

FEE MEASURES

Compulsory campus-based fees may be established, eliminated, or modified in an election in which a **two-thirds (66.6%) majority of a minimum voting pool of twenty percent (20%)** of the overall affected student body officially registered at the time of the election vote to approve or to modify the fee. The imposition of a compulsory fee is subject to concurrence of the Chancellor and approval of the UC Regents.

MEASURE A

OPERS Physical Education Classes

- New undergraduate compulsory fee: \$1.00/qtr.
- Fee begins: fall quarter 2000, permanent fee (no ending date).
- This question was approved for placement on the undergraduate ballot by resolution of the Student Union Assembly (SUA).
- If approved, this fee would generate approximately \$31,605 in 1999-2000.

MEASURE A BALLOT STATEMENT

\$26,605 would reduce fees by approximately 50% in the following classes making them available to a wider, more diverse population of students: lifeguard training (currently \$55), SCUBA (currently \$60), sailing (currently \$45), tennis (currently \$8), ballet (currently \$12), jazz (currently \$9), modern dance (currently \$12), and fencing (currently \$10).

\$5,000 would be used to add yoga, aikido, and swim so that more students who would like to learn these lifetime skills can enroll. Currently, existing classes are always full.

PRO/CON Statements for Measure A

Pro:

Author: Bob Hansen, Coach/Instructor - Physical Education

Large numbers of students are not able to enroll in physical education classes because of economic hardship and because the courses reach maximum enrollment early in the registration process. Physical Education classes provide valuable lifetime skills that can enhance one's mind and body. Yoga, aikido, and swim classes are very popular and this funding will allow 10 extra classes and provide instruction for approximately 300 more students.

Reducing physical education fees will allow more students to participate in fitness, wellness, and lifetime skills instruction.

THE STUDENT UNION ASSEMBLY HAS ENDORSED THIS MEASURE.

Con: None submitted.

MEASURE C

UC Student Association Membership

- New undergraduate compulsory Fee: \$1.00/qtr.
- Fee begins: fall quarter 2000 and ends after spring quarter 2003
- This question was approved for placement on the undergraduate ballot by resolution of the Student Union Assembly (SUA).
- If approved, this fee would generate approximately \$31,605 in 1999-2000.

MEASURE C BALLOT STATEMENT

The University of California Student Association (UCSA) is the statewide coalition of University of California undergraduate, graduate and professional school student governments. UCSA is also the officially recognized voice of the students before the UC Regents and the systemwide administration.

UCSA serves as a very important network of students from throughout the system working together to preserve accessibility to the University.

Currently, the Student Union Assembly (SUA) contributes \$15,000 annually to UCSA from its budget. (The budget comes from the existing Campuswide Student Government Fee of \$2.00/qtr.) For several years, the SUA has been unable to increase its contribution to UCSA regardless of an increased student population. UCSA's operating budget is completely made up of student fee contributions from all UC campuses. Their budget pays for a main office, a legislative office, a satellite office in southern California, four full-time staff, student interns, systemwide conferences, newsletters, and general operating expenses. A similar fee has been established for UC Santa Barbara undergraduates.

If this additional fee is approved, the SUA will use the \$15,000 that will be freed up in their Campuswide Student Government Fee budget for the following purposes:

1. Increase the number of student interns hired by the SUA
2. Provide compensation to SUA representatives
3. Increase UCSC student attendance to UCSA-sponsored conferences/meetings
4. Increase the number of events sponsored by the SUA
5. Creation and compensate a new SUA Officer position: Internal Vice-Chair

PRO/CON Statements for Measure C

Pro: None submitted.

Con: None submitted.

MEASURE D

OPERS Intercollegiate Athletics Support

- New undergraduate compulsory Fee: \$1.00/qtr.
- Fee begins: fall quarter 2000, permanent fee (no ending date).
- This question was approved for placement on the undergraduate ballot by resolution of the Student Union Assembly (SUA).
- If approved, this fee would generate approximately \$31,605 in 1999-2000.

MEASURE D BALLOT STATEMENT

Currently all UCSC students must pay an admission fee of \$1.00 to attend basketball and volleyball games. This measure would eliminate the need to charge students admission fees. Currently, club sports (baseball, rugby, sailing, ultimate, lacrosse, and cycling) receive zero funding. This measure would provide nominal funding each year to replace uniforms, equipment and pay for some travel for club teams. Currently students pay for all these expenses individually. This measure would also create 15-20 student employment opportunities within Intercollegiate Athletics (event management, marketing, web site development, training room staff, team managers). Lastly, two new sports would be added to the intercollegiate athletics program: cross country and golf. These are two of the most requested new sports received from prospective and current students. These sports are relatively inexpensive to add, and provide dozens of participation opportunities for students, while providing a well-rounded offering of intercollegiate sports teams.

