2025-2026 Member Benefit Program

California Pest Management Association

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For detailed plan information, forms and directories please visit https://www.arbadmin.com/association-plans.html

California Pest Management Association

EXCLUSIVE INSURANCE PLAN OPTIONS FOR ASSOCIATION MEMBERS

Aflac

Accident and Cancer Insurance
For your peace of mind

Accident

Accidents can happen in an instant affecting you or a loved one. Aflac is designed to help you plan for the health care bumps that may be ahead and take some of the uncertainty and financial insecurity out of getting better. After an accident, you may have expenses you've never thought about. Can your finances handle them? Aflac is here to help.

Cancer

Aflac pays cash benefits directly to you when you need them most. If you're ever diagnosed with a covered cancer, these benefits are more important than ever. Why? Because cancer treatment can be expensive. We believe if faced with a cancer diagnosis, you need real solutions that help you face the financial, physical and emotional challenges often experienced by cancer patients and their families – before, during, and after treatment.

CHUBB®

Life Insurance
Valuable protection for your loved ones

You work hard to pride a good life for your family. However, what if something happened to you? Would your family be able to continue covering expenses you may have today like mortgage payments, childcare, credit card payments, collect tuition and other house-hold expenses? What about burial expenses or other expenses for long term care like nursing home or assisted living care? LifeTime Benefit Term can help.

New Options Include $75,000 Guaranteed Issued and Up-To $150,000 Coverage Available

How LifeTime Benefit Term Can Be Used

3 Options	Life Situations	Death Benefit	Long Term Care	Total Benefits
1. Life Insurance	You lead a full life and do not need Long term Care (LTC)	$100,000	_____	$100,000
2. Long Term Care (LTC) Insurance	You lead a full life and need assisted living or nursing home care	_____	$100,000	
3. Split your Death Benefit for LTC and Life Insurance	You lead a full life but also need some LTC funds (Example: 4% of $100,000 for 12 months)	$52,000	$48,000	

Option 1,2 or 3 = Total Coverage **$100,000**

Association for Entrepreneurship

California Pest Management Association

EXCLUSIVE PET CARE PROGRAM FOR ASSOCIATION MEMBERS

MY PRIMARY PET CARE
Pet Care Made Easier

$24.97/Month
All Dog and Cats In the Household

My Primary Pet Care Plan offers affordable pet medical benefits, providing discounts on veterinary services and 24/7 access to virtual veterinary professionals Pre-Existing Conditions Covered.

Our plan is not an insurance, it provides medical services including discounted in-person vet care without the need for claims, deductibles, or waiting periods. The plan also includes access to licensed veterinary professionals via phone or video discussion for advice and guidance, 24 hours a day every day of the year.

ALL – Breeds, Age, Weight,
Pre-Existing Conditions Covered!

Call A Veterinary 24/7
No Service Fee

PPO Veterinary Network
25% Discount for All Medical Services

Free Pharmacy Plan
15-60% Savings on Generic Drugs

Legal Assistance for Pets Owners
When Needed

Pet Bereavement Support Services
for Face-to-Face Free Clinical Counseling

The Pet Tag
Durable ID Tag
Cloud Based Pet Profile

Association for Entrepreneurship · ACI Specialty Benefits · DialCare Virtual Vet · Pet Assure · United Networks of America

For more information contact: Kirstin Hoyle, kirstin.hoyle@usi.com P: 916-883-0708 or
Robert Ford, robert.ford@usi.com P: 916-883-0710 or visit www.arbadmin.com/association-plans.html

Dental

Delta Dental Plan Options through the Associations

Effective Date: December 01, 2025 - November 30, 2026

Insurance Carrier	DeltaCare USA	Delta Dental
Plan Name	Plan 11B	Fee For Service
Plan Type	HMO	DPO
Provider Network	DeltaCare USA Network ONLY	PPO or Premier Network
Calendar Year Maximum	Unlimited	$1,000
Deductible:	None	Single $50/Family $ 150
Waived for Preventive	Not Applicable	Yes
Diagnostic		*"Delta Pays"* (A)
Office Visit	$20 copay	$26.00
Periodic Oral Evaluation	No Charge	$17.00
Comprehensive Oral Evaluation	No Charge	$22.00
Bitewing X-rays	No Charge	$12.00 - $26.00
Other X-rays	No Charge	$5.00 - $50.00
Preventive		*"Delta Pays"* (A)
Cleanings Adult	No Charge	$40.00
	Additional Cleanings: $45.00	Not Applicable
Child through Age 13	No Charge	$32.00
	Additional Cleanings: $35.00	Not Applicable
		"Delta Pays" (A)
Restorative	No Charge - $240 copay	$53.00 - $148.00
Oral Surgery	No Charge - $110 copay	$26.00 - $175.00
Endodontics (Root Canals)	No Charge - $250 copay	$50.00 - $402.00
Periodontics (Deep Cleaning)	$80 copay - $280 copay	$39.00 - $448.00
		"Delta Pays" (A)
Waiting Period	None	None
Crowns	$55 copay - $240 copay	$343.00 - $391.00
Prosthodontics, Removable	$20 copay - $210 copay	$255.00 - $676.00
Prosthodontics, Fixed	$40 copay - $240 copay	$191.00 - $605.00
Orthodontia		
Pretreatment/Post Treatment	$200 copay / $70 copay	NOT COVERED
Limited Treatment Child to 19	$950 copay	
Limited Treatment 19 to Adult	$1,150 copay	
Comprehensive Treatment Child to 19	$1,700 copay	
Comprehensive Treatment 19 to Adult	$1,900 copay	
Monthly Premium Rate		
Subscriber Only	$38.80	$55.84
Subscriber+1	$58.47	$98.45
Subscriber+2 or more	$82.42	$129.24

(A) For each procedure, you are responsible for the portion of the dentist's fee that is more than the amount listed in the "Delta Dental Pays" column.

Cypress Dental Benefits
Dental Options through the Associations

Effective Date: December 01, 2025 - November 30, 2026

Plan Name	Cypress DHMO CA7740	$1,500 PPO (MAC)	$1,500 PPO (UCR)
Plan Type	DHMO	DPO (MAC)	DPO (UCR)
Provider Network	Administered by MIB	CEN / PPO / Out-of-Network	CEN / PPO / Out-of-Network
Calendar Year Maximum	Unlimited	$1,500 / $1,500 / $1,500	$1,500 / $1,500 / $1,500
Deductible:	None	$25 /$50 / $50 Max 3 per family	$25 /$50 / $50 Max 3 per family
Waived for Preventive	Not Applicable	Yes / Yes / Yes	Yes / Yes / Yes
Preventive Services	No waiting period	No waiting period	No waiting period
Office Visit	$0 copay		
Comprehensive Oral Evaluation	D0150 - $0 copay		
Intraoral, periapical, add'l radiographic image	D0230 - $0 copay	100% / 100% / 100% (MAC)	100% / 100% / 100% (UCR)
Bitewing X-rays	D0274 - $0 copay		
Other X-rays (Panoramic images)	D0330 - $0 copay		
Cleanings	D1110 - $0 copay		
Basic Services	No waiting period	No waiting period	No waiting period
Fillings (Amalgam, 2 surfaces)	D2150 - $10 copay		
Fillings (composite, 2 surfaces, anterior)	D2331 - $10 copay		
Fillings (Composite, 2 surfaces, posterior)	D2392 - $65 copay	90% / 80% / 80% (MAC)	90% / 80% / 80% (UCR)
Root canal, molar (excluding final restoration)	D3330 - $125 copay		
Periodontal scaling/planning	D4341 - $25 copay		
Major Services	No waiting period	No waiting period (1)	No waiting period (1)
Crown, porcelain fused to high noble metal	D2750 - $145 copay		
Crown, resin with high noble metal	D6720 - $145 copay	60% / 50% / 50% (MAC)	60% / 50% / 50% (UCR)
Complete denture, maxillary	D5110 - $200 copay		
Surgical removal of erupted tooth	D7210 - $25 copay		
Orthodontia	No waiting period		
Comprehensive treatment of children	D8080 - $1,600 copay	Not Covered	Not Covered
Comprehensive treatment of adults	D8090 - $2,100 copay		
Monthly Premium Rate	**Cypress DHMO CA7740**	**$1,500 PPO (MAC)**	**$1,500 PPO (UCR)**
Subscriber Only	$28.93	$54.10	$65.15
Subscriber+Spouse	$41.86	$100.23	$118.78
Subscriber+Child(ren)	$39.80	$98.97	$142.38
Subscriber+Family	$56.91	$157.53	$182.83

CEN: Cypress Exclusive Network is not available in all areas. Cypress does not guarantee that all services can be rendered by a CEN provider

MAC: Benefits are paid using fee schedules, less coinsurance and deductibles

UCR: Benefits are paid at the 90th percentile on the Usual, Customary, and Reasonable (UCR), less coinsurance and deductible

(1) No waiting period for timely applicants

Vision

Association Vision Plan

Effective Date: December 1, 2025 - November 30, 2026

Vision Benefit	VSP Vision Care
	In-Network
Copay Exams	$10.00
Copay Materials	$25.00
Exam	One Every 12 Months
Lenses (per pair)	One Pair Every 12 Months
Frames	Once Every 12 Months
Frame Retail Allowance	$150.00
Contact Lenses	Once Every 12 Months
Contact lenses are in lieu of frames	Up to $150.00
Rates	**VSP Vision Care**
Employee Only	$8.40
Employee & Spouse	$15.84
Employee & Child(ren)	$16.85
Family	$26.33
Adminstered through Cypress Dental	

Medical

Comparing Medical Plans

Medical Plan Options are commonly referred to as "Metal Plans" representing different tiers of coverage and affordability.

Platinum

- Low deductible
- Low Copays
- Low coinsurance
- Higher premium costs

Gold

- Low/Moderate deductible
- Moderate Copays
- Low/Moderate coinsurance
- High/Moderate premium costs

Silver

- Moderate/High deductible
- Moderate/High Copays & Coinsurance
- Low / Moderate premium costs

Bronze

- High Deductible
- Must meet deductible before plan pays
- Low premium costs

Some high deductible health plans (HDHP) are HSA compatible offering a tax advantage

Choosing a Medical Plan

Deductible

The amount of healthcare cost you will have to pay before the plan starts paying.

Coinsurance

After the deductible is met, you and the plan share in the cost of services. (Example: if the plan pays 80% you will pay 20%)

Copay

A set amount defined by the plan that you will pay when you receive care. (Example: You pay a set dollar amount when you visit your doctor)

Out of Pocket Maximum

Protects you from large medical bills once your out of pocket reaches this amount. The plan will pay 100% once eligible expenses exceed that amount.

In and Out of Network

In Network services will always be the lowest cost option. Check your plan for non network coverage. It may be less coverage or no coverage except in an emergency.

Balance Billing

In-network providers are not allowed to bill more than the plan allows, out of network providers can charge the excess of the plan allowance to "balance" the charges.

TIPS: Check the Network to ensure your doctor or hospital is covered.
Consider premium cost, deductibles and copays that may affect your true out of pocket.

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Platinum Plans

Plan Benefit Summary	Platinum 90 HMO 0/10 + Child Dental Alt	Platinum 90 HMO 0/20 + Child Dental
Annual Medical Deductible	$0	$0
Drug Benefits Deductible		
Out of Pocket Max for Med and Drug EHB Benefits (Total)	Individual: $3,000 Family: $6,000	Individual: $4,500 Family: $9,000
Primary Care Visit to Treat an Injury or Illness	$10 copay	$20 copay
Other Practitioner Office Visit (Nurse, Physician Assistant)	$10 copay	$20 copay
Specialist Visit	$20 copay	$30 copay
X-rays and Diagnostic Imaging	$40 copay	$30 copay
Laboratory Outpatient and Professional Services	$20 copay	$20 copay
Preventive Care/Screening/Immunization	No Charge	No Charge
Urgent Care Centers or Facilities	$10 copay	$20 copay
Emergency Room Services	$200 copay	$150 copay
Inpatient Hospital Services (e.g., Hospital Stay)	$500 copay per admission	$250 copay per day up to 5 days
Generic Drugs	$5 copay	$5 copay
Preferred Brand Drugs	$15 copay	$20 copay
Non-Preferred Brand Drugs	$15 copay	$20 copay
Specialty Drugs	10% coinsurance	10% coinsurance

Gold Plans

Plan Benefit Summary	Gold 80 HMO 0/35 + Child Dental Alt	Gold 80 HMO 250/35 + Child Dental	Gold 80 HMO 1000/40 + Child Dental Alt
Annual Medical Deductible	$0	Individual: $250 Family: $500	Individual: $1,000 Family: $2,000
Drug Benefits Deductible			Individual: $250 Family: $500
Out of Pocket Max for Med and Drug EHB Benefits (Total)	Individual: $7,700 Family: $15,400	Individual: $7,800 Family: $15,600	Individual: $8,200 Family: $16,400
Primary Care Visit to Treat an Injury or Illness	$35 copay	$35 copay	$40 copay
Other Practitioner Office Visit (Nurse, Physician Assistant)	$35 copay	$35 copay	$40 copay
Specialist Visit	$60 copay	$55 copay	$60 copay
X-rays and Diagnostic Imaging	$40 copay	$55 copay	$60 copay
Laboratory Outpatient and Professional Services	$30 copay	$35 copay	$30 copay
Preventive Care/Screening/Immunization	No Charge	No Charge	No Charge
Urgent Care Centers or Facilities	$35 copay	$35 copay	$40 copay
Emergency Room Services	$350 copay	$250 copay after deductible	$350 copay
Inpatient Hospital Services (e.g., Hospital Stay)	$600 copay per day up to 5 days	$600 copay per day after deductible up to 5 days	$600 copay per day after deductible up to 5 days
Generic Drugs	$15 copay	$15 copay	$20 copay
Preferred Brand Drugs	$50 copay	$40 copay	$50 copay after deductible
Non-Preferred Brand Drugs	$50 copay	$40 copay	$50 copay after deductible
Specialty Drugs	20% coinsurance	20% coinsurance	20% coinsurance after deductible

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Silver Plans

Plan Benefit Summary	Silver 70 HMO 1900/65 + Child Dental Alt	Silver 70 HMO 2500/55 + Child Dental	Silver 70 HDHP HMO 2850/25% + Child Dental
Annual Medical Deductible	Individual: $1,900 Family: $3,800	Individual: $2,500 Family: $5,000	Self Only: $2,850 Individual: $3,300 Family: $5,700
Drug Benefits Deductible		Individual: $300 Family: $600	
Out of Pocket Max for Med and Drug EHB Benefits (Total)	Individual: $8,750 Family: $17,500	Individual: $8,750 Family: $17,500	Individual: $7,500 Family: $15,000
Primary Care Visit to Treat an Injury or Illness	$65 copay	$55 copay	25% coinsurance after deductible
Other Practitioner Office Visit (Nurse, Physician Assistant)	$65 copay	$55 copay	25% coinsurance after deductible
Specialist Visit	$100 copay	$90 copay	25% coinsurance after deductible
X-rays and Diagnostic Imaging	$75 copay	$90 copay	25% coinsurance after deductible
Laboratory Outpatient and Professional Services	$30 copay	$55 copay	25% coinsurance after deductible
Preventive Care/Screening/Immunization	No Charge	No Charge	No Charge
Urgent Care Centers or Facilities	$65 copay	$55 copay	25% coinsurance after deductible
Emergency Room Services	45% coinsurance after deductible	35% coinsurance after deductible	25% coinsurance after deductible
Inpatient Hospital Services (e.g., Hospital Stay)	45% coinsurance after deductible	35% coinsurance after deductible	25% coinsurance after deductible
Generic Drugs	$20 copay	$19 copay	25% coinsurance after deductible
Preferred Brand Drugs	$100 copay	$85 copay after deductible	25% coinsurance after deductible
Non-Preferred Brand Drugs	$100 copay	$85 copay after deductible	25% coinsurance after deductible
Specialty Drugs	20% coinsurance after deductible	30% coinsurance after deductible	25% coinsurance after deductible

