

Your Partnership in Health Snapshot

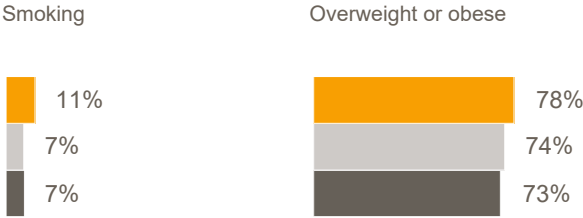
Make the most of your health care investment

To help you get the most value from your Kaiser Permanente coverage, this report highlights risks and opportunities in your population. You can use this data to better understand and help manage your costs by building a culture of health in your organization.

Frontier Dental Holdings, LLC | Report date: JAN-22-2025
 Measurement period: JUL-01-2023 through JUN-30-2024
 Kaiser Permanente region: KP Statewide CA
 Industry: 31 - 33 Manufacturing

Subscribers	Members	Average age	Gender (% female)	Enrollment stability index	% who saw a clinician	Blood Pressure Screening (KP usage indicator)
73	89	41	52%	76%	76%	66%

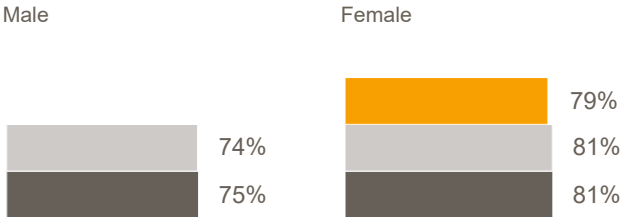
Lifestyle risks — % of members who smoke and % of members who are overweight or obese



What these lifestyle risks mean for you

- Just one smoking employee can cost an employer \$4,385 annually in excess medical costs.¹
- Medical costs for each overweight or obese employee are \$7,889 higher than costs for employees at a healthy weight.²

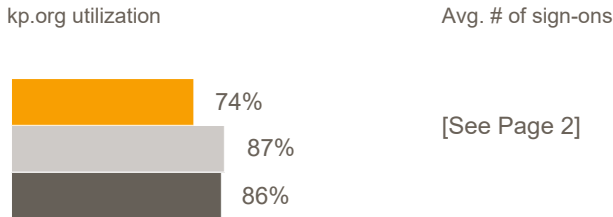
Prevention index — composite % of members receiving age- and gender-specific tests and screenings



What prevention means for you

- It costs nearly 3 times as much to treat colorectal cancer when it's caught at a late stage instead of an early stage.³
- For people with prediabetes, lifestyle intervention may decrease the risk of diabetes by 20%.⁴

kp.org utilization — % of eligible members using kp.org and average number of sign-ons to kp.org



What kp.org utilization means for you

- Kaiser Permanente members and their care teams exchanged 72.1 million secure emails in 2021 — often saving a copay and time away from work.⁵
- Access to electronic health records improves medication adherence, hospital admission rates, blood sugar and blood pressure control, and patient-doctor communication.⁶

■ Your group 2023 Q2
 ■ Your group 2024 Q2
 ■ Regional average 2024 Q2
 ■ Industry average 2024 Q2

Results will not be displayed if the eligible member population for the metric is less than 20. If a metric says 0%, that indicates no members met the metric's data definition. Regional and industry averages are based on Kaiser Permanente membership.

Data definitions

Your group at a glance

- **Subscribers** — Number of subscribers enrolled at the end of the measurement period.
- **Members** — Number of members enrolled at the end of the measurement period.
- **Average age** — Average age of members enrolled at the end of the measurement period. Uses total enrollment data at a point in time (all members, not just those continuously enrolled).
- **Gender (% female)** — Percentage of females enrolled at the end of the measurement period. Uses total enrollment data at a point in time (all members, not just those continuously enrolled).
- **Enrollment stability index** — Percentage of members enrolled at the end of the measurement period who were continuously enrolled (enrolled for at least 11 months of the 12-month reporting period).
- **% who saw a clinician** — Percentage of enrolled members (both continuously enrolled and those enrolled at the end of the measurement period) who had at least one clinical encounter with Kaiser Permanente during the 12-month measurement period.
- **Blood Pressure Screening (KP usage indicator)** — Percentage of adult population that had a recorded result for blood pressure during the 12-month measurement period.

