



Kansas State System (200118)

Policy Option(s)

1
2
3
4

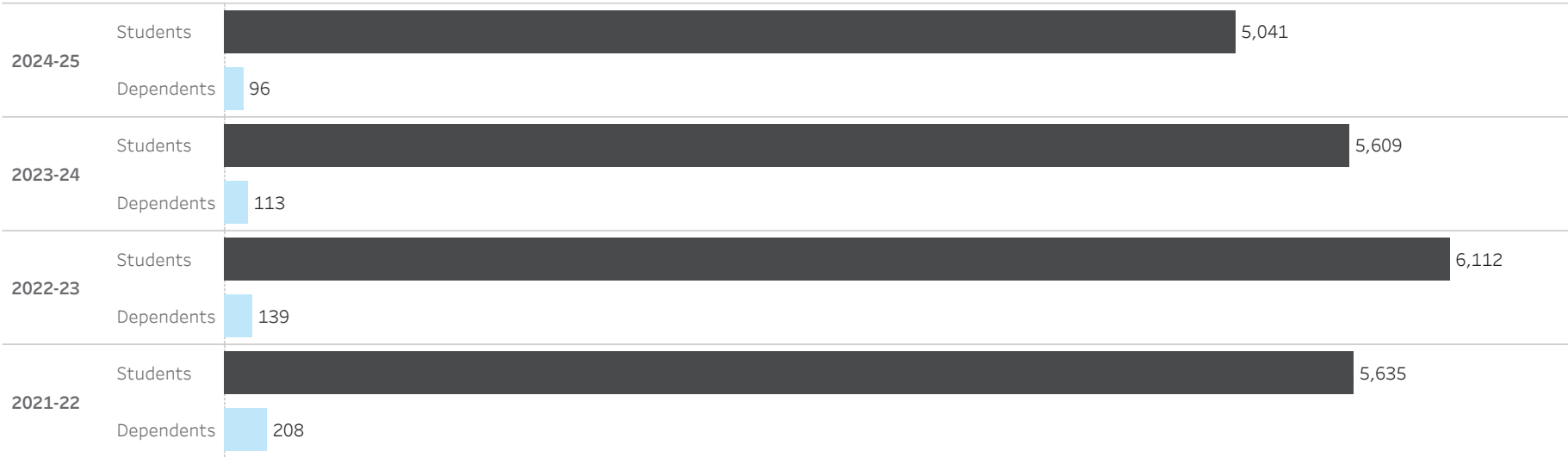
Kansas State System (200118) - Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

Annualized Membership

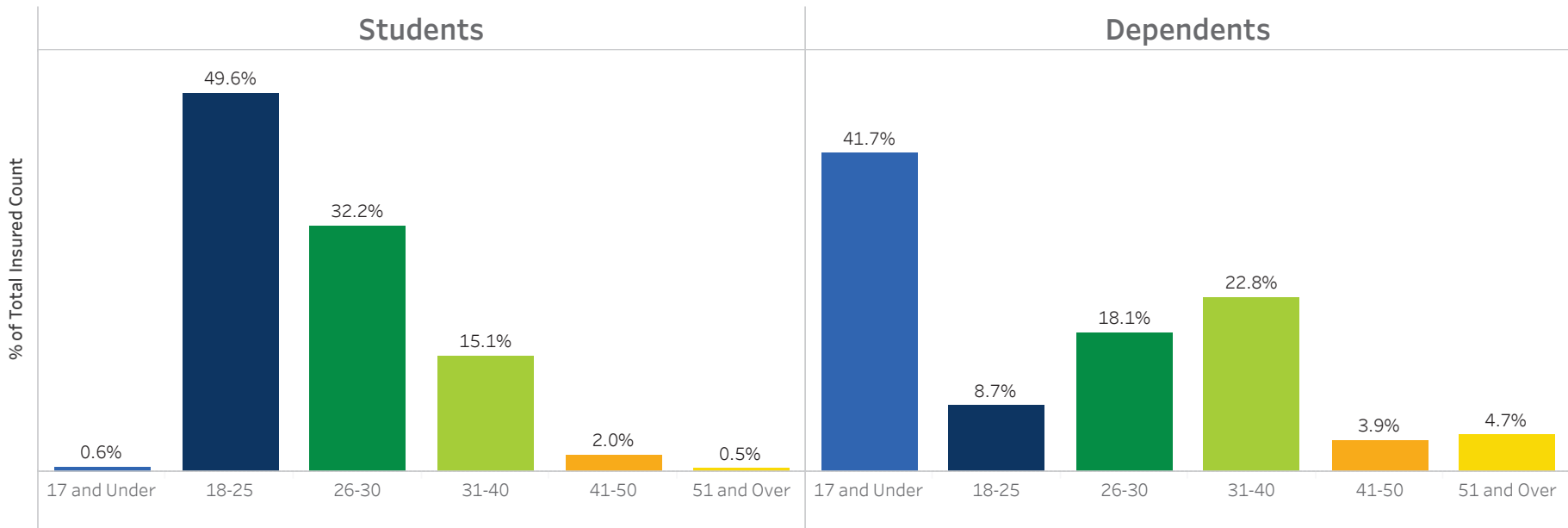
2024-25 policy year is an estimate.

■ Students ■ Dependents



2024-25 Membership by Age Group

■ 17 and Under ■ 26-30 ■ 41-50
 ■ 18-25 ■ 31-40 ■ 51 and Over

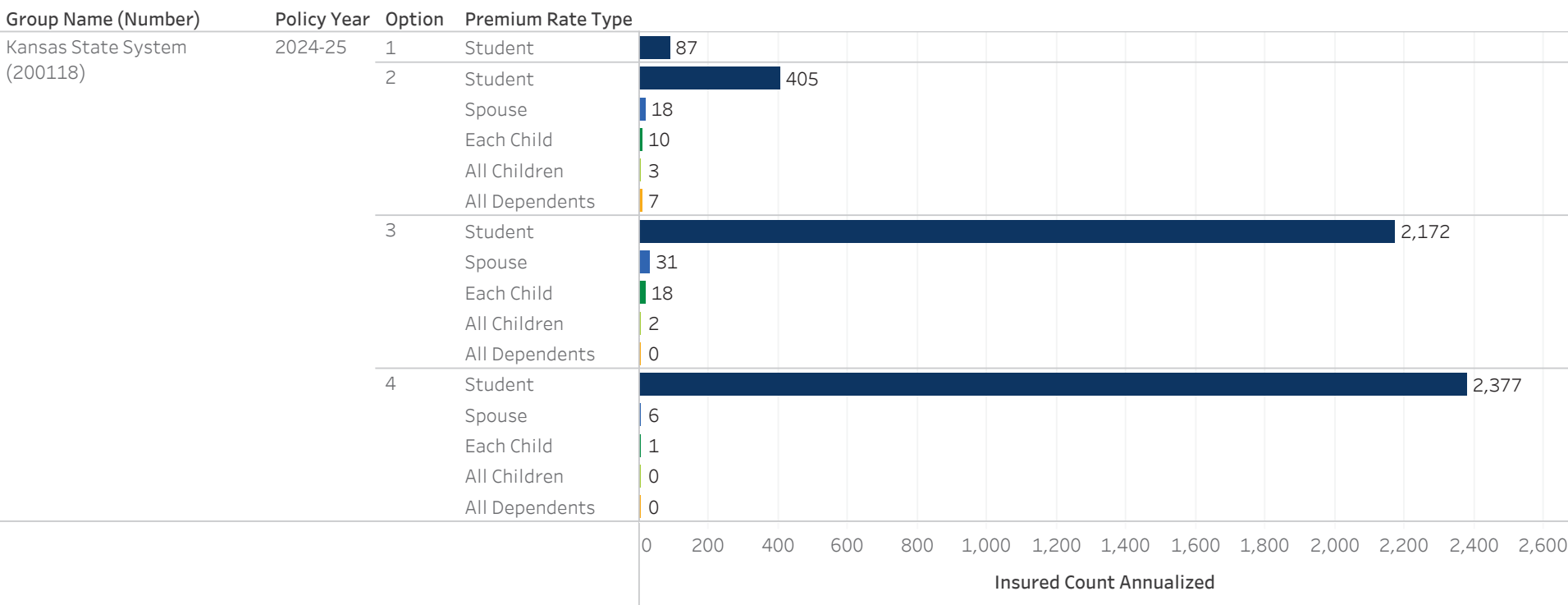


Kansas State System (200118) - Membership as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

Annualized Insured Counts

*2024-25 Policy Year Annualized Insured Count is an estimate.



