



Kansas State System (200118)

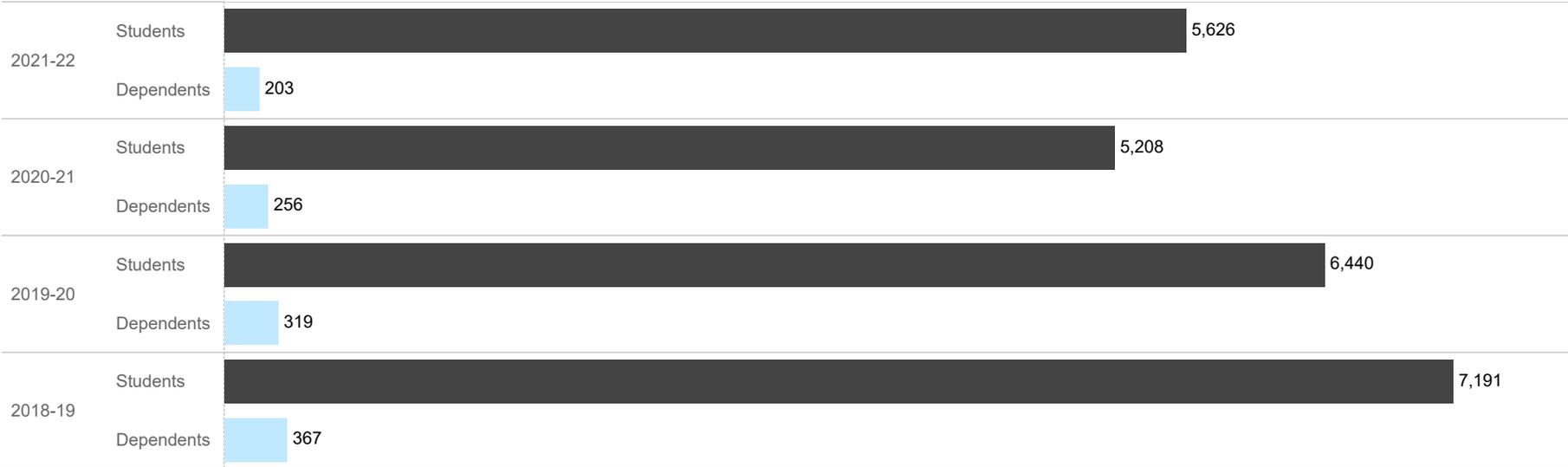
Policy Option(s)

1
2
3
4

Annualized Membership

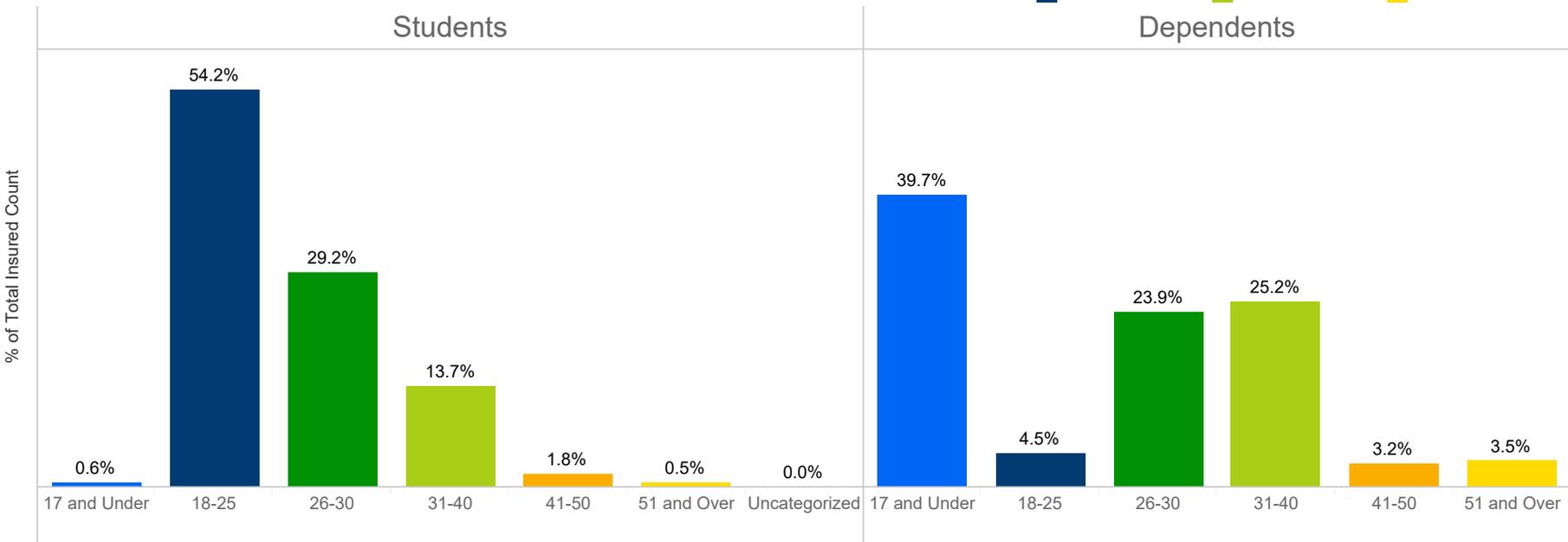
2021-22 policy year is an estimate.

