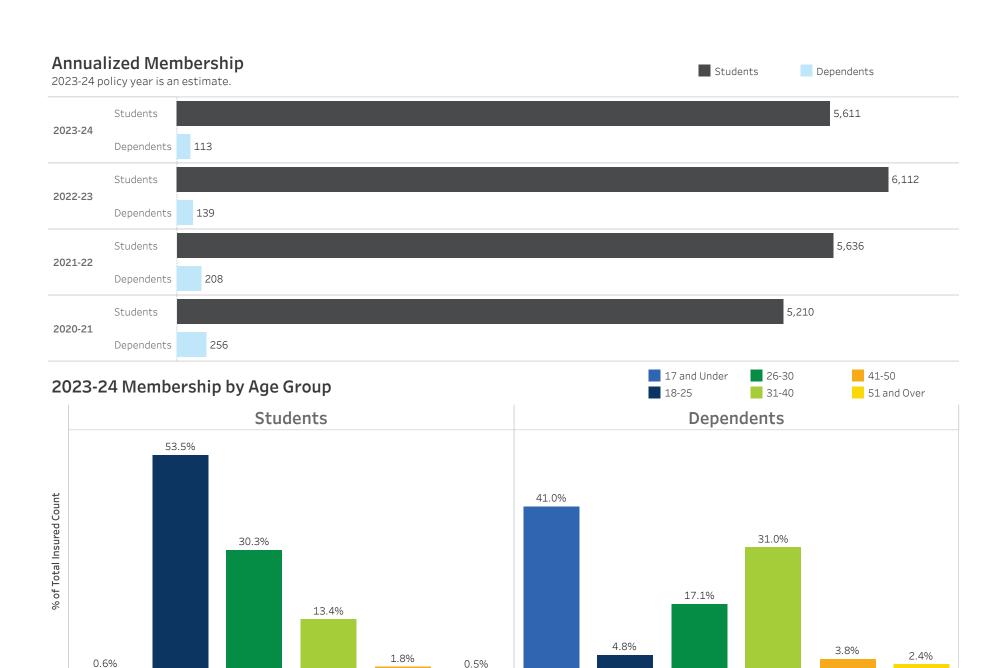
Kansas State System (200118) Policy Option(s)



Kansas State System (200118) - Membership as of August 1, 2024

51 and Over

17 and Under

18-25

26-30

31-40

41-50

51 and Over

17 and Under

18-25

26-30

31-40

41-50

Annualized Insured Counts

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

Group Name (Number)	Policy Year	Option	Premium Rate Typ	pe
Kansas State System	2023-24	1	Student	126
(200118)		2	Student	439
			Spouse	17
			Each Child	7
			All Children	2
			All Dependents	6
		3	Student	2,202
			Spouse	45
			Each Child	19
			All Children	2
			All Dependents	0
		4	Student	2,844
			Spouse	9
			Each Child	6
			All Children	0
			All Dependents	0
				0 1,000 2,000 3,000
				Insured Count Annualized

Kansas State System (200118) - Annualized Membership as of August 24, 2024

Annualized Membership by Rate Type

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

Group Name (Number)	Premium Rate Type	2023-24
Kansas State System (200118)	Student	5,611
	Spouse	71
	Each Child	32
	All Children	4
	All Dependents	6
Grand Total		5,724

^{*}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 August 24, 2024
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 2023-24

Total Number of Insureds with active coverage as of August 26, 2024

Group Name (Number)	Client Name (Num	Premium Rate Type	1	2	3	4	Total
Kansas State System	Emporia State	Student	6	5	73	137	211
(200118)	University (197)	Total	6	5	73	137	211
	Fort Hays State	Student	8	4		191	203
	University (2005)	Total	8	4		191	203
	Kansas State	Student	29	108	893	455	1,412
	University (470)	Spouse		4	32	3	38
		Each Child			7		7
		All Children				4	4
		All Dependents		3			3
		Total	29	115	932	462	1,464
	Pittsburg State	Student	3		86	332	404
	University (2009)	Spouse			2	2	4
		Each Child			3	4	7
		All Children			2		2
		All Dependents				3	3
		Total	3		91	338	415
	University of	Student	7	334	204	13	549
	Kansas - Medical	Spouse		15	8	1	24
	Center (2070)	Each Child		10	6		16
		All Children		2	2		4
		All Dependents		6			6
		Total	7	367	220	14	597
	University of	Student	89	57	1,183	1,152	2,379
	Kansas (471)	Spouse			27	12	38
		Each Child		1	18	12	29
		All Children		2	2	4	8
		All Dependents		7	4		11

Kansas State System (200118) - Total Insured Counts - Active Coverage as of August 26, 2024

Insured Count by Rate Type and Option

Kansas State System (200118)

