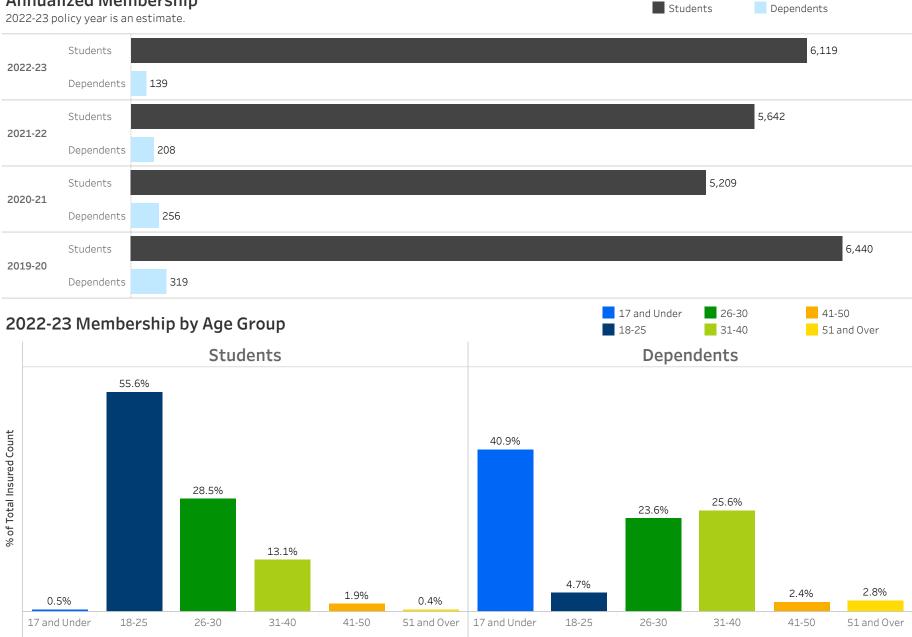
# Kansas State System (200118)

Policy Option(s)

1		
2		
3		
4		

#### Annualized Membership

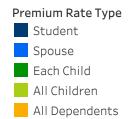


Kansas State System (200118) - Membership as of August 1, 2023

# **Annualized Insured Counts**

\*2023-24 Policy Year Annualized Insured Count is an estimate.

Group Name (Number)	Policy Year	Option	Premium Rate Typ	e
Kansas State System	2022-23	1	Student	168
(200118)		2	Student	534
			Spouse	19
			Each Child	14
			All Children	3
			All Dependents	3
		3	Student	2,127
			Spouse	58
			Each Child	20
			All Children	2
			All Dependents	4
		4	Student	3,290
			Spouse	6
			Each Child	6
			All Children	2
			All Dependents	2
				0 1,000 2,000 3,000 4,0
				Insured Count Annualized



#### Kansas State System (200118) - Annualized Membership as of August 24, 2023

## Annualized Membership by Rate Type

\*2023-24 Policy Year Annualized Insured Count is an estimate.

Group Name (Number)	Premium Rate Type	2022-23
Kansas State System (200118)	Student	6,119
	Spouse	83
	Each Child	40
	All Children	7
	All Dependents	9

\*Annualized Membership is calculated by dividing the total premium received by the annual rate. For the in-progress policy year (2023-24) 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, 2023 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 2022-23

Total Number of Insureds with active coverage as of August 24, 2023

Group Name (Number)	Client Name (Num	Premium Rate Type	1	2	3	4	Total
Kansas State System	Emporia State	Student	8	1	71	180	239
(200118)	University (197)	Total	8	1	71	180	239
	Fort Hays State	Student	10	4		154	168
	University (2005)	Total	10	4		154	168
	Kansas State	Student	52	115	868	493	1,447
	University (470)	Spouse		5	41	1	47
		Each Child		1	6	1	7
		All Children			2	4	6
		All Dependents		3			3
		Total	52	124	917	499	1,509
	Pittsburg State	Student	8		73	293	364
	University (2009)	Spouse			2	1	2
		Each Child			2		2
		All Dependents				6	6
		Total	8		77	300	374
	University of	Student	13	410	185	19	616
	Kansas - Medical	Spouse		15	6		21
	Center (2070)	Each Child		14	3		17
		All Children		6		2	8
		All Dependents		6	3		9
		Total	13	450	197	21	670
	University of	Student	111	76	1,139	1,246	2,493
	Kansas (471)	Spouse		2	46	5	52
		Each Child		5	16	8	28
		All Children		2	4	4	10
		All Dependents			12	3	15
		Total	111	85	1,213	1,264	2,592

Kansas State System (200118) - Total Insured Counts - Active Coverage as of August 24, 2023

## Insured Count by Rate Type and Option

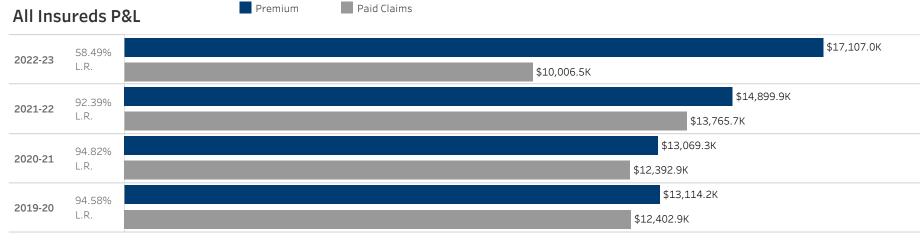
Kansas State System (200118) Policy Year 2022-23