Kansas State System (200118) - Annualized Membership as of January 24, 2025

Confidential Property of UnitedHealth Group. Recipient Shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

Annualized Membership by Rate Type

*2024-25 Policy Year Annualized Insured Count is an estimate.

| Group Name (Number) | Premium Rate Type | 2024-25 |
|------------------------------|-------------------|--------------|
| Kansas State System (200118) | Student | 5,041 |
| | Spouse | 55 |
| | Each Child | 29 |
| | All Children | 5 |
| | All Dependents | 7 |
| Grand Total | | 5,137 |

*Annualized Membership is calculated by dividing the total premium received by the annual rate. For the in-progress policy year (2024-25) annualized membership is estimated for each rate type by totaling the monthly membership count year-to-date divided by the prior years membership received year-to-date.

Kansas State System (200118) - Annualized Membership as of January 24, 2025

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Insured Count by Rate Type and Option

Kansas State System (200118)

Policy Year 2024-25

Total Number of Insureds with active coverage as of January 24, 2025

| Group Name (Number) | Client Name (Number) | Premium Rate Type | 1 | 2 | 3 | 4 | Total |
|--|--|-------------------|----|-----|-------|-------|-------|
| Kansas State System (200118) | Emporia State University (197) | Student | 3 | 3 | 55 | 142 | 195 |
| | | Total | 3 | 3 | 55 | 142 | 195 |
| Fort Hays State University (2005) | Fort Hays State University (2005) | Student | 4 | 6 | | 210 | 220 |
| | | Total | 4 | 6 | | 210 | 220 |
| Kansas State University (470) | Kansas State University (470) | Student | 24 | 95 | 793 | 357 | 1,250 |
| | | Spouse | | 1 | 17 | | 18 |
| | | Each Child | | | 3 | | 3 |
| | | Total | 24 | 96 | 813 | 357 | 1,271 |
| Pittsburg State University (2009) | Pittsburg State University (2009) | Student | 2 | | 55 | 205 | 262 |
| | | Each Child | | | | 1 | 1 |
| | | Total | 2 | | 55 | 206 | 263 |
| University of Kansas - Medical Center (2070) | University of Kansas - Medical Center (2070) | Student | 8 | 245 | 205 | 13 | 469 |
| | | Spouse | | 11 | 7 | 1 | 19 |
| | | Each Child | | 9 | 3 | 2 | 14 |
| | | All Children | | | 2 | | 2 |
| | | All Dependents | | 3 | | | 3 |
| | | Total | 8 | 268 | 217 | 16 | 507 |
| University of Kansas (471) | University of Kansas (471) | Student | 72 | 54 | 1,070 | 960 | 2,134 |
| | | Spouse | | | 18 | 4 | 22 |
| | | Each Child | | | 16 | 4 | 20 |
| | | All Children | | 4 | 3 | | 7 |
| | | All Dependents | | 10 | | | 10 |
| | | Total | 72 | 68 | 1,106 | 968 | 2,192 |
| Wichita State University (180) | Wichita State University (180) | Student | 11 | 49 | 329 | 1,158 | 1,516 |
| | | Spouse | | 2 | 2 | | 4 |
| | | Each Child | | 1 | | | 1 |
| | | All Dependents | | 3 | | | 3 |

Kansas State System (200118) - Total Insured Counts - Active Coverage as of January 24, 2025

Confidential Property of UnitedHealth Group. Recipient Shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

Insured Count by Rate Type and Option

Kansas State System (200118)

Policy Year 2024-25

Total Number of Insureds with active coverage as of January 24, 2025

| Group Name (Number) | Client Name (Number) | Premium Rate Type | 1 | 2 | 3 | 4 | Total |
|---------------------------------|----------------------|-------------------|-----|-----|-------|-------|-------|
| Kansas State System (200118) | (180) | Total | 11 | 55 | 331 | 1,158 | 1,524 |
| | Total | | 124 | 496 | 2,576 | 3,057 | 6,171 |
| # of Unique Members | | | 124 | 496 | 2,576 | 3,057 | 6,171 |

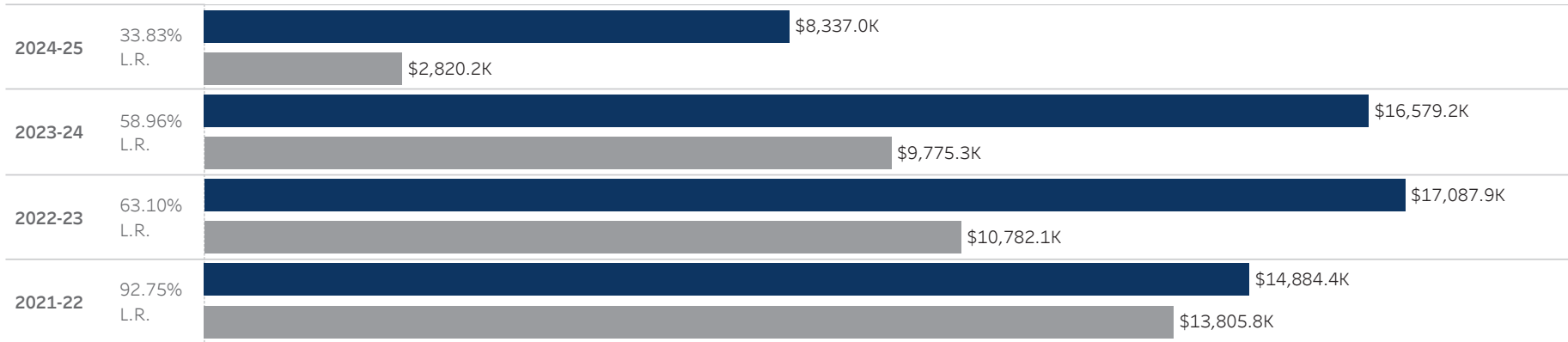
Kansas State System (200118) - Total Insured Counts - Active Coverage as of January 24, 2025

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Plan Experience Overview

All Insureds P&L

■ Premium ■ Paid Claims

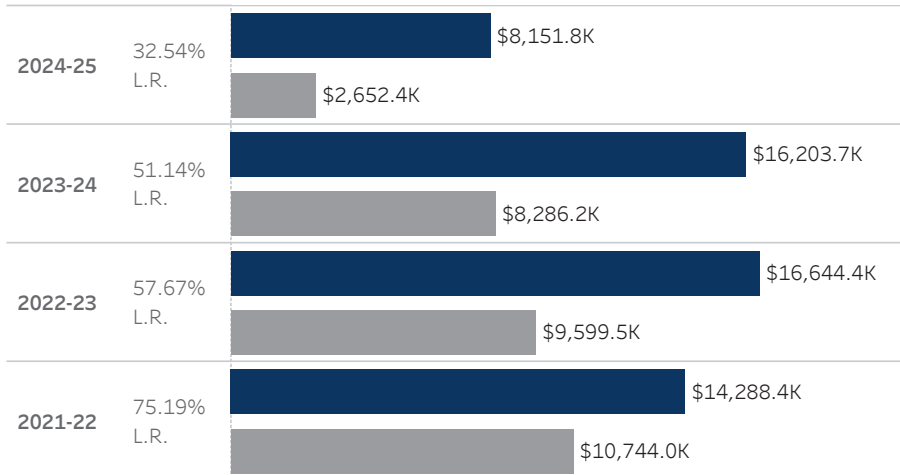


Values are displayed in thousands

The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions (if applicable.)