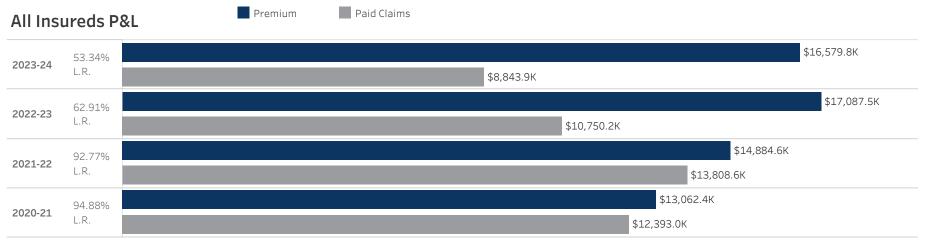
Policy Year 2023-24

Total Number of Insureds with active coverage as of August 26, 2024

Group Name (Number)	Client Name (Num	Premium Rate Type	1	2	3	4	Total
Kansas State System	Kansas (471)	Total	89	67	1,234	1,178	2,463
(200118)	Wichita State	Student	23	55	412	1,836	2,225
	University (180)	Spouse		4	5	2	11
		Each Child		1		1	2
		All Dependents		3			3
		Total	23	63	417	1,839	2,241
	Total		165	620	2,962	4,157	7,584
# of Unique Members			165	620	2,962	4,157	7,584

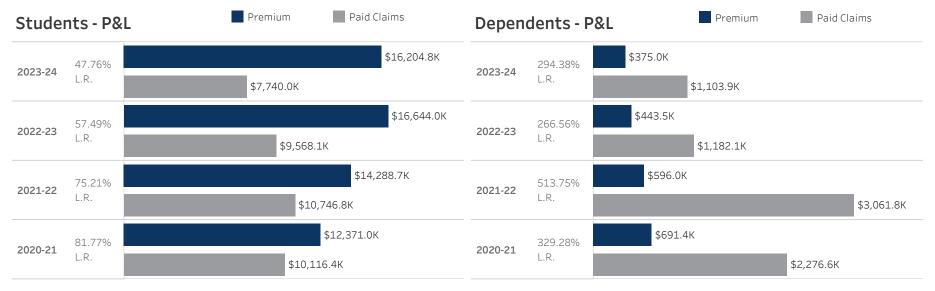
Kansas State System (200118) - Total Insured Counts - Active Coverage as of August 26, 2024

Plan Experience Overview



Values are displayed in thousands

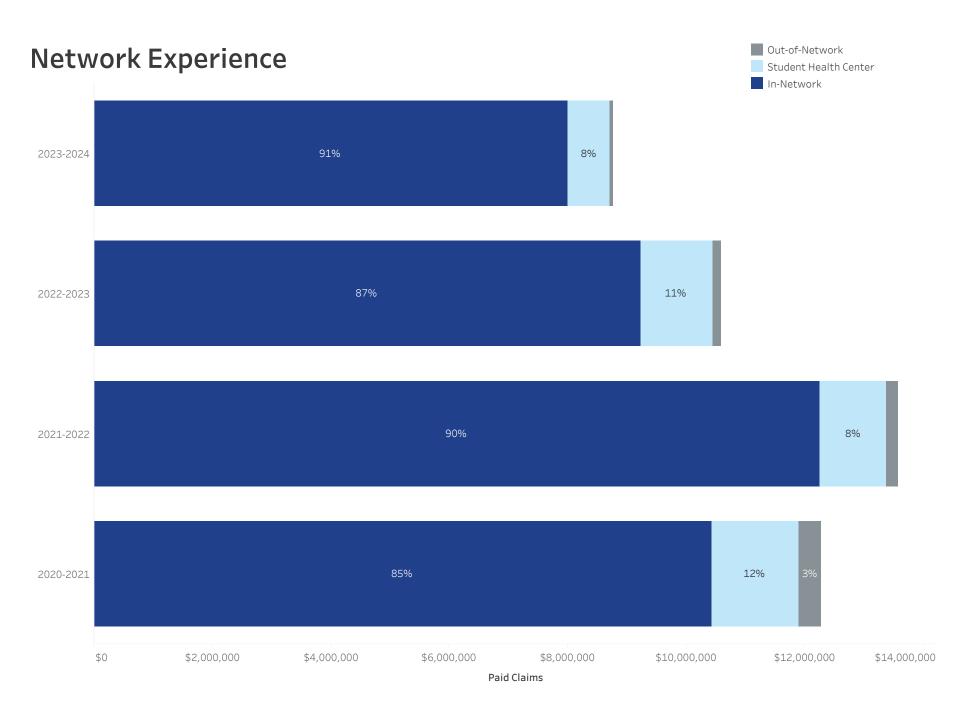
The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions (if applicable.)



