2%	1.3%	4.58	4.79	4.96
I feel I could make better choices to be healthy	2.5%	3.8%	3.8%	11.4%	38.0%	27.8%	12.7%	5.13	5.04	5.33
Purdue provides me helpful/useful resources to be and stay healthy	2.5%	6.3%	7.6%	26.6%	26.6%	29.1%	1.3%	4.61	4.67	4.94
Purdue should incentivize us to be and stay healthy	3.8%	1.3%	1.3%	25.6%	19.2%	35.9%	12.8%	5.14	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=75)

2019-2020		2018-2019		2017-2018	
Yes	No	Yes	No	Yes	No
82.7%	17.3%	86.1%	13.9%	80.4%	19.6%

Benefits Ambassadors Program (n=81)

	2019-2020		2018-2019		2017-2018	
	Yes	No	Yes	No	Yes	No
Know about the BA program	10.0%	90.0%	20.2%	79.8%	21.1%	78.9%
Know who their BA is	4.9%	95.1%	10.1%	89.9%	8.4%	91.6%

Demographics**Married: (n=76)**

- Yes = 71.1%
- No = 28.9%

Highest Education: (n=75)

- Never Graduated High School = 0.0%
- High School / GED = 8.0%
- 2-year degree = 8.0%
- 4-year degree = 40.0%
- Graduate degree = 44.0%

Employee Group: (n=75)

- Executive = 1.3%
- Management = 16.0%
- Professional = 32.0%
- Administrative and Operational Support = 37.3%
- Police, Fire, and Skilled Trades = 1.3%
- Faculty = 9.3%
- Other = 2.7%

Gender: (n=75)

- Male = 26.7%
- Female = 70.7%
- Transgender = 0.0%
- Other = 0.0%
- Prefer Not to Specify = 2.7%

Ethnicity/Race: (n=75)

- Caucasian = 86.7%
- African American = 4.0%
- Asian = 1.3%
- Hispanic = 0.0%
- Native American = 0.0%
- Pacific Islander = 0.0%
- Other = 1.3%
- Prefer not to answer = 6.7%

Age: (n=73)

- Mean = 48.71 years
- Range = 26-73

Northwest Campus

Usefulness of HR Tools to Help People with Benefits Enrollment (n=89)

	<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	3.4%	23.6%	52.8%	16.9%	3.4%
Weekly Enrollment Emails	6.8%	35.2%	50.0%	8.0%	0.0%
Healthy Boiler Newsletter	9.0%	41.6%	33.7%	14.6%	1.1%
Home Mailed Benefits Statement	10.2%	17.0%	47.7%	14.8%	10.2%
Purdue Today Articles	8.0%	50.0%	23.9%	15.9%	2.3%
On Campus Presentations	5.7%	10.3%	31.0%	51.7%	1.1%
Online Presentations	3.4%	15.9%	30.7%	44.3%	5.7%
Emailed hr@purdue.edu	3.4%	21.8%	26.4%	46.0%	2.3%
Telephone Assistance	2.3%	11.4%	31.8%	52.3%	2.3%
One-on-One Assistance	2.2%	1.1%	48.3%	47.2%	1.1%
Open Computer Lab	2.2%	3.4%	39.3%	52.8%	2.2%
Benefits Website	3.4%	29.2%	59.6%	7.9%	0.0%

Attitudes Surrounding Benefits Information (n=87)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2019 Mean	2018 Mean	2017 Mean
HR Provides me with easy to understand information surrounding benefits offerings	2.3%	2.3%	6.9%	5.7%	23.0%	43.7%	16.1%	5.40	5.28	5.62
I feel knowledgeable about all the benefits Purdue offers	5.7%	3.4%	5.7%	8.0%	28.7%	32.2%	16.1%	5.11	5.08	5.25
I know where to go to find benefits information	1.1%	3.4%	5.7%	2.3%	18.4%	44.8%	24.1%	5.64	5.58	5.68
When I choose my benefits, I feel I know all I need to in order to make the best decision	8.0%	2.3%	8.0%	6.9%	20.7%	37.9%	16.1%	5.08	4.99	5.28
HR could do a better job helping me understand all benefits offerings	12.9%	21.2%	8.2%	25.9%	20.0%	8.2%	3.5%	3.58	3.66	3.74

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

Time Reviewing and Completing 2020 Benefits (n=92)

	Time Reviewing Benefits	Time Completing Benefits
< 15 minutes	10.9%	15.2%
15-30 minutes	17.4%	31.5%
30-45 minutes	23.9%	27.2%
45-60 minutes	22.8%	18.5%
> 60 minutes	25.0%	7.6%

Core Analytics Attitudes (n=92)

	Disagree	Neither Agree or Disagree	Agree	Did Not Use/See
Easy to Use	3.3%	18.5%	51.1%	27.2%
Clear Instructions	8.7%	18.5%	47.8%	25.0%
Info and Costs Displayed were Clear	4.3%	17.4%	53.3%	25.0%

Ease of Enrollment Compared to last year (n=92)

- Easier = 19.6%
- Harder = 6.5%
- Same = 58.7%
- No comparison/not here last year = 15.2%

Have you ever contacted HR about your benefits? (n=83)

- Yes = 60.2%
- No = 39.8%

How soon question answered after contacting HR (n=49)
2019 Mean = .59 days; (2018 Mean = 2.06 days)

	Frequency	Percent
Same day	30	61.2%
Next day	16	32.7%
2 days later	2	4.1%
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	0	0.0%
Never received an answer	1	2.0%

Getting my questions answered from HR was a(n) _____ experience. (n=49)

	Percentage	Frequency
Difficult (1)	2.0%	1
2	0.0%	0
3	4.1%	2
4	2.0%	1
5	2.0%	1
6	24.5%	12
Easy (7)	65.3%	32

Note: Mean = 6.37. 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=90)

Terrible (1)	2.2%	Too Expensive (1)	6.7%	Not Comprehensive (1)	2.2%	Unfair (1)	5.6%
2	6.7%	2	13.3%	2	6.7%	2	7.8%
3	9.0%	3	11.1%	3	6.7%	3	6.7%
4	27.0%	4	28.9%	4	30.3%	4	30.0%
5	16.9%	5	11.1%	5	20.2%	5	16.7%
6	23.6%	6	17.8%	6	20.2%	6	16.7%
Excellent (7)	14.6%	A Great Value (7)	11.1%	Comprehensive (7)	13.5%	Fair (7)	16.7%
2019 Mean:	4.79*		4.22		4.74*		4.61*
2018 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 $p < .001$.

The spousal surcharge policy in effect for the 2020 health plan is... (n=82)

Bad idea (1)	28.0%	Not necessary (1)	25.9%	Wrong (1)	24.7%	Unfair (1)	25.6%
2	8.5%	2	3.7%	2	6.2%	2	8.5%
3	6.1%	3	7.4%	3	7.4%	3	4.9%
4	29.3%	4	28.4%	4	35.8%	4	31.7%
5	11.0%	5	16.0%	5	9.9%	5	8.5%
6	8.5%	6	7.4%	6	7.4%	6	8.5%
Good idea (7)	8.5%	Necessary (7)	11.1%	Right (7)	8.6%	Fair (7)	12.2%
Mean:	*3.46		3.72		3.57*		3.63

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 $p < .05$.

The spousal surcharge policy in effect for the 2020 health plan is...

Married Participants Only (n=52)

Bad idea (1)	32.7%	Not necessary (1)	29.4%	Wrong (1)	27.5%	Unfair (1)	26.9%
2	9.6%	2	3.9%	2	7.8%	2	9.6%
3	9.6%	3	11.8%	3	11.8%	3	7.7%
4	25.0%	4	25.5%	4	33.3%	4	32.7%
5	11.5%	5	15.7%	5	5.9%	5	7.7%
6	7.7%	6	7.8%	6	7.8%	6	5.8%
Good idea (7)	3.8%	Necessary (7)	5.9%	Right (7)	5.9%	Fair (7)	9.6%
Mean:	3.12		3.41		3.29		3.40

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

The spousal surcharge policy in effect for the 2020 health plan is...

Non-Married Participants Only (n=25)

Bad idea (1)	24.0%	Not necessary (1)	24.0%	Wrong (1)	20.0%	Unfair (1)	20.0%
2	4.0%	2	0.0%	2	0.0%	2	4.0%
3	0.0%	3	0.0%	3	0.0%	3	0.0%
4	36.0%	4	32.0%	4	44.0%	4	32.0%
5	12.0%	5	20.0%	5	16.0%	5	12.0%
6	12.0%	6	8.0%	6	8.0%	6	16.0%
Good idea (7)	12.0%	Necessary (7)	16.0%	Right (7)	12.0%	Fair (7)	16.0%
Mean:	3.92		4.12		4.08		4.24

Possible changes to the current spousal health insurance policy would affect me and my family in a negative way. (n=54)

	Frequency	Percent
Yes	41	38.9%
No	35	61.1%

Note. These results are only from married participants.

Spouse and Spousal Surcharge Policy Information

	Spouse works outside Purdue (n=55)		Spouse has access to healthcare coverage at their employer (n=44)		Enrolled spouse in Purdue health benefits for 2020 (n=33)	
	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	42	77.8%	32	76.2%	13	40.6%
No	12	22.2%	10	23.8%	19	59.4%

Note. These results are only from married participants.

Attitudes Toward Personal Health and Purdue Resources (n=85)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2019 Mean	2018 Mean	2017 Mean
Overall I feel as though I am in good health	1.2%	2.4%	8.2%	8.2%	25.9%	40.0%	14.1%	5.32	5.47	5.38
It is easy for me to be and stay “healthy”	3.5%	5.9%	10.6%	8.2%	38.8%	24.7%	8.2%	4.80	4.93	4.74
I feel I could make better choices to be healthy	1.2%	8.2%	2.4%	10.6%	34.1%	29.4%	14.1%	5.13	5.20	5.30
Purdue provides me helpful/useful resources to be and stay healthy	2.4%	5.9%	5.9%	24.7%	21.2%	35.3%	4.7%	4.81	5.07	5.09
Purdue should incentivize us to be and stay healthy	2.4%	3.5%	8.2%	17.6%	23.5%	25.9%	18.8%	5.09	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=85)

2019-2020		2018-2019		2017-2018	
Yes	No	Yes	No	Yes	No
84.7%	15.3%	84.4%	15.6%	88.0%	12.0%

Demographics

Married: (n=85)

- Yes = 64.7%
- No = 35.3%

Highest Education: (n=84)

- Never Graduated High School = 0.0%
- High School / GED = 14.3%
- 2-year degree = 10.7%
- 4-year degree = 22.6%
- Graduate degree = 52.4%

Employee Group: (n=83)

- Executive = 1.2%
- Management = 16.9%
- Professional = 26.5%
- Administrative and Operational Support = 30.1%
- Police, Fire, and Skilled Trades = 1.2%
- Faculty = 19.3%
- Other = 4.8%

Gender: (n=84)

- Male = 33.3%
- Female = 63.1%
- Transgender = 0.0%
- Other = 0.0%
- Prefer Not to Specify = 3.6%

Ethnicity/Race: (n=83)

- Caucasian = 72.3%
- African American = 1.2%
- Hispanic = 10.8%
- Asian = 3.6%
- Native American = 0.0%
- Pacific Islander = 0.0%
- Other = 2.4%
- Prefer not to answer = 9.6%

Age: (n=81)

- Mean = 49.15 years
- Range = 24-82

Extension / Other Campuses

Usefulness of HR Tools to Help People with Benefits Enrollment (n=66)

	<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	6.2%	38.5%	47.7%	6.2%	1.5%
Weekly Enrollment Emails	12.1%	37.9%	43.9%	6.1%	0.0%
Healthy Boiler Newsletter	12.3%	53.8%	26.2%	4.6%	3.1%
Home Mailed Benefits Statement	9.2%	27.7%	36.9%	20.0%	6.2%
Purdue Today Articles	13.6%	48.5%	31.8%	6.1%	0.0%
On Campus Presentations	25.0%	0.0%	4.7%	65.6%	4.7%
Online Presentations	10.8%	20.0%	15.4%	41.5%	12.3%
Emailed hr@purdue.edu	3.0%	16.7%	18.2%	57.6%	4.5%
Telephone Assistance	7.6%	10.6%	12.1%	65.2%	4.5%
One-on-One Assistance	6.1%	9.1%	9.1%	72.7%	3.0%
Open Computer Lab	12.1%	3.0%	3.0%	74.2%	7.6%
Benefits Website	4.5%	36.4%	53.0%	3.0%	3.0%
Benefits Ambassador	10.6%	6.1%	4.5%	51.5%	27.3%

Attitudes Surrounding Benefits Information (n=66)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2019 Mean	2018 Mean	2017 Mean
HR Provides me with easy to understand information surrounding benefits offerings	1.5%	6.1%	6.1%	6.1%	30.3%	40.9%	9.1%	5.17	5.47	5.34
I feel knowledgeable about all the benefits Purdue offers	3.0%	3.0%	10.6%	4.5%	37.9%	36.4%	4.5%	4.98	5.10	4.89
I know where to go to find benefits information	3.0%	4.5%	3.0%	9.1%	21.2%	43.9%	15.2%	5.33	5.36	5.35
When I choose my benefits, I feel I know all I need to in order to make the best decision	4.5%	9.1%	7.6%	3.0%	28.8%	42.4%	4.5%	4.88	4.97	4.99
HR could do a better job helping me understand all benefits offerings	0.0%	16.7%	12.1%	30.3%	22.7%	9.1%	9.1%	4.23	4.31	4.21

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

Time Reviewing and Completing 2020 Benefits (n=69)

	Time Reviewing Benefits	Time Completing Benefits
< 15 minutes	7.2%	11.6%
15-30 minutes	15.9%	26.1%
30-45 minutes	18.8%	39.1%
45-60 minutes	23.2%	11.6%
> 60 minutes	34.8%	11.6%

Core Analytics Attitudes (n=69)

	Disagree	Neither Agree or Disagree	Agree	Did Not Use/See
Easy to Use	5.8%	26.1%	43.5%	24.6%
Clear Instructions	10.1%	15.9%	55.1%	18.8%
Info and Costs Displayed were Clear	5.8%	15.9%	59.4%	18.8%

Ease of Enrollment Compared to last year (n=69)

- Easier = 26.1%
- Harder = 17.4%
- Same = 44.9%
- No comparison/not here last year = 11.6%

Have you ever contacted HR about your benefits? (n=65)

- Yes = 40.0%
- No = 60.0%

How soon question answered after contacting HR (n=26)
2019 Mean = 2.65 days; (2018 Mean = 3.27 days)

	Frequency	Percent
Same day	5	19.2%
Next day	7	26.9%
2 days later	4	15.4%
3 days later	2	7.7%
4 days later	2	7.7%
5 days later	2	7.7%
6 days later	0	0.0%
7 days later	2	7.7%
Longer than 7 days	2	7.7%
Never received an answer	0	0.0%

Getting my questions answered from HR was a(n) _____ experience. (n=26)

	Percentage	Frequency
Difficult (1)	0.0%	0
2	15.4%	4
3	0.0%	0
4	7.7%	2
5	26.9%	7
6	23.1%	6
Easy (7)	26.9%	7

Note: Mean = 5.23. 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=67)

Terrible (1)	3.1%	Too Expensive (1)	6.0%	Not Comprehensive (1)	1.5%	Unfair (1)	3.0%
2	0.0%	2	9.0%	2	1.5%	2	4.5%
3	9.2%	3	10.4%	3	12.3%	3	7.6%
4	15.4%	4	22.4%	4	9.2%	4	10.6%
5	23.1%	5	19.4%	5	26.2%	5	28.8%
6	32.3%	6	14.9%	6	30.8%	6	15.2%
Excellent (7)	16.9%	A Great Value (7)	17.9%	Comprehensive (7)	18.5%	Fair (7)	30.3%
2019 Mean:	5.20		4.57		5.23		5.24
2018 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 $p<.01$.