Total Number of Insureds with active coverage as of August 24, 2023

Group Name (Number)	Client Name (Num	Premium Rate Type	1	2	3	4	Total
Kansas State System	Wichita State	Student	29	68	428	2,315	2,693
(200118)	<b>200118)</b> University (180)			4	4	3	11
		Each Child			4	4	8
		All Dependents		3		3	6
		Total	29	75	436	2,325	2,718
	Total		231	739	2,908	4,741	8,264
# of Unique Members			231	739	2,908	4,741	8,264

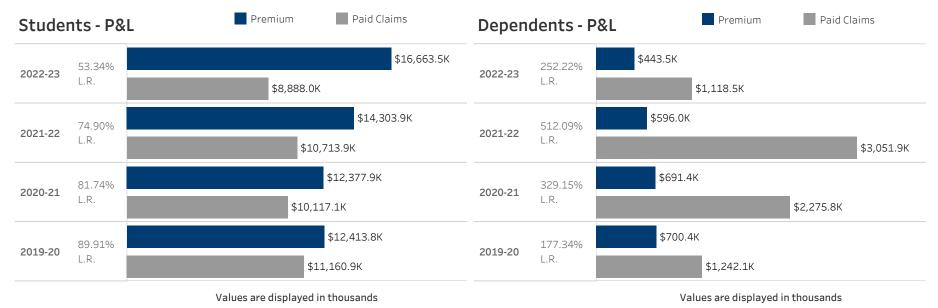
#### Kansas State System (200118) - Total Insured Counts - Active Coverage as of August 24, 2023

# **Plan Experience Overview**

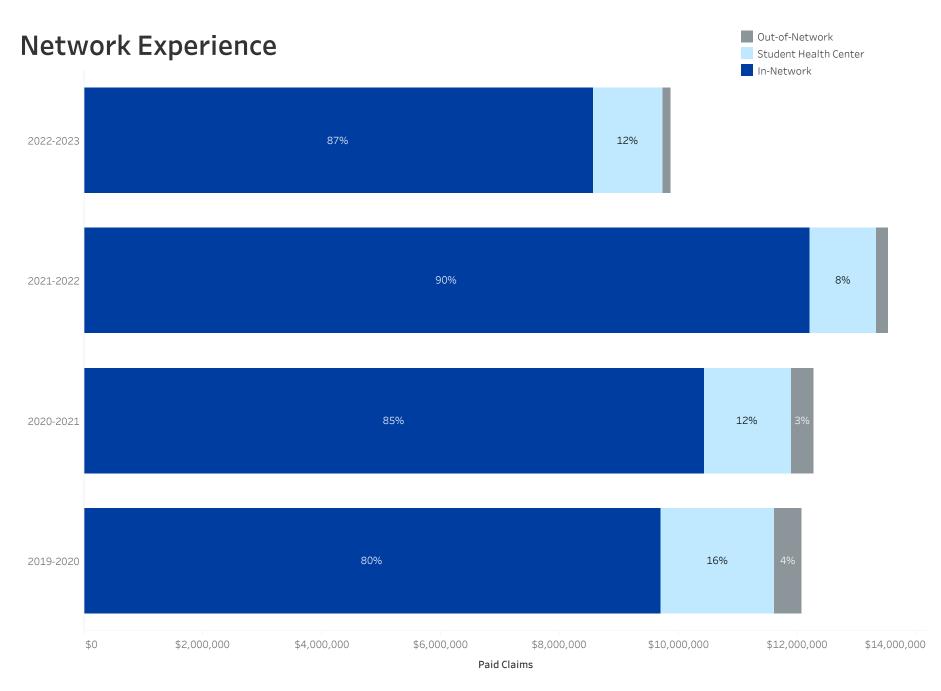


#### Values are displayed in thousands

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.)



Kansas State System (200118) - Utilization as of August 1, 2023



Kansas State System (200118) - Utilization as of August 1, 2023

# SR Charge Category Utilization as of 8/1/2023

#### 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

		2021-2022 2022-2023						2023	
Charge Service Type	Charge Description Category	Claimant Count	Claim Count	Claimed Amount	Paid Claims	Claimant Count	Claim Count	Claimed Amount	Paid Claims
Grand Total				\$35,274,364	\$13,765,731			\$26,979,841	\$10,006,544
Outpatient	Total			\$23,469,101	\$9,211,894			\$21,848,797	\$7,999,165
	ADJUSTMENTS	561	1,761	\$0	(\$134,213)	145	466	\$0	(\$301,354)
	AMBULANCE	29	33	\$146,337	\$105,109	37	40	\$105,356	\$55,596
	ANESTHETIST	130	182	\$155,785	\$58,088	129	178	\$144,573	\$54,806
	ASSISTANT SURGEON	22	27	\$59,938	\$3,922	18	18	\$82,137	\$5,598
	CAT SCAN / MRI	281	612	\$1,713,477	\$391,508	288	619	\$1,691,321	\$356,756
	CHEMOTHERAPY	13	58	\$1,345,478	\$296,506	10	49	\$990,806	\$224,828
	CLAIM INTEREST	775	1,793	\$0	\$35,935	200	392	\$0	\$16,189
	CONSULTANT	3	4	\$578	\$0				
	DENTAL	17	20	\$3,747	\$73	11	15	\$11,144	\$238
	DURABLE MED/BRACES/APPL	153	256	\$147,830	\$44,779	151	270	\$122,773	\$30,247
	GROUP LEDGER BILLING	7	16	\$18,171	\$18,171	5	6	\$20,151	\$20,091
	HOSPITAL MISCELLANEOUS	41	69	\$246,424	\$124,829	17	39	\$603,422	\$202,588
	INJECTIONS	1,620	3,243	\$537,947	\$351,250	1,350	2,318	\$529,625	\$370,778
	LABORATORY	3,208	11,163	\$3,562,050	\$1,354,576	3,006	12,959	\$3,373,729	\$1,152,245
	MEDICAL EMERGENCY	286	358	\$1,183,132	\$296,654	308	409	\$1,266,316	\$292,509
	MEDICAL RECORDS	3	3	\$195	\$195				
	OTHER	30	172	\$19,603	\$19,603	21	103	\$10,630	\$10,630
	OTHER INSURANCE	14	55	\$0	(\$9,945)	3	7	\$0	(\$926)
	OUTPATIENT SURGERY	577	870	\$714,737	\$189,504	515	759	\$602,876	\$163,035
	OUTPATIENT SURGICAL FACILITIES	151	212	\$3,018,768	\$779,063	144	200	\$2,728,787	\$696,914
	PHYSICIAN VISITS	2,891	11,165	\$2,233,296	\$1,023,785	3,021	10,358	\$1,926,333	\$869,161
	PHYSIOTHERAPY	252	1,236	\$452,818	\$145,557	206	1,004	\$329,046	\$77,941
	PRESCRIPTIONS	3,823	29,105	\$5,901,237	\$2,784,042	2,813	21,923	\$5,282,180	\$2,345,534
	RADIATION THERAPY	1	4	\$49,443	\$2,919				
	REFUNDS	15	19	\$0	(\$14,532)	4	5	\$0	(\$4,607)

