



# **Student Insurance Advisory Committee**

Kansas Board of Regents  
2026-01-21 1:00 - 3:00 CST

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**KANSAS BOARD OF REGENTS**  
**Student Insurance Advisory Committee**  
MINUTES  
October 22, 2025

The October 22, 2025, meeting of the Student Insurance Advisory Committee was called to order by Chair David Miller at 1:00 p.m. The meeting was held virtually via Zoom. *Proper notice was given according to law.*

MEMBERS PRESENT:	David Miller, WSU COBO rep, Chair	Jennifer Williams, KSU
	Tabatha Tafoya, ESU	Matt Anderson, KUMC
	Kiera Pulliam, PSU	Josh Manahan, Student
	Carol Solko-Olliff, FHSU	Anoushka Raju, Student
	Morgan Swartzlandr, KU	

Also participating were Ellison Rooney, Shaun Dagenhart, Hannah Dooley, UHCSR; and John Yeary, Gage Rohlf, Becky Pottebaum, and Kristin Scruggs, KBOR

#### **INTRODUCTIONS**

The members and participants on the call went through and introduced themselves and the institution or agency they represent.

#### **APPROVAL OF MINUTES**

Kiera Pulliam moved to approve the October 22, 2025, minutes. Following the second of Carol Solko-Olliff, the motion carried.

#### **UNITEDHEALTHCARE ANCILLARY PRODUCTS OVERVIEW**

Ellison Rooney and Shaun Dagenhart reviewed the ancillary benefits included in the Student Health Insurance Plan and discussed options for enabling additional services. Key offerings include Travel Assistance, which provides emergency evacuation, repatriation, and support for students traveling more than 100 miles from home; Virtual Visits through Teladoc, offering medical, mental health, and nutrition services at no cost to insured students; and the Student Assist Program, which delivers concierge support, legal and financial consultations, crisis counseling, and access to the Calm app. Telehealth services are currently inactive but can be activated at no additional cost for all campuses. These benefits do not impact premiums, and Ellison and Shaun committed to sharing resources to support further discussion.

#### **REPORTS FROM UNITEDHEALTHCARE STUDENT RESOURCES**

Ellison Rooney provided a review of the 2024–2025 policy year. Total enrollment reached approximately 5,100 students, reflecting a 5% decline in international student participation, primarily due to visa-related challenges.

Claims for the year totaled \$10 million against \$14 million in premium, indicating continued stability and a notable reduction in dependent claims. Network performance remained strong, with 99% of claims processed in-network.

Key cost drivers included hospital services, prescriptions (approximately \$2 million annually), and laboratory charges. Ambulance costs tripled despite similar claim volumes. Specialty pharmacy expenses were impacted by high-cost drugs such as Stelara and Humira, though 24% of enrolled students accessed prescriptions—predominantly generics. Large claimants remained consistent, with all major claims attributed to students rather than dependents.

Operational concerns were discussed, including the complexity of qualifying life event forms and the need for a streamlined process and centralized resource repository. Consensus was reached on exploring form consolidation, clarifying qualifying life event procedures, and improving access to updated documentation.

Renewal rates will be released in early January for committee review ahead of the January 22 meeting.

#### **GOOD OF THE ORDER**

Becky Pottebaum opened the discussion by seeking feedback on plans to expand meeting frequency and enhance agenda planning for the upcoming year. She proposed increasing the number of meetings from three to four to better align with renewal timelines and avoid compressed December sessions. Becky invited members to recommend topics that would add value and strengthen future discussions.

David Miller inquired about activating Teladoc virtual visit services, noting that implementation could occur quickly if all campuses agreed. Becky clarified that while UnitedHealthcare can enable the service easily, internal approval may require consultation with General Counsel to determine whether the decision necessitates full committee and board review. She committed to updating the committee once guidance on next steps is received.

The group agreed to revisit the topic following subcommittee discussions and confirmation of procedural requirements.

#### **FUTURE SIAC MEETINGS**

Future SIAC meetings are scheduled for 1:00 p.m. (unless otherwise noted):

- January 21, 2026
- April 22, 2026

#### **ADJOURNMENT**

The meeting adjourned at 2:05 p.m.



**Kansas State System**

UW Company UnitedHealthcare Insurance Company  
 Account # 200118  
 Option # 1  
 Policy Effective Date 08/01/2026  
 Administrator UHCSR  
 PPO Network UHC Choice Plus

**Proposal 1**

Version #: 1

Date of Proposal: 1/2/2026  
 Offer Effective Until: 2/16/2026  
 State: Kansas

2025-2026 Policy Year			2026 - 2027 Policy Year						
Basic	Annual	Net PPACA	Projected PPACA Fees				Annual	% Change	
			PCORI	Insurer Fee	Reinsurer Fee	Add'l Prem Tax			
Student	\$ 5,105.00	\$ 5,264.80	\$ 4.12	\$ -	\$ -	\$ 0.08	\$ 5,269.00	3.21%	

NOTE: The rates quoted are applicable to the proposed plan design. UnitedHealthcare reserves the right to adjust the rates and/or fees (i) in the event of any changes in federal, state or other applicable legislation or regulation;(ii) in the event of any changes in Plan design required by the applicable regulatory authority (i.e. mandated benefits) or by the Policyholder; and (iii) as otherwise permitted in our policy.

*The rates quoted here are based on the following assumptions, Modifications and / or Alternate Quotes. Changes to the assumptions may result in an adjustment to rates or revocation of the quote.*

1. No changes in benefits, eligibility or enrollment process, unless noted below.
2. Assumes a duplication of the 2025-2026 policy year benefits, except as noted below.
3. Includes all benefits as mandated by the state of Kansas.
4. Above rates include broker commission of 1%.
5. Above rates do not include any administrative fees payable to the University/College.
6. Services and procedures provided at the SHC are based on those in effect for the 2025-2026 policy year. Any removal or addition of services and procedures require Underwriting review and approval prior to finalization of terms.
7. SHC fees/reimbursement levels and their corresponding Services and Procedures are subject to an annual review by UHCSR prior to the finalization of terms.
8. Pricing includes coverage for all additional state required Essential Health Benefits that are being included with our recent policy filing.

Bid Version 1 1/2/2026

Modifications:

Alternate Quotes	Premium
	PM \$ Δ
	Per Year



**Kansas State System**

UW Company UnitedHealthcare Insurance Company  
 Account # 200118  
 Option # 2  
 Policy Effective Date 08/01/2026  
 Administrator UHCSR  
 PPO Network UHC Choice Plus

**Proposal 1**

Version #: 1

Date of Proposal: 1/2/2026  
 Offer Effective Until: 2/16/2026  
 State: Kansas

2025-2026 Policy Year			2026 - 2027 Policy Year							
Annual			Net PPACA	Projected PPACA Fees				Annual      % <i>Change</i>		
				PCORI	Insurer Fee	Reinsurer Fee	Add'l Prem Tax			
Basic										
Student	\$	2,661.00	\$ 2,742.80	\$ 4.12	\$ -	\$ -	\$ 0.08	\$	2,747.00	3.23%
Spouse	\$	2,661.00	\$ 2,742.80	\$ 4.12	\$ -	\$ -	\$ 0.08	\$	2,747.00	3.23%
Each Child	\$	2,661.00	\$ 2,742.80	\$ 4.12	\$ -	\$ -	\$ 0.08	\$	2,747.00	3.23%
All Children	\$	5,322.00	\$ 5,485.60	\$ 8.24	\$ -	\$ -	\$ 0.16	\$	5,494.00	3.23%
All Dependents	\$	7,983.00	\$ 8,228.40	\$ 12.36	\$ -	\$ -	\$ 0.24	\$	8,241.00	3.23%

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Bid Version 1 1/2/2026

Modifications:

Alternate Quotes		Premium
		PM \$ Δ
		Per Year



## Kansas State System

UW Company UnitedHealthcare Insurance Company  
 Account # 200118  
 Option # 3  
 Policy Effective Date 08/01/2026  
 Administrator UHCSR  
 PPO Network UHC Choice Plus

## Proposal 1

Version #: 1

Date of Proposal: 1/2/2026  
 Offer Effective Until: 2/16/2026  
 State: Kansas

2025-2026 Policy Year			2026 - 2027 Policy Year						
Annual			Net PPACA	Projected PPACA Fees				Annual	% Change
				PCORI	Insurer Fee	Reinsurer Fee	Add'l Prem Tax		
<b>Basic</b>									
Student	\$	2,661.00	\$ 2,742.80	\$ 4.12	\$ -	\$ -	\$ 0.08	\$ 2,747.00	3.23%
Spouse	\$	2,661.00	\$ 2,742.80	\$ 4.12	\$ -	\$ -	\$ 0.08	\$ 2,747.00	3.23%
Each Child	\$	2,661.00	\$ 2,742.80	\$ 4.12	\$ -	\$ -	\$ 0.08	\$ 2,747.00	3.23%
All Children	\$	5,322.00	\$ 5,485.60	\$ 8.24	\$ -	\$ -	\$ 0.16	\$ 5,494.00	3.23%
All Dependents	\$	7,983.00	\$ 8,228.40	\$ 12.36	\$ -	\$ -	\$ 0.24	\$ 8,241.00	3.23%
<b>Continuation - 3 Month Max</b>									
Student	\$	2,661.00	\$ 2,742.80	\$ 4.12	\$ -	\$ -	\$ 0.08	\$ 2,747.00	3.23%
Spouse	\$	2,661.00	\$ 2,742.80	\$ 4.12	\$ -	\$ -	\$ 0.08	\$ 2,747.00	3.23%
Each Child	\$	2,661.00	\$ 2,742.80	\$ 4.12	\$ -	\$ -	\$ 0.08	\$ 2,747.00	3.23%
All Children	\$	5,322.00	\$ 5,485.60	\$ 8.24	\$ -	\$ -	\$ 0.16	\$ 5,494.00	3.23%
All Dependents	\$	7,983.00	\$ 8,228.40	\$ 12.36	\$ -	\$ -	\$ 0.24	\$ 8,241.00	3.23%

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Bid Version 1 1/2/2026

Modifications:

Alternate Quotes	Premium PM \$ Δ Per Year
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**Kansas State System**

UW Company UnitedHealthcare Insurance Company  
 Account # 200118  
 Option # 4  
 Policy Effective Date 07/18/2026  
 Administrator UHCSR  
 PPO Network UHC Choice Plus

**Proposal 1**

Version #: 1

Date of Proposal: 1/2/2026  
 Offer Effective Until: 2/16/2026  
 State: Kansas

2025-2026 Policy Year			2026 - 2027 Policy Year							
			Net PPACA	Projected PPACA Fees						
				PCORI	Insurer Fee	Reinsurer Fee	Add'l Prem Tax			
Annual								Annual	%	Change
Basic										
Student	\$	2,661.00	\$ 2,742.80	\$ 4.12	\$ -	\$ -	\$ 0.08	\$ 2,747.00		3.23%
Spouse	\$	2,661.00	\$ 2,742.80	\$ 4.12	\$ -	\$ -	\$ 0.08	\$ 2,747.00		3.23%
Each Child	\$	2,661.00	\$ 2,742.80	\$ 4.12	\$ -	\$ -	\$ 0.08	\$ 2,747.00		3.23%
All Children	\$	5,322.00	\$ 5,485.60	\$ 8.24	\$ -	\$ -	\$ 0.16	\$ 5,494.00		3.23%
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Bid Version 1 1/2/2026















Modifications:

Alternate Quotes		Premium
		PM \$ Δ
		Per Year

## Premium & Paid Claims with Point-in-Time Comparison

Kansas State System (200118) Option(s): All

Show Item

			YTD paid thru December 20xx	paid thru December 2025
Kansas State System (200118)	Premium		 \$9,455.3K	 \$17,087.5K
	2022-23 Paid Claims		 \$3,379.5K	 \$10,773.6K
	Loss Ratio		35.7%	63.0%
	Premium		 \$9,072.3K	 \$16,579.2K
	2023-24 Paid Claims		 \$2,821.9K	 \$9,815.9K
	Loss Ratio		31.1%	59.2%
	Premium		 \$8,337.0K	 \$14,872.6K
	2024-25 Paid Claims		 \$2,820.2K	 \$10,489.1K
	Loss Ratio		33.8%	70.5%
	Premium		 \$7,996.8K	
	2025-26 Paid Claims		 \$3,008.4K	
	Loss Ratio		37.6%	



# Kansas State System (200118)

Policy Option(s)

