

REPORTER

01.08.10 | reportermag.com

HEALTH CARE REFORM

How will it
effect students?

CRIME WATCH

Crime Watch is back
on the beat.

HURWITZ RETIRES

NTID President Alan Hurwitz
heads for Gallaudet



REPORTER

EDITOR IN CHIEF Andy Rees

| eic@reportermag.com

MANAGING EDITOR Madeleine Villavicencio

| managing.editor@reportermag.com

COPY EDITOR Michael Conti

| copy@reportermag.com

NEWS EDITOR Emily Bogle

| news@reportermag.com

LEISURE/FEATURES EDITOR John Howard

| leisure@reportermag.com

SPORTS/VIEWS EDITOR Sam McCord

| sports@reportermag.com

ONLINE EDITOR Emily Mohlmann

| online@reportermag.com

WRITERS James Arn, Derrick Behm, Brendan Cahill, Laura Mandanas, Moe Sedlak, Amanda Szczepanski, Chris Zubak-Skees

ART

ART DIRECTOR Kelvin Patterson

| art.director@reportermag.com

SENIOR STAFF DESIGNER Evan Anthony

STAFF DESIGNERS Jena Buckwell, Nicholas Tassone

AD DESIGNER Lisa Barnes

PHOTO EDITOR Steve Pfost

| photo@reportermag.com

STAFF PHOTOGRAPHER Alexandra Artusio-Glimpse

STAFF ILLUSTRATOR Jamie Douglas

CARTOONIST Jamie Douglas, Ben Rubin

BUSINESS

PUBLICITY MANAGER Erick Davidson

AD MANAGER Alecia Crawford

| reporterads@mail.rit.edu

BUSINESS MANAGER Elizabeth Bennett

| business.manager@reportermag.com

PRODUCTION MANAGER Jayadev Alapati

| production.manager@reportermag.com

ONLINE PRODUCTION MANAGER Chris Zubak-Skees

| webmaster@reportermag.com

ADVISOR Rudy Pugliese

PRINTING Printing Applications Lab

CONTACT 1.800.970.5406

EDITOR'S NOTE

INVINCIBLE

By some odd twist of fate, I have survived to the ripe old age of twenty-two. I have: had two surgeries; broken one bone; been involved in two car accidents; been obese; been under-weight; contracted swine flu, chicken pox, pink eye, strep throat, seasonal flu and the common cold; smoked cigarettes, pipes and cigars; drank too much; had second degree burns; and had an ingrown toe-nail. All in 22 short years. But I am still alive (knock on wood).

Growing up in Connecticut, I was never more acutely aware of the dangers of life. In a state whose capital was once known as "The Insurance Capital of the World," it's hard to avoid knowing words like "risk," "premium," "underwriting" and "liability." Like coal miners coming home covered in soot and dust, my parents came home drenched in the language of insurance. We were a state that was constantly worried about the welfare of the rest of the nation. If something bad happened, it was coming out of our pockets.

But today, I still manage to fall into an all too common demographic: The Invincible Twenty-something. You know who you are. You haven't been to a doctor in years (either because you can't afford it or you're too busy). If nothing's broke, why fix it? We are a generation that has been brought up relatively ignorant of the word "prevention." Only now, as some semblance of healthcare reform looms in Congress, are we hearing this word.

What does prevention actually mean? Preventative medicine means not waiting until something is broken. That's not just going to the doctor's office every two years and the dentist every six months. It means understanding your family's medical history and getting screened for conditions that you're at risk for. Did your grandfather die of a heart condition? Is your mother a breast-cancer survivor? Was your last partner STD free? These are questions you need to ask sooner rather than later.

In this issue, you'll find some interesting discussions on the state of healthcare in America. What worries me is that we're watching our healthcare system get overhauled, but how many people actually know why? While the immediate results of healthcare reform will have the greatest impact on our parents and grandparents, we will be dealing with this reform long after they are dead.

So while you're still young and relatively healthy (well, except for your liver), do yourself a favor. Get informed. Get tested. Stay alive as long as you possibly can, because none of us is truly invincible.

He MOR

Andy Rees

EDITOR IN CHIEF



"I see you've got your priorities in order."

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Cover design by Kelvin Patterson

CRIME WATCH: NOVEMBER 2009

compiled by Chris Zubak-Skees

NOVEMBER 1

11:30 a.m. A person touched a student inappropriately. The crime was logged as rape. The investigation continues.

NOVEMBER 2

Sol Heumann Hall. A secured bike was stolen from a bike rack. The bike was later recovered by the owner. An unknown person was riding it. The investigation continues.

NOVEMBER 4

Ellingson Hall. 1:40 a.m. A student hit another student in the face. The instigator was arrested. The investigation continues.

NOVEMBER 12

Perkins Green. 2:38 a.m. A student had drug paraphernalia in his possession. The case was referred to the student conduct process.

NOVEMBER 13

University Commons. An unknown person stole windshield wiper blades from a vehicle. The crime was logged as auto stripping. The case is closed pending new information.

NOVEMBER 14

Colony Manor. 12:47 a.m. A student hosting a birthday party reported that uninvited

guests arrived and were making too much noise. Damage was done by one of the uninvited students. Public Safety responded. The case is closed.

Colony Manor. 12:47 a.m. A student was observed urinating in public. The crime was logged as disorderly conduct. The case was referred to the student conduct process.

NOVEMBER 15

Perkins Green. 1:08 a.m. Students provided alcohol to underaged persons. The crime was logged as unlawful dealing with a child. The case was referred to the student conduct process.

NOVEMBER 19

University Commons. 11:35 p.m. Three international students were arrested by the Monroe County Sheriff for altering the date of birth on official identification documents and passports. The students attempted to have the altered documents printed at a Kinko's. Bail has been set. The case is closed.

NOVEMBER 23

Racquet Club. 11:05 a.m. A student covered up a smoke detector. The crime was logged as

recklessly endangering property in excess of \$250. The investigation continues.

