



Category:
Hospitals / Clinical Services
Student Affairs

Responsible Office:
[University Life](#)

Policy Title:
Student Health Services

Document Number:
3752

Effective Date:
August 15, 2003

This policy item applies to:
Community Colleges
State-Operated Campuses
Statutory Colleges

Table of Contents

[Summary](#)
[Policy](#)
[Definitions](#)
[Other Related Information](#)
[Procedures](#)
[Forms](#)
[Authority](#)
[History](#)
[Appendices](#)

Summary

This policy describes the requirements for the operation of student health services on state-operated campuses of the State University of New York (University) and the requirements for student health insurance. It also describes immunization requirements for measles, mumps and rubella as well as meningococcal meningitis vaccination education programs for all campuses.

Policy

Operation of Student Health Services on State-Operated Campus

Student health services, including counseling services, are an integral part of campus life. The specific nature of student health services provided by each campus should be directly related to the characteristics of that campus and the needs of the students. The campus should establish a Student Health Advisory Committee (SHAC) that represents the concerns of the students. Membership should include a significant number of student representatives in its body.

Campuses should utilize information and guidelines provided by the [American College Health Association](#). Although accreditation of the campus health services is not mandatory, it is strongly recommended that campuses seek and maintain accreditation through a national organization such as Accreditation for Ambulatory Health Care or the Joint Commission on Accreditation of Healthcare Organizations.

Each campus needs to have an annual plan in place for student health services that outlines its major goals, accomplishments and challenges as identified by the campus SHAC. The plan should be available for review by the chancellor or his/her designee. The SHAC should review and revise the plan on an annual basis to ensure that provision is made for but is not limited to the following:

1. Policies and procedures to ensure compliance with all applicable state and federal laws pertaining to the provision of student health services;

2. Direct physical and mental health care to the extent that such care and services are needed on campus and may be made available on campus. Local policies regarding eligibility for and scope of services provided should be developed and publicized;
3. A system for maintenance of a cumulative health record for each patient based upon health related contacts with student health services. This system should address all privacy and confidentiality regulations related to the provision of health treatment and services. This system should include policies regarding the length of time that records will be maintained and procedures governing their appropriate disposal.
4. A program that encourages preventive health care on the campus through voluntary participation in activities such as health screening and education;
5. A delivery system to provide emergency first aid in the event of an accident, injury or acute illness, or to provide for prompt and prudent referral to a facility external to the campus for such care;
6. A system of referral and utilization of available community health resources, both private and public, where needed and appropriate;
7. A program that addresses the need for quality assurance, including the use of peer review of medical and laboratory records and procedures; and
8. A three-year budget plan that identifies funding sources to support personnel, services and programs. Funding sources may include but are not limited to state funds, grants, student health fees, or fee-based services.

Furthermore, a president at each state-operated campus shall propose a health services fee after appropriate consultation with the SHAC and health services staff and in consideration of other sources of funding. The campus shall forward the proposed fee to the chancellor or his/her designee for approval. The campus shall assess the approved health services fee to all graduate and undergraduate students and assess a pro-rated health services fee to all part-time students. The president or his/her designee can exempt students if their course of study prevents access to the campus health services.

Campuses may charge reasonable fees for services outside those normally deemed part of the regular program of health services covered by the broad-based fee. These fees can be charged for selected services such as vaccinations, physicals required for activities outside of those covered under the health care fee, maintenance pharmaceuticals, laboratory tests, dentistry services, physical therapy or other specialized services.

For full details on the regulation of the health service fee, see Student Health Fees contained in the University policy, Fees, Rentals and Other Charges.

Health Insurance for Domestic Students

Each state-operated campus should decide if student health insurance will be mandatory for all domestic students. They may do so following these guidelines:

- The decision to establish such a program shall be made after review and consultation with the campus Student Health Advisory Committee;
- The decision shall be based on a consideration of the health needs of the student population, the existing health services on campus and the health services available in the community;
- The Student Health Advisory Committee on the campus shall be consulted on the type, extent and cost of coverage appropriate for the student body, including the option for participation in university-wide or regional consortiums or national insurance plans;
- Such programs shall complement and be coordinated with existing campus health services;
- Procedures shall be developed for exemption of students with comparable insurance coverage or who object to health insurance coverage on the basis of genuine and sincere religious beliefs;
- The program shall be competitively selected.

If a campus chooses to make student health insurance mandatory, then students need to either submit proof of insurance or purchase insurance through a college plan. All details of mandatory health insurance should be communicated to the students through appropriate publications and electronic communications.

Health Insurance for Students under International Exchange, Research and Study Programs

As required by federal law, all foreign students in the University's programs of international exchange, research and

study (J-1 Visa programs) must have health insurance purchased through the company selected by the State University of New York under the authority of the chancellor or his/her designee. See Student Health Fees contained in the University policy, Fees, Rentals, and Other Charges section of the SUNY Administrative policies.

Health insurance coverage for international program participants ensures that these individuals have sufficient financial resources to cover medical expenses during the course of their program participation.