1  
2  
3  
4

Kansas State System (200118) - Utilization as of January 1, 2026

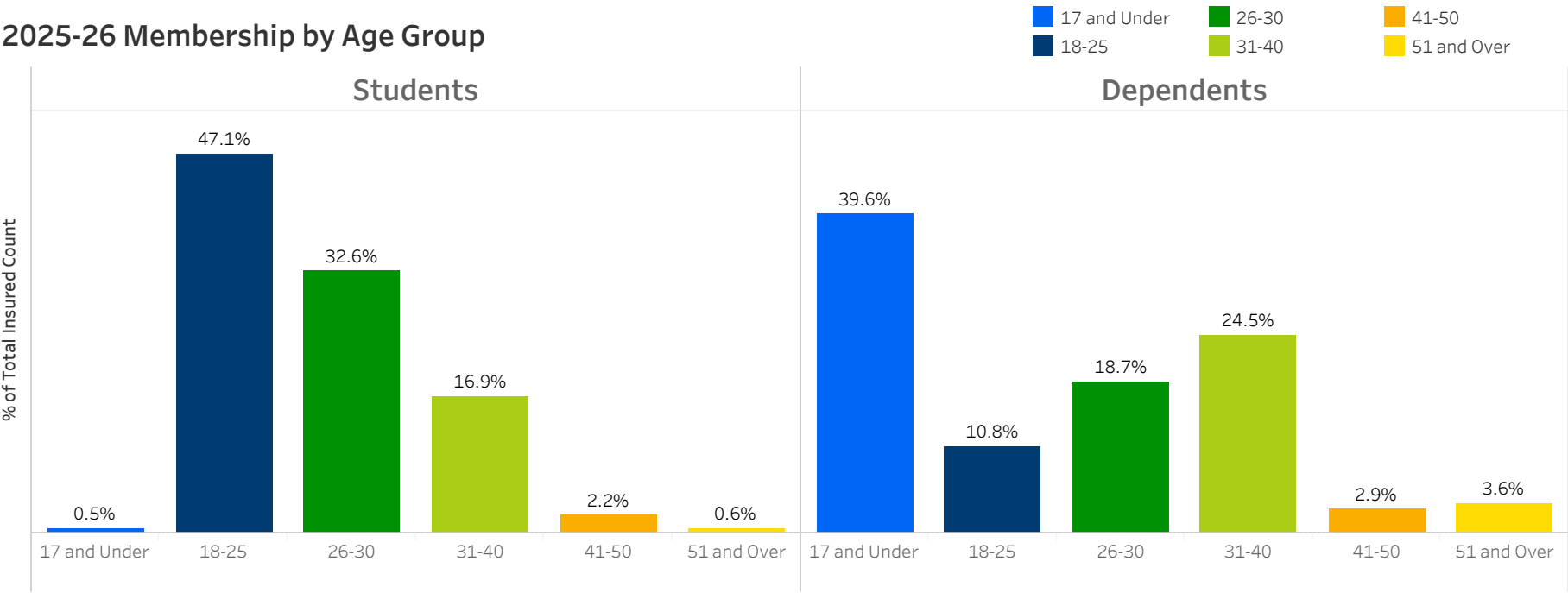
Confidential Property of UnitedHealth Group. Recipient shall be liable for using and protecting from further disclosure or misuse, consistent with applicable law.

Annualized Membership

2025-26 policy year is an estimate.



2025-26 Membership by Age Group

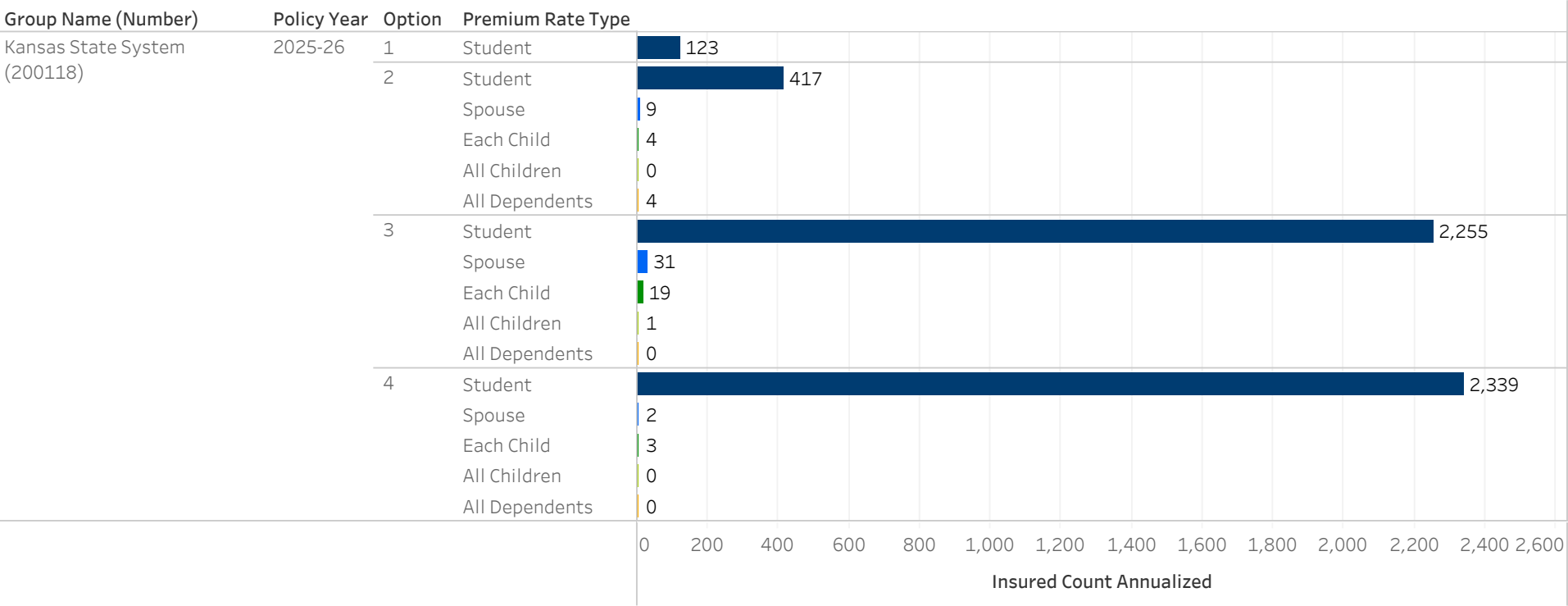


Kansas State System (200118) - Membership as of January 1, 2026

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

\*2025-26 Policy Year Annualized Insured Count is an estimate.



Kansas State System (200118) - Annualized Membership as of January 10, 2026

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

\*2025-26 Policy Year Annualized Insured Count is an estimate.

Group Name (Number)	Premium Rate Type	2025-26
Kansas State System (200118)	Student	5,134
	Spouse	42
	Each Child	26
	All Children	1
	All Dependents	4
Grand Total		5,207

\*Annualized Membership is calculated by dividing the total premium received by the annual rate. For the in-progress policy year (2025-26) 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 10, 2026**  
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 2025-26

Total Number of Insureds with active coverage as of January 12, 2026

Group Name (Number)	Client Name (Number)	Premium Rate Type	1	2	3	4	Total
Kansas State System (200118)	Emporia State University (197)	Student	5	2	64	99	161
		Spouse			2		2
		Total	5	2	66	99	163
	Fort Hays State University (2005)	Student	6	3		175	184
		Total	6	3		175	184
	Kansas State University (470)	Student	36	116	781	813	1,212
		Spouse		2	15		17
		Each Child			6		6
		All Children			2		2
		Total	36	118	804	813	1,237
	Pittsburg State University (2009)	Student	5	1	44	112	161
		Spouse			1		1
		Total	5	1	45	112	162
	University of Kansas - Medical Center (2070)	Student	9	254	198	18	475
		Spouse		10	6		16
		Each Child		7	3		10
		All Children			2		2
		All Dependents				3	3
		Total	9	271	209	21	506
	University of Kansas (471)	Student	83	38	1,067	791	1,967
		Spouse		1	24	4	28
		Each Child			12	6	17
		All Children		2	4	2	8
		All Dependents		7	3	6	16
		Total	83	48	1,110	809	2,036
	Wichita State University (180)	Student	12	52	368	824	1,242
		Spouse		1	5		6

### Kansas State System (200118) - Total Insured Counts - Active Coverage as of January 12, 2026

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 2025-26

Total Number of Insureds with active coverage as of January 12, 2026

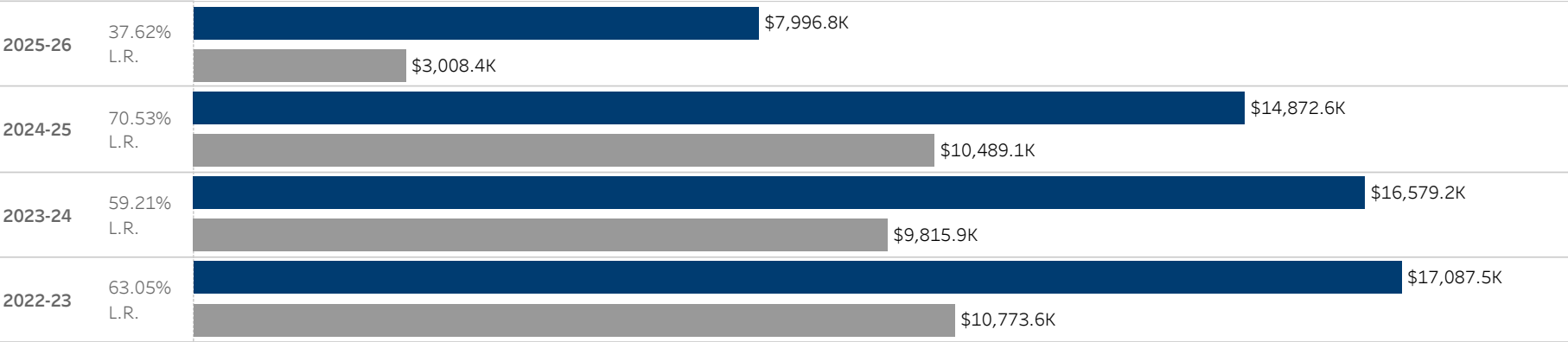
Group Name (Number)	Client Name (Number)	Premium Rate Type	1	2	3	4	Total
Kansas State System (200118)	Wichita State University (180)	Each Child				1	1
		All Children		3			3
		All Dependents			3	3	3
		Total	12	56	376	827	1,254
	Total		156	499	2,610	2,856	5,542
# of Unique Members			156	499	2,610	2,856	5,542

## Kansas State System (200118) - Total Insured Counts - Active Coverage as of January 12, 2026

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

# Plan Experience Overview

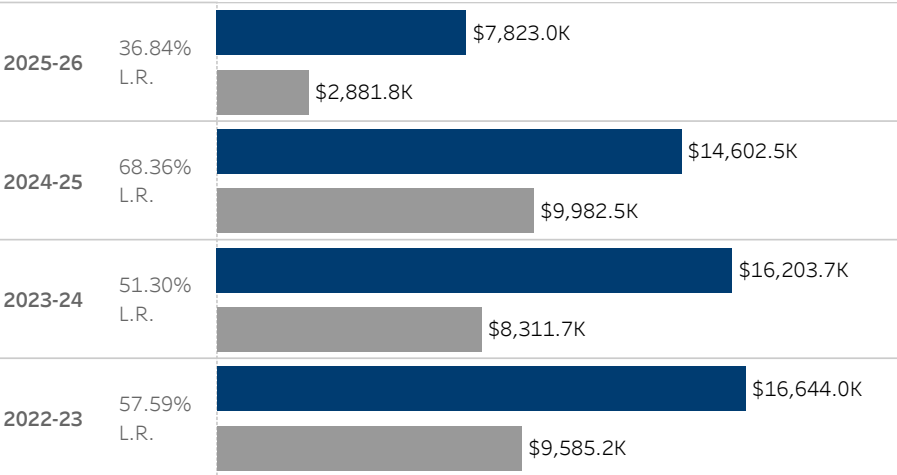
## All Insureds P&L



Values are displayed in thousands

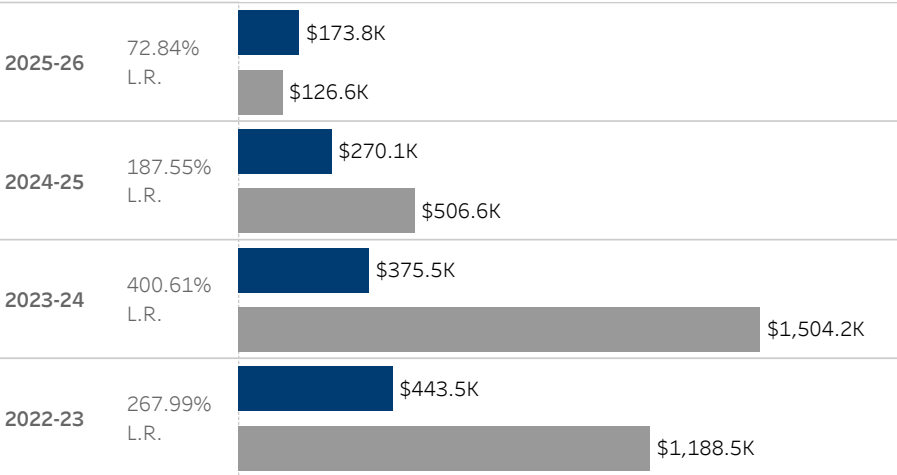
The premium reported includes all of the following taxes and fees: Premium tax, PPACA Patient-centered Outcomes Research Institute (PCORI) fee, PPACA reinsurance fee and the PPACA health insurance tax (HIT). Also included in the premium is all outside broker commissions (if applicable.)