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

Kansas State System (200118) - Utilization as of 8/1/2023

# SR Charge Category Utilization as of 8/1/2023

#### 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

			2021-2	2022			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	SHC-ADJUSTMENTS	12	60	\$0	\$0	46	226	\$0	\$0
	SHC-CONSULTANT	1	1	\$31	\$31	3	3	\$45	\$45
	SHC-DURABLE MED/BRACES/APPL	1	1	\$21	\$21				
	SHC-GROUP LEDGER BILLING	4	0		\$28,558	3	2	\$42,110	\$42,334
	SHC-HOSPITAL MISCELLANEOUS	167	185	\$36,099	\$36,099	150	172	\$24,985	\$24,960
	SHC-INJECTIONS	745	1,803	\$91,975	\$91,974	787	2,165	\$207,025	\$116,368
	SHC-LABORATORY	2,536	9,958	\$289,798	\$276,074	2,474	9,957	\$319,397	\$304,259
	SHC-PHYSICIAN VISITS	1,351	2,823	\$145,216	\$145,216	1,293	2,347	\$142,108	\$142,108
	SHC-PHYSIOTHERAPY	145	1,114	\$58,752	\$58,752	146	968	\$60,284	\$60,284
	SHC-PRESCRIPTIONS	1,012	3,865	\$443,614	\$443,477	913	3,564	\$425,250	\$425,079
	SHC-PSYCHOTHERAPY	16	60	\$1,507	\$1,507	18	77	\$1,426	\$1,426
	SHC-SUPPLIES/MISC	1	1	(\$29)	(\$29)				
	SHC-SURGERY	146	217	\$21,809	\$21,809	122	222	\$22,993	\$22,993
	SHC-UNKNOWN	3	7	\$372	\$0	4	11	\$719	\$0
	SHC-XRAYS	111	132	\$9,646	\$9,131	270	298	\$25,068	\$24,563
	STATE MANDATE TAX	1	1	\$2	\$2	3	3	\$153	\$121
	SUPPLIES/MISC	112	143	\$127,856	\$77,400	94	112	\$79,636	\$45,935
	URGENT CARE	44	57	\$16,981	\$2,649	5	5	\$9,242	\$1,378
	XRAYS	1,398	2,918	\$714,459	\$151,842	1,228	2,518	\$667,150	\$148,518
Inpatient	Total			\$11,805,263	\$4,553,837			\$5,131,044	\$2,007,380
	ADJUSTMENTS	17	31	\$0	\$158,105	12	19	\$0	\$316,778
	ANESTHETIST	59	77	\$144,922	\$60,642	48	68	\$100,878	\$42,109
	ASSISTANT SURGEON	13	13	\$23,375	\$1,832	13	16	\$19,964	\$2,034
	CLAIM INTEREST	24	82	\$0	\$20,001	20	43	\$0	\$2,967
	CONSULTANT	1	1	\$269	\$214				
	DENTAL	26	38	\$24,011	\$1,960	19	26	\$13,596	\$324
	HOME HEALTH CARE	8	85	\$31,727	\$12,799	13	49	\$57,442	\$13,121