Budget Breakdown:

1 Club Sports Fund	\$3,500
2 Student Jobs	\$5,000
3 Travel Assistance (Meals)	\$8,000
4 Training Room Supplies	\$5,000
5 Add Cross Country (Men & Women)	\$4,000
6 Add Golf (Men & Women)	\$4,000
7 General Assistance	<u>\$2,105</u>
Total	\$31,605

PRO/CON Statements for Measure D

Pro:

Author: Student Athlete Advisory Committee, Intercollegiate Athletics

Student life will be greatly enhanced with this measure, increasing a sense of community and identity for UCSC students and also providing greater access to social interaction between students, faculty, staff and community. Currently more than 10,000 people attend athletic contests and interact in a social environment that supports the university. This measure will eliminate the admission fee charged to UCSC students and provide opportunities for all students to attend events regardless of financial status. Additionally, 400+ student-athletes will directly benefit from much needed financial assistance for their teams. Specifically, this measure will:

- Create 15-20 student employment opportunities within Athletics
- Provide funding assistance for club sports (equipment, uniforms)
- Add cross country and golf teams for both men and women
- Provide funding for supplies for the prevention and care of injuries
- Provide partial funding for team travel to help pay for meals while away from campus

Con: None submitted.

MEASURE E

Transportation Fee Increase

- Undergraduate and graduate compulsory fee increase totaling \$21/qtr. over five years.
- The existing Transportation Fee is \$59/qtr. In Fall 2004, the total Transportation Fee would be \$80/qtr.
- Fee increases begin fall quarter 2000, permanent fee increases (no ending date).
- This question was approved for placement on the undergraduate ballot by resolution of the Student Union Assembly (SUA).
- If approved, this fee increase would generate approximately \$209,430 in additional transportation fee income in 2000-01.

MEASURE E BALLOT STATEMENT

In the five years since the current student Transportation Fee was approved in Spring 1995, SCMTD ridership has grown by more than 16% and campus shuttle service hours have increased by 50%.

The proposed fee increases will fund a 47% increase in SCMTD ridership, a 32% increase in campus shuttle service hours, acquisition of new and larger campus transit vehicles, and construction of new or improved campus transit pullouts and shelters. Improvements will be implemented approximately on the following schedule:

Fall quarter 2000:

1. Additional SCMTD service during peak commute times, to reduce "pass-bys"
2. Acquisition of larger shuttles to increase capacity, reduce stacking, reduce travel times, and reduce "pass-bys" on campus
3. Increase the number of Shuttles on Campus, which will reduce the number of "pass-bys" and possibly will reduce travel times

Fall quarter 2001:

1. Introduction of bi-directional SCMTD service on-campus, thereby reducing travel times to destinations on the west side of campus and minimizing the stacking of SCMTD and campus shuttles
2. Later hours of alternative transportation services

Fall quarter 2002:

1. Improved campus shuttle routes and schedules
2. Express bus service from the city of Santa Cruz to UCSC.

Fall quarter 2003:

1. Highway 17 service originating from the Metro Center providing better alternative transportation over the hill

Fall quarter 2004:

1. Invest in better pedestrian and bicycle transportation alternatives, making them safer and more convenient

PRO/CON Statements for Measure E

Pro: None submitted.

Con: None submitted.

MEASURE F

OPERS Recreation and Intramural Programs

- New undergraduate compulsory Fee: \$1.50/qtr.
- Fee begins: fall quarter 2000, permanent fee (no ending date).
- This question was approved for placement on the undergraduate ballot by resolution of the Student Union Assembly (SUA).
- If approved, this fee would generate approximately \$47,407.50 in 1999-2000.

MEASURE F BALLOT STATEMENT

Funding would provide a wide range of new opportunities for students, avoid elimination of existing programs, increase student jobs, and increase access to more students by decreasing the financial burden on student participants.