The spousal surcharge policy in effect for the 2020 health plan is... (n=64)

Bad idea (1)	22.6%	Not necessary (1)	18.8%	Wrong (1)	17.7%	Unfair (1)	17.2%
2	6.5%	2	7.8%	2	6.5%	2	4.7%
3	4.8%	3	4.7%	3	4.8%	3	3.1%
4	29.0%	4	26.6%	4	38.7%	4	34.4%
5	16.1%	5	12.5%	5	16.1%	5	14.1%
6	11.3%	6	17.2%	6	8.1%	6	12.5%
Good idea (7)	9.7%	Necessary (7)	12.5%	Right (7)	8.1%	Fair (7)	14.1%
Mean:	3.82		4.08		3.85		4.17

Note. These results are from all extension/other participants.

The spousal surcharge policy in effect for the 2020 health plan is...**Married Participants Only (n=45)**

Bad idea (1)	30.2%	Not necessary (1)	22.7%	Wrong (1)	23.3%	Unfair (1)	22.2%
2	9.3%	2	11.4%	2	9.3%	2	6.7%
3	4.7%	3	6.8%	3	7.0%	3	4.4%
4	20.9%	4	18.2%	4	25.6%	4	22.2%
5	14.0%	5	11.4%	5	14.0%	5	11.1%
6	11.6%	6	18.2%	6	11.6%	6	15.6%
Good idea (7)	9.3%	Necessary (7)	11.4%	Right (7)	9.3%	Fair (7)	17.8%
Mean:	3.51		3.84		3.70		4.11

The spousal surcharge policy in effect for the 2020 health plan is...**Non-Married Participants Only (n=16)**

Bad idea (1)	6.7%	Not necessary (1)	12.5%	Wrong (1)	6.7%	Unfair (1)	6.7%
2	0.0%	2	0.0%	2	0.0%	2	0.0%
3	6.7%	3	0.0%	3	0.0%	3	0.0%
4	46.7%	4	43.8%	4	66.7%	4	60.0%
5	26.7%	5	18.8%	5	20.0%	5	26.7%
6	6.7%	6	18.8%	6	0.0%	6	0.0%
Good idea (7)	6.7%	Necessary (7)	6.3%	Right (7)	6.7%	Fair (7)	6.7%
Mean:	4.33		4.38		4.20		4.27

Possible changes to the current spousal health insurance policy would affect me and my family in a negative way. (n=47)

	Frequency	Percent
Yes	16	34.0%
No	31	66.0%

Note. These results are only from married participants.

Spouse and Spousal Surcharge Policy Information

	Spouse works outside Purdue (n=47)		Spouse has access to healthcare coverage at their employer (n=36)		Enrolled spouse in Purdue health benefits for 2020 (n=22)	
	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	36	76.6%	22	61.1%	9	40.9%
No	11	23.4%	14	38.9%	13	59.1%

Note. These results are only from married participants.

Attitudes Toward Personal Health and Purdue Resources (n=66)

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree	2019 Mean	2018 Mean	2017 Mean
Overall I feel as though I am in good health	0.0%	1.5%	4.5%	1.5%	28.8%	47.0%	16.7%	5.65	5.75	5.70
It is easy for me to be and stay “healthy”	3.0%	7.6%	4.5%	6.1%	33.3%	33.3%	12.1%	5.08	5.16	5.03
I feel I could make better choices to be healthy	0.0%	6.1%	4.5%	6.1%	40.9%	30.3%	12.1%	5.21	5.19	5.36
Purdue provides me helpful/useful resources to be and stay healthy	3.1%	10.8%	10.8%	16.9%	30.8%	23.1%	4.6%	4.49	4.50	4.58
Purdue should incentivize us to be and stay healthy	1.5%	6.1%	0.0%	18.2%	15.2%	30.3%	28.8%	5.45	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=65)

2019-2020		2018-2019		2017-2018	
Yes	No	Yes	No	Yes	No
86.2%	13.8%	91.7%	8.3%	84.4%	15.6%

Benefits Ambassadors Program (n=66)

	2019-2020		2018-2019		2017-2018	
	Yes	No	Yes	No	Yes	No
Know about the BA program	27.3%	72.7%	20.4%	79.6%	19.6%	80.4%
Know who their BA is	7.6%	92.4%	8.2%	91.8%	9.0%	91.0%

Demographics

Married: (n=65)

- Yes = 72.3%
- No = 27.7%

Highest Education: (n=65)

- Never Graduated High School = 0.0%
- High School / GED = 9.2%
- 2-year degree = 6.2%
- 4-year degree = 16.9%
- Graduate degree = 67.7%

Employee Group: (n=65)

- Executive = 0.0%
- Management = 4.6%
- Professional = 53.8%
- Administrative and Operational Support = 13.8%
- Police, Fire, and Skilled Trades = 0.0%
- Faculty = 12.3%
- Other = 15.4%

Gender: (n=65)

- Male = 18.5%
- Female = 78.5%
- Transgender = 0.0%
- Other = 0.0%
- Prefer Not to Specify = 3.1%

Ethnicity/Race: (n=64)

- Caucasian = 92.2%
- African American = 1.6%
- Asian = 1.6%
- Hispanic = 0.0%
- Native American = 0.0%
- Pacific Islander = 0.0%
- Other = 0.0%
- Prefer not to answer = 4.7%

Age: (n=63)

- Mean = 45.21 years
- Range = 23-76

All Campus Results

Knowledge of Common Primary Care Providers (n=1435)

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). The results from the current survey suggest employees had a greater level of knowledge about the tasks NPs and PAs can complete this year compared to two years ago, but a similar level of knowledge about these tasks compared to last year.

		2019-2020			2018-2019			2017-2018		
		Physician	Physician Assistant	Nurse Practitioner	Physician	Physician Assistant	Nurse Practitioner	Physician	Physician Assistant	Nurse Practitioner
Can write prescriptions for meds	True	1407 (98.0%)	793 (55.5%)	1087 (76.0%)	1439 (98.4%)	822 (56.5%)	1090 (75.1%)	2550 (99.0%)	1301 (50.8%)	1858 (72.5%)
	False	1 (0.1%)	281 (19.7%)	125 (8.7%)	3 (0.2%)	250 (17.2%)	148 (10.2%)	3 (0.1%)	606 (23.7%)	297 (11.6%)
	Unsure	27 (1.9%)	356 (24.9%)	219 (15.3%)	21 (1.4%)	383 (26.3%)	214 (14.7%)	22 (0.9%)	652 (25.5%)	409 (16.1%)
Can diagnose illnesses	True	1403 (97.9%)	819 (57.4%)	1103 (77.2%)	1431 (97.9%)	849 (58.4%)	1102 (75.8%)	2533 (98.5%)	1300 (50.8%)	1803 (70.2%)
	False	0 (0.0%)	263 (18.4%)	107 (7.5%)	2 (0.1%)	243 (16.7%)	145 (10.0%)	6 (.2%)	604 (23.6%)	325 (12.7%)
	Unsure	30 (2.1%)	344 (24.1%)	218 (15.3%)	29 (2.0%)	361 (24.8%)	207 (14.2%)	33 (1.3%)	653 (25.5%)	439 (17.1%)
Can order lab tests	True	1405 (98.1%)	942 (65.9%)	1177 (82.3%)	1438 (98.5%)	969 (66.7%)	1184 (76.2%)	2543 (98.9%)	1634 (63.8%)	2009 (78.4%)
	False	0 (0.0%)	157 (11.0%)	49 (3.4%)	0 (0.0%)	134 (9.2%)	71 (4.6%)	2 (0.1%)	325 (12.7%)	140 (5.5%)
	Unsure	27 (1.9%)	331 (23.1%)	204 (14.3%)	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 with savings goals for retirement. Employees indicated their level of confidence on a scale from 1 = extremely confident to 4 = not very confident. Participants were also asked to indicate how much of their salary is recommended to save each month for retirement, and how much of a safety net is recommended to save for unexpected expenses. One final item asked participants to indicate which financial topics they would be interested in learning about.

How confident are you with your savings goals for retirement? (n=1422)

Mean = 2.71

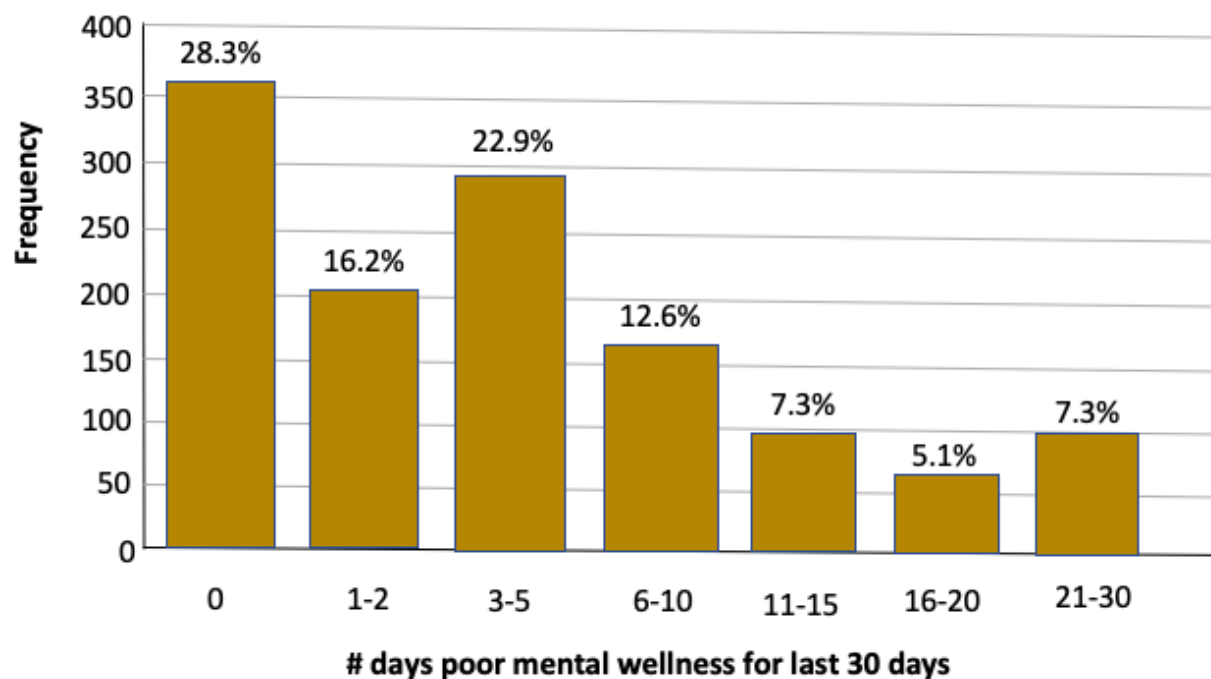
	Percentage	Frequency
Extremely confident	15.7%	223
Pretty confident	25.6%	364
Somewhat confident	30.9%	440
Not very confident	27.8%	395

	Recommended % of salary to save each month for retirement (n=1350)	Recommended financial safety net should save (months of savings) (n=1338)
Mean	17.7%	5.8 months
Median	15.0%	6.0 months
<u>Recommended</u>	15% or more	3-6 months

Interest in Financial Topics

Topic	Frequency
Automatic voluntary retirement savings increase feature	533
HSA investing	522
Identity theft/Fraud protection	421
Emergency savings/Creating financial safety net	405
Budgeting/Debt management	396
Elder care	345
Student loan debt	260
College financial planning	224
Charitable giving/Volunteer platform	172
Other	64

Mental Wellness Perceptions (n=1261)



2018/2019 Comparison

	Had poor mental wellness 15+ of last 30 days	Had poor mental wellness 5+ of last 30 days	Mean # days	Median # days
2018	15%	40%	5.81	3
2019	18.7%	43.1%	6.42	3

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 6.42 days (median = 3 days). 18.7% of employees indicated that they experienced poor mental wellness on 15 or more of the last 30 days. Around 43% indicated they had poor mental wellness on 5 or more of the past 30 days. Participants indicated they experienced poor mental wellness more frequently compared to last year.

Feeling Cared For at Work (n=1419)

Participants were asked to indicate the degree to which they believe their boss cares about them as a person, and the degree to which they believe someone at work cares about them as a person on a scale from 1 = strongly disagree to 7 = strongly agree. Overall participants believe there are people at work who care about them.

My boss cares about me as a person		Someone at work cares about me as a person	
Strongly disagree (1)	4.7%	Strongly disagree (1)	1.4%
Disagree (2)	4.7%	Disagree (2)	1.8%
Somewhat disagree (3)	5.1%	Somewhat disagree (3)	1.1%
Neither agree nor disagree (4)	8.5%	Neither agree nor disagree (4)	5.0%
Somewhat agree (5)	14.7%	Somewhat agree (5)	12.5%
Agree (6)	31.0%	Agree (6)	36.1%
Strongly agree (7)	31.3%	Strongly agree (7)	42.1%
Mean	5.42	Mean	6.02

Awareness/Utilization of Mental Wellness Resources (n=1411)

Though many participants indicated that they commonly experience poor mental wellness, when participants were asked which Purdue mental wellness resources they were aware of and utilized, many participants were not aware of and/or were not utilizing these resources offered by Purdue.