Students - P&L

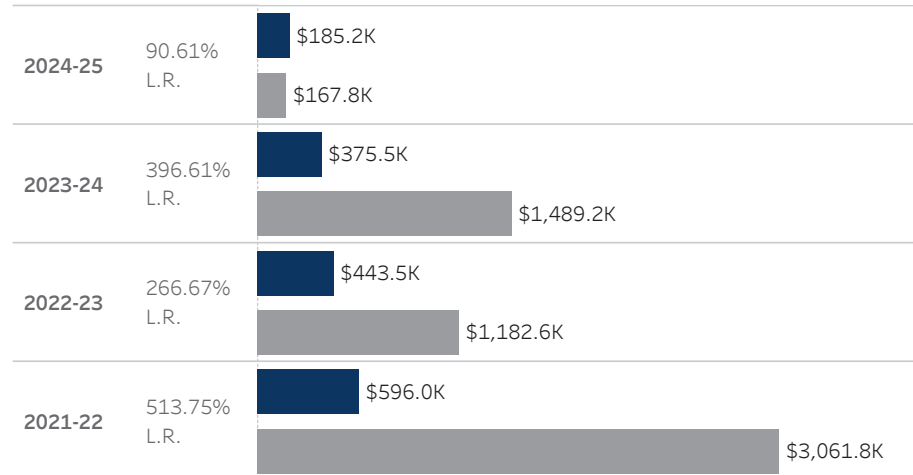
■ Premium ■ Paid Claims



Values are displayed in thousands

Dependents - P&L

■ Premium ■ Paid Claims



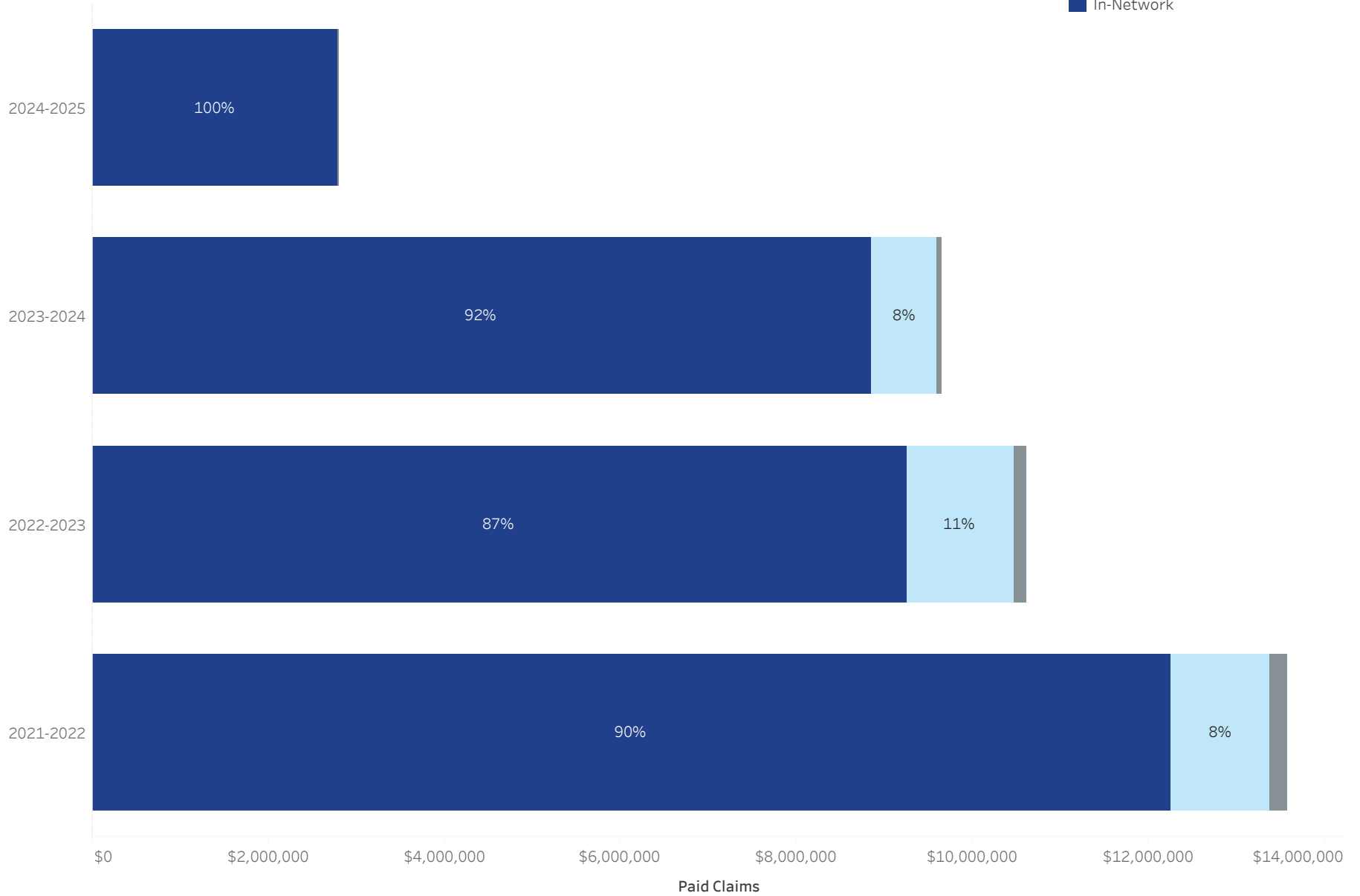
Values are displayed in thousands

Kansas State System (200118) - Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

Network Experience

- Out-of-Network
- Student Health Center
- In-Network



Kansas State System (200118) - Utilization as of January 1, 2025

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SR Charge Category Utilization as of 1/1/2025

Kansas State System (200118)

Policy Option(s): All | Insured Location: All

Insured Type: All | Charge Type: All | Charge Service Type: All | Charge Code Description: All | Cause Code: All

| Charge Service Type | Charge Description Category | 2023-2024 | | | | 2024-2025 | | | |
|---------------------|--------------------------------|----------------|--------|---------------------|--------------------|----------------|--------|--------------------|--------------------|
| | | Claimant Count | Claims | Claimed Amount | Paid Claims | Claimant Count | Claims | Claimed Amount | Paid Claims |
| Grand Total | | | | \$26,792,289 | \$9,775,326 | | | \$8,232,803 | \$2,820,164 |
| Outpatient | Total | | | \$18,606,629 | \$6,742,508 | | | \$5,663,312 | \$2,183,208 |
| | Null | 0 | 0 | | (\$12) | | | | |
| | ADJUSTMENTS | 549 | 1,336 | \$0 | (\$282,141) | 184 | 376 | \$0 | (\$41,128) |
| | AMBULANCE | 31 | 37 | \$115,161 | \$55,975 | 9 | 9 | \$10,191 | \$4,776 |
| | ANESTHETIST | 94 | 134 | \$93,121 | \$37,472 | 33 | 44 | \$36,914 | \$11,533 |
| | ASSISTANT SURGEON | 13 | 13 | \$30,682 | \$1,410 | 2 | 3 | \$5,040 | \$449 |
| | CAT SCAN / MRI | 251 | 564 | \$1,525,915 | \$322,973 | 110 | 205 | \$554,494 | \$89,115 |
| | CHEMOTHERAPY | 9 | 48 | \$852,210 | \$143,307 | 5 | 12 | \$313,571 | \$72,134 |
| | CLAIM INTEREST | 171 | 262 | \$0 | \$603 | 5 | 7 | \$0 | \$25 |
| | DENTAL | 12 | 14 | \$4,179 | \$41 | 4 | 6 | \$966 | \$15 |
| | DURABLE MED/BRACES/APPL | 171 | 290 | \$172,556 | \$44,557 | 72 | 103 | \$43,412 | \$6,946 |
| | GROUP LEDGER BILLING | 1 | 1 | \$0 | \$0 | | | | |
| | HOSPITAL MISCELLANEOUS | 1 | 1 | \$75 | \$53 | | | | |
| | INJECTIONS | 1,667 | 2,872 | \$522,375 | \$396,946 | 1,213 | 1,906 | \$338,745 | \$263,854 |
| | INVESTIGATIONS/LEGAL | 2 | 2 | \$1,702 | \$1,702 | | | | |
| | LABORATORY | 3,943 | 11,316 | \$2,867,043 | \$937,108 | 2,459 | 4,488 | \$864,170 | \$395,106 |
| | MEDICAL EMERGENCY | 274 | 358 | \$1,126,504 | \$253,874 | 59 | 64 | \$269,192 | \$56,149 |
| | MEDICAL RECORDS | 1 | 1 | \$10 | \$10 | | | | |
| | OTHER | 20 | 117 | \$4,771 | \$4,771 | 13 | 26 | \$904 | \$904 |
| | OTHER INSURANCE | 2 | 3 | \$0 | (\$7,933) | | | | |
| | OUTPATIENT SURGERY | 528 | 741 | \$465,772 | \$125,247 | 203 | 268 | \$148,730 | \$43,630 |
| | OUTPATIENT SURGICAL FACILITIES | 112 | 131 | \$1,937,210 | \$474,665 | 31 | 34 | \$460,999 | \$103,617 |
| | PHYSICIAN VISITS | 3,490 | 11,788 | \$2,026,270 | \$939,053 | 1,940 | 4,215 | \$687,674 | \$339,196 |
| | PHYSIOTHERAPY | 275 | 1,365 | \$456,959 | \$127,892 | 139 | 535 | \$123,382 | \$46,220 |
| | PRESCRIPTIONS | 2,905 | 23,094 | \$4,635,614 | \$2,093,491 | 1,925 | 9,294 | \$1,494,092 | \$699,035 |
| | RADIATION THERAPY | 2 | 8 | \$163,860 | \$70,131 | 1 | 22 | \$48,565 | \$9,905 |