Values are displayed in thousands

Values are displayed in thousands

Kansas State System (200118) - Utilization as of August 1, 2024



Kansas State System (200118) - Utilization as of August 1, 2024

SR Charge Category Utilization as of 8/1/2024

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

			2022-2	2-2023			2023-2024		
Charge Service Type	Charge Description Category	Claimant Count	Claim Count	Claimed Amount	Paid Claims	Claimant Count	Claim Count	Claimed Amount	Paid Claims
Grand Total				\$29,223,257	\$10,750,238			\$23,734,076	\$8,843,898
Outpatient	Total			\$23,348,339	\$8,405,216			\$17,263,019	\$6,319,665
	Null					0	0		(\$12)
	ADJUSTMENTS	291	1,133	\$0	(\$400,528)	505	1,225	\$0	(\$270,430)
	AMBULANCE	50	58	\$119,418	\$68,073	27	33	\$27,965	\$15,300
	ANESTHETIST	141	199	\$157,527	\$59,394	89	129	\$88,841	\$36,000
	ASSISTANT SURGEON	18	20	\$82,137	\$5,598	11	11	\$27,974	\$1,295
	CAT SCAN / MRI	300	670	\$1,811,076	\$378,972	239	528	\$1,452,604	\$294,647
	CHEMOTHERAPY	10	58	\$1,332,605	\$278,363	9	45	\$781,664	\$139,727
	CLAIM INTEREST	341	754	\$0	\$16,851	158	233	\$0	\$545
	DENTAL	11	15	\$11,144	\$238	12	14	\$4,179	\$41
	DURABLE MED/BRACES/APPL	160	293	\$146,913	\$39,728	160	268	\$168,202	\$42,725
	GROUP LEDGER BILLING	6	29	\$0	\$0	1	1	\$0	\$0
	HOSPITAL MISCELLANEOUS	17	39	\$603,422	\$202,588	1	1	\$75	\$53
	INJECTIONS	1,386	2,550	\$595,222	\$417,615	1,634	2,783	\$495,167	\$375,908
	INVESTIGATIONS/LEGAL					2	2	\$1,702	\$1,702
	LABORATORY	3,069	13,725	\$3,590,133	\$1,213,311	3,857	10,797	\$2,653,654	\$883,680
	MEDICAL EMERGENCY	331	438	\$1,347,209	\$323,662	257	332	\$993,508	\$213,309
	MEDICAL RECORDS	3	3	\$826	\$826	1	1	\$10	\$10
	OTHER	21	139	\$12,105	\$12,105	20	93	\$4,301	\$4,301
	OTHER INSURANCE	4	9	\$0	(\$1,026)	1	1	\$0	(\$765)
	OUTPATIENT SURGERY	545	833	\$675,685	\$183,448	501	695	\$431,797	\$115,936
	OUTPATIENT SURGICAL FACILITIES	153	222	\$2,833,565	\$729,404	105	121	\$1,607,005	\$406,587
	PHYSICIAN VISITS	3,115	11,452	\$2,074,641	\$937,177	3,398	11,259	\$1,898,462	\$888,656
	PHYSIOTHERAPY	216	1,104	\$440,008	\$125,070	269	1,273	\$421,764	\$120,002
	PRESCRIPTIONS	2,836	22,715	\$5,384,443	\$2,395,752	2,883	22,652	\$4,496,439	\$2,016,136
	RADIATION THERAPY					1	5	\$161,520	\$68,493

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

Kansas State System (200118) - Utilization as of 8/1/2024

SR Charge Category Utilization as of 8/1/2024

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

			2022-2	023					
Charge Service Type	Charge Description Category	Claimant Count	Claim Count	Claimed Amount	Paid Claims	Claimant Count	Claim Count	Claimed Amount	Paid Claims
Outpatient	REFUNDS	8	10	\$0	(\$7,387)	38	38	\$0	(\$2,387)
	SHC-ADJUSTMENTS	54	246	\$189	\$0	4	24	\$0	\$0
	SHC-CONSULTANT	3	3	\$45	\$45	1	1	\$45	\$45
	SHC-GROUP LEDGER BILLING	3	2	\$42,110	\$42,334	1	0		\$12
	SHC-HOSPITAL MISCELLANEOUS	90	99	\$21,855	\$21,830	10	11	\$1,627	\$1,627
	SHC-INJECTIONS	794	2,199	\$209,211	\$118,554	215	605	\$35,927	\$35,927
	SHC-LABORATORY	93	191	(\$949)	(\$899)	15	26	\$197	\$212
	SHC-PHYSICIAN VISITS	1,312	2,383	\$146,841	\$146,841	60	69	\$11,604	\$11,604
	SHC-PHYSIOTHERAPY	148	998	\$62,521	\$62,521	47	252	\$18,180	\$18,180
	SHC-PRESCRIPTIONS	936	3,852	\$457,085	\$457,098	518	3,121	\$581,282	\$581,282
	SHC-PROFESSIONAL FEE	2,492	10,056	\$332,072	\$316,363	303	1,319	\$70,274	\$66,439
	SHC-PSYCHOTHERAPY	18	77	\$1,426	\$1,426				
	SHC-SURGERY	126	230	\$23,870	\$23,870	16	36	\$3,306	\$3,306
	SHC-UNKNOWN	4	11	\$719	\$0	2	9	\$2,033	\$0
	SHC-XRAYS	275	305	\$25,753	\$25,213	46	48	\$3,814	\$3,649
	STATE MANDATE TAX	3	11	\$183	\$151				
	SUPPLIES/MISC	100	118	\$90,828	\$52,236	440	596	\$140,734	\$68,967
	URGENT CARE	8	8	\$10,336	\$1,556	3	3	\$1,384	\$229
	XRAYS	1,255	2,647	\$706,165	\$156,845	1,451	2,870	\$675,778	\$176,725
Inpatient	Total			\$5,874,917	\$2,345,023			\$6,471,058	\$2,524,233
	ADJUSTMENTS	15	24	\$0	\$428,367	10	11	\$0	\$281,159
	ANESTHETIST	55	80	\$129,903	\$51,233	46	62	\$109,831	\$57,952
	ASSISTANT SURGEON	13	17	\$21,772	\$2,034	8	8	\$8,341	\$1,146
	CLAIM INTEREST	23	49	\$0	\$2,996	3	3	\$0	\$3
	DENTAL	20	32	\$14,088	\$1,500	14	19	\$20,588	\$1,209
	HOME HEALTH CARE	13	65	\$64,438	\$16,367	16	24	\$10,046	\$1,352
	HOSPITAL	135	208	\$4,761,230	\$1,563,836	99	151	\$5,614,530	\$1,913,776