Bronze Plans

Plan Benefit Summary	Bronze 60 HMO 5800/60 + Child Dental	Bronze 60 HDHP HMO 6650/0 + Child Dental
Annual Medical Deductible	Individual: $5,800 Family: $11,600	Individual: $6,650 Family: $13,300
Drug Benefits Deductible	Individual: $500 Family: $1,000	
Out of Pocket Max for Med and Drug EHB Benefits (Total)	Individual: $8,850 Family: $17,700	Individual: $6,650 Family: $13,300
Primary Care Visit to Treat an Injury or Illness	$60 copay	No Charge after deductible
Other Practitioner Office Visit (Nurse, Physician Assistant)	$60 copay	No Charge after deductible
Specialist Visit	$95 copay	No Charge after deductible
X-rays and Diagnostic Imaging	40% coinsurance after deductible	No Charge after deductible
Laboratory Outpatient and Professional Services	$40 copay	No Charge after deductible
Preventive Care/Screening/Immunization	No Charge	No Charge
Urgent Care Centers or Facilities	$60 copay	No Charge after deductible
Emergency Room Services	40% coinsurance after deductible	No Charge after deductible
Inpatient Hospital Services (e.g., Hospital Stay)	40% coinsurance after deductible	No Charge after deductible
Generic Drugs	$19 copay after deductible	No Charge after deductible
Preferred Brand Drugs	40% coinsurance after deductible	No Charge after deductible
Non-Preferred Brand Drugs	40% coinsurance after deductible	No Charge after deductible
Specialty Drugs	40% coinsurance after deductible	No Charge after deductible

Platinum Plans

Annual Deductible	Gateway 30 Platinum 90 HMO	Gateway 70 Platinum 90 HMO
Medical Deductible	$0	$0
Drug Benefits Deductible		
Annual Out of Pocket Max for Med and Drug EHB Benefits (Total)	Individual: $4,000 Family: $8,000	Individual: $4,000 Family: $8,000
Primary Care Visit to Treat an Injury or Illness	$30 Copay	$20 Copay
Specialist Visit	$30 Copay	$20 Copay
X-rays and Diagnostic Imaging	No Charge	No Charge
Laboratory Outpatient and Professional Services	No Charge	No Charge
Preventive Care/Screening/Immunization	No Charge	No Charge
Urgent Care Centers or Facilities	$50 Copay	$50 Copay
Emergency Room Services	$150 Copay (waived if admitted)	$150 Copay (waived if admitted)
Inpatient Hospital Services (e.g., Hospital Stay)	$300 Copay (days 1-3)	30% Coinsurance
Generic Drugs	$5 Copay	$5 Copay
Preferred Brand Drugs	$30 Copay	$30 Copay
Non-Preferred Brand Drugs	$50 Copay	$50 Copay
Specialty Drugs	20% up to $250	20% up to $250

Gold Plans

Annual Deductible	Gateway 4010 Gold 80 HMO	Gateway 2600 Gold 80 HDHP HMO
Medical Deductible	Self Only: $1,000 Individual: $1,000 Family: $2,000	Self Only: $2,600 Individual with Family Coverage: $3,300 Family: $5,200
Drug Benefits Deductible	Self Only: $500 Individual: $500 Family: $1,000	
Annual Out of Pocket Max for Med and Drug EHB Benefits (Total)	Self Only: $7,800 Individual: $7,800 Family: $15,600	Self Only: $4,800 Individual: $4,800 Family: $9,600
Primary Care Visit to Treat an Injury or Illness	$40 Copay	No Charge after deductible
Specialist Visit	$40 Copay	No Charge after deductible
X-rays and Diagnostic Imaging	$40 Copay	No Charge after deductible
Laboratory Outpatient and Professional Services	No Charge	No Charge after deductible
Preventive Care/Screening/Immunization	No Charge	No Charge
Urgent Care Centers or Facilities	$50 Copay	No Charge after deductible
Emergency Room Services	$300 Copay after deductible (waived if admitted)	No Charge after deductible
Inpatient Hospital Services (e.g., Hospital Stay)	$500 Copay after deductible (days 1-5)	No Charge after deductible
Generic Drugs	$10 Copay	No Charge after deductible
Preferred Brand Drugs	$50 Copay after deductible	$40 Copay after deductible
Non-Preferred Brand Drugs	$75 Copay after deductible	$60 Copay after deductible
Specialty Drugs	20% up to $250 (Coinsurance after deductlble)	20% up to $250 (Coinsurance after deductlble)

	Silver Plan	Bronze Plan
Annual Deductible	**Gateway 5020 Silver 70 HMO**	**Gateway 6650 Bronze 60 HDHP HMO**
Medical Deductible	Self Only: $2,000 Individual: $2,000 Family: $4,000	Self Only: $6,650 Individual with Family Coverage: $6,650 Family: $13,300
Drug Benefits Deductible	Self Only: $500 Individual: $500 Family: $1,000	
Annual Out of Pocket Max for Med and Drug EHB Benefits (Total)	Self Only: $8,750 Individual: $8,750 Family: $17,500	Self Only: $6,650 Individual: $6,650 Family: $13,300
Primary Care Visit to Treat an Injury or Illness	$50 Copay	No Charge after deductible
Specialist Visit	$50 Copay	No Charge after deductible
X-rays and Diagnostic Imaging	$80 Copay	No Charge after deductible
Laboratory Outpatient and Professional Services	$50 Copay	No Charge after deductible
Preventive Care/Screening/Immunization	No Charge	No Charge
Urgent Care Centers or Facilities	$50 Copay	No Charge after deductible
Emergency Room Services	30% Coinsurance after deductible (waived if admitted)	No Charge after deductible
Inpatient Hospital Services (e.g., Hospital Stay)	30% Coinsurance after deductible	No Charge after deductible
Generic Drugs	$25 Copay	No Charge after deductible
Preferred Brand Drugs	30% up to $250 (Coinsurance after deductlble)	No Charge after deductible
Non-Preferred Brand Drugs	30% up to $250 (Coinsurance after deductible)	No Charge after deductible
Specialty Drugs	30% up to $250 (Coinsurance after deductlble)	No Charge after deductible

Medical Rates and Territories

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WHA

Rating Areas	County	Zip Codes
Area 1	Amador	95640, 95669
Area 1	Sutter	95626, 95645, 95659, 95668, 95674, 95676, 95836, 95837
Area 1	Yuba	95692, 95903, 95961
Area 2	Marin	94901, 94903, 94904, 94912, 94913, 94914, 94915, 94920, 94924, 94925, 94929, 94930, 94933, 94937, 94938, 94939, 94940, 94941, 94942, 94945, 94946, 94947, 94948, 94949, 94950, 94952, 94956, 94957, 94960, 94963, 94964, 94965, 94966, 94970, 94971, 94973, 94974, 94976, 94977, 94978, 94979
Area 2	Napa	All Zips
Area 2	Solano	All Zips
Area 2	Sonoma	94515, 94922, 94923, 94926, 94927, 94928, 94931, 94951, 94952, 94953, 94954, 94955, 94972, 94975, 94999, 95401, 95402, 95403, 95404, 95405, 95406, 95407, 95409, 95416, 95419, 95421, 95425, 95430, 95431, 95433, 95436, 95439, 95441, 95442, 95444, 95446, 95448, 95450, 95452, 95462, 95465, 95471, 95472, 95473, 95476, 95486, 95487, 95492
Area 3	El Dorado	95613, 95614, 95619, 95623, 95633, 95634, 95635, 95651, 95664, 95667, 95672, 95682, 95762
Area 3	Placer	95602, 95603, 95604, 95610, 95626, 95648, 95650, 95658, 95661, 95663, 95668, 95677, 95678, 95681, 95703, 95722, 95736, 95746, 95747, 95765
Area 3	Sacramento	94203, 94204, 94205, 94206, 94207, 94208, 94209, 94211, 94229, 94230, 94232, 94234, 94235, 94236, 94237, 94239, 94240, 94244, 94247, 94248, 94249, 94250, 94252, 94254, 94256, 94257, 94258, 94259, 94261, 94262, 94263, 94267, 94268, 94269, 94271, 94273, 94274, 94277, 94278, 94279, 94280, 94282, 94283, 94284, 94285, 94287, 94288, 94289, 94290, 94291, 94293, 94294, 94295, 94296, 94297, 94298, 94571, 95608, 95609, 95610, 95611, 95615, 95621, 95624, 95626, 95628, 95630, 95632, 95638, 95639, 95641, 95652, 95655, 95660, 95662, 95670, 95671, 95673, 95680, 95683, 95690, 95693, 95741, 95742, 95757, 95758, 95759, 95763, 95811, 95812, 95813, 95814, 95815, 95816, 95817, 95818, 95819, 95820, 95821, 95822, 95823, 95824, 95825, 95826, 95827, 95828, 95829, 95830, 95831, 95832, 95833, 95834, 95835, 95836, 95837, 95838, 95840, 95841, 95842, 95843, 95851, 95852, 95853, 95860, 95864, 95865, 95866, 95867, 95894, 95899
Area 3	Yolo	95605, 95607, 95612, 95615, 95616, 95617, 95618, 95645, 95691, 95694, 95695, 95697, 95698, 95776, 95798, 95799
Area 4	San Francisco	All Zips
Area 5	Contra Costa	All Zips
Area 6	Alameda	All Zips
Area 7	Santa Clara	94022, 94023, 94024, 94035, 94039, 94040, 94041, 94042, 94043, 94085, 94086, 94087, 94088, 94089, 94301, 94302, 94303, 94304, 94305, 94306, 94309, 94550, 95002, 95008, 95009, 95011, 95013, 95014, 95015, 95020, 95021, 95026, 95030, 95031, 95032, 95033, 95035, 95036, 95037, 95038, 95042, 95044, 95046, 95050, 95051, 95052, 95053, 95054, 95055, 95056, 95070, 95071, 95076, 95101, 95103, 95106, 95108, 95109, 95110, 95111, 95112, 95113, 95115, 95116, 95117, 95118, 95119, 95120, 95121, 95122, 95123, 95124, 95125, 95126, 95127, 95128, 95129, 95130, 95131, 95132, 95133, 95134, 95135, 95136, 95138, 95139, 95140, 95141, 95148, 95150, 95151, 95152, 95153, 95154, 95155, 95156, 95157, 95158, 95159, 95160, 95161, 95164, 95170, 95172, 95173, 95190, 95191, 95192, 95193, 95194, 95196
Area 8	San Mateo	94002, 94005, 94010, 94011, 94014, 94015, 94016, 94017, 94018, 94019, 94020, 94021, 94025, 94026, 94027, 94028, 94030, 94037, 94038, 94044, 94060, 94061, 94062, 94063, 94064, 94065, 94066, 94070, 94074, 94080, 94083, 94128, 94303, 94401, 94402, 94403, 94404, 94497
Area 9	Santa Cruz	95001, 95003, 95005, 95006, 95007, 95010, 95017, 95018, 95019, 95033, 95041, 95060, 95061, 95062, 95063, 95064, 95065, 95066, 95067, 95073, 95076, 95077
Area 10	Mariposa	93601, 93623, 93653
Area 10	San Joaquin	94514, 95201, 95202, 95203, 95204, 95205, 95206, 95207, 95208, 95209, 95210, 95211, 95212, 95213, 95215, 95219, 95220, 95227, 95230, 95231, 95234, 95236, 95237, 95240, 95241, 95242, 95253, 95258, 95267, 95269, 95296, 95297, 95304, 95320, 95330, 95336, 95337, 95361, 95366, 95376, 95377, 95378, 95385, 95391, 95632, 95686, 95690
Area 10	Stanislaus	95230, 95307, 95313, 95316, 95319, 95322, 95323, 95326, 95328, 95329, 95350, 95351, 95352, 95353, 95354, 95355, 95356, 95357, 95358, 95360, 95361, 95363, 95367, 95368, 95380, 95381, 95382, 95385, 95386, 95387, 95397
Area 10	Tulare	93238, 93261, 93618, 93631, 93646, 93654, 93666, 93673