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

Kansas State System (200118) - Utilization as of 8/1/2023

# SR Charge Category Utilization as of 8/1/2023

#### 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

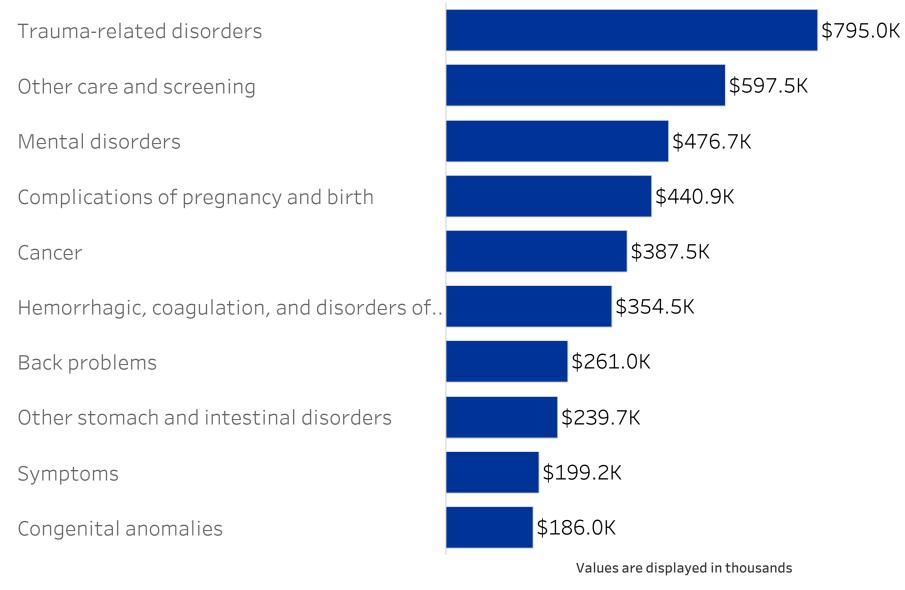
			2021-2	2022		2022-2023				
Charge Service Type	Charge Description Category	Claimant Count	Claim Count	Claimed Amount	Paid Claims	Claimant Count	Claim Count	Claimed Amount	Paid Claims	
Inpatient	HOSPITAL	135	248	\$10,742,948	\$3,970,384	116	170	\$4,132,643	\$1,373,505	
	INJECTIONS	3	4	\$266	\$151	1	1	\$292	\$122	
	INPATIENT SURGERY	65	106	\$280,624	\$121,545	60	78	\$228,233	\$99,146	
	MEDICAL EMERGENCY	20	29	\$156,823	\$54,117	22	31	\$186,797	\$54,392	
	PHYSICIAN VISITS	123	489	\$340,342	\$127,443	122	409	\$348,792	\$86,423	
	PRESCRIPTIONS	65	298	\$26,764	\$16,328	72	257	\$18,526	\$10,953	
	PROFESSIONAL FEE	48	157	\$33,153	\$8,279	41	110	\$23,879	\$5,506	
	STATE MANDATE TAX	1	1	\$37	\$37					

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

Kansas State System (200118) - Utilization as of 8/1/2023

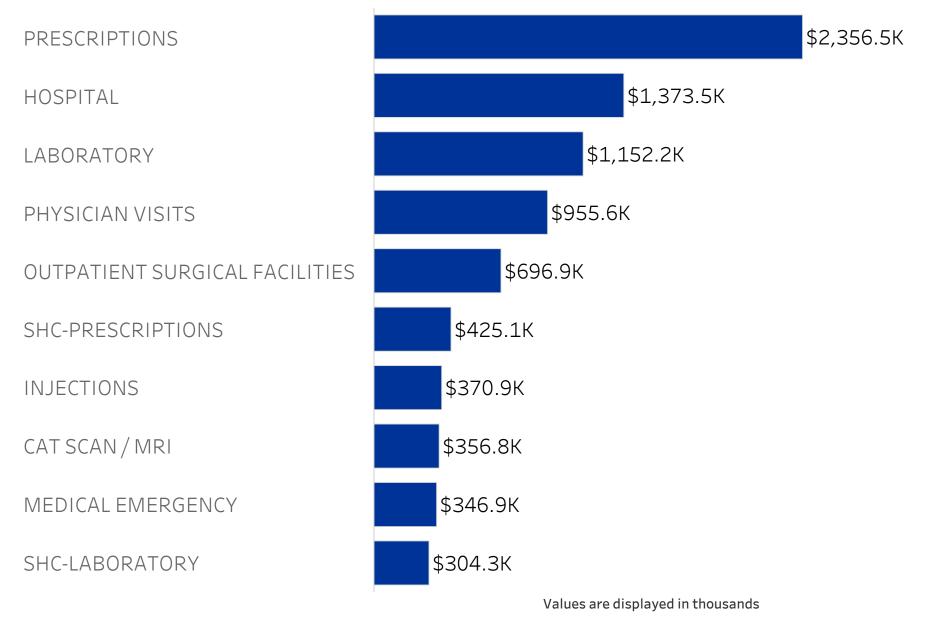
# Top 10 Diagnoses 2022-23 Policy Year

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.