■ Students ■ Dependents



2021-22 Membership by Age Group

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

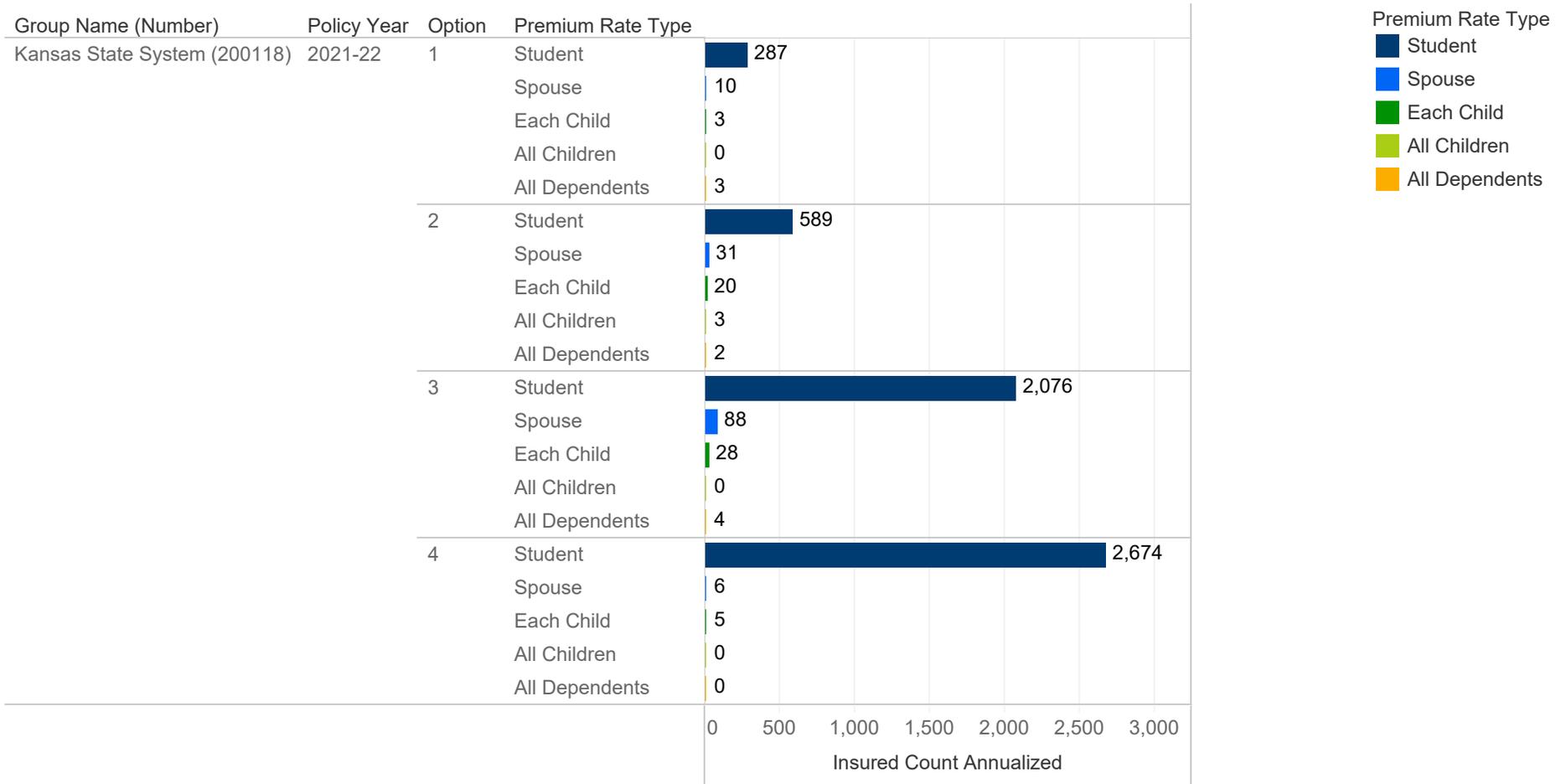


Kansas State System (200118) - Membership as of April 1, 2022

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

*2021-22 Policy Year Annualized Insured Count is an estimate.



Kansas State System (200118) - Annualized Membership as of April 23, 2022

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

***2021-22 Policy Year Annualized Insured Count is an estimate.**

Group Name (Number)	Premium Rate Type	2021-22
Kansas State System (200118)	Student	5,626
	Spouse	135
	Each Child	56
	All Children	3
	All Dependents	9

*Annualized Membership is calculated by dividing the total premium received by the annual rate. For the in-progress policy year (2021-22) 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 April 23, 2022

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 2021-22

Data as of April 1, 2022

Client Name (Number)	Rate Type	Option				Grand Total
		1	2	3	4	
Emporia State University (197)	Student	10	7	60	164	240
	Total	10	7	60	164	240
Fort Hays State University (2005)	Student	13	2		130	145
	Total	13	2		130	145
Kansas State University (470)	Student	62	109	868	481	1,498
	Spouse	1	5	40	2	48
	Each Child		2	15		17
	All Dependents		3	14		17
	Total	63	119	931	483	1,574
Pittsburg State University (2009)	Student	10	2	53	207	265
	Spouse		1	1	1	3
	Each Child		2	1	1	4
	All Children				2	2
	All Dependents				3	3
	Total	10	5	55	214	277
University of Kansas - Medical Center (2070)	Student	16	400	134	28	571
	Spouse	2	20	5		26
	Each Child	1	16	1		17
	All Children		11		2	13
	All Dependents		13			13
	Total	19	452	140	30	631
University of Kansas (471)	Student	203	89	1,117	1,137	2,493
	Spouse	8	4	62	6	79
	Each Child	4	2	27	8	40

*# of Unique Members reflects the number of unique insureds whom enrolled on the plan. Example: If a member enrolls in Option 3 for the Fall and Option 4 for the Summer - they will appear in the count for both Option 3 and Option 4, but only be counted once in the Grand Total column. Therefore the Grand Total only reflects unique insureds and may be slightly less than if you add up all the options together.

Kansas State System (200118) - Insured Counts as of April 1, 2022

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Insured Count by Rate Type and Option

Kansas State System (200118)

Policy Year 2021-22

Data as of April 1, 2022

Client Name (Number)	Rate Type	Option				Grand Total
		1	2	3	4	
University of Kansas (471)	All Children		2	2		4
	All Dependents			14	3	17
	Total	215	97	1,220	1,153	2,628
Wichita State University (180)	Student	42	78	340	1,610	2,003
	Spouse		5	8	1	14
	Each Child		5	4	2	11
	All Dependents				3	3
	Total	42	88	352	1,616	2,031
# of Unique Members*		372	770	2,758	3,789	7,523

*# of Unique Members reflects the number of unique insureds whom enrolled on the plan. Example: If a member enrolls in Option 3 for the Fall and Option 4 for the Summer - they will appear in the count for both Option 3 and Option 4, but only be counted once in the Grand Total column. Therefore the Grand Total only reflects unique insureds and may be slightly less than if you add up all the options together.

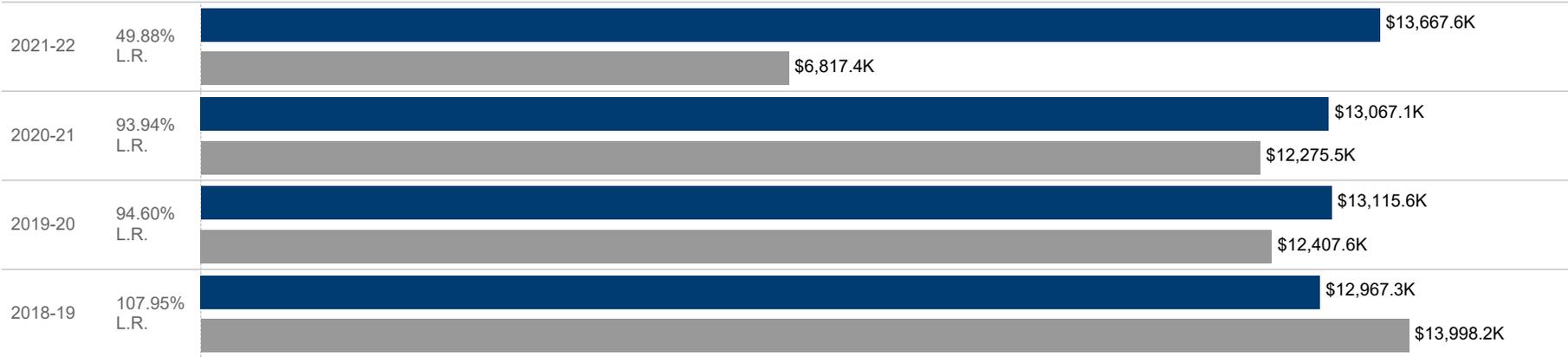
Kansas State System (200118) - Insured Counts as of April 1, 2022