Area 11	Fresno	93242, 93602, 93606, 93607, 93609, 93611, 93612, 93613, 93616, 93618, 93619, 93624, 93625, 93626, 93627, 93630, 93631, 93646, 93648, 93649, 93650, 93651, 93652, 93654, 93656, 93657, 93660, 93662, 93667, 93668, 93675, 93701, 93702, 93703, 93704, 93705, 93706, 93707, 93708, 93709, 93710, 93711, 93712, 93714, 93715, 93716, 93717, 93718, 93720, 93721, 93722, 93723, 93724, 93725, 93726, 93727, 93728, 93729, 93730, 93737, 93740, 93741, 93744, 93745, 93747, 93750, 93755, 93760, 93761, 93764, 93765, 93771, 93772, 93773, 93774, 93775, 93776, 93777, 93778, 93779, 93786, 93790, 93791, 93792, 93793, 93794, 93844, 93888
Area 11	Kings	93230, 93232, 93242, 93631, 93656
Area 11	Madera	93601, 93604, 93614, 93623, 93626, 93636, 93637, 93638, 93639, 93643, 93644, 93645, 93653, 93669, 93720
Area 12	Ventura	90265, 91304, 91307, 91311, 91319, 91320, 91358, 91359, 91360, 91361, 91362, 91377, 93001, 93002, 93003, 93004, 93005, 93006, 93007, 93009, 93010, 93011, 93012, 93015, 93016, 93020, 93021, 93022, 93030, 93031, 93032, 93033, 93034, 93035, 93036, 93040, 93041, 93042, 93043, 93044, 93060, 93061, 93062, 93063, 93064, 93065, 93066, 93094, 93099, 93252
Area 13	Imperial	92274, 92275
Area 14	Kern	93203, 93205, 93206, 93215, 93216, 93220, 93222, 93224, 93225, 93226, 93238, 93240, 93241, 93243, 93249, 93250, 93251, 93252, 93263, 93268, 93276, 93280, 93285, 93287, 93301, 93302, 93303, 93304, 93305, 93306, 93307, 93308, 93309, 93311, 93312, 93313, 93314, 93380, 93383, 93384, 93385, 93386, 93387, 93388, 93389, 93390, 93501, 93502, 93504, 93505, 93518, 93519, 93531, 93536, 93560, 93561, 93581
Area 15	Los Angeles	90601, 90602, 90603, 90604, 90605, 90606, 90607, 90608, 90609, 90610, 90623, 90630, 90631, 90637, 90638, 90639, 90640, 90650, 90651, 90652, 90660, 90661, 90662, 90670, 90671, 90701, 90702, 90703, 90706, 90707, 90710, 90711, 90712, 90713, 90714, 90715, 90716, 90717, 90723, 90731, 90732, 90733, 90734, 90744, 90745, 90746, 90747, 90748, 90749, 90755, 90801, 90802, 90803, 90804, 90805, 90806, 90807, 90808, 90809, 90810, 90813, 90814, 90815, 90822, 90831, 90832, 90833, 90840, 90842, 90844, 90846, 90847, 90848, 90853, 90895, 91001, 91003, 91006, 91007, 91008, 91009, 91010, 91011, 91012, 91016, 91017, 91020, 91021, 91023, 91024, 91025, 91030, 91031, 91040, 91041, 91042, 91043, 91046, 91066, 91077, 91101, 91102, 91103, 91104, 91105, 91106, 91107, 91108, 91109, 91110, 91114, 91115, 91116, 91117, 91118, 91121, 91123, 91124, 91125, 91126, 91129, 91182, 91184, 91185, 91188, 91189, 91199, 91201, 91202, 91203, 91204, 91205, 91206, 91207, 91208, 91209, 91210, 91214, 91221, 91222, 91224, 91225, 91226, 91501, 91502, 91503, 91504, 91505, 91506, 91507, 91508, 91510, 91521, 91522, 91523, 91526, 91702, 91706, 91711, 91714, 91715, 91716, 91722, 91723, 91724, 91731, 91732, 91733, 91734, 91735, 91740, 91741, 91744, 91745, 91746, 91747, 91748, 91749, 91750, 91754, 91755, 91756, 91759, 91765, 91766, 91767, 91768, 91769, 91770, 91771, 91772, 91773, 91775, 91776, 91778, 91780, 91788, 91789, 91790, 91791, 91792, 91793, 91801, 91802, 91803, 91804, 91896, 91899, 93510, 93532, 93534, 93535, 93536, 93539, 93543, 93544, 93550, 93551, 93552, 93553, 93560, 93563, 93584, 93586, 93590, 93591, 93599
Area 16	Los Angeles	90001, 90002, 90003, 90004, 90005, 90006, 90007, 90008, 90009, 90010, 90011, 90012, 90013, 90014, 90015, 90016, 90017, 90018, 90019, 90020, 90021, 90022, 90023, 90024, 90025, 90026, 90027, 90028, 90029, 90030, 90031, 90032, 90033, 90034, 90035, 90036, 90037, 90038, 90039, 90040, 90041, 90042, 90043, 90044, 90045, 90046, 90047, 90048, 90049, 90050, 90051, 90052, 90053, 90054, 90055, 90056, 90057, 90058, 90059, 90060, 90061, 90062, 90063, 90064, 90065, 90066, 90067, 90068, 90069, 90070, 90071, 90072, 90073, 90074, 90075, 90076, 90077, 90078, 90079, 90080, 90081, 90082, 90083, 90084, 90086, 90087, 90088, 90089, 90090, 90091, 90093, 90094, 90095, 90096, 90099, 90134, 90189, 90201, 90202, 90209, 90210, 90211, 90212, 90213, 90220, 90221, 90222, 90223, 90224, 90230, 90231, 90232, 90233, 90239, 90240, 90241, 90242, 90245, 90247, 90248, 90249, 90250, 90251, 90254, 90255, 90260, 90261, 90262, 90263, 90264, 90265, 90266, 90267, 90270, 90272, 90274, 90275, 90277, 90278, 90280, 90290, 90291, 90292, 90293, 90294, 90295, 90296, 90301, 90302, 90303, 90304, 90305, 90306, 90307, 90308, 90309, 90310, 90311, 90312, 90401, 90402, 90403, 90404, 90405, 90406, 90407, 90408, 90409, 90410, 90411, 90501, 90502, 90503, 90504, 90505, 90506, 90507, 90508, 90509, 90510, 91301, 91302, 91303, 91304, 91305, 91306, 91307, 91308, 91309, 91310, 91311, 91313, 91316, 91321, 91322, 91324, 91325, 91326, 91327, 91328, 91329, 91330, 91331, 91333, 91334, 91335, 91337, 91340, 91341, 91342, 91343, 91344, 91345, 91346, 91350, 91351, 91352, 91353, 91354, 91355, 91356, 91357, 91361, 91362, 91364, 91365, 91367, 91371, 91372, 91376, 91380, 91381, 91382, 91383, 91384, 91385, 91386, 91387, 91390, 91392, 91393, 91394, 91395, 91396, 91401, 91402, 91403, 91404, 91405, 91406, 91407, 91408, 91409, 91410, 91411, 91412, 91413, 91416, 91423, 91426, 91436, 91470, 91482, 91495, 91496, 91499, 91601, 91602, 91603, 91604, 91605, 91606, 91607, 91608, 91609, 91610, 91611, 91612, 91614, 91615, 91616, 91617, 91618, 93243
Area 17	Riverside	91752, 92201, 92202, 92203, 92210, 92211, 92220, 92223, 92230, 92234, 92235, 92236, 92240, 92241, 92247, 92248, 92253, 92254, 92255, 92258, 92260, 92261, 92262, 92263, 92264, 92270, 92274, 92276, 92282, 92320, 92324, 92373, 92399, 92501, 92502, 92503, 92504, 92505, 92506, 92507, 92508, 92509, 92513, 92514, 92516, 92517, 92518, 92519, 92521, 92522, 92530, 92531, 92532, 92543, 92544, 92545, 92546, 92548, 92551, 92552, 92553, 92554, 92555, 92556, 92557, 92562, 92563, 92564, 92567, 92570, 92571, 92572, 92581, 92582, 92583, 92584, 92585, 92586, 92587, 92589, 92590, 92591, 92592, 92593, 92595, 92596, 92599, 92860, 92877, 92878, 92879, 92880, 92881, 92882, 92883
Area 17	San Bernardino	91701, 91708, 91709, 91710, 91729, 91730, 91737, 91739, 91743, 91758, 91759, 91761, 91762, 91763, 91764, 91766, 91784, 91785, 91786, 92252, 92256, 92268, 92277, 92278, 92284, 92285, 92286, 92305, 92307, 92308, 92313, 92314, 92315, 92316, 92317, 92318, 92321, 92322, 92324, 92325, 92329, 92331, 92333, 92334, 92335, 92336, 92337, 92339, 92340, 92341, 92344, 92345, 92346, 92350, 92352, 92354, 92357, 92358, 92359, 92369, 92371, 92372, 92373, 92374, 92375, 92376, 92377, 92378, 92382, 92385, 92386, 92391, 92392, 92393, 92394, 92395, 92397, 92399, 92401, 92402, 92403, 92404, 92405, 92406, 92407, 92408, 92410, 92411, 92413, 92415, 92418, 92423, 92427, 92880
Area 18	Orange	90620, 90621, 90622, 90623, 90624, 90630, 90631, 90632, 90633, 90638, 90680, 90720, 90721, 90740, 90742, 90743, 92602, 92603, 92604, 92605, 92606, 92607, 92609, 92610, 92612, 92614, 92615, 92616, 92617, 92618, 92619, 92620, 92623, 92624, 92625, 92626, 92627, 92628, 92629, 92630, 92637, 92646, 92647, 92648, 92649, 92650, 92651, 92652, 92653, 92654, 92655, 92656, 92657, 92658, 92659, 92660, 92661, 92662, 92663, 92672, 92673, 92674, 92675, 92676, 92677, 92678, 92679, 92683, 92684, 92685, 92688, 92690, 92691, 92692, 92693, 92694, 92697, 92698, 92701, 92702, 92703, 92704, 92705, 92706, 92707, 92708, 92711, 92712, 92728, 92735, 92780, 92781, 92782, 92799, 92801, 92802, 92803, 92804, 92805, 92806, 92807, 92808, 92809, 92811, 92812, 92814, 92815, 92816, 92817, 92821, 92822, 92823, 92825, 92831, 92832, 92833, 92834, 92835, 92836, 92837, 92838, 92840, 92841, 92842, 92843, 92844, 92845, 92846, 92850, 92856, 92857, 92859, 92861, 92862, 92863, 92864, 92865, 92866, 92867, 92868, 92869, 92870, 92871, 92885, 92886, 92887, 92899
Area 19	San Diego	91901, 91902, 91903, 91908, 91909, 91910, 91911, 91912, 91913, 91914, 91915, 91916, 91917, 91921, 91931, 91932, 91933, 91935, 91941, 91942, 91943, 91944, 91945, 91946, 91950, 91951, 91962, 91963, 91976, 91977, 91978, 91979, 91980, 91987, 92003, 92007, 92008, 92009, 92010, 92011, 92013, 92014, 92018, 92019, 92020, 92021, 92022, 92023, 92024, 92025, 92026, 92027, 92028, 92029, 92030, 92033, 92037, 92038, 92039, 92040, 92046, 92049, 92051, 92052, 92054, 92055, 92056, 92057, 92058, 92059, 92060, 92061, 92064, 92065, 92067, 92068, 92069, 92071, 92072, 92074, 92075, 92078, 92079, 92081, 92082, 92083, 92084, 92085, 92086, 92088, 92091, 92092, 92093, 92096, 92101, 92102, 92103, 92104, 92105, 92106, 92107, 92108, 92109, 92110, 92111, 92112, 92113, 92114, 92115, 92116, 92117, 92118, 92119, 92120, 92121, 92122, 92123, 92124, 92126, 92127, 92128, 92129, 92130, 92131, 92132, 92134, 92135, 92136, 92137, 92138, 92139, 92140, 92142, 92143, 92145, 92147, 92149, 92150, 92152, 92153, 92154, 92155, 92158, 92159, 92160, 92161, 92163, 92165, 92166, 92167, 92168, 92169, 92170, 92171, 92172, 92173, 92174, 92175, 92176, 92177, 92178, 92179, 92182, 92186, 92187, 92191, 92192, 92193, 92195, 92196, 92197, 92198, 92199

KAISER PERMANENTE®

Rating Area 1,3,5
Small Business Medical Rate Plans

Effective: December 1, 2025 through November 30, 2026

Counties: Amador, Sutter, Yuba, El Dorado, Placer, Sacramento, Yolo, Contra Costa

Age	Platinum 90 HMO 0/10 + Child Dental Alt	Platinum 90 HMO 0/20 + Child Dental	Gold 80 HMO 0/35 + Child Dental Alt	Gold 80 HMO 250/35 + Child Dental	Gold 80 HMO 1000/40 + Child Dental Alt	Silver 70 HMO 1900/65 + Child Dental Alt	Silver 70 HMO 2500/55 + Child Dental	Silver 70 HDHP HMO 2850/25% + Child Dental	Bronze 60 HMO 5800/60 + Child Dental	Bronze 60 HDHP HMO 6650/0 + Child Dental
0-14	$423.27	$415.52	$397.00	$383.31	$364.91	$320.23	$317.14	$298.99	$287.63	$276.17
15	$459.63	$451.19	$431.02	$416.12	$396.08	$347.42	$344.07	$324.30	$311.93	$299.45
16	$473.53	$464.83	$444.03	$428.66	$408.00	$357.82	$354.36	$333.98	$321.22	$308.35
17	$487.43	$478.46	$457.04	$441.20	$419.92	$368.22	$364.65	$343.65	$330.51	$317.26
18	$502.40	$493.15	$471.05	$454.71	$432.75	$379.42	$375.74	$354.08	$340.51	$326.84
19	$503.10	$493.57	$470.79	$453.95	$431.31	$376.35	$372.55	$350.23	$336.25	$322.16
20	$518.60	$508.78	$485.30	$467.94	$444.61	$387.95	$384.04	$361.02	$346.61	$332.09
21	$534.64	$524.51	$500.30	$482.41	$458.36	$399.94	$395.91	$372.19	$357.33	$342.36
22	$534.64	$524.51	$500.30	$482.41	$458.36	$399.94	$395.91	$372.19	$357.33	$342.36
23	$534.64	$524.51	$500.30	$482.41	$458.36	$399.94	$395.91	$372.19	$357.33	$342.36
24	$534.64	$524.51	$500.30	$482.41	$458.36	$399.94	$395.91	$372.19	$357.33	$342.36
25	$536.78	$526.61	$502.31	$484.34	$460.19	$401.54	$397.50	$373.67	$358.76	$343.73
26	$547.47	$537.10	$512.31	$493.99	$469.36	$409.54	$405.41	$381.12	$365.91	$350.57
27	$560.31	$549.69	$524.32	$505.56	$480.36	$419.14	$414.92	$390.05	$374.48	$358.79
28	$581.16	$570.15	$543.83	$524.38	$498.23	$434.74	$430.36	$404.57	$388.42	$372.14
29	$598.27	$586.93	$559.84	$539.82	$512.90	$447.54	$443.03	$416.48	$399.85	$383.10
30	$606.82	$595.32	$567.85	$547.53	$520.23	$453.94	$449.36	$422.43	$405.57	$388.57
31	$619.65	$607.91	$579.85	$559.11	$531.23	$463.54	$458.86	$431.36	$414.15	$396.79
32	$632.48	$620.50	$591.86	$570.69	$542.24	$473.13	$468.37	$440.30	$422.72	$405.01
33	$640.50	$628.37	$599.37	$577.93	$549.11	$479.13	$474.30	$445.88	$428.08	$410.14
34	$649.06	$636.76	$607.37	$585.64	$556.44	$485.53	$480.64	$451.83	$433.80	$415.62
35	$653.33	$640.95	$611.37	$589.50	$560.11	$488.73	$483.81	$454.81	$436.66	$418.36
36	$657.61	$645.15	$615.38	$593.36	$563.78	$491.93	$486.97	$457.79	$439.52	$421.10
37	$661.89	$649.35	$619.38	$597.22	$567.44	$495.13	$490.14	$460.77	$442.38	$423.84
38	$666.17	$653.54	$623.38	$601.08	$571.11	$498.33	$493.31	$463.74	$445.23	$426.58
39	$674.72	$661.94	$631.38	$608.80	$578.45	$504.73	$499.64	$469.70	$450.95	$432.05
40	$683.27	$670.33	$639.39	$616.52	$585.78	$511.13	$505.98	$475.65	$456.67	$437.53
41	$696.11	$682.92	$651.40	$628.10	$596.78	$520.73	$515.48	$484.59	$465.24	$445.75
42	$708.40	$694.98	$662.90	$639.19	$607.32	$529.93	$524.58	$493.15	$473.46	$453.62
43	$725.51	$711.76	$678.91	$654.63	$621.99	$542.72	$537.25	$505.06	$484.90	$464.58
44	$746.90	$732.74	$698.93	$673.93	$640.32	$558.72	$553.09	$519.94	$499.19	$478.27
45	$772.03	$757.40	$722.44	$696.60	$661.87	$577.52	$571.70	$537.44	$515.99	$494.36
46	$801.97	$786.77	$750.46	$723.61	$687.53	$599.92	$593.87	$558.28	$536.00	$513.53
47	$835.65	$819.81	$781.98	$754.01	$716.41	$625.11	$618.81	$581.73	$558.51	$535.10
48	$874.14	$857.58	$818.00	$788.74	$749.41	$653.91	$647.32	$608.52	$584.24	$559.75
49	$912.10	$894.82	$853.52	$822.99	$781.96	$682.30	$675.43	$634.95	$609.61	$584.06
50	$954.87	$936.78	$893.54	$861.58	$818.62	$714.30	$707.10	$664.72	$638.19	$611.45
51	$997.11	$978.22	$933.07	$899.69	$854.83	$745.90	$738.38	$694.13	$666.42	$638.49
52	$1,043.62	$1,023.85	$976.60	$941.66	$894.71	$780.69	$772.82	$726.51	$697.51	$668.28
53	$1,090.67	$1,070.01	$1,020.62	$984.11	$935.05	$815.89	$807.66	$759.26	$728.95	$698.41
54	$1,141.46	$1,119.83	$1,068.15	$1,029.94	$978.59	$853.88	$845.27	$794.62	$762.90	$730.93
55	$1,192.26	$1,169.66	$1,115.68	$1,075.77	$1,022.13	$891.88	$882.89	$829.97	$796.85	$763.45
56	$1,247.32	$1,223.69	$1,167.21	$1,125.46	$1,069.34	$933.07	$923.67	$868.31	$833.65	$798.72
57	$1,302.93	$1,278.24	$1,219.24	$1,175.63	$1,117.01	$974.66	$964.84	$907.02	$870.81	$834.32
58	$1,362.27	$1,336.46	$1,274.78	$1,229.18	$1,167.89	$1,019.06	$1,008.79	$948.33	$910.48	$872.32
59	$1,391.68	$1,365.31	$1,302.29	$1,255.71	$1,193.10	$1,041.05	$1,030.56	$968.80	$930.13	$891.15
60	$1,451.02	$1,423.53	$1,357.83	$1,309.26	$1,243.98	$1,085.45	$1,074.51	$1,010.11	$969.80	$929.16
61	$1,502.35	$1,473.88	$1,405.86	$1,355.57	$1,287.98	$1,123.84	$1,112.52	$1,045.84	$1,004.10	$962.02
62	$1,536.03	$1,506.93	$1,437.38	$1,385.96	$1,316.86	$1,149.04	$1,137.46	$1,069.29	$1,026.61	$983.59
63	$1,578.27	$1,548.36	$1,476.90	$1,424.07	$1,353.07	$1,180.63	$1,168.74	$1,098.69	$1,054.84	$1,010.64
64+	$1,603.92	$1,573.53	$1,500.90	$1,447.23	$1,375.08	$1,199.82	$1,187.73	$1,116.57	$1,071.99	$1,027.08

