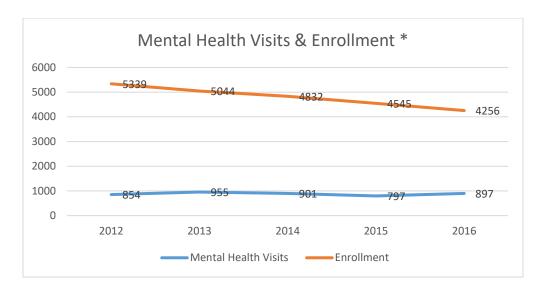
Health Services Utilization Data

The table below demonstrates increased workload compared to decreased enrollment. It is anticipated caseload will continue to increase. A fee increase will help us to best manage the increased health care needs of our students:

Program	2014-2015 Count	2015-2016 Count	% Change (+/-)
Medical	804	867	8% increase
Counseling	797	897	12% increase
Wellness	1566	2379	52% increase



* Enrollment = Unduplicated student headcount, taking 7 or more credits. Includes undergraduate and graduate, city college and university campus. Excludes student types = H (high school) or E (extended campus).

RATIONALE FOR FEE INCREASE:

- A fee increase is necessary to:
 - Maintain current operations
 - o Prevent the elimination or reduction of services being offered through Student Health Services (SHS), and prevent the reduction or loss of hourly staff positions at the SHS.
- Mental health counseling: MSUB currently funds 1.90 FTE counselors.
 - International Association of Counseling Services (IACS maintains standards for University and College Counseling Services) recommends colleges and universities have one counselor for every 1,000-1,500 students.
 - Collectively, the current Montana University System campuses average one counselor per 1,800 students.

- MSUB Fall semester 2016 headcount (undergrad and graduate) is 4,366 (per IR): therefore, per national recommendations:
 - MSUB should ideally have 2.9-4.4 FTE counselors on staff.
- 73% of Student Health Services' fee-based budget was used to pay staff salaries in FY2016.
 - Without a fee increase hourly staff positions will be reduced, wait times for appointments will increase, including the increase of wait lists to see a Mental Health Counselor, and costly referrals to outside facilities would increase.
 - Students are attempting to manage increased levels of stress and mental health issues that impact their ability to be successful.
 - Our current system is not able to meet student demand.
 - Part of this fee increase will go specifically toward counseling and mental health services.
- The increase also takes into consideration some of the anticipated enhanced services and education necessary to implement the recommendations made by the *Board of Regents Suicide Prevention Task* Force (September, 2016).
 - o The below data are of concern to MSUB, and with the above in mind, and potentially not able to implement recommendations made by the *Board of Regents Suicide Prevent Task Force*.
 - SHS is uniquely position to address the top 5 self-reported academic impacts through the
 American College Health Association National College Health Assessment (Fall 2016 N=452):

•	Stress	32%
•	Anxiety	26%
•	Work	25%
•	Sleep	20%

■ Depression 16%

Students reported experiencing the following in the past 12 months (any time within the past 12 months)

•	Felt things were hopeless	41.6%
•	Felt overwhelmed by all you had to do	83.4%
•	Felt very lonely	52.9%
•	Felt so depressed it was hard to function	36.3%
•	Felt overwhelming anxiety	57.0%
•	Felt overwhelming anger	37.0%
•	Seriously considered suicide	9.8%

o 43% of our students rate their own stress level as "More than average".