Mental Wellness Resource	Aware of Resource		Have Utilized Resource	
	Yes	No	Yes	No
Employee Assistance Program	67.5%	32.5%	13.9%	86.1%
LiveHealth Online Psychology & Psychiatry	26.4%	73.6%	1.0%	99.0%
myStrength by Anthem	14.3%	85.7%	2.3%	97.7%
Purdue Psychology Treatment and Research Clinics*	29.2%	70.8%	2.1%	97.9%

* This question was only asked of West Lafayette employees.

Purdue Benefits Changes Consideration (n=1566)

Participants were asked to select their perceptions of the importance of benefits by choosing between two options for three pairs of items regarding potential benefits changes. Most participants preferred comprehensive coverage over low premiums and optimizing current benefits over adding new benefits, but participants were split regarding preferences for adding/increasing selective surcharges and having the same increases for everyone.

Low Premiums	35.7%	vs.	Comprehensive Coverage	64.3%
Adding/Increasing Selective Surcharges	51.4%	vs.	Same Increases for Everyone	48.6%
Adding New Benefits	15.0%	vs.	Optimizing Current Benefits	85.0%

Attitudes Toward Purdue Health Benefits- Separated by When Started at Purdue

Because Purdue started making significant changes to employee benefits in 2017, we analyzed employee benefits perceptions among employees who started working at Purdue recently (2017 or later) versus perceptions among employees who started working at Purdue earlier (2016 or before). Employees who started working at Purdue more recently have more positive perceptions of benefits than employees who started working at Purdue before 2017.

I feel that the health benefits that Purdue currently provides are...						
1 = Terrible to 7 = Excellent						
	N	Mean	SD	t	df	p
2016 or Before	1003	4.57	1.50	3.60	1294	< .001
2017 or Later	293	4.93	1.54			
1 = Too Expensive to 7 = A Great Value						
	N	Mean	SD	t	df	p
2016 or Before	1019	3.95	1.69	4.98	1314	< .001
2017 or Later	297	4.51	1.78			
1 = Not Comprehensive to 7 = Comprehensive						
	N	Mean	SD	t	df	p
2016 or Before	1003	4.51	1.63	2.37	1291	< .05
2017 or Later	290	4.77	1.71			
1 = Unfair to 7 = Fair						
	N	Mean	SD	t	df	p
2016 or Before	1003	4.50	1.64	3.46	1291	= .001
2017 or Later	290	4.88	1.63			

Comments About Open Enrollment (n=565)

Over one-third of employees who completed the survey provided comments regarding their experience with 2019-2020 benefits open enrollment. Common themes from the responses are listed below.

Length of open enrollment period. Many employees mentioned they wanted more time to enroll, while some employees indicated they appreciated the extra time provided for open enrollment this year. For instance, “Need a longer time to complete enrollment;” and “I am glad that the university expanded the enrollment period, but I think it could be further expanded.”

Examples of other comments included:

- “I know additional time was provided this year however I feel a solid month with open enrollment would be nice.”
- “Increase the enrollment time to align with other family members, so the family can decide on the insurance options available from several employers.”
- “I really appreciated the extra time to review benefits!!! That gave my family piece of mind to know we had time to look into our choices and make decisions we are comfortable with and confident in. THANK YOU!”
- “Perhaps allow longer window to enroll.”
- “Please continue to offer additional time to complete the benefits process. The open enrollment dates fall during a very busy time period in many cases for Purdue staff.”
- “The enrollment window is way too small. When coordinating with a spouse's enrollment outside of Purdue, there are many issues when the windows do not overlap.”

Issues with benefits enrollment process. Some employees struggled with the benefits enrollment process, commenting on issues such as having trouble uploading documentation, not receiving a confirmation that the process was complete, or dealing with glitches in the system. For example, “The system crashed multiple times when I tried to login;” “For the employed spouse form it would be nice to be able to mail in via US Mail. The process of online upload is difficult;” and “It seemed like the submission of this year's enrollment options wasn't terribly clear. When I make my selections, I didn't receive a confirmation email (even to my spam/junk) and it wasn't overtly clear that I was done with everything.” Other responses are as follows:

- “Adding required documents process is badly broken. Uploaded documents often do not show up by default resulting in repeated uploads and duplicates. Uploaded documents do not link automatically to the request for the document. The whole verification - document upload area needs work.”
- “If we were to receive an email confirmation we successfully enrolled, I did not receive it. But I have checked my Benefits for 2020 and it appears I'm good to go. Just thought I should have received some sort of confirmation other than looking at my benefits page.”
- “The enrollment process was so cumbersome this year. It took me hours, literally, to complete my enrollment because the website was so ridiculously slow.”
- “The system didn't work well. There would be times when I would submit my changes, and then would have to re-submit them several times because they wouldn't save. It also took a long time to actually log into the system, and sometimes I'd had to refresh the page or close it and go back in because it would freeze.”
- “There was some malfunction in the system that occurred that impacted quite a number of employees that completed their enrollment early. Whatever you can do to do more robust scenario testing that can prevent this would be helpful as it resulted in a huge number of us showing up to the HR office late in the process to seek one-on-one help to resolve the issue. This does not reinforce early completion behavior.”
- “This year there was a glitch for those of us who enrolled early during open enrollment and we had to re-enroll. I almost missed the emails to re-enroll. Please prevent this from happening again!”
- “When I tried to use the website to open enroll, it was hard to even get into the system. Once in, the system kept crashing or kicking me out while I was in the middle of filling out my choices. I was NOT able to complete the process.”

Desired more responsive customer service. Another common theme was participants mentioning that they had trouble getting a hold of representatives from human resources and/or experienced slow response times when contacting human resources during the open enrollment period. For example, “Please improve response times;” and “The HR department is very slow to respond to people - I personally did not need to contact them, but I have heard from more than one person that the response time took more than three weeks.” Other comments reflective of this theme include:

- “I called HR, waited a long time, and finally left a message. I never heard back. I've been at the University more than 30 years and think that this has been the most difficult open enrollment.”
- “I contacted HR with some questions via email and it took too long to get an answer. It would be helpful for a quicker response time.”
- “I had to make a change in my benefits due to a life change. I emailed HR and didn't get a response. I emailed a week later, no response. I finally got a name to email and she did get back with me. She sent an email to someone else to let them know I needed help. No response. I had to email again to the name I was given. Finally someone got back with me. This was a time sensitive matter. It made me feel like HR didn't really care about what I needed. It was frustrating to say the least. When I mentioned this to another person, they said they had the same issues.”
- “Not at all pleased with HR response (a lack thereof) to specific benefits issues. Call backs are not timely or do not occur at all.”

- “Purdue FW HR is virtually useless. 99% of the time their immediate response is, "I don't know" or "Call West Lafayette". Perhaps a centralized HR Benefits office would be best since I'm not sure what our local reps do. They appear to be ignorant to most basic policy questions.”
- “Purdue HR department is EXTREMELY difficult to reach if you have a question. You can send an email, but will not receive a response for at least one week. Same with phone calls. I left a voicemail and did not receive a call back for almost two weeks. By then, I had the problem resolved myself. Not sure if they need additional help in HR? But they are very slow in customer service.”

Concerns with spousal surcharge policy. Many employees were upset about the spousal surcharge policy, feeling that the policy was unfair. Sample comments representing this theme included: “Please keep spousal coverage!! The premium is fair compared to what my husband would have to pay his employer for their coverage;” and “Please reconsider charging employees the spousal fee.” Other thoughts represented in this category are as follows:

- “Due to the change in spousal coverage, my family opted out of Purdue coverage this year. This has dramatically impacted my family.”
- “I really hate to see spousal premiums. It doesn't impact me because for the last several years I haven't signed up for medical insurance through Purdue. My husband's benefits are better and less expensive through his employer. For the people who rely on Purdue medical plans and are in low-paying positions, I worry about the continued rising costs of premiums, and adding a spousal premium makes it that much worse. I don't have a solution. I'm certainly not an expert on this, or what other options might be. I'm not judging... it's just something I was disappointed to see happen.”
- “I was very disappointed Purdue took the route to incorporate spousal premium on top of the family premium. Purdue was a place that employees used to come for the benefits but that is slowly being picked away.”
- “My husband passed away last December so the spousal coverage did not personally affect me this year but it was a huge step backward for the University. I realize time was given to make arrangements but in my opinion, the wrong move was made and it speaks loudly to your employees.”
- “The spousal surcharge does not take into account the premiums and deductibles of a spousal employer coverage. The penalty is still more economical than my spouse going on his small business coverage. It is demoralizing to hear 'no premium increases' when in reality my premium has increased \$1,500. All the while my premiums are in the top tier while my earnings are at the bottom edge of that top tier.”
- “Wording related to the spousal policy and identification of status was very unclear.”

Positive experience with open enrollment. Some participants indicated that the enrollment process was very smooth, that they appreciated all that the benefits team did to clearly communicate information, and/or that the benefits process is getting smoother over time. For instance, “Went pretty smoothly for me this year;” “It has evolved to be fairly simple and

clear, and I appreciate the reminders;” and “Thank you for continuing to try and improve and make the process as easy as possible. It's appreciated!”

- “I believe this was the smoothest benefits enrollment year in my 11 years with Purdue.”
- “It is a very easy process and user-friendly, which is awesome! Keep up the great work!”
- “Overall, I found the process easy to navigate. Coming from outside the university, I find Purdue benefits to be both generous and fair.”
- “Thank you for making the 2020 enrollment process more user friendly.”
- “Thank you for providing such low-cost, comprehensive coverage and for trying to give employees a range of ways to get the info we need about our coverage.”
- “Thank you for sending the benefits information well before open enrollment began.”

Preferred paper over electronic enrollment information. Some participants indicated that they missed receiving paper/hard copy information about open enrollment or that they did not like completing the enrollment process online. Sample comments included: “The paper packet should be restored;” and “I believe you assume people understand how to do this electronically when to most it is very confusing trying navigate the enrollment process.” Other similar responses included:

- “Give employees a choice if they want to receive paper benefits information instead of it being all online.”
- “I prefer the paper copy of my enrollment guide. I felt the process on the computer was more confusing this year than in the past. It took me a long time to figure out what to do since I was used to the past.”
- “I would still like to have a printout booklet containing changes, premium and comparison of different plans and other information, which was in electronic version this year but there was a booklet in the mail in past years.”
- “Never received a hard copy packet this year. Even if they are sent interoffice to save mailing costs, these are always helpful.”
- “When I am enrolling, however, I just want a single, document or manual that details the coverage options in ONE place (preferably in pdf or print form). It seems that we used to receive such a document. But the past few years, the information is only on the benefits website--it's disjointed and accessible only through a billion links. This is really hard to process when you are walking through the enrollment online--it leads to WAAAAAY too many tabs on my browser. I'd prefer to have a pdf or hard copy of my options so that I have a single source of info to have open on my desk when I'm enrolling online. It's also easier to communicate to my spouse when I have a single document to review with him.”

Concerns regarding Benefits Ambassadors. Though Purdue human resources is not actively promoting the benefits ambassadors program this year, participants mentioned that they

wanted more information about or from benefits ambassadors, or were benefits ambassadors themselves and felt they did not have enough information. Sample comments were as follows:

“Benefits Ambassadors did not receive training this year prior to enrollment;” and “How do we find out who is my benefits ambassador?” Other comments regarding the Benefits Ambassadors program were:

- “I feel the benefits ambassador should do more around the time of open enrollment and should be well informed. The person we had didn't really know a lot about the benefits so wasn't real helpful. Not real sure what the qualifications are for that but you might want to consider either more training or making more people aware of this.”
- “I moved to a new position, so I do not know who my benefits ambassador is. I knew the previous one.”
- “I think it would be beneficial to have a Benefits Ambassador that is a member of CSSAC/APSAC to help facilitate the program.”
- “I think that benefits ambassadors should have mandatory presentations with all employees every year (unless nothing is changing in the year). Providing access to the information is not enough. We need time carved out for all employees to attend a yearly information session about benefits. They change each year. We all need to know about the changes to make sure we don't miss anything. Also, it would provide valuable insight as you hear concerns from all the staff that aren't inclined (or unable to make time or be allowed time) to attend the sessions.”
- “I'm supposed to be trained as a benefits ambassador, but no one in HR has been able to help. They said they were "re-thinking the training", in the mean time, our department doesn't have a benefits ambassador.”
- “If there is a Benefits Ambassador for each area, they need to do a better job of communicating who they are and what their role is. Similar to the APSAC and CSSAC representatives: they are rarely if ever heard from except to occasionally send out an email.”
- “The benefits ambassador program seems completely ineffective this year. We had one in our department but that person kept reporting that they received no trainings and received no info to share. It seems like this program declined from the first year it existed.”

Best Things About Purdue Benefits (n=1165)

Just under three-fourths 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 that they liked, including the comprehensive nature of coverage, the Center for Healthy Living, the affordability of plans, and the coverage for preventive care.

Comprehensive healthcare coverage. Employees appreciate the extent of their healthcare coverage in general. Sample comments included: “Benefits are comprehensive and widely accepted in a good network of care;” and “Comprehensive benefits with multiple options and price points for people with different needs.” Additional comments representing this theme were:

- “I feel that Purdue is very competitive/comprehensive in their overall benefits package. And am grateful for how they do take care of their employees overall.”
- “In general, the coverage is fairly comprehensive. I prefer Purdue's plan over past plans I have had access to.”
- “Our family of six enjoys that the coverage provided is so comprehensive. We have myriad health issues pop up throughout the year - especially with young children - and it is nice to have everything covered.”
- “Overall I appreciate the level of coverage that Purdue offers. I typically do not feel scared that my specific health needs, tests, or procedures won’t be covered. I also appreciate that when I find a doctor I would like to work with, they are almost always in network.”
- “Purdue has comprehensive and affordable medical coverage that has been a great help with several major health issues in our family.”
- “The coverage for such a great price especially for younger families.”