A SEPARATE $20 ADMINISTRATION FEE WILL BE ADDED TO CALCULATE THE SUBSCRIBER MONTHLY RATE

KAISER PERMANENTE®

Rating Area 2,6
Small Business Medical Rate Plans

Effective: December 1, 2025 through November 30, 2026

Counties (Partial): Marin, Napa, Solano, Sonoma, Alameda

Age	Platinum 90 HMO 0/10 + Child Dental Alt	Platinum 90 HMO 0/20 + Child Dental	Gold 80 HMO 0/35 + Child Dental Alt	Gold 80 HMO 250/35 + Child Dental	Gold 80 HMO 1000/40 + Child Dental Alt	Silver 70 HMO 1900/65 + Child Dental Alt	Silver 70 HMO 2500/55 + Child Dental	Silver 70 HDHP HMO 2850/25% + Child Dental	Bronze 60 HMO 5800/60 + Child Dental	Bronze 60 HDHP HMO 6650/0 + Child Dental
0-14	$444.80	$436.64	$417.15	$402.74	$383.37	$336.33	$333.08	$313.98	$302.02	$289.96
15	$483.07	$474.18	$452.96	$437.27	$416.18	$364.96	$361.42	$340.62	$327.59	$314.46
16	$497.70	$488.54	$466.65	$450.47	$428.72	$375.90	$372.26	$350.80	$337.37	$323.83
17	$512.33	$502.90	$480.34	$463.67	$441.26	$386.85	$383.09	$360.99	$347.15	$333.20
18	$528.09	$518.35	$495.09	$477.89	$454.77	$398.64	$394.76	$371.96	$357.68	$343.29
19	$529.58	$519.54	$495.57	$477.84	$454.01	$396.16	$392.16	$368.66	$353.95	$339.11
20	$545.90	$535.56	$510.84	$492.57	$468.01	$408.36	$404.25	$380.02	$364.85	$349.56
21	$562.78	$552.12	$526.64	$507.80	$482.48	$420.99	$416.75	$391.77	$376.14	$360.38
22	$562.78	$552.12	$526.64	$507.80	$482.48	$420.99	$416.75	$391.77	$376.14	$360.38
23	$562.78	$552.12	$526.64	$507.80	$482.48	$420.99	$416.75	$391.77	$376.14	$360.38
24	$562.78	$552.12	$526.64	$507.80	$482.48	$420.99	$416.75	$391.77	$376.14	$360.38
25	$565.03	$554.33	$528.74	$509.83	$484.41	$422.68	$418.42	$393.34	$377.64	$361.82
26	$576.29	$565.37	$539.28	$519.99	$494.06	$431.10	$426.75	$401.18	$385.16	$369.02
27	$589.80	$578.62	$551.92	$532.17	$505.64	$441.20	$436.75	$410.58	$394.19	$377.67
28	$611.74	$600.15	$572.45	$551.98	$524.46	$457.62	$453.01	$425.86	$408.86	$391.73
29	$629.75	$617.82	$589.31	$568.23	$539.90	$471.09	$466.34	$438.40	$420.90	$403.26
30	$638.76	$626.65	$597.73	$576.35	$547.61	$477.83	$473.01	$444.66	$426.92	$409.03
31	$652.27	$639.91	$610.37	$588.54	$559.19	$487.93	$483.01	$454.07	$435.94	$417.67
32	$665.77	$653.16	$623.01	$600.73	$570.77	$498.04	$493.02	$463.47	$444.97	$426.32
33	$674.21	$661.44	$630.91	$608.34	$578.01	$504.35	$499.27	$469.35	$450.61	$431.73
34	$683.22	$670.27	$639.34	$616.47	$585.73	$511.09	$505.94	$475.61	$456.63	$437.50
35	$687.72	$674.69	$643.55	$620.53	$589.59	$514.45	$509.27	$478.75	$459.64	$440.38
36	$692.22	$679.11	$647.76	$624.59	$593.45	$517.82	$512.60	$481.88	$462.65	$443.26
37	$696.72	$683.52	$651.98	$628.66	$597.31	$521.19	$515.94	$485.02	$465.66	$446.14
38	$701.23	$687.94	$656.19	$632.72	$601.17	$524.56	$519.27	$488.15	$468.67	$449.03
39	$710.23	$696.77	$664.62	$640.84	$608.89	$531.29	$525.94	$494.42	$474.69	$454.79
40	$719.24	$705.61	$673.04	$648.97	$616.61	$538.03	$532.61	$500.69	$480.70	$460.56
41	$732.74	$718.86	$685.68	$661.15	$628.19	$548.13	$542.61	$510.09	$489.73	$469.21
42	$745.69	$731.56	$697.79	$672.83	$639.29	$557.82	$552.19	$519.10	$498.38	$477.50
43	$763.70	$749.23	$714.65	$689.08	$654.73	$571.29	$565.53	$531.64	$510.42	$489.03
44	$786.21	$771.31	$735.71	$709.40	$674.02	$588.13	$582.20	$547.31	$525.46	$503.44
45	$812.66	$797.26	$760.46	$733.26	$696.70	$607.91	$601.79	$565.72	$543.14	$520.38
46	$844.17	$828.18	$789.96	$761.70	$723.72	$631.49	$625.13	$587.66	$564.21	$540.56
47	$879.63	$862.96	$823.13	$793.69	$754.12	$658.01	$651.38	$612.34	$587.90	$563.27
48	$920.15	$902.71	$861.05	$830.25	$788.85	$688.32	$681.39	$640.55	$614.98	$589.21
49	$960.11	$941.91	$898.44	$866.31	$823.11	$718.22	$710.98	$668.37	$641.69	$614.80
50	$1,005.13	$986.08	$940.57	$906.93	$861.71	$751.89	$744.32	$699.71	$671.78	$643.63
51	$1,049.59	$1,029.70	$982.18	$947.05	$899.83	$785.15	$777.24	$730.66	$701.50	$672.10
52	$1,098.55	$1,077.74	$1,028.00	$991.22	$941.80	$821.78	$813.50	$764.74	$734.22	$703.45
53	$1,148.08	$1,126.32	$1,074.34	$1,035.91	$984.26	$858.83	$850.17	$799.22	$767.32	$735.17
54	$1,201.54	$1,178.77	$1,124.37	$1,084.15	$1,030.09	$898.82	$889.76	$836.44	$803.05	$769.40
55	$1,255.01	$1,231.22	$1,174.40	$1,132.39	$1,075.93	$938.82	$929.35	$873.66	$838.79	$803.64
56	$1,312.97	$1,288.09	$1,228.64	$1,184.70	$1,125.63	$982.18	$972.28	$914.01	$877.53	$840.76
57	$1,371.50	$1,345.51	$1,283.41	$1,237.51	$1,175.80	$1,025.96	$1,015.62	$954.75	$916.65	$878.23
58	$1,433.97	$1,406.80	$1,341.87	$1,293.87	$1,229.36	$1,072.69	$1,061.88	$998.24	$958.40	$918.24
59	$1,464.92	$1,437.17	$1,370.84	$1,321.80	$1,255.90	$1,095.85	$1,084.80	$1,019.79	$979.09	$938.06
60	$1,527.39	$1,498.45	$1,429.29	$1,378.17	$1,309.45	$1,142.58	$1,131.06	$1,063.28	$1,020.84	$978.06
61	$1,581.42	$1,551.45	$1,479.85	$1,426.92	$1,355.77	$1,182.99	$1,171.07	$1,100.89	$1,056.95	$1,012.65
62	$1,616.87	$1,586.24	$1,513.03	$1,458.91	$1,386.16	$1,209.52	$1,197.32	$1,125.57	$1,080.64	$1,035.36
63	$1,661.33	$1,629.85	$1,554.63	$1,499.02	$1,424.28	$1,242.77	$1,230.25	$1,156.52	$1,110.36	$1,063.83
64+	$1,688.34	$1,656.36	$1,579.92	$1,523.40	$1,447.44	$1,262.97	$1,250.25	$1,175.31	$1,128.42	$1,081.14

A SEPARATE $20 ADMINISTRATION FEE WILL BE ADDED TO CALCULATE THE SUBSCRIBER MONTHLY RATE

KAISER PERMANENTE

Rating Area 4,8
Small Business Medical Rate Plans

Effective: December 1, 2025 through November 30, 2026

Counties: San Francisco, San Mateo

Age	Platinum 90 HMO 0/10 + Child Dental Alt	Platinum 90 HMO 0/20 + Child Dental	Gold 80 HMO 0/35 + Child Dental Alt	Gold 80 HMO 250/35 + Child Dental	Gold 80 HMO 1000/40 + Child Dental Alt	Silver 70 HMO 1900/65 + Child Dental Alt	Silver 70 HMO 2500/55 + Child Dental	Silver 70 HDHP HMO 2850/25% + Child Dental	Bronze 60 HMO 5800/60 + Child Dental	Bronze 60 HDHP HMO 6650/0 + Child Dental
0-14	$466.33	$457.76	$437.29	$422.16	$401.82	$352.43	$349.02	$328.96	$316.40	$303.74
15	$506.51	$497.18	$474.89	$458.42	$436.27	$382.49	$378.78	$356.94	$343.26	$329.47
16	$521.87	$512.25	$489.27	$472.28	$449.44	$393.99	$390.16	$367.63	$353.53	$339.31
17	$537.24	$527.33	$503.65	$486.14	$462.61	$405.48	$401.54	$378.33	$363.80	$349.15
18	$553.78	$543.56	$519.13	$501.07	$476.80	$417.86	$413.79	$389.84	$374.85	$359.74
19	$556.06	$545.52	$520.34	$501.73	$476.71	$415.96	$411.77	$387.09	$371.64	$356.07
20	$573.19	$562.33	$536.38	$517.19	$491.41	$428.78	$424.46	$399.02	$383.10	$367.04
21	$590.92	$579.72	$552.97	$533.19	$506.60	$442.04	$437.59	$411.36	$394.94	$378.39
22	$590.92	$579.72	$552.97	$533.19	$506.60	$442.04	$437.59	$411.36	$394.94	$378.39
23	$590.92	$579.72	$552.97	$533.19	$506.60	$442.04	$437.59	$411.36	$394.94	$378.39
24	$590.92	$579.72	$552.97	$533.19	$506.60	$442.04	$437.59	$411.36	$394.94	$378.39
25	$593.29	$582.04	$555.18	$535.32	$508.63	$443.81	$439.34	$413.01	$396.52	$379.91
26	$605.10	$593.64	$566.24	$545.99	$518.76	$452.65	$448.09	$421.24	$404.42	$387.48
27	$619.29	$607.55	$579.51	$558.78	$530.92	$463.26	$458.59	$431.11	$413.90	$396.56
28	$642.33	$630.16	$601.08	$579.58	$550.68	$480.50	$475.66	$447.15	$429.30	$411.31
29	$661.24	$648.71	$618.77	$596.64	$566.89	$494.65	$489.66	$460.32	$441.94	$423.42
30	$670.70	$657.99	$627.62	$605.17	$575.00	$501.72	$496.66	$466.90	$448.26	$429.48
31	$684.88	$671.90	$640.89	$617.97	$587.15	$512.33	$507.16	$476.77	$457.74	$438.56
32	$699.06	$685.81	$654.16	$630.76	$599.31	$522.94	$517.67	$486.64	$467.22	$447.64
33	$707.92	$694.51	$662.46	$638.76	$606.91	$529.57	$524.23	$492.81	$473.14	$453.32
34	$717.38	$703.79	$671.30	$647.29	$615.02	$536.64	$531.23	$499.39	$479.46	$459.37
35	$722.11	$708.42	$675.73	$651.56	$619.07	$540.18	$534.73	$502.69	$482.62	$462.40
36	$726.83	$713.06	$680.15	$655.82	$623.12	$543.71	$538.23	$505.98	$485.78	$465.42
37	$731.56	$717.70	$684.58	$660.09	$627.18	$547.25	$541.73	$509.27	$488.94	$468.45
38	$736.29	$722.34	$689.00	$664.35	$631.23	$550.79	$545.23	$512.56	$492.10	$471.48
39	$745.74	$731.61	$697.85	$672.88	$639.33	$557.86	$552.24	$519.14	$498.42	$477.53
40	$755.20	$740.89	$706.69	$681.42	$647.44	$564.93	$559.24	$525.72	$504.74	$483.59
41	$769.38	$754.80	$719.97	$694.21	$659.60	$575.54	$569.74	$535.59	$514.22	$492.67
42	$782.97	$768.14	$732.68	$706.48	$671.25	$585.71	$579.80	$545.06	$523.30	$501.37
43	$801.88	$786.69	$750.38	$723.54	$687.46	$599.85	$593.81	$558.22	$535.94	$513.48
44	$825.52	$809.88	$772.50	$744.87	$707.73	$617.53	$611.31	$574.67	$551.74	$528.62
45	$853.29	$837.12	$798.49	$769.93	$731.54	$638.31	$631.88	$594.01	$570.30	$546.40
46	$886.38	$869.59	$829.45	$799.78	$759.91	$663.07	$656.38	$617.04	$592.42	$567.59
47	$923.61	$906.11	$864.29	$833.37	$791.82	$690.91	$683.95	$642.96	$617.30	$591.43
48	$966.16	$947.85	$904.10	$871.76	$828.30	$722.74	$715.46	$672.58	$645.73	$618.67
49	$1,008.11	$989.01	$943.36	$909.62	$864.27	$754.13	$746.53	$701.79	$673.78	$645.54
50	$1,055.39	$1,035.39	$987.60	$952.28	$904.79	$789.49	$781.53	$734.69	$705.37	$675.81
51	$1,102.07	$1,081.19	$1,031.29	$994.40	$944.82	$824.41	$816.10	$767.19	$736.57	$705.70
52	$1,153.48	$1,131.62	$1,079.39	$1,040.79	$988.89	$862.87	$854.17	$802.98	$770.93	$738.63
53	$1,205.48	$1,182.64	$1,128.06	$1,087.71	$1,033.47	$901.77	$892.68	$839.18	$805.69	$771.92
54	$1,261.62	$1,237.71	$1,180.59	$1,138.36	$1,081.60	$943.76	$934.25	$878.26	$843.21	$807.87
55	$1,317.76	$1,292.79	$1,233.12	$1,189.01	$1,129.73	$985.76	$975.82	$917.34	$880.73	$843.82
56	$1,378.62	$1,352.50	$1,290.08	$1,243.93	$1,181.91	$1,031.29	$1,020.89	$959.71	$921.41	$882.79
57	$1,440.08	$1,412.79	$1,347.58	$1,299.38	$1,234.59	$1,077.26	$1,066.40	$1,002.49	$962.48	$922.15
58	$1,505.67	$1,477.14	$1,408.96	$1,358.57	$1,290.83	$1,126.33	$1,114.97	$1,048.15	$1,006.32	$964.15
59	$1,538.17	$1,509.02	$1,439.38	$1,387.89	$1,318.69	$1,150.64	$1,139.04	$1,070.78	$1,028.04	$984.96
60	$1,603.76	$1,573.37	$1,500.76	$1,447.08	$1,374.92	$1,199.71	$1,187.61	$1,116.44	$1,071.88	$1,026.96
61	$1,660.49	$1,629.03	$1,553.84	$1,498.26	$1,423.56	$1,242.14	$1,229.62	$1,155.93	$1,109.79	$1,063.29
62	$1,697.72	$1,665.55	$1,588.68	$1,531.85	$1,455.47	$1,269.99	$1,257.19	$1,181.85	$1,134.68	$1,087.13
63	$1,744.40	$1,711.35	$1,632.36	$1,573.97	$1,495.49	$1,304.91	$1,291.76	$1,214.34	$1,165.88	$1,117.02
64+	$1,772.76	$1,739.16	$1,658.91	$1,599.57	$1,519.80	$1,326.12	$1,312.77	$1,234.08	$1,184.82	$1,135.17