NOVEMBER 29

C Lot. 9:30 p.m. Students were caught in possession of street signs. The crime was logged as possession of stolen property. The case is closed.

NOVEMBER 30

Ellingson Hall. A student reported that there was inappropriate touching by another student. The case is closed pending new information.

Information about these and other crimes should be reported to Public Safety at 585.475.2853 in non-emergencies or 585.475.3333 in emergencies.

November Crime Statistics

40 crimes reported
9 days where no crime was reported
9 reports of damage
8 cases of harassment
8 secured bikes stolen
2 stolen bikes recovered
3 drug-related incidents **R**

ALAN HURWITZ RETIREMENT TRIBUTE AND RECEPTION

by Derrick Behm | photograph by Alexandra Artusio-Glimpse



"I don't call this a retirement but a redirection for Vicki [his wife] and I — a new chapter in our lives," shared RIT Vice President and NTID President Alan Hurwitz during his retirement tribute at Panara Theater on December 11, 2009. Hurwitz was chosen to be the next president of Gallaudet University in Washington, D.C. His term commenced on January 1.

The amusing but moving tribute honored Alan Hurwitz for his many years of service within the NTID community. A video projected Hurwitz's life and journey with RIT in summary — adding humor about Hurwitz's "questionable" fashion sense and hairstyle during the early 80s to which his wife supposedly had helped him grow out of. Among countless examples of success, NTID currently has the highest enrollment in its history and federal funding is at an all-time high.

President William Destler said, "Hurwitz is a good man, and he is called to national service for the Deaf and hard-of-hearing. He has made NTID a special addition to RIT, and now

he has another commitment to complete."

As Gallaudet and NTID/RIT are considered rivals, Hurwitz wants to focus on cooperation between the two institutions when he begins his new job. "I believe that there will be a spirit of collaboration between Gallaudet and RIT ... I will support Gallaudet, but a part of my heart will always belong to RIT. The bottom line is I am loyal to the Deaf community."

A bittersweet parting from a home and community that they've known for 40 years, Vicki admits that it is difficult to leave behind her family and the community she had become so accustomed to, but she is wholly supportive of her husband. "I am happy for Alan and this decision. I am also pleased that Gallaudet looks at Alan for who he is as a person and for his skills."

Alan and Vicki Hurwitz plan to visit Rochester frequently to maintain family and community ties. There is potential for collaboration between Gallaudet and RIT, but what that will specifically be has yet to be said. **R**

RIT FORECAST

ROC FORECAST

compiled by Brendan Cahill

FRIDAY

08

WINTER WONDERLAND

Student Development Center, Rm 1310. 9 p.m. - 12 a.m. Spend your evening at this snow-ball. Food and fun will be provided. Cost: Finding a date willing to brave the cold.

SATURDAY

09

CAB SATURDAY NIGHT STANDUP: LAST COMIC STANDING FINALS

Ingle Auditorium. 9 - 11:30 p.m. The Comedy Troupe is searching for new talent! Come and laugh as the wannabe comics give it their all in the ultimate battle to tickle your funny bone. Cost: \$1.

SUNDAY

10

WOMEN'S HOCKEY VS. ELMIRA

Ritter Arena. 2 - 4 p.m. Cheer on the RIT women as they tear up the ice against Elmira College. Cost: Free.

MONDAY

11

SNOWMAN BUILDING!

Outside. All day. Shake off the Monday blues by building a snowman! But why stop there? Start a snowball fight, make snow angels, go sledding; if there's snow on the ground, take advantage of it! Cost: Free.

TUESDAY

12

GCCIS MINORS FAIR

SAU Lobby. 11:30 a.m. - 1:30 p.m. Computers are everywhere these days. It wouldn't hurt to expand your knowledge on how they work. Stop by the GCCIS Minors Fair and see if there's something here for you. Hey, a little learning never hurt anyone, right? Cost: Computer curiosity.

WEDNESDAY

13

MAKE IT A GAME NIGHT

Your dorm or apartment. All day. It's the middle of the week, and you've probably abandoned your friends to study or do homework. Take a break, pull out your favorite board game, video game or card game, and lose your worries in some friendly competition. Cost: Putting your game face on.

THURSDAY

14

OCASA PIZZA BOMB

OCASA. 6 - 9 p.m. It's almost Friday, but do the middle-of-the-week-in-the-middle-of-the-quarter blues have you down? Don't fret; unwind with the good folks at OCASA. Pizza, wings, refreshments and games will be provided. Cost: Antacids for all the free food you've consumed.

FRIDAY

08

SATURDAY

09

SUNDAY

10

MONDAY

11

TUESDAY

12

WEDNESDAY

13

THURSDAY

14

ROCHESTER PHILHARMONIC ORCHESTRA

Eastman Theatre. 26 Gibbs St. 8 p.m. Start the week off with some orchestral music. After all, studies show classical music is good for studying and heart health. Cost: \$22-62, \$75 for box seats.

FREE TOUR AND BEER TASTING

Rohrbach Brewery. 97 Railroad St. 9 a.m. - 3 p.m. Rohrbach's Brewing Co. is offering free tours and beer tastings at their new Rochester brewery on Saturdays. Cost: Free (21+ for beer tasting).

SUNDAY JAZZ NIGHT FEATURING THE RICK HOLLAND LITTLE BIG BAND

lovin'cup. Park Point. 7 - 9 p.m. Jazz night at the lovin'cup is special this week, featuring the Rick Holland Little Big Band. A versatile performer and veteran of five albums and numerous performances, nothing could be easier on the ears. Cost: Free.

TITANIC: THE ARTIFACT EXHIBITION

Rochester Museum and Science Center. 657 East Ave. 9 a.m. - 5 p.m. See artifacts from the "unsinkable" ship, recovered after 80 years on the ocean floor. This exhibit is preparing to leave Rochester, so get down there while you still can. Cost: \$15 (college students and seniors), \$17 (adults), \$14 (ages 3-18).