Budget Breakdown:

1	20% overall reduction in recreation program fees (for participants)	\$18,000
2	Funding for the Fall Festival	\$3,000
3	Funding for Recreation Clubs (publicity and supplies)	\$1,200
4	Increased hours for Drop-in Recreation in the West Gym	\$800
5	Leadership Training Programs.	\$1,200
6	60% reduction in IM league fees	\$5,000
7	IM game equipment renewal	\$2,000
8	CUIP Student Intern/Staffing	\$6,000
9	Student Officials (10 jobs)	\$4,000
10	Intramural Awards	\$2,000
11	Inter-college Series	\$2,000
12	Event Support	<u>\$2,200</u>
	Total	\$47,400

PRO/CON Statements for Measure F

Pro:

Author: Karol Fabrizio, Head of Recreation

This measure will increase the quality of life for students and meet the demands of a growing student population. Recreation and Intramural activities provide an outlet for balancing the stress of academia; a way to rejuvenate the mind body and soul. Opportunities for making friendships in a relaxed, supportive environment abound. Experiences are fun, challenging and foster camaraderie.

Measure F Will:

- Make the Recreation and Intramural programs more affordable

- Make the Recreation and Intramural programs more accessible
- Create student jobs, both work study and non-work study
- Increase participation.
- Increase quality of programs
- Provide UCSC students with comparable services and programs to other campuses
- Meet the demands of a growing student population

THE STUDENT UNION ASSEMBLY HAS ENDORSED THIS MEASURE

Con: None submitted.

MEASURE G

OPERS Staffing and Equipment

- New undergraduate compulsory Fee: \$.50/qtr.
- Fee begins: fall quarter 2000, permanent fee (no ending date).
- This question was approved for placement on the undergraduate ballot by resolution of the Student Union Assembly (SUA).
- If approved, this fee would generate approximately \$15,802.50 in 1999-2000.

MEASURE G BALLOT STATEMENT

Due to increased student demand, OPERS needs to hire additional student employees and staff to keep the east facilities open longer, establish a budget to purchase and replace sports & recreation equipment on a regular basis, and pay for additional student employees and/or student interns to staff an increasing number of OPERS-sponsored events held through out the year.

Budget Breakdown:

1 Keep east facilities open one hour longer	\$3,000
2 Purchase/replace recreation equipment	\$5,000
3 Hire CUIP Intern and student employees for events	\$7,800
Total	\$15,800

PRO/CON Statements for Measure G

Pro:

OPERS STAFFING AND EQUIPMENT

Author: Karin Morse, OPERS Facilities Manager

Increased demand for OPERS facilities and programs has put a strain on the facility center and it's ability to meet increased student program demands. This measure will extend all OPERS facility hours, increase student jobs and leadership positions, and improve the quality of student life.

Measure G will:

- Extend peak student use hours in OPERS facilities
- Replace outdated and worn-out recreation equipment
- Create student jobs, both work-study and non-work study
- Increase the quantity and quality of program services for all students

Con: None submitted.

MEASURE H

Repeal of the Junxion Student Restaurant Fee

- Repeals Undergraduate Compulsory Fee of \$.50/qtr.
- If Measure H passes, fee would end after spring quarter 2000.
- This question was approved for placement on the undergraduate ballot by resolution of six of the eight College Student Governments

- If approved, this fee would cancel the collection of approximately \$15,802.50 in 2000-01.

MEASURE H BALLOT STATEMENT

In spring 1998 undergraduates voted to assess themselves \$.50 per student per quarter to support a student-run restaurant and cultural center at the Student Center. This enterprise eventually became to be known as "The JunXion." This fee is set to expire after spring quarter 2001. If approved, Measure H would eliminate the fee after spring quarter 2000.

The JunXion has received approximately \$26,000 to-date from this fee, and is scheduled to receive approximately \$15,800 more next year if Measure H doesn't pass. In 1998 the Student Union Assembly also allocated \$11,000 in student fees to the JunXion. In fall 1999, the Student Center Governance Board voted to forgive \$1,000 in late rent payments for April/May/June 1999, and subsequently approved a \$6,000 loan from the Student Center budget to the JunXion to pay overdue bills, and to cover their payroll.

The JunXion is currently open 11 a.m. - 2:30 p.m. Monday-Friday.

Background Information:

Original text of the Spring 1998 Fee Measure:

Shall undergraduate students establish a \$.50 per quarter (\$1.50/year) fee beginning Fall, 1998 and ending after Spring 2001 to subsidize a student-run restaurant and cultural center in the UC Santa Cruz Student Center?

- This fee would increase the existing Campuswide Student Government Fee from \$2.00 to \$2.50 per quarter per student.
- The implementation of this fee is contingent on a signed rental agreement between the university and "Santa Cruz Students for Cooperatives" (SCSC), a non-profit corporation, prior to July 31, 1998.
- This fee would be used to pay the cost of rent (estimated to range between \$800-1,200/month) for use of the restaurant space in the Student Center for three years, beginning September 1, 1998. Income generated from this fee in excess of the cost of rent would be used by SCSC to subsidize other restaurant/cultural center expenses.
- Should the university or SCSC choose to end the Student Center rental agreement at any point prior to the stated expiration of the fee, the university would discontinue assessing the fee effective the following academic quarter.