Center for Healthy Living. Many participants stated that they appreciate having convenient access to care with the CHL. They frequently stated it is affordable and offers useful services. Exemplar comments included: “Center for Healthy Living is great, and many of the services offered there are really good and important;” and “I love the Center for Healthy Living and having access to the Purdue Pharmacy. I would love to see more services at CHL and weekend hours.” Other comments were as follows:

- “CHL and the ability to keep medical expenses more on a minimum rather than having to go to IU or Franciscan where there are all sorts of "other" charges and the charges aren't low charges either.”
- “I like that the Purdue health plans make it so easy to use the Center for Healthy Living. I'm happy with the care I've received there.”
- “I personally like that I can go to the CHL for most things at a reasonable cost.”
- “I really appreciate the easy access to the Center for Healthy Living. This year I have utilized specific benefits I haven't needed in the past such as FMLA and counseling at Center for Healthy Living. Both have been very beneficial.”
- “I really like the Center for Healthy Living! I like the doctor and Nurse Practitioners, they are very personable and have easily taken care of any issues that my family has had to be seen for. I like that they have same day sick appt availability, this could be expanded- there have been a couple times that they were full and I had to go somewhere else which cost significantly more. The value is fantastic and I love that they do labs too - very convenient!”
- “Purdue Center for Healthy Living (PCHL) - I've been in the Lafayette community for ~12 years and while the Doctors at PCHL change, there is always one there to transition to. Previously, we were in the IU health network and were constantly fighting to find a new, quality doctor - turnover was terrible and we would then be charged a 'new patient' fee each time.”

Low cost benefits and low premiums. Another theme among the responses was that Purdue health benefits are relatively affordable, especially regarding low premiums. Sample comments included: “Lower out of pocket cost;” and “Premium costs are low compared to other companies.” Other statements indicating appreciation of low-cost benefits were:

- “A low-premium option with an HSA for generally healthy individuals.”
- “Compared to other institutions in different states I have been employed at the premium prices are terrific, almost too good to be true.”
- “I really like being able to pay a lower premium for health insurance but then to be able to contribute to an HSA. My costs might be higher "out-of-pocket," but it also makes it easier for us to really get the care that we need.”
- “Low premiums for staff. I only insure myself and think that it's a great deal.”
- “Still good coverage for the cost. Purdue tends to be lower cost to employees than out in the "private" world.”
- “The low cost & great benefits are a huge incentive to work at PU.”

Dental and vision coverage. In addition to employees expressing that they appreciate comprehensive coverage in general, many employees mentioned specific types of coverage they were thankful to have, such as dental and vision coverage. Some employees explicitly mentioned that dental coverage has improved. Example responses include: “I was very happy when preventive dental was included. Please keep that;” and “The eye coverage is excellent, as is preventive dental.” Additional comments representing this theme included:

- “I like the changes that were made to the dental coverage. Also, the eye coverage is great!”
- “Keep/continue dental benefits. This is a key part of a person's healthcare and people need educated on how important dental health is to overall health.”
- “No cost dental and vision.”
- “Our vision coverage is EXCELLENT! Please don't change it.”
- “The current dental coverage (other than ortho) is great. Free vision coverage is great.”
- “The dental and vision coverage is pretty decent and the choices for in-network providers for all 3 (health, vision, and dental) are good!”
- “When I was first hired I was aghast that there was not even elective dental coverage, so this has certainly improved.”

Healthy Boiler program. A common response to the question about the best things about Purdue benefits was to mention Purdue's contribution to the HSA through the Healthy Boiler program. For instance, “Continuing to offer those who are interested with incentives like Healthy Boiler programs to lower their premiums;” and “Healthy Boiler Wellness program. Give more credit to those participating on bettering their health and preventative care.” Other comments related to the Healthy Boiler program included:

- “Healthy Boiler is great, a way to earn money on a health saving card. Continue to expand on Healthy Boiler incentives. This really encourages faculty/staff to get annual check ups and participate in exercise and wellness.”
- “I have been challenged and blessed by your health incentives program "Healthy Boiler". The financial incentive to get the annual physical/biometrics is a big help to us and the fitness tracking app encourages me to keep at the exercise. Thanks!”
- “I like the Healthy Boiler Program and the opportunity to earn funds toward my HSA.”
- “I like the Healthy Boiler program, it has encouraged my husband and I to get needed preventative assessments.”
- “The best things are how the health benefits seem to be doing more to encourage individuals to do things to improve their health or more specifically find that they have health problems. The healthy boiler program is pretty good where individuals get money back when they have a regular checkup along with certain blood screening.”
- “The Healthy Boiler Program is also a great benefit, especially since that incentive goes into the HSA account.”

Complete coverage for preventive care. Another theme that arose from participant responses was their gratitude for full coverage of preventive care. Sample quotes are: “Covering 100% of preventive tests and yearly physicals;” and “If anything, the preventive care options we have are great.” Additional comments representing this category included:

- “Covering preventive medicine for visits, diagnostic tests and prescriptions is very positive for good health.”
- “Free annual physical exams; free preventative measures such as mammograms; free flu shots.”
- “Free yearly physical, should expand more preventive services.”
- “I also like that many 'routine and preventive' tests are at no charge. I think more employees will watch their health and do these tests if there is no charge. I would like to see additional 'routine' tests added to this list, e.g. colonoscopies (or a similar kind of test), and once a year dental exam and x-rays.”
- “I do appreciate the free screenings for me and my spouse. I hope this practice continues. Thank you.”
- “Keep and improve free preventive health services (Add Meds) don't remove.”

Low prescription costs. A final theme consists of participants who expressed that they are thankful specifically for affordable prescription costs, including having no copay for some medications. For instance, “The prescription coverage is fantastic;” and “\$0 co-pay on prescriptions.”

- “Appreciate that prescription drug pricing is now lower.”
- “Certain prescriptions are covered well. I hope that could continue.”
- “Coverage of preventative medication for mental health conditions! Affording my medication used to be a struggle, now most of it is covered as preventative - which makes sense since it prevents further mental health problems!”
- “Free preventative prescriptions! My mental health prescriptions are considered preventative now, which is fantastic! They finally understand that these medications enable me to function on a daily basis.”
- “Full coverage for preventive medications (eg blood pressure pills).”
- “The prescription coverage is nice as well, as most of the medication that my family uses is affordable because of it.”

Benefits Purdue Should Offer (n=982)

Over 60% of employees provided a response to the item about suggestions for other benefits Purdue could offer. Similar to last year, the two most frequently mentioned suggestions were free CoRec or other gym memberships, and improved dental insurance.

Free or reduced cost gym membership. The most frequently desired benefit was a free or low cost gym membership, whether at the CoRec on Purdue's campus or at other area gyms. Sample comments included: "CoRec discounts;" and "I would like to see my gym dues covered under the benefit package." Other comments representing this theme were:

- "Access to COREC for free or implement a way to pay a very small fee/salary deduction as part of the annual benefits enrollment. This will make it so easy for people to be more active without having to worry about signing up. Another solution is to offer free COREC membership as an incentive for completing an annual check-up or a health goal."
- "Better access to gym (e.g. Co-Rec or select local gyms)."
- "Offer incentives to people who keep good health. Gym membership or involvement in other physical/mental well-being activities."
- "Purdue should include memberships to all Ismail and Co-Rec campus spaces so faculty/staff are able to take advantage without additional cost. As stated above, benefits like this would provide more balance between increasing yearly negative costs (tobacco usage) to positively reinforcing healthy behavior (WW participation/gym usage, etc.)"
- "Reimburse fees for gym memberships."
- "Subsidized gym memberships/stipend at a gym of our choosing. CoRec is way too expensive for what I want and inconvenient to my home. I use Planet Fitness for \$10 a month. It would be great if PU recognized this and provided a stipend to encourage more staff/faculty to exercise."

Enhanced dental insurance. Regarding improvements to benefits, dental insurance was the most frequently mentioned benefit suggested for improvement. For instance, "A more comprehensive dental plan." Several participants also mentioned the desire to cover orthodontics, especially among adults. For example: "Adult orthodontics coverage." Other comments were as follows:

- "Better dental coverage with options to more dentists in network. The current option is way too costly."
- "Better dental coverage."
- "Better dental insurance, it feels even the highest plan covers only a bare minimum - much less competitive than the plan my last university employer offered."
- "Better dental would be nice. It's a very basic plan that is kind of pricey with a low maximum benefit."

- “Better dental! The current coverage is basically insurance for the dental insurance company not the patient! There is an out of pocket max for the insurance company...that doesn't make any sense. Good dental health plays into overall health...if your teeth are bad then you are going to get sick and that costs Purdue money.”
- “More comprehensive dental coverage (e.g. adult braces).”
- “Possibly more dental insurance options, especially for orthodontics.”
- “The dental insurance is not very good at all unless you go to an in-network dentist.”

Lower cost of health insurance: premiums and deductibles. Many employees expressed that they want to pay less for health insurance, especially in premiums and/or deductibles. Sample comments exemplifying this theme are: “Should be offered at a lower cost;” and “LOW premium, LOW deductible plans.” Other comments were:

- “A plan with low to no in network deductible. 0K-2K in cost / in network.”
- “Benefits that are zero cost. This way, any benefit would be a net positive and not looked upon as "what are we losing.""
- “Discounted insurance premium for those who work out or get x number of steps a day. This could be tracked via a fitbit or smart watch and shared with the insurance company to get the discount. There are other insurance agencies that currently do this with employer groups. I believe UnitedHealthcare is one.”
- “I would like to see the premiums or deductibles go down and/or the contribution to the HSA go up.”
- “I would prefer to see existing benefits be affordable than adding more benefits that might result in higher premiums, higher deductibles, or less general health insurance coverage.”
- “Less costly medical coverage.”

Additional mental health benefits. Participants indicated that they would like more access to mental health resources. Sample responses included: “I would like it if at least one of the remaining health plans next year offered better mental health coverage;” and “Make mental health a priority.” Additional responses regarding the desire for mental health benefits were:

- “Better and more counseling options...only 6 appointments for the year is not enough when you need to seek counseling. Mental Health options need to be addressed.”
- “I think basic mental health services and medications should be covered.”
- “Mental health needs to be made a priority. The EAP doesn't help folks who need ongoing mental health services. If you're going to provide 6 free sessions a year through the EAP, you should cover 6 sessions per year, per person at their established provider.”
- “Mental health should be considered part of preventative care - antidepressants and issues with mental issue should not qualify into a higher tier of care. These problems get worse without treatment - just like receiving a flu vaccine.”
- “More comprehensive mental health services.”
- “There should be greater coverage of mental/behavioral health services. The PCHL or CAPS should be expanded to offer psychological testing and treatment services for staff.”

Access to childcare. Some participants desire having access to childcare, including having more parental leave time. Sample comments included: “I think it would also be great if Purdue would create an after school childcare option;” “Increased opportunities for affordable childcare; and “Providing 12 weeks of paid parental leave, just like federal government employees are about to receive.” Other example responses from this theme were:

- “3-6 MONTHS OF PAID PARENTAL LEAVE. Purdue's family leave policy is not nearly enough for any circumstance, not to mention complicated deliveries or precarious newborn health situations.”
- “Better subsidies/options for childcare. I can only use 5000 from the dependent FSA for childcare and my annual costs are more than double that amount. Improved options for fully paid maternity leave. Right now employees have to use sick time or vacation time to be paid for a full 12 weeks of maternity leave.”
- “Childcare support is insufficient (mostly not enough availability).”
- “I also think providing more childcare opportunities for the staff would be helpful.”
- “I believe that parental leave at Purdue should be 12 weeks and not 6 weeks. This would better support Purdue families as they make the transition to welcoming a new family member.”
- “More affordable childcare options.”
- “More comprehensive parental leave that allows workers at all levels to take the time they need at home with their children without sacrificing their paychecks or worrying about losing their positions due to choosing to dedicate time to their new child.”

Hearing aids. Finally, several employees indicated that they would like to have coverage of hearing aids. For example, “Some type of coverage to help with hearing test/hearing aids.”

Additional comments regarding the desire for hearing aid coverage included:

- “Hearing Aids. There is a vision plan and a dental plan, but no hearing aid benefits.”
- “I would like to see Purdue offer hearing aids included. Hearing is an important part of my job and the cost for them are very high. Communication is a big part of everyone's job at some point, and hearing the incorrect words being spoken could be disastrous.”
- “It would be really beneficial to a lot of people including myself if they would help with the cost of hearing aids. I have been tested and have significant hearing loss in both ears. I am still working and have difficulty hearing people in group situations It’s kind of embarrassing to ask people to repeat themselves and sometimes they get very short with me.”
- “Like previously stated, I would like to see Purdue expand the coverage for hearing aids. I am certain there are additional coverage that would help those with hearing loss to have better access to purchase hearing aids.”
- “Plan for purchase of hearing aids at a deep discount.”
- “Please look into insurance coverage for hearing aids. I wear them, but insurance does not cover them. They are very expensive, but more and more people need them.”

Key Concerns to Benefit Changes (n=1239)

Most employees responded to the question asking about concerns to benefit changes (81%). Participants most often mentioned concerns regarding the cost of benefits continuing to rise, and decreased coverage of benefits.

Cost/expense of benefits. Many employees expressed that they were worried about the cost of insurance going up, especially in areas of premiums, deductibles, or other out of pocket costs. For example, “Cost is ALWAYS going to be a concern for everyone involved as health care costs are out of our control but extremely necessary;” and” That they become more expensive, with less coverage, higher deductibles.” Other comments suggesting concern with the cost of benefits were:

- “Higher deductibles, higher premiums. It is expensive to get sick with this insurance and that causes me a lot of stress.”
- “I want to be sure that if there are premium increases the deductible does not also increase.”
- “I would love for the benefits to go back to the way they were before the Affordable Care Act. Low premiums, affordable co-pays instead of low premiums and a high deductible. Taking my children to the doctor is expensive.”
- “I’m very concerned about deductibles increasing plus my premium. It seems as if my paycheck just goes to my benefits. Especially when I’m in the same tier level as someone making double if not triple/more to what I make annually.”
- “Increasing costs for less benefits.”
- “Just keep premiums affordable since the deductibles are so high.”
- “Rising premiums that offset any of the mediocre merit increases we get, effectively preventing employees from keeping up with the cost of living.”

Decline in coverage of benefits. In addition to being concerned about the cost of benefits going up, employees are concerned about having decreased coverage of their benefits. Sample comments included: “Keeping comprehensive coverage but keeping it affordable;” and “Making sure that we get better coverage at a better value vs LESS benefits for MORE money.”