Kansas State System (200118) - Utilization as of August 1, 2023

# Top 10 SR Charge Categories 2022-23 Policy Year



Kansas State System (200118) - Utilization as of August 1, 2023

Policy Year	Day of Date Diagnosis	Student-De	ICD Code Description	Claimed Amount	Paid Claims
2021-22	August 10, 2021	Student	ANOREXIA NERVOSA RESTRICTING TYPE	\$192,496	\$140,065
	September 20, 2021	Student	PBM CLAIMS	\$142,036	\$103,011
	August 31, 2021	Student	PBM CLAIMS	\$159,108	\$125,475
	December 29, 2021	Dependent	OTH MECH COMP VENTRICLR INTRACRAN SHUNT INIT ENC	\$2,622,222	\$1,396,841
	August 18, 2021	Student	PBM CLAIMS	\$406,759	\$317,781
	August 24, 2021	Student	PBM CLAIMS	\$189,732	\$138,517
	August 27, 2021	Student	SICKLE-CELL DISEASE WITHOUT CRISIS	\$684,050	\$463,633
	March 10, 2022	Student	ACUTE LYMPHOBLASTIC LEUKEMIA NOT ACHIEVED REMISS	\$1,163,873	\$567,047
	January 15, 2022	Student	DSPLCD TRNS FX SHAFT HUM LT ARM INIT ENC OPEN FX	\$1,849,175	\$690,330
	January 10, 2022	Dependent	SINGLE LIVEBORN INFANT DELIVERED BY CESAREAN	\$2,417,936	\$574,845
	February 14, 2022	Student	OTH SPEC DEMYELINATING DZ OF CENTRAL NERVOUS SYS	\$491,970	\$219,363
2022-23	January 16, 2023	Student	SPINAL STENOSIS CERVICAL REGION	\$262,035	\$180,478
	August 16, 2022	Student	PBM CLAIMS	\$233,759	\$182,360
	February 18, 2023	Student	CONTUSION OF LUNG UNSPECIFIED INITIAL ENCOUNTER	\$702,153	\$182,053
	August 15, 2022	Student	PBM CLAIMS	\$173,477	\$123,237
	September 19, 2022	Student	SICKLE-CELL DISEASE WITHOUT CRISIS	\$510,083	\$321,903
	July 20, 2022	Student	ACUTE LYMPHOBLASTIC LEUKEMIA NOT ACHIEVED REMISS	\$527,337	\$231,775
	September 3, 2022	Dependent	PBM CLAIMS	\$228,199	\$165,279
	January 1, 2022	Student	MALIGNANT NEOPLASM OF SIGMOID COLON	\$222,076	\$102,826
	January 30, 2023	Student	UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER	\$385,133	\$138,258
	August 14, 2022	Dependent	CHOANAL ATRESIA	\$248,216	\$155,353

Kansas State System (200118) - Claims greater than \$100,000 - Utilization as of August 1, 2023 Confidential Property of UnitedHealth Group. Recipient Shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

# **Top Billing Providers**

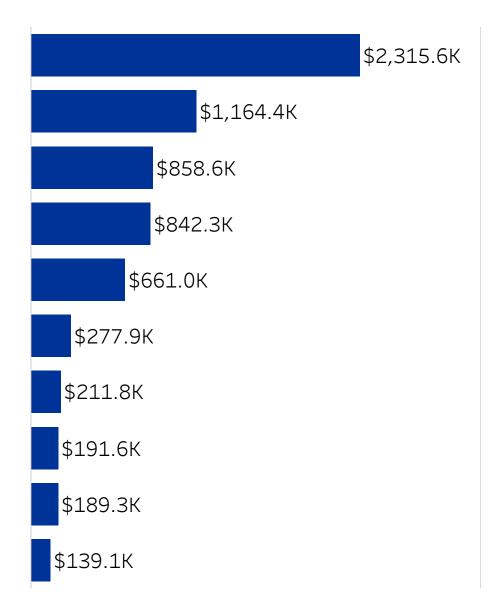
2022-23 Policy Year

OPTUMRX, 9999

STUDENT HEALTH CENTER

UNIVERSITY OF KANSAS HOSPITAL, 2402 LAWRENCE MEMORIAL HOSPITAL, 3703 WATKINS HEALTH SERVICES- THE U, 6038 ASCENSION VIA CHRISTI HOSPITAL, 6704 KANSAS UNIVERSITY PHYSICIANS I, 3756 WESLEY MEDICAL CENTER LLC, 2545

MIDWEST DIVISON - OPRMC LLC, 3116



Values are displayed in thousands

Kansas State System (200118) - Utilization as of August 1, 2023

# **Top Rx Report**

#### Percentage of Members Utilizing Rx

#### Top Drugs by Claimant Count

			Drug Name	Tier	Script Count	Claimant Count	Сорау	Paid Claims
			BUPROPION HYDROCHLORIDE ER (XL)	) 1	614	99	\$3,243	\$995
			AMPHETAMINE/DEXTROAMPHETAM.	. 1	610	103	\$3,255	\$7,188
			ESCITALOPRAM OXALATE	1	604	111	\$1,989	\$276
		26%	PFIZER-BIONTECH COVID-19 VACCIN.	. 3	418	397	\$0	\$15,760
2022-23			FLUCELVAX QUADRIVALENT 2022-20.	. 3	254	249	\$0	\$6,859
			AMOXICILLIN	1	190	161	\$144	\$53
			PREDNISONE	1	183	133	\$143	\$38
			ALBUTEROL SULFATE HFA	1	156	96	\$504	\$1,025
			AMOXICILLIN/CLAVULANATE POTAS	1	148	112	\$337	\$358
			MODERNA COVID-19 VACCINE/BIVAL.	. 3	144	138	\$0	\$5,620

#### Top Drugs by Paid Claims

#### Top Therapeutic Classes by Claimant Count

Drug Name	Tier	Claimant Count	Сорау	Paid Claims		Claimant Count	Сорау	Paid Claims
STELARA	2	4	\$31,322	\$364,117	BIOLOGICALS	794	\$0	\$51,810
HUMIRA PEN	2	9	\$56,619	\$289,678	PSYCHOSTIMULANTS-ANTIDEPRESSANTS	497	\$23,771	\$32,272
VERZENIO	2	1	\$0	\$181,918	SYSTEMIC CONTRACEPTIVES	339	\$394	\$76,378
COSENTYX SENSOREADY PEN	3	1	\$6,479	\$92,849	GLUCOCORTICOIDS	294	\$4,357	\$14,153
DUPIXENT	2	5	\$26,899	\$91,902	MISCELLANEOUS	275	\$66,951	\$600,822
RINVOQ	2	1	\$8,000	\$69,860	PENICILLINS	263	\$487	\$461
ADDERALL XR	1	76	\$4,038	\$62,523	AMPHETAMINE PREPARATIONS	179	\$41,398	\$124,143
SKYRIZI	2	2	\$0	\$56,480	NARCOTIC ANALGESICS	172	\$134	\$58
BIKTARVY	3	4	\$20,110	\$55,806	ANTIARTHRITICS	159	\$87,915	\$487,854
VYVANSE	3	57	\$34,105	\$54,432	ANTINAUSEANTS	140	\$343	\$673