Discussion:

This question was placed on the ballot by the Student Union Assembly. Measure C applies to undergraduate students only. This measure requires that a two-thirds majority (66.6%) of a minimum voting pool of twenty percent (20%) of registered undergraduates must vote in favor of the measure for it to pass.

This fee would subsidize rent cost for the first three years of a student-run restaurant and cultural center at the Student Center. Other expenses that this fee could be spent on include, but are not limited to: insurance, taxes, equipment, a garden, library, etc. This fee would allow the cooperative time (three years) to develop a customer base.

In the 1996-97 academic year, a group of UCSC students organized to create a student-run restaurant and cultural center in the Student Center, where the restaurant space has been vacant since Spring 1997. During this time, "Santa Cruz Students for Cooperatives" (SCSC) has worked with the Student Center Governance Board and other student organizations to establish a contract for the 1998-99 academic year. One of the problems facing SCSC is the lack of funding available to launch this endeavor.

Because this new fee will be collected as part of the existing Campuswide Student Government Fee, the money will be controlled and spent by students of UCSC.

If this fee does not pass, the student-run restaurant and cultural center would have to generate sufficient money to cover the space rental through other means.

PRO/CON Statements for Measure H

Pro: None submitted.

Con:

Authors: German Gallardo, Student Junxion Co-Owner; Ben Faber, Former Student Junxion Co-Owner; Uri Friedman, Bike Co-op Co-Owner

Just two years ago, students overwhelmingly (over 80%) approved a measure to give 50 cents a quarter to a new student owned enterprise, the Student Junxion. This start up money was set up to run for three years to help the Junxion get through the initial hardships. The Junxion represents the power of Student Ownership; where you DO NOT make your checks to the UC Regents! It is an ongoing experiment in co-operative ownership and like every new restaurant has seen its share of difficulties in its first two years.

The Junxion has never stopped developing while bringing students a myriad of events to complement the pizza. The Junxion has served as a cultural center for the campus, hosting numerous shows including Roots Late Night Cafe and uncountable festivals, talks, and art shows. Through its programs, it has also educated students about political and social issues, encouraging ever increasing diversity on this campus, and serving as a community space.

For less than it costs to buy a slice of pizza, you can help guarantee the success of this experiment in student ownership and Student Power Vote NO on Measure H. Save Student Ownership. Save the Junxion. Support Student Power.

MEASURE I

Graduate Student Health Insure Plan (GSHIP) Increase for Vision

- New graduate compulsory fee: not to exceed \$25/qtr. in the initial year
- Fee begins: fall quarter 2000, permanent fee (no ending date) and would be used for the sole purpose of providing vision insurance for all graduate students.
- This question was approved for placement on the graduate ballot by the Dean of Graduate Studies and resolution of the Graduate Student Association (GSA).

MEASURE I BALLOT STATEMENT

This measure would authorize the campus GSHIP Committee in cooperation with the UCSC Office of Community Development and Health to solicit bids for vision insurance with coverage comparable to that outlined below and select the most advantageous policy available within the cost limitation (\$25 per student per quarter) specified in the text of the measure. Normal annual increases in premium expense would be reflected in the GSHIP Fee and would not require additional student approval.

The new vision coverage would take effect in fall quarter 2000. Any graduate student employed as a Graduate Student Researcher (GSR) at 25 percent or greater for the quarter would have the GSHIP Fee paid by the same fund source that pays the GSR's salary. Any student receiving a full Regents' Fellowship or other campus fellowship, or a major external award (e.g., NSF, GAANN, Mellon), would have the GSHIP Fee paid by the fellowship in addition to the normal fellowship stipend. Payment of the GSHIP Fee for Teaching Assistants, Teaching Fellows, and Associates-In would be subject to negotiation between the University and the Association of Student Employees (ASE/UAW).

PRO/CON Statements for Measure I

Pro: None submitted.

Con: None submitted.

Sample Student Vision Insurance Plan

Following is an example of the coverage currently available in the student insurance market. Although any actual policy obtained by the campus may differ slightly in the benefits provided and

in the premium cost, depending on the coverage recommended by the GSHIP Committee, the benefits described below generally represent the minimum level of coverage that would be accepted.