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Plan Experience Overview

All Insureds P&L

■ Premium ■ Paid Claims

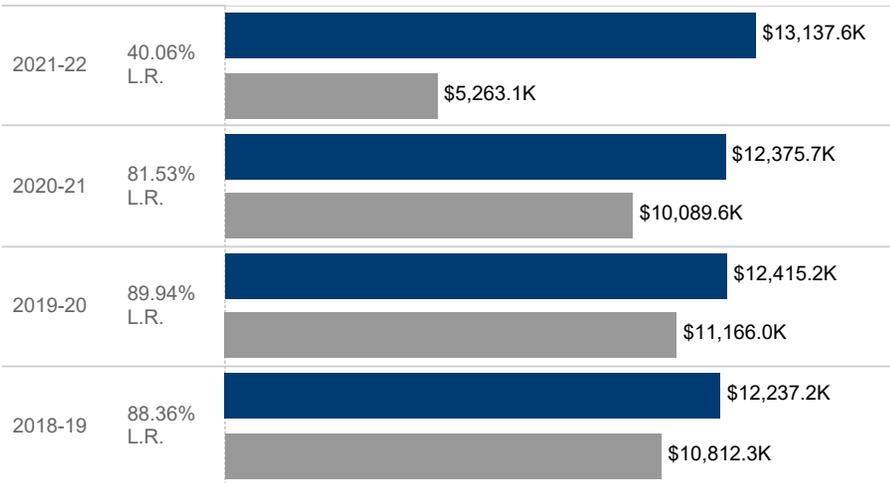


Values are displayed in thousands

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

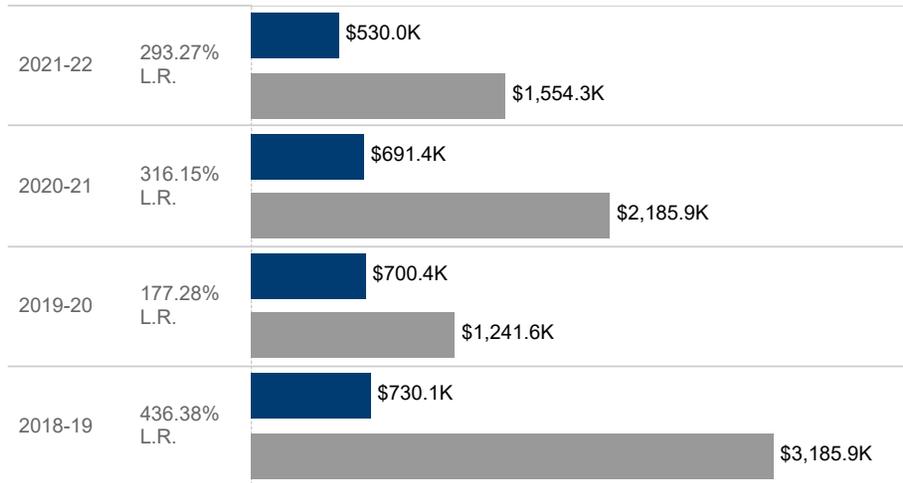
■ Premium ■ Paid Claims



Values are displayed in thousands

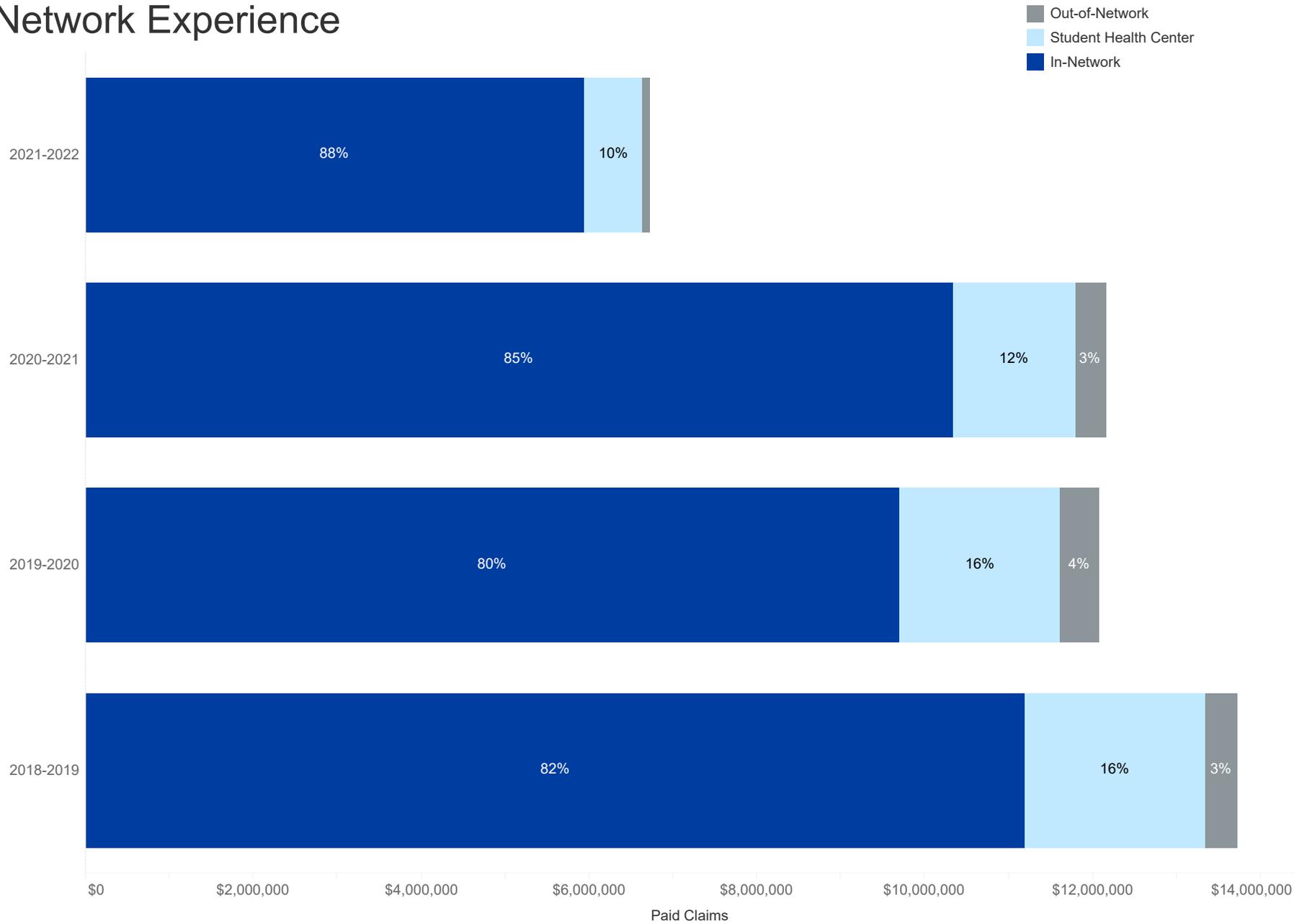
Dependents - P&L

■ Premium ■ Paid Claims



Values are displayed in thousands

Network Experience



SR Charge Category Utilization as of 4/1/2022

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	2020-2021				2021-2022			
		Claimant Count	Claim Count	Claimed Amount	Paid Claims	Claimant Count	Claim Count	Claimed Amount	Paid Claims
Grand Total				\$29,957,195	\$12,275,521			\$16,777,111	\$6,817,388
Outpatient	Total			\$23,751,155	\$9,144,853			\$12,804,423	\$5,081,154
	Null	6	9	\$128	(\$222)	1	1	\$20	\$0
	ADJUSTMENTS	623	1,920	\$0	(\$670,369)	437	1,388	\$0	(\$87,999)
	AMBULANCE	32	56	\$38,350	\$26,653	14	14	\$61,788	\$40,427
	ANESTHETIST	162	212	\$190,775	\$72,314	75	94	\$83,660	\$28,914
	ASSISTANT SURGEON	17	17	\$39,078	\$2,445	13	15	\$22,620	\$1,780
	CAT SCAN / MRI	304	685	\$1,574,158	\$463,309	192	386	\$1,063,793	\$222,882
	CHEMOTHERAPY	12	122	\$1,481,742	\$557,482	5	13	\$468,276	\$74,500
	CLAIM INTEREST	215	484	\$48	\$2,354	667	1,510	\$0	\$3,747
	CONSULTANT	4	6	\$1,009	\$167	1	1	\$225	\$0
	DENTAL	17	24	\$3,736	\$95	12	12	\$1,686	\$41
	DURABLE MED/BRACES/APPL	110	178	\$121,748	\$36,582	88	128	\$67,807	\$25,352
	GROUP LEDGER BILLING	3	3	\$0	\$0	2	2	\$8,563	\$8,563
	HOSPITAL MISCELLANEOUS	119	166	\$124,529	\$30,881	23	28	\$55,069	\$24,660
	INJECTIONS	1,223	3,741	\$398,197	\$208,936	1,366	2,499	\$294,587	\$214,705
	LABORATORY	2,049	6,666	\$3,220,418	\$1,041,842	2,469	6,246	\$1,887,590	\$728,694
	MEDICAL EMERGENCY	301	380	\$1,058,970	\$283,347	154	168	\$609,388	\$146,135
	MEDICAL RECORDS	1	1	\$9	\$9				
	OTHER	57	195	\$24,846	\$24,846	26	78	\$9,687	\$9,687
	OTHER INSURANCE	5	15	\$0	(\$1,828)	2	2	\$0	(\$93)
	OUTPATIENT SURGERY	503	812	\$700,041	\$187,539	362	503	\$386,703	\$104,390
	OUTPATIENT SURGICAL FACILITI..	179	237	\$3,214,792	\$744,595	80	92	\$1,387,332	\$372,475
	PHYSICIAN VISITS	2,453	10,369	\$2,202,268	\$999,138	2,246	6,892	\$1,250,824	\$583,634
	PHYSIOTHERAPY	282	1,451	\$387,364	\$76,077	165	737	\$180,642	\$29,952
	PRESCRIPTIONS	3,342	24,375	\$6,400,831	\$3,322,140	3,381	19,811	\$3,702,865	\$1,711,819
	RADIATION THERAPY	1	49	\$150,118	\$44,510	1	4	\$49,443	\$2,919

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

Kansas State System (200118) - Utilization as of 4/1/2022

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SR Charge Category Utilization as of 4/1/2022