## Students - P&L



Values are displayed in thousands

## Dependents - P&L

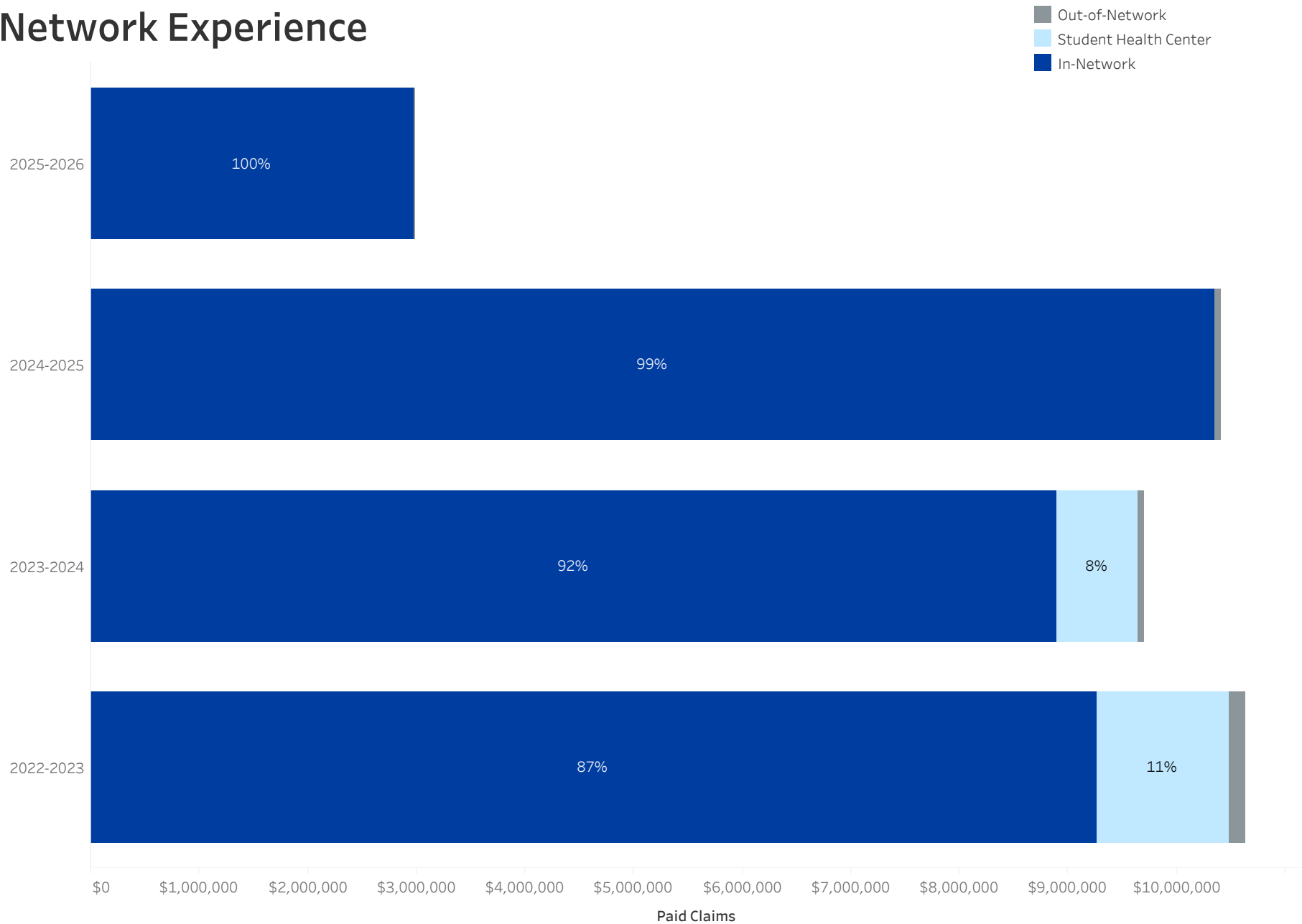


Values are displayed in thousands

Kansas State System (200118) - Utilization as of January 1, 2026

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

# Network Experience



Kansas State System (200118) - Utilization as of January 1, 2026

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

# SR Charge Category Utilization as of 1/1/2026

## 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	2024-2025				2025-2026			
			Claimant Count	Claims	Claimed Amount	Paid Claims	Claimant Count	Claims	Claimed Amount	Paid Claims
Grand Total					\$33,964,644	\$10,489,103			\$7,636,641	\$3,008,357
Outpatient	Total				\$19,963,546	\$7,418,859			\$6,363,161	\$2,673,273
	ADJUSTMENTS	858	1,948	\$0	(\$75,079)	158	329	\$0	\$690	
	AMBULANCE	29	39	\$253,755	\$145,755	4	4	\$6,847	\$2,095	
	ANESTHETIST	132	192	\$144,648	\$51,164	28	38	\$39,009	\$10,263	
	ASSISTANT SURGEON	16	19	\$36,544	\$2,176	1	3	\$350	\$87	
	CAT SCAN / MRI	267	643	\$1,677,123	\$330,197	119	215	\$626,033	\$127,467	
	CHEMOTHERAPY	11	93	\$1,279,129	\$279,476	2	4	\$36,976	\$16,979	
	CLAIM INTEREST	51	78	\$0	\$1,803	2	2	\$0	\$1	
	CONSULTANT					1	1	\$225	\$0	
	DENTAL	9	14	\$3,598	\$881	5	5	\$2,727	\$20	
	DURABLE MED/BRACES/APPL	181	302	\$139,414	\$30,252	64	86	\$45,402	\$8,923	
	HOSPITAL MISCELLANEOUS	1	1	\$770	\$456					
	INJECTIONS	1,716	3,691	\$787,532	\$568,346	1,012	1,447	\$284,702	\$210,578	
	LABORATORY	3,940	11,219	\$2,879,150	\$1,224,944	2,096	3,968	\$1,415,270	\$702,524	
	MEDICAL EMERGENCY	233	278	\$1,190,863	\$246,187	86	99	\$439,801	\$101,326	
	OTHER	22	109	\$7,920	\$7,920	15	28	\$959	\$959	
	OTHER INSURANCE	4	5	\$0	(\$128,506)					
	OUTPATIENT SURGERY	577	908	\$549,159	\$160,233	192	235	\$117,522	\$33,105	
	OUTPATIENT SURGICAL FACILITIES	123	168	\$2,616,377	\$617,978	32	34	\$404,125	\$120,847	
	PHYSICIAN VISITS	3,257	11,847	\$2,039,263	\$987,291	1,774	4,086	\$778,850	\$386,509	
	PHYSIOTHERAPY	289	1,527	\$488,555	\$158,664	135	550	\$192,711	\$55,540	
	PRESCRIPTIONS	3,072	24,840	\$4,890,584	\$2,522,661	1,831	8,679	\$1,710,631	\$819,232	
	RADIATION THERAPY	3	96	\$167,693	\$33,316					
	REFUNDS	11	12	\$0	(\$1,637)					
	SUPPLIES/MISC	437	599	\$114,204	\$62,903	173	229	\$18,755	\$15,022	
	URGENT CARE	7	8	\$3,246	\$299	1	1	\$612	\$0	

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

### Kansas State System (200118) - Utilization as of 1/1/2026

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

# SR Charge Category Utilization as of 1/1/2026

## 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	2024-2025				2025-2026			
		Claimant Count	Claims	Claimed Amount	Paid Claims	Claimant Count	Claims	Claimed Amount	Paid Claims
Outpatient	XRAYs	1,399	2,746	\$694,018	\$191,181	701	1,076	\$241,653	\$61,106
Inpatient	Total			\$14,001,098	\$3,070,243			\$1,273,480	\$335,084
	ADJUSTMENTS	14	55	\$0	\$106,122	3	3	\$0	\$1,070
	ANESTHETIST	38	62	\$95,539	\$50,147	12	13	\$24,803	\$9,660
	ASSISTANT SURGEON	13	14	\$31,847	\$2,726	1	1	\$575	\$123
	CLAIM INTEREST	3	3	\$0	\$13				
	DENTAL	5	5	\$1,254	\$0	6	6	\$7,724	\$1,810
	HOME HEALTH CARE	33	73	\$57,585	\$19,469	15	66	\$29,770	\$14,405
	HOSPITAL	105	205	\$12,768,546	\$2,550,950	32	34	\$965,849	\$238,962
	INJECTIONS	8	10	\$899	\$336	3	3	\$268	\$113
	INPATIENT SURGERY	53	81	\$226,766	\$87,743	20	24	\$66,701	\$30,021
	MEDICAL EMERGENCY	25	37	\$257,781	\$70,799	11	11	\$81,032	\$13,969
	PHYSICIAN VISITS	107	500	\$507,993	\$160,659	35	90	\$85,077	\$18,598
	PRESCRIPTIONS	40	148	\$14,428	\$8,550	20	38	\$5,036	\$2,604
	PROFESSIONAL FEE	140	311	\$38,460	\$12,730	145	203	\$6,645	\$3,748

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

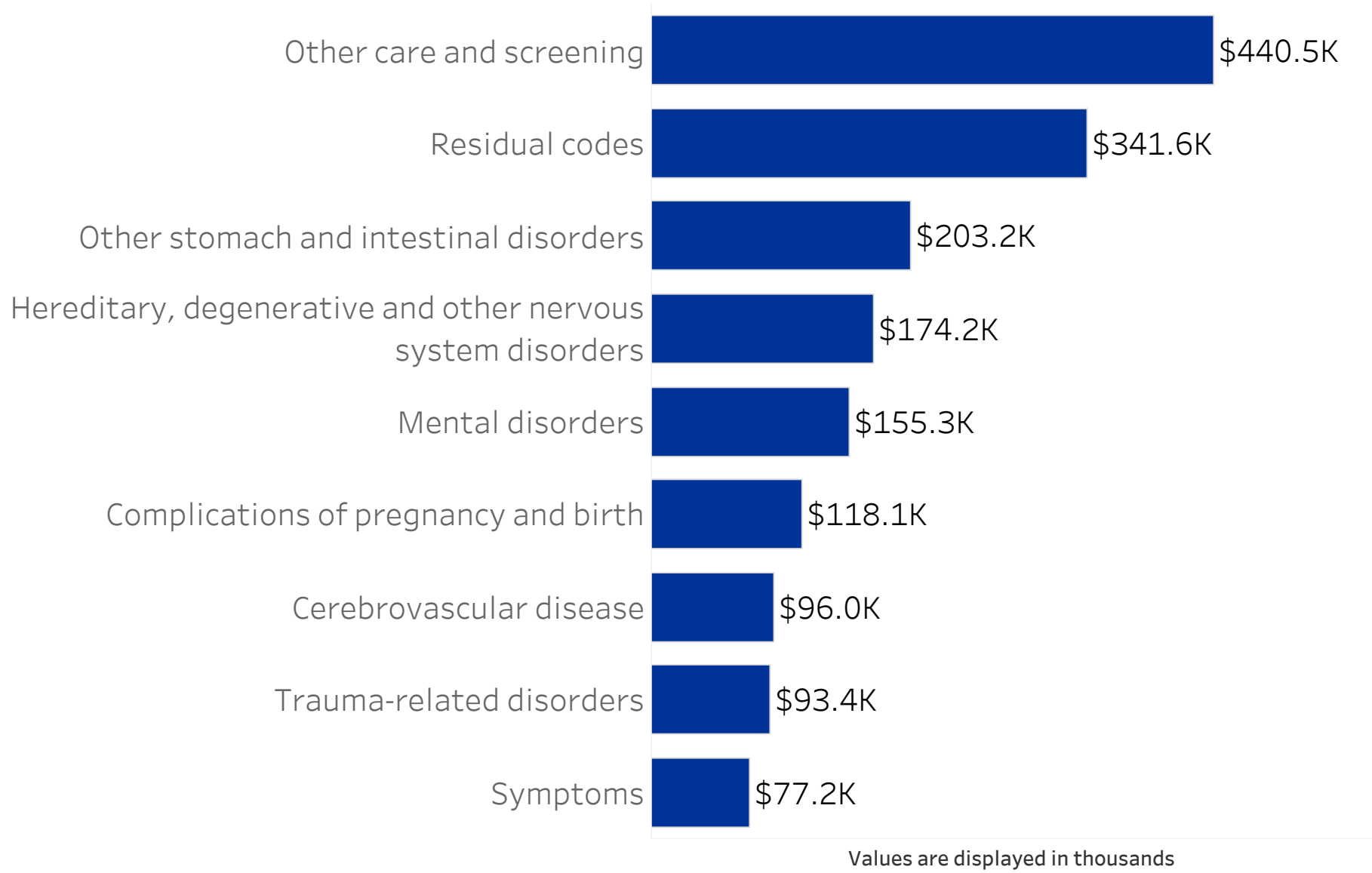
### Kansas State System (200118) - Utilization as of 1/1/2026