Insured Type: All | Charge Type: All | Charge Service Type: All | Charge Code Description: All | Cause Code: All

Kansas State System (200118) - Utilization as of 1/1/2025

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SR Charge Category Utilization as of 1/1/2025

Kansas State System (200118)

Policy Option(s): All | Insured Location: All

Insured Type: All | Charge Type: All | Charge Service Type: All | Charge Code Description: All | Cause Code: All

| Charge Service Type | Charge Description Category | 2023-2024 | | | | 2024-2025 | | | |
|---------------------|-----------------------------|----------------|-----------|--------------------|--------------------|----------------|-----------|--------------------|------------------|
| | | Claimant Count | Claims | Claimed Amount | Paid Claims | Claimant Count | Claims | Claimed Amount | Paid Claims |
| Outpatient | REFUNDS | 42 | 42 | \$0 | (\$2,479) | | | | |
| | SHC-ADJUSTMENTS | 4 | 24 | \$0 | \$0 | | | | |
| | SHC-CONSULTANT | 1 | 1 | \$45 | \$45 | | | | |
| | SHC-GROUP LEDGER BILLING | 1 | 0 | | \$12 | | | | |
| | SHC-HOSPITAL MISCELLANEOUS | 47 | 252 | \$18,180 | \$18,180 | | | | |
| | SHC-INJECTIONS | 215 | 605 | \$35,927 | \$35,927 | | | | |
| | SHC-LABORATORY | 302 | 1,334 | \$70,088 | \$66,248 | | | | |
| | SHC-PHYSICIAN VISITS | 60 | 69 | \$11,604 | \$11,604 | | | | |
| | SHC-PRESCRIPTIONS | 532 | 3,268 | \$605,125 | \$604,440 | | | | |
| | SHC-PROFESSIONAL FEE | 4 | 14 | \$888 | \$757 | | | | |
| | SHC-SUPPLIES/MISC | 10 | 11 | \$1,627 | \$1,627 | | | | |
| | SHC-SURGERY | 16 | 36 | \$3,306 | \$3,306 | | | | |
| | SHC-UNKNOWN | 2 | 9 | \$2,033 | \$0 | | | | |
| | SHC-XRAYS | 46 | 48 | \$3,814 | \$3,649 | | | | |
| | SUPPLIES/MISC | 448 | 610 | \$153,982 | \$74,116 | 207 | 234 | \$28,476 | \$16,812 |
| URGENT CARE | 3 | 3 | \$1,384 | \$229 | 2 | 3 | \$1,055 | \$159 | |
| XRAYS | 1,489 | 2,993 | \$696,637 | \$183,650 | 674 | 1,009 | \$232,741 | \$64,758 | |
| Inpatient | Total | | | \$8,185,660 | \$3,032,818 | | | \$2,569,491 | \$636,956 |
| | ADJUSTMENTS | 19 | 22 | \$0 | \$296,628 | 5 | 7 | \$0 | \$52,675 |
| | ANESTHETIST | 50 | 71 | \$122,413 | \$63,450 | 16 | 23 | \$27,465 | \$14,085 |
| | ASSISTANT SURGEON | 11 | 11 | \$12,953 | \$1,502 | 4 | 4 | \$2,384 | \$440 |
| | CLAIM INTEREST | 4 | 4 | \$0 | \$158 | | | | |
| | DENTAL | 14 | 20 | \$20,813 | \$1,209 | 1 | 1 | \$244 | \$0 |
| | HOME HEALTH CARE | 21 | 37 | \$20,972 | \$5,363 | 17 | 25 | \$22,405 | \$8,230 |
| | HOSPITAL | 118 | 182 | \$7,208,094 | \$2,346,400 | 44 | 64 | \$2,274,947 | \$489,966 |
| | INJECTIONS | 1 | 1 | \$114 | \$62 | 4 | 5 | \$174 | \$125 |
| | INPATIENT SURGERY | 59 | 138 | \$260,349 | \$109,350 | 21 | 26 | \$77,635 | \$30,185 |

Insured Type: All | Charge Type: All | Charge Service Type: All | Charge Code Description: All | Cause Code: All

Kansas State System (200118) - Utilization as of 1/1/2025

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SR Charge Category Utilization as of 1/1/2025

Kansas State System (200118)

Policy Option(s): All | Insured Location: All

Insured Type: All | Charge Type: All | Charge Service Type: All | Charge Code Description: All | Cause Code: All

| Charge Service Type | Charge Description Category | 2023-2024 | | | | 2024-2025 | | | |
|---------------------|-----------------------------|----------------|--------|----------------|-------------|----------------|--------|----------------|-------------|
| | | Claimant Count | Claims | Claimed Amount | Paid Claims | Claimant Count | Claims | Claimed Amount | Paid Claims |
| Inpatient | MEDICAL EMERGENCY | 22 | 35 | \$181,557 | \$59,237 | 10 | 14 | \$55,106 | \$9,191 |
| | PHYSICIAN VISITS | 107 | 387 | \$306,890 | \$128,847 | 46 | 157 | \$89,190 | \$24,489 |
| | PRESCRIPTIONS | 64 | 184 | \$14,577 | \$8,731 | 25 | 72 | \$6,879 | \$4,081 |
| | PROFESSIONAL FEE | 41 | 138 | \$36,928 | \$12,692 | 42 | 70 | \$13,063 | \$3,489 |
| | REFUNDS | 1 | 1 | \$0 | (\$810) | | | | |