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	2020-2021				2021-2022			
		Claimant Count	Claim Count	Claimed Amount	Paid Claims	Claimant Count	Claim Count	Claimed Amount	Paid Claims
Outpatient	REFUNDS	7	10	\$0	(\$1,250)				
	SHC-ADJUSTMENTS	30	134	\$105	\$105	10	50	\$0	\$0
	SHC-CONSULTANT	2	2	\$172	\$150				
	SHC-DENTAL	1	1	\$27	\$27				
	SHC-GROUP LEDGER BILLING	5	0		\$98				
	SHC-HOSPITAL MISCELLANEOUS	1	1	(\$29)	(\$29)	1	1	(\$29)	(\$29)
	SHC-INJECTIONS	1,650	4,624	\$234,315	\$229,098	635	1,383	\$65,062	\$65,061
	SHC-LABORATORY	2,386	13,105	\$408,135	\$372,235	2,144	7,120	\$214,054	\$204,605
	SHC-PHYSICIAN VISITS	1,345	2,551	\$131,677	\$131,624	904	1,608	\$75,884	\$75,884
	SHC-PHYSIOTHERAPY	117	966	\$43,331	\$43,331	99	683	\$33,195	\$33,195
	SHC-PRESCRIPTIONS	1,596	9,180	\$569,651	\$543,562	693	2,268	\$276,625	\$276,564
	SHC-PROFESSIONAL FEE	58	219	\$27,692	\$17,106				
	SHC-PSYCHOTHERAPY	96	826	\$13,300	\$13,300	9	19	\$709	\$709
	SHC-RADIATION THERAPY	1	1	(\$100)	(\$100)				
	SHC-STATE MANDATE TAX	1	1	\$14	\$14				
	SHC-SUPPLIES/MISC	168	203	\$70,014	\$69,947	79	85	\$22,043	\$22,043
	SHC-SURGERY	173	227	\$25,847	\$25,847	84	122	\$12,697	\$12,697
	SHC-XRAYS	208	255	\$18,284	\$17,198	83	89	\$6,016	\$5,696
	SUPPLIES/MISC	75	103	\$127,148	\$64,030	71	83	\$73,636	\$47,871
	URGENT CARE	31	47	\$16,922	\$3,836	35	41	\$10,118	\$1,292
XRAYS	761	1,864	\$731,497	\$161,884	1,036	1,888	\$421,844	\$88,382	
Inpatient	Total			\$6,206,041	\$3,130,668			\$3,972,688	\$1,736,233
	ADJUSTMENTS	32	48	\$0	\$683,110	6	7	\$0	\$88,479
	ANESTHETIST	59	70	\$123,359	\$48,660	37	46	\$84,101	\$36,967
	ASSISTANT SURGEON	16	21	\$33,789	\$3,661	7	7	\$12,450	\$709
	CLAIM INTEREST	15	43	\$0	\$1,203	13	24	\$0	\$55
	CONSULTANT	1	3	\$834	\$520	1	1	\$269	\$214

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

Kansas State System (200118) - Utilization as of 4/1/2022

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SR Charge Category Utilization as of 4/1/2022

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	2020-2021				2021-2022			
		Claimant Count	Claim Count	Claimed Amount	Paid Claims	Claimant Count	Claim Count	Claimed Amount	Paid Claims
Inpatient	DENTAL	40	57	\$28,909	\$3,157	17	18	\$12,476	\$1,237
	HOME HEALTH CARE	4	11	\$6,723	\$3,071	2	3	\$3,790	\$1,503
	HOSPITAL	157	280	\$5,319,881	\$2,138,015	83	116	\$3,500,518	\$1,466,903
	INJECTIONS	16	16	\$5,396	\$3,507	1	1	\$28	\$20
	INPATIENT SURGERY	79	110	\$279,803	\$124,126	46	64	\$178,812	\$80,719
	MEDICAL EMERGENCY	23	30	\$96,602	\$32,847	5	7	\$16,557	\$5,763
	PHYSICIAN VISITS	164	521	\$274,795	\$77,606	71	200	\$125,995	\$37,986
	PRESCRIPTIONS					54	203	\$17,733	\$10,903
	PROFESSIONAL FEE	62	158	\$35,951	\$11,185	30	90	\$19,960	\$4,777