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

# Top 10 Diagnoses

2025-26 Policy Year

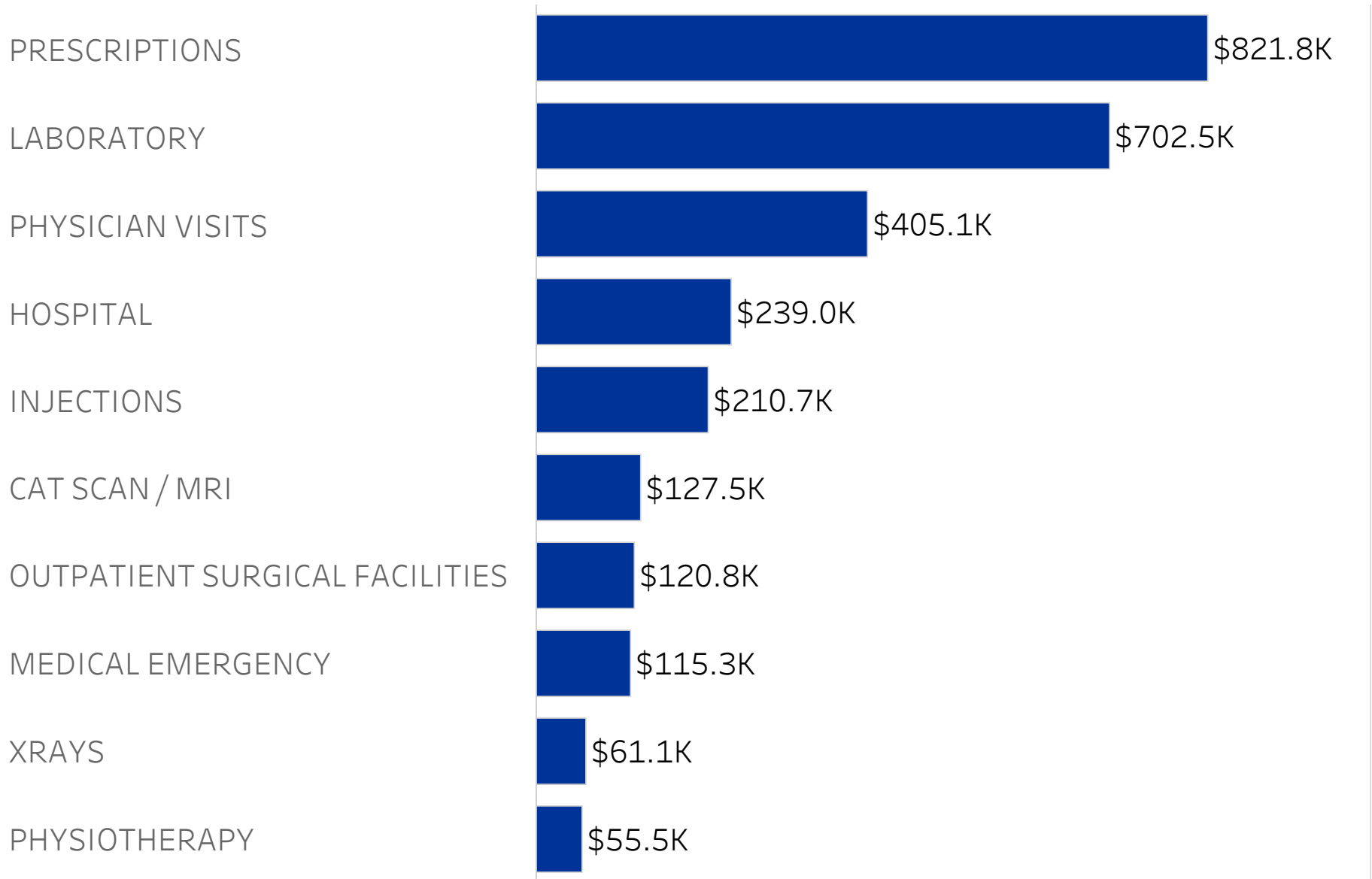
Clinical Classification Software (CCS) Condition Descriptions group relevant International Classification of Diseases (ICD) Codes into clinically meaningful categories. Diagnoses information does not include Prescription Drugs or Student Health Center ledger billed claims.



Kansas State System (200118) - Utilization as of January 1, 2026

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

## Top 10 SR Charge Categories 2025-26 Policy Year



Values are displayed in thousands

Kansas State System (200118) - Utilization as of January 1, 2026

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

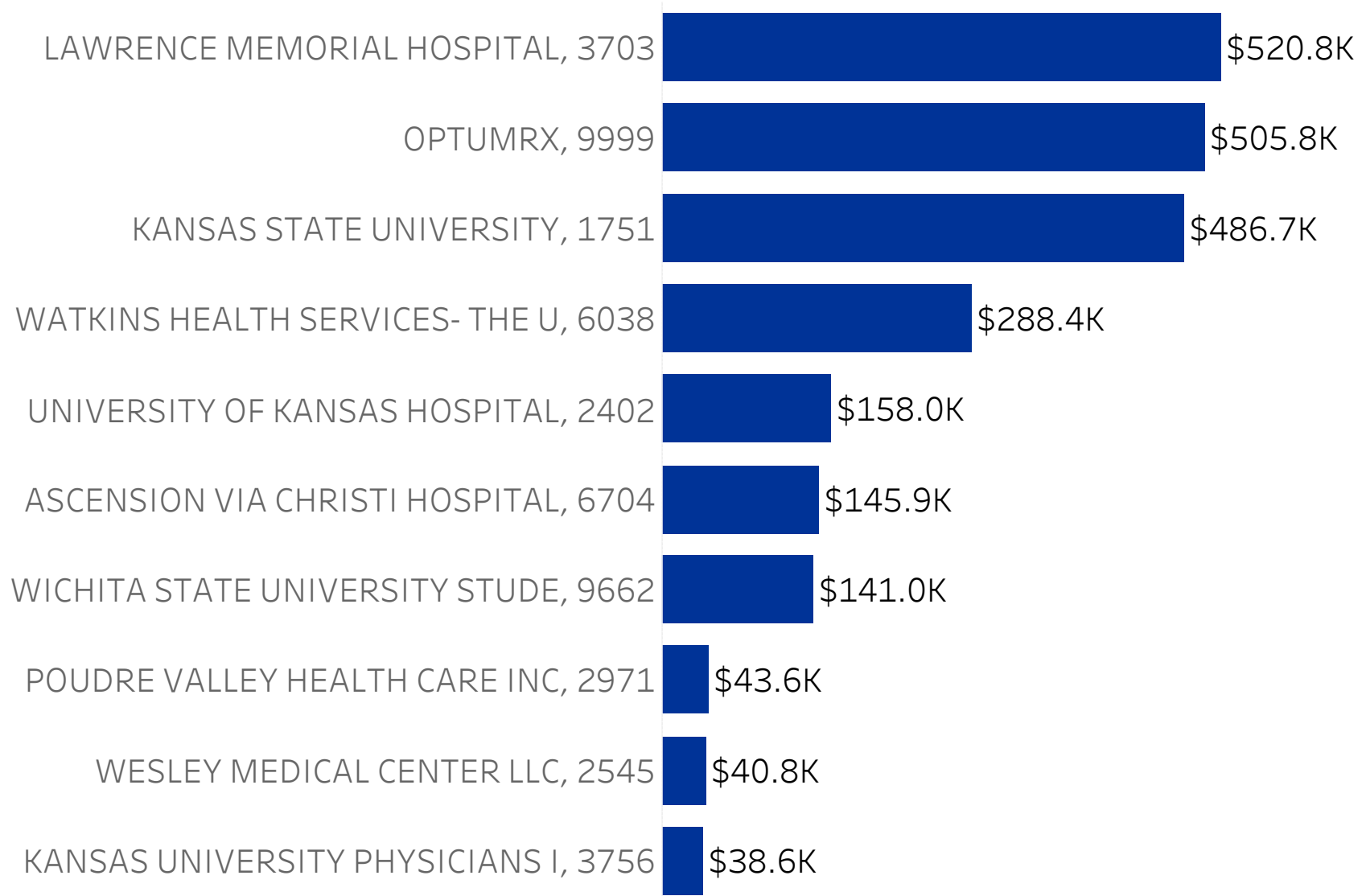
Policy Year	Day of Date Diagnosis	Student-De..	ICD Code Description	Claimed Amount	Paid Claims
2024-25	August 15, 2024	Student	PBM CLAIMS	\$150,470	\$108,383
	April 11, 2025	Student	BENIGN NEOPLASM OF MENINGES UNSPECIFIED	\$399,916	\$181,846
	August 20, 2024	Student	PBM CLAIMS	\$217,123	\$160,917
	September 13, 2024	Student	ULCERATIVE CHRONIC PANCOLITIS W/O COMPLICATIONS	\$347,679	\$230,808
	October 3, 2024	Student	PBM CLAIMS	\$178,929	\$129,389
	April 9, 2025	Student	MULTIPLE SCLEROSIS	\$305,157	\$183,189
	August 13, 2024	Student	PBM CLAIMS	\$153,859	\$110,809
	March 16, 2025	Student	EPILEPSY UNS NOT INTRACT W/STATUS EPILEPTICUS	\$6,406,081	\$897,361
	May 2, 2025	Student	OTHER ENCEPHALITIS AND ENCEPHALOMYELITIS	\$1,239,722	\$256,085
	November 15, 2024	Student	ANEURYSM OF OTHER PRECEREBRAL ARTERIES	\$628,752	\$149,232
	November 5, 2024	Student	OTHER HYPERTROPHIC CARDIOMYOPATHY	\$580,408	\$167,709
2025-26	August 20, 2025	Student	ULCERATIVE CHRONIC PANCOLITIS W/O COMPLICATIONS	\$263,857	\$175,270
	September 25, 2025	Student	MULTIPLE SCLEROSIS	\$260,749	\$174,010

### Kansas State System (200118) - Claims greater than \$100,000 - Utilization as of January 1, 2026

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

2025-26 Policy Year



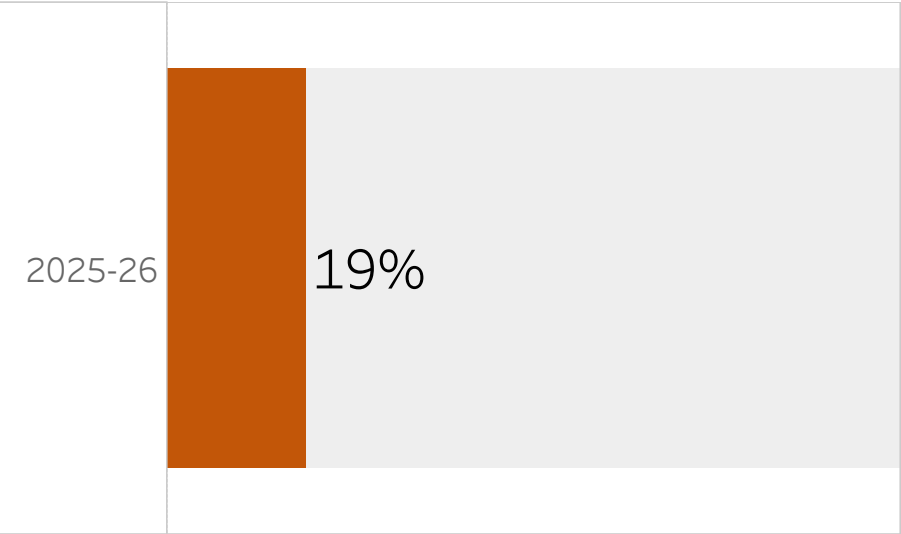
Values are displayed in thousands

Kansas State System (200118) - Utilization as of January 1, 2026

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 2025-26	3	132	128	\$0	\$19,911
FLUCELVAX 2025-2026	3	124	122	\$0	\$5,967
FLUBLOK 2025-2026	3	91	89	\$0	\$8,062
FLUARIX 2025-2026	3	92	87	\$0	\$2,938
AMPHETAMINE/DEXTROAMPHETAM..	1	359	82	\$1,111	\$3,079
ESCITALOPRAM OXALATE	1	156	56	\$233	\$78
PREDNISONE	1	66	54	\$20	\$3
SPIRONOLACTONE	1	140	49	\$343	\$172
AMOXICILLIN	1	61	48	\$43	\$12
BUPROPION HYDROCHLORIDE ER (XL)	1	173	46	\$315	\$175