Health Plan Benefits and Coverage Matrix Benefit Schedule--Plan II

THIS MATRIX IS INTENDED TO BE USED TO HELP YOU COMPARE COVERAGE BENEFITS AND IS A SUMMARY ONLY. THE EVIDENCE OF COVERAGE AND PLAN CONTRACT SHOULD BE CONSULTED FOR A DETAILED DESCRIPTION OF COVERAGE BENEFITS AND LIMITATIONS.

This document ("Benefit Schedule") describes the vision services that this vision plan covers, Copayment Requirements, and any benefits, exclusions, limitations of coverage and provisions which are different than those set forth in the Combined Evidence of Coverage and Disclosure Form ("Evidence of Coverage"). The Evidence of Coverage has been written in generic form to describe the provisions which are common to a number of different plan variations. If there are any inconsistencies in the provisions of the Evidence of Coverage and this Benefit Schedule, the provisions of the Benefit Schedule shall govern. Covered Services are also subject to the definitions, limitations, exclusions, terms and conditions stated in the Evidence of Coverage and the Group Agreement.

All of the following services must be provided by the Member's selected Participating Vision Provider in order to be covered under this vision plan.

Benefit Category: Copayment

DEDUCTIBLE: None

LIFETIME MAXIMUM: None

PROFESSIONAL SERVICES-

Examination (once every 12 months): \$10.00

Materials: 25.00

Frames

(once every 24 months up to a maximum wholesale allowance of \$35.00)

Spectacle Lenses

(once every 12 months)

Medically Necessary Contact Lenses

(once every 12 months up to a maximum allowance of \$250.00)

Non-Medically Necessary Contact Lenses (once every 12 months up to a maximum retail allowance of \$120.00)

OUTPATIENT SERVICES: Not Covered

HOSPITALIZATION SERVICES: Not Covered

EMERGENCY COVERAGE - is provided at the same Service Interval and Copayment as indicated above under Professional Services. Examination and Materials will be covered up to the maximum benefit limit indicated in the Reimbursement for Emergency Services Section.

AMBULANCE SERVICES: Not Covered

PRESCRIPTION DRUG COVERAGE: Not Covered

DURABLE MEDICAL EQUIPMENT: Not Covered

MENTAL HEALTH SERVICES: Not Covered

CHEMICAL DEPENDENCY SERVICES: Not Covered

HOME HEALTH SERVICES: Not Covered

OTHER: Not Covered

COVERED SERVICES

Examination

In accordance with professionally recognized standards of practice, this examination will include an analysis of the eyes and related structures to determine the presence of vision problems or other abnormalities.

Materials

Frames: If an examination indicates the necessity of spectacles, this vision plan will cover a frame at the service interval and up to the maximum wholesale frame allowance indicated above.

AVP does not cover costs above the maximum wholesale frame allowance; however, if a Member selects frames that are more expensive than this allowance, the Member will be charged the difference between the allowance and the wholesale cost of the more expensive frame, plus an additional service fee. The total cost represents a saving to the Member off retail prices.

Spectacle Lenses: If an examination results in corrective lenses being prescribed for the first time, or if a current wearer of corrective lenses needs new lenses, this vision plan will cover a pair of standard single vision, bifocal, trifocal or lenticular clear glass or plastic lenses that are Medically Necessary to correct vision at the service interval indicated above. Polycarbonate lenses are covered for children 12 years of age and under at no additional charge.

If the Member selects lenses with non-Basic features, the Member will be responsible for the provider's charges for the extra features. Note: Although this vision plan does not cover non-Basic features, AVP's Participating Vision Providers have agreed to a reduced fee schedule for these non-Basic features, therefore, Members are able to receive such items from Participating Vision Providers at favorable prices.

Medically Necessary Contact Lenses: Coverage for prescriptions for contact lenses is subject to Medical Necessity, Prior Authorization from AVP, and all applicable exclusions and limitations. Medically Necessary contact lenses are furnished at the service interval and up to the maximum allowance indicated above.

Non-Medically Necessary (Cosmetic) Contact Lenses: Prescriptions for contact lenses which are not Medically Necessary are covered at the service interval and up to the maximum contact lens materials and dispensing retail allowance indicated above.

Note: A \$20.00 fee may be charged for a broken or missed appointment when the appointment is not canceled with a minimum of 24 hours notice, and when the Participating Vision Provider determines that the Member did not have good cause for not canceling the appointment.