"ALMOST, MAINE"

Geva Theatre. 75 Woodbury Blvd. 7:30 p.m. As frigid weather encroaches on a small town in Maine, love blooms in the most unexpected ways. Opening today, "Almost, Maine," written by John Cariani, provides romantic comic relief during the coldest part of the year. Cost: \$22-45.

GUIDED TOUR: INNOVATORS

Washington Park. 80 Woodbury Blvd. 11 a.m. Need some inspiration for your next great idea? See how the innovators of Rochester have touched the world. Cost: \$12-15.

COMPLIMENTARY SALSA LESSON

Tapas Restaurant. 177 St. Paul St. 9:30 p.m. Spice up your dance moves with some salsa dancing. Cost: Free (21+).



HOW TO SOLVE A RUBIK'S CUBE

So you're at a party, surrounded by fellow geeks. It's 3 a.m. and the Mountain Dew pyramids are stacked high. The weak-minded have already gone to bed, but you're ready to get wild. It's time to whip out the big guns. "Hey, who wants to play a game?" you excitedly ask your companions.

One thing leads to another, and in the blink of an eye, you're being challenged to a battle of wits. Unfortunately, it's not the "Risk" or "Settlers of Catan" game you were hoping; it's not even a board game. Instead, you find yourself with a Rubik's cube in your hands and your pride on the line.

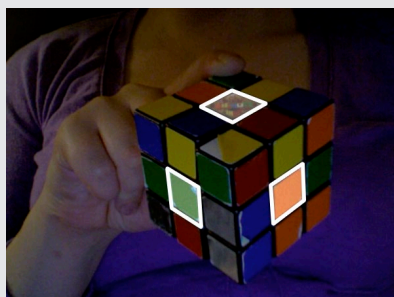
What do you do? Sure, you could run into the next room and try to peel the stickers off real quick. But you can do better than that, can't you? You don't need such tawdry tricks to get this thing straightened out.

Ladies and gentlemen: the layer method. It's not the quickest technique out there, but it is one of the easiest to learn. A word of warning: You'll want to get some practice in before showing this off in front of people. There's a bit of a learning curve. Now, get up and get your geek on.

ORIENTATION

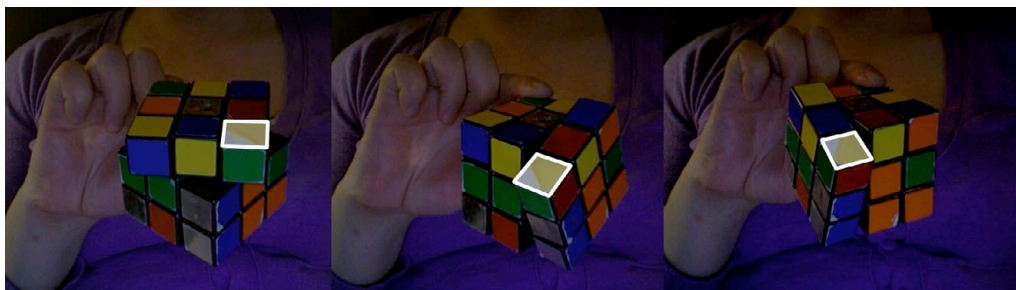
CENTER SQUARES

The center square on each side does not move. This is the most important thing to know when attempting to solve a Rubik's cube. On a standard cube, the white side is opposite the yellow side, orange is opposite red, and green is opposite blue. Before you begin, take a good look because you will use these stationary squares to orient yourself from here on out.



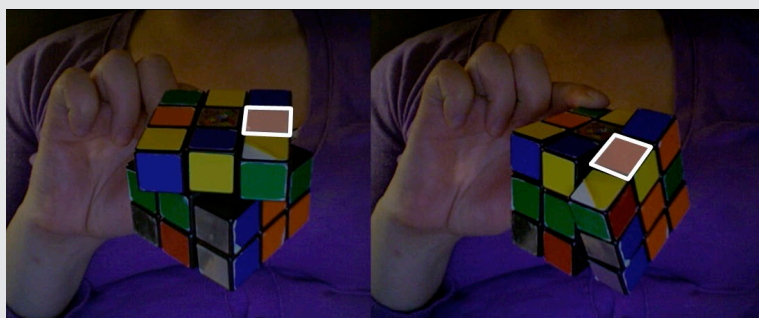
CORNER SQUARES

Corner squares are the easiest to place because they have the freedom to rotate in three axes.

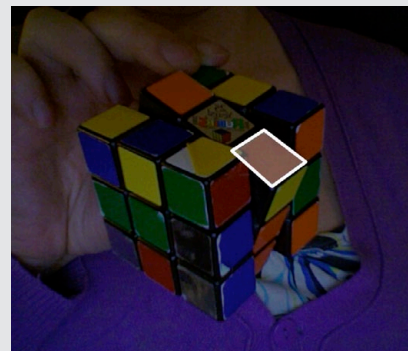


CROSS PIECES

Cross pieces are more difficult to place, as they only easily rotate along two axes.

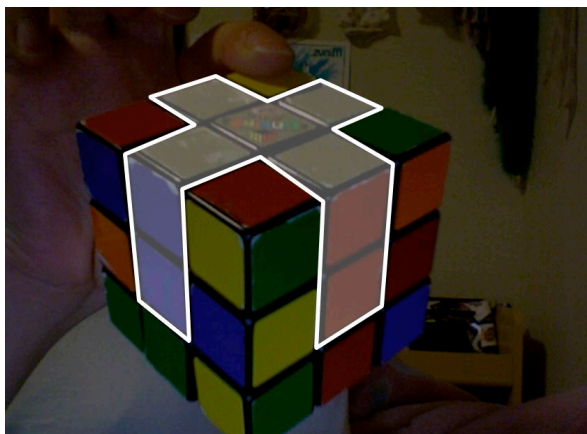


Technically, you can move them along a third axis (as shown), but it isn't a very natural motion. You will typically do this in two moves: First, rotate one edge 90° in one direction, then rotate the other edge in the opposite direction afterward. Now that we're oriented, let's start solving this sucker.