A SEPARATE $20 ADMINISTRATION FEE WILL BE ADDED TO CALCULATE THE SUBSCRIBER MONTHLY RATE

KAISER PERMANENTE®

Rating Area 7
Small Business Medical Rate Plans

Effective: December 1, 2025 through November 30, 2026

Counties: Santa Clara

Age	Platinum 90 HMO 0/10 + Child Dental Alt	Platinum 90 HMO 0/20 + Child Dental	Gold 80 HMO 0/35 + Child Dental Alt	Gold 80 HMO 250/35 + Child Dental	Gold 80 HMO 1000/40 + Child Dental Alt	Silver 70 HMO 1900/65 + Child Dental Alt	Silver 70 HMO 2500/55 + Child Dental	Silver 70 HDHP HMO 2850/25% + Child Dental	Bronze 60 HMO 5800/60 + Child Dental	Bronze 60 HDHP HMO 6650/0 + Child Dental
0-14	$457.71	$449.31	$429.23	$414.39	$394.44	$345.99	$342.65	$322.97	$310.65	$298.23
15	$497.13	$487.98	$466.12	$449.96	$428.23	$375.48	$371.84	$350.41	$336.99	$323.47
16	$512.20	$502.77	$480.22	$463.56	$441.15	$386.75	$383.00	$360.90	$347.07	$333.12
17	$527.27	$517.55	$494.33	$477.15	$454.07	$398.03	$394.16	$371.39	$357.14	$342.77
18	$543.51	$533.48	$509.51	$491.80	$467.99	$410.17	$406.18	$382.69	$367.99	$353.16
19	$545.47	$535.13	$510.43	$492.17	$467.63	$408.04	$403.93	$379.72	$364.56	$349.29
20	$562.28	$551.62	$526.16	$507.34	$482.05	$420.61	$416.38	$391.42	$375.80	$360.05
21	$579.67	$568.68	$542.44	$523.03	$496.95	$433.62	$429.25	$403.53	$387.42	$371.19
22	$579.67	$568.68	$542.44	$523.03	$496.95	$433.62	$429.25	$403.53	$387.42	$371.19
23	$579.67	$568.68	$542.44	$523.03	$496.95	$433.62	$429.25	$403.53	$387.42	$371.19
24	$579.67	$568.68	$542.44	$523.03	$496.95	$433.62	$429.25	$403.53	$387.42	$371.19
25	$581.98	$570.96	$544.61	$525.13	$498.94	$435.36	$430.97	$405.14	$388.97	$372.67
26	$593.58	$582.33	$555.45	$535.59	$508.88	$444.03	$439.56	$413.21	$396.72	$380.09
27	$607.49	$595.98	$568.47	$548.14	$520.81	$454.44	$449.86	$422.90	$406.02	$389.00
28	$630.10	$618.16	$589.63	$568.54	$540.19	$471.35	$466.60	$438.63	$421.13	$403.48
29	$648.65	$636.36	$606.99	$585.27	$556.09	$485.22	$480.33	$451.55	$433.52	$415.36
30	$657.92	$645.45	$615.66	$593.64	$564.04	$492.16	$487.20	$458.00	$439.72	$421.30
31	$671.83	$659.10	$628.68	$606.20	$575.97	$502.57	$497.50	$467.69	$449.02	$430.21
32	$685.75	$672.75	$641.70	$618.75	$587.90	$512.98	$507.81	$477.37	$458.32	$439.11
33	$694.44	$681.28	$649.84	$626.59	$595.35	$519.48	$514.25	$483.43	$464.13	$444.68
34	$703.71	$690.38	$658.52	$634.96	$603.30	$526.42	$521.11	$489.88	$470.33	$450.62
35	$708.35	$694.93	$662.86	$639.15	$607.28	$529.89	$524.55	$493.11	$473.43	$453.59
36	$712.99	$699.48	$667.20	$643.33	$611.25	$533.36	$527.98	$496.34	$476.53	$456.56
37	$717.63	$704.03	$671.54	$647.52	$615.23	$536.83	$531.42	$499.57	$479.63	$459.53
38	$722.26	$708.58	$675.88	$651.70	$619.21	$540.29	$534.85	$502.80	$482.73	$462.50
39	$731.54	$717.68	$684.55	$660.07	$627.16	$547.23	$541.72	$509.25	$488.93	$468.44
40	$740.81	$726.78	$693.23	$668.44	$635.11	$554.17	$548.59	$515.71	$495.12	$474.38
41	$754.73	$740.42	$706.25	$680.99	$647.03	$564.58	$558.89	$525.39	$504.42	$483.28
42	$768.06	$753.50	$718.73	$693.02	$658.46	$574.55	$568.76	$534.67	$513.33	$491.82
43	$786.61	$771.70	$736.09	$709.76	$674.37	$588.43	$582.50	$547.59	$525.73	$503.70
44	$809.79	$794.45	$757.78	$730.68	$694.25	$605.77	$599.67	$563.73	$541.23	$518.55
45	$837.04	$821.18	$783.28	$755.26	$717.60	$626.15	$619.84	$582.69	$559.44	$535.99
46	$869.50	$853.02	$813.65	$784.55	$745.43	$650.44	$643.88	$605.29	$581.13	$556.78
47	$906.02	$888.85	$847.83	$817.50	$776.74	$677.75	$670.92	$630.71	$605.54	$580.16
48	$947.75	$929.80	$886.88	$855.16	$812.52	$708.97	$701.83	$659.77	$633.43	$606.89
49	$988.91	$970.17	$925.40	$892.29	$847.80	$739.76	$732.31	$688.42	$660.94	$633.24
50	$1,035.28	$1,015.67	$968.79	$934.14	$887.56	$774.45	$766.65	$720.70	$691.94	$662.94
51	$1,081.08	$1,060.59	$1,011.64	$975.46	$926.82	$808.71	$800.56	$752.58	$722.54	$692.26
52	$1,131.51	$1,110.07	$1,058.83	$1,020.96	$970.05	$846.43	$837.90	$787.69	$756.25	$724.56
53	$1,182.52	$1,160.11	$1,106.57	$1,066.99	$1,013.79	$884.59	$875.68	$823.20	$790.34	$757.22
54	$1,237.59	$1,214.14	$1,158.10	$1,116.68	$1,061.00	$925.79	$916.46	$861.53	$827.15	$792.48
55	$1,292.66	$1,268.16	$1,209.63	$1,166.36	$1,108.21	$966.98	$957.23	$899.87	$863.95	$827.75
56	$1,352.36	$1,326.74	$1,265.50	$1,220.24	$1,159.39	$1,011.64	$1,001.45	$941.43	$903.85	$865.98
57	$1,412.65	$1,385.88	$1,321.92	$1,274.63	$1,211.08	$1,056.74	$1,046.09	$983.40	$944.15	$904.58
58	$1,476.99	$1,449.00	$1,382.13	$1,332.69	$1,266.24	$1,104.87	$1,093.74	$1,028.19	$987.15	$945.78
59	$1,508.87	$1,480.28	$1,411.96	$1,361.46	$1,293.57	$1,128.72	$1,117.35	$1,050.38	$1,008.46	$966.20
60	$1,573.21	$1,543.40	$1,472.17	$1,419.51	$1,348.73	$1,176.85	$1,164.99	$1,095.17	$1,051.46	$1,007.40
61	$1,628.86	$1,598.00	$1,524.24	$1,469.72	$1,396.44	$1,218.48	$1,206.20	$1,133.91	$1,088.65	$1,043.03
62	$1,665.38	$1,633.82	$1,558.42	$1,502.67	$1,427.75	$1,245.80	$1,233.24	$1,159.34	$1,113.06	$1,066.42
63	$1,711.17	$1,678.75	$1,601.27	$1,543.99	$1,467.01	$1,280.06	$1,267.16	$1,191.21	$1,143.67	$1,095.74
64+	$1,739.01	$1,706.04	$1,627.32	$1,569.09	$1,490.85	$1,300.86	$1,287.75	$1,210.59	$1,162.26	$1,113.57

A SEPARATE $20 ADMINISTRATION FEE WILL BE ADDED TO CALCULATE THE SUBSCRIBER MONTHLY RATE

KAISER PERMANENTE®

Rating Area 9
Small Business Medical Rate Plans

Effective: December 1, 2025 through November 30, 2026

Counties: Santa Cruz

Age	Platinum 90 HMO 0/10 + Child Dental Alt	Platinum 90 HMO 0/20 + Child Dental	Gold 80 HMO 0/35 + Child Dental Alt	Gold 80 HMO 250/35 + Child Dental	Gold 80 HMO 1000/40 + Child Dental Alt	Silver 70 HMO 1900/65 + Child Dental Alt	Silver 70 HMO 2500/55 + Child Dental	Silver 70 HDHP HMO 2850/25% + Child Dental	Bronze 60 HMO 5800/60 + Child Dental	Bronze 60 HDHP HMO 6650/0 + Child Dental
0-14	$440.34	$432.27	$412.98	$398.71	$379.55	$333.00	$329.78	$310.87	$299.04	$287.10
15	$478.21	$469.42	$448.42	$432.89	$412.01	$361.33	$357.83	$337.24	$324.35	$311.35
16	$492.70	$483.63	$461.97	$445.95	$424.43	$372.16	$368.55	$347.32	$334.03	$320.63
17	$507.18	$497.84	$475.52	$459.02	$436.84	$382.99	$379.28	$357.40	$343.71	$329.90
18	$522.77	$513.14	$490.11	$473.09	$450.21	$394.66	$390.82	$368.26	$354.13	$339.89
19	$524.10	$514.17	$490.43	$472.89	$449.31	$392.05	$388.10	$364.84	$350.28	$335.60
20	$540.25	$530.01	$505.55	$487.47	$463.16	$404.14	$400.06	$376.09	$361.08	$345.94
21	$556.96	$546.40	$521.18	$502.54	$477.48	$416.64	$412.44	$387.72	$372.24	$356.64
22	$556.96	$546.40	$521.18	$502.54	$477.48	$416.64	$412.44	$387.72	$372.24	$356.64
23	$556.96	$546.40	$521.18	$502.54	$477.48	$416.64	$412.44	$387.72	$372.24	$356.64
24	$556.96	$546.40	$521.18	$502.54	$477.48	$416.64	$412.44	$387.72	$372.24	$356.64
25	$559.18	$548.59	$523.27	$504.55	$479.39	$418.30	$414.09	$389.27	$373.73	$358.07
26	$570.32	$559.52	$533.69	$514.60	$488.94	$426.63	$422.33	$397.02	$381.18	$365.20
27	$583.69	$572.63	$546.20	$526.66	$500.40	$436.63	$432.23	$406.33	$390.11	$373.76
28	$605.41	$593.94	$566.53	$546.26	$519.03	$452.88	$448.32	$421.45	$404.63	$387.67
29	$623.23	$611.42	$583.21	$562.34	$534.31	$466.21	$461.52	$433.86	$416.54	$399.08
30	$632.15	$620.17	$591.54	$570.39	$541.95	$472.88	$468.11	$440.06	$422.50	$404.79
31	$645.51	$633.28	$604.05	$582.45	$553.40	$482.88	$478.01	$449.37	$431.43	$413.35
32	$658.88	$646.39	$616.56	$594.51	$564.86	$492.88	$487.91	$458.67	$440.36	$421.91
33	$667.23	$654.59	$624.38	$602.05	$572.03	$499.13	$494.10	$464.49	$445.95	$427.26
34	$676.14	$663.33	$632.72	$610.09	$579.67	$505.80	$500.70	$470.69	$451.90	$432.97
35	$680.60	$667.70	$636.89	$614.11	$583.49	$509.13	$504.00	$473.79	$454.88	$435.82
36	$685.06	$672.08	$641.06	$618.13	$587.31	$512.46	$507.30	$476.89	$457.86	$438.67
37	$689.51	$676.45	$645.23	$622.15	$591.13	$515.79	$510.60	$480.00	$460.84	$441.53
38	$693.97	$680.82	$649.40	$626.17	$594.95	$519.13	$513.90	$483.10	$463.82	$444.38
39	$702.88	$689.56	$657.73	$634.21	$602.59	$525.79	$520.49	$489.30	$469.77	$450.09
40	$711.79	$698.30	$666.07	$642.25	$610.23	$532.46	$527.09	$495.50	$475.73	$455.79
41	$725.16	$711.42	$678.58	$654.31	$621.69	$542.46	$536.99	$504.81	$484.66	$464.35
42	$737.97	$723.98	$690.57	$665.87	$632.67	$552.04	$546.48	$513.73	$493.22	$472.55
43	$755.79	$741.47	$707.25	$681.95	$647.95	$565.37	$559.68	$526.13	$505.13	$483.97
44	$778.07	$763.32	$728.09	$702.05	$667.05	$582.04	$576.17	$541.64	$520.02	$498.23
45	$804.24	$789.01	$752.59	$725.67	$689.49	$601.62	$595.56	$559.87	$537.52	$514.99
46	$835.43	$819.60	$781.78	$753.81	$716.23	$624.95	$618.65	$581.58	$558.37	$534.97
47	$870.52	$854.03	$814.61	$785.47	$746.31	$651.20	$644.64	$606.00	$581.82	$557.44
48	$910.62	$893.37	$852.14	$821.66	$780.69	$681.20	$674.33	$633.92	$608.62	$583.11
49	$950.17	$932.16	$889.14	$857.34	$814.59	$710.78	$703.62	$661.45	$635.05	$608.44
50	$994.72	$975.88	$930.84	$897.54	$852.79	$744.11	$736.61	$692.47	$664.83	$636.97
51	$1,038.72	$1,019.04	$972.01	$937.24	$890.51	$777.02	$769.19	$723.10	$694.23	$665.14
52	$1,087.18	$1,066.58	$1,017.35	$980.96	$932.05	$813.27	$805.08	$756.83	$726.62	$696.17
53	$1,136.19	$1,114.66	$1,063.22	$1,025.19	$974.07	$849.94	$841.37	$790.95	$759.38	$727.55
54	$1,189.10	$1,166.57	$1,112.73	$1,072.93	$1,019.43	$889.52	$880.55	$827.78	$794.74	$761.44
55	$1,242.01	$1,218.48	$1,162.24	$1,120.67	$1,064.79	$929.10	$919.73	$864.61	$830.10	$795.32
56	$1,299.38	$1,274.76	$1,215.92	$1,172.43	$1,113.97	$972.01	$962.21	$904.55	$868.44	$832.05
57	$1,357.30	$1,331.58	$1,270.13	$1,224.70	$1,163.63	$1,015.34	$1,005.11	$944.87	$907.16	$869.14
58	$1,419.12	$1,392.23	$1,327.98	$1,280.48	$1,216.63	$1,061.59	$1,050.89	$987.91	$948.48	$908.73
59	$1,449.76	$1,422.29	$1,356.64	$1,308.12	$1,242.89	$1,084.50	$1,073.57	$1,009.23	$968.95	$928.35
60	$1,511.58	$1,482.94	$1,414.50	$1,363.90	$1,295.89	$1,130.75	$1,119.35	$1,052.27	$1,010.27	$967.93
61	$1,565.05	$1,535.39	$1,464.53	$1,412.14	$1,341.73	$1,170.75	$1,158.95	$1,089.49	$1,046.00	$1,002.17
62	$1,600.14	$1,569.82	$1,497.36	$1,443.80	$1,371.81	$1,196.99	$1,184.93	$1,113.92	$1,069.46	$1,024.64
63	$1,644.13	$1,612.98	$1,538.54	$1,483.50	$1,409.54	$1,229.91	$1,217.51	$1,144.55	$1,098.86	$1,052.81
64+	$1,670.88	$1,639.20	$1,563.54	$1,507.62	$1,432.44	$1,249.92	$1,237.32	$1,163.16	$1,116.72	$1,069.92