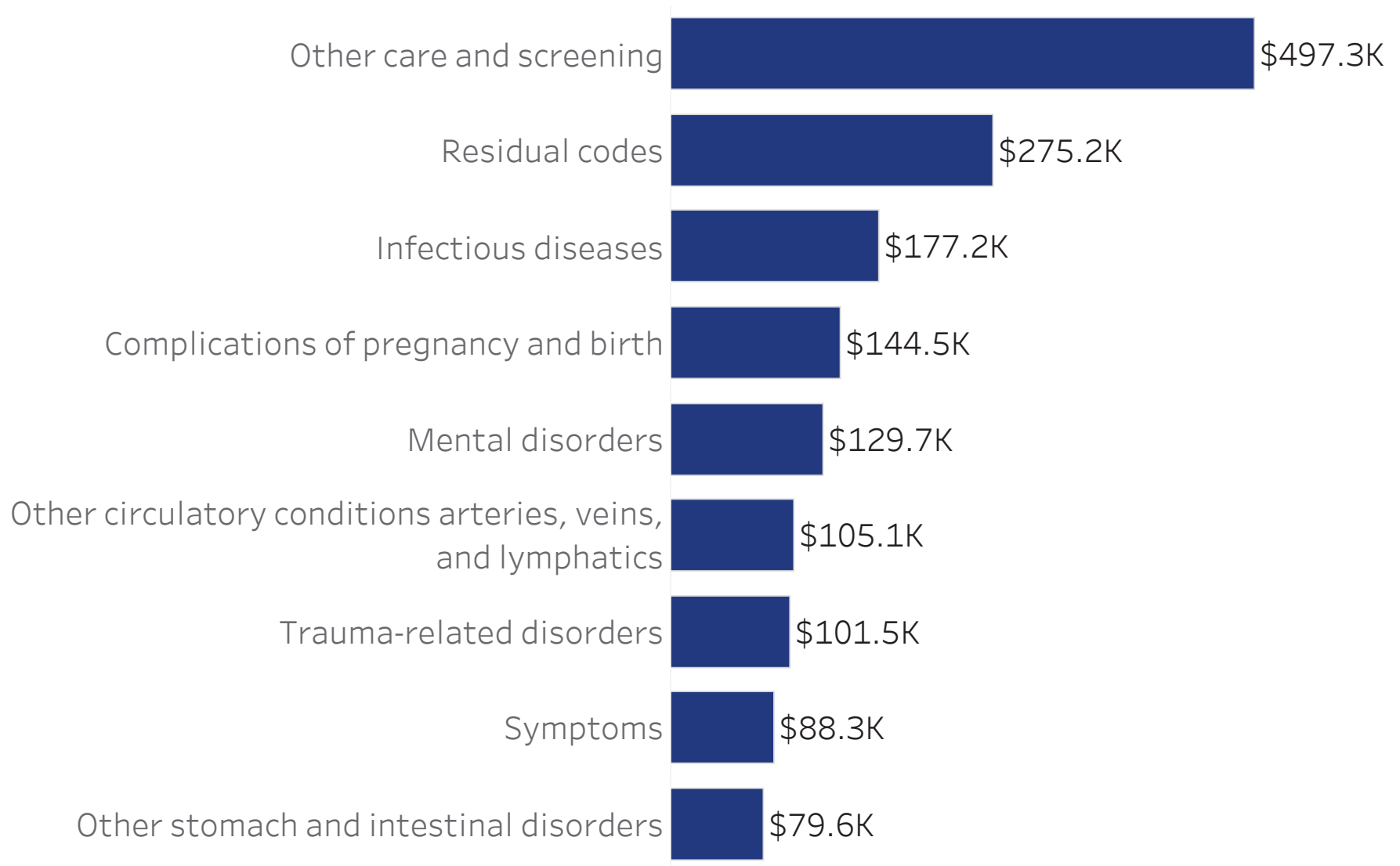
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Kansas State System (200118) - Utilization as of 1/1/2025

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Top 10 Diagnoses 2024-25 Policy Year

Clinical Classification Software (CCS) Condition Descriptions group relevant International Classification of Diseases (ICD) Codes into clinically meaningful categories. Diagnoses information does not include Prescription Drugs or Student Health Center ledger billed claims.

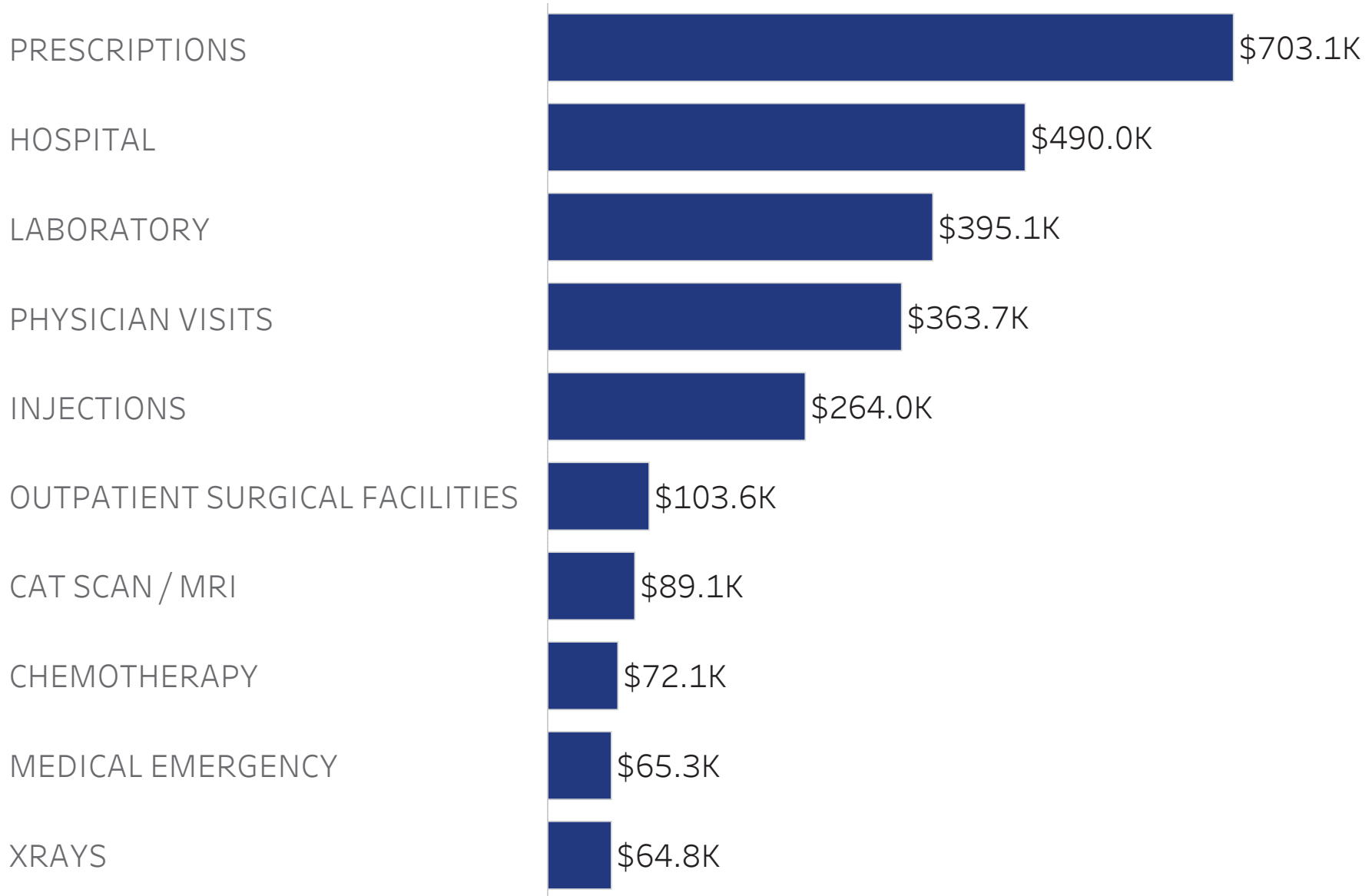


Values are displayed in thousands

Kansas State System (200118) - Utilization as of January 1, 2025

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Top 10 SR Charge Categories 2024-25 Policy Year



Values are displayed in thousands

Kansas State System (200118) - Utilization as of January 1, 2025

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Claims greater than \$100,000