STEP 1: CROSS

First, you must solve a cross. By the end, your cube should look like this:



This example solves the white side first, but you can start with any color. There's nothing to screw you up yet, so completing this first step can be done intuitively, without any special moves.

The trick to solving the cross is noticing the two-color pieces along the edges. (Ignore the three-color corners pieces for now.) Look at both colors; when you place a white cross square, you need to make sure you are also matching the other side's stationary square color. If it doesn't match, flip the white side to the bottom and rotate until you get the squares right.

Matching up both squares now will save you a lot of work later on. As you recall, cross squares are the most difficult type to place; this is why it's important to do these now, before you have anything else to mess up.

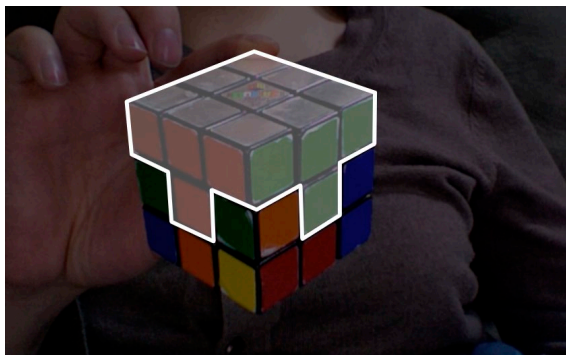
One thing to keep in mind: even if the other pieces seem to be falling into place, ignore them. If you attempt to work around them, this method isn't going to be successful. Just work on solving the step you're on; we'll get to the others eventually.

STEP 2: TOP LAYER

Keeping the cross intact, place the three-color corner pieces. As in the last step, make sure you match each color to the stationary square's color on each side.

If you are having difficulty with this step, it's helpful to work around the cube in one consistent direction. In this example, I solved green, then worked counterclockwise around the cube to get orange, blue, and finally, red.

At the end of this step, you will have solved one-third of the cube!



STEP 3: MIDDLE LAYER

Turn your cube over, bringing your completed side to face downward. At the end of this step, your cube should look like this:

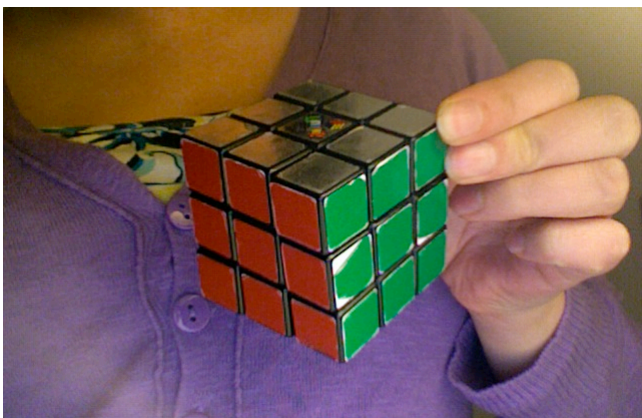
Now, it is time to place the remaining cross squares. In the same way you solved the cross in the beginning, you need to match both colors on each side. Turning the cube upside down helps you see which pieces will need to be brought into the middle layer.

This step is usually the most difficult to solve intuitively. If you truly get stuck, there are a plenty of algorithms listed online to solve common configurations. I recommend giving it a go on your own before you start memorizing turn sequences. Essentially, you are performing the same motions as in the first step; the differences are you have more squares to consider and your maneuvers will likely require a few more turns to keep the bottom face intact.



STEP 4: BOTTOM LAYER

Almost done, now. After getting the final cross locked in, twist the corners in place. Congratulations! You've solved your Rubik's cube. Your geek cred lives to see another day. **R**





THE PROVINCE

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REPORTER RECOMMENDS : flickchart.com

The last thing you probably need is another website to distract you from your ever-growing to-do list. However, this one is worth giving up Farmville for something somewhat productive. (Gasp!) Flickchart is most simply described as a more interactive IMDb or Rotten Tomatoes. Users are presented with two movie posters and are asked to choose the title they prefer. There is no skip button because, as the site states,

"Skipping goes against our core belief that you must choose, no matter what." If you haven't seen a film, a new title will be presented. Your results are then ranked, both personally and site wide. You can compare and contrast your Flickchart friends, and with the site's top results. So, which do users prefer? "The Dark Knight" or "Fight Club." Check out <http://flickchart.com> to find out.

MOST EFFECTIVE STRESS MANAGEMENT TECHNIQUES

It might seem like the blissful rest of holiday break is now a distant memory and that the stress is piling up at an alarming rate, but *Reporter* has you covered. Here's a list of some of the most beneficial stress relieving techniques according to Americans in 2009.

DE-STRESSING METHODS:

Listening to music – 49%
Exercise/going for a walk – 44%
Reading – 41%

Television and movies – 36%
Spending time with friends and family – 36%
Video games and Internet use – 33%
Naps – 32%
Prayer – 32%
Eating – 28%
Hobbies – 27%
Church/religious services – 19%
Shopping – 15%
Smoking – 14%
Drinking – 14%
Sports – 10%
A massage or spa visit – 10%
Meditation or yoga – 7%
Gamble – 4%

See a mental health professional – 4%
Information according to a "Stress in America 2009" survey by the American Psychological Association.

WORD OF THE WEEK

GRAUPEL:

n. granular snow pellets — called also soft hail.

When you're getting smacked in the face with some wintry graupel this season, stay positive by remembering it's always better than getting sprinkled with R. Kelly's urine.

Definition taken from <http://merriam-webster.com>

CARTOON BY JAMIE DOUGLAS AND BEN RUBIN



QUOTE: "Not only did I get an A in music, but I got an A in ladies." - R. KELLY ON HIGH SCHOOL

SUDOKU

Difficulty Rating: Medium

						6		3
						8	2	9
	4	8		9				
8								
2	9			4				
				5	7			1
			5		6			
					8			
	5	1		2				4

OVERSEEN & OVERHEARD



Vintage RIT-branded Chevy.