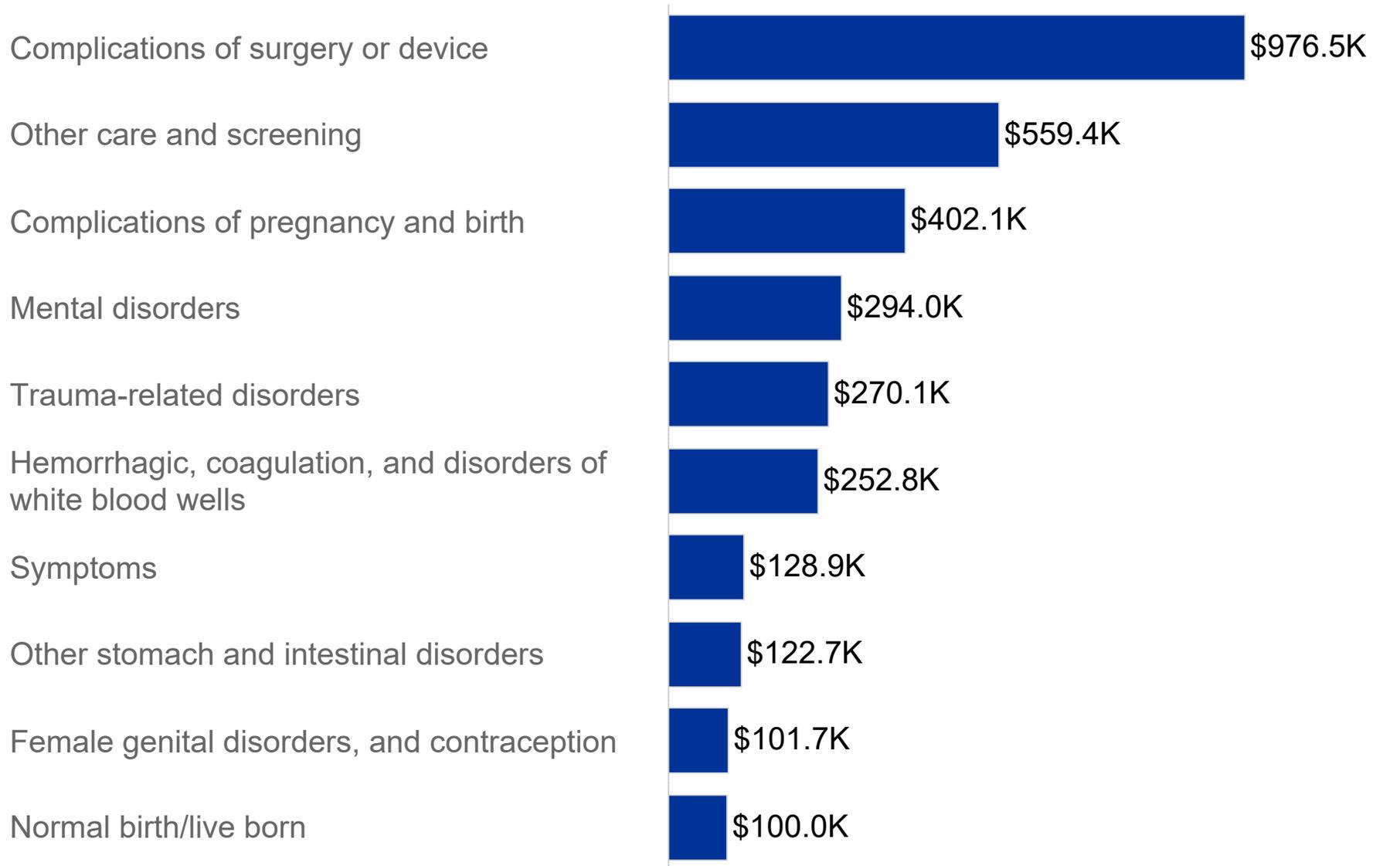
Insured Type: All | Charge Type: All | Charge Service Type: All | Charge Code Description: All | Cause Code: All

Kansas State System (200118) - Utilization as of 4/1/2022

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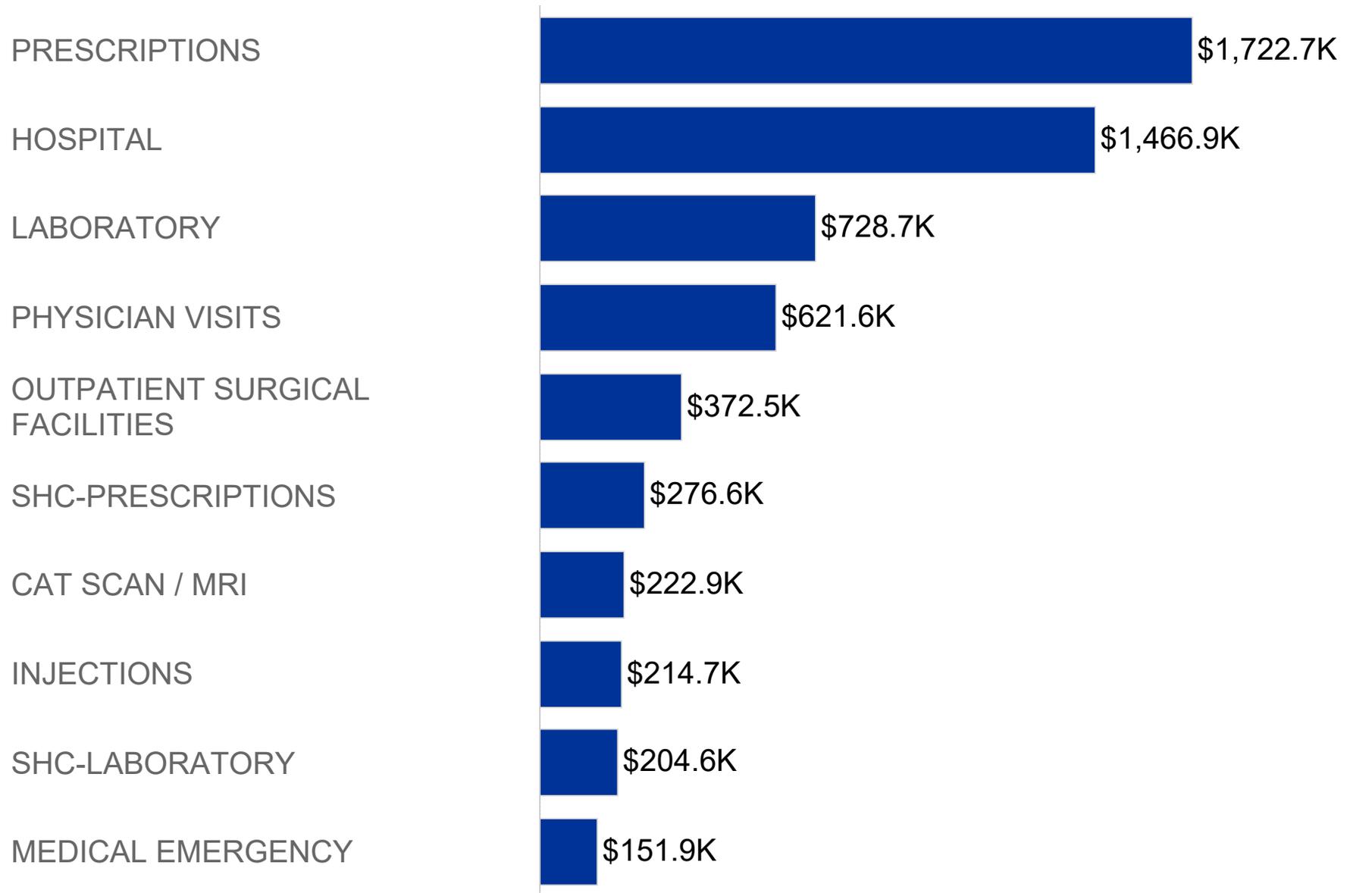
Top 10 Diagnoses 2021-22 Policy Year