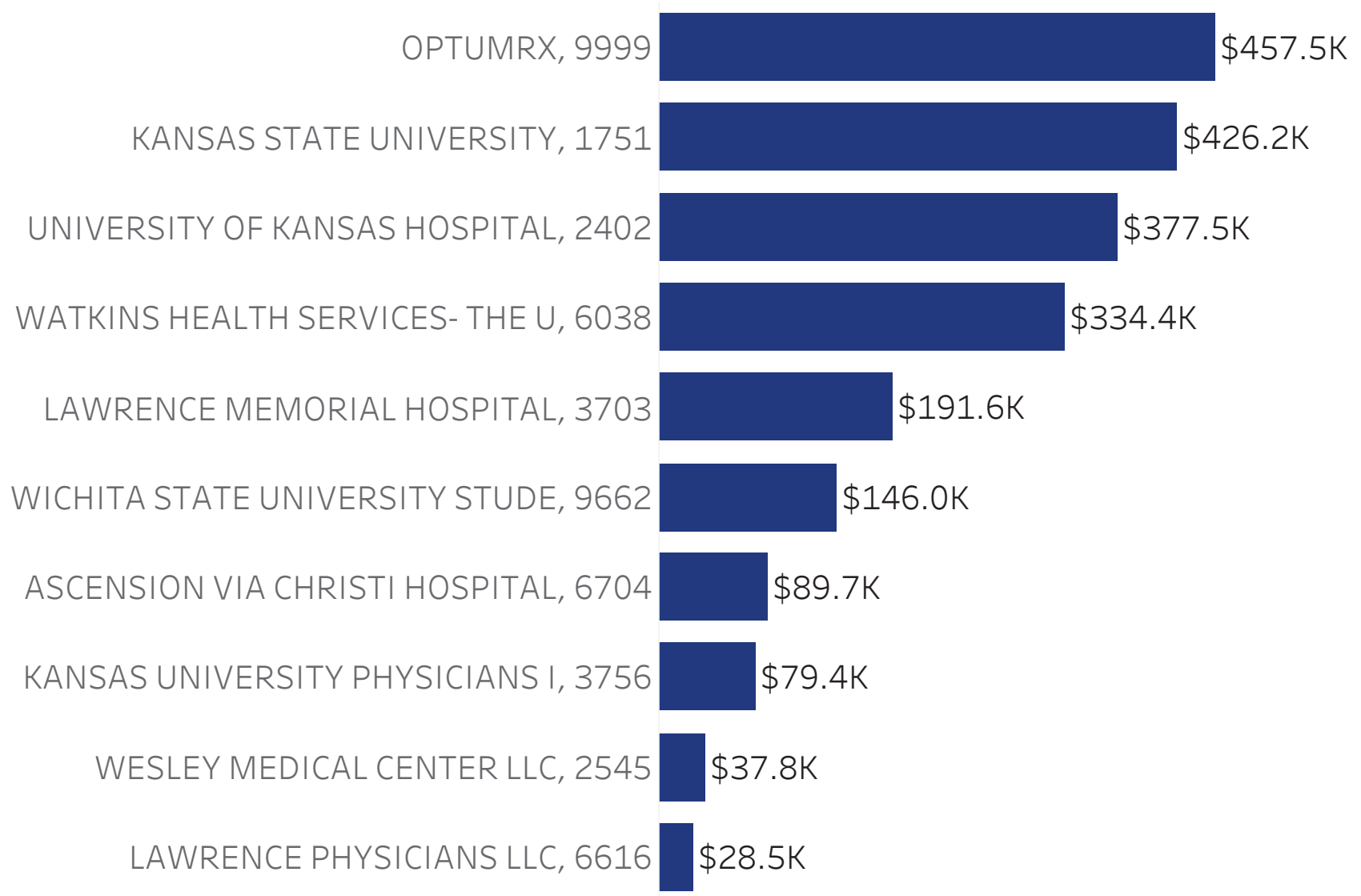
| Policy Year | Day of Date Diagnosis | Student-De.. | ICD Code Description | Claimed Amount | Paid Claims |
|-------------|-----------------------|--------------|---|----------------|-------------|
| 2023-24 | August 11, 2023 | Student | BENIGN INTRACRANIAL HYPERTENSION | \$321,905 | \$166,984 |
| | September 14, 2023 | Student | PBM CLAIMS | \$189,599 | \$148,615 |
| | August 18, 2023 | Student | PBM CLAIMS | \$187,507 | \$141,158 |
| | August 12, 2023 | Dependent | PBM CLAIMS | \$202,192 | \$145,725 |
| | September 22, 2023 | Student | SUPERVISION PREG W/HX INFERTILITY 1ST TRIMESTER | \$253,876 | \$119,779 |
| | September 13, 2023 | Student | CROHNS DZ SMALL & LARGE INTEST W/INTEST OBST | \$514,786 | \$441,770 |
| | August 8, 2023 | Student | PBM CLAIMS | \$383,460 | \$276,598 |
| | May 9, 2024 | Dependent | SINGLE LIVEBORN INFANT DELIVERED BY CESAREAN | \$329,216 | \$324,084 |
| | May 25, 2024 | Dependent | TWIN LIVEBORN INFANT DELIVERED BY CESAREAN | \$1,235,969 | \$251,306 |
| | May 25, 2024 | Dependent | TWIN LIVEBORN INFANT DELIVERED BY CESAREAN | \$1,234,212 | \$259,927 |

Kansas State System (200118) - Claims greater than \$100,000 - Utilization as of January 1, 2025

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Top Billing Providers

2024-25 Policy Year



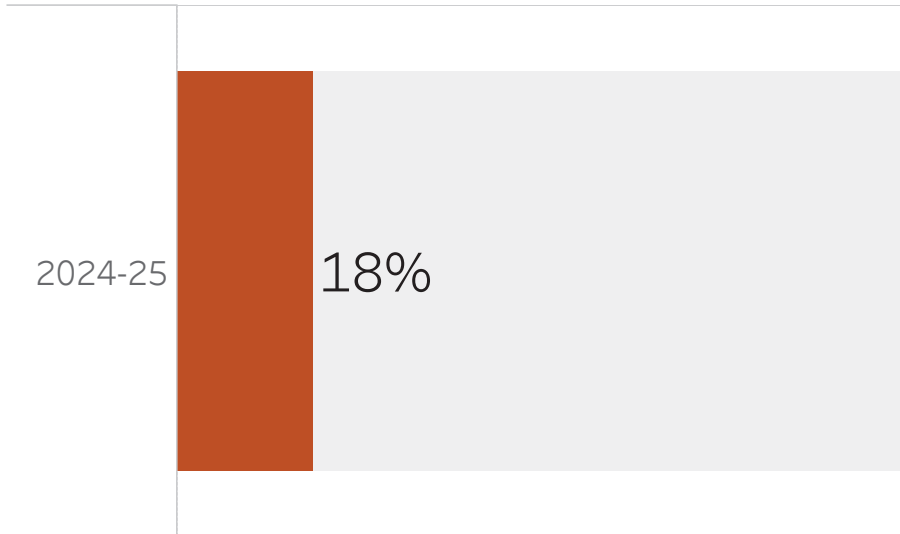
Values are displayed in thousands

Kansas State System (200118) - Utilization as of January 1, 2025

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Top Rx Report

Percentage of Members Utilizing Rx



Top Drugs by Claimant Count

| Drug Name | Tier | Script Count | Claimant Count | Copay | Paid Claims |
|-----------------------------------|------|--------------|----------------|-------|-------------|
| COMIRNATY 2024-25 | 3 | 178 | 165 | \$0 | \$24,232 |
| FLUCELVAX 2024-2025 | 3 | 105 | 99 | \$0 | \$4,414 |
| FLUBLOK 2024-2025 | 3 | 93 | 85 | \$0 | \$7,055 |
| AMPHETAMINE/DEXTROAMPHETAM.. | 1 | 230 | 70 | \$638 | \$1,395 |
| SPIKEVAX COVID-19 VACCINE/2024-.. | 3 | 72 | 67 | \$0 | \$9,478 |
| ESCITALOPRAM OXALATE | 1 | 147 | 55 | \$281 | \$47 |
| FLUARIX 2024-2025 | 3 | 56 | 55 | \$0 | \$1,728 |
| PREDNISONE | 1 | 61 | 49 | \$26 | \$4 |
| DOXYCYCLINE HYCLATE | 1 | 57 | 43 | \$110 | \$80 |
| BUPROPION HYDROCHLORIDE ER (XL) | 1 | 134 | 41 | \$495 | \$203 |