## Top Drugs by Paid Claims

Drug Name	Tier	Claimant Count	Copay	Paid Claims
DESCOVY	3	6	\$0	\$51,540
SKYRIZI	2	2	\$0	\$42,815
DUPIXENT	2	3	\$16,740	\$25,110
ZYMFENTRA 2-PEN	9	1	\$7,696	\$24,503
KISQALI	3	1	\$6,139	\$24,099
BIMZELX	3	1	\$7,900	\$23,094
COMIRNATY 2025-26	3	128	\$0	\$19,911
HUMIRA PEN	2	1	\$7,923	\$18,224
SPRAVATO 84MG DOSE	3	4	\$9,288	\$17,646
KISQALI	2	1	\$0	\$15,219

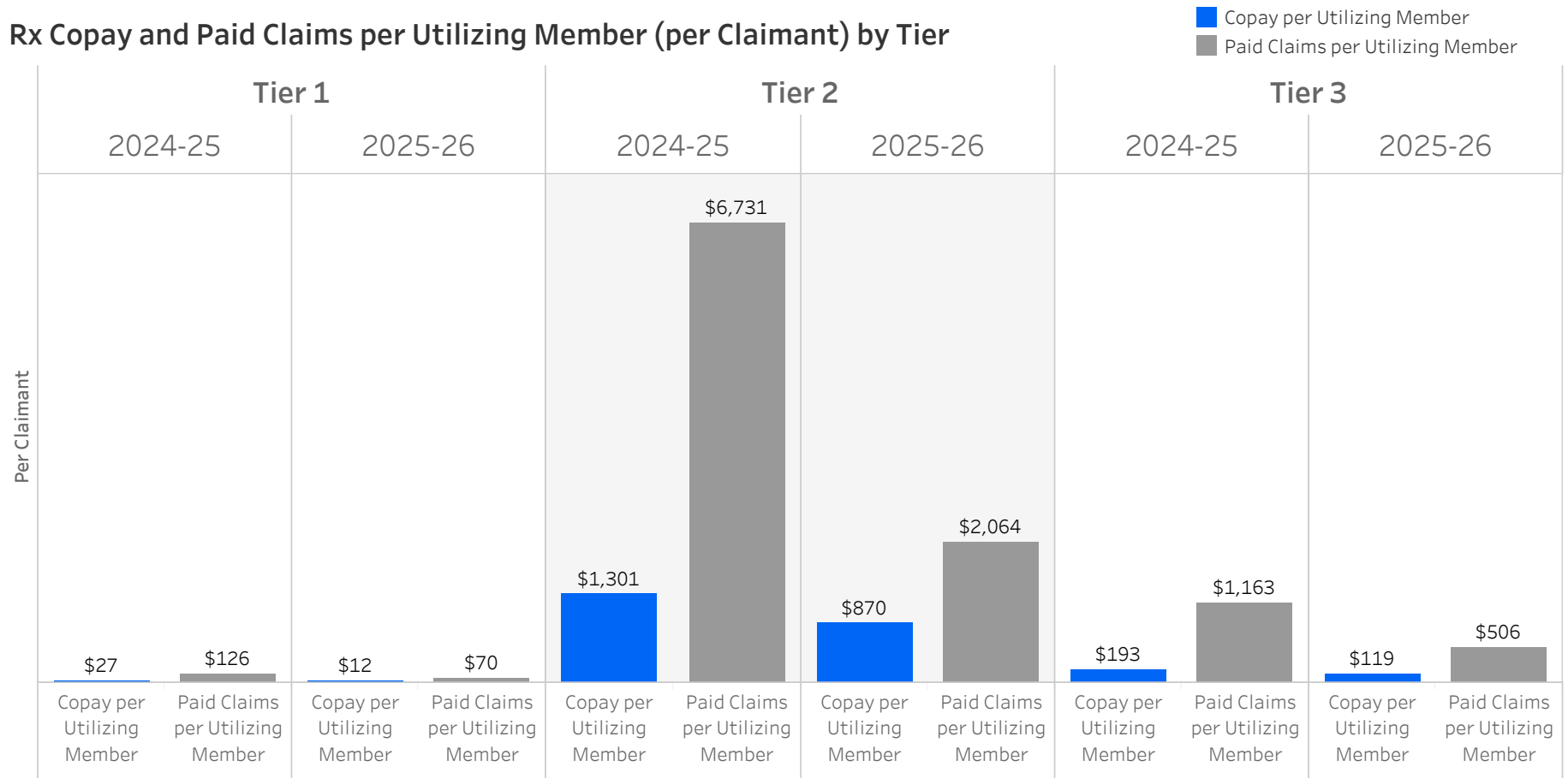
## Top Therapeutic Classes by Claimant Count

	Claimant Count	Copay	Paid Claims
ANTINEOPLASTICS	355	\$6,184	\$84,780
PSYCHOSTIMULANTS-ANTIDEPRESSANTS	224	\$5,980	\$8,522
MISCELLANEOUS	170	\$5,940	\$11,242
SYSTEMIC CONTRACEPTIVES	162	\$910	\$20,084
AMPHETAMINE PREPARATIONS	114	\$2,699	\$17,301
PENICILLINS	88	\$63	\$23
OTHER ANTIHYPERTENSIVES	67	\$236	\$1,104
ANTIARTHRITICS	66	\$12,917	\$25,689
Null	65	\$58,841	\$116,945
ANTIFUNGALS	58	\$342	\$722

Kansas State System (200118) - Utilization as of January 1, 2026

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

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



## Rx Utilization by Tier

Tier	2024-25			2025-26		
	Claimant Count	Copay	Paid Claims	Claimant Count	Copay	Paid Claims
1	1,478	\$40,250	\$185,497	897	\$10,932	\$62,441
2	133	\$173,070	\$895,238	89	\$77,435	\$183,736
3	548	\$105,993	\$637,368	408	\$48,723	\$206,531

Kansas State System (200118) - Utilization as of January 1, 2026

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, 2026

Group Name (Number)	Client Name (Number)	Policy Year	Measure Names	
Kansas State System (200118)	Emporia State University (197)	2022-23	Premium	\$446,758
			Paid Claims	\$207,267
			Loss Ratio	46.4%
		2023-24	Premium	\$443,599
			Paid Claims	\$175,337
			Loss Ratio	39.5%
		2024-25	Premium	\$387,222
			Paid Claims	\$236,026
			Loss Ratio	61.0%
		2025-26	Premium	\$217,736
			Paid Claims	\$53,048
			Loss Ratio	24.4%
Fort Hays State University (2005)	2022-23	Premium	\$396,345	
		Paid Claims	\$186,392	
		Loss Ratio	47.0%	
	2023-24	Premium	\$446,811	
		Paid Claims	\$64,538	
		Loss Ratio	14.4%	
	2024-25	Premium	\$573,431	
		Paid Claims	\$107,580	
		Loss Ratio	18.8%	
	2025-26	Premium	\$221,603	
		Paid Claims	\$36,895	
		Loss Ratio	16.6%	
Kansas State University (470)	2022-23	Premium	\$3,196,269	
		Paid Claims	\$2,304,581	
		Loss Ratio	72.1%	

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, 2026

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, 2026

Group Name (Number)	Client Name (Number)	Policy Year	Measure Names	
Kansas State System (200118)	Kansas State University (470)	2023-24	Premium	\$3,262,844
			Paid Claims	\$3,236,003
			Loss Ratio	99.2%
		2024-25	Premium	\$3,209,182
			Paid Claims	\$3,087,108
			Loss Ratio	96.2%
		2025-26	Premium	\$2,288,508
			Paid Claims	\$979,382
			Loss Ratio	42.8%
Pittsburg State University (2009)		2022-23	Premium	\$631,601
			Paid Claims	\$284,563
			Loss Ratio	45.1%
		2023-24	Premium	\$790,720
			Paid Claims	\$142,309
			Loss Ratio	18.0%
		2024-25	Premium	\$562,872
			Paid Claims	\$80,028
			Loss Ratio	14.2%
University of Kansas - Medical Center (2070)		2025-26	Premium	\$188,673
			Paid Claims	\$37,478
			Loss Ratio	19.9%
		2022-23	Premium	\$1,454,944
			Paid Claims	\$1,948,112
			Loss Ratio	133.9%
		2023-24	Premium	\$1,373,235
			Paid Claims	\$1,645,253
			Loss Ratio	119.8%

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 January 1, 2026

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, 2026

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)	2024-25	Premium	\$1,337,514		
			Paid Claims		\$1,060,804	
			Loss Ratio			79.3%
	2025-26	Premium	\$891,184			
		Paid Claims	\$252,364			
		Loss Ratio	28.3%			
	University of Kansas (471)	2022-23	Premium	\$5,508,424		
			Paid Claims		\$4,503,647	
			Loss Ratio			81.8%
	2023-24	Premium	\$5,627,633			
		Paid Claims	\$3,162,400			
		Loss Ratio	56.2%			
	2024-25	Premium	\$5,384,412			
		Paid Claims	\$3,814,111			
		Loss Ratio	70.8%			
	2025-26	Premium	\$2,624,030			
		Paid Claims	\$1,342,012			
		Loss Ratio	51.1%			
Wichita State University (180)	2022-23	Premium	\$5,453,124			
			Paid Claims		\$1,339,062	
			Loss Ratio			24.6%
	2023-24	Premium	\$4,634,317			
		Paid Claims	\$1,390,061			
		Loss Ratio	30.0%			
	2024-25	Premium	\$3,417,983			
		Paid Claims	\$2,103,446			
		Loss Ratio	61.5%			

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 January 1, 2026

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, 2026

Group Name (Number)	Client Name		Policy			
	(Number)	Year				
Kansas State System (200118)	Wichita State University (180)	2025-26	Premium			\$1,565,095
			Paid Claims		\$307,178	
			Loss Ratio			19.6%

- 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, 2026

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, 2026

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
2024-25	March 16, 2025	Student	EPILEPSY UNS NOT INTRACT W/STATUS EPILEPTICUS	\$6,406,081	\$897,361
	May 2, 2025	Student	OTHER ENCEPHALITIS AND ENCEPHALOMYELITIS	\$1,239,722	\$256,085

Wichita State University (180) - Claims greater than \$100,000 - Utilization as of January 1, 2026

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, 2026

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, 2026**

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, 2026

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
2024-25	August 15, 2024	Student	PBM CLAIMS	\$150,470	\$108,383
	August 20, 2024	Student	PBM CLAIMS	\$217,123	\$160,917
	October 3, 2024	Student	PBM CLAIMS	\$178,929	\$129,389
	August 13, 2024	Student	PBM CLAIMS	\$153,859	\$110,809
	November 15, 2024	Student	ANEURYSM OF OTHER PRECEREBRAL ARTERIES	\$628,752	\$149,232

Kansas State University (470) - Claims greater than \$100,000 - Utilization as of January 1, 2026

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	

University of Kansas (471) - Utilization as of January 1, 2026

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
2024-25	April 11, 2025	Student	BENIGN NEOPLASM OF MENINGES UNSPECIFIED	\$399,916	\$181,846
	September 13, 2024	Student	ULCERATIVE CHRONIC PANCOLITIS W/O COMPLICATIONS	\$347,679	\$230,808
	April 9, 2025	Student	MULTIPLE SCLEROSIS	\$305,157	\$183,189
	November 5, 2024	Student	OTHER HYPERTROPHIC CARDIOMYOPATHY	\$580,408	\$167,709
2025-26	August 20, 2025	Student	ULCERATIVE CHRONIC PANCOLITIS W/O COMPLICATIONS	\$263,857	\$175,270
	September 25, 2025	Student	MULTIPLE SCLEROSIS	\$260,749	\$174,010

University of Kansas (471) - Claims greater than \$100,000 - Utilization as of January 1, 2026

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, 2026

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, 2026**

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, 2026

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, 2026

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, 2026

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, 2026**

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



**Kansas Board of Regents**

**KBOR Quarterly Meeting**

**Eligibility and Waiver Audit Services  
Overview of Spring 2026**

Date of Report: January 8, 2026

At the request of the Kansas Board of Regents (KBOR) this document serves as an overview of the work ECI has performed for six of the seven KBOR schools: (1) University of Kansas (KU), (2) University of Kansas Medical Center (KUMC), (3) Kansas State University (KSU), (4) Emporia State University (ESU), (5) Wichita State University (WSU), and (6) Pittsburg State University (PSU).

