A. **Call To Order**
   - Chair Crowder called to order a regular meeting of the University Senate on March 19th, 2015 at 3:45 PM in the Faculty House. A quorum was present.
   - **Members in attendance:**
   - **Substitutes:**
   - **Guests:**
   - **Members absent:**

B. **Approve February Minutes**
   - A motion to approve the February minutes by Dick Taylor was seconded by Gayle Mallinger. The February minutes were approved unanimously with no comments or edits.

C. **Reports:**
   1. **Chair – Margaret Crowder**
      - Chair Crowder clarified the sign-in process.
      - University committee reports (for example, parking and transportation, library, benefits, finance, athletics, etc.) are due for the two remaining meetings; please send this as soon as possible.
      - Next month, senate officer elections and caucusing for standing committees will take place. New senators should attend for caucusing; current senators need to also attend the meetings.
      - The benefits report response packet was compiled over spring break and has over 100 responses from faculty. Chair Crowder worked with Eric Kondratieff to finalize the document and to give anonymity to the comments. The information is available and thank you for responding. There are many substantial issues and suggestions that came from this.

   2. **Vice Chair – Jennifer Hanley**
      - Departmental elections are extended due to weather and spring break.

   3. **Secretary - Heidi Alvarez**
      - No report.

   4. **Coalition of Senate and Faculty Leadership for Higher Education – Molly Kerby**
      - No report.

   5. **AAUP President - Eric Reed**
      - No report.

   6. **Advisory:**
a. Faculty Regent – Barbara Burch
   • The Board of Regents meeting is next week.
   • Discussions about the Confucius Institute are continuing. Laura DeLancey is chairing the committee. John Gottfried and ? were appointed by Dr. Ransdell to assist in the planning of the building. The faculty advisory body and the Provost will be involved.
   • ?? loss of the ?? membership due to budget constraints, and is hoping that it will stay current.
   • Dr. Burch has had more questions about people wondering about the budget situation and its possible impact. Uncertainties are often worse than certainties. The faculty role in solutions to solving budget problems is important.
   • Comments are very helpful to Dr. Burch, and Dr. Burch invites conversations after the next BOR meeting to inform her about upcoming responsibilities and her role on the board.

b. Provost – Gordon Emslie
   • Dr. Emslie thanked those who accommodated the snow and winter weather; he has heard very few concerns about how it was handled.
   • UCC recommendations – approved.
   • Colonnade #2 & #3 – both approved.
   • Part-time qualifications – approved.
   • Tuition reimbursement for full-time faculty members – approved.
   • Internationalization policy – approved.
   • Recognition Committee – amendment included optional face on banners – the wording “option to have” was included; parking spot was vetoed because professional development money cannot be used for parking; so it will be a cash award to use for parking if they choose to do so. Pending ratification of changes, we will begin these awards next year.
   • The Board of Regents committees meet a week from tomorrow. Action item #1.8 on the agenda will go to the board; it will make the Engineering Program as a stand-alone/free-standing program, distinct from the University of Kentucky and the University of Louisville.
   • April 17 the tuition proposal will be presented to CPE. Capped at 3% for full-time undergraduates, different for other students.
   • Budget Council met yesterday; they are looking at necessary revenue (fixed costs) and expenditure variables as part of the overall budget. The Provost is working with Budget Council – tuition variable/spending variable – fixed costs – what has to be done, vs. what needs to be done – State Retirement, Benefits costs. In the next month or so, the Provost’s Budget Council and senate council will both be involved.
   • Research Ad-Hoc Committees are convening and will discuss findings in a week or two and will move forward with a recommendation to the president.
   • SACS-COC is almost done. April 6-9 is the onsite visit. Monday will be at regional campuses, Tuesday and Wednesday the committee will be interviewing
various folks on campus. Thursday they will be compiling a report. The Provost urged the faculty to incorporate something with evidence and argument into classes.

- Reach Week will feature a university-wide research celebration in a few weeks. 400+ student presentations will occur at the research symposium, which is an outstanding event. Next Monday is the kick-off meeting and the presentations are a week from Saturday.
- The retirement reception for Dr. John Bonaguro is at 2:30 tomorrow; his last day is tomorrow. The new dean starts on Monday.

