



Unified Government of Wyandotte County

Delta Dental of Kansas

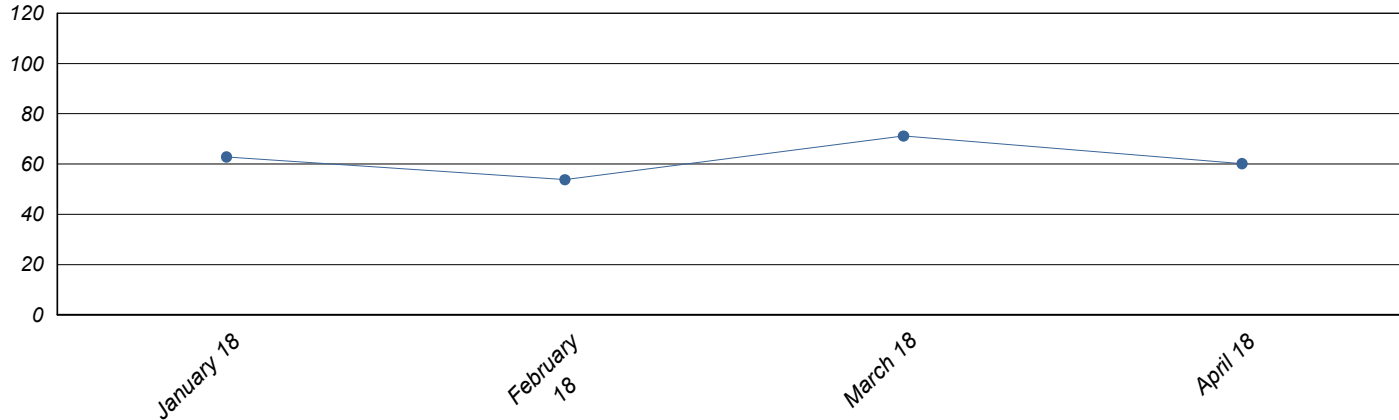
January 2018 Through April 2018

Monthly Claims Cost

January 2018 to April 2018

Month	Total Benefit Paid	Employees	Dependents	PEPM Claim Paid	PMPM Claim Paid	Number of Claims	Average Cost per Claim
January 18	\$156,201.38	2,486	3,371	\$62.83	\$26.67	874	\$178.72
February 18	\$133,233.06	2,479	3,340	\$53.74	\$22.90	843	\$158.05
March 18	\$175,978.21	2,474	3,344	\$71.13	\$30.25	1,079	\$163.09
April 18	\$148,911.94	2,475	3,341	\$60.17	\$25.60	909	\$163.82
Totals:	\$614,324.59	9,914	13,396	\$247.87	\$105.42	3,705	\$663.68
Averages:	\$153,581.15	2,479	3,349	\$61.97	\$26.35	926	\$165.92

Per Employee Per Month Claims Paid



PEPM - Per Employee Per Month

PMPM - Per Member Per Month (Includes Employees, Spouses, and Dependent Children)



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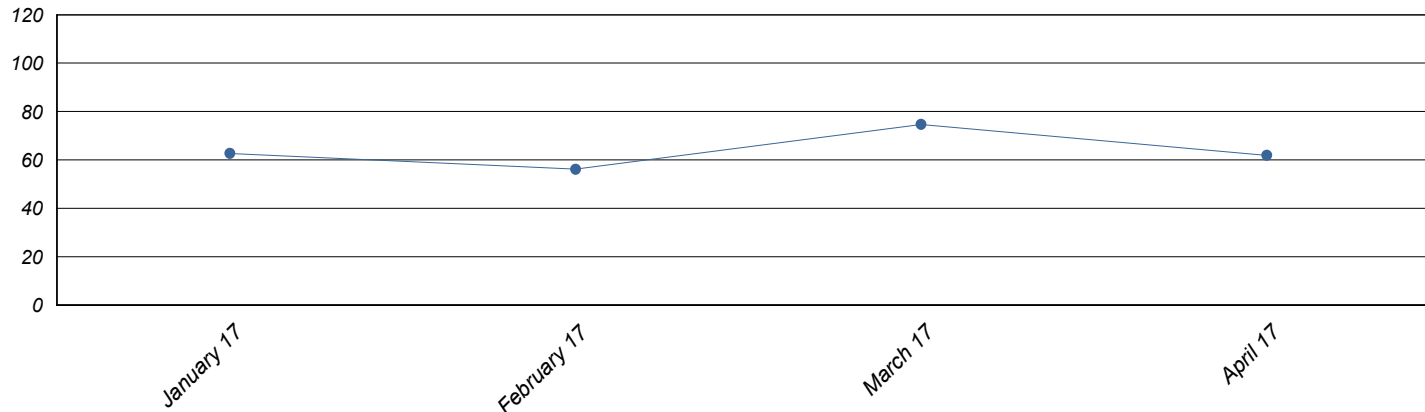
January 2017 Through April 2017