A SEPARATE $20 ADMINISTRATION FEE WILL BE ADDED TO CALCULATE THE SUBSCRIBER MONTHLY RATE

KAISER PERMANENTE®

Rating Area 10
Small Business Medical Rate Plans

Effective: December 1, 2025 through November 30, 2026

Counties: Mariposa, San Joaquin, Stanislaus, Tulare

Age	Platinum 90 HMO 0/10 + Child Dental Alt	Platinum 90 HMO 0/20 + Child Dental	Gold 80 HMO 0/35 + Child Dental Alt	Gold 80 HMO 250/35 + Child Dental	Gold 80 HMO 1000/40 + Child Dental Alt	Silver 70 HMO 1900/65 + Child Dental Alt	Silver 70 HMO 2500/55 + Child Dental	Silver 70 HDHP HMO 2850/25% + Child Dental	Bronze 60 HMO 5800/60 + Child Dental	Bronze 60 HDHP HMO 6650/0 + Child Dental
0-14	$401.75	$394.40	$376.86	$363.89	$346.46	$304.12	$301.20	$284.01	$273.24	$262.39
15	$436.19	$428.19	$409.09	$394.97	$375.99	$329.89	$326.71	$307.98	$296.26	$284.44
16	$449.36	$441.11	$421.41	$406.85	$387.28	$339.74	$336.46	$317.15	$305.06	$292.88
17	$462.53	$454.03	$433.74	$418.73	$398.57	$349.59	$346.21	$326.32	$313.86	$301.31
18	$476.71	$467.95	$447.01	$431.53	$410.72	$360.20	$356.71	$336.19	$323.34	$310.39
19	$476.62	$467.59	$446.01	$430.06	$408.61	$356.54	$352.95	$331.79	$318.55	$305.20
20	$491.31	$482.00	$459.75	$443.31	$421.21	$367.53	$363.82	$342.02	$328.37	$314.61
21	$506.50	$496.91	$473.97	$457.02	$434.23	$378.89	$375.08	$352.60	$338.52	$324.34
22	$506.50	$496.91	$473.97	$457.02	$434.23	$378.89	$375.08	$352.60	$338.52	$324.34
23	$506.50	$496.91	$473.97	$457.02	$434.23	$378.89	$375.08	$352.60	$338.52	$324.34
24	$506.50	$496.91	$473.97	$457.02	$434.23	$378.89	$375.08	$352.60	$338.52	$324.34
25	$508.53	$498.89	$475.87	$458.85	$435.97	$380.41	$376.58	$354.01	$339.88	$325.64
26	$518.66	$508.83	$485.35	$467.99	$444.65	$387.99	$384.08	$361.06	$346.65	$332.12
27	$530.82	$520.76	$496.72	$478.96	$455.08	$397.08	$393.08	$369.52	$354.77	$339.91
28	$550.57	$540.14	$515.21	$496.78	$472.01	$411.86	$407.71	$383.27	$367.98	$352.56
29	$566.78	$556.04	$530.38	$511.40	$485.91	$423.98	$419.71	$394.56	$378.81	$362.93
30	$574.88	$563.99	$537.96	$518.72	$492.85	$430.05	$425.71	$400.20	$384.22	$368.12
31	$587.04	$575.92	$549.33	$529.69	$503.27	$439.14	$434.71	$408.66	$392.35	$375.91
32	$599.19	$587.84	$560.71	$540.65	$513.70	$448.23	$443.71	$417.12	$400.47	$383.69
33	$606.79	$595.29	$567.82	$547.51	$520.21	$453.92	$449.34	$422.41	$405.55	$388.56
34	$614.90	$603.25	$575.40	$554.82	$527.16	$459.98	$455.34	$428.05	$410.97	$393.75
35	$618.95	$607.22	$579.20	$558.48	$530.63	$463.01	$458.34	$430.87	$413.68	$396.34
36	$623.00	$611.20	$582.99	$562.13	$534.11	$466.04	$461.34	$433.69	$416.38	$398.94
37	$627.05	$615.17	$586.78	$565.79	$537.58	$469.07	$464.34	$436.52	$419.09	$401.53
38	$631.10	$619.15	$590.57	$569.45	$541.05	$472.10	$467.34	$439.34	$421.80	$404.12
39	$639.21	$627.10	$598.15	$576.76	$548.00	$478.16	$473.35	$444.98	$427.22	$409.31
40	$647.31	$635.05	$605.74	$584.07	$554.95	$484.23	$479.35	$450.62	$432.63	$414.50
41	$659.47	$646.97	$617.11	$595.04	$565.37	$493.32	$488.35	$459.08	$440.76	$422.29
42	$671.12	$658.40	$628.01	$605.55	$575.36	$502.04	$496.98	$467.19	$448.54	$429.75
43	$687.33	$674.30	$643.18	$620.18	$589.25	$514.16	$508.98	$478.47	$459.38	$440.13
44	$707.59	$694.18	$662.14	$638.46	$606.62	$529.32	$523.98	$492.58	$472.92	$453.10
45	$731.39	$717.53	$684.42	$659.94	$627.03	$547.12	$541.61	$509.15	$488.83	$468.34
46	$759.76	$745.36	$710.96	$685.53	$651.35	$568.34	$562.61	$528.90	$507.79	$486.51
47	$791.67	$776.67	$740.82	$714.32	$678.70	$592.21	$586.24	$551.11	$529.11	$506.94
48	$828.13	$812.44	$774.95	$747.23	$709.97	$619.49	$613.25	$576.50	$553.49	$530.29
49	$864.10	$847.72	$808.60	$779.67	$740.80	$646.39	$639.88	$601.53	$577.52	$553.32
50	$904.62	$887.48	$846.52	$816.24	$775.54	$676.71	$669.88	$629.74	$604.60	$579.27
51	$944.63	$926.73	$883.96	$852.34	$809.84	$706.64	$699.52	$657.59	$631.35	$604.89
52	$988.70	$969.96	$925.20	$892.10	$847.62	$739.60	$732.15	$688.27	$660.80	$633.11
53	$1,033.27	$1,013.69	$966.91	$932.32	$885.83	$772.94	$765.15	$719.30	$690.59	$661.65
54	$1,081.39	$1,060.90	$1,011.93	$975.74	$927.09	$808.94	$800.79	$752.79	$722.75	$692.46
55	$1,129.50	$1,108.10	$1,056.96	$1,019.15	$968.34	$844.93	$836.42	$786.29	$754.91	$723.27
56	$1,181.67	$1,159.28	$1,105.78	$1,066.23	$1,013.06	$883.96	$875.05	$822.61	$789.78	$756.68
57	$1,234.35	$1,210.96	$1,155.07	$1,113.76	$1,058.22	$923.37	$914.06	$859.28	$824.98	$790.41
58	$1,290.57	$1,266.12	$1,207.68	$1,164.49	$1,106.42	$965.42	$955.69	$898.42	$862.56	$826.41
59	$1,318.43	$1,293.45	$1,233.75	$1,189.62	$1,130.31	$986.26	$976.32	$917.81	$881.18	$844.25
60	$1,374.65	$1,348.61	$1,286.36	$1,240.35	$1,178.51	$1,028.32	$1,017.95	$956.95	$918.75	$880.25
61	$1,423.28	$1,396.31	$1,331.86	$1,284.22	$1,220.19	$1,064.69	$1,053.96	$990.80	$951.25	$911.39
62	$1,455.19	$1,427.61	$1,361.72	$1,313.02	$1,247.55	$1,088.56	$1,077.59	$1,013.01	$972.58	$931.82
63	$1,495.20	$1,466.87	$1,399.17	$1,349.12	$1,281.85	$1,118.50	$1,107.22	$1,040.87	$999.32	$957.44
64+	$1,519.50	$1,490.73	$1,421.91	$1,371.06	$1,302.69	$1,136.67	$1,125.24	$1,057.80	$1,015.56	$973.02

A SEPARATE $20 ADMINISTRATION FEE WILL BE ADDED TO CALCULATE THE SUBSCRIBER MONTHLY RATE

KAISER PERMANENTE®

Rating Area 11
Small Business Medical Rate Plans

Effective: December 1, 2025 through November 30, 2026

Counties: Fresno, Kings, Madera

Age	Platinum 90 HMO 0/10 + Child Dental Alt	Platinum 90 HMO 0/20 + Child Dental	Gold 80 HMO 0/35 + Child Dental Alt	Gold 80 HMO 250/35 + Child Dental	Gold 80 HMO 1000/40 + Child Dental Alt	Silver 70 HMO 1900/65 + Child Dental Alt	Silver 70 HMO 2500/55 + Child Dental	Silver 70 HDHP HMO 2850/25% + Child Dental	Bronze 60 HMO 5800/60 + Child Dental	Bronze 60 HDHP HMO 6650/0 + Child Dental
0-14	$390.12	$383.00	$365.98	$353.40	$336.49	$295.43	$292.59	$275.91	$265.47	$254.94
15	$423.53	$415.78	$397.25	$383.55	$365.13	$320.42	$317.33	$299.17	$287.80	$276.34
16	$436.30	$428.31	$409.20	$395.07	$376.09	$329.98	$326.79	$308.06	$296.34	$284.52
17	$449.08	$440.84	$421.15	$406.60	$387.04	$339.53	$336.25	$316.96	$304.88	$292.70
18	$462.84	$454.34	$434.03	$419.01	$398.83	$349.82	$346.44	$326.53	$314.07	$301.51
19	$462.32	$453.56	$432.63	$417.15	$396.35	$345.84	$342.36	$321.84	$308.99	$296.05
20	$476.57	$467.54	$445.96	$430.01	$408.57	$356.50	$352.91	$331.76	$318.52	$305.17
21	$491.31	$482.00	$459.75	$443.31	$421.21	$367.53	$363.82	$342.02	$328.37	$314.61
22	$491.31	$482.00	$459.75	$443.31	$421.21	$367.53	$363.82	$342.02	$328.37	$314.61
23	$491.31	$482.00	$459.75	$443.31	$421.21	$367.53	$363.82	$342.02	$328.37	$314.61
24	$491.31	$482.00	$459.75	$443.31	$421.21	$367.53	$363.82	$342.02	$328.37	$314.61
25	$493.27	$483.93	$461.59	$445.08	$422.89	$369.00	$365.28	$343.39	$329.68	$315.87
26	$503.10	$493.57	$470.79	$453.95	$431.31	$376.35	$372.55	$350.23	$336.25	$322.16
27	$514.89	$505.14	$481.82	$464.59	$441.42	$385.17	$381.29	$358.44	$344.13	$329.71
28	$534.05	$523.93	$499.75	$481.88	$457.85	$399.50	$395.48	$371.77	$356.94	$341.98
29	$549.78	$539.36	$514.46	$496.06	$471.33	$411.26	$407.12	$382.72	$367.44	$352.05
30	$557.64	$547.07	$521.82	$503.16	$478.07	$417.14	$412.94	$388.19	$372.70	$357.08
31	$569.43	$558.64	$532.85	$513.79	$488.18	$425.96	$421.67	$396.40	$380.58	$364.63
32	$581.22	$570.21	$543.89	$524.43	$498.29	$434.79	$430.40	$404.61	$388.46	$372.18
33	$588.59	$577.44	$550.79	$531.08	$504.60	$440.30	$435.86	$409.74	$393.38	$376.90
34	$596.45	$585.15	$558.14	$538.18	$511.34	$446.18	$441.68	$415.21	$398.64	$381.93
35	$600.38	$589.00	$561.82	$541.72	$514.71	$449.12	$444.59	$417.95	$401.27	$384.45
36	$604.31	$592.86	$565.50	$545.27	$518.08	$452.06	$447.50	$420.68	$403.89	$386.97
37	$608.24	$596.72	$569.18	$548.82	$521.45	$455.00	$450.41	$423.42	$406.52	$389.48
38	$612.17	$600.57	$572.85	$552.36	$524.82	$457.94	$453.32	$426.16	$409.15	$392.00
39	$620.03	$608.28	$580.21	$559.46	$531.56	$463.82	$459.14	$431.63	$414.40	$397.03
40	$627.89	$616.00	$587.57	$566.55	$538.30	$469.70	$464.97	$437.10	$419.65	$402.07
41	$639.68	$627.56	$598.60	$577.19	$548.41	$478.52	$473.70	$445.31	$427.54	$409.62
42	$650.98	$638.65	$609.17	$587.38	$558.10	$486.97	$482.07	$453.18	$435.09	$416.86
43	$666.71	$654.07	$623.89	$601.57	$571.58	$498.73	$493.71	$464.12	$445.60	$426.92
44	$686.36	$673.35	$642.28	$619.30	$588.42	$513.44	$508.26	$477.80	$458.73	$439.51
45	$709.45	$696.01	$663.88	$640.14	$608.22	$530.71	$525.36	$493.88	$474.16	$454.29
46	$736.96	$723.00	$689.63	$664.96	$631.81	$551.29	$545.73	$513.03	$492.55	$471.91
47	$767.92	$753.37	$718.60	$692.89	$658.34	$574.45	$568.66	$534.58	$513.24	$491.73
48	$803.29	$788.07	$751.70	$724.81	$688.67	$600.91	$594.85	$559.20	$536.88	$514.38
49	$838.17	$822.29	$784.34	$756.28	$718.58	$627.00	$620.68	$583.48	$560.20	$536.72
50	$877.48	$860.85	$821.12	$791.75	$752.27	$656.40	$649.79	$610.85	$586.47	$561.89
51	$916.29	$898.93	$857.44	$826.77	$785.55	$685.44	$678.53	$637.87	$612.41	$586.74
52	$959.04	$940.86	$897.44	$865.34	$822.19	$717.41	$710.18	$667.62	$640.97	$614.11
53	$1,002.27	$983.28	$937.90	$904.35	$859.26	$749.76	$742.20	$697.72	$669.87	$641.80
54	$1,048.95	$1,029.07	$981.57	$946.46	$899.27	$784.67	$776.76	$730.21	$701.07	$671.69
55	$1,095.62	$1,074.86	$1,025.25	$988.58	$939.29	$819.59	$811.33	$762.70	$732.26	$701.57
56	$1,146.22	$1,124.51	$1,072.61	$1,034.24	$982.67	$857.44	$848.80	$797.93	$766.08	$733.98
57	$1,197.32	$1,174.63	$1,120.42	$1,080.34	$1,026.48	$895.66	$886.64	$833.50	$800.23	$766.70
58	$1,251.86	$1,228.14	$1,171.45	$1,129.55	$1,073.23	$936.46	$927.02	$871.46	$836.68	$801.62
59	$1,278.88	$1,254.65	$1,196.74	$1,153.93	$1,096.40	$956.67	$947.03	$890.28	$854.74	$818.92
60	$1,333.41	$1,308.15	$1,247.77	$1,203.14	$1,143.15	$997.47	$987.42	$928.24	$891.19	$853.84
61	$1,380.58	$1,354.42	$1,291.91	$1,245.70	$1,183.59	$1,032.75	$1,022.34	$961.07	$922.71	$884.05
62	$1,411.53	$1,384.79	$1,320.87	$1,273.63	$1,210.12	$1,055.91	$1,045.26	$982.62	$943.40	$903.87
63	$1,450.34	$1,422.86	$1,357.19	$1,308.65	$1,243.40	$1,084.94	$1,074.01	$1,009.64	$969.34	$928.72
64+	$1,473.93	$1,446.00	$1,379.25	$1,329.93	$1,263.63	$1,102.59	$1,091.46	$1,026.06	$985.11	$943.83