**c. SGA President – Nicki Taylor**

- The SGA president is at class during senate meetings and is unable to attend Senate this semester. Please take a look at her report, which is posted online.

**D. Committee Reports and Recommendations**

1. **Graduate Council: (Report posted, Endorsed by SEC)**
   - Beverly Siegrist, Chair of the Graduate Council, made a motion for approval of the Graduate Council report as posted. The report was approved unanimously by graduate faculty.

2. **Undergraduate Curriculum Committee: (Report posted; Endorsed by SEC)**
   - Ashley Chance-Fox made a motion to approve the UCC report as posted. The report was approved unanimously.

3. **Academic Quality: (Report posted; informational; Endorsed by SEC)**
   - Laura DeLancey made a motion to approve the informational report as posted. There was no discussion. The report was approved unanimously.

4. **Faculty Welfare and Professional Responsibility: No Report**
   - Patricia Minter thanks those who completed the survey and stated that the faculty welfare survey had an excellent result.

5. **General Education/Colonnade Implementation Committee: (Report posted - proposed Senate Charter revisions to replace GE with Colonnade; feedback requested, informational only)**
   - Lloren Foster stated that the General Education/Colonnade report is informational only; it implements charter changes that will have two readings. The SEC gave substantive changes/comments. The first reading will be next month. The informational report was approved unanimously.

6. **Budget and Finance Committee: No Report**

7. **Faculty Handbook Committee: No Report**

8. **Ad Hoc Committee on Research: (Report posted - informational; Endorsed by SEC)**
   - Molly Kerby made a motion for approval of the informational report by the Ad-
Hoc Committee on research. The report was approved unanimously as posted.

9. Ad Hoc Committee on Senate Charter Revisions: Meeting date(s) planned, March 16th at 3:15pm, AA Large conference room, WAB 2nd floor
   - The Ad-Hoc Committee on Senate Charter revisions met on March 16 at 3:15 and will meet again on Monday, March 23rd at 3:15 in the Academic Affairs conference room to make discussions on the charter; this is an open meeting. A blackboard site will be established. The full report with charter changes is coming next month. Discussion on making graduate council as a voting member of the standing committee in senate is continuing.

E. Old Business
   - There was no old business.

F. New Business
1. Colonnade courses for approval (ICSR 435; RELS 151; RELS 153; RELS 155; RELS 157; SUS 295).
   - Lloren Foster made a motion for approval of the above colonnade courses as a slate (2nd Angie Jerome). Gordon Emslie asked “at this stage, how many courses do we have at each level in colonnade”? Foster responded that he will have an answer by Tuesday. The entire slate of colonnade courses (ICSR 435, RELS 131, RELS 153, RELS 155, RELS 157, and SUS 295) were approved unanimously.

2. Beverly Siegrist introduced a resolution for consideration on the senate floor. The resolution was distributed in writing to each senator; Siegrist proposed a resolution “requiring access to health care for chronic illness for WKU employees related with morbid obesity and other chronic illnesses.”
   - The resolution reads as follows:

   **A Resolution Requiring Access to Health Care for Chronic Illness for WKU Employees Related to Morbid Obesity and other Chronic Illnesses**
   In 2013 the American Medical Association supported by the National Institutes of Health, the Centers for Disease Control, the American College of Surgeons, the American Society of Bariatric Physicians and others designated obesity and morbid obesity as a chronic illness and the number one national health problem. They support evidence-based obesity services such as behavioral therapy, approved medications, and bariatric surgery for individuals meeting the extensive clinical criteria for these services. A year later the AMA published Resolution 11 ‘Patient Access to Evidence-Based Obesity Services,’ further outlining appropriate care and education of health care providers, insurers, and the public.

   Obesity has been documented to be as costly as smoking in regards to declining health and cost to society. The CDC reports more than 24 million individuals have morbid obesity. Costs of untreated chronic morbid obesity are even higher than that of many other diseases, as it leads to the development of a host of complications such as: diabetes, cancer, heart disease, joint replacements, gastric reflux, hernias, sleep apnea, hypertension and other diseases.