Reimbursement for Emergency Services: If the Member obtains services from a provider other than a Participating Vision Provider, the provider may require immediate payment for his or her services. The vision plan will cover up to the following maximum benefit limits, subject to the Service Intervals and Copayment shown in the Benefit Schedule:

Professional Services: Maximum Benefit

Vision Examination: \$40

Materials (Spectacles):

Single Vision Lenses: \$30

Bifocal Lenses: \$50

Trifocal Lenses: \$65

Lenticular Lenses, up to: \$125

Frame, up to: \$32

The above lens allowance is for two lenses. If only one lens is needed, the allowance will be one-half of the pair allowance.

Medically Necessary Contact Lenses: AVP will reimburse 80% of the provider's usual charges for Materials, up to \$175.

Non-Medically Necessary (Cosmetic) Contact Lenses: AVP will reimburse up to \$130 for all Materials and services including the vision examination.

Second Pair: Participating Vision Providers will provide a 20% discount from usual and customary fees for a second pair of frames and spectacle lenses (this can include a pair of prescription "sunglasses") to Members covered under a plan with a Materials benefit at the same interval as the first pair of frames and spectacle lenses.

The following services and supplies are excluded from, or limited in, coverage under this Vision Plan, as specified. (Note: All charges related to, or as a follow-up to services and supplies that are specified as excluded or limited below are likewise excluded):

Coverage limited to care rendered by selected Participating Vision Provider. All Covered Services must be provided by a Participating Vision Provider in order to be covered under this vision plan. This vision plan will not cover services and supplies provided by a provider who is not a Participating Vision Provider, except as specifically described in the section entitled "Emergency Vision Care" in the Evidence of Coverage.

Extras and Non-Medically Necessary services and Materials. This vision plan is designed to cover Medically Necessary visual needs rather than cosmetic desires. Charges for services and Materials that AVP determines to be (1) not Medically Necessary, (2) beyond the maximum Material allowance for frames and contact lenses indicated in the Benefit Schedule, or (3) non-Basic, are excluded. Non-Basic lens features include, special lens fabrication, Coated Lenses, tinted lenses, dyed lenses, laminated lenses, progressive lenses, Blended Lenses, oversize lenses, occupational lenses, and any other types of lenses or features that AVP determines to be non-Basic or not Medically Necessary.

Medically Necessary contact lenses. Coverage for prescriptions for contact lenses is subject to Medical Necessity, Prior Authorization by AVP, and all applicable exclusions and limitations. Generally, coverage (exclusive of the indicated Copayment) for contact lenses will only be authorized (1) for contact lenses to correct extreme visual acuity problems that cannot be corrected (to 20/70 in the better eye) with spectacle lenses, (2) following cataract surgery resulting in aphakia, (3) for Anisometropia of 4.0 diopters or greater, or (4) for Keratoconus, or other corneal irregularities. When covered, contact lenses are furnished at the same coverage interval as spectacle lenses under this vision plan and are in lieu of all other Material benefits. For Medically Necessary contact lenses, Participating Vision Providers have agreed to limit their charges to a reduced amount that is 80% of their usual retail fees. AVP will pay an allowance up to \$250 of that reduced amount minus any applicable Copayments. The \$250 allowance applies to all costs associated with obtaining contact lenses, including the examination, fitting fees and Materials. Members are responsible for any reduced amount charged by Participating Vision Providers in excess of the \$250 allowance plus any applicable Copayments.

Non-Medically Necessary contact lenses. Prescriptions for contact lenses which are not Medically Necessary are covered up to the maximum contact lens and dispensing allowance indicated in the Benefit Schedule. Non-Medically Necessary contact lenses, when covered, will be provided in lieu of all other Materials benefits at the same interval as spectacle lenses. The allowance applies to all costs

associated with obtaining contact lenses including fitting fees and Materials. If the Member selects contact lenses that are more expensive than this allowance, the Member will be responsible for the provider's charges in excess of the allowance.

Medical or hospital. Hospital and medical charges of any kind, vision services rendered in a hospital, and medical or surgical treatment of the eyes, are excluded.

Prescriptions from non-Participating Vision Providers. Participating Vision Providers are not required to fill prescriptions from non-Participating Vision Providers and such prescriptions will not be covered under this vision plan.

Loss or theft. Replacement due to loss, theft or destruction is excluded, except when replacement is at the regular time intervals of coverage under this vision plan.

Orthoptics, vision training, etc. Orthoptics and vision training, and any associated testing, subnormal vision aids, plano (non-prescription) lenses, lenses are excluded unless specifically identified as a Covered Service on the Benefit Schedule.

Second Pair. A second pair of glasses in lieu of bifocals is excluded.