A SEPARATE $20 ADMINISTRATION FEE WILL BE ADDED TO CALCULATE THE SUBSCRIBER MONTHLY RATE

KAISER PERMANENTE®

Rating Area 12
Small Business Medical Rate Plans

Effective: December 1, 2025 through November 30, 2026

Counties: Ventura

Age	Platinum 90 HMO 0/10 + Child Dental Alt	Platinum 90 HMO 0/20 + Child Dental	Gold 80 HMO 0/35 + Child Dental Alt	Gold 80 HMO 250/35 + Child Dental	Gold 80 HMO 1000/40 + Child Dental Alt	Silver 70 HMO 1900/65 + Child Dental Alt	Silver 70 HMO 2500/55 + Child Dental	Silver 70 HDHP HMO 2850/25% + Child Dental	Bronze 60 HMO 5800/60 + Child Dental	Bronze 60 HDHP HMO 6650/0 + Child Dental
0-14	$392.63	$385.46	$368.33	$355.67	$338.65	$297.31	$294.45	$277.66	$267.15	$256.55
15	$426.27	$418.46	$399.80	$386.01	$367.48	$322.47	$319.36	$301.08	$289.63	$278.09
16	$439.13	$431.07	$411.84	$397.62	$378.50	$332.09	$328.88	$310.03	$298.22	$286.32
17	$451.98	$443.69	$423.87	$409.22	$389.53	$341.71	$338.41	$318.98	$306.82	$294.56
18	$465.83	$457.28	$436.83	$421.72	$401.40	$352.07	$348.66	$328.62	$316.07	$303.43
19	$465.41	$456.59	$435.52	$419.94	$399.00	$348.15	$344.65	$323.99	$311.06	$298.02
20	$479.75	$470.66	$448.94	$432.88	$411.30	$358.88	$355.27	$333.98	$320.65	$307.21
21	$494.59	$485.22	$462.83	$446.27	$424.02	$369.98	$366.25	$344.30	$330.56	$316.71
22	$494.59	$485.22	$462.83	$446.27	$424.02	$369.98	$366.25	$344.30	$330.56	$316.71
23	$494.59	$485.22	$462.83	$446.27	$424.02	$369.98	$366.25	$344.30	$330.56	$316.71
24	$494.59	$485.22	$462.83	$446.27	$424.02	$369.98	$366.25	$344.30	$330.56	$316.71
25	$496.57	$487.16	$464.68	$448.06	$425.72	$371.46	$367.72	$345.68	$331.88	$317.98
26	$506.46	$496.87	$473.93	$456.98	$434.20	$378.86	$375.04	$352.57	$338.50	$324.31
27	$518.33	$508.51	$485.04	$467.69	$444.37	$387.74	$383.83	$360.83	$346.43	$331.91
28	$537.62	$527.44	$503.09	$485.10	$460.91	$402.17	$398.12	$374.26	$359.32	$344.26
29	$553.45	$542.96	$517.90	$499.38	$474.48	$414.01	$409.84	$385.28	$369.90	$354.40
30	$561.36	$550.73	$525.31	$506.52	$481.26	$419.93	$415.70	$390.79	$375.19	$359.47
31	$573.23	$562.37	$536.42	$517.23	$491.44	$428.81	$424.49	$399.05	$383.12	$367.07
32	$585.10	$574.02	$547.52	$527.94	$501.62	$437.69	$433.28	$407.31	$391.06	$374.67
33	$592.52	$581.29	$554.47	$534.63	$507.98	$443.24	$438.77	$412.48	$396.01	$379.42
34	$600.44	$589.06	$561.87	$541.77	$514.76	$449.16	$444.63	$417.99	$401.30	$384.49
35	$604.39	$592.94	$565.57	$545.34	$518.15	$452.12	$447.56	$420.74	$403.95	$387.02
36	$608.35	$596.82	$569.28	$548.91	$521.54	$455.08	$450.49	$423.49	$406.59	$389.55
37	$612.31	$600.70	$572.98	$552.48	$524.94	$458.04	$453.42	$426.25	$409.24	$392.09
38	$616.26	$604.59	$576.68	$556.05	$528.33	$461.00	$456.35	$429.00	$411.88	$394.62
39	$624.18	$612.35	$584.09	$563.19	$535.11	$466.92	$462.21	$434.51	$417.17	$399.69
40	$632.09	$620.11	$591.49	$570.33	$541.90	$472.84	$468.07	$440.02	$422.46	$404.76
41	$643.96	$631.76	$602.60	$581.05	$552.07	$481.72	$476.86	$448.28	$430.39	$412.36
42	$655.34	$642.92	$613.25	$591.31	$561.83	$490.23	$485.29	$456.20	$438.00	$419.64
43	$671.16	$658.44	$628.06	$605.59	$575.39	$502.07	$497.01	$467.22	$448.57	$429.78
44	$690.95	$677.85	$646.57	$623.44	$592.36	$516.87	$511.66	$480.99	$461.80	$442.44
45	$714.19	$700.66	$668.32	$644.42	$612.28	$534.26	$528.87	$497.18	$477.33	$457.33
46	$741.89	$727.83	$694.24	$669.41	$636.03	$554.98	$549.38	$516.46	$495.84	$475.07
47	$773.05	$758.40	$723.40	$697.52	$662.74	$578.28	$572.46	$538.15	$516.67	$495.02
48	$808.66	$793.34	$756.72	$729.65	$693.27	$604.92	$598.83	$562.94	$540.47	$517.82
49	$843.77	$827.79	$789.58	$761.34	$723.38	$631.19	$624.83	$587.38	$563.94	$540.31
50	$883.34	$866.60	$826.61	$797.04	$757.30	$660.79	$654.13	$614.93	$590.38	$565.64
51	$922.42	$904.94	$863.17	$832.30	$790.80	$690.02	$683.06	$642.13	$616.50	$590.66
52	$965.44	$947.15	$903.44	$871.12	$827.69	$722.21	$714.93	$672.08	$645.26	$618.22
53	$1,008.97	$989.85	$944.17	$910.39	$865.00	$754.77	$747.16	$702.38	$674.35	$646.09
54	$1,055.96	$1,035.95	$988.13	$952.79	$905.28	$789.92	$781.95	$735.09	$705.75	$676.18
55	$1,102.94	$1,082.04	$1,032.10	$995.19	$945.56	$825.06	$816.75	$767.80	$737.15	$706.26
56	$1,153.88	$1,132.02	$1,079.77	$1,041.15	$989.24	$863.17	$854.47	$803.26	$771.20	$738.88
57	$1,205.32	$1,182.48	$1,127.91	$1,087.56	$1,033.34	$901.65	$892.56	$839.07	$805.58	$771.82
58	$1,260.22	$1,236.34	$1,179.28	$1,137.10	$1,080.40	$942.72	$933.22	$877.29	$842.27	$806.98
59	$1,287.42	$1,263.03	$1,204.74	$1,161.64	$1,103.72	$963.07	$953.36	$896.23	$860.45	$824.40
60	$1,342.32	$1,316.89	$1,256.11	$1,211.18	$1,150.79	$1,004.14	$994.01	$934.44	$897.15	$859.55
61	$1,389.81	$1,363.47	$1,300.54	$1,254.02	$1,191.50	$1,039.65	$1,029.18	$967.50	$928.88	$889.96
62	$1,420.96	$1,394.04	$1,329.70	$1,282.14	$1,218.21	$1,062.96	$1,052.25	$989.19	$949.71	$909.91
63	$1,460.04	$1,432.37	$1,366.26	$1,317.39	$1,251.71	$1,092.19	$1,081.18	$1,016.39	$975.82	$934.93
64+	$1,483.77	$1,455.66	$1,388.49	$1,338.81	$1,272.06	$1,109.94	$1,098.75	$1,032.90	$991.68	$950.13

A SEPARATE $20 ADMINISTRATION FEE WILL BE ADDED TO CALCULATE THE SUBSCRIBER MONTHLY RATE

KAISER PERMANENTE®

Rating Area 13,14,17,19
Small Business Medical Rate Plans

Effective: December 1, 2025 through November 30, 2026

Counties (Partial):Imperial, Kern, Riverside, San Bernardino, San Diego

Age	Platinum 90 HMO 0/10 + Child Dental Alt	Platinum 90 HMO 0/20 + Child Dental	Gold 80 HMO 0/35 + Child Dental Alt	Gold 80 HMO 250/35 + Child Dental	Gold 80 HMO 1000/40 + Child Dental Alt	Silver 70 HMO 1900/65 + Child Dental Alt	Silver 70 HMO 2500/55 + Child Dental	Silver 70 HDHP HMO 2850/25% + Child Dental	Bronze 60 HMO 5800/60 + Child Dental	Bronze 60 HDHP HMO 6650/0 + Child Dental
0-14	$373.72	$366.90	$350.63	$338.60	$322.43	$283.16	$280.45	$264.49	$254.51	$244.44
15	$405.67	$398.25	$380.53	$367.43	$349.82	$307.06	$304.11	$286.74	$275.86	$264.90
16	$417.88	$410.23	$391.96	$378.45	$360.29	$316.20	$313.15	$295.24	$284.03	$272.72
17	$430.10	$422.22	$403.39	$389.47	$370.76	$325.33	$322.20	$303.74	$292.19	$280.54
18	$443.25	$435.13	$415.70	$401.34	$382.04	$335.18	$331.94	$312.90	$300.98	$288.97
19	$442.14	$433.76	$413.74	$398.94	$379.05	$330.75	$327.41	$307.79	$295.51	$283.12
20	$455.77	$447.13	$426.49	$411.24	$390.73	$340.94	$337.50	$317.28	$304.61	$291.85
21	$469.86	$460.96	$439.69	$423.96	$402.82	$351.48	$347.94	$327.09	$314.03	$300.87
22	$469.86	$460.96	$439.69	$423.96	$402.82	$351.48	$347.94	$327.09	$314.03	$300.87
23	$469.86	$460.96	$439.69	$423.96	$402.82	$351.48	$347.94	$327.09	$314.03	$300.87
24	$469.86	$460.96	$439.69	$423.96	$402.82	$351.48	$347.94	$327.09	$314.03	$300.87
25	$471.74	$462.80	$441.44	$425.65	$404.43	$352.89	$349.33	$328.40	$315.29	$302.08
26	$481.14	$472.02	$450.24	$434.13	$412.49	$359.92	$356.29	$334.94	$321.57	$308.10
27	$492.42	$483.09	$460.79	$444.31	$422.15	$368.36	$364.64	$342.79	$329.11	$315.32
28	$510.74	$501.06	$477.94	$460.84	$437.86	$382.06	$378.21	$355.55	$341.36	$327.05
29	$525.78	$515.81	$492.01	$474.41	$450.75	$393.31	$389.35	$366.01	$351.40	$336.68
30	$533.29	$523.19	$499.04	$481.19	$457.20	$398.93	$394.91	$371.25	$356.43	$341.49
31	$544.57	$534.25	$509.60	$491.37	$466.87	$407.37	$403.26	$379.10	$363.97	$348.71
32	$555.85	$545.32	$520.15	$501.54	$476.53	$415.81	$411.62	$386.95	$371.50	$355.93
33	$562.90	$552.23	$526.74	$507.90	$482.58	$421.08	$416.83	$391.85	$376.21	$360.45
34	$570.41	$559.61	$533.78	$514.68	$489.02	$426.70	$422.40	$397.09	$381.24	$365.26
35	$574.17	$563.29	$537.30	$518.08	$492.24	$429.51	$425.18	$399.70	$383.75	$367.67
36	$577.93	$566.98	$540.81	$521.47	$495.47	$432.33	$427.97	$402.32	$386.26	$370.08
37	$581.69	$570.67	$544.33	$524.86	$498.69	$435.14	$430.75	$404.94	$388.77	$372.48
38	$585.45	$574.36	$547.85	$528.25	$501.91	$437.95	$433.54	$407.55	$391.29	$374.89
39	$592.97	$581.73	$554.88	$535.03	$508.36	$443.57	$439.10	$412.79	$396.31	$379.70
40	$600.48	$589.11	$561.92	$541.82	$514.80	$449.20	$444.67	$418.02	$401.34	$384.52
41	$611.76	$600.17	$572.47	$551.99	$524.47	$457.63	$453.02	$425.87	$408.87	$391.74
42	$622.57	$610.77	$582.58	$561.74	$533.73	$465.72	$461.02	$433.39	$416.10	$398.66
43	$637.60	$625.52	$596.65	$575.31	$546.63	$476.96	$472.16	$443.86	$426.14	$408.29
44	$656.40	$643.96	$614.24	$592.27	$562.74	$491.02	$486.07	$456.94	$438.71	$420.32
45	$678.48	$665.63	$634.91	$612.19	$581.67	$507.54	$502.43	$472.32	$453.47	$434.46
46	$704.79	$691.44	$659.53	$635.94	$604.23	$527.23	$521.91	$490.63	$471.05	$451.31
47	$734.40	$720.48	$687.23	$662.65	$629.61	$549.37	$543.83	$511.24	$490.84	$470.27
48	$768.23	$753.67	$718.89	$693.17	$658.61	$574.68	$568.88	$534.79	$513.45	$491.93
49	$801.59	$786.40	$750.10	$723.27	$687.21	$599.63	$593.59	$558.01	$535.74	$513.29
50	$839.18	$823.27	$785.28	$757.19	$719.43	$627.75	$621.42	$584.18	$560.87	$537.36
51	$876.29	$859.69	$820.01	$790.68	$751.26	$655.52	$648.91	$610.02	$585.67	$561.13
52	$917.17	$899.79	$858.27	$827.57	$786.30	$686.10	$679.18	$638.48	$613.00	$587.31
53	$958.52	$940.36	$896.96	$864.87	$821.75	$717.03	$709.80	$667.26	$640.63	$613.78
54	$1,003.16	$984.15	$938.73	$905.15	$860.02	$750.42	$742.86	$698.34	$670.46	$642.37
55	$1,047.79	$1,027.94	$980.50	$945.43	$898.29	$783.81	$775.91	$729.41	$700.30	$670.95
56	$1,096.19	$1,075.42	$1,025.79	$989.09	$939.78	$820.01	$811.75	$763.10	$732.64	$701.94
57	$1,145.06	$1,123.36	$1,071.51	$1,033.19	$981.67	$856.57	$847.93	$797.12	$765.30	$733.23
58	$1,197.21	$1,174.53	$1,120.32	$1,080.24	$1,026.38	$895.58	$886.56	$833.42	$800.16	$766.63
59	$1,223.05	$1,199.88	$1,144.50	$1,103.56	$1,048.54	$914.91	$905.69	$851.41	$817.43	$783.18
60	$1,275.21	$1,251.04	$1,193.31	$1,150.62	$1,093.25	$953.93	$944.31	$887.72	$852.29	$816.57
61	$1,320.31	$1,295.30	$1,235.52	$1,191.32	$1,131.92	$987.67	$977.72	$919.12	$882.44	$845.46
62	$1,349.92	$1,324.34	$1,263.22	$1,218.03	$1,157.30	$1,009.81	$999.64	$939.73	$902.22	$864.41
63	$1,387.04	$1,360.75	$1,297.95	$1,251.52	$1,189.12	$1,037.58	$1,027.12	$965.57	$927.03	$888.18
64+	$1,409.58	$1,382.88	$1,319.07	$1,271.88	$1,208.46	$1,054.44	$1,043.82	$981.27	$942.09	$902.61