   Current medical research has documented that while diet and exercise can lead to weight loss in some individuals, the long term results from diet and exercise are insufficient to result in any significant weight loss over a 5 year period in over 90% of people with chronic obesity. Continuing to only approve diet and excise as a treatment for chronic obesity will result in treatment failure in nearly every individual with this disease. Subsequently this will result in costly comorbid conditions which will have to be treated. This is why the current medical recommendations are to consider other therapies, including medications and surgery, for those who have chronic obesity with documented failure of diet and exercise therapy.

   The Affordable Care Act provides coverage for bariatric services and surgery as designated by each state. To date 29 states have selected to provide coverage. A study reported in the American Journal of Managed Care by Cremieux, Buchwald, Shikora etc. al (2008, 2010) found the mean surgery investment ranged from $17,000- $26,000 a fraction of the cost of coronary artery bypass, join replacement, or life time treatment of complications from diabetes. All of these treatments and conditions are covered by WKU/Anthem insurance. Studies related to cost, and outcomes of chronic obesity are well-documented as are cost of co-morbidity. It is not relevant what our benchmarks are doing, it is relevant that WKU as a community of leaders provide
appropriate chronic illness care for employees based upon research, best practices, and treatment plans recommended by health care providers.

WKU currently excludes bariatric surgery as treatment for morbid obesity despite the established screening guidelines by Anthem, recommendations from the medical profession, and evidence-based research on the positive results.

The exclusion of treatment for this disease disenfranchises a select population of WKU employees and results in the development of co-morbidities, emotional distress, decreased ability to participate in the workplace, and the inability to meet the health promotion goals identified as significant by the WKU community.

Whereas this is also an exclusion for a chronic illness for a specific population of WKU faculty and staff be it resolved that the:

WKU University Senate most strongly request insurance coverage for evidence-based treatment and bariatric surgery as recommended for WKU faculty and staff by their primary physicians based upon appropriate screening and evaluation as recommended by the medical profession to ensure successful recovery; and that
The selective exclusion be removed for these services beginning with the 2016 insurance year.
And, furthermore the University Senate, the WKU Benefits Committee, and other groups impacted by this and other chronic diseases be made aware of future exclusions of the above mention treatment and/or treatment for any other chronic disease impacting the life, work, and wellbeing of WKU employees prior to mandating this exclusion for coverage through the university insurance plan.

• Siegrist stated that she has had lengthy discussions with Human Resources and a conference call with Denise Cornelius; WKU elected to omit this from its plan.
• Siegrist thanked Margaret Crowder for sending out a call to the faculty for comments. Some have had to borrow from their retirement funds in order to pay for bariatric surgery. Siegrist stated that WKU’s omission discriminates against those individuals who have this treatment recommended to them by their doctors, and that the surgery has a tremendous impact.
• Siegrist stated that Tony Glisson asked for a future study; Siegrist said this is not necessary, as it is by research a small group.
• The resolution is to demand that this exclusion be removed for 2016.
• Siegrist made a motion to pass the resolution (2nd Hanley).
• Andrew West asked if there is an impact on the overall cost of the health plan, and do we incur greater cost for the plan. Siegrist said that the evaluation is $500 and the cost for the procedure is between $15,000 to $30,000; she said it is just like any other procedure – it does not add cost to the plan. WKU has a specific exclusion.
• Eric Kondratieff, a member of the Benefits Committee, said that the general consensus is that the additional cost might run between 1-2%, and they have not discussed cost or what the savings would be over time.
• Kondratieff said that the resolution is important to get the Benefits Committee to consider this; he encouraged staff to respond; the benefits committee is willing to listen to faculty feedback. Once this is given to the Benefits Committee, they will need to take time to read it and respond.
• Dick Taylor asked why was this relined, and are there other such areas that are also redlined? Is there a way of merging small groups who are being redlined together?
• Eric Kondratieff said he suggests that faculty give input and respond to requests and responses in order for the collective voice of our community to be heard. With a large amount of participants, it gives a larger voice to faculty.
• Regent Burch thanked Eric and Beverly, and stated that the last part of the resolution speaks to Dick Taylor’s question. At the end of the resolution, the issue of exclusion covers the issue of redlining.
• Molly Kerby asked how do we find out what else is not covered?
Siegrist said that she has been searching, and to her knowledge, this is the only chronic illness not covered; through some infertility treatments are not covered and some medications need special prior approval.