The waiver/enrollment processes have proceeded normally for audits, enrollment if applicable, and Customer Service.

Attached are Spring (ongoing) 2026 Elev834 reports with to-date results on waiver and enrollment data for the semester, and Customer Service and Ticket reports. ECI is in the process of work for Spring 2026 which extends into early February 2026. We are experiencing a bit more pre-audits for international travel plans which don't pass audit than in prior semesters.

ECI does not report on monthly enrollments, special handling, or dependent enrollment.

As a partner to KBOR and United HealthCare Student Resources we are always looking for better ways to serve the schools of the Kansas Board of Regents. We appreciate your business.

**University of Kansas**  
**Waiver Audit Summary Report**  
**Plan Year 2025-26**  
**Spring 2026 (Ongoing)**

Approval/ Disapproval Code	Approval/ Disapproval Description	Number of Audits	% of Audits
1	Approved	23	85.2%
2	Unknown		0.0%
4	Invalid Student Insurance Information	1	3.7%
6	Carrier refuses to disclose information		0.0%
7	Auditor was unable to complete the waiver audit (other than network status)		0.0%
8	Policy is not Active		0.0%
9	Plan does not provide insured prescription drug coverage	1	3.7%
10	No coverage for inpatient and/or outpatient mental health services with no limit		0.0%
11	Plan does not have maternity coverage with no dollar limit		0.0%
12	Plan does not have preventive routine care with no limit	1	3.7%
13	Plan does not provide coverage for pre-existing conditions		0.0%
14	Plan does not provide Unlimited benefits with no per-service, per-diagnosis, or per-accident limitations		0.0%
15	The Individual Annual Deductible is over \$500		0.0%
16	Plan does not have out-of-pocket maximum of \$8,200 per member or \$16,400 per family (Including deductible and all co-pay amounts)		0.0%
17	Patient co-insurance is over 25%		0.0%
18	Insurer does not have a based of operations in the U.S. or have a U.S. based claims payer		0.0%
19	Plan does not provide a combined maximum of \$100,000 for Medical Evacuation and Repatriation		0.0%
20	The insurance company is not authorized to do business in the state by the Kansas Department of Insurance	1	3.7%
21	This plan does not provide coverage for all required service types such as pediatric dental and vision for covered dependents		0.0%
23	Plan documents reviewed are not in English and converted to U.S. dollars or the insurance company contact telephone number is outside of the U.S.		0.0%
99	Void		0.0%
<b>Grand Total</b>		<b>27</b>	<b>100%</b>

Audits Adjusted	Total
Additional Documentation	0
Audit Adjustment	8
Client Request	0
Student Provided MER	0
Student Resubmitted Waiver	2
Student Updated Insurance	0
<b>Grand Total</b>	<b>10</b>

<b>% Adjusted of Total Audits Completed</b>	<b>37.0%</b>
---	--------------

Total Billable	Billable Count
Final, Completed Audit Results	27
Audits Adjusted	10
<b>Total Billable</b>	<b>37</b>

# University of Kansas Medical Center (KUMC)

## Waiver Audit Summary Report

Plan Year 2025-26

Spring 2026 (Ongoing)

Approval/ Disapproval Code	Approval/ Disapproval Description	Number of Audits	% of Audits
1	Approved	2	100%
2	Unknown		0%
4	Invalid Student Insurance Information		0%
6	Carrier refuses to disclose information		0%
7	Auditor was unable to complete the waiver audit (other than network status)		0%
8	Policy is not Active		0%
9	Plan does not provide insured Prescription Drug coverage		0%
10	No coverage for inpatient and/or outpatient mental health services with no limit		0%
11	Plan does not have maternity coverage with no dollar limit		0%
12	Plan does not have preventive routine care with no limit		0%
13	Plan does not provide coverage for pre-existing conditions		0%
14	Plan does not provide Unlimited benefits with no per-service, per-diagnosis, or per-accident limitations		0%
15	The Individual Annual Deductible is over \$500		0%
16	Plan does not have out-of-pocket maximum of \$8,200 per member or \$16,400 per family (including deductible and all co-pay amounts)		0%
17	Patient co-insurance is more than 25%		0%
18	Insurer does not have a base of operations in the U.S. or have a U.S. based claims payer		0%
19	Plan does not provide a combined maximum of \$100,000 for Medical Evacuation and Repatriation		0%
20	The insurance company is not authorized to do business in the state by the Kansas Department of Insurance		0%
21	This plan does not provide coverage for all required service types such as pediatric dental and vision for covered dependents		0%
22	The following health plan types will not be accepted: Limited, Travel, Short Term Limited Duration, Disability, Hospital Indemnity, Accident Only, or Emergency/Urgent Care Only		0%
23	Plan documents reviewed are not in English and converted to U.S. dollars or the insurance company contact telephone number is outside of the U.S.		0%
99	Void		0%
<b>Grand Total</b>		<b>2</b>	<b>100%</b>

Audits Adjusted	Total
Additional Documentation	0
Audit Adjustment	0
Client Request	0
Student Provided MER	0
Student Resubmitted Waiver	0
Student Updated Insurance	0
<b>Grand Total</b>	<b>0</b>

<b>% Adjusted of Total Audits Completed</b>	<b>0.0%</b>
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Total Billable	Billable Count
Final, Completed Audit Results	2
Audits Adjusted	0
<b>Total Billable</b>	<b>2</b>

# Wichita State University

## Waiver Audit Summary Report

Plan Year 2025-26

Spring 2026 (Ongoing)

Approval/ Disapproval Code	Approval/ Disapproval Description	Number of Audits	% of Audits
1	Approved	26	86.7%
2	Unknown		0.0%
4	Invalid Student Insurance Information		0.0%
6	Carrier refuses to disclose information		0.0%
7	Auditor was unable to complete the waiver audit (other than network status)		0.0%
8	Policy is not Active	2	6.7%
9	Plan does not provide insured Prescription Drug coverage	1	3.3%
10	No coverage for inpatient and/or outpatient mental health services with no limit		0.0%
11	Plan does not have maternity coverage with no dollar limit		0.0%
12	Plan does not have preventive routine care with no limit		0.0%
13	Plan does not provide coverage for pre-existing conditions		0.0%
14	Plan does not provide Unlimited benefits with no per-service, per-diagnosis, or per-accident limitations		0.0%
15	The Individual Annual Deductible is over \$500		0.0%
16	Plan does not have out-of-pocket maximum of \$8,200 per member or \$16,400 per family (Including deductible and all co-pay amounts)		0.0%
17	Patient co-insurance is more than 25%		0.0%
18	Insurer does not have a base of operations in the U.S. or have a U.S. based claims payer		0.0%
19	Plan does not provide a combined maximum of \$100,000 for Medical Evacuation and Repatriation	1	3.3%
20	The insurance company is not authorized to do business in the state by the Kansas Department of Insurance		0.0%
21	This plan does not provide coverage for all required service types such as pediatric dental and vision for covered dependents		0.0%
22	The following health plan types will not be accepted: Limited, Travel, Short Term Limited Duration, Disability, Hospital Indemnity, Accident Only, or Emergency/Urgent Care Only		0.0%
23	Plan documents reviewed are not in English and converted to U.S. dollars or the insurance company contact telephone number is outside of the U.S.		0.0%
99	Void		0.0%
<b>Grand Total</b>		<b>30</b>	<b>100%</b>

Audits Adjusted	Total
Additional Documentation	0
Audit Adjustment	3
Client Request	0
Student Provided MER	1
Student Resubmitted Waiver	1
Student Updated Insurance	0
<b>Grand Total</b>	<b>5</b>

<b>% Adjusted of Total Audits Completed</b>	<b>16.7%</b>
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Total Billable	Billable Count
Final, Completed Audit Results	30
Audits Adjusted	5
<b>Total Billable</b>	<b>35</b>

# Kansas State University

## Waiver Audit Summary Report

Plan Year 2025-26

Spring 2026 (Ongoing)

Approval/ Disapproval Code	Approval/ Disapproval Description	Number of Audits	% of Audits
1	Approved	1	50.00%
2	Unknown		0.00%
4	Invalid Student Insurance Information		0.00%
6	Carrier refuses to disclose information		0.00%
7	Auditor was unable to complete the waiver audit (other than network status)		0.00%
8	Policy is not Active		0.00%
9	Plan does not provide insured Prescription Drug coverage		0.00%
10	No coverage for inpatient and/or outpatient mental health services with no limit		0.00%
11	Plan does not have maternity coverage with no dollar limit		0.00%
12	Plan does not have preventive routine care with no limit		0.00%
13	Plan does not provide coverage for pre-existing conditions		0.00%
14	Plan does not provide Unlimited benefits with no per-service, per-diagnosis, or per-accident limitations		0.00%
15	The Individual Annual Deductible is over \$500		0.00%
16	Plan does not have out-of-pocket maximum of \$8,200 per member or \$16,400 per family (Including deductible and all co-pay amounts)		0.00%
17	Patient co-insurance is more than 25%		0.00%
18	Insurer does not have a base of operations in the U.S. or have a U.S. based claims payer		0.00%
19	Plan does not provide a combined maximum of \$100,000 for Medical Evacuation and Repatriation	1	50.00%
20	The insurance company is not authorized to do business in the state by the Kansas Department of Insurance		0.00%
21	This plan does not provide coverage for all required service types such as pediatric dental and vision for covered dependents		0.00%
22	The following health plan types will not be accepted: Limited, Travel, Short Term Limited Duration, Disability, Hospital Indemnity, Accident Only, or Emergency/Urgent Care Only		0.00%
23	Plan documents reviewed are not in English and converted to U.S. dollars or the insurance company contact telephone number is outside of the U.S.		0.00%
99	Void		0.00%
<b>Grand Total</b>		<b>2</b>	<b>100%</b>

Audits Adjusted	Total
Additional Documentation	0
Audit Adjustment	0
Client Request	0
Student Provided MER	0
Student Resubmitted Waiver	0
Student Updated Insurance	0
<b>Grand Total</b>	<b>0</b>

<b>% Adjusted of Total Audits Completed</b>	<b>0.0%</b>
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Total Billable	Billable Count
Final, Completed Audit Results	2
Audits Adjusted	0
<b>Total Billable</b>	<b>2</b>

# Emporia State University

## Waiver Audit Summary Report

Plan Year 2025-26

Spring 2026 (Ongoing)

Approval/ Disapproval Code	Approval/ Disapproval Description	Number of Audits	% of Audits
1	Approved	2	66.7%
2	Unknown		0.0%
4	Invalid Student Insurance Information		0.0%
6	Carrier refuses to disclose information		0.0%
7	Auditor was unable to complete the waiver audit (other than network status)		0.0%
8	Policy is not Active		0.0%
9	Plan does not provide insured Prescription Drug coverage	1	33.3%
10	No coverage for inpatient and/or outpatient mental health services with no limit		0.0%
11	Plan does not have maternity coverage with no dollar limit		0.0%
12	Plan does not have preventive routine care with no limit		0.0%
13	Plan does not provide coverage for pre-existing conditions		0.0%
14	Plan does not provide Unlimited benefits with no per-service, per-diagnosis, or per-accident limitations		0.0%
15	The Individual Annual Deductible is over \$500		0.0%
16	Plan does not have out-of-pocket maximum of \$8,200 per member or \$16,400 per family (Including deductible and all co-pay amounts)		0.0%
17	Patient co-insurance is more than 25%		0.0%
18	Insurer does not have a base of operations in the U.S. or have a U.S. based claims payer		0.0%
19	Plan does not provide a combined maximum of \$100,000 for Medical Evacuation and Repatriation		0.0%
20	The insurance company is not authorized to do business in the state by the Kansas Department of Insurance		0.0%
21	This plan does not provide coverage for all required service types such as pediatric dental and vision for covered dependents		0.0%
22	The following health plan types will not be accepted: Limited, Travel, Short Term Limited Duration, Disability, Hospital Indemnity, Accident Only, or Emergency/Urgent Care Only		0.0%
23	Plan documents reviewed are not in English and converted to U.S. dollars or the insurance company contact telephone number is outside of the U.S.		0.0%
99	Void		0.0%
Grand Total		3	100%

Audits Adjusted	Total
Additional Documentation	0
Audit Adjustment	1
Client Request	0
Student Provided MER	0
Student Resubmitted Waiver	0
Student Updated Insurance	0
Grand Total	1

% Adjusted of Total Audits Completed	33.3%
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Total Billable	Billable Count
Final, Completed Audit Results	3
Audits Adjusted	1
Total Billable	4

**Pittsburg State University**

**Waiver Audit Summary Report**

Plan Year 2025-26

Spring 2026 (Ongoing)