Lifestyle risks

- **Smokers** — Percentage of members ages 18 or older who saw a doctor or other clinician and had a recorded smoking status of “yes,” “infrequent,” or “passive” in their electronic health record.
- **Overweight or obese** — Percentage of members ages 21 to 74 who saw a doctor or other clinician during the 12-month measurement period, were measured, and were overweight or obese (BMI \geq 25.0).

Prevention index — composite % of age- and gender-specific tests and screenings

- **Blood pressure** — Percentage of members ages 18 to 85 who saw a doctor or other clinician during the 12-month measurement period and had a recorded result for blood pressure.
- **Cholesterol** — Percentage of members ages 18 to 75 who saw a doctor or other clinician and had a recorded result for cholesterol, which includes an LDL, HDL, and triglyceride result, during the last 5 years.
- **Colorectal cancer** — Effective Q4 2022 measurement period, age band has changed from 51-75 to 46-75 years. Percentage of men and women ages 46 to 75 who had appropriate screening for colorectal cancer (CRC). Appropriate screening is a Cologuard® test (FIT-DNA test) during the measurement year or the 2 years prior to the measurement year, a fecal occult blood test (FOBT) during the measurement year, a flexible sigmoidoscopy during the measurement year or the 4 years prior to the measurement year, or a colonoscopy during the measurement year or 9 years prior to the measurement year.
- **Cervical cancer** — The percentage of women ages 21 to 64 who were screened for cervical cancer using either of the following criteria:
 - Women ages 21 to 64 who had cervical cytology performed every 3 years (prior to Q4 2013).
 - Women ages 30 to 64 who had cervical cytology/human papillomavirus (HPV) co-testing performed every 5 years (effective Q4 2013).
- **Breast cancer** — Percentage of women ages 52 to 74 who had a mammography during the measurement year or one year prior to the measurement year.

kp.org utilization

- **kp.org utilization** — Percentage of eligible members (age \geq 13) that are registered on kp.org and have signed on to kp.org at least once during the 12 month rolling measurement period.

Note: As our organization continues to advance the kp.org capabilities and ways to access care, we are working with our upstream data sources to accurately reflect those advancements in our suite of reporting. Due to this complex effort, as of Q2 2022 measurement period, we are suppressing the ‘Average # of sign-ons’ graph to update and expand the evolving capabilities.

Regional average

- The Kaiser Permanente regional average is for commercial groups of fewer than 200 members. Customers can choose the average for their region, the 2 California regions, or all 6 Kaiser Permanente regions combined. Their selection is noted at the top of the report.

Industry average

- The industry average reflects results for Kaiser Permanente members in a specific industry sector, as defined by the North American Industry Classification System. The customer’s sector is noted at the top of the report.

Internal/External Data

- This report includes data from “external” providers such as non-KP integrated care, contracted network, and out-of-network providers. This includes, in whole or in part: biometrics collected in-office, flu immunization/shot, smoking status/smoking rate. To fully understand the extent of the external care utilized, please request the PIH: Where Your Employees Get Routine Care: Internal and External Care Report (RIE) report for the group.

¹Matthew McGough et al., “How Do Health Expenditures Vary Across the Population,” *Peterson-KFF Health System Tracker*, January 4, 2024. ²Imani Telesford et al., “How Have Costs Associated with Obesity Changed Over Time?” *Peterson-KFF Health System Tracker*, March 24, 2023. ³Mariotto et al., *Cancer Epidemiology, Biomarkers & Prevention*, July 2020. ⁴*Circulation*, February 23, 2021. ⁵Kaiser Permanente Telehealth Insights Dashboard, accessed April 19, 2022. ⁶Tapuria et al., *Informatics for Health and Social Care*, April 10, 2021.