

Whereas the survey of Loyola University Chicago faculty comparing coverage, costs, and health outcomes arising from the change of health care service administrative management from Blue Cross Blue Shield to Aetna indicated significant difficulties in maintaining continuity of care and coordination of health care services, with displeasure, frustration, aggravation, and disrupted and untimely health care resulting from the lack of covered services, poor customer service responses, and rejection of claims by Aetna;

Whereas the figure provided in 2019 for university financial savings with this change was from \$1M to \$1.5M dollars, in the context of a nearly \$600 million dollar annual budget;

Whereas the recent survey of Loyola University Chicago faculty revealed Aetna's practices of reluctance to approve healthcare provider services, minimal in-network mental health care services, poor pharmaceutical coverage, and rates of approval and combative and/or delayed claims practices that have collectively resulted in significant added financial and health hardships for Loyola faculty, staff members, and their families;

Whereas a recent email communication dated October 4, 2021 from Loyola University Hospital to its patients and staff indicates that LUMC may no longer be an in-network provider with Aetna if contract negotiations are not successful by year end, which essentially would eliminate our own namesake hospital affiliated with our Loyola Stritch School of Medicine from being a site for our faculty and staff to obtain in-network cost effective health care services;

Whereas a recent statement from a Human Resources Update dated October 14, 2021 stated supplemental behavioral health resources would be added in 2022 through the EAP as a result of inadequate coverage and care for mental health services from Aetna after such services have been lacking for the past two years in the midst of a global health pandemic;

Whereas a recent statement from a Human Resources Update dated October 26, 2021 from Winifred Williams indicated "We remain confident in our partnership with Aetna as the University's health insurance partner" seems to blatantly ignore the established net impact of the change in health insurance providers;

Now, therefore be it resolved that Faculty Council, Staff Council, and University Senate urge that negotiations commence to return health insurance provider coverage to Blue Cross Blue Shield.