

College and University Professional Association for Human Resources
2012 Comprehensive Survey of College and University Benefits Programs
SURVEY FACT SHEET

SURVEY DESCRIPTION

- Survey was first administered in 2002.
- 2012 benefits survey opened for data collection on March 20 and closed on July 1.
- CUPA-HR appreciates the support and sponsorship provided by Aetna.
- Survey was conducted on Web using Surveys Online, CUPA-HR's data collection and reporting system.
- This year's survey included both health care and non-health care benefits.
 - **Health Care:** covered PPO, HMO, POS and Consumer Driven Health care plans, as well as prescription drug and dental plans. Detailed data collected on premiums, deductibles, maximums, co-insurance, services covered, co-pay amounts, and annual and lifetime limits. Survey also collected more general data on health care benefits, including the use of Wellness Programs.
 - **Non-Health Care:** covered basic life insurance, short-term disability, long-term disability, paid time-off, tuition assistance and defined contribution retirement plans - 403(b), 457(b), 401(a), 401(k). For all sections, cost and contribution data were collected as appropriate. Respondents were also asked about child care benefits, including subsidies.
- To review or download the survey questionnaire go to <http://www.cupahr.org/surveys/participation.asp>

PROFILE OF SURVEY RESPONDENTS

- Survey was completed by 354 institutions, including 15 systems reporting in the aggregate for all of their campuses. Survey represents 485 institutions in total.
 - Affiliation: 65% of respondents (229) were from private institutions and 35% (125) from public institutions. If the aggregate submissions of the 15 systems are considered, public and private institutions are almost equally represented in the results, 51% and 49% respectively.
 - Carnegie Classification: About 33% of respondents are from Master's, 23% from Bachelor's, and 23% from Doctorate institutions. Associate's and Special Focus institutions comprise 12% and 9% of respondents respectively
- Institutional Basics of Respondents
 - Median budget size: \$98M
 - Median student FTE: 3,547
 - Median faculty FTE: 261
- **Non-health care** component of survey was completed by 258 institutions, including 7 systems reporting in the aggregate for all of their campuses. Survey data for non-health care benefits represents 333 institutions in total.
 - Affiliation: 66% of the respondents (171) were from private institutions and 34% (87) from public institutions. If institutions included in the aggregate submissions of the 7 public systems are counted, private and public institutions are almost equally represented in the results, 51% and 49% respectively.
 - Carnegie Classification: About 35% of respondents are from Master's, 26% from Doctoral and 23% from Bachelor's institutions. Associate's and Special Focus institutions comprise about 9% and 8% of the respondents respectively. These percentages change somewhat when the institutions covered in the system aggregates are counted.

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- Institutional Basics of Respondent Non-Health Care Participants
 - Median budget size: \$105M
 - Median student FTE: 3,720
 - Median faculty FTE: 263

SELECTED FINDINGS

Survey report includes 36 aggregate and summary tables for the 2012 health care survey and another 21 tables for the 2012 non-health care survey. Detailed tables covering every survey question are also provided.

Cost of Health Care Benefits Continue to Rise

- Median annual cost of health care this year was about 6.7% higher this year than last for employee only coverage and about 6.0% higher for employee + family coverage.
- Median annual plan premiums increased to \$6,396 for employee only coverage and to \$16,840 for employees + family coverage.

2012 Median Annual Health Care Premiums for Employee Only and Employee + Family Coverage for PPO, HMO and POS Plans
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	Employee Only Coverage		Employee + Family Coverage	
	2012 Median Annual Total Premium	% Change Over Prior Year*	2012 Median Annual Total Premium	% Change Over Prior Year*
2012 vs. 2011	\$6,396	+ 6.7%	\$16,840	+ 6.0%
2011 vs. 2010		+ 7.3%		+ 7.3%
2010 vs. 2009		+ 6.7%		+ 7.0%

* For each cell, median determined for each plan type and the simple average median then calculated. Percent change is based on a comparison of each participating institution's current year premium to its prior year premium.