#### Kansas State System (200118) - Utilization as of August 1, 2023

Сорау

#### Paid Claims

#### Rx Utilization per claimant by Tier

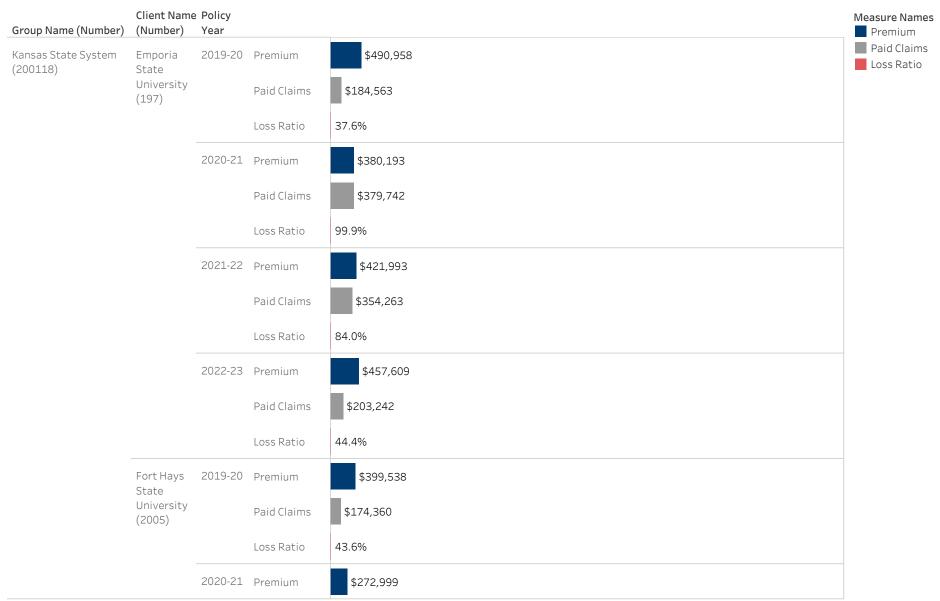
		Tie	er 1			Tie	r 2			Tie	r 3	
	202	21-22	202	22-23	202	1-22	202	2-23	202	21-22	202	2-23
Per Claimant						\$11,311		\$11,613				
					\$1,847		\$2,036			<b>t</b> 0.40		\$468
-	\$32	\$243	\$31	\$194					\$73	\$342	\$145	<del>۵400</del>
	Сорау	Paid Claims	Сорау	Paid Claims	Сорау	Paid Claims	Сорау	Paid Claims	Сорау	Paid Claims	Сорау	Paid Claims

#### Rx Utilization by Tier

	2021-22			2022-23		
Tier	Claimant Count	Сорау	Paid Claims	Claimant Count	Сорау	Paid Claims
1	1,896	\$60,038	\$460,780	1,783	\$54,491	\$345,861
2	123	\$227,203	\$1,391,239	128	\$260,601	\$1,486,416
3	2,360	\$171,669	\$807,247	984	\$142,562	\$460,825

Kansas State System (200118) - Utilization as of August 1, 2023

utilization as of August 1, 2023

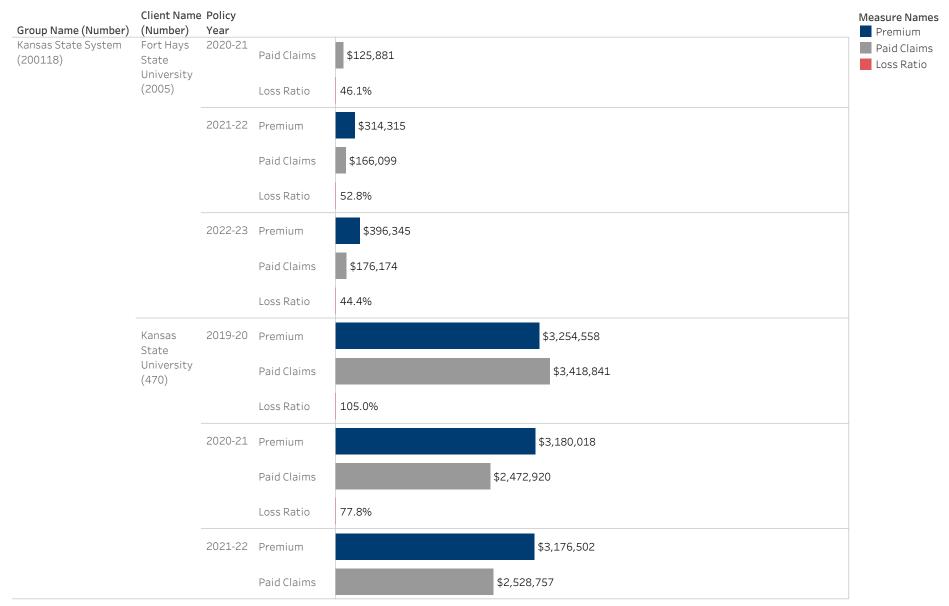


The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions.