"Apples have seeds. Therefore, you're pregnant."
FEMALE STUDENT
IN BATES STUDY
CENTER.

"My whole life, my whole soul, my whole spirit is to blow that horn..."
A STUDENT'S
TATTOO.

"He asked me if I would shave his entire body, but I didn't know what to say."
MALE STUDENT TO
FEMALE STUDENT.

Send your Overseen and Overheard texts or emails with the phrase "Overseen and Overheard" in the subject line to leisure@reportermag.com. Or submit them via Twitter by directing submissions @reportermag with #OnO.

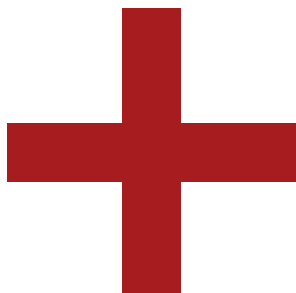
NOW ACCEPTING TWEETS!

CHANGES AHEAD FOR COLLEGE STUDENTS AND HEALTH INSURANCE

by Laura Mandanas

In the United States, medical bills cause 60 percent of all bankruptcies. Worse, premiums are rising faster than both wages and inflation, and they show no sign of slowing. Though college students may sometimes be dismissed as a privileged, carefree group that doesn't need to worry about health insurance, the reality is far from that. The commonly repeated aphorism is just as relevant to college students as the rest of the population: In the United States, you're just one major illness away from financial ruin.

Our country is on the brink of historic change. Two months ago, the House of Representatives passed a bill proposing a far-reaching overhaul of the nation's health care system; last month, the Senate followed suit with a modified health care reform bill of its own. When the Senate returns to session on January 19, Democrats will work to reconcile the differences between the two bills and



enact a total health care overhaul in time for President Obama's State of the Union address at the end of this month. Extending coverage to an estimated 31 million individuals and reshaping one-sixth of the nation's economy over the next decade, the proposed changes in both bills will affect virtually every American.

Although there is a great deal of debate on many aspects of health care reform, one thing is clear: There is plenty of room for improvement in our current system, both on a national level and here at RIT.

INSURANCE LIMBO LAND

"Do you have insurance?" Dr. Brooke Durland, RIT Medical Director, asks students coming into the Student Health Center. The answer is often a shrug, saying, "I don't know. I guess so." Durland will then go through every card in the student's wallet, or call his or her parents. Sometimes, insurance information is listed on a student's freshman year health history form, but it may be outdated.

"Part of our challenge is we have young adults

who haven't necessarily had to deal with the health care system or manage insurance," said Durland. "So as we're trying to provide care and evaluate a problem, we're also trying to educate them ... Part of our job is helping students become more savvy about being an educated healthcare consumer."

For many students, college marks a period of transition from dependence to independence. Many leave their childhood homes, entering an environment where they may be exposed to drinking, drug use, and/or risky sexual behavior for the first time. On top of this, chronic sleep deprivation and high levels of stress make for a population with a unique set of health concerns.

According to the Commonwealth Fund, a nonprofit research organization, young adults are the fastest growing age group among people who lack health insurance in the United States. They are disproportionately represented among the uninsured, and nearly two out of every five college graduates can expect to spend at

least some time uninsured within their first year after graduation.

"There are many plans that cover children," said Durland. "But then at the magic age of 18, they're no longer children. And if they're fortunate enough to be in college but their parents aren't covered on a work related plan, then they're in this limbo land until they can find a job that then covers them."

Within this limbo land, the Government Accountability Office estimates that approximately 1.7 million (20 percent) college students aged 18 through 23 were uninsured in 2006. Since nearly 40 percent of college students are 25 and older, however, this significantly underestimates the uninsured college student population. Including those 24 and older, the total number of uninsured college students is estimated to fall somewhere between 4 and 5 million — the largest, cohesive group of uninsured Americans.

THE UNINSURED STUDENT

Although most college students are young and healthy, Durland stresses that health insurance is still an important concern. Aside from the high costs that a student can incur, “I’ve seen the consequences and the life choices that people make when they don’t have insurance. It doesn’t encourage preventative medicine. It doesn’t encourage taking care of known and identified health problems at early stages to prevent the consequences.”

To Durland, what happens in college life reflects what is going on in the workplace outside of college life. “As insurance has become more expensive, fewer employers are offering it. It becomes less affordable [for families] to purchase when an employer is not helping subsidize it, and so we’ve seen larger numbers of students uninsured.” The same applies when a family member is laid off; oftentimes, students do not think to purchase health insurance of their own once they have lost coverage under their parents’ plan.

Even with parent coverage, the abundance of five-year programs here means that it is common for students to “age out” of their parents policies during their time at RIT. Since September of this year, New York has allowed unmarried young adults who are not eligible for employer-sponsored insurance to be covered under a parent’s group health insurance policy through the age of 29. Outside of New York, however, there’s little standardization in the age cutoff. As such, it is difficult for the SHC to advise students on their individual plans; typically, students must call their insurers directly if they have any questions about coverage. In the House bill, coverage is extended until 27; in the Senate bill, 26.

Another common issue at the SHC is insurance with geographic restrictions. Medicaid, for example, a common source of insurance for NTID students, is a state supported insurance plan that will not cover expenses that occur outside of a student’s home state.

“If there were some screening process where people had to submit their insurance coverage before they got here, then those

individuals could plan for the additional cost of insurance before they got here,” said Durland. Under the current system, however, many students go uncovered.

“It’s very difficult once [a student is] here to encourage them to then fork over another 700 some dollars for another insurance policy.” While most commercial health insurance plans will say that they cover emergencies out-of-area, the definition of “area” is variable and the definition of “emergency” is typically not stated. If students want to know what they can expect to receive coverage for, it is important to ask insurers to tell them about their policies in very specific details.