Other Health Care Findings

- Domestic Partner Benefits – Percentage of responding institutions offering health care benefits for same sex domestic partners increased for the eighth straight year to 57%, for opposite sex domestic partners remained about the same at 42%.
- Retiree Health Care Benefits – More than half of responding institutions provide health care benefits for retirees under the age of 65; slightly less than half do so for those 65 and over.
- Faculty/staff access to on-campus medical services – About a quarter of responding institutions provide faculty and staff access to on-campus medical services.
- Wellness Programs – More than 70% of responding institutions have a wellness program and slightly less than half of these have their own budget, the median budget size of wellness programs is \$30,000. However, only 21% know the percentage of faculty/staff participating in their programs.
- Strategy for Health Care Benefits – Only about a third of responding institutions have developed a strategy for what their health care benefits should be in 3 years.
- Health Care Vendor Selection – About 38% of responding institutions sought competitive bids. Of those, 19% changed vendors.
- Use of "Voluntary Benefits" – Most responding institutions offer voluntary benefits that have no direct cost to the institution. Specific offerings vary.
- Consumer Driven Health Plans – Percentage of responding institutions offering Consumer Driven Health Plans has increased from 11% in 2007 to 34% this year.
- Family Planning – Only about 30% of health care plans cover in vitro fertilization.

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- Prescription Drugs Out-of-Pocket Maximums – Only about 15% of drug plans have out-of-pocket maximums.
- Drugs Copay for Chronic Conditions – Only 11% of responding institutions have plans that lower or eliminate the copay for drugs needed for chronic conditions.
- Dental plan premiums – The median monthly premium for stand-alone dental plans increased 3% for employee only coverage and 4% for employee + family coverage.

Non-Health Care Benefits

- Provided Benefits - Almost all responding institutions provide basic life insurance, long-term disability, paid-time off, tuition assistance and retirement benefits. Only 63%, however, offer short-term disability.
- Childcare – About a quarter of responding institutions provide child daycare, but most do not subsidize the costs; even fewer provide sick-child daycare.
- Basic Life Insurance – All responding institutions offer basic life insurance to full-time employees; a much smaller percentage offers this benefit to part-time employees. Some institutions require employees to pay part of the premium. The median monthly cost per \$1000 of insurance continues to be low.
- Short-term Disability - A substantial percentage of respondents require the employee to pay the entire premium.
- Long-term Disability – About a third of the responding institutions require employees to pay some or the entire premium. About half of plans have a pre-existing clause. Almost half require the use of sick and/or vacation time prior to the start of long-term disability.
- Paid Time-Off - Median number of paid holiday days each year is 12 as is the median number of sick days. Only a small percentage of respondents have a formal Paid-Time Off plan combining vacation/sick leave and other benefits. Median number of vacation days varies by employee category (i.e. exempt, non-exempt, and faculty).
- Military Leave – Only 40% of respondents indicated that they pay the difference in salary for employees on military leave, and even then only for a short period of time.
- New Parent Leave – A quarter of respondents have paid leave for a new parent over and above vacation and sick leave.
- Tuition Assistance - Almost all responding institutions (96%) provide tuition benefits for courses taken by full-time employees at their own institution. Percentages are lower for spouses and children. Half or more have a waiting period for eligibility; length is shorter for employees.
- Retirement Benefits - A substantial percentage of responding institutions use more than one services provider for institutionally sponsored retirement plans. Less than half of responding institutions have a defined benefit plan, but most have a 403(b) defined contribution plan. Smaller percentages also have 457(b), 401(a) and 401(k) plans. Median average retirement plan expenditure per covered employee has increased since our 2010 survey.

ACCESSING SURVEY RESULTS

Survey results must be purchased and can be accessed in two ways.

- **Survey Report:** Provides a national-level summary, in table format, of data provided by all responding institutions. Report is published electronically in PDF format only.
- **DataOnDemand:** DOD is a hands-on application that gives institutions direct access to survey data—from the date of purchase until next year's results becomes available.
 - Allows users to create own comparison groups and conduct own analyses 24/7.
 - Structured reports available for all sections of survey; all users have to do is create comparison groups and run reports.

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- Those purchasing DOD receive the survey report free-of-charge. Report includes results for the 2012 non-health care survey.

To order survey results go to <http://www.cupahr.org/surveys/order.asp>.

- Survey report may be purchased by any individual or organization, regardless of survey participation.
- Purchase of DOD is restricted to higher education institutions; however, institutions may request access for consulting organizations on their order form.