Top Drugs by Paid Claims

| Drug Name | Tier | Claimant Count | Copay | Paid Claims |
|-----------------------------|------|----------------|----------|-------------|
| NUCALA | 3 | 1 | \$7,955 | \$59,572 |
| STELARA | 2 | 1 | \$8,000 | \$45,325 |
| COSENTYX SENSOREADY PEN | 3 | 1 | \$7,644 | \$35,454 |
| HUMIRA PEN | 2 | 1 | \$35 | \$26,805 |
| BIKTARVY | 3 | 2 | \$13,764 | \$24,447 |
| COMIRNATY 2024-25 | 3 | 165 | \$0 | \$24,232 |
| RINVOQ | 2 | 1 | \$7,994 | \$22,946 |
| LISDEXAMFETAMINE DIMESYLATE | 1 | 31 | \$1,148 | \$16,514 |
| HUMIRA PEN-CD/UC/HS STARTER | 2 | 2 | \$7,965 | \$11,947 |
| NURTEC | 2 | 6 | \$6,928 | \$10,393 |

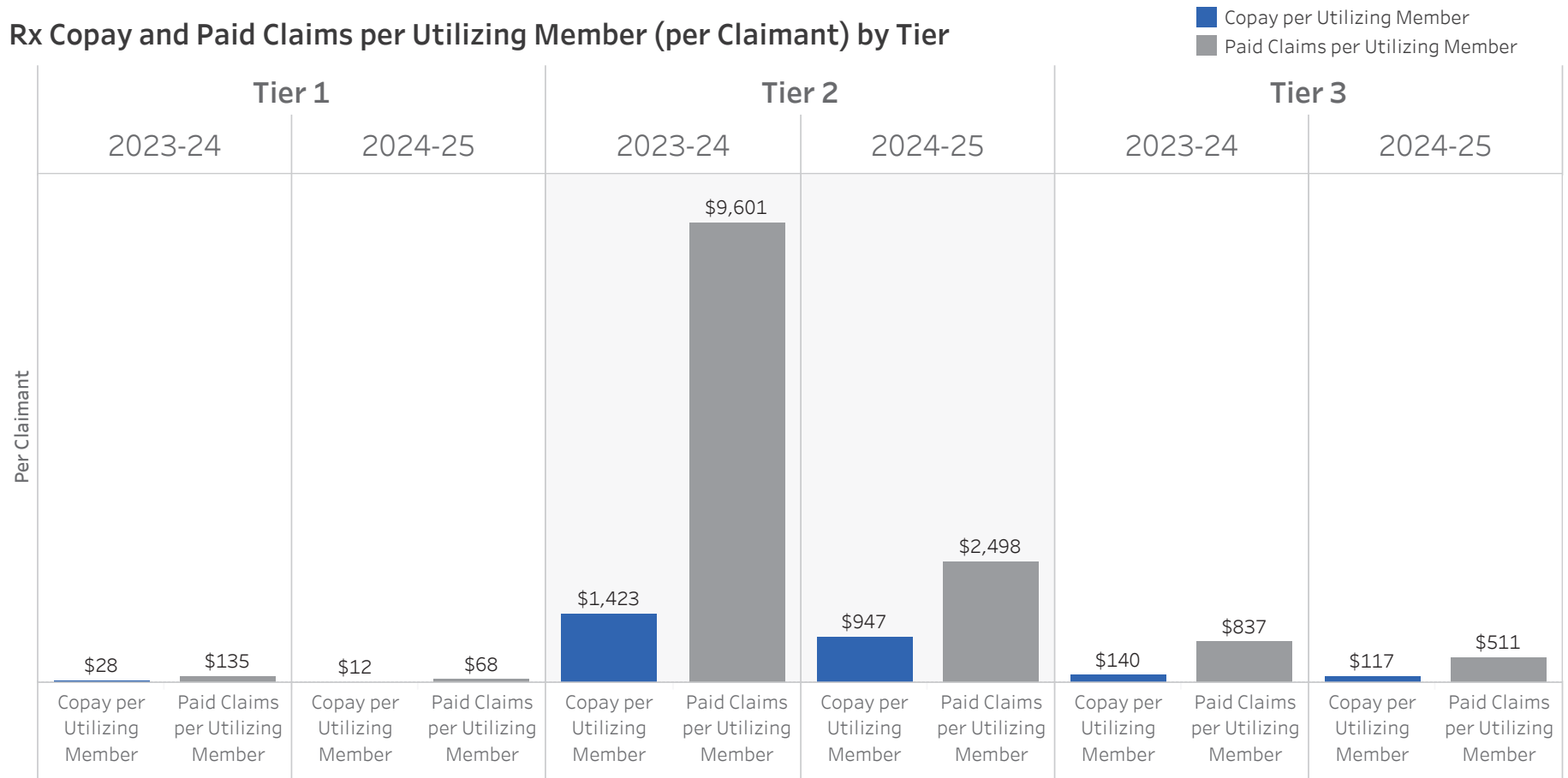
Top Therapeutic Classes by Claimant Count

| | Claimant Count | Copay | Paid Claims |
|----------------------------------|----------------|----------|-------------|
| BIOLOGICALS | 383 | \$0 | \$59,752 |
| PSYCHOSTIMULANTS-ANTIDEPRESSANTS | 231 | \$4,973 | \$6,305 |
| SYSTEMIC CONTRACEPTIVES | 167 | \$0 | \$22,250 |
| MISCELLANEOUS | 111 | \$17,346 | \$108,696 |
| AMPHETAMINE PREPARATIONS | 98 | \$2,463 | \$18,975 |
| PENICILLINS | 76 | \$108 | \$123 |
| ANTIARTHRITICS | 68 | \$7,957 | \$11,727 |
| OTHER ANTIHYPERTENSIVES | 62 | \$281 | \$1,352 |
| GLUCOCORTICOIDS | 58 | \$106 | \$54 |
| NARCOTIC ANALGESICS | 57 | \$118 | \$491 |

Kansas State System (200118) - Utilization as of January 1, 2025

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Rx Copay and Paid Claims per Utilizing Member (per Claimant) by Tier



Rx Utilization by Tier

| Tier | 2023-24 | | | 2024-25 | | |
|------|----------------|-----------|-------------|----------------|----------|-------------|
| | Claimant Count | Copay | Paid Claims | Claimant Count | Copay | Paid Claims |
| 1 | 1,600 | \$44,805 | \$216,622 | 870 | \$10,166 | \$59,174 |
| 2 | 125 | \$177,878 | \$1,200,162 | 70 | \$66,274 | \$174,891 |
| 3 | 643 | \$90,182 | \$538,078 | 411 | \$48,186 | \$209,985 |

Kansas State System (200118) - Utilization as of January 1, 2025

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Premium, Paid Claims and Loss Ratio

utilization as of January 1, 2025

| Group Name (Number) | Client Name (Number) | Policy Year | Measure Name | Value |
|-----------------------------------|--------------------------------|-------------|--------------|-------------|
| Kansas State System (200118) | Emporia State University (197) | 2021-22 | Premium | \$406,730 |
| | | | Paid Claims | \$354,486 |
| | | | Loss Ratio | 87.2% |
| | 2022-23 | 2022-23 | Premium | \$446,758 |
| | | | Paid Claims | \$207,267 |
| | | | Loss Ratio | 46.4% |
| | 2023-24 | 2023-24 | Premium | \$443,599 |
| | | | Paid Claims | \$175,337 |
| | | | Loss Ratio | 39.5% |
| 2024-25 | 2024-25 | Premium | \$240,624 | |
| | | Paid Claims | \$62,430 | |
| | | Loss Ratio | 25.9% | |
| Fort Hays State University (2005) | 2021-22 | 2021-22 | Premium | \$314,315 |
| | | | Paid Claims | \$166,353 |
| | | | Loss Ratio | 52.9% |
| | 2022-23 | 2022-23 | Premium | \$396,345 |
| | | | Paid Claims | \$186,392 |
| | | | Loss Ratio | 47.0% |
| | 2023-24 | 2023-24 | Premium | \$446,811 |
| | | | Paid Claims | \$64,538 |
| | | | Loss Ratio | 14.4% |
| 2024-25 | 2024-25 | Premium | \$258,938 | |
| | | Paid Claims | \$39,780 | |
| | | Loss Ratio | 15.4% | |
| Kansas State University (470) | 2021-22 | 2021-22 | Premium | \$3,176,502 |
| | | | Paid Claims | \$2,527,029 |
| | | | Loss Ratio | 79.6% |

The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions.