STUDENT HEALTH INSURANCE AT RIT

At the present time, RIT offers students a Student Accident and Sickness Insurance Program, underwritten by the Aetna Life Insurance Company. The annual premium is \$780 for 2009-2010 and is fully voluntary for domestic students. Certain international students are automatically enrolled in RIT’s basic plan, with a semi-annual rate of \$390.

During fall quarter of this year, there were 1,436 students (1,130 international and 306 domestic) enrolled in the school-sponsored plan. Over the next three quarters, several hundred more students are expected to enroll on a quarterly version of the plan. The institute does not regularly collect data on how many students are covered by outside insurance, but GAO research has shown a nationwide average of 67 percent of college students to be covered under employer-sponsored plans (mostly as dependents on a parent’s policy), and an average of 6 percent covered by state programs such as Medicaid.

RIT requires all registered students to carry medical insurance, but as Durland noted, “It is mandatory, but it’s mandatory without any consequence. There’s no structure for following up on that.” Incoming freshmen receive a questionnaire asking for their insurance information, but there are no formal checks in place after the form is released.

“For us to check 16,000 people to see if they have insurance in place would be impossible” said Melinda Ward, Director

of Risk Management & Insurance at RIT. “I mean, to track it — you could come in with insurance and cancel it the next day. There’s really no good way to make sure. We state that it’s mandatory.” The current check is part of a letter mailed out to students in the summertime before the fall quarter.

Prior to 2004, RIT students were automatically enrolled in the student health insurance program offered by the Institute. Opting out required a hard waiver and proof of insurance. Since then, the institute has moved to an opt-in program — a change that was neither initiated, nor recommended, by the SHC.

A benefit of the hard waiver policy was that it “required students to think about it, consider it, and take it off if they didn’t want it there,” said Durland. Now that it is gone, the number of insured students has drastically dropped.

Ward attributes the policy change to a desire within the Institute to simplify paperwork for incoming students. “Some parents didn’t like having to actually fill out an extra form to get out of insurance that they already had. This way it’s completely voluntary.” With the summer mail sent out, students are made aware of the program that RIT group purchases and it becomes completely voluntary whether or not to enroll. “If you already have insurance and you don’t need it, you don’t care for it; then we’re not making you do an additional waiver. You know, one more piece of paperwork that was irritating to people. I think that’s ultimately why the decision was made.”

A COSTLY CONUNDRUM

Since switching to the opt-in policy, RIT has seen a sharp drop in participation rates – two or three fold, according to Durland. Because of this, premiums rose a substantial amount, more than doubling in the first three years on the new plan.

A July 2006 article in “The Chronicle for Higher Education” explains:

“Unlike traditional insurance plans, which spread risk over a large group of participants, student plans tend to have low participation rates. Because 10 percent of private colleges

and 75 percent of public colleges do not require students to have health insurance, insurers must deal with the conundrum of 'adverse selection' — only those students who expect to use health insurance choose to enroll ... When only a small proportion of students enrolls, the cost of paying out claims rises, and premiums go up. And that, in turn, tends to reduce the number of students who buy insurance, spreading risk across an even smaller group. The plan becomes even more expensive, and more students drop out."

In the last couple years, RIT insurance price increases have leveled off. This past year, it rose only 8.3 percent, from \$720 to \$780. Compared to the rising costs of health care nationwide (an average of \$2,985 for a single coverage, up from \$2,613, an increase of 14.2 percent), Ward noted that RIT has been very successful at managing these increases. RIT monitors the performance of the student health insurance plan on a monthly basis and works very closely with their insurance broker to keep costs down. Every three to five years, Global Risk Management reevaluates the

options on the market, going out to bid for both an agency and a broker. A committee including representatives from the SHC reviews the plan and benchmarks against similar schools to ensure that RIT students are receiving an appropriate amount of coverage while keeping the overall cost down.

Ward stresses that the school is not profiting from their health insurance. "We don't require kids to buy our program. It's completely voluntary. There's obviously no kickback whatsoever. We really are just kind of a run-through. We help negotiate the contract, we make it available. If students want to buy it, they go online, they purchase it, they either put it on a student account, or they pay for it themselves. We're just the buying center for that policy."

THE FUTURE OF HEALTH INSURANCE

As the situation continues to evolve, it is difficult to predict exactly how the outcome of the health care debate will impact college students. During the early stages of the health care debate, many colleges were concerned that student health insurance plans were going to be completely eliminated. A prominent bill known as "America's Healthy Future Act of 2009," used unclear and ambiguous language, prompting the American College

Health Association to request clarification from the Senate Finance Committee on what the changes would mean for college sponsored student health insurance plans. The Committee assured them that college plans would not be restricted. "That was a concern for us initially," said Ward, "but we're monitoring that situation and we don't think that that's going to be an issue for us going forward."

One item that is likely to be an issue for students: required health insurance, enforced by the government. Both the House and Senate bills require nearly all Americans to obtain health insurance or pay financial penalties for failing to do so. In the short term, this may cost students money, especially if they are presently uninsured. Over the long term, however, the broader insurance pool along with the proposed extension of dependent coverage is expected to help students save money.

In the end, reining in medical costs remains both a driving factor behind health care reform as well as one of the biggest hangups of today's debate. "If you project 5, 10, 15, 20 years in the future, your generation is going to be really, really impacted in terms of that trickle down into employment and hiring," said Durland. "What I do believe is accurate is that something has to be done. There have to be reforms because the costs of healthcare are escalating at a rate that is unsupportable." Ultimately, this may be the area where college students have the most to gain; if some sort of reform does not happen, it is our generation that will be forced to pay. **R**

"Some parents didn't like having to actually fill out an extra form to get out of insurance that they already had. This way it's completely voluntary."