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



Values are displayed in thousands

Top 10 SR Charge Categories 2021-22 Policy Year



Values are displayed in thousands

Claims greater than \$100,000

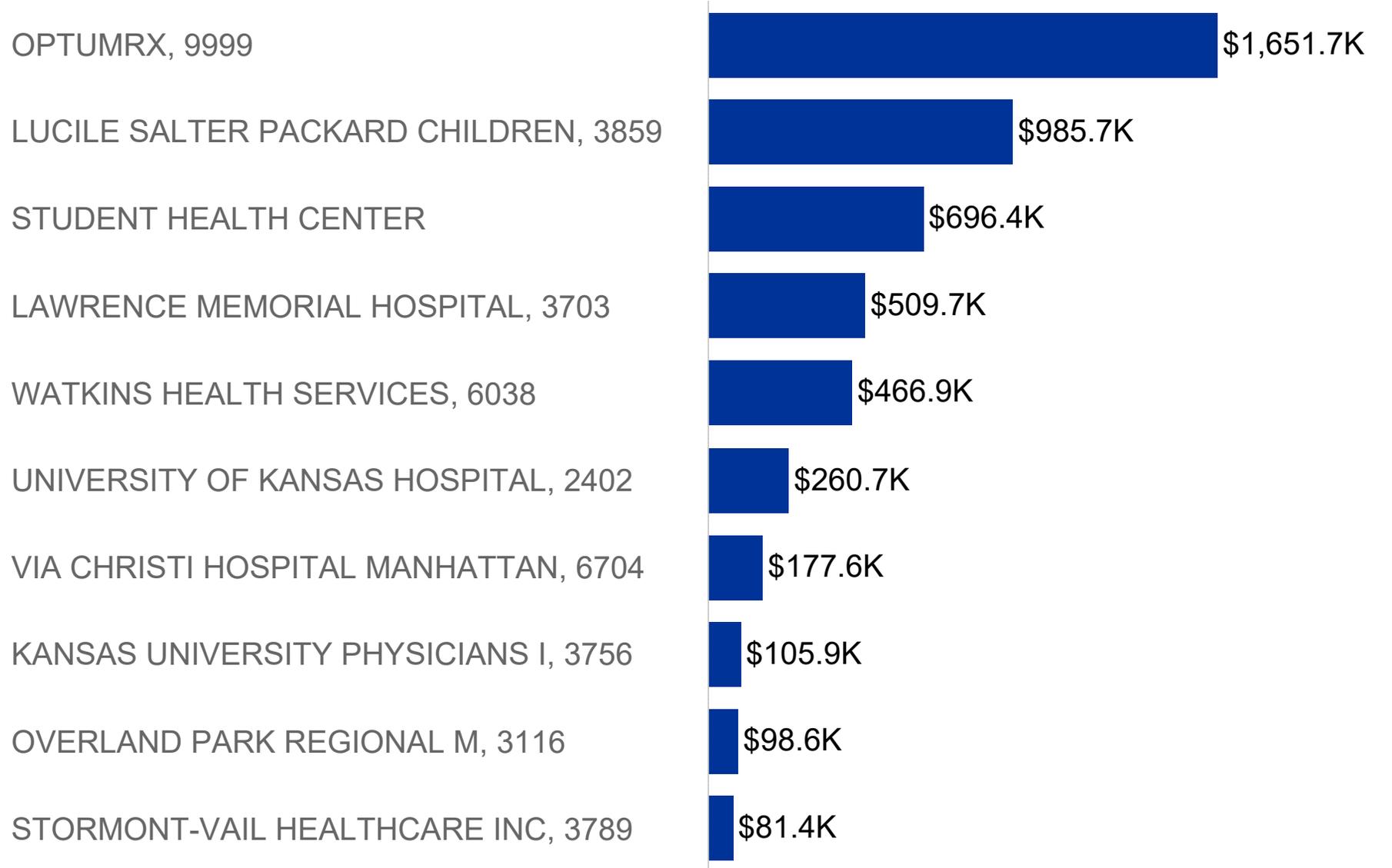
Policy Year	Day of Date Diagnosis	Student-Dep..	ICD Code Description	Claimed Amount	Paid Claims
2020-21	August 4, 2020	Student	MALIGNANT NEOPLASM OF UNSPECIFIED OVARY	\$375,761	\$342,046
	August 24, 2020	Student	PBM CLAIMS	\$197,483	\$161,295
	August 15, 2020	Student	MAJ DEPRESS D/O RECURRENT SEV W/O PSYCH FEATURES	\$392,004	\$178,371
	October 19, 2020	Student	PBM CLAIMS	\$199,175	\$153,866
	August 7, 2020	Student	PBM CLAIMS	\$372,144	\$317,444
	August 20, 2020	Student	PBM CLAIMS	\$213,539	\$159,031
	September 3, 2020	Student	PBM CLAIMS	\$130,065	\$102,945
	August 5, 2020	Dependent	TINNITUS BILATERAL	\$1,299,746	\$652,224
	October 7, 2020	Dependent	CEREBROSPINAL FLUID LEAK FROM SPINAL PUNCTURE	\$670,386	\$357,491
	August 23, 2020	Student	PBM CLAIMS	\$398,956	\$310,305
	August 13, 2020	Student	MALIG NEOPLASM UPPER-INNER QUAD LT FEMALE BREAST	\$529,780	\$104,660
	August 3, 2020	Student	PBM CLAIMS	\$209,956	\$158,561
	August 3, 2020	Student	SICKLE-CELL DISEASE WITHOUT CRISIS	\$742,437	\$500,981
2021-22	December 29, 2021	Dependent	OTH MECH COMP VENTRICLR INTRACRAN SHUNT INIT ENC	\$1,822,339	\$971,560
	August 18, 2021	Student	PBM CLAIMS	\$279,422	\$215,594
	August 27, 2021	Student	SICKLE-CELL DISEASE WITHOUT CRISIS	\$373,068	\$249,769

Kansas State System (200118) - Claims greater than \$100,000 - Utilization as of April 1, 2022

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Top Billing Providers

2021-22 Policy Year



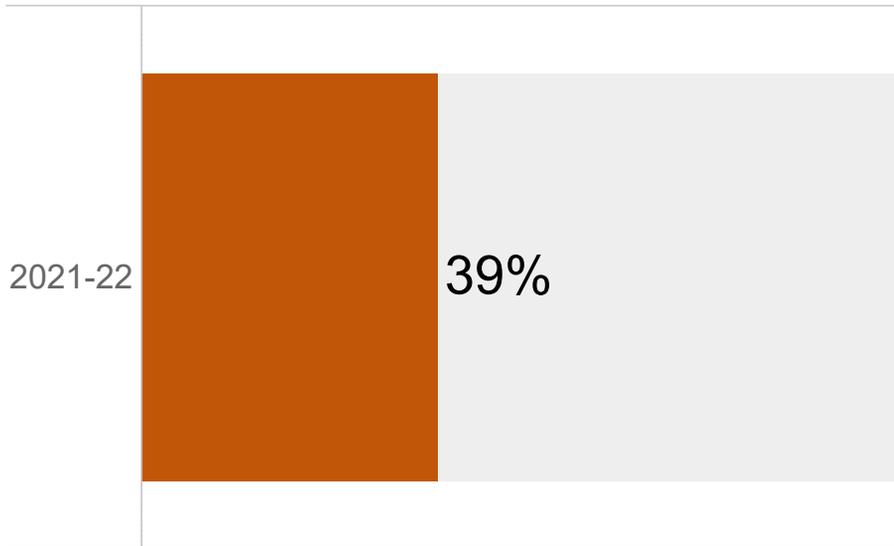
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Kansas State System (200118) - Utilization as of April 1, 2022