Health, emotional or mental limitations. Services that cannot be performed because of the general health, physical, emotional, mental or behavioral limitations of the patient, are excluded.

Experimental. Experimental services and supplies are excluded. Experimental services and supplies generally include any procedure, treatment, therapy, drug, biological product, facility, equipment, device or supply which has not been demonstrated to be safe, effective and efficacious for use in the treatment of the illness, injury or condition at issue as compared with the conventional means of treatment or diagnosis. AVP, in its sole discretion, shall determine whether such service or supply is safe, effective and efficacious for the injury or condition at issue according to the criteria set forth in the definition of "Experimental".

No credits. This vision plan does not apply the allowable cost of Covered Services toward similar services and supplies that are not Covered Services.

Medical transportation. Medical transportation is excluded.

Care by relatives, etc. Services and supplies rendered by a person who resides in the Member's home, or by an immediate relative of the Member, are excluded.

Governmental programs. Charges for services or supplies for treatment of conditions where the Member is entitled to care or reimbursement through a government agency or program and for which such care is available are excluded, unless otherwise provided by law.

No legal obligation to Pay. Services or supplies for which the Member has no legal obligation to pay, or for which no charge would be made if the Member was not eligible under this vision plan, are excluded.

Fraud. If a Subscriber makes a false statement or omission as to the Subscriber's or Family Member's health status or history on application materials, AVP shall have no liability for the provision of coverage under this vision plan. In addition, any intentional or unintentional non-disclosure or misstatement of fact in application materials is cause for disenrollment and AVP may recoup any amounts paid for Covered Services obtained as a result of such non-disclosure or misstatements of facts.

Workers' Compensation, insurance and third party liability recoveries. Services and supplies that are otherwise covered under this vision plan are excluded to the extent that a Member realizes a recovery from any source, including settlements and recoveries derived from Workers' Compensation, a liable third party, or from other insurance coverage (e.g., homeowners' insurance, underinsured and uninsured motorists insurance). Coverage for any condition caused by another person's negligence or intentional act or omission is excluded. This vision plan will, however, advance the benefits of this vision plan, subject to an automatic lien against the recovery.

Employment Related. Any services or Materials as a condition of employment (e.g., safety glasses).

Medical records. Charges associated with copying or transferring vision records are excluded.

Mid-year vision plan changes. Benefits under this vision plan that are subject to annual limitations, will not be increased, even when a Member becomes covered under two separate AVP plan contracts during the same annual period.

Medications. Prescription and non-prescription drugs and medications are excluded.

MEASURE J

Graduate Student Health Insure Plan (GSHIP) Increase for Dental

- New graduate compulsory fee: not to exceed \$75/qtr. in the initial year
- Fee begins: fall quarter 2000, permanent fee (no ending date) and would be used for the sole purpose of providing dental insurance for all graduate students.
- This question was approved for placement on the graduate ballot by the Dean of Graduate Studies and resolution of the Graduate Student Association (GSA).

MEASURE J BALLOT STATEMENT

This measure would authorize the campus GSHIP Committee in cooperation with the UCSC Office of Community Development and Health to solicit bids for dental insurance with coverage comparable to that outlined below and select the most advantageous policy available within the cost limitation (\$75 per student per quarter) specified in the text of the measure. Normal annual increases in premium expense would be reflected in the GSHIP Fee and would not require additional student approval.

The new dental coverage would take effect in fall quarter 2000. Any graduate student employed as a Graduate Student Researcher (GSR) at 25 percent or greater for the quarter would have the GSHIP Fee paid by the same fund source that pays the GSR's salary. Any student receiving a full Regents' Fellowship or other campus fellowship, or a major external award (e.g., NSF, GAANN, Mellon), would have the GSHIP Fee paid by the fellowship in addition to the normal fellowship stipend. Payment of the GSHIP Fee for Teaching Assistants, Teaching Fellows, and Associates-In would be subject to negotiation between the University and the Association of Student Employees (ASE/UAW).

PRO/CON Statements for Measure J

Pro: None submitted.

Con: None submitted.

Sample Student Dental Insurance Plan

Following is an example of the coverage currently available in the student insurance market. Although any actual policy obtained by the campus may differ slightly in the benefits provided and in the premium cost, depending on the coverage recommended by the GSHIP Committee, the benefits described below generally represent the level of coverage that would be accepted.