HOLISTIC MEDICINE: JUST FOR THE HIPPIES?

by James Arn | illustration by Jamie Douglas

Western society has a fascination with modern medical science; we have become so utterly obsessed with the attempt to find and sell the latest miracle drugs that we have forgotten how young that object of our passion really is. When you pop that ibuprofen in your mouth to sooth your aching head, you don't stop to think that the science behind that pill has yet to celebrate its 50th birthday. Surprised? Don't worry, it gets better, that ibuprofen, the generic form of Advil, is one of the older drugs in use today. And while most health care professionals and patients have come to rely completely on conventional medicine of this sort, there is a growing movement towards alternative, holistic forms of health care.

More and more Americans are turning to alternative medicines, a broad category which covers everything from acupuncture to massage therapy to chiropractics to varying forms of naturalistic diets. According to the National Center for Complementary and Alternative Medicine approximately 38 percent of American adults used some form of alternative treatments in 2007, and why not? They are generally less expensive and have fewer harmful side effects than conventional treatments. However, most insurance companies and traditional medical doctors claim that alternative treatments are not as effective as conventional medicines, branding them as placebos. Still, progressively more people are convinced that they are effective.

One of the most popular and widespread forms of alternative medicine around is eating a natural or organic diet. Progressively more Americans are on this anti-depressant binge. Across the country, there are increasing numbers of diagnosed depression cases, which psychiatrists tell us is caused by a chemical imbalance in the brain. Incredibly enough this rise in depression rates has occurred simultaneously with the increase of processed foods in our diets. Looking for a cause of



chemical imbalances? Take a look at what's on your plate. Organics are foods that have not been treated with any chemical fertilizers or pesticides. They are also grown in an ecological manner which helps heal the earth as well the consumer. Consider this while knowing one meal at Gracie's involves enough chemistry to keep you biochemical engineers busy for a month. So maybe the best way to even out our chemical see-sawing and not spiral into a debilitating depression is not to take more drugs but to reduce the intake of chemicals in the first place. This is the entire philosophy behind organic food quickly becoming vogue in mainstream America, and one we should consider integrating into our own lives.

Another holistic treatment whose popularity is growing by leaps and bounds is acupuncture. The ancient Chinese art of redirecting the body's own positive and negative energies for a plethora of purposes, from soothing general aches and pains to treating chronic disorders. One of acupuncture's biggest successes is with fibromyalgia. The disease (which is latin for muscle-pain) has baffled modern medical science for years but has been documented by the Mayo Clinic to be well managed with regular acupuncture treatments.

The biggest argument against many forms of holistic medicine is that it doesn't "actually" help, that the relief that its patients experience isn't actually a cure or a treatment. Rather, the result is a trick of the mind called the placebo effect, a situation where the mind expects one outcome (such as the treatment of a disorder) so strongly that it produces that outcome of its own accord. It's good old fashioned mind-over-matter

and it really works. Now if this seems a little too Jedi-mind-trick for your tastes, ask yourself this: What's the difference between believing that you feel better and actually feeling better? Okay good. Now ask yourself again. This time really think about it. The only way we perceive things is by thinking about them. So there really is no difference between thinking you feel better and thinking about how you feel better. This injects a lot of doubt into the entire idea of holistic medicine because it can't necessarily be proven wrong if people believe it works.

If the American public and major metropolitan hospitals are so invested in the idea of holistic medicine and have begun to adopt its practices, why won't insurance companies offer coverage for it? Holistic medicine has proven much cheaper on so many levels than conventional medicine. In a system that pays hundreds of billions of dollars per year on drug research, holistic medicines — regardless of functionality — is a convenient solution to best serve the needs of the people. They don't have to pay for lifetime supplies of expensive drugs treatments. At a time when premiums are through the roof and it is clear that the system is in dire need of some good old fashioned fixing, why not adopt some nice ole' natural medicine? Give it a chance. You never know, it very well could fix the patient, fix the planet and fix big insurance all in one fell swoop. **R**

The opinions expressed by the author do not necessarily reflect those of the magazine. Views submissions may be sent to views@reportermag.com.

RIT RINGS

NOW TAKING UR TXT MSG!

585.672.4840

compiled by Amanda Szczepanski and Moe Sedlak

All messages subject to editing and truncation. Not all messages will be run. **REPORTER** reserves the right to publish all messages in any format.

SUNDAY, 4:03 P.M.

RINGS, YOU'RE GONNA
NEED TO TELL THE
[SCROOGES] AT PARK
POINT THAT SOMEONE
JUST [ENHANCED] THEIR
WELCOME SIGN. I GUESS
THEY'RE GONNA JACK UP
THEIR PRICES FOR NEXT
YEAR!

from text

TUESDAY, 2:00 A.M.

I JUST DECIDED THAT
HICKEYS ARE LIKE A
RECEIPT FOR SEX! WHICH
IS AWESOME WHEN
SCHOOL IS IN SESSION,
BUT HORRIFIC WHEN
YOU'RE ALREADY HOME
FOR CHRISTMAS BREAK
AND HAVE TO GO VISIT
GRANDMA!

from voicemail

THURSDAY, 4:57 P.M.

I WAS JUST APPROACHED BY A FRESHIE IN THE
[ACADEMIC SIDE] TUNNELS. HE ASKED IF THEY
CONNECTED TO THE DORMS. I GOT THE PLEASURE OF
BURSTING HIS BUBBLE. YOUNG FOOL.

from text

SATURDAY, 8:02 P.M.

SO WE'RE AT THE HOCKEY GAME, AND
DESTLER COMES UP TO MY RED-HEADED
FRIEND AND SAYS "**GREAT RIT HAIR.**"

from text

MONDAY, 10:32 P.M.

JUST WANTED TO GIVE A QUICK SHOUT-OUT
TO ALL THE QUIDDITCH PLAYERS. THERE'S
NOTHING LIKE THE FEELING OF STRANGE
WOOD BETWEEN A GROWN MAN'S LEGS.

from text

MONDAY, 3:41 P.M.