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

Kansas State System (200118) - Utilization as of 8/1/2024

SR Charge Category Utilization as of 8/1/2024

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

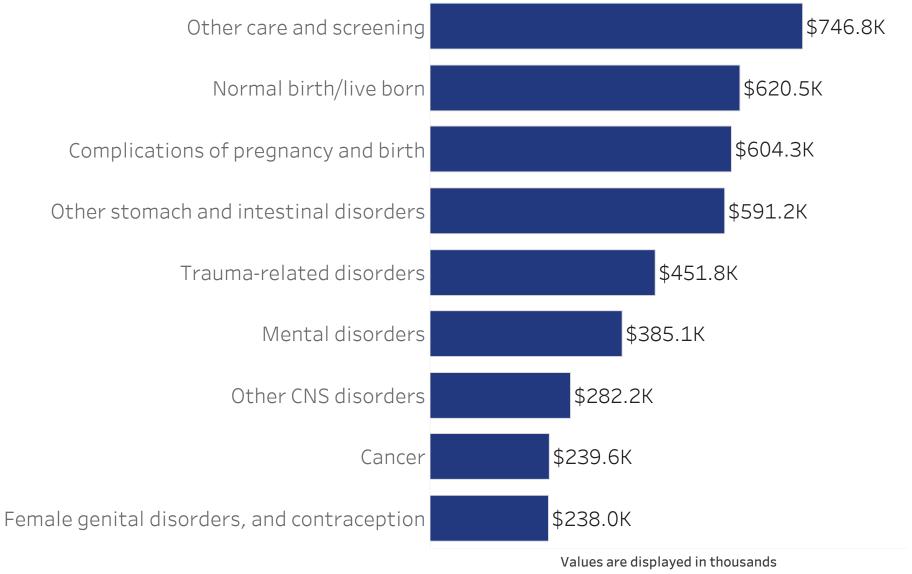
			2022-20	023		2023-2024			
Charge Service Type	Charge Description Category	Claimant Count	Claim Count	Claimed Amount	Paid Claims	Claimant Count	Claim Count	Claimed Amount	Paid Claims
Inpatient	INJECTIONS	2 2 \$322 \$143 1 1 \$114		\$114	\$62				
	INPATIENT SURGERY	64	89	\$260,776	\$110,477	53	120	\$237,032	\$99,833
	MEDICAL EMERGENCY	25	36	\$205,361	\$56,318	19	31	\$164,913	\$53,027
	PHYSICIAN VISITS	135	449	\$373,161	\$95,019	94	322	\$254,391	\$93,339
	PRESCRIPTIONS	74	262	\$18,580	\$10,989	64	184	\$14,577	\$8,731
	PROFESSIONAL FEE	43	121	\$25,285	\$5,743	40	125	\$36,695	\$12,643

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

Kansas State System (200118) - Utilization as of 8/1/2024

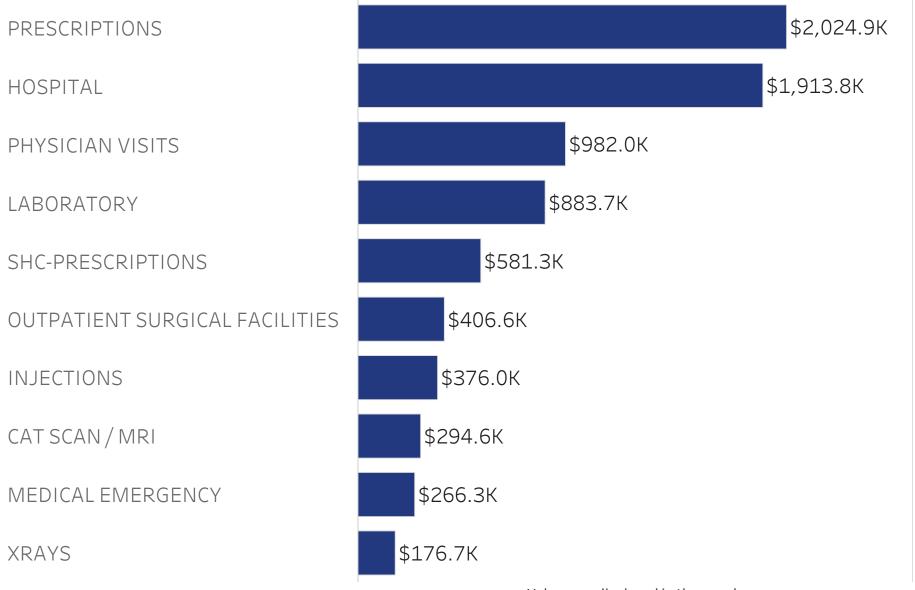
Top 10 Diagnoses 2023-24 Policy Year

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.