Approval/ Disapproval Code	Approval/ Disapproval Description	Number of Audits	% of Audits
1	Approved		0.0%
2	Unknown		0.0%
4	Invalid Student Insurance Information		0.0%
6	Carrier refuses to disclose information		0.0%
7	Auditor was unable to complete the waiver audit (other than network status)		0.0%
8	Policy is not Active		0.0%
9	Plan does not provide insured Prescription Drug coverage		0.0%
10	No coverage for inpatient and/or outpatient mental health services with no limit		0.0%
11	Plan does not have maternity coverage with no dollar limit		0.0%
12	Plan does not have preventive routine care with no limit		0.0%
13	Plan does not provide coverage for pre-existing conditions		0.0%
14	Plan does not provide Unlimited benefits with no per-service, per-diagnosis, or per-accident limitations		0.0%
15	The Individual Annual Deductible is over \$500		0.0%
16	Plan does not have out-of-pocket maximum of \$8,200 per member or \$16,400 per family (including deductible and all co-pay amounts)		0.0%
17	Patient co-insurance is more than 25%		0.0%
18	Insurer does not have a base of operations in the U.S. or have a U.S. based claims payer		0.0%
19	Plan does not provide a combined maximum of \$100,000 for Medical Evacuation and Repatriation		0.0%
20	The insurance company is not authorized to do business in the state by the Kansas Department of Insurance		0.0%
21	This plan does not provide coverage for all required service types such as pediatric dental and vision for covered dependents		0.0%
22	The following health plan types will not be accepted: Limited, Travel, Short Term Limited Duration, Disability, Hospital Indemnity, Accident Only, or Emergency/Urgent Care Only		0.0%
23	Plan documents reviewed are not in English and converted to U.S. dollars or the insurance company contact telephone number is outside of the U.S.		0.0%
99	Void		0.0%
<b>Grand Total</b>		<b>0</b>	<b>0%</b>

Audits Adjusted	Total
Additional Documentation	0
Audit Adjustment	0
Client Request	0
Student Provided MER	0
Student Resubmitted Waiver	0
Student Updated Insurance	0
<b>Grand Total</b>	<b>0</b>

<b>% Adjusted of Total Audits Completed</b>	<b>#DIV/0!</b>
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Total Billable	Billable Count
Final, Completed Audit Results	0
Audits Adjusted	0
<b>Total Billable</b>	<b>0</b>

Kansas Board of Regents (KBOR)  
Customer Service Toll-Free Calls

Spring 2026

October 1, 2025 through December 31, 2025

Count	Time	Queue Name	Media Type
1	10/22/2025 11:07:44	-	Phone
2	10/22/2025 11:21:00	-	Phone
3	10/30/2025 06:09:15	Waiver	Phone
4	11/12/2025 11:45:57	Waiver	Phone
5	12/10/2025 02:58:48	Waiver	Phone
6	12/18/2025 12:45:32	-	Phone
	Total Calls	6	

Notes:

\* If the "Queue Name" is blank this means the caller experienced no wait time for Customer Service

## Kansas Board of Regents

### Waiver Processing Time Report

#### Spring 2026 (Ongoing)

January 8, 2026

#### University of Kansas

Spring 2026 Audits	Total Audits Average Processing Time (days)	Total Average QA Time (days)
27	0.26	0.02

#### Wichita State University

Spring 2026 Audits	Total Audits Average Processing Time (days)	Total Average QA Time (days)
30	0.45	0.03

#### Kansas State University

Spring 2026 Audits	Total Audits Average Processing Time (days)	Total Average QA Time (days)
2	0.19	0.05

#### Emporia State University

Spring 2026 Audits	Total Audits Average Processing Time (days)	Total Average QA Time (days)
3	0.18	0.05

#### Pittsburg State University

Spring 2026 Audits	Total Audits Average Processing Time (days)	Total Average QA Time (days)
0	0	0

#### University of Kansas Medical Center

Spring 2026 Audits	Total Audits Average Processing Time (days)	Total Average QA Time (days)
2	0.01	0.14

# University of Kansas

## Statistics Report

Spring 2026 (Ongoing)

Thursday, January 8, 2026

STUDENT ENROLLMENT	NUMBER OF STUDENTS
STUDENTS WHO POSITIVELY ENROLLED (OPT IN)	34
<b>DEFAULT ENROLLMENTS</b>	
DENIED WAIVERS - PENDING ENROLLMENT	3
STUDENTS WHO DID NOTHING	1637
DEFAULT ENROLLED PAID (ACTIVE)	0
<b>TOTAL ENROLLMENTS</b>	<b>1674</b>

STUDENT WAIVERS	NUMBER OF STUDENTS
APPROVED WAIVERS	17
DENIED WAIVERS	4
PENDING WAIVERS	7
VOIDED WAIVERS	0
<b>NUMBER OF SUBMITTED WAIVERS</b>	<b>28</b>

STUDENTS WITHDRAWN, DISAPPROVED or DROPPED	NUMBER OF STUDENTS
STUDENTS WITHDRAWN FROM PROCESS	2
STUDENTS DROPPED FROM SHIP	0
STUDENTS WHO ARE DISAPPROVED FROM SHIP	0
<b>NUMBER OF WITHDRAWN, DISAPPROVED or DROPPED STUDENTS</b>	<b>2</b>

STUDENTS WITH MULTIPLE RESULTS	NUMBER OF STUDENTS
STUDENTS WITH PENDING, APPROVED OR VOIDED WAIVER & ACTIVE, DROPPED, APPROVED or DISAPPROVED ENROLLMENT	0
STUDENTS WITHDRAWN WITH APPROVED/DENIED/VOID WAIVER	0
STUDENTS WITH DENIED WAIVERS and ACTIVE/DROPPED/DENIED WAIVERS - PENDING ENROLLMENT	-3
<b>NUMBER OF STUDENTS WITH MULTIPLE RESULTS</b>	<b>-3</b>

STUDENT RECORDS PROCESSED	NUMBER OF STUDENTS
ACTIVE ENROLLMENT	1674
WAIVERS PROCESSED	28
STUDENTS WITHDRAWN, DISAPPROVED or DROPPED	2
STUDENTS WITH MULTIPLE RESULTS	-3
<b>TOTAL NUMBER STUDENTS RECEIVED</b>	<b>1701</b>

# Wichita State University

## Statistics Report

Spring 2026 (Ongoing)

Thursday, January 8, 2026

STUDENT ENROLLMENT	NUMBER OF STUDENTS
STUDENTS WHO POSITIVELY ENROLLED (OPT IN)	118
<b>DEFAULT ENROLLMENTS</b>	
DENIED WAIVERS - PENDING ENROLLMENT	2
STUDENTS WHO DID NOTHING	844
DEFAULT ENROLLED PAID (ACTIVE)	0
<b>TOTAL ENROLLMENTS</b>	<b>964</b>

STUDENT WAIVERS	NUMBER OF STUDENTS
APPROVED WAIVERS	23
DENIED WAIVERS	3
PENDING WAIVERS	6
VOIDED WAIVERS	0
<b>NUMBER OF SUBMITTED WAIVERS</b>	<b>32</b>

STUDENTS WITHDRAWN, DISAPPROVED or DROPPED	NUMBER OF STUDENTS
STUDENTS WITHDRAWN FROM PROCESS	18
STUDENTS DROPPED FROM SHIP	0
STUDENTS WHO ARE DISAPPROVED FROM SHIP	0
<b>NUMBER OF WITHDRAWN, DISAPPROVED or DROPPED STUDENTS</b>	<b>18</b>

STUDENTS WITH MULTIPLE RESULTS	NUMBER OF STUDENTS
STUDENTS WITH PENDING, APPROVED OR VOIDED WAIVER & ACTIVE, DROPPED, APPROVED or DISAPPROVED ENROLLMENT	0
STUDENTS WITHDRAWN WITH APPROVED/DENIED/VOID WAIVER	0
STUDENTS WITH DENIED WAIVERS and ACTIVE/DROPPED/DENIED WAIVERS - PENDING ENROLLMENT	-3
<b>NUMBER OF STUDENTS WITH MULTIPLE RESULTS</b>	<b>-3</b>

STUDENT RECORDS PROCESSED	NUMBER OF STUDENTS
ACTIVE ENROLLMENT	964
WAIVERS PROCESSED	32
STUDENTS WITHDRAWN, DISAPPROVED or DROPPED	18
STUDENTS WITH MULTIPLE RESULTS	-3
<b>TOTAL NUMBER STUDENTS RECEIVED</b>	<b>1011</b>

# Kansas State University

## Statistics Report

Spring 2026 (Ongoing)

Thursday, January 8, 2026

STUDENT ENROLLMENT	NUMBER OF STUDENTS
STUDENTS WHO POSITIVELY ENROLLED (OPT IN)	2
<b>DEFAULT ENROLLMENTS</b>	
DENIED WAIVERS - PENDING ENROLLMENT	1
STUDENTS WHO DID NOTHING	602
DEFAULT ENROLLED PAID (ACTIVE)	0
<b>TOTAL ENROLLMENTS</b>	<b>605</b>

STUDENT WAIVERS	NUMBER OF STUDENTS
APPROVED WAIVERS	1
DENIED WAIVERS	1
PENDING WAIVERS	0
VOIDED WAIVERS	0
<b>NUMBER OF SUBMITTED WAIVERS</b>	<b>2</b>

STUDENTS WITHDRAWN, DISAPPROVED or DROPPED	NUMBER OF STUDENTS
STUDENTS WITHDRAWN FROM PROCESS	0
STUDENTS DROPPED FROM SHIP	0
STUDENTS WHO ARE DISAPPROVED FROM SHIP	0
<b>NUMBER OF WITHDRAWN, DISAPPROVED or DROPPED STUDENTS</b>	<b>0</b>

STUDENTS WITH MULTIPLE RESULTS	NUMBER OF STUDENTS
STUDENTS WITH PENDING, APPROVED OR VOIDED WAIVER & ACTIVE, DROPPED, APPROVED or DISAPPROVED ENROLLMENT	0
STUDENTS WITHDRAWN WITH APPROVED/DENIED/VOID WAIVER	0
STUDENTS WITH DENIED WAIVERS and ACTIVE/DROPPED/DENIED WAIVERS - PENDING ENROLLMENT	-1
<b>NUMBER OF STUDENTS WITH MULTIPLE RESULTS</b>	<b>-1</b>

STUDENT RECORDS PROCESSED	NUMBER OF STUDENTS
ACTIVE ENROLLMENT	605
WAIVERS PROCESSED	2
STUDENTS WITHDRAWN, DISAPPROVED or DROPPED	0
STUDENTS WITH MULTIPLE RESULTS	-1
<b>TOTAL NUMBER STUDENTS RECEIVED</b>	<b>606</b>

# Emporia State University

## Statistics Report

Spring 2026 (Ongoing)

Thursday, January 8, 2026

STUDENT ENROLLMENT	NUMBER OF STUDENTS
STUDENTS WHO POSITIVELY ENROLLED (OPT IN)	2
<b>DEFAULT ENROLLMENTS</b>	
DENIED WAIVERS - PENDING ENROLLMENT	0
STUDENTS WHO DID NOTHING	2
DEFAULT ENROLLED PAID (ACTIVE)	74
<b>TOTAL ENROLLMENTS</b>	<b>78</b>

STUDENT WAIVERS	NUMBER OF STUDENTS
APPROVED WAIVERS	2
DENIED WAIVERS	1
PENDING WAIVERS	0
VOIDED WAIVERS	0
<b>NUMBER OF SUBMITTED WAIVERS</b>	<b>3</b>

STUDENTS WITHDRAWN, DISAPPROVED or DROPPED	NUMBER OF STUDENTS
STUDENTS WITHDRAWN FROM PROCESS	8
STUDENTS DROPPED FROM SHIP	0
STUDENTS WHO ARE DISAPPROVED FROM SHIP	0
<b>NUMBER OF WITHDRAWN, DISAPPROVED or DROPPED STUDENTS</b>	<b>8</b>

STUDENTS WITH MULTIPLE RESULTS	NUMBER OF STUDENTS
STUDENTS WITH PENDING, APPROVED OR VOIDED WAIVER & ACTIVE, DROPPED, APPROVED or DISAPPROVED ENROLLMENT	0
STUDENTS WITHDRAWN WITH APPROVED/DENIED/VOID WAIVER	-1
STUDENTS WITH DENIED WAIVERS and ACTIVE/DROPPED/DENIED WAIVERS - PENDING ENROLLMENT	0
<b>NUMBER OF STUDENTS WITH MULTIPLE RESULTS</b>	<b>-1</b>

STUDENT RECORDS PROCESSED	NUMBER OF STUDENTS
ACTIVE ENROLLMENT	78
WAIVERS PROCESSED	3
STUDENTS WITHDRAWN, DISAPPROVED or DROPPED	8
STUDENTS WITH MULTIPLE RESULTS	-1
<b>TOTAL NUMBER STUDENTS RECEIVED</b>	<b>88</b>