Premium & Paid Claims

Kansas State System (200118) Utilization as of January 1, 2025

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Premium, Paid Claims and Loss Ratio

utilization as of January 1, 2025

| Group Name (Number) | Client Name (Number) | Policy Year | Measure | Value |
|--|-------------------------------|-------------|-------------|-------------|
| Kansas State System (200118) | Kansas State University (470) | 2022-23 | Premium | \$3,196,713 |
| | | | Paid Claims | \$2,298,243 |
| | | | Loss Ratio | 71.9% |
| | 2023-24 | Premium | \$3,262,844 | |
| | | Paid Claims | \$3,218,033 | |
| | | Loss Ratio | 98.6% | |
| | 2024-25 | Premium | \$1,709,099 | |
| | | Paid Claims | \$1,063,669 | |
| | | Loss Ratio | 62.2% | |
| Pittsburg State University (2009) | 2021-22 | Premium | \$482,717 | |
| | | Paid Claims | \$247,415 | |
| | | Loss Ratio | 51.3% | |
| | 2022-23 | Premium | \$631,601 | |
| | | Paid Claims | \$284,563 | |
| | | Loss Ratio | 45.1% | |
| | 2023-24 | Premium | \$790,720 | |
| | | Paid Claims | \$142,179 | |
| | | Loss Ratio | 18.0% | |
| 2024-25 | Premium | \$316,353 | | |
| | Paid Claims | \$23,291 | | |
| | Loss Ratio | 7.4% | | |
| University of Kansas - Medical Center (2070) | 2021-22 | Premium | \$1,400,475 | |
| | | Paid Claims | \$1,962,482 | |
| | | Loss Ratio | 140.1% | |
| | 2022-23 | Premium | \$1,454,944 | |
| | | Paid Claims | \$1,948,112 | |
| | | Loss Ratio | 133.9% | |

Measure Names
■ Premium
■ Paid Claims
■ Loss Ratio

The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions.

Premium & Paid Claims
Kansas State System (200118) Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

Premium, Paid Claims and Loss Ratio

utilization as of January 1, 2025

| Group Name (Number) | Client Name (Number) | Policy Year | Measure | Value |
|--------------------------------|--|-------------|-------------|-------------|
| Kansas State System (200118) | University of Kansas - Medical Center (2070) | 2023-24 | Premium | \$1,373,235 |
| | | | Paid Claims | \$1,644,524 |
| | | | Loss Ratio | 119.8% |
| | 2024-25 | Premium | \$925,920 | |
| | | Paid Claims | \$353,526 | |
| | | Loss Ratio | 38.2% | |
| University of Kansas (471) | 2021-22 | Premium | \$5,505,780 | |
| | | Paid Claims | \$6,827,399 | |
| | | Loss Ratio | 124.0% | |
| | 2022-23 | Premium | \$5,508,424 | |
| | | Paid Claims | \$4,518,346 | |
| | | Loss Ratio | 82.0% | |
| | 2023-24 | Premium | \$5,627,633 | |
| | | Paid Claims | \$3,152,807 | |
| | | Loss Ratio | 56.0% | |
| | 2024-25 | Premium | \$2,975,930 | |
| | | Paid Claims | \$1,004,551 | |
| | | Loss Ratio | 33.8% | |
| Wichita State University (180) | 2021-22 | Premium | \$3,597,862 | |
| | | Paid Claims | \$1,720,634 | |
| | | Loss Ratio | 47.8% | |
| | 2022-23 | Premium | \$5,453,124 | |
| | | Paid Claims | \$1,339,185 | |
| | | Loss Ratio | 24.6% | |
| | 2023-24 | Premium | \$4,634,317 | |
| | | Paid Claims | \$1,377,907 | |
| | | Loss Ratio | 29.7% | |

Measure Names
■ Premium
■ Paid Claims
■ Loss Ratio

The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions.

Premium & Paid Claims

Kansas State System (200118) Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

Premium, Paid Claims and Loss Ratio

utilization as of January 1, 2025

| Group Name (Number) | Client Name (Number) | Policy Year | Measure Name | Value |
|------------------------------|--------------------------------|-------------|--------------|-------------|
| Kansas State System (200118) | Wichita State University (180) | 2024-25 | Premium | \$1,910,132 |
| | | | Paid Claims | \$272,918 |
| | | | Loss Ratio | 14.3% |

The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions.

Premium & Paid Claims

Kansas State System (200118) Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient Shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.



Wichita State University (180)

Policy Option(s)

- 1
- 2
- 3
- 4

Wichita State University (180) - Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

Claims greater than \$100,000

| Policy Year | Day of Date Diagnosis | Student-De.. | ICD Code Description | Claimed Amount | Paid Claims |
|-------------|-----------------------|--------------|--|----------------|-------------|
| 2023-24 | September 13, 2023 | Student | CROHNS DZ SMALL & LARGE INTEST W/INTEST OBST | \$514,786 | \$441,770 |

Wichita State University (180) - Claims greater than \$100,000 - Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient Shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.



Emporia State University (197)

Policy Option(s)

- 1
- 2
- 3
- 4

Emporia State University (197) - Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

Claims greater than \$100,000

None - Claims greater than \$100,000 - Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient Shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.



Kansas State University (470)

Policy Option(s)

- 1
- 2
- 3
- 4

Kansas State University (470) - Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

Claims greater than \$100,000

| Policy Year | Day of Date Diagnosis | Student-De.. | ICD Code Description | Claimed Amount | Paid Claims |
|-------------|-----------------------|--------------|---|----------------|-------------|
| 2023-24 | August 18, 2023 | Student | PBM CLAIMS | \$187,507 | \$141,158 |
| | September 22, 2023 | Student | SUPERVISION PREG W/HX INFERTILITY 1ST TRIMESTER | \$253,876 | \$119,779 |
| | May 25, 2024 | Dependent | TWIN LIVEBORN INFANT DELIVERED BY CESAREAN | \$1,235,969 | \$251,306 |
| | May 25, 2024 | Dependent | TWIN LIVEBORN INFANT DELIVERED BY CESAREAN | \$1,234,212 | \$259,927 |

Kansas State University (470) - Claims greater than \$100,000 - Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient Shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.



University of Kansas (471)

Policy Option(s)

- 1
- 2
- 3
- 4

Claims greater than \$100,000

| Policy Year | Day of Date Diagnosis | Student-De.. | ICD Code Description | Claimed Amount | Paid Claims |
|-------------|-----------------------|--------------|--|----------------|-------------|
| 2023-24 | August 11, 2023 | Student | BENIGN INTRACRANIAL HYPERTENSION | \$321,905 | \$166,984 |
| | September 14, 2023 | Student | PBM CLAIMS | \$189,599 | \$148,615 |
| | May 9, 2024 | Dependent | SINGLE LIVEBORN INFANT DELIVERED BY CESAREAN | \$329,216 | \$324,084 |

University of Kansas (471) - Claims greater than \$100,000 - Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient Shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.



Fort Hays State University (2005)

Policy Option(s)

1
2
4

Fort Hays State University (2005) - Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

Claims greater than \$100,000

None - Claims greater than \$100,000 - Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient Shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.



Pittsburg State University (2009)

Policy Option(s)

- 1
- 2
- 3
- 4

Pittsburg State University (2009) - Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

Claims greater than \$100,000

None - Claims greater than \$100,000 - Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient Shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.



University of Kansas - Medical Center (2070)

Policy Option(s)

1
2
3
4

University of Kansas - Medical Center (2070) - Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

Claims greater than \$100,000

| Policy Year | Day of Date Diagnosis | Student-De.. | ICD Code Description | Claimed Amount | Paid Claims |
|-------------|-----------------------|--------------|----------------------|----------------|-------------|
| 2023-24 | August 12, 2023 | Dependent | PBM CLAIMS | \$202,192 | \$145,725 |
| | August 8, 2023 | Student | PBM CLAIMS | \$383,460 | \$276,598 |

University of Kansas - Medical Center (2070) - Claims greater than \$100,000 - Utilization as of January 1, 2025

Confidential Property of UnitedHealth Group. Recipient Shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.