Monthly Claims Cost

January 2017 to April 2017

Month	Total Benefit Paid	Employees	Dependents	PEPM Claim Paid	PMPM Claim Paid	Number of Claims	Average Cost per Claim
January 17	\$156,221.71	2,491	3,409	\$62.71	\$26.48	906	\$172.43
February 17	\$140,033.27	2,494	3,409	\$56.15	\$23.72	827	\$169.33
March 17	\$186,287.04	2,494	3,411	\$74.69	\$31.55	1,097	\$169.81
April 17	\$154,413.07	2,494	3,399	\$61.91	\$26.20	846	\$182.52
Totals:	\$636,955.09	9,973	13,628	\$255.47	\$107.95	3,676	\$694.09
Averages:	\$159,238.77	2,493	3,407	\$63.87	\$26.99	919	\$173.52

Per Employee Per Month Claims Paid



PEPM - Per Employee Per Month

PMPM - Per Member Per Month (Includes Employees, Spouses, and Dependent Children)



Unified Government of Wyandotte County

Delta Dental of Kansas

January
2018

Through

April
2018

Cost Management

Summary	Description	January 2018 to April 2018			January 2017 to April 2017		
		Dollars	Savings	% of Eligible	Dollars	Savings	% of Eligible
	Submitted Charges	\$1,433,685.32			\$1,392,325.59		
	<i>In-Network Charges</i>	<i>\$1,419,871.32</i>			<i>\$1,367,824.99</i>		
	Duplicate Charges	\$47,403.50	3.31%		\$30,656.81	2.20%	
	Pending Ortho Charges	\$119,801.00	8.36%		\$74,055.25	5.32%	
	Delta Dental Difference ®	\$336,715.26	23.69%		\$328,657.49	23.97%	
	Eligible Claims	\$929,765.56			\$958,956.04		
Delta Dental Difference ®	Network Savings	\$299,405.92	21.09%		\$281,429.78	20.57%	
	Consultant Review	\$2,131.95	0.15%		\$3,011.00	0.22%	
	Non-Billable Services	\$16,416.12	1.15%		\$19,299.19	1.39%	
	Coordination of Benefits	\$18,761.27	1.31%		\$24,917.52	1.79%	
	Subtotal	\$336,715.26	23.69%		\$328,657.49	23.97%	
Patient Pay	Not Covered	\$122,192.55		13.14%	\$118,092.20		12.31%
	Optional Services	\$329.75		0.04%	\$1,397.75		0.15%
	Eligibility Verification	\$1,809.00		0.19%	\$6,727.90		0.70%
	Coinsurance	\$173,543.33		18.67%	\$170,767.80		17.81%
	Over Maximum	\$16,129.29		1.73%	\$22,693.30		2.37%
	Deductible	\$0.00		0.00%	\$0.00		0.00%
	Insufficient Information	\$1,437.05		0.15%	\$2,322.00		0.24%
	Subtotal	\$315,440.97		33.93%	\$322,000.95		33.58%
Delta Dental Pay	Coinsurance	\$611,569.48		65.78%	\$635,620.92		66.28%
	Adjustments	\$2,755.11		0.30%	\$1,334.17		0.14%
	Subtotal	\$614,324.59		66.07%	\$636,955.09		66.42%
Submitted Charges	Grand Total	\$1,433,685.32		100.00%	\$1,392,325.59		100.00%

Patient Pay Subtotal and Delta Dental Pay Subtotal equals Eligible Claims.

Pending Ortho Charges, Delta Dental Difference ®, Patient Pay Subtotal and Delta Dental Pay subtotal equals the Grand Total.