- “I would have preferred to have more comprehensive coverage vs. switching to a plan that appears to fit last year's costs.”
- “Medical coverage needs to be kept current with what is occurring. Such as cancer treatments. Purdue needs to ensure the coverage and costs are adequate for the employee and their family so they do not stress or not follow through on treatment due to costs and lack of coverage.”
- “Our health coverage is rough. These high deductible plans are garbage and put all the onus on the employee to pay. For employees who are not paid well, we have to put off seeing doctors or

getting things fixed. HSAs do not solve the problem. When I had a shoulder issue, I ended up draining my entire HSA in order to get physical therapy done. It's ridiculous!"

- "Purdue is competing with the world for the best faculty and talent, not with local companies. If we are to attract and retain that talent, then we should be looking for ways to offer the best and most comprehensive health care to all of our employees. These benefits should be competitive and attractive on a national scale."
- "Services may become less comprehensive and increase in cost."
- "That ever increasing costs will force quality and comprehensiveness to drop."

Spousal surcharge policy concerns. Many employees were upset about the spousal surcharge policy because it costs their families more money, or were concerned that spouses would not be covered at all in the future. For instance, "Reducing or eliminating spousal benefits;" and "Spousal surcharge is not fair in my opinion." Other exemplar comments included:

- "I am concerned about the spousal insurance. Currently my husband is not offered insurance through his work but I feel that the spouse should be able to be on the employee's insurance without the extra paperwork or cost."
- "Making things more complicated--by instituting the spousal fee, my spouse (who barely uses insurance) and I are now on separate plans and have to keep track of separate insurance plans, separate HSA accounts, and now are subject to a cumulative higher deductible."
- "My family is also greatly affected by the spousal coverage penalty. We could split insurance so my spouse uses his own insurance, but that complicates things for my whole family when some of us don't have the same benefits and coverage. Now because of the added surcharge, I'm being penalized for trying to cover my whole family on one plan. I know I pay so much more in premiums that my rate of pay is more than the raise I received and is just high enough over the threshold that I pay even more."
- "Removing working spousal coverage. Yes, my spouse's work offers them insurance, but to get the same level of coverage that Purdue offers, they would have at least half of their paycheck going to pay for premiums."
- "The spousal surcharge is inappropriate and the examples and explanation was very confusing."
- "While I don't love the spousal surcharge because my husband's benefits are horrible but technically fall under the need for the surcharge, I do appreciate that it is an option. I want the ability to continue covering him."

Concerns with tiered system for premiums. Similar to last year, some participants were concerned with the tier setup for employee premiums, believing it is unfair. Sample comments are as follows: "That there continues to be two tiers, i.e., those making \$44K pay the same premiums as those making \$440K;" and "More price cutoffs. For those of us who are marginally above the \$45000 mark pay double that of those below that mark which in effect means we make

less. There should be at least 1 or 2 more tiers in there.” Other statements regarding the tiered system included:

- “Also I feel there should be 3 tiers of income for how much you pay for premiums or the cut off needs to be higher at around 50-55,000/yr. There is quite a jump in premium cost at 44,000/yr.”
- “I 100% agree that there should be a tiered system for premiums. However, those making \$45,500 pay the same premiums as those making \$200,000 or even \$750,000+. With the constant increase in deductibles and out-of-pocket expenses, this can put a family on the low end in a financial bind quickly. For example, If you make \$50,000 and have a surgery or emergency room visit, you could quickly be looking at as much as \$4,000 - \$6,000 in bills. This is a very large portion of this individual’s take home salary, however, if you made \$100,000+, this would be a smaller portion.”
- “I am worried that once I hit the next tier in salary that I won’t be affordable. Seems like there is a huge jump in the tiers. People at the low end of the next tier can’t afford it. The tier is a huge range.”
- “I think the costs are unfair. There is no reason I should be paying the same amount for my benefits as someone who is making over \$100,000. Additional cost tiers should be implemented so that if you make more gross salary, you pay more for your benefits. It is not acceptable that a person making \$45,000 pays the same as someone making \$145,000.”
- “I wish the salary cap that requires paying more money for benefits was higher. Thank you for bumping it up from 43k, but it should either still be higher or there should be multiple tiers.”
- “Paying the higher premium on health insurance at \$45,500 I feel is unfair when there are faculty and upper administration who are making 6+ figures and paying the same rate. There should be more than 1 premium tier.”

Loss of the PPO plan. Some participants were upset with the decision to get rid of the PPO plan and/or perceived employees were being forced to use HSA plans. For example, “Removing the PPO plan was a major downgrade in types of benefits offered;” “The removal of the PPO plan and only having the Health Savings Account version to choose from;” and “Taking away the PPO plan is going to hurt those that need it.”

- “As a person who has developed a critical illness this year, I am very concerned about the potential loss of the PPO plan option. Future testing and follow-up care mean that I will likely meet the MOP every year regardless of the plan I am on. The HSA plan deductible is high and I have no time to build a balance to cover it. Purdue’s contribution to HSA is very low compared to other local employers, while premiums are very high.”
- “As someone with chronic health conditions and multiple monthly prescriptions, I am TERRIFIED of losing the Purdue Health Plan next year. I relied on the PPO plan and the lower out-of-pocket maximum because I hit it every year. I am furious that we are forced into an HSA plan and lose our choice to pay higher premiums. As a result, I am considering other employment next year.”
- “Do not like the fact that we are getting rid of the top tier PPO plan.”
- “Removing the PPO plan with the 2 HSA options will increase my monthly expenses by about \$240.”

- “Why is the PPO being taken away? I have a chronic medical condition, the HSA accounts as an only option concern me. I know we have been told that out of pocket will be about the same but it is still scary knowing my medical history.”
- “Worried that we'll consolidate the amounts of plans to only the two high-deductible ones now. While they've worked for me, I'm sure there are plenty of people that would prefer to have a plan with lower out of pocket max/coinsurance.”

Limiting choice of healthcare providers. Perceptions that employees were limited in their choice of providers were prevalent in some responses. Exemplar comments were: “Freedom to choose a healthcare provider that matches my needs and preferences;” and “Having to change providers.” Other sample comments were:

- “And now we are penalized for using our same health care providers, the only way to have the lowest out of pocket cost for my family is to change providers.”
- “High quality providers are no longer in network.”
- “Limiting access to area healthcare providers. The split this year (for 2020 calendar year) between Franciscan and IU is a case in point. The claim that it is for continuity of care is nonsense. My ongoing (11 years) cancer care is through IU and adding a \$2K premium onto that is not encouraging continuity of care. In a couple years Purdue will negotiate a slightly lower price with another provider...”
- “My children and I see doctors in the IU Health network and have established a trusted relationship with them. I feel as a human being and the provider of my children, I should be able to see the doctors I feel safe with, not who my employer determines.”
- “Narrower selection of 'in-network' providers.”
- “Restrictions on provider choices.”

Concerns with prescription coverage. Finally, some employees mentioned that they did not like current medication coverage and/or using CVS. For instance, “Prescription medication coverage needs to be more comprehensive. Current plan is awful.”

- “Coverage including prescription coverage is not as good as it used to be.”
- “My son has special needs and receives growth hormones. With the switch to CVS Caremark for specialty prescriptions I am now required to have his gh filled through CVS. His Medicaid does not partner with CVS, which leaves me with a monthly co pay of \$200. I have not had to pay for this medication for 7 years.”
- “Prescriptions. My daughter is on a needed medication that is not tier 1 and the cost is crazy - like 300 monthly. I have gone outside of our insurance for assistance.”
- “Purdue needs to change from CVS Caremark back to Express Scripts, or to some other company. When Purdue changed to CVS, it became much harder to get prescriptions. CVS started requiring prior authorizations for almost everything. They put quantity limits and dosing limits on many medications. They denied many prior authorization requests. They stopped covering some common medications completely. It has been a mess ever since Purdue changed to CVS. All the

doctors I have talked to say they are frustrated with CVS. This is a benefits problem that Purdue needs to fix.”

- “Stop dropping the effective medication from your formulary (approved) list of medicines the plan will cover. You are forcing everyone to use medication that is not as effective or not effective at all in treating the illness.”
- “Stop using CVS as the Rx provider. They have not been easy to work with.”
- “The coverage on prescriptions has become worse in 2019 than previous years. Some of the medications doubled out-of-pocket expenses.”

Opinions Toward the Center for Healthy Living (n=921)

About 58% of West Lafayette employee participants answered the question asking about their opinions toward the Center for Healthy Living. Opinions of the CHL ranged from positive, to neutral, to negative.

Concern with CHL providers and/or staff. One common issue mentioned by participants regarding the CHL was concerns with healthcare providers or CHL staff. For instance, “I tried the Center several times in the past 2-3 years. The staff turnover was high and I wasn't impressed with the medical staff.” Other concerns were that there are not enough providers, and a perception that providers may not be qualified. For example, “You need more providers/staff there;” and “I do not have a lot of confidence I am receiving high quality care - or that my information is secure and private. The providers rotate so often, there is never an opportunity to build a relationship and their front staff continue to be terrible.” Finally, some employees wanted to see a medical doctor as opposed to a nurse practitioner: “They need more doctors, possibly more staff in general, but definitely more doctors. Family Nurse Practitioners are not doctors.” Other comments regarding CHL providers and staff included:

- “At first, I was excited that we would have a health care center on campus, with easy access during the work day. But after a few visits there, I did not feel as if I received the quality of care I am used to with other providers. As an example, there is even one time when I had to go in for bloodwork, the girl ended up sticking me in 4 different places and seemed totally inept at her job. (I'm usually an easy blood draw in one stick.) She blamed it on me being dehydrated (which I wasn't) and sent me away saying I'd have to come in again on another day. Instead, I went over to the lab I usually go to, they were able to get it in one stick right away on the same day. So why wouldn't I stay with health care providers that give me quality care instead of the questionable care I would get at the CHL?”
- “CHL has a well deserved terrible reputation due to rude workers, inaccurate medical care, many medical errors, and incredibly inconsistent service since its inception. It needs a major overhaul and will take a long time to regain trust.”
- “I haven't used the CHL for several years due to poor service. The check in staff was rude when I came in for a follow up to the Hep B vaccine, a titer test. There was a mix-up, and the staff said it was my fault because I hadn't been seen for over a year. It took a week for them to receive the fax from my doctor to get the titer done, and after that fiasco, I decided to get better treatment elsewhere.”
- “I tried having them as my primary provider when I first came to Purdue 7 years ago. I found the care very basic. The doctor I was assigned to was all about cancer. She wanted to find cancer and this was her passion. I don't have cancer and while I appreciated her concern, I needed a doctor

more concerned with my high blood pressure and family history of heart disease. My IU doctor needed no prodding.”

- “I used to nearly rave about CHL but have had some negative experiences in the past two years. Once I went in for a particular issue, but when I tried to bring up another issue in the appointment, the clinician told me they could not help me with that because my appointment didn't have that code or whatever. This is a process issue that is not patient-friendly. Another time, I tried to get an appointment with a doctor and the receptionist pressured me to see a nurse practitioner instead. I know that NPs are fully capable and can even write prescriptions, but I only get a physical once a year and think I have the right to see an MD. I shouldn't feel bad about that. I can understand recommending an NP if I need to get in quickly, but when I'm flexible as to when I come in, I shouldn't have to deal with someone trying to change my mind about who I want to see. I've talked to at least one other coworker about these things and she had similar experiences.”
- “I would like for them to employ a Doctor. I like the Nurse Practitioner but would still like to have a Doctor that would be there the next visit. They have had a large turn over in staff. I like to have a relationship with my Dr. I feel better when I see the same person for repeat visits.”
- “It's okay. I wish there were more MDs on staff. I know, I know, "A nurse practitioner can diagnose, and can prescribe medication, just like a real doctor!" Well, there must be some reason that doctors require more schooling. And I've had an interaction with a NP at CHL who, when I was being tested for malaria, told me malaria would be treated with “antibiotics." I'm no health care professional, nor even a scientist, but I am pretty sure malaria is a parasitic infection. Anyway, I try to avoid needing medical care, and when I do, I try to meet with an MD.”
- “They are under staffed and hard to get a sick appointment made or see a therapist if needed.”

Hard to get or make an appointment. Many participants mentioned the difficulty of making an appointment at the CHL. For example, “I have tried to get into the center before when I was sick but they never seem to have any open appointments for same day sick visits.” Another concern is the difficulty scheduling appointments, whether through the online portal or on the phone. For instance, “Most of the time you are on hold for a long amount of time to get an appointment;” and “Online portal doesn't work very well/can't make appointments there.” Other comments about difficulty in scheduling an appointment were as follows:

- “I think it's great. The only knock that I have on it is that scheduling appointments is not as convenient as it could be for me. I don't know if it's just because I am a faculty/staff member that I cannot use the online portal, but the system will not let me create an account to sign up online for a time to visit them. I prefer to be able to see what availability they have in a day to see me instead of calling. Other than that, I think it's a great resource and should be more widely used.”
- “I would like to ask that CHL expand the online website to include booking of appointments. I would think that anyone should be able to review calendars and review appointment times that are available in lieu of calling the front desk at CHL.”
- “Last year I tried to make an appointment online at the Center for Healthy Living, but I was not able to do so. The website would not give me the information I needed to make an appointment. My spouse also tried, and she could not even log in as a spouse.”
- “Online portal to register is extremely difficult. Supposed to be an easy-to-schedule alternative to a PCP, but multiple colleagues have referenced the difficulty they have in getting an appointment.”

- “Only complaint is the number of same day sick appointments. If you do not call by 7:30am there are none available and then I have to seek help at an outside facility.”
- “The phone is rarely answered in a timely manner and it is difficult to get an appointment. It does not feel like a professional medical office.”
- “Too hard to get an appointment quickly.”

Convenient. A common response among employees was that they perceive that the CHL is convenient, especially regarding its location and affordability. Sample comments include “I like the clinic. It's very convenient and doesn't cost a lot. It's also clean and modern;” and “I am a huge supporter of the Center for Healthy Living. The location is convenient, it is easy to make appointments to see care providers quickly, and the same-day lab benefits are hard to beat.”

Additional comments representing this theme were:

- “I feel it is a wonderful, cost effective and convenient service. Appointments are generally more thorough than with my primary care physician.”
- “I feel they are a really great place to have as a resource on campus for faculty or staff. My husband uses it monthly for tests. It is convenient and they do work to get you in if you are really sick.”
- “I love it and it is very convenient.”
- “I plan to switch to use them as my primary care. I've used them for urgent care and drawing blood. I like going there. It is very convenient.”
- “I think it is a great option (affordable and convenient) and I plan to use it in the future as needed.”
- “I think it is a very beneficial & helpful option for all staff, as well as myself. It is convenient with many options for care/information/guidance. I utilize the CHL for lab work, flu shots, and health coaching on a regular basis. I met with the pharmacist once or twice in the last year. I feel it has been very beneficial and very convenient to access. I need to increase my dependence on the CHL.”
- “I think it is great and convenient to use. It is cost effective. I like that I can get my labs done.”