Kerby asked how she found out the exclusions. Siegrist said she had to repeatedly ask. Hanley said it should not be this difficult to find.

Kate Hudepohl said that something she likes about the resolution is that the last paragraph addresses the issue of transparency. We should not have to hunt.

Matthew Nee from Chemistry asked if we should make a motion to refer this to the Benefits Committee.

Siegrist responded that the 2016 benefits are being chosen now, and this resolution is time sensitive.

Patricia Minter said that a unanimous vote on this is the best way to refer the issue to the committee. This is the best way to get transparency. A unanimous endorsement will help to endorse transparency. She said if you want them to address this, vote yes as it is written to establish transparency that we should have had all along. A stealth way to laser people out of violation of the American with Disabilities Act; increase transparency and confidence of the campus community. Minter urged the senate to pass it.

Crowder said in the last paragraph, other exclusions for other groups, hearing aids are not covered. Kondratieff responded that this is standard; hearing aids are not usually covered beyond the age of 18. He also said that on the back of the benefits card, you can look these things up. Usually, you get a full benefits manual mailed to you every year or when the plan changes. We should have one, and we should request this.

Marilyn Gardiner said that without codes, there is no way to determine if rare diseases are not covered; Anthem won’t let you know what is covered without the codes.

Kondratieff said that you have to work through the insurance industry. The benefits committee is responsive if there is a big enough voice.

Matt Nee asked to what extent can a senate require, and should the wording be changed from require to request? Crowder responded that we cannot require, but we can state that the university should require. He made a motion (2nd Mike Smith) for a friendly amendment to change the word “require” to “request”. Kondratieff suggested that the friendly amendment could read “request in the strongest possible terms.” Nee accepted this wording of the friendly amendment. Following a vote of 44 yes, 6 nays, the motion to add the friendly amendment passed. There was no discussion on the resolution as amended. The resolution requiring access to health care for chronic illness for WKU employees related with morbid obesity and other chronic illnesses, passed unanimously as amended, with friendly amendment “request in the strongest possible terms.”

G. Information items

1. QEP – information about onsite visit; website - http://www.wku.edu/sacscoc2015/qep/
   - The QEP was submitted on March 2 to the SACS committee for review. The link is available on the QEP website for viewing and reading pleasure.
The large part of the visit will be to discuss the QEP and the campus’s knowledge of it.

A two-page cliffs notes version “cheat sheet” will be distributed to all faculty and staff. This is a faculty-driven process.

Many benefits of the QEP exist for faculty and students.

Familiarizing oneself with the QEP will offer opportunities for faculty release for those who want to get involved in implementation. Faculty will be recruited to participate in a professional development program. This will happen “rapid fire;” get grounding now, as it will be part of the professional development application process that begins next fall.

McElroy feels it is a good plan. It is a targeted initiative – it is like a grant proposal – not an exclusive list, but it is a list of things we can reasonably commit to. Faculty will have an opportunity to ask the committee questions on how to improve or extend. This is a targeted initiative, a list of what we can reasonably accomplish, and the committee welcomes feedback.

2. Policy 0.1020 International Travel Registration (post-Senate change; SEC concurrence was requested and granted)

3. Approval of new CLAC member – Mark Staynings

4. Selection of two faculty members for President Ransdell’s Ad Hoc Committee on Smoking – Cecelia Watkins and Dick Taylor

5. SGA Smoking Resolution

The next meeting is April 16. We are approaching the end of the term.

A motion to adjourn by Yvonne Petkus was seconded by Jennifer Hanley. The meeting adjourned at 4:41 PM.

Respectfully Submitted,

Heidi Álvarez
Secretary