Kansas State System (200118) - Utilization as of August 1, 2024

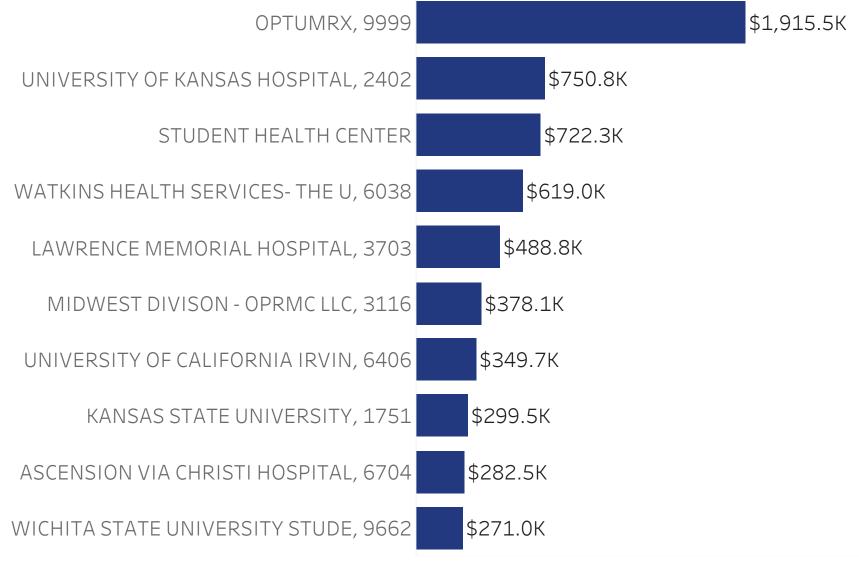
Top 10 SR Charge Categories 2023-24 Policy Year



Values are displayed in thousands

Top Billing Providers

2023-24 Policy Year



Values are displayed in thousands

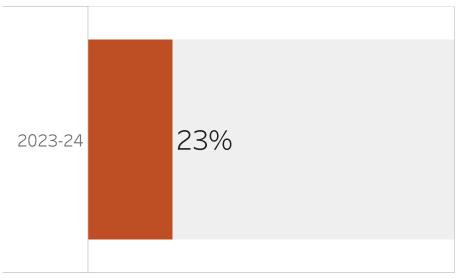
Kansas State System (200118) - Utilization as of August 1, 2024

Policy Year	Day of Date Diagnosis	Student-De	ICD Code Description	Claimed Amount	Paid Claims
2022-23	January 16, 2023	Student	SPINAL STENOSIS CERVICAL REGION	\$262,035	\$180,478
	August 16, 2022	Student	PBM CLAIMS	\$252,528	\$196,822
	February 18, 2023	Student	CONTUSION OF LUNG UNSPECIFIED INITIAL ENCOUNTER	\$708,659	\$182,728
	August 15, 2022	Student	PBM CLAIMS	\$173,829	\$123,278
	September 19, 2022	Student	SICKLE-CELL DISEASE WITHOUT CRISIS	\$510,233	\$321,979
	July 20, 2022	Student	ACUTE LYMPHOBLASTIC LEUKEMIA NOT ACHIEVED REMISS	\$546,386	\$246,160
	September 3, 2022	Dependent	PBM CLAIMS	\$228,199	\$165,279
	January 1, 2022	Student	MALIGNANT NEOPLASM OF SIGMOID COLON	\$226,046	\$105,526
	January 30, 2023	Student	UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER	\$453,575	\$176,419
	August 14, 2022	Dependent	CHOANAL ATRESIA	\$248,216	\$155,353
2023-24	August 11, 2023	Student	BENIGN INTRACRANIAL HYPERTENSION	\$320,685	\$166,698
	September 14, 2023	Student	PBM CLAIMS	\$189,599	\$148,615
	August 18, 2023	Student	PBM CLAIMS	\$188,858	\$141,222
	August 12, 2023	Dependent	PBM CLAIMS	\$202,192	\$145,725
	September 13, 2023	Student	CROHNS DZ SMALL & LARGE INTEST W/INTEST OBST	\$449,958	\$380,757
	August 8, 2023	Student	PBM CLAIMS	\$383,460	\$276,598
	May 9, 2024	Dependent	SINGLE LIVEBORN INFANT DELIVERED BY CESAREAN	\$270,580	\$265,294
	May 25, 2024	Dependent	TWIN LIVEBORN INFANT DELIVERED BY CESAREAN	\$1,219,573	\$239,042

Kansas State System (200118) - Claims greater than \$100,000 - Utilization as of August 1, 2024
Confidential Property of UnitedHealth Group. Recipient Shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

Top Rx Report

Percentage of Members Utilizing Rx



Top Drugs by Claimant Count

Drug Name	Tier	Script Count	Claimant Count	Copay	Paid Claims
COMIRNATY 2023-24	3	247	225	\$0	\$30,579
FLUCELVAX QUADRIVALENT 2023-20	. 3	258	175	\$0	\$6,811
AMOXICILLIN	1	158	129	\$62	\$26
SPIKEVAX COVID-19 VACCINE/2023	3	134	126	\$0	\$17,652
AMPHETAMINE/DEXTROAMPHETAM	. 1	704	120	\$4,226	\$8,383
ESCITALOPRAM OXALATE	1	571	101	\$1,833	\$240
PREDNISONE	1	133	91	\$126	\$258
BUPROPION HYDROCHLORIDE ER (XL)	1	538	86	\$2,164	\$779
AMOXICILLIN/CLAVULANATE POTAS	1	104	81	\$318	\$346
DOXYCYCLINE HYCLATE	1	127	80	\$285	\$499

Top Drugs by Paid Claims

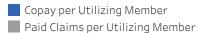
Drug Name	Tier	Claimant Count	Copay	Paid Claims
STELARA	2	5	\$30,975	\$538,530
VERZENIO	2	1	\$0	\$148,502
NUCALA	3	1	\$7,857	\$137,241
COSENTYX SENSOREADY PEN	3	1	\$8,000	\$91,004
HUMIRA PEN	2	3	\$23,592	\$76,955
RINVOQ	2	1	\$7,561	\$65,492
BIKTARVY	3	2	\$7,564	\$64,379
TREMFYA	2	1	\$1,759	\$51,179
SKYRIZI	2	2	\$7,531	\$50,173
XYWAV	3	1	\$4,708	\$49,351