Positive perceptions of providers. Many participants listed positive perceptions of the CHL providers or staff, such as the staff being friendly and providers giving high quality care. Sample comments include: “CHL is great - I love the staff and providers there!” and “I love the Center for Healthy Living! It is easy to access and the employees and providers are very nice and also highly competent.” Additional comments were as follows:

- “All the staff I've interacted with have been helpful and kind, and my GP is probably my favorite healthcare provider I've ever worked with. She's a great listener who takes me seriously and puts me at ease, so issues I might otherwise have hesitated to bring up are easy to address and manage. Although I went to my last check-up without any symptoms or complaints, she noticed something

that led to a diagnosis of an autoimmune disorder. Without this appointment, which I only made because of Purdue's benefits and encouragement, I probably would have gone years without knowing I had this condition. I'm better informed about my health and taking better care of myself than ever before, and it's a direct result of how easy it has been for me to access, afford, and trust the care available at the Center for Healthy Living."

- "Center for Healthy living provided excellent interim care, while seeking a new Primary Care Physician after 25 years with the same business. Nisha, the nurse practitioner, was very understanding, knowledgeable and compassionate to our frustration with a new care giver being passed onto. Thank you."
- "Clean and friendly atmosphere. Feel comfortable with the staff - and competent."
- "Great quality care. Friendly people. Convenient."
- "I have had good experience at the Center within the past year. The reason I think is because of the NP. Kim Porter was great to have as a provider."
- "I love Nisha Bogosian. She is so thorough. Last year she figured out that I have sleep apnea when I went in with high blood pressure. I feel like a lot of doctors would have just put me on blood pressure medicine."
- "I love the staff at the Center for Healthy Living and think they are great."
- "I think it is a great service provided for employees. Love Kim Porter and her nursing staff. All are excellent to work with when we have to see them!"

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 had bad experiences with the CHL. For instance, "I went there once for EAP and it was not a good experience." Another example is: "I've heard of people not being happy with their experience there."

- "As mentioned, it doesn't matter what the cost is to go to CHL. My experience is that the doctors are completely incompetent and the place is completely disorganized and chaotic. My experience has not instilled trust in the level of care I receive therefore, I will go to my PCP always."
- "I had sprained (very badly) my ankle and went over to the Center to be seen. I was told I had to make an appointment and none were available until 2 days later. When I went 1. the doctor was weird and made me feel uncomfortable 2. he sent me over to get an x-ray (that department was amazing, fast and professional btw) he made the request 'stat' or expedited so I could get the results back before the end of that day. Neither he nor anyone else from the Center called me back-and that was on a Friday. I HAD TO CALL the Center the following Monday to get the results which took them 15 minutes to find. So I hobbled around all weekend without any kind of ankle support. The whole experience still makes me angry. My bottom line evaluation was that I got what I paid for."
- "I have been consistently disappointed with their lack of professionalism. Their level of service was very poor. Phone calls were not returned, it was difficult to make an appointment, and overall I was highly disappointed with the entire experience the times I've tried to use the facility."
- "I used to nearly rave about CHL but have had some negative experiences in the past two years. Once I went in for a particular issue, but when I tried to bring up another issue in the appointment, the clinician told me they could not help me with that because my appointment didn't have that code or whatever. This is a process issue that is not patient-friendly."
- "My initial experience there was not very good. I also do not feel the physician offerings are of high quality, and have heard as much from people who have been there. When I was there it was

also quite crowded. It's just not a place that feels warm, welcoming, and like you are getting high quality care.”

- “Not positive. Based on fellow PU employees’ experiences.”
- “We tried to make the CHL work for us for about 3 years, but after many frustrating experiences, we are DONE with them. The final straw for me with CHL was this: Last year I became very sick with, what turned out to be, bronchitis. I was about 5 or 6 weeks pregnant at the time, too early to have been seen yet by my OBGYN and the CHL doctor was my PCP. I was miraculously able to get an appointment at CHL because they had a cancellation. I had been sick for days and was looking forward to being diagnosed and treated. When I got to the CHL and the nurse started taking my vitals, etc. I mentioned that I was pregnant. The nurse immediately stopped treating me, looked at me as if I had leprosy, and told me they could not treat me there. I explained that I wasn't very far along in my pregnancy and didn't have any other doctor to go to. She spoke with the doctor (who never even laid eyes on me), confirmed that they couldn't treat me there and told me I would have to go to Urgent care, and then kicked me out of the exam room!”

Services offered. The types of services offered by the CHL were frequently mentioned by employees. For instance, employees explained that they like to use the CHL for preventive care such as flu shots, and lab services. Other employees indicated that they felt the CHL was only useful for some services and not for others. For instance, “Fine for selective labs and immunizations. Never thought of center as place for primary care;” and “I think CHL is a great choice for sick appointments but I have had a longer standing relationship with my primary care doctor and that's why I've continued to see him.”

- “A good place for flu shots. I've found it easy to get a free flu shot there, and also at the Purdue Pharmacy.”
- “Fine for sore throat, simple illnesses -- if you can get an appointment in a timely manner - which I rarely have been able to get. Lack of stability of doctors/staff make it less appealing for maintaining long-term relationship with a doctor. I question the quality of the doctors (perhaps unfairly). Having Tier 1 lab is nice (although I wish I didn't have to do labs separate from my primary doctor's office), but I have often had to wait for 30 minutes (an hour once) to get in. Not clear what services are covered by \$25 and what will be additional.”
- “Great for labs for me and flu shot for my son. Otherwise, I don't use because I had a couple of bad experiences there when it first opened.”
- “Great for small medical needs--antibiotics for infections or the flu. I would not go there for diagnosis of major medical problems though I have heard they provide good referrals.”
- “I feel that it is convenient for something like a flu shot but there are way too few doctors.”
- “It's convenient but pretty bare-bones in terms of providing services. E.g., limited mental health services, no x-rays etc.”
- “The general practitioner services provided are great, but some of the others are not as helpful, such as the dietitian and mental health coaching. It could be helpful for the center for healthy living to be more of a resource to gather and find information about additional services.”

No opinion/do not know much. Some participants seemed to be neutral about the CHL based on their comments because they do not know much about it or have not tried it yet. For instance, “No opinion. I haven't used it so I can't really comment on it.” Other responses from this category were:

- “Don't know enough of what they have to have an opinion.”
- “Don't really have an opinion. I haven't had much, if any contact with them.”
- “I am a new employee and I only been with Purdue for nearly two months. So I feel that Purdue needs to give out more information about their resources. I personally don't know much about Center for Healthy Living.”
- “I don't know anything about it.”
- “I have none as I have not used the Center for Healthy Living and do not know anything about the Center for Healthy Living other than it exists.”
- “I have not had the need to visit the Center for Healthy Living.”
- “Too new to the university. No opinion yet, other than it was not fast get an appointment when I was sick. Still had to wait a couple days.”

Why Would Not Visit CHL Even if Saving Money (n=457)

Out of the employees who stated that they would not visit the CHL even after knowing the cost savings, about 93% of them provided a reason for why they would not visit the CHL. The most frequently mentioned reasons for not visiting included already having a primary care provider and having difficulty getting a timely appointment at the CHL.

Have established primary care provider elsewhere. The most commonly stated reason for not visiting the CHL was participants expressing that they already have a primary care provider established outside the CHL. Related responses indicated participants wanted to have a relationship with their providers over time, and that they wanted to have all their health records in one place. For example, “All my Dr.'s are Arnett and they have all my records and I will stay with them;” and “I already have an established provider who I would prefer to see.” Other sample comments were:

- “I don't want to have to deal with transferring medical records between different HCP. I like my PCP in the IU system and I don't want to have my medical records with different providers; I want my PCP to have my full information.”
- “I feel comfortable with the doctor I have had for over 20 years. He knows me and had my health history. I trust him. I cannot say from what I have heard from others that I trust Center for Healthy Living with my care.”
- “I feel I get better care outside the CHL.”
- “I have a family physician and I would continue to go to this individual. This ensures I get to see the same person whenever I need to see a physician.”
- “I have no interest in chasing my medical records all over the place. I keep all of my care inside the IU Health System if possible both for continuity of my own care and records, plus their health system in the state has been very good to me overall.”
- “I love my provider and have an established relationship with him for over 15 years. I feel comfortable there and am getting the care I need. I don't want to start over from scratch.”

Could not easily get appointment at the CHL. Many participants indicated that when they have tried to schedule an appointment at the CHL, they could not get an appointment when they needed one, or that it was hard to schedule the appointment. Sample comments included:

“It’s too tough to get in there, difficult to schedule;” and “Too hard to get an appointment.”

Other comments representing this theme were:

- “I’ve never been able to make an appointment online despite several attempts, and the times I’ve gone in to make an appointment it hasn’t been easy or I haven’t been given accurate information.”
- “In my experience appointments were difficult to get or had long wait times.”
- “Incredibly long wait times for appointment scheduling (on phone and to be seen); Drs. are not in the office on a regular basis; staff does not call back quickly; will not see if you are pregnant. In the past the Center has been my sole source of primary care. I WILL be changing providers this year due to these issues.”
- “It’s impossible to get an appointment. I have tried several times. I’m done with giving CHL any more chances to succeed.”
- “It’s too hard to get an appointment. I can never get a same day sick appointment, and the other scheduled visits are too far out.”
- “They never have appointments available, so I just end up having to go to Urgent Care. Also, they won’t see anyone who is pregnant-which I learned the hard way after they refused to see me when they found out I was 6 weeks pregnant.”
- “Too long of wait for an appointment especially when sick.”

Bad experience. Having or hearing of a previous bad experience among employees was listed as a reason for not attending the CHL by some participants. Sample comments from this category were: “Not great care in multiple experiences;” and “I have had bad experiences in going to CHL and would not want a PCP there due to my issues that I have had there before.”

Additional comments regarding bad experiences with the CHL included:

- “I had a bad experience there (mis-diagnosed).”
- “I had a horrible experience there about 2 months ago - I’m going to avoid it like the plague in the future.”
- “I had a nurse who did not comply with my wishes and I haven’t been back since.”
- “I will not use this facility. I have not heard good things about them. I will spend the extra money and go to a private healthcare provider.”
- “I’ve had a few bad experiences with the Drs. that worked there. I believe they no longer work there, but they kind of ruined it for me.”
- “People go to the healthy living for sickness and time after time are not taken care of. It’s diagnosed wrong or not give meds and they end up having to go to an outside Doctor to get the correct med. or right treatment. For example my daughter went there and she was very ill. They said she had mono and strep. They did not give her any medicine and she got worse. Ended up in the hospital and dehydrated. I have heard of people with the same problem.”
- “Terrible experience once. Not going back.”
- “When coworkers have gone to Healthy Living for medical issues, it’s been disorganized and they’ve not followed up with calling in the prescriptions as promised during the visit.”

Lack of convenience. Some employees mentioned issues such as living far away from the CHL or not having night/weekend hours for appointments as reasons for refusing to visit the CHL. For example, “Although I work in West Lafayette some days, it is over an hour away from home. When I'm sick, it's just too far away;” or “Appointment not available on weekend.”

- “As far as I know the CHL is not open on nights/weekends.”
- “CFHL is as far from my home as anything can be in West Lafayette. The doctor I have had for 12 years is 3 minutes away.”
- “Every time I have tried they did not have sick appointments or it was a weekend or after hours.”
- “I am a remote worker that lives 70 miles from the Center. If I were closer, I would definitely use it!”
- “I do not live close enough to the Center for Healthy Living.”
- “I often need to see a health care provider at times that the CHL isn't open (weekends, evenings, etc.)”

Privacy concerns. A concern was expressed by some participants that they did not want Purdue to have access to their health information, resulting in them not wanting to visit the CHL. For instance, “I don't trust Purdue to maintain my medical privacy.” Other responses representing this category were as follows:

- “Again, I don't trust that Purdue won't have access to my health information.”
- “As soon as the University can explain why they need to have access to my health records...”
- “Healthcare and employers should be separate. I don't need to worry that my healthcare provider has my best interest in mind because they are in no way affiliated with PU. Further, I feel that the level of care I would get here (PU) would always be constrained by PU resources. Lastly, PRIVACY.”
- “My right to privacy is more important than convenience/cost.”
- “Purdue does not need to know of my health issues. Despite HIPAA and other protections, I simply don't trust Purdue to not use or protect my data. Plus, using external providers with direct hospital affiliations is preferable.”

It depends. Finally, some employees expressed that they might be willing to visit the CHL under certain circumstances, such as depending on the type of health issue or how quickly they could get in. Sample responses included: “Maybe - depends on if I came to work sick or stayed home and proximity to where I was;” and “Possibly -- depending on how quickly I could have made an appointment.”

- “Depending on the health issue yes I go to Center for Healthy Living. My non-CHL physicians is someone I have been seeing for years and also see multiple other family members so gets the whole family history. Physicians at CHL seem to come and go on a regular basis so can't build a relationship.”
- “Depends on issue and hours.”
- “Maybe, depends on what was wrong. If it was serious I would want to see my primary. If it was flu, cold, etc. I would go.”
- “Maybe. If I knew I could a) get in quickly and b) see the same physician.”
- “Maybe is the answer. I have the impression that they don't treat everything like my doctor does. Would be worth looking into.”
- “My answer is, "it depends." It depends on what the issue is and whether I think I would get adequate care at CFHL. They only have 1-2 medical doctors on staff.”

Healthy Boiler Program

Most employees are aware of the Healthy Boiler Program, though only a slight majority of participants participate in the program. Among those who do participate in the program, some still seem to find the Healthy Boiler Portal difficult to use, but participants generally find the portal easier to use compared to last year; the mean is 4.14 on a scale of 1-7.