Calendar Year Maximum: \$1,500.00 Per Person

Calendar Year Deductible: \$25.00 Per Person

- Student Dental is a dental assistance plan. Under this Plan, benefits for covered dental services are reimbursed on a "Usual and Customary" basis and pre-existing dental conditions are covered.
- You may obtain dental care from any dentist of your choice.
- Once you have satisfied the Continuous Coverage Limitation, no further Waiting Periods are required as long as you remain continuously insured under the Plan.
- Coverage remains in force, provided continuous Coverage Limitation has been met, even

when you are no longer a student.

BENEFITS

PREVENTATIVE SERVICES BENEFITS - PLAN PAYS 80% USUAL AND CUSTOMARY

- Initial Oral Exam
- Periodic Oral Exam
- Emergency Oral Exam
- Panorex Film
- Full Mouth X-Ray
- Single Film
- Additional Films
- Bitewing-Single Film
- Bitewing-Two Films
- Bitewing-Four Films
- Prophy-Adult (a)
- Prophy-Child
- Prophy with Flouride-Child

BASIC SERVICES - PLAN PAYS 50% USUAL AND CUSTOMARY

SIMPLE RESTORATIVE / FILLINGS *

- One Surface Amalgam-Primary
- Two Surface Amalgam-Primary
- Three Surface Amalgam-Primary
- Four Surface Amalgam-Primary
- One Surface Amalgam-Permanent
- Two Surface Amalgam-Permanent
- Three Surface Amalgam-Permanent
- Four Surface Amalgam-Permanent

ORAL SURGERY *

- Simple Extraction
- Additional Extraction
- Surgical Extraction
- Impacted (soft tissue)
- Impacted (partial bony)

(a) Maximum 1 procedure per 6 months

(b) Maximum 1 procedure per 36 months

* These benefits are payable after 6 months of continuous coverage

GENERAL INFORMATION

ELIGIBILITY

All eligible students are guaranteed acceptance. An eligible student is one who (a) is enrolled at least 6 quarter/semester hours for credit in a junior college, college or university; or (b) enrolled in a graduate school program sponsored by the college or university.

DEDUCTIBLE AMOUNT

The Deductible amount is shown in the Coverage Schedule. The Deductible is an amount of covered dental charges incurred by an insured person for which no benefits will be paid. The Deductible amount will apply to each insured person.

CALENDAR YEAR MAXIMUM

The maximum amount payable for all Eligible Dental Expenses in any calendar year is shown in the Coverage Schedule. The Calendar Year Maximum will apply to each insured person.

USUAL AND CUSTOMARY

This means a charge that does not exceed the general level of charges being made by other providers of dental services in the state where the charge is incurred.

CONTINUOUS COVERAGE LIMITATION

This is the period of time the insured person must be continuously covered under the Policy before the insured is entitled to be reimbursed for covered dental charges.

ELIGIBLE EXPENSES

Expenses must be incurred while the Policy is in force and the person is covered by the Policy. To be an Eligible Expense, the dental service must be performed by: (1) a licensed Dentist acting within the scope of his license; (2) a licensed Physician performing dental services within the scope of his license; or (3) a licensed dental hygienist acting under the supervision and direction of a Dentist.

NOTE: Your coverage will become effective the first of the month following receipt and acceptance of your fully completed enrollment card and valid premium payment.

EXPENSES NOT COVERED

No benefit will be paid for expenses incurred:

1. Any portion of a charge for a service in excess of the Schedule of Benefits.
2. For procedures that are not included in the Schedule of Benefits.
3. For overdentures and associated procedures.
4. For cosmetic procedures.
5. For the replacement of bridges, full and partial denture, crowns, inlays or onlays that can be repaired and restored to natural function.
6. Implants; and for (a) the replacement of lost or stolen appliances; (b) the replacement of orthodontic retainers; (c) athletic mouthguards; (d) precision or semi-precision attachments; (e) pre-prescription or take-home fluoride; or for (f) diagnostic photographs.
7. Oral hygiene instructions; and or (a) plaque control; (b) the completion of a claim form; (c) acid etch; (d) broken appointments; (e) prescription or take-home fluoride; or for (f) diagnostic photographs.
8. Services not completed by the end of the month in which insurance terminates.
9. Procedures that are begun but not completed.
10. Those services for which there would be no charge in the absence of insurance.
11. In connection with war or any act of war, whether declared or undeclared, or condition contracted or accident occurring while on full-time active duty in the armed forces of any country or combination of countries.
12. For care or treatment of a condition for which you are entitled to or eligible for benefits under any Workers' Compensation Act or similar law.

NOTICE: This example provides a very brief description of some important features of your Plan. It is not the insurance Contract, nor does it represent the insurance Contract. A full explanation of benefits, exceptions and limitations is contained in the Certificate of Insurance.