Top Therapeutic Classes by Claimant Count

Top Therapeutic classes by Claim	i op i mer apeatre erabbeb by erannante evante											
	Claimant Count	Copay	Paid Claims									
BIOLOGICALS	539	\$0	\$76,773									
PSYCHOSTIMULANTS-ANTIDEPRESSANTS	445	\$28,011	\$46,275									
SYSTEMIC CONTRACEPTIVES	286	\$819	\$63,323									
GLUCOCORTICOIDS	241	\$1,063	\$2,249									
PENICILLINS	213	\$384	\$372									
AMPHETAMINE PREPARATIONS	171	\$18,100	\$67,623									
MISCELLANEOUS	163	\$59,146	\$946,395									
ANTIARTHRITICS	158	\$39,666	\$148,685									
NARCOTIC ANALGESICS	132	\$268	\$396									
ANTIFUNGALS	117	\$298	\$446									

Kansas State System (200118) - Utilization as of August 1, 2024

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

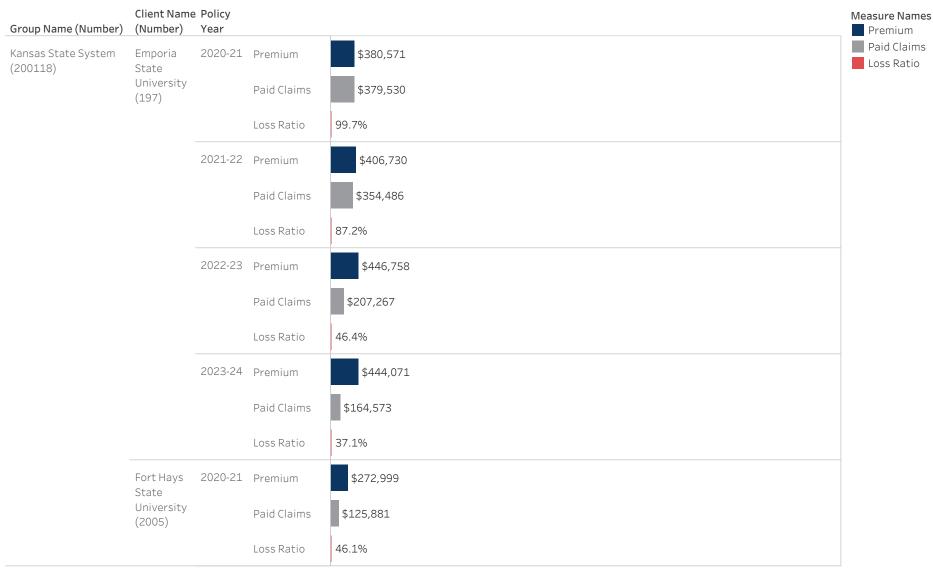


										T and claims per ounizing wember			
		Tie	r 1		Tier 2				Tier 3				
	202	2-23	202	3-24	202	2-23	202	3-24	202	2-23	202	3-24	
Per Claimant	\$31	\$195	\$28	\$135	\$2,054	\$11,836	\$1,439	\$9,402	\$145	\$482	\$140	\$832	
	Copay per Utilizing Member	Paid Claims per Utilizing Member											

Rx Utilization by Tier

	2022-23			2023-24		
Tier	Claimant Count	Copay	Paid Claims	Claimant Count	Copay	Paid Claims
1	1,802	\$55,708	\$351,756	1,575	\$43,313	\$212,125
2	128	\$262,849	\$1,514,961	121	\$174,147	\$1,137,693
3	988	\$143,733	\$476,136	637	\$89,152	\$529,742

utilization as of August 1, 2024

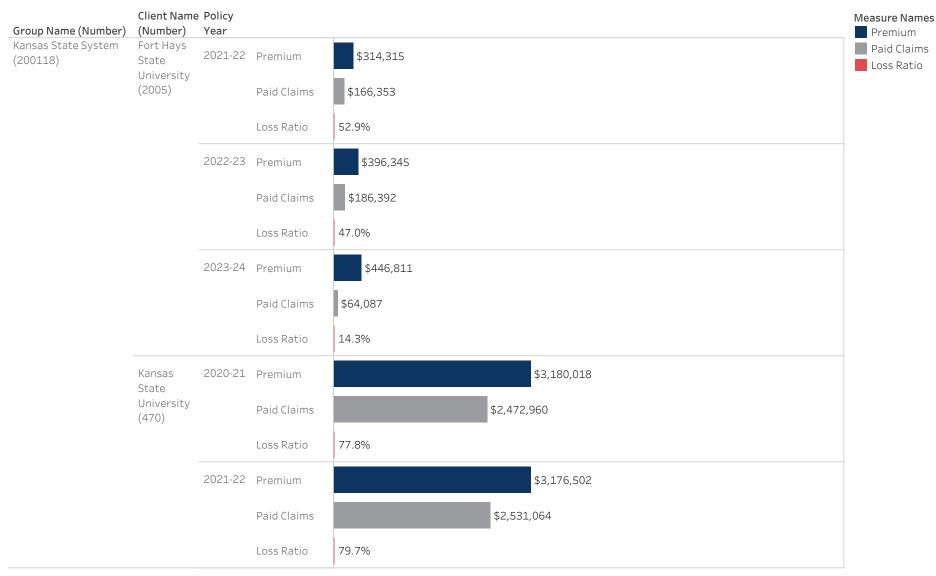


The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions.