Awareness of Healthy Boiler program (n=1471)

	Frequency	Percent
Aware	1403	95.4%
Unaware	68	4.6%

Participation in Healthy Boiler Program (n=1468)

	Frequency	Percent
Already a participant	847	57.7%
Plan to be participant	302	20.6%
Not planning on being participant	319	21.7%

I find the online “Healthy Boiler” portal easy to use (n=841); 2019 Mean = 4.14; (2018 Mean = 3.41)

	Frequency	Percent
Strongly disagree	77	9.2%
Disagree	111	13.2%
Somewhat disagree	135	16.1%
Neither agree nor disagree	87	10.3%
Somewhat agree	200	23.8%
Agree	186	22.1%
Strongly agree	45	5.4%

Changes to Healthy Boiler Portal (n=407)

Among participants in the Healthy Boiler program, 48% provided an open-ended response regarding their opinion about the portal. Overall, comments regarding the portal were still negative.

Portal is still not user-friendly. Generally, participants found the Healthy Boiler portal difficult to use; they mentioned navigation being “clunky;” “complex;” and “not intuitive.” Other sample comments included: “I don’t find it very user-friendly;” and “It is confusing, there is a ton of extra stuff on there that we don't use. It needs to be simplified.” Some participants indicated there is improvement in the portal since last year, but it is still not ideal. For instance, “It is better than last year, but there is room for improvement in navigation and in simplifying sign up for activities for reward as opposed to all the "good advice" that gets in the way. We can find advice elsewhere and it doesn't need to be under the cover of a login.” Other comments representing this theme were as follows:

- “As with many HR websites - navigation is difficult and hard to follow. Finding information is at best difficult. Submitting information is confusing and after completing the status is not always updated. Is a great incentive that is just poorly executed in its end user interface.”
- “It is difficult to navigate. It does not appear to be very intuitive.”
- “It is not as intuitive as it could be. Some items are buried in locations that do not appear logical. Greater ease of use would most likely increase usage among faculty and staff.”
- “It isn't easy to navigate and is just generally confusing when trying to find competitions, etc. The poor interface discourages participation.”
- “It seems clunky at times. Offers too many functions, most of which I have a hard time believing are consistently used by people.”
- “It should be able to input regular activities at one (or a few) clicks, not day-by-day, one at a time. The current portal takes too much effort to input information.”
- “Navigation to find info is not smooth or clear.”

Useful information is difficult to find. Healthy Boiler participants indicated frustration that the information they needed to complete the requirements to obtain their incentives was buried in the portal, rather than being easy to find. For example, “Make it more intuitive for the user...I currently just make a guess about where to find information.” Other comments were:

- “Cut the clutter and fancy graphics. It's difficult to locate needed information.”
- “Difficult to find the information needed.”
- “Figure out a way to not "bury" some of the links...some things are impossible to find; and once you do, you have a hard time finding it again.”
- “I never know where to go or what I have to do to enter my information.”
- “If there were online video which would walk you through the screens and information that is available even at a high level.”
- “The main page should be the information relevant to Purdue not the random wellness tracker that I do not use.”

Difficult to log in. Some participants felt it was difficult to log in to the portal in terms of having to frequently change their passwords, with some even suggesting that the login be connected to Boilerkey. Sample comments included: “Website design is horrible. It is very difficult to log on and navigate. It is extremely frustrating to try to use;” “Being able to login via Purdue ID like I already have to for every other thing at Purdue would be an improvement.”

Additional comments were:

- “Easier to log in, especially for the spouse.”
- “Easier to navigate, not having to change your password monthly...connect it to BoilerKey.”
- “Easier to reset password. I had a terrible time with clicking on the link then received an email with a code yet it wouldn't accept new password. I followed the instructions on how many characters, numbers, upper case letter and needing a special character yet still had issues.”
- “Every damn time I log into the site, it wants me to change my password. Then when I get to the "create new password" and type in my new password twice, it says, "Incorrect password." ???!!!!”
- “Have to change passwords too frequently.”
- “I can't login. Every time I request to get a new password, I never get an email. So, I don't/can't use HB. Too bad.”
- “It would be nice if it was the same log-in as career account or boiler key.”

Difficult to submit information. Some respondents indicated it was too much work to submit and/or enter information, had trouble with documentation, and/or did not receive confirmation that information was submitted. For instance, “Submitting activities can be a bit confusing to know if they were accepted and if you qualified for the incentive.” Some were also frustrated at the fact that they must take an extra step to confirm that they submit information after submitting it. For instance, “Too many layers, too confusing. Having to submit a form and then submit we did the form? That's silly.”

- “Completed all requirements, but could not enter all into "Healthy Boiler" website. Gave up!!”
- “I just started participating, and it was not clear what I had to do to submit my form documenting my physical. It should be clearer when the window for the physical has to be, and that the form should go with me to the doctor. I didn't know that so it took me extra trips, which wasted my time. The instructions just need to be clearer. For example: 1) go to your PCP between xxx and yyy 2) print and bring this form with you 3) after the PCP office completes the form, scan it and send it to zzz.”
- “It seemed confusing at times when entering information, and was not at all clear if it had accepted my entries.”
- “It was hard for me to follow how to submit physical information on the site.”
- “Not easy to input the data from my annual physical one at a time. Do a sample 1-minute video on how to submit the form to get reimbursed via my HSA. I got it done, but it took too long to figure out one click that was missing...”
- “Submitting information is confusing and after completing the status is not always updated. Is a great incentive that is just poorly executed in its end user interface.”
- “When entering the requirements for the incentive, you have to perform an extra step to indicate completion. I know of several people that missed this step. It is unnecessary and unclear.”

Issues syncing portal with health tracking devices. Finally, connecting particular health tracking devices with the healthy boiler portal was mentioned by some participants as a concern. For instance, “I would love it if it would sync with a Fitbit and myfitnesspal so tracking of events would be easier. Otherwise, I have to log exercises on both and healthy boiler.” Other comments included:

- “Create an app that I can easily click on to add an activity. I appreciate it syncing with my Apple Watch, but the process was not the easiest.”
- “Getting my Apple Watch hooked up to it was a bit of a process (and I'm still not sure if it actually is linked). Apple Watches are extremely common so I would think there would be a better direct link like there seems to be with Fit Bits.”
- “I cannot add/track my activity, because I do not have a Fitbit and my "knock off" brand is unlisted.”
- “If there was a way to connect with Fitbit for tracking activities in Healthy Boiler that would be great. I haven't looked at the programs to track physical activities and other (is there tracking for food?) for a while, but I'm not a fan of entering information in multiple locations.”
- “Making it talk (sync) with apple devices. I have all my workouts on my apple watch and I don't have the time to login to healthy boiler and log them all the time.”
- “While my activity tracker (fitbit) is synced/linked to my account, it only records steps. I find it tiresome to log in daily and record other programmed activities like, workout, yoga, running, etc. Surely, if it can read the step count, it can also transfer these other activities.”

Why Employees are not participating in Healthy Boiler (n=280)

About 88% of respondents indicating they will not participate in Healthy Boiler provided comments on their reasoning for refusing to participate. Common themes were not wanting to provide sensitive information, not having time or believing it is too much work, believing they are already healthy, and not being eligible.

Privacy concerns. The most frequently mentioned reason for not participating in Healthy Boiler was concerns with Purdue having access to health information. A sample comment included: “Do not want to give my data to an outside company (yes, I know it's "anonymized");” and “Invasion of privacy, should not ask for metrics from health screening.” Other comments were as follows:

- “I also have concerns about my privacy. I will not sell my personal information for that amount of money.”
- “It asks me to submit biometric data I am not comfortable giving to anyone other than my doctor. I do not feel there is no special privilege between employer and employee that protects my privacy and health data like between my doctor and myself. I do not think Purdue has by best interests as part of their policy and guiding principles. Purdue is looking to minimize its expenses at the cost of employee health and welfare. It wants to maximize revenue and mind share without realizing that a healthy work environment does that. It pushes the costs onto anything but itself. It does the minimal amount to respect and help its employees, faculty, and students. Our benefits have been in decline for over a decade. Incentivizing me to be healthier is one thing, but requiring me to give up data that could be used against me doesn't feel like much of an incentive.”
- “Privacy concerns - my employer has NO place in my personal health other than the insurance coverage choices.”
- “Privacy issues abound and there is no open process for me to view how the data that is gathered is used.”
- “The university should not have access to my health data. I think this is ludicrous and a huge violation of our privacy.”
- “While individual health data is not available to the institution, aggregate data is used to drive decisions that result in plan changes that I believe at times negatively impact individuals, including those that are fairly healthy and cost little to insure. This is a big concern to some whose salary suffer under the weight of such changes that have a less significant impact to those with higher salaries or those reaping the most benefit from medical services due to their poorer health conditions.”
- “You have no business requiring my medical information. It should be enough for my doctor to confirm that we have discussed my numbers and made a plan. The only reason for Purdue to collect this information is to penalize us in the future. I will NEVER participate in any plan that requires me to submit medical information to my employer.”

It's too much work or don't have time. Some employees mentioned that the Healthy Boiler program is too much work, or that they believe they are too busy for the program. For example, "Employees have to jump through too many hoops in order to participate. If Purdue is really interested in helping employees stay healthy (and not data collection), give us points for participating in healthy activities without all the tiers;" and "I do not have enough time to participate." Additional comments representing this theme were:

- "I don't have the time to mess around with the requirements. If you make trips to the corec part of the plan and get that data from the corec, I'm in. Otherwise, stop sending me the damn emails."
- "I like the idea of the program, but I do not have the time or energy/motivation to do the extra documentation. (For instance, I get an annual exam each year but I have never submitted this to get the financial incentive from the wellness program.) It would be preferable if this could just be tracked via my insurance records, without me having to submit something separate."
- "I looked into the program, and it seemed like a lot of red-tape to receive my "reward". It's not enough money for me to invest my time."
- "I'm not motivated to complete all the steps for the rewards offered. The incentive is not great enough for the time it takes. Checking boxes on a sheet doesn't make me healthy or not healthy."
- "It is too time consuming to enter my calories, carbs, protein or etc. on a daily basis."
- "It's too complicated and not worth my time."
- "Too much time required to successfully participate."

Already healthy. Some respondents appeared to find the program unnecessary for them because they already take good care of themselves. For instance, "I exercise and eat right. It is my responsibility to stay healthy." Other comments indicating employees are already healthy were:

- "Because since I developed cancer, I have dedicated myself to the healthiest lifestyle that I've ever had. I read about diet and exercise. I cycle over 6000 miles a year. I eat very well. My doctor says if it weren't for my cancer, I'd be his healthiest patient. I don't need Purdue to provide me with "incentives" to stay healthy because I know that I need to make the right choices if I want to continue my visit on planet Earth. I know way more than any of the info Purdue provides me."
- "Furthermore, I do not need a third-party to encourage me to be healthy. I have a healthy eating and exercise regimen and do not need the Healthy Boiler "wellness" program."
- "I don't need my employer to tell me to take care of myself. I have a family dr. and a wife to help me."
- "I exercise every day and am active."
- "I run 40 minutes per day and eat a healthy diet. The program cannot do more than I am already doing. I am in excellent health for my age making the program moot."
- "It does not meet my needs. I already live a very healthy lifestyle in terms of diet, work, active exercise, and medical care."

Not eligible or do not have HSA. Lastly, some employees are not eligible for an HSA or do not want/have one, so they believe it would not make sense for them to participate in the Healthy Boiler program. For example, “No monetary benefit to me. Not eligible for HSA incentive.”

- “Because adding money to my HSA account is not valuable. The HSA account is too restrictive and I keep as little in the account as possible because they deny claims on a regular basis, EVEN WHEN I GO TO SEE A DOCTOR THAT I HAVE SEEN MULTIPLE TIMES. It is too much of a hassle to negotiate or discuss with them and takes up too much time. That's why I don't participate. I don't want extra money in my account. I'd prefer some other discount.”
- “Because I can't have the HSA or HRA due to my age.”
- “Because with my health plan I cannot have an HSA account. It does not do much for me. Maybe I need more information on it.”
- “I am a benefits eligible employee but opt out of benefit coverage. I am covered by my spouse's insurance as cost is less & coverage is better. Because I am not covered under Purdue's insurance, it is my understanding I cannot enroll in Healthy Boiler. I think Healthy Boiler should be an option for every benefits eligible employee since we want to help ALL employees better themselves.”
- “I am not eligible because I don't use Purdue insurance.”
- “I currently use the Purdue Health Plan not a HRA or HSA.”

What could Purdue do to help you be healthy? (n=733)

About 46% of employees provided a response describing things Purdue could do to help them become healthier. Most often participants mentioned more flexible work hours, more fitness facilities, and decreased stress at work.

Promoting flexible work schedules. Employees desire having more days off, the ability to work remotely/from home, or flexible hours for work. Sample comments illustrating this theme included: “Shorter work weeks or more flexible hours than 8am to 5pm for my area;” and “Staggered work hours and options to work at home for jobs that could do so would help make employees have less time sitting at lights and more time getting work done.”

- “Allow flexible hours and better remote working options. I’m chained to a desk all day.”
- “Another thing Purdue could do is increase the number of personal days or allow for flexible schedules. At a previous job, we had a full flex schedule. In a bi-weekly period, staff could work extra time each day and have one day off within that bi-weekly period. This would be scheduled with management to ensure there weren’t staff shortages on specific days. This enabled staff to complete errands during this time but also significantly reduced the amount of sick days that employees took and there were no loss of hours to the institution. I think that this was a great initiative by the institution and personally I felt like this was beneficial to my mental health as well.”
- “Make full time employment 30-35 hours/week.”
- “Not demand that a 50 hour work week be closer to the norm than a 40 hour week. Staff has been cut and everyone continues to pick up more and more responsibilities that you can’t get things done in 40 hours. If you do leave at 5:00 you feel guilty that you didn’t get something done.”
- “Options to work remotely. Working in an office with others causes higher stress and increased chances of getting sick.”

Gym membership or exercise facility. As has been indicated in other parts of the survey and requested last year, participants would like cheaper or free access to a gym such as the CoRec. A comment demonstrating this theme is: “Encourage co-rec or gym membership (provide it or offer deeply discounted rates to join).”

- “Co-Rec is a great place for exercise but would like it if Purdue would subsidize gym memberships.”
- “Free co-rec membership or reimburse gym membership.”
- “Free or discounted gym membership for employees - exercise is one of the best forms of preventative medicine and I would exercise much more if I had a gym membership.”
- “Offer better (cheaper) access to health/exercise facilities.”

- “Provide a co-rec type of facility for faculty and staff. Have supervisors give flexibility to use the facility. Most faculty and staff do not want to exercise or share the same space with students.”
- “Support regular exercise by flexibility in my work day and lower cost membership options at the rec and wellness center.”