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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
PFIZER-BIONTECH COVID-19 VACCINE	3	1,387	1,137	\$0	\$50,360
MODERNA COVID-19 VACCINE	3	708	657	\$0	\$26,400
AMPHETAMINE/DEXTROAMPHETA..	1	413	101	\$1,953	\$5,571
ESCITALOPRAM OXALATE	1	372	90	\$718	\$313
FLUZONE QUADRIVALENT 2021-2022	3	156	152	\$0	\$3,750
PREDNISONE	1	141	100	\$101	\$41
FLUARIX QUADRIVALENT 2021-2022	3	126	125	\$0	\$3,100
FLUCELVAX QUADRIVALENT 2021-2022	3	122	120	\$0	\$3,084
PFIZER-BIONTECH COVID-19 VACCINE/ADULT RTU	3	114	106	\$0	\$4,320
AMOXICILLIN	1	109	96	\$57	\$8

Top Drugs by Paid Claims

Drug Name	Tier	Claimant Count	Copay	Paid Claims
HUMIRA PEN	2	8	\$48,839	\$257,249
KALYDECO	2	1	\$8,000	\$213,307
STELARA	2	1	\$7,975	\$88,796
DOPTELET	3	1	\$7,975	\$83,270
SIMPONI	2	1	\$6,897	\$60,259
PFIZER-BIONTECH COVID-19 VACCIN..	3	1,137	\$0	\$50,360
ENBREL	3	1	\$7,096	\$47,072
DUPIXENT	3	4	\$24,754	\$46,419
HUMALOG	1	9	\$713	\$40,921
EMTRICITABINE/TENOFOVIR DISOPROXIL FUMARATE	1	19	\$0	\$40,832

Top Therapeutic Classes by Claimant Count

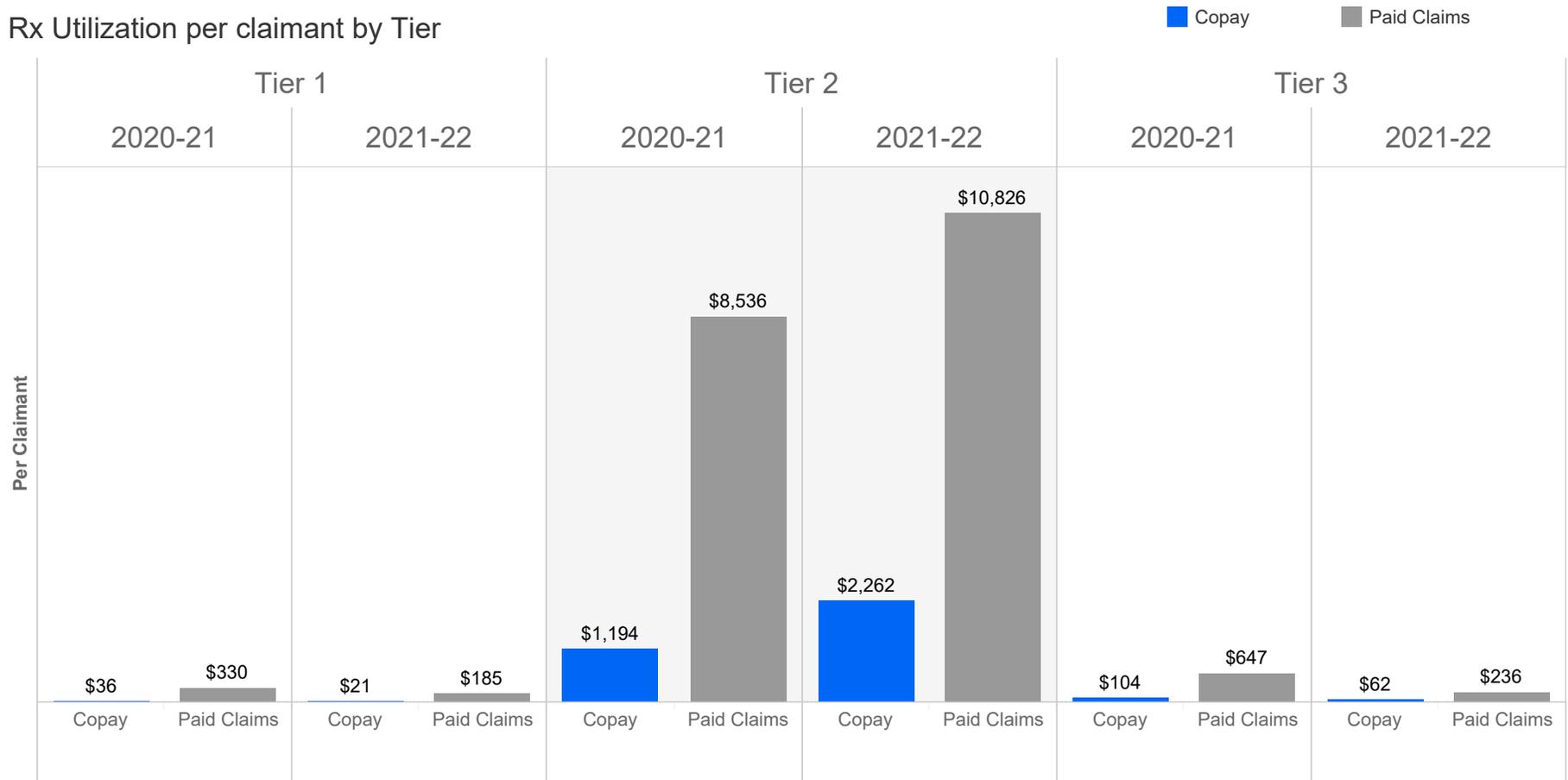
	Claimant Count	Copay	Paid Claims
BIOLOGICALS	2,087	\$0	\$105,440
PSYCHOSTIMULANTS-ANTIDEPRESSANT..	442	\$17,422	\$21,144
SYSTEMIC CONTRACEPTIVES	336	\$3,878	\$53,919
GLUCOCORTICOIDS	211	\$1,890	\$9,428
PENICILLINS	160	\$208	\$128
AMPHETAMINE PREPARATIONS	157	\$25,313	\$68,644
ANTIARTHRITICS	155	\$98,238	\$438,073
NARCOTIC ANALGESICS	149	\$186	\$198
MISCELLANEOUS	138	\$53,169	\$388,185
BRONCHIAL DILATORS	116	\$4,564	\$20,493

Kansas State System (200118) - Utilization as of April 1, 2022

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Rx Utilization per claimant by Tier



Rx Utilization by Tier

Tier	2020-21			2021-22		
	Claimant Count	Copay	Paid Claims	Claimant Count	Copay	Paid Claims
1	1,930	\$70,113	\$636,747	1,539	\$32,861	\$284,230
2	154	\$183,885	\$1,314,520	77	\$174,180	\$833,620
3	2,099	\$218,041	\$1,359,100	2,170	\$134,461	\$512,825

Premium, Paid Claims and Loss Ratio

utilization as of April 1, 2022

Group Name (Number)	Client Name (Number)	Policy Year		Measure Names
Kansas State System (200118)	Emporia State University (197)	2018-19	Premium	\$586,617
			Paid Claims	\$277,019
			Loss Ratio	47.2%
	2019-20	Premium	\$490,958	
		Paid Claims	\$184,563	
		Loss Ratio	37.6%	
	2020-21	Premium	\$380,571	
		Paid Claims	\$379,622	
		Loss Ratio	99.8%	
2021-22	Premium	\$403,442		
	Paid Claims	\$96,646		
	Loss Ratio	24.0%		
Fort Hays State University (2005)	2018-19	Premium	\$466,728	
		Paid Claims	\$387,385	
		Loss Ratio	83.0%	
	2019-20	Premium	\$399,538	