Proof of Immunization for Measles, Mumps and Rubella

Students born on or after January 1, 1957 who plan to register for at least six semester hours or four quarter hours at a University campus will be required to provide proof of immunity to measles, mumps and rubella in accordance with standards approved by the New York State Department of Health – See Appendix A - College Immunization Requirements. Limited exceptions are granted for students who hold “genuine and sincere religious beliefs” which are contrary to immunization and for students for whom immunization would be physically detrimental or otherwise medically contraindicated. Although students enrolled for less than six semester hours or four quarter hours are exempt from these requirements, immunization is strongly encouraged by public health officials and may be required by individual campuses. Proof of immunity, in accordance with these requirements, is a condition of registration and enrollment rather than a prerequisite for admission. Students are allowed 30 days from the date of enrollment to present certification of adequate immunization. This deadline can be extended for not more than 45 days if the students are transferring from another state or country and can show good faith efforts to comply with the certification procedure. Students who fail to comply within 45 days may no longer continue their enrollment at the campus. See Related Procedure - Guidelines for the Implementation of Immunization Legislation (Public Health Law Section 2165). These Public Health Law provisions do not affect the Department of Health’s authority to require more extensive immunity procedures in the case of a measles, mumps or rubella outbreak. Notice of the immunity requirements should be incorporated into appropriate campus publications and electronic communications. Meningitis Immunization Educational information on meningococcal meningitis and its associated vaccine must be provided to all students. Form A - Meningococcal Meningitis Information Response Form and documents in Appendix B (Sample Parent Letter for Meningococcal Notification) and Appendix C (Meningococcal Meningitis Fact Sheet) have been approved by the New York State Department of Health for use by all University campuses. The forms may be used as is or adapted for the identity of a particular campus. A campus may design and use their own forms but the forms must be approved by the Commissioner of Health prior to their use. The meningitis education program is mandated for all students enrolled in at least six semester hours or at least four-quarter hours. Campuses must have signed responses within 30 days of the beginning of the semester. According to New York State law, students who do not comply with this mandate may no longer be enrolled at the campus. Notice of the meningitis immunization education requirements should be incorporated into appropriate campus publications and electronic communications.

Definitions

There are no definitions relevant to this policy.

Other Related Information

There is no related information relevant to this policy.

Procedures

There are no procedures relevant to this policy.

Forms

[Form A](#) - Meningococcal Information Response Form

Authority

The following links to FindLaw's [New York State Laws](#) are provided for users' convenience; it is not the official site for the State of New York laws.

[NYS Public Health Law §2165](#) (Immunization of certain post-secondary students.)

NYS Public Health Law §2167 (Immunization against Meningococcal Meningitis)

In case of questions, readers are advised to refer to the New York State Legislature site for the menu of [New York State Consolidated](#).

[Immigration Regulation for J-1](#)

State University of New York Board of Trustees Resolution 96-172, adopted October 24, 1996.

History

In a memorandum to presidents dated November 5, 1996, Associate Vice Chancellor for Student Affairs informed the presidents of comprehensive changes in student health services created by the Board of Trustees approval of Resolution 96-172 on October 24, 1996.

Trustee Resolution 96-172 also rescinded authorization of the mandatory student health insurance pilot program (authorized by Trustee Resolution 76-81 adopted on March 24, 1976) as well as authorization for the Chancellor to develop guidelines for mandatory health insurance at all state-operated campuses (authorized by Trustee Resolution 82-50 adopted on February 24, 1982). In place of the rescinded resolutions, the Trustees authorized guidelines for the president of each state-operated campus to follow should he/she decide to mandate health insurance on his/her campus.

Resolution 96-172 rescinded system-wide requirements for operation of student health services including the approval of a three-year plan for each student health center and that each student provide a medical history and complete a physical examination prior to enrollment (authorized by Trustee Resolution 82-49 adopted on February 24, 1982 and Trustee Resolution 90-156 adopted on September 27, 1990). In place of the medical history and physical requirements, the Trustees authorized each president to determine whether a health history and medical examination would be required for enrollment at a particular campus. In addition, the Trustees approved principles to govern the provision of student health services and associated costs. The principles are as follows:

- Campus based health services exist to serve students, based on needs assessment.
- Higher education has the unique opportunity to teach and promote healthy lifestyles among a large portion of the nation's population.
- Campus health services should provide access to delivery systems for primary acute illness and injury care, as well as specialized clinics and educational programs.
- The Student Health Advisory Committee (SHAC) is the primary avenue for student and campus community input into planning, delivery, and evaluation of health, counseling, and prevention services.
- The administration of each campus Health Service will develop an annual statement of major goals, accomplishments, and challenges. These statements will be written in conjunction with regular input from the respective Student Health Advisory Committee.
- Student Health Services should continue the concept of broad-based funding.
- The nature and scope of the health services provided should be developed and measured in conjunction with existing national standards.
- In an effort to ensure quality health care, campuses are advised to regularly assess all aspects of medical and educational programs, student satisfaction, and support of institutional mission.

Appendices

[Appendix A](#) - College Immunization Requirements

[Appendix B](#) - Sample Parent Letter for Meningococcal Notification

[Appendix C](#) - Meningococcal Meningitis Fact Sheet