SOMETIMES, I MAKE FUN
OF THE NERDS ON CAMPUS...
UNTIL I REALIZE I'M ONE OF
THEM. THE IRONY.

from text

THURSDAY, 9:58 A.M.

SHOULD I FEEL BAD FOR LAUGHING AT PEOPLE
ON BIKES FALLING ON THE ICE?

from text

FRIDAY, 7:22 P.M.

I'M READING **WORD ON THE STREET**, AND I REALIZED THAT THE
BEST THING I'VE EVER STOLEN IS A BEER PONG TABLE FROM THE
COLLEGE OF SCIENCE. MIDDAY, THEY JUST LEFT IT FOR THE TAKING!

from text

SUNDAY, 3:18 A.M.

RINGS, I JUST MET A GIRL
WHO SAID THAT SHE IS
EXCITED TO BE AT RIT. THIS
IS A FIRST FOR ME. SHE
SAYS SHE LOVES IT. SHE'S
STUPID. I'M GONNA PUT
MY [CANDY-CANE] IN HER
[CHRISTMAS STOCKING].

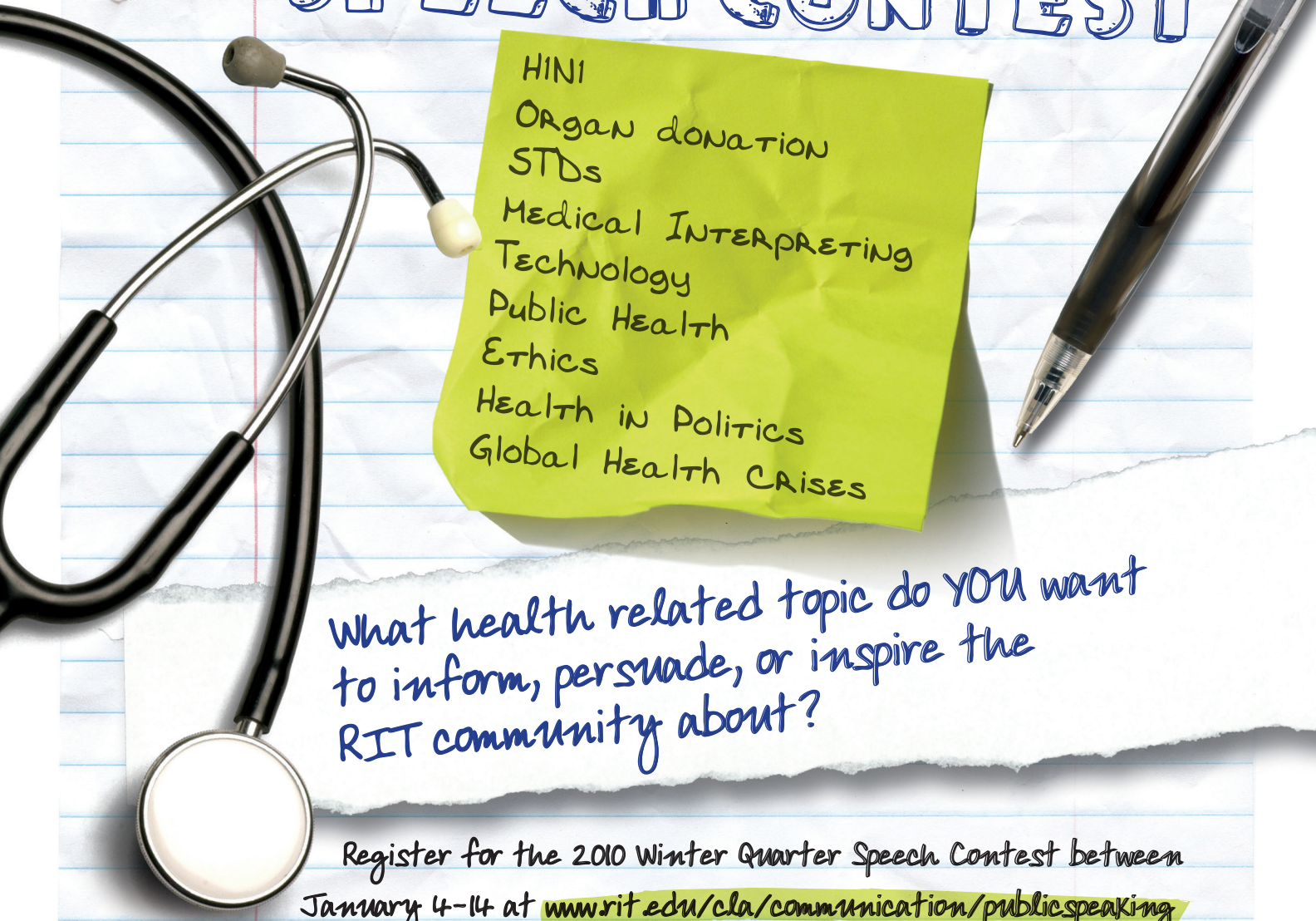
from voicemail

WEDNESDAY, 7:03 P.M.

COLLEGE MAY HAVE PREPARED ME FOR
LIFE... BUT IT RUINED MY LIVER, CREDIT
AND REPUTATION IN THE PROCESS!

from text

Winter Quarter SPEECH CONTEST



H1N1
Organ donation
STDs
Medical INTERPRETING
Technology
Public Health
Ethics
Health in Politics
Global Health CRISES

What health related topic do YOU want to inform, persuade, or inspire the RIT community about?

Register for the 2010 Winter Quarter Speech Contest between January 4-14 at www.rit.edu/cla/communication/publicspeaking

Preliminary rounds to be held on Monday, January 18.

One final round on Thursday, January 21 at 4pm in the Skalny Room in the lower level of the Center for Religious Life, Bldg. 16

\$400 first place, \$200 second place, and \$100 third place cash prizes

The 21st Annual Institute Public Speaking Contest is sponsored by the Department of Communication and The College of Liberal Arts