Less stressful work environment. Participants desire a more positive work environment that includes less stress and fully staffed departments. For example, “Address causes of work-related stress;” and “Fully staff all positions to reduce stress/work overloads.” Other sample comments were:

- “Hire another staff member in our area so we are not so stressed out and overwhelmed all the time.”
- “Honestly, create a less stressful environment to begin with. Purdue has very good options for treating stress and other related issues, but it's also the cause of most of it.”
- “If supervisors were held accountable, it would reduce work stress.”
- “Make sure there's enough staff to do the work expected. Thin staffing levels are stressful. Especially when we're expected to "do more with less", but my team of 8 dropped to a team of me and some 1/2 time help from a new employee. Something has to give, preferably not my health.”
- “Stress is very high, and morale is very low at my campus.”
- “The staffing levels are causing stress for those of us left and no wellness program is going to solve it. If anything the staffing levels keep people from having time to participate in wellness programs.”

More mental health services. Many respondents suggested the need for more mental health services. For instance, “Offering programs to aid those who either suffer from a mental illness or care for someone who does;” and “I do wish the staff had more than 6 visits to a counselor per year. 6 per semester would be better or just increase the number per year by a bit. It is a wonderful service and I believe would help even more if it was more accessible.”

- “Mental Health days and or be allowed to use sick days for mental health days.”
- “Mental health resources and medication management need to be easier to get to. Having someone at the CHL would be good. I’m not a fan of EAP for mental health assistance or treatment.”
- “Offer more mental health incentives. Guided work trips to do yoga, meditation, etc.”
- “Having 6 sessions at the Center for Healthy Living is nice, but it is not enough for someone that needs help. Many of us will start there and just as we get comfortable with the counselor we have to go see someone else. And then it costs money and we have to reestablish.”
- “Lower the cost of seeing a counselor and/or increasing the counselors here at the Center for Healthy Living.”
- “Improve mental health coverage and ability to access the assistance on campus/at Center for Healthy Living.”
- “More EAP staff to meet with. 2 cannot handle the amount of staff that Purdue has.”

Healthier 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: “Offer healthier food options at the various cafes on campus/in campus buildings.” Additional comments representing this theme were as follows:

- “Food on campus has become really unhealthy, especially the PMU. External vendors often provide high-fat high sodium options.”
- “Healthy dining choices...We need healthier food choices (and I’m not talking about another sandwich shop).”
- “I work in an office environment and I feel there are not many healthy (and affordable) food options or ways to adequately walk within a day. For example, I sit close to vending Cola/candy vending machines and am close to fast food restaurants. However, it would be awesome to have healthy options available as well.”
- “Less vending machines with junk food. Staff dining halls/cafeterias with better options than fast food.”
- “Offer healthy snacks in vending machines. Offer ideas for celebration foods other than cake and sweets.”
- “Provide discounts on healthy food places that are on campus. I would eat more on campus if I received a discount for healthy options. I used to work at a hospital that had a discount for food for being an employee, and an extra discount on top of that if the food was a healthy option.”

Purdue does not need to do anything. Several employees believe that Purdue already offers plenty of programs to help employees be healthy, or that Purdue should not strive to make people healthier because they believe that it is not Purdue’s responsibility to promote health among employees. For instance, “I don’t think Purdue could offer much more;” and “I don’t think this is Purdue’s responsibility.”

- “I believe there are enough resources offered. I have to make it a point to use those offerings and take responsibility for my overall health.”
- “I do not believe this is the role of my employer.”
- “I don’t feel it is Purdue’s obligation, each individual should take responsibility.”
- “I really feel like from what I’ve seen in the emails we receive there are many resources that Purdue provides for employees that if I have a problem I could find somewhere to turn.”
- “I think Purdue is doing what they can to provide the tools needed.”
- “I think Purdue offers many resources to help a person stay healthy but each person must also take responsibility for their health and well-being.”

Why Enrolled Spouse in Purdue Benefits (n=178)

Among employees who stated that they enrolled their spouses in Purdue benefits, about 96% provided a response for why they did so. Most commonly mentioned reasons for why they enrolled their spouses included they saved money and coverage was not good at their spouses' employers.

Saved money even with surcharge. The most frequently mentioned reason for still enrolling a spouse in Purdue benefits is the fact that enrolling in benefits with the spouse's employer was more expensive than paying the surcharge and enrolling the spouse in Purdue benefits. Sample comments included: "Yes, because his employer does NOT cover any of their offered healthcare, so he'd have to pay all of the expensive premium, which costs much more than Purdue;" and "Financially it made more sense; it was well over a \$1000 savings even with the new surcharge." Other sample comments included:

- "Because his premiums are very very high and his individual deductible is 10k. Even though his employer pays 52% it is still wildly unaffordable."
- "Because the cost of his insurance for just him is 3X the cost of the spousal payment for the year. So it would have put a bigger hardship on our family."
- "Even with the increase, the out of pocket maximum is cheaper through Purdue, though it's a significant amount of money."
- "It would have cost our family around \$13000 MORE (with premiums and separate deductibles for my plan and her plan) for her to enroll in benefits from her employer as opposed to enrolling through my plan."
- "We have 3 small children, and her cost of coverage on her own plan far exceeds the cost of adding her to mine (even with the \$1500 dollar marriage penalty). Plus if there happens to be a deductible issue, we would not be able to afford 20k for a deductible."
- "When analyzing costs, to pay both for the premium at Purdue to cover myself and my child, plus then paying a different premium for healthcare through my wife's employer, our costs would be ridiculously high. The fee for including a spouse was a good and smart decision in my opinion. I know that not everyone agrees with that sentiment, but I think it was wise of Purdue to move in that direction. I would be interested for this to continue to be an option in the future."

Poor coverage at spouse's employer. In addition to commonly mentioning cost savings, employees expressed that they enrolled their spouse in Purdue benefits because the benefits coverage at the spouse's employer was worse compared to Purdue. For instance, "My spouse's

employer coverage does not include vision or dental and is very expensive for the coverage it does offer;” and “Purdue offers better coverage.”

- “Purdue offered better coverage for a much better price.”
- “Purdue offers better health coverage than my spouse's employer at a better price. To get a similar level of coverage to Purdue, my spouse would be paying over 50% of their paycheck to their premiums.”
- “The coverage at spouse's employer was quite poor. Also, being on the same plan reduces the complexity of our health care decisions.”
- “The healthcare offered by his employer is very basic. It does not offer the same coverage I have through Purdue.”
- “They are a small business (less than 25 people) are not able to provide as comprehensive of coverage as Purdue.”

One plan is easier than two separate plans. Finally, some participants expressed that it was simply easier to have everyone on the same plan rather than splitting people in one household among two plans. For example, “Easier to be on 1 insurance as a family.” Additional responses from this category were:

- “Even though we already pay for a "family" plan, which covers my spouse, we paid the double charge simply because it was far more convenient than dealing with two plans. In a risk assessment this was also still more affordable.”
- “I do not want my family on two different insurance plans. It only adds confusion to our healthcare options to have part of the family on my insurance and the other part on my husband’s plan.”
- “I don't have the time, energy, or means to monitor two separate health benefit programs, with two separate deductibles, and two separate HSA/FSA accounts.”
- “I prefer that our family all has the same plan. Life is already complicated enough, but managing two insurance plans in our household is too much to do.”
- “It does not make financial sense to split a family and its health coverage into two separate accounts. Also, the benefits she was offered placed her current health providers into an out of network provider. Managing one health insurance company charges is easier for our family.”
- “Wrong to make a family pay 2 very high deductibles and MOP expenses and premiums. My husband has ALWAYS been with us on insurance and would have to switch providers that he has been with for over 12 years to go on his own insurance. Do not split families.”

Why Did Not Enroll Spouse in Purdue Benefits (n=256)

Approximately 88% of respondents who indicated that they chose not to enroll their spouse in Purdue benefits indicated a reason why they chose not to do so. Most often they mentioned not wanting to pay the spousal surcharge and/or perceiving that their spouse has decent insurance.

Additional cost of surcharge. Employees frequently mentioned that they did not enroll their spouse in Purdue benefits because the cost of the surcharge was more than they were willing or able to pay. For example, “Additional cost was too much;” and “Because it was less for him to go through his own insurance.” Other comments related to the cost were:

- “Because of the \$1,500 fee. Now our family is on 2 different plans, pharmacies, HSA accounts - it's a giant pain.”
- “Because we cannot afford an extra \$1500.”
- “Could not afford the extra premium.”
- “Due to the spousal surcharge, it was more cost effective for our family for him to be on his employer's plan.”
- “I cannot afford the surcharge for having my spouse on my health care benefits.”
- “I will not pay the extra that is required for my spouse.”

Spouse already has insurance. The other common response was for participants to indicate that they did not need to enroll their spouse in Purdue benefits because their spouse was covered by their employer, or that their spouse's benefits were better than Purdue's, especially regarding coverage. Sample comments included: “Already has comp coverage;” and “They have better coverage available through their employer and the spousal penalty made it not worthwhile.”

- “Coverage through his employer was cheaper and more comprehensive.”
- “He has better coverage at his employer. Purdue's coverage options are below those offered by his employer in quality and price.”
- “He has good coverage through his current employment.”
- “My spouse already has insurance through his employer.”
- “My spouse has a much better plan than Purdue's.”

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. Addressing open enrollment concerns regarding length of open enrollment period and HR's response time during open enrollment:

Though some employees commented that they were thankful to have extra time for the open-enrollment period this year, many still wanted more time to complete the process. Some participants also indicated frustration at not having a quicker response from human resources via phone and email during the open enrollment period.

Taking the feedback from employees into consideration, Purdue Human Resources could consider further extending the open enrollment period or justifying why it will remain at its current length in communication to faculty and staff. Regarding responses from HR during the open enrollment period, perhaps when employees call HR or send an email to hr@purdue.edu there could be an automatic reply or voice message that says that there is a high volume of employees contacting HR at the moment, and that provides a realistic expected time frame within which employees can expect to hear back from HR.

2. Providing clear evidence and justification for benefits changes:

Many employees were concerned about recent benefits changes such as having the tiered system for premiums, implementing the spousal surcharge policy, and getting rid of the PPO plan. These employees perceive these changes as unfair. Specific to the spousal surcharge policy, about one-third of married participants indicated that the spousal surcharge policy affects them negatively, and married participants had significantly negative perceptions of the policy overall.

Thus, providing clear evidence and justification in communications materials for employees regarding why these benefits changes were made and why future benefits changes are made would be helpful for employees to better understand the reasoning behind the decisions.

3. Optimizing current benefits versus adding new benefits:

When considering changes to Purdue benefits, a majority of employees prefer to keep the benefits they already have and seek to improve those benefits rather than having HR offer additional and/or new benefits. About 85% of respondents indicated they preferred optimizing current benefits over adding new benefits. Some of the open-ended responses to the question asking about benefits Purdue should offer also suggested that employees prefer to improve benefits they already have. For instance, "Don't add random little things. Focus on providing quality medical, dental, and vision;" and "Stick to the basics and work on lowering costs."

Therefore, it may be useful to consider focusing on basic benefits such as health, vision, and dental, and if these benefits are optimized, expressing to employees that these changes were made based on faculty and staff feedback from the open enrollment survey.

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

Employees still have a variety of perceptions of the Center for Healthy Living, ranging from positive, to neutral, to negative. Those who have had one or more bad experiences or who have heard of bad experiences from others are generally not willing to visit the CHL. Yet, those who visited the Center for Healthy Living in the last 12 months or who have visited the CHL more recently have more positive perceptions of the CHL than those who have not visited in the last 12 months or who started working here more than three years ago. Some employees still refuse to visit the CHL even though they know it will save them money, but about one-third of those who visited a PCP outside the CHL said they would have visited the CHL if they knew it would result in cost savings. Though there are still some negative perceptions of the CHL among employees, positive perceptions are continuing to form. Additionally, employees are gaining more knowledge about the CHL over time, considering a greater percentage of participants than last year knew that employees can establish a PCP at the CHL.

The increased awareness among participants that a PCP can be established at the CHL suggests that the CHL has done a good job communicating information about their offerings over the last few years, but increased promotion of the improvements made to the CHL would still be useful. For instance, continued use of patient testimonials from employees who have had a recent positive experience at the CHL, as well as encouraging faculty and staff to share their positive experiences with their coworkers may be effective strategies for creating more positive perceptions. Additionally, trying to highlight the CHL among new employees by strong promotion of the CHL in their new employee orientations would also be beneficial. Finally, because the affordability of visiting the CHL seems to be a selling point for some employees, affordability in addition to other features such as convenience and the fact a PCP can be established could be emphasized in promotional materials.

5. Highlighting benefits among newer employees who have more positive attitudes toward Purdue benefits:

In addition to the fact that employee participants who were hired in the last three years have more positive perceptions of the CHL compared to participants hired earlier, these recent hires also have more positive perceptions of Purdue benefits. For instance, employees who started working at Purdue more recently perceive that benefits are more fair, comprehensive, and a better value than those who started working here earlier.

As a result of these findings, perhaps benefits could be highlighted in new employee orientation, and newer employees could be recruited to help promote Purdue benefits by sharing testimonials.

6. Emphasizing mental wellness resources that are already offered:

Both quantitative and qualitative results suggested that employees desire more mental wellness resources. For example, about 43% of participants indicated they had poor mental wellness on five or more days in the last month, and open-ended responses indicated employees wanted more than six visits with a counselor through the employee assistance program (EAP) each year. Yet, a majority of employees did not utilize or were not even aware of mental health resources that were offered such as LiveHealth Online

Psychology & Psychiatry, myStrength by Anthem, or Purdue Psychology Treatment and Research Clinics.

Thus, Purdue human resources could work to further promote these underutilized mental wellness resources among employees.

7. Reevaluating the Benefits Ambassadors program:

Though the Benefits Ambassadors program has not received much attention this year because it is in a process of change, almost two-thirds of employee participants indicated they did not know about the program, and only about 10% knew who their benefits ambassador was. There is less knowledge of the Benefits Ambassador program compared to last year among participants. In the open-ended responses regarding the open enrollment process, some participants indicated that they wanted more information from their Benefits Ambassador or information about who their Benefits Ambassador was.

Human resources might want to reevaluate the Benefits Ambassador program in light of this lack of knowledge. Once a decision is made regarding the Benefits Ambassador program, the benefits team can communicate this decision to employees so they are aware of whether they can rely on their Benefits Ambassadors for information.