Benefit Comparison

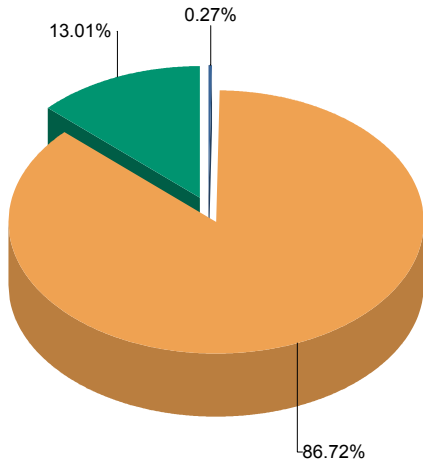
January 2018 to April 2018

Network Type	Amount Paid	Percentage of Amount
PPO:	\$532,753.35	86.72%
Premier:	\$79,925.24	13.01%
Out of Network:	\$1,646.00	0.27%
Total		100.00%
		\$614,324.59

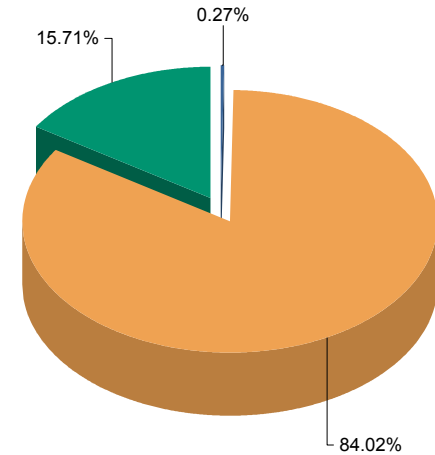
January 2017 to April 2017

Network Type	Amount Paid	Percentage of Amount
PPO:	\$535,164.06	84.02%
Premier:	\$100,076.68	15.71%
Out of Network:	\$1,714.35	0.27%
Total		100.00%
		\$636,955.09

Benefit Comparison by Network Utilization



Benefit Comparison by Network Utilization



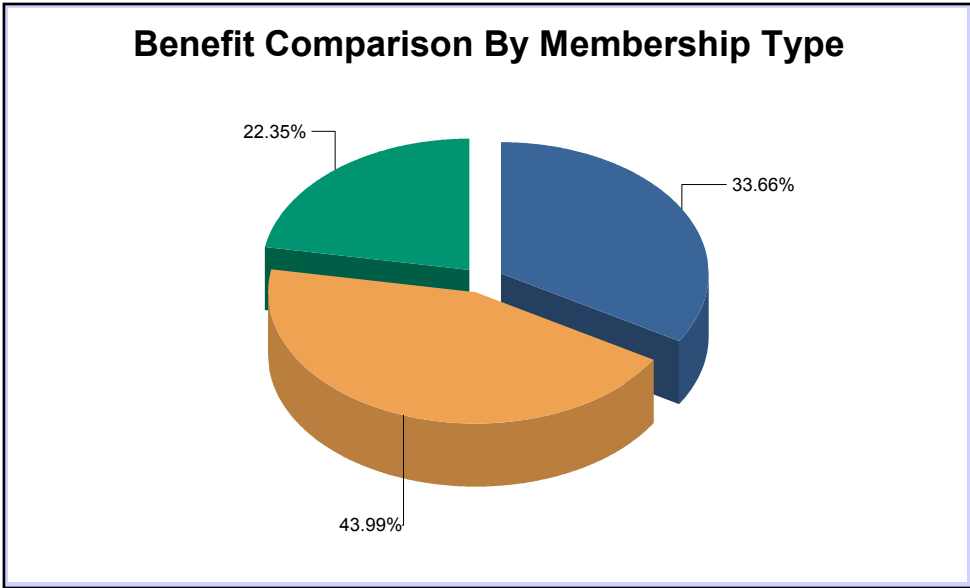
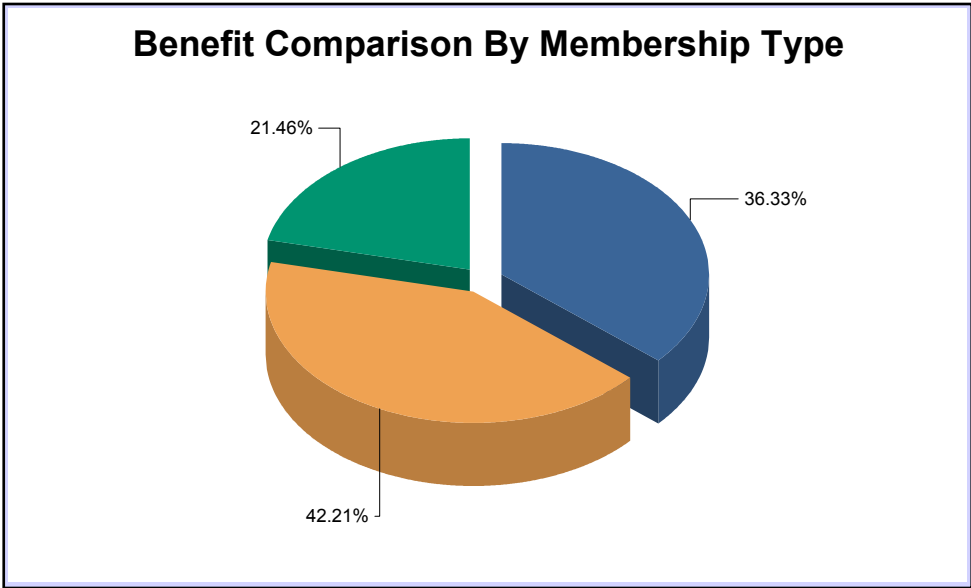
Benefit Comparison