# Pittsburg State University

## Statistics Report

Spring 2026 (Ongoing)

Thursday, January 8, 2026

STUDENT ENROLLMENT	NUMBER OF STUDENTS
STUDENTS WHO POSITIVELY ENROLLED (OPT IN)	0
<b>DEFAULT ENROLLMENTS</b>	
DENIED WAIVERS - PENDING ENROLLMENT	0
STUDENTS WHO DID NOTHING	0
DEFAULT ENROLLED PAID (ACTIVE)	0
<b>TOTAL ENROLLMENTS</b>	<b>0</b>

STUDENT WAIVERS	NUMBER OF STUDENTS
APPROVED WAIVERS	0
DENIED WAIVERS	0
PENDING WAIVERS	0
VOIDED WAIVERS	0
<b>NUMBER OF SUBMITTED WAIVERS</b>	<b>0</b>

STUDENTS WITHDRAWN, DISAPPROVED or DROPPED	NUMBER OF STUDENTS
STUDENTS WITHDRAWN FROM PROCESS	0
STUDENTS DROPPED FROM SHIP	0
STUDENTS WHO ARE DISAPPROVED FROM SHIP	0
<b>NUMBER OF WITHDRAWN, DISAPPROVED or DROPPED STUDENTS</b>	<b>0</b>

STUDENTS WITH MULTIPLE RESULTS	NUMBER OF STUDENTS
STUDENTS WITH PENDING, APPROVED OR VOIDED WAIVER & ACTIVE, DROPPED, APPROVED or DISAPPROVED ENROLLMENT	0
STUDENTS WITHDRAWN WITH APPROVED/DENIED/VOID WAIVER	0
STUDENTS WITH DENIED WAIVERS and ACTIVE/DROPPED/DENIED WAIVERS - PENDING ENROLLMENT	0
<b>NUMBER OF STUDENTS WITH MULTIPLE RESULTS</b>	<b>0</b>

STUDENT RECORDS PROCESSED	NUMBER OF STUDENTS
ACTIVE ENROLLMENT	0
WAIVERS PROCESSED	0
STUDENTS WITHDRAWN, DISAPPROVED or DROPPED	0
STUDENTS WITH MULTIPLE RESULTS	0
<b>TOTAL NUMBER STUDENTS RECEIVED</b>	<b>0</b>

# University of Kansas Medical Center

## Statistics Report

Spring 2026 (Ongoing)

Thursday, January 8, 2026

STUDENT ENROLLMENT	NUMBER OF STUDENTS
STUDENTS WHO POSITIVELY ENROLLED (OPT IN)	0
<b>DEFAULT ENROLLMENTS</b>	
DENIED WAIVERS - PENDING ENROLLMENT	0
STUDENTS WHO DID NOTHING	110
DEFAULT ENROLLED PAID (ACTIVE)	0
<b>TOTAL ENROLLMENTS</b>	<b>110</b>

STUDENT WAIVERS	NUMBER OF STUDENTS
APPROVED WAIVERS	2
DENIED WAIVERS	0
PENDING WAIVERS	0
VOIDED WAIVERS	0
<b>NUMBER OF SUBMITTED WAIVERS</b>	<b>2</b>

STUDENTS WITHDRAWN, DISAPPROVED or DROPPED	NUMBER OF STUDENTS
STUDENTS WITHDRAWN FROM PROCESS	1
STUDENTS DROPPED FROM SHIP	0
STUDENTS WHO ARE DISAPPROVED FROM SHIP	0
<b>NUMBER OF WITHDRAWN, DISAPPROVED or DROPPED STUDENTS</b>	<b>1</b>

STUDENTS WITH MULTIPLE RESULTS	NUMBER OF STUDENTS
STUDENTS WITH PENDING, APPROVED OR VOIDED WAIVER & ACTIVE, DROPPED, APPROVED or DISAPPROVED ENROLLMENT	0
STUDENTS WITHDRAWN WITH APPROVED/DENIED/VOID WAIVER	0
STUDENTS WITH DENIED WAIVERS and ACTIVE/DROPPED/DENIED WAIVERS - PENDING ENROLLMENT	0
<b>NUMBER OF STUDENTS WITH MULTIPLE RESULTS</b>	<b>0</b>

STUDENT RECORDS PROCESSED	NUMBER OF STUDENTS
ACTIVE ENROLLMENT	110
WAIVERS PROCESSED	2
STUDENTS WITHDRAWN, DISAPPROVED or DROPPED	1
STUDENTS WITH MULTIPLE RESULTS	0
<b>TOTAL NUMBER STUDENTS RECEIVED</b>	<b>113</b>

# Kansas Board of Regents (KBOR)

## Customer Service Ticket Requests

Spring 2026

October 1, 2025 through December 31, 2025

Ticket	Start Date	Close Date	Response time	Duration Time	Category	School
1	10/1/2025 9:13	10/1/2025 10:39	0:05:12	1:31:14	Insurance Enrollment / Enrollment Questions	University of Kansas
2	10/1/2025 10:45	10/1/2025 11:22	1:28:34	2:05:30	Waiver / Waiver Audit Questions	University of Kansas
3	10/1/2025 15:40	10/6/2025 10:50	0:12:19	28:22:49	Insurance Enrollment / Drop Enrollment Request	Kansas State University
4	10/1/2025 15:40	10/6/2025 10:51	0:05:39	28:16:56	Insurance Enrollment / Drop Enrollment Request	Kansas State University
5	10/1/2025 16:39	10/13/2025 12:16	0:16:50	83:53:41	Insurance Enrollment / Drop Enrollment Request	Kansas State University
6	10/3/2025 14:34	10/3/2025 15:48	0:17:10	1:31:00	Insurance Enrollment / Drop Enrollment Request	University of Kansas
7	10/17/2025 16:47	10/21/2025 10:03	1:14:48	16:30:47	Insurance Enrollment / Drop Enrollment Request	University of Kansas
8	10/20/2025 11:27	10/20/2025 14:05	0:13:56	2:52:25	Insurance Enrollment / Enrollment Questions	Wichita State University
9	10/20/2025 14:04	10/23/2025 12:04	1:20:23	32:20:29	Insurance Enrollment / Drop Enrollment Request	University of Kansas
10	10/21/2025 13:09	10/23/2025 13:00	1:53:11	23:44:20	Insurance Enrollment / Drop Enrollment Request	Kansas State University
11	10/21/2025 16:13	10/23/2025 13:02	0:25:11	19:14:04	Insurance Enrollment / Drop Enrollment Request	Kansas State University
12	10/22/2025 13:26	10/22/2025 13:43	0:00:05	0:17:16	Waiver / Waiver Audit Questions	University of Kansas
13	10/23/2025 12:07	10/27/2025 18:01	0:12:55	28:06:55	Insurance Enrollment / Drop Enrollment Request	University of Kansas
14	10/23/2025 14:40	10/27/2025 18:15	0:06:22	25:42:17	Insurance Enrollment / SHIP Enrollment Request	University of Kansas
15	10/27/2025 14:04	10/27/2025 16:31	0:20:43	2:48:12	Waiver / Waiver Audit Questions	University of Kansas
16	10/28/2025 14:30	10/29/2025 8:44	0:25:09	5:39:32	Waiver / Waiver Audit Questions	University of Kansas
17	11/3/2025 14:22	11/11/2025 13:38	5:34:37	65:12:14	Insurance Enrollment / Drop Enrollment Request	University of Kansas
18	11/5/2025 12:06	11/11/2025 13:39	2:15:50	42:09:49	Insurance Enrollment / Drop Enrollment Request	University of Kansas
19	11/7/2025 18:34	11/11/2025 13:40	3:03:29	14:28:36	Insurance Enrollment / SHIP Enrollment Request	University of Kansas
20	11/7/2025 19:05	11/11/2025 13:40	3:28:02	14:28:02	Insurance Enrollment / SHIP Enrollment Request	University of Kansas
21	11/7/2025 19:03	11/11/2025 13:41	3:27:06	14:27:06	Insurance Enrollment / SHIP Enrollment Request	University of Kansas
22	11/7/2025 19:02	11/11/2025 13:41	3:25:55	14:25:55	Insurance Enrollment / SHIP Enrollment Request	University of Kansas
23	11/7/2025 19:01	11/11/2025 13:43	3:20:38	14:20:38	Insurance Enrollment / Drop Enrollment Request	University of Kansas
24	11/7/2025 19:00	11/11/2025 13:44	3:16:57	14:16:57	Insurance Enrollment / Drop Enrollment Request	University of Kansas
25	11/7/2025 18:59	11/11/2025 13:44	3:16:08	14:16:11	Insurance Enrollment / Drop Enrollment Request	University of Kansas
26	11/7/2025 18:59	11/11/2025 13:45	3:12:16	14:12:58	Insurance Enrollment / Drop Enrollment Request	University of Kansas
27	11/7/2025 18:58	11/11/2025 13:46	3:05:27	14:06:54	Insurance Enrollment / Drop Enrollment Request	University of Kansas
28	11/7/2025 18:54	11/11/2025 13:46	3:01:02	14:06:04	Insurance Enrollment / Drop Enrollment Request	University of Kansas
29	11/7/2025 18:43	11/11/2025 13:47	2:46:55	14:03:55	Insurance Enrollment / Drop Enrollment Request	University of Kansas
30	11/7/2025 18:41	11/11/2025 13:48	2:45:04	14:03:10	Insurance Enrollment / Drop Enrollment Request	University of Kansas
31	11/7/2025 18:41	11/11/2025 13:49	2:43:21	14:02:19	Insurance Enrollment / Drop Enrollment Request	University of Kansas
32	11/7/2025 18:39	11/11/2025 13:50	2:39:58	14:00:29	Insurance Enrollment / Drop Enrollment Request	University of Kansas
33	11/7/2025 18:39	11/11/2025 13:51	2:35:45	13:56:33	Insurance Enrollment / Drop Enrollment Request	University of Kansas
34	11/7/2025 18:38	11/11/2025 13:52	2:34:08	13:55:52	Insurance Enrollment / Drop Enrollment Request	University of Kansas
35	11/7/2025 18:37	11/11/2025 13:52	2:32:38	13:55:13	Insurance Enrollment / Drop Enrollment Request	University of Kansas
36	11/7/2025 18:36	11/11/2025 13:53	2:30:37	13:54:12	Insurance Enrollment / Drop Enrollment Request	University of Kansas
37	11/11/2025 15:29	11/17/2025 10:29	0:00:00	35:29:42	Insurance Enrollment / Enrollment Questions	University of Kansas
38	11/14/2025 15:09	11/17/2025 8:16	0:47:04	4:54:24	Waiver / Waiver Audit Questions	University of Kansas
39	11/15/2025 11:48	11/26/2025 12:57	3:31:01	85:28:57	Insurance Enrollment / Drop Enrollment Request	Kansas State University
40	11/20/2025 8:05	11/20/2025 11:30	0:05:42	3:30:36	Waiver / Waiver Audit Questions	Kansas State University
41	11/26/2025 8:44	11/26/2025 13:07	7:30:26	11:53:56	Insurance Enrollment / SHIP Enrollment Request	University of Kansas
42	12/5/2025 11:22	12/5/2025 11:22	0:23:00	0:23:00	Insurance Enrollment / Enrollment Questions	Emporia State University
43	12/9/2025 10:35	12/9/2025 10:51	0:08:26	0:24:59	Waiver / Waiver Audit Questions	University of Kansas
44	12/9/2025 14:40	12/9/2025 14:40	0:37:07	0:37:07	Insurance Enrollment / Drop Enrollment Request	Emporia State University
45	12/17/2025 15:42	12/17/2025 16:09	0:16:42	0:43:32	Waiver / Waiver Audit Questions	Emporia State University
46	12/18/2025 13:00	12/18/2025 14:25	0:15:23	1:40:18	Waiver / Waiver Audit Questions	University of Kansas
47	12/18/2025 13:03	12/18/2025 14:27	0:11:11	1:35:17	Waiver / Waiver Audit Questions	University of Kansas
48	12/19/2025 7:58	12/19/2025 8:42	0:00:00	0:42:51	Waiver / Waiver Audit Questions	University of Kansas
49	12/22/2025 9:38	12/22/2025 9:38	1:38:38	1:38:38	Insurance Enrollment / Enrollment Questions	University of Kansas
50	12/24/2025 8:03	12/28/2025 17:29	0:11:21	22:07:45	Waiver / Waiver Audit Questions	University of Kansas
51	12/26/2025 9:29	12/26/2025 9:29	1:29:17	1:29:17	Insurance Enrollment / Enrollment Questions	Wichita State University
52	12/29/2025 10:27	1/5/2026 7:31	2:27:55	44:00:00	Waiver / Waiver Audit Questions	Kansas State University