Premium & Paid Claims

#### Kansas State System (200118) Utilization as of August 1, 2023

utilization as of August 1, 2023

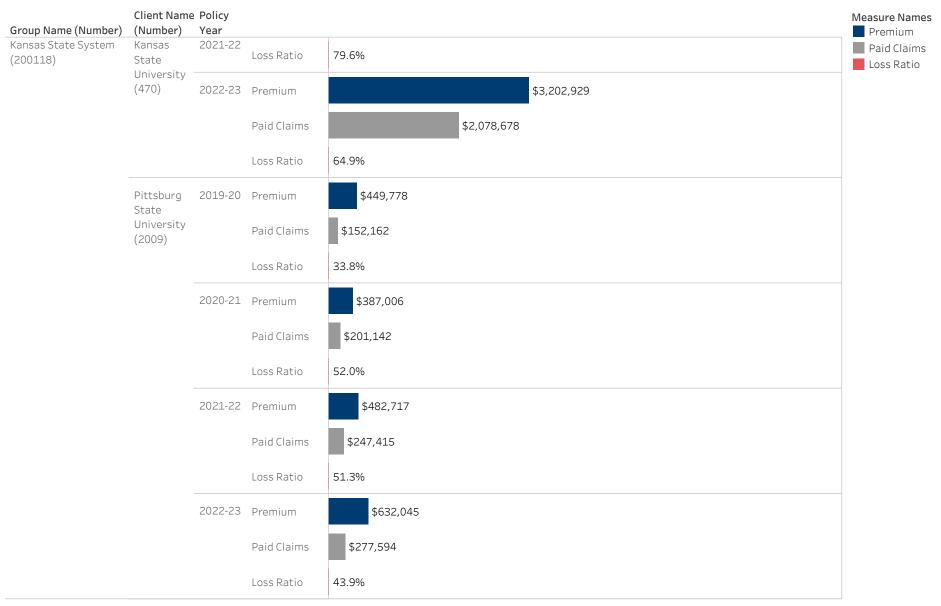


The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions.

Premium & Paid Claims

#### Kansas State System (200118) Utilization as of August 1, 2023

utilization as of August 1, 2023

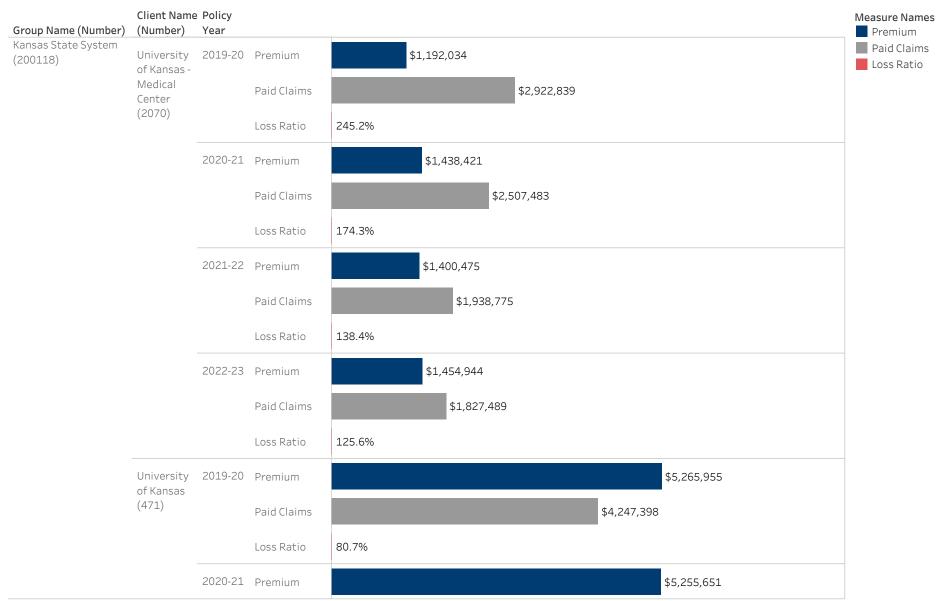


The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions.

#### Premium & Paid Claims

#### Kansas State System (200118) Utilization as of August 1, 2023

utilization as of August 1, 2023

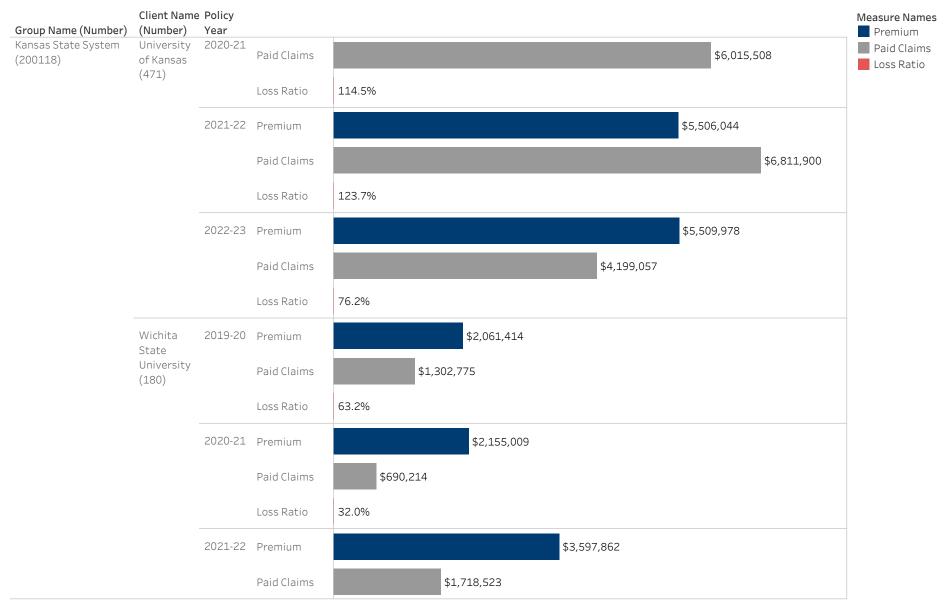


The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions.