Premium & Paid Claims

Kansas State System (200118) Utilization as of August 1, 2024

utilization as of August 1, 2024

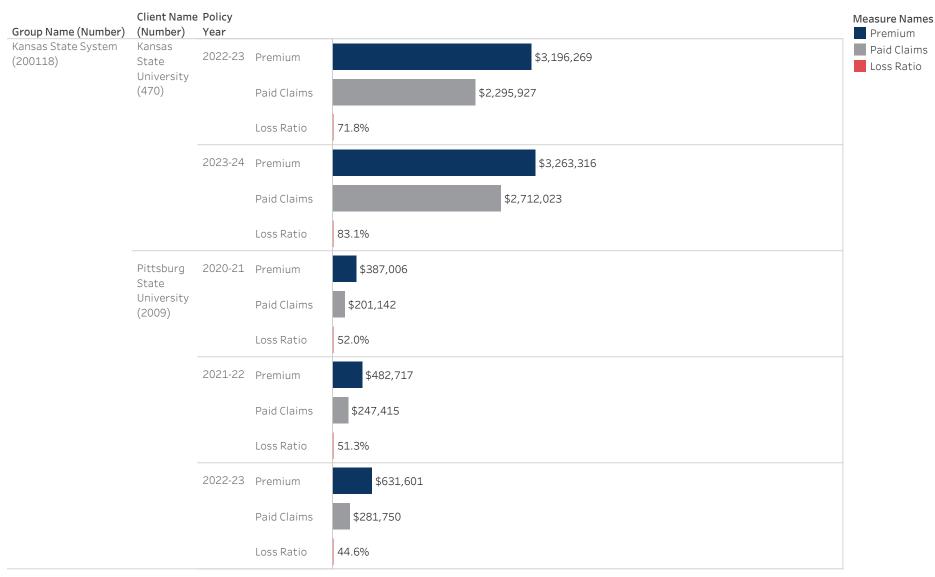


The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions.

Premium & Paid Claims

Kansas State System (200118) Utilization as of August 1, 2024

utilization as of August 1, 2024

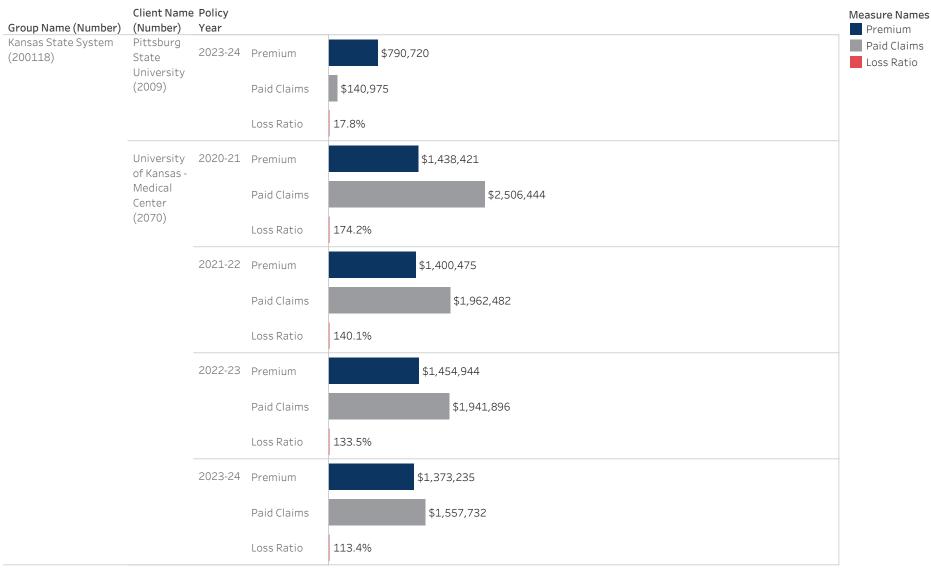


The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions.

Premium & Paid Claims

Kansas State System (200118) Utilization as of August 1, 2024

utilization as of August 1, 2024

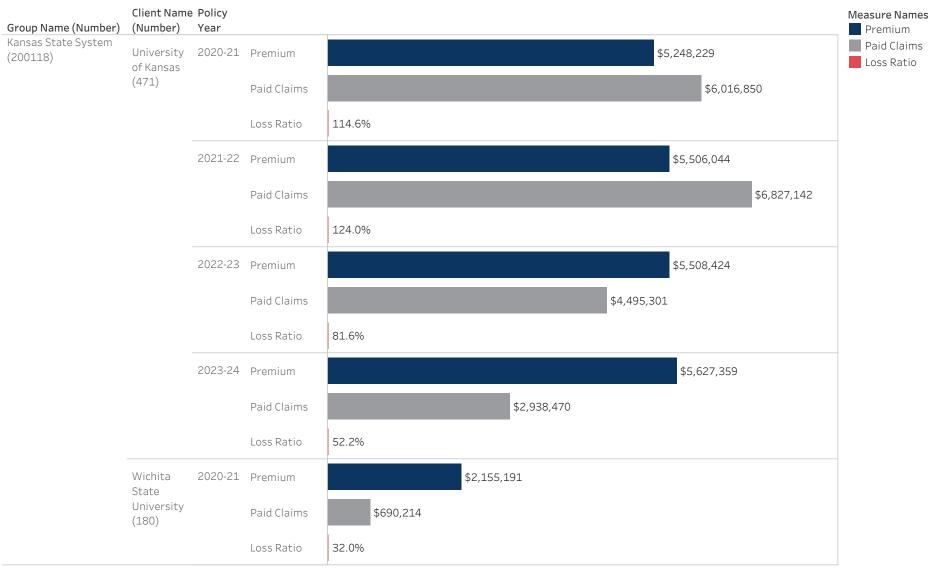


The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions.