January 2018 to April 2018

Membership Type	Amount Paid	Percentage of Amount
■ Employee:	\$259,309.20	42.21%
■ Spouse:	\$131,822.31	21.46%
■ Dependent:	\$223,193.08	36.33%
Totals:		
	\$614,324.59	100.00%

January 2017 to April 2017

Membership Type	Amount Paid	Percentage of Amount
■ Employee:	\$280,183.65	43.99%
■ Spouse:	\$142,384.35	22.35%
■ Dependent:	\$214,387.09	33.66%
Totals:		
	\$636,955.09	100.00%



Benefit Comparison

January 2018 to April 2018

Benefits Category	Number of Procedures	Amount Paid	Percent of Claims Paid
Diagnostic: <i>Exams</i>	5,028 2,014	\$150,390.84 \$64,970.98	24.48% 10.58 %
Preventive: <i>Cleanings</i>	2,751 1,919	\$121,814.43 \$101,415.54	19.83% 16.51 %
Restorative: <i>Basic</i> <i>Major</i>	1,334 1,025 309	\$177,360.39 \$119,567.19 \$57,793.20	28.87% 19.46 % 9.41 %
Endodontics:	62	\$29,574.64	4.81%
Periodontics: <i>Perio Cleanings</i>	401 200	\$33,442.00 \$9,149.20	5.44% 1.49 %
Prosthodontics: <i>Implants</i>	127 18	\$19,924.40 \$0.00	3.24% 0.00 %
Oral Surgery:	337	\$35,011.71	5.70%
Orthodontics:	273	\$41,416.63	6.74%
Adjunctive Services:	245	\$5,389.55	0.88%
Totals:	10,558	\$614,324.59	100.00%

January 2017 to April 2017

Benefits Category	Number of Procedures	Amount Paid	Percent of Claims Paid
Diagnostic: <i>Exams</i>	5,031 2,100	\$156,480.69 \$68,504.63	24.57% 10.76 %
Preventive: <i>Cleanings</i>	2,922 1,987	\$125,301.69 \$104,390.33	19.67% 16.39 %
Restorative: <i>Basic</i> <i>Major</i>	1,328 964 364	\$178,067.02 \$109,958.79 \$68,108.23	27.96% 17.26 % 10.70 %
Endodontics:	97	\$47,476.75	7.45%
Periodontics: <i>Perio Cleanings</i>	438 207	\$34,843.25 \$9,641.40	5.47% 1.51 %
Prosthodontics: <i>Implants</i>	141 10	\$23,249.75 \$0.00	3.65% 0.00 %
Oral Surgery:	333	\$37,898.44	5.95%
Orthodontics:	207	\$27,636.85	4.34%
Adjunctive Services:	231	\$6,000.65	0.94%
Totals:	10,728	\$636,955.09	100.00%