Premium & Paid Claims

#### Kansas State System (200118) Utilization as of August 1, 2023

utilization as of August 1, 2023

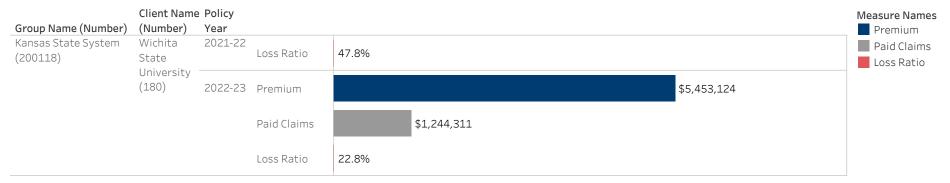


The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions.

Premium & Paid Claims

#### Kansas State System (200118) Utilization as of August 1, 2023

utilization as of August 1, 2023



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, 2023

# Wichita State University (180)

Policy Option(s)

1		
2		
3		
4		

Policy Year	Day of Date Diagnosis	Student-De	ICD Code Description	Claimed Amount	Paid Claims
2021-22	January 15, 2022	Student	DSPLCD TRNS FX SHAFT HUM LT ARM INIT ENC OPEN FX	\$1,849,175	\$690,330
2022-23	January 1, 2022	Student	MALIGNANT NEOPLASM OF SIGMOID COLON	\$222,076	\$102,826
	January 30, 2023	Student	UNSPECIFIED INJURY OF HEAD INITIAL ENCOUNTER	\$385,133	\$138,258

Wichita State University (180) - Claims greater than \$100,000 - Utilization as of August 1, 2023

# Emporia State University (197)

Policy Option(s)

1		
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Policy Year	Day of Date Diagnosis	Student-De.	. ICD Code Description	Claimed Amount	Paid Claims
2021-22	August 10, 2021	Student	ANOREXIA NERVOSA RESTRICTING TYPE	\$192,496	\$140,065

Emporia State University (197) - Claims greater than \$100,000 - Utilization as of August 1, 2023

# Kansas State University (470)

Policy Option(s)

1		
2		
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Policy Year	Day of Date Diagnosis	Student-De.	. ICD Code Description	Claimed Amount	Paid Claims
2021-22	August 31, 2021	Student	PBM CLAIMS	\$159,108	\$125,475

Kansas State University (470) - Claims greater than \$100,000 - Utilization as of August 1, 2023

# University of Kansas (471) Policy Option(s) 1 2 3 4

Policy Year	Day of Date Diagnosis	Student-De	ICD Code Description	Claimed Amount	Paid Claims
2021-22	September 20, 2021	Student	PBM CLAIMS	\$142,036	\$103,011
	December 29, 2021	Dependent	OTH MECH COMP VENTRICLR INTRACRAN SHUNT INIT ENC	\$2,622,222	\$1,396,841
	August 27, 2021	Student	SICKLE-CELL DISEASE WITHOUT CRISIS	\$684,050	\$463,633
	March 10, 2022	Student	ACUTE LYMPHOBLASTIC LEUKEMIA NOT ACHIEVED REMISS	\$1,163,873	\$567,047
	January 10, 2022	Dependent	SINGLE LIVEBORN INFANT DELIVERED BY CESAREAN	\$2,417,936	\$574,845
	February 14, 2022	Student	OTH SPEC DEMYELINATING DZ OF CENTRAL NERVOUS SYS	\$491,970	\$219,363
2022-23	January 16, 2023	Student	SPINAL STENOSIS CERVICAL REGION	\$262,035	\$180,478
	August 16, 2022	Student	PBM CLAIMS	\$233,759	\$182,360
	February 18, 2023	Student	CONTUSION OF LUNG UNSPECIFIED INITIAL ENCOUNTER	\$702,153	\$182,053
	September 19, 2022	Student	SICKLE-CELL DISEASE WITHOUT CRISIS	\$510,083	\$321,903
	July 20, 2022	Student	ACUTE LYMPHOBLASTIC LEUKEMIA NOT ACHIEVED REMISS	\$527,337	\$231,775
	August 14, 2022	Dependent	CHOANAL ATRESIA	\$248,216	\$155,353

University of Kansas (471) - Claims greater than \$100,000 - Utilization as of August 1, 2023

# Fort Hays State University (2005)

Policy Option(s)

1 2 4

Fort Hays State University (2005) - Utilization as of August 1, 2023 Confidential Property of UnitedHealth Group. Recipient shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

#### None - Claims greater than \$100,000 - Utilization as of August 1, 2023

# Pittsburg State University (2009)

Policy Option(s)

1		
2		
3		
4		

#### None - Claims greater than \$100,000 - Utilization as of August 1, 2023

# University of Kansas - Medical Center (2070)

Policy Option(s)



Policy Year	Day of Date Diagnosis	Student-De	ICD Code Description	Claimed Amount	Paid Claims
2021-22	August 18, 2021	Student	PBM CLAIMS	\$406,759	\$317,781
	August 24, 2021	Student	PBM CLAIMS	\$189,732	\$138,517
2022-23	August 15, 2022	Student	PBM CLAIMS	\$173,477	\$123,237
	September 3, 2022	Dependent	PBM CLAIMS	\$228,199	\$165,279

University of Kansas - Medical Center (2070) - Claims greater than \$100,000 - Utilization as of August 1, 2023 Confidential Property of UnitedHealth Group. Recipient Shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.