Premium & Paid Claims

Kansas State System (200118) Utilization as of August 1, 2024

utilization as of August 1, 2024

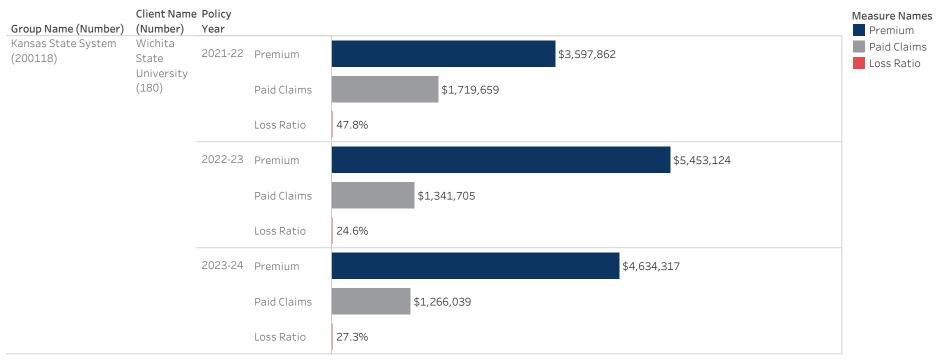


The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions.

Premium & Paid Claims

Kansas State System (200118) Utilization as of August 1, 2024

utilization as of August 1, 2024



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 August 1, 2024

Wichita State University (180) Policy Option(s)

Policy Year	Day of Date Diagnosis	Student-De.	. ICD Code Description	Claimed Amount	Paid Claims
2022-23	January 1, 2022	Student	MALIGNANT NEOPLASM OF SIGMOID COLON	\$226,046	\$105,526
	January 30, 2023	Student	UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER	\$453,575	\$176,419
2023-24	September 13, 2023	Student	CROHNS DZ SMALL & LARGE INTEST W/INTEST OBST	\$449,958	\$380,757

Wichita State University (180) - Claims greater than \$100,000 - Utilization as of August 1, 2024

Emporia State University (197) Policy Option(s)

None - Claims greater than \$100,000 - Utilization as of August 1, 2024

Kansas State University (470)

Policy Option(s)

1 2 3 4

Policy Year	Day of Date Diagnosis	Student-De.	. ICD Code Description	Claimed Amount	Paid Claims
2023-24	August 18, 2023	Student	PBM CLAIMS	\$188,858	\$141,222
	May 25, 2024	Dependent	TWIN LIVEBORN INFANT DELIVERED BY CESAREAN	\$1,219,573	\$239,042

Kansas State University (470) - Claims greater than \$100,000 - Utilization as of August 1, 2024

University of Kansas (471)

Policy Option(s)

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Policy Year	Day of Date Diagnosis	Student-De	ICD Code Description	Claimed Amount	Paid Claims
2022-23	January 16, 2023	Student	SPINAL STENOSIS CERVICAL REGION	\$262,035	\$180,478
	August 16, 2022	Student	PBM CLAIMS	\$252,528	\$196,822
	February 18, 2023	Student	CONTUSION OF LUNG UNSPECIFIED INITIAL ENCOUNTER	\$708,659	\$182,728
	September 19, 2022	Student	SICKLE-CELL DISEASE WITHOUT CRISIS	\$510,233	\$321,979
	July 20, 2022	Student	ACUTE LYMPHOBLASTIC LEUKEMIA NOT ACHIEVED REMISS	\$546,386	\$246,160
	August 14, 2022	Dependent	CHOANAL ATRESIA	\$248,216	\$155,353
2023-24	August 11, 2023	Student	BENIGN INTRACRANIAL HYPERTENSION	\$320,685	\$166,698
	September 14, 2023	Student	PBM CLAIMS	\$189,599	\$148,615
	May 9, 2024	Dependent	SINGLE LIVEBORN INFANT DELIVERED BY CESAREAN	\$270,580	\$265,294

University of Kansas (471) - Claims greater than \$100,000 - Utilization as of August 1, 2024

Fort Hays State University (2005) Policy Option(s)

None - Claims greater than \$100,000 - Utilization as of August 1, 2024

Pittsburg State University (2009) Policy Option(s)

None - Claims greater than \$100,000 - Utilization as of August 1, 2024



Policy Option(s)

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Policy Year	Day of Date Diagnosis	Student-De	ICD Code Description	Claimed Amount	Paid Claims
2022-23	August 15, 2022	Student	PBM CLAIMS	\$173,829	\$123,278
	September 3, 2022	Dependent	PBM CLAIMS	\$228,199	\$165,279
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 August 1, 2024

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