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 April 1, 2022

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Premium, Paid Claims and Loss Ratio

utilization as of April 1, 2022

Group Name (Number)	Client Name (Number)	Policy Year	Measure Name	Value
Kansas State System (200118)	Fort Hays State University (2005)	2019-20	Paid Claims	\$174,285
			Loss Ratio	43.6%
		2020-21	Premium	\$272,999
			Paid Claims	\$125,801
		2021-22	Premium	\$313,669
			Paid Claims	\$111,884
Kansas State University (470)	Kansas State University (470)	2018-19	Premium	\$3,291,886
			Paid Claims	\$4,118,310
			Loss Ratio	125.1%
		2019-20	Premium	\$3,253,378
			Paid Claims	\$3,418,436
			Loss Ratio	105.1%
2020-21	Premium	\$3,180,018		
	Paid Claims	\$2,395,980		

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 April 1, 2022

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Premium, Paid Claims and Loss Ratio

utilization as of April 1, 2022

Group Name (Number)	Client Name (Number)	Policy Year	Measure Name	Value
Kansas State System (200118)	Kansas State University (470)	2020-21	Loss Ratio	75.3%
			Premium	\$2,864,728
		Paid Claims	\$1,554,590	
		Loss Ratio	54.3%	
Pittsburg State University (2009)	2018-19	Premium	\$400,541	
		Paid Claims	\$148,042	
		Loss Ratio	37.0%	
	2019-20	Premium	\$449,778	
		Paid Claims	\$152,162	
		Loss Ratio	33.8%	
2020-21	Premium	\$387,006		
	Paid Claims	\$201,051		
	Loss Ratio	52.0%		
2021-22	Premium	\$435,092		
	Paid Claims	\$129,843		
	Loss Ratio	29.8%		

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 April 1, 2022

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 April 1, 2022

Group Name (Number)	Client Name (Number)	Policy Year	Measure Names	Premium	Paid Claims	Loss Ratio
Kansas State System (200118)	University of Kansas - Medical Center (2070)	2018-19	Premium	\$1,175,927		
			Paid Claims		\$1,828,158	
			Loss Ratio			155.5%
		2019-20	Premium	\$1,192,034		
		Paid Claims			\$2,925,976	
		Loss Ratio				245.5%
		2020-21	Premium	\$1,438,421		
		Paid Claims			\$2,502,851	
		Loss Ratio				174.0%
	2021-22	Premium	\$1,308,015			
	Paid Claims			\$1,097,706		
	Loss Ratio				83.9%	
	University of Kansas (471)	2018-19	Premium	\$5,075,164		
		Paid Claims		\$6,408,616		
		Loss Ratio				126.3%
	2019-20	Premium	\$5,268,510			

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 April 1, 2022

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 April 1, 2022

Group Name (Number)	Client Name (Number)	Policy Year	Measure Name	Value
Kansas State System (200118)	University of Kansas (471)	2019-20	Paid Claims	\$4,249,480
			Loss Ratio	80.7%
			Premium	\$5,253,096
	2020-21	Paid Claims	\$5,983,306	
		Loss Ratio	113.9%	
		Premium	\$5,017,826	
2021-22	Paid Claims	\$3,277,254		
	Loss Ratio	65.3%		
	Premium	\$1,970,435		
Wichita State University (180)	2018-19	Paid Claims	\$830,683	
		Loss Ratio	42.2%	
		Premium	\$2,061,414	
	2019-20	Paid Claims	\$1,302,700	
		Loss Ratio	63.2%	
		Premium	\$2,155,009	
2020-21	Paid Claims	\$686,910		

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 April 1, 2022

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Premium, Paid Claims and Loss Ratio

utilization as of April 1, 2022

Group Name (Number)	Client Name (Number)	Policy Year	Measure Names	Value
Kansas State System (200118)	Wichita State University (180)	2020-21	Loss Ratio	31.9%
		2021-22	Premium	\$3,324,797
			Paid Claims	\$549,465
			Loss Ratio	16.5%

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 April 1, 2022

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Wichita State University (180)

Policy Option(s)

1
2
3
4

Claims greater than \$100,000

None - Claims greater than \$100,000 - Utilization as of April 1, 2022

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 | |

Claims greater than \$100,000

Policy Year	Day of Date Diagnosis	Student-Dep..	ICD Code Description	Claimed Amount	Paid Claims
2020-21	August 15, 2020	Student	MAJ DEPRESS D/O RECURRENT SEV W/O PSYCH FEATURES	\$392,004	\$178,371

Emporia State University (197) - Claims greater than \$100,000 - Utilization as of April 1, 2022

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

Claims greater than \$100,000

Policy Year	Day of Date Diagnosis	Student-Dep..	ICD Code Description	Claimed Amount	Paid Claims
2020-21	September 3, 2020	Student	PBM CLAIMS	\$130,065	\$102,945

Kansas State University (470) - Claims greater than \$100,000 - Utilization as of April 1, 2022

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-Dep..	ICD Code Description	Claimed Amount	Paid Claims
2020-21	August 4, 2020	Student	MALIGNANT NEOPLASM OF UNSPECIFIED OVARY	\$375,761	\$342,046
	August 24, 2020	Student	PBM CLAIMS	\$197,483	\$161,295
	October 19, 2020	Student	PBM CLAIMS	\$199,175	\$153,866
	August 20, 2020	Student	PBM CLAIMS	\$213,539	\$159,031
	August 5, 2020	Dependent	TINNITUS BILATERAL	\$1,299,746	\$652,224
	October 7, 2020	Dependent	CEREBROSPINAL FLUID LEAK FROM SPINAL PUNCTURE	\$670,386	\$357,491
	August 13, 2020	Student	MALIG NEOPLASM UPPER-INNER QUAD LT FEMALE BREAST	\$529,780	\$104,660
	August 3, 2020	Student	SICKLE-CELL DISEASE WITHOUT CRISIS	\$742,437	\$500,981
2021-22	December 29, 2021	Dependent	OTH MECH COMP VENTRICLR INTRACRAN SHUNT INIT ENC	\$1,822,339	\$971,560
	August 27, 2021	Student	SICKLE-CELL DISEASE WITHOUT CRISIS	\$373,068	\$249,769

University of Kansas (471) - Claims greater than \$100,000 - Utilization as of April 1, 2022

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

Claims greater than \$100,000

None - Claims greater than \$100,000 - Utilization as of April 1, 2022

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 | |

Claims greater than \$100,000

None - Claims greater than \$100,000 - Utilization as of April 1, 2022

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 | |

Claims greater than \$100,000

Policy Year	Day of Date Diagnosis	Student-Dep..	ICD Code Description	Claimed Amount	Paid Claims
2020-21	August 7, 2020	Student	PBM CLAIMS	\$372,144	\$317,444
	August 23, 2020	Student	PBM CLAIMS	\$398,956	\$310,305
	August 3, 2020	Student	PBM CLAIMS	\$209,956	\$158,561
2021-22	August 18, 2021	Student	PBM CLAIMS	\$279,422	\$215,594

University of Kansas - Medical Center (2070) - Claims greater than \$100,000 - Utilization as of April 1, 2022

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