A SEPARATE $20 ADMINISTRATION FEE WILL BE ADDED TO CALCULATE THE SUBSCRIBER MONTHLY RATE

KAISER PERMANENTE®

Rating Area 15
Small Business Medical Rate Plans

Effective: December 1, 2025 through November 30, 2026

Counties: (Partial): Los Angeles

Age	Platinum 90 HMO 0/10 + Child Dental Alt	Platinum 90 HMO 0/20 + Child Dental	Gold 80 HMO 0/35 + Child Dental Alt	Gold 80 HMO 250/35 + Child Dental	Gold 80 HMO 1000/40 + Child Dental Alt	Silver 70 HMO 1900/65 + Child Dental Alt	Silver 70 HMO 2500/55 + Child Dental	Silver 70 HDHP HMO 2850/25% + Child Dental	Bronze 60 HMO 5800/60 + Child Dental	Bronze 60 HDHP HMO 6650/0 + Child Dental
0-14	$363.25	$356.63	$340.83	$329.15	$313.45	$275.32	$272.69	$257.21	$247.51	$237.74
15	$394.27	$387.07	$369.86	$357.14	$340.04	$298.53	$295.66	$278.80	$268.24	$257.60
16	$406.13	$398.70	$380.96	$367.84	$350.21	$307.40	$304.45	$287.06	$276.17	$265.19
17	$417.99	$410.34	$392.06	$378.54	$360.38	$316.27	$313.23	$295.31	$284.10	$272.79
18	$430.76	$422.87	$404.01	$390.07	$371.33	$325.83	$322.69	$304.20	$292.63	$280.97
19	$429.26	$421.13	$401.69	$387.32	$368.01	$321.11	$317.88	$298.83	$286.90	$274.88
20	$442.49	$434.11	$414.07	$399.26	$379.35	$331.01	$327.67	$308.04	$295.74	$283.35
21	$456.18	$447.53	$426.88	$411.61	$391.09	$341.25	$337.81	$317.56	$304.89	$292.11
22	$456.18	$447.53	$426.88	$411.61	$391.09	$341.25	$337.81	$317.56	$304.89	$292.11
23	$456.18	$447.53	$426.88	$411.61	$391.09	$341.25	$337.81	$317.56	$304.89	$292.11
24	$456.18	$447.53	$426.88	$411.61	$391.09	$341.25	$337.81	$317.56	$304.89	$292.11
25	$458.00	$449.32	$428.59	$413.26	$392.65	$342.61	$339.16	$318.83	$306.11	$293.28
26	$467.13	$458.27	$437.12	$421.49	$400.47	$349.44	$345.92	$325.18	$312.21	$299.12
27	$478.07	$469.02	$447.37	$431.37	$409.86	$357.63	$354.02	$332.81	$319.52	$306.13
28	$495.87	$486.47	$464.02	$447.42	$425.11	$370.94	$367.20	$345.19	$331.41	$317.52
29	$510.46	$500.79	$477.68	$460.59	$437.63	$381.86	$378.01	$355.35	$341.17	$326.87
30	$517.76	$507.95	$484.51	$467.18	$443.88	$387.32	$383.41	$360.43	$346.05	$331.55
31	$528.71	$518.69	$494.75	$477.06	$453.27	$395.51	$391.52	$368.06	$353.36	$338.56
32	$539.66	$529.43	$505.00	$486.93	$462.66	$403.70	$399.63	$375.68	$360.68	$345.57
33	$546.50	$536.15	$511.40	$493.11	$468.52	$408.81	$404.69	$380.44	$365.26	$349.95
34	$553.80	$543.31	$518.23	$499.69	$474.78	$414.27	$410.10	$385.52	$370.13	$354.62
35	$557.45	$546.89	$521.65	$502.99	$477.91	$417.00	$412.80	$388.06	$372.57	$356.96
36	$561.10	$550.47	$525.06	$506.28	$481.04	$419.73	$415.50	$390.60	$375.01	$359.30
37	$564.75	$554.05	$528.48	$509.57	$484.16	$422.46	$418.21	$393.14	$377.45	$361.63
38	$568.40	$557.63	$531.89	$512.87	$487.29	$425.19	$420.91	$395.68	$379.89	$363.97
39	$575.70	$564.79	$538.72	$519.45	$493.55	$430.65	$426.31	$400.76	$384.77	$368.64
40	$583.00	$571.95	$545.55	$526.04	$499.81	$436.11	$431.72	$405.85	$389.65	$373.32
41	$593.94	$582.69	$555.80	$535.92	$509.19	$444.30	$439.83	$413.47	$396.96	$380.33
42	$604.44	$592.98	$565.61	$545.38	$518.19	$452.15	$447.60	$420.77	$403.98	$387.05
43	$619.03	$607.30	$579.27	$558.55	$530.70	$463.07	$458.40	$430.93	$413.73	$396.39
44	$637.28	$625.20	$596.35	$575.02	$546.35	$476.72	$471.92	$443.64	$425.93	$408.08
45	$658.72	$646.24	$616.41	$594.36	$564.73	$492.76	$487.79	$458.56	$440.26	$421.81
46	$684.27	$671.30	$640.32	$617.41	$586.63	$511.87	$506.71	$476.34	$457.33	$438.17
47	$713.01	$699.50	$667.21	$643.35	$611.27	$533.37	$527.99	$496.35	$476.54	$456.57
48	$745.85	$731.72	$697.95	$672.98	$639.43	$557.94	$552.32	$519.22	$498.49	$477.60
49	$778.24	$763.49	$728.26	$702.21	$667.19	$582.17	$576.30	$541.76	$520.14	$498.34
50	$814.73	$799.30	$762.41	$735.13	$698.48	$609.47	$603.32	$567.17	$544.53	$521.71
51	$850.77	$834.65	$796.13	$767.65	$729.38	$636.43	$630.01	$592.25	$568.62	$544.79
52	$890.46	$873.59	$833.27	$803.46	$763.40	$666.11	$659.40	$619.88	$595.14	$570.20
53	$930.60	$912.97	$870.83	$839.68	$797.82	$696.14	$689.13	$647.83	$621.97	$595.91
54	$973.94	$955.48	$911.39	$878.79	$834.97	$728.56	$721.22	$678.00	$650.94	$623.66
55	$1,017.28	$998.00	$951.94	$917.89	$872.12	$760.98	$753.31	$708.16	$679.90	$651.41
56	$1,064.26	$1,044.10	$995.91	$960.28	$912.40	$796.13	$788.11	$740.87	$711.30	$681.50
57	$1,111.70	$1,090.64	$1,040.30	$1,003.09	$953.08	$831.62	$823.24	$773.90	$743.01	$711.88
58	$1,162.34	$1,140.32	$1,087.69	$1,048.78	$996.49	$869.50	$860.73	$809.15	$776.85	$744.30
59	$1,187.43	$1,164.93	$1,111.17	$1,071.42	$1,018.00	$888.27	$879.31	$826.62	$793.62	$760.37
60	$1,238.07	$1,214.61	$1,158.55	$1,117.11	$1,061.41	$926.14	$916.81	$861.87	$827.47	$792.79
61	$1,281.86	$1,257.57	$1,199.53	$1,156.62	$1,098.95	$958.90	$949.24	$892.35	$856.73	$820.83
62	$1,310.60	$1,285.76	$1,226.42	$1,182.55	$1,123.59	$980.40	$970.52	$912.36	$875.94	$839.24
63	$1,346.64	$1,321.12	$1,260.15	$1,215.07	$1,154.49	$1,007.36	$997.21	$937.45	$900.03	$862.31
64+	$1,368.54	$1,342.59	$1,280.64	$1,234.83	$1,173.27	$1,023.75	$1,013.43	$952.68	$914.67	$876.33

A SEPARATE $20 ADMINISTRATION FEE WILL BE ADDED TO CALCULATE THE SUBSCRIBER MONTHLY RATE

KAISER PERMANENTE®

Rating Area 16
Small Business Medical Rate Plans

Effective: December 1, 2025 through November 30, 2026

Counties: (Partial): Los Angeles

Age	Platinum 90 HMO 0/10 + Child Dental Alt	Platinum 90 HMO 0/20 + Child Dental	Gold 80 HMO 0/35 + Child Dental Alt	Gold 80 HMO 250/35 + Child Dental	Gold 80 HMO 1000/40 + Child Dental Alt	Silver 70 HMO 1900/65 + Child Dental Alt	Silver 70 HMO 2500/55 + Child Dental	Silver 70 HDHP HMO 2850/25% + Child Dental	Bronze 60 HMO 5800/60 + Child Dental	Bronze 60 HDHP HMO 6650/0 + Child Dental
0-14	$380.69	$373.75	$357.16	$344.90	$328.41	$288.38	$285.61	$269.35	$259.17	$248.91
15	$413.27	$405.71	$387.64	$374.28	$356.33	$312.74	$309.73	$292.03	$280.94	$269.77
16	$425.72	$417.92	$399.29	$385.52	$367.01	$322.06	$318.96	$300.70	$289.26	$277.74
17	$438.17	$430.14	$410.95	$396.76	$377.69	$331.37	$328.18	$309.37	$297.59	$285.71
18	$451.58	$443.30	$423.50	$408.86	$389.18	$341.41	$338.11	$318.70	$306.55	$294.30
19	$450.73	$442.19	$421.78	$406.69	$386.41	$337.17	$333.77	$313.77	$301.24	$288.62
20	$464.62	$455.81	$434.78	$419.22	$398.32	$347.56	$344.06	$323.44	$310.53	$297.52
21	$478.99	$469.91	$448.22	$432.19	$410.64	$358.31	$354.70	$333.44	$320.13	$306.72
22	$478.99	$469.91	$448.22	$432.19	$410.64	$358.31	$354.70	$333.44	$320.13	$306.72
23	$478.99	$469.91	$448.22	$432.19	$410.64	$358.31	$354.70	$333.44	$320.13	$306.72
24	$478.99	$469.91	$448.22	$432.19	$410.64	$358.31	$354.70	$333.44	$320.13	$306.72
25	$480.90	$471.79	$450.02	$433.92	$412.28	$359.74	$356.12	$334.77	$321.41	$307.94
26	$490.48	$481.19	$458.98	$442.56	$420.50	$366.91	$363.21	$341.44	$327.82	$314.08
27	$501.98	$492.47	$469.74	$452.94	$430.35	$375.51	$371.72	$349.45	$335.50	$321.44
28	$520.66	$510.79	$487.22	$469.79	$446.37	$389.48	$385.56	$362.45	$347.98	$333.40
29	$535.99	$525.83	$501.56	$483.62	$459.51	$400.95	$396.91	$373.12	$358.23	$343.22
30	$543.65	$533.35	$508.73	$490.54	$466.08	$406.68	$402.58	$378.46	$363.35	$348.12
31	$555.15	$544.63	$519.49	$500.91	$475.93	$415.28	$411.10	$386.46	$371.03	$355.48
32	$566.64	$555.90	$530.25	$511.28	$485.79	$423.88	$419.61	$394.46	$378.72	$362.85
33	$573.83	$562.95	$536.97	$517.76	$491.95	$429.25	$424.93	$399.46	$383.52	$367.45
34	$581.49	$570.47	$544.14	$524.68	$498.52	$434.99	$430.60	$404.80	$388.64	$372.35
35	$585.32	$574.23	$547.73	$528.14	$501.80	$437.85	$433.44	$407.46	$391.20	$374.81
36	$589.15	$577.99	$551.31	$531.59	$505.09	$440.72	$436.28	$410.13	$393.76	$377.26
37	$592.99	$581.75	$554.90	$535.05	$508.37	$443.59	$439.12	$412.80	$396.32	$379.72
38	$596.82	$585.51	$558.49	$538.51	$511.66	$446.45	$441.95	$415.47	$398.88	$382.17
39	$604.48	$593.03	$565.66	$545.42	$518.23	$452.19	$447.63	$420.80	$404.01	$387.08
40	$612.14	$600.55	$572.83	$552.34	$524.80	$457.92	$453.30	$426.14	$409.13	$391.98
41	$623.64	$611.82	$583.59	$562.71	$534.65	$466.52	$461.82	$434.14	$416.81	$399.35
42	$634.66	$622.63	$593.90	$572.65	$544.10	$474.76	$469.97	$441.81	$424.18	$406.40
43	$649.98	$637.67	$608.24	$586.48	$557.24	$486.23	$481.33	$452.48	$434.42	$416.21
44	$669.14	$656.46	$626.17	$603.77	$573.66	$500.56	$495.51	$465.82	$447.22	$428.48
45	$691.66	$678.55	$647.23	$624.08	$592.97	$517.40	$512.18	$481.49	$462.27	$442.90
46	$718.48	$704.87	$672.33	$648.28	$615.96	$537.46	$532.05	$500.16	$480.20	$460.08
47	$748.66	$734.47	$700.57	$675.51	$641.83	$560.04	$554.39	$521.17	$500.37	$479.40
48	$783.14	$768.30	$732.84	$706.63	$671.40	$585.84	$579.93	$545.18	$523.42	$501.48
49	$817.15	$801.67	$764.67	$737.32	$700.55	$611.28	$605.11	$568.85	$546.15	$523.26
50	$855.47	$839.26	$800.53	$771.89	$733.40	$639.94	$633.49	$595.53	$571.76	$547.80
51	$893.31	$876.38	$835.94	$806.03	$765.84	$668.25	$661.51	$621.87	$597.05	$572.03
52	$934.98	$917.27	$874.93	$843.63	$801.57	$699.42	$692.37	$650.88	$624.90	$598.71
53	$977.13	$958.62	$914.37	$881.67	$837.71	$730.95	$723.58	$680.22	$653.07	$625.70
54	$1,022.64	$1,003.26	$956.96	$922.73	$876.72	$764.99	$757.28	$711.90	$683.48	$654.84
55	$1,068.14	$1,047.90	$999.54	$963.78	$915.73	$799.03	$790.98	$743.57	$713.89	$683.98
56	$1,117.48	$1,096.30	$1,045.70	$1,008.30	$958.02	$835.94	$827.51	$777.92	$746.87	$715.57
57	$1,167.29	$1,145.17	$1,092.32	$1,053.25	$1,000.73	$873.20	$864.40	$812.60	$780.16	$747.47
58	$1,220.46	$1,197.33	$1,142.07	$1,101.22	$1,046.31	$912.97	$903.77	$849.61	$815.70	$781.51
59	$1,246.80	$1,223.18	$1,166.72	$1,124.99	$1,068.90	$932.68	$923.28	$867.95	$833.30	$798.38
60	$1,299.97	$1,275.34	$1,216.48	$1,172.96	$1,114.48	$972.45	$962.65	$904.96	$868.84	$832.43
61	$1,345.95	$1,320.45	$1,259.51	$1,214.45	$1,153.90	$1,006.85	$996.70	$936.97	$899.57	$861.87
62	$1,376.13	$1,350.05	$1,287.74	$1,241.68	$1,179.77	$1,029.42	$1,019.05	$957.98	$919.74	$881.20
63	$1,413.97	$1,387.18	$1,323.15	$1,275.82	$1,212.21	$1,057.73	$1,047.07	$984.32	$945.03	$905.43
64+	$1,436.97	$1,409.73	$1,344.66	$1,296.57	$1,231.92	$1,074.93	$1,064.10	$1,000.32	$960.39	$920.16

A SEPARATE $20 ADMINISTRATION FEE WILL BE ADDED TO CALCULATE THE SUBSCRIBER MONTHLY RATE

KAISER PERMANENTE®

Rating Area 18
Small Business Medical Rate Plans

Effective: December 1, 2025 through November 30, 2026

Counties (Partial): Orange

Age	Platinum 90 HMO 0/10 + Child Dental Alt	Platinum 90 HMO 0/20 + Child Dental	Gold 80 HMO 0/35 + Child Dental Alt	Gold 80 HMO 250/35 + Child Dental	Gold 80 HMO 1000/40 + Child Dental Alt	Silver 70 HMO 1900/65 + Child Dental Alt	Silver 70 HMO 2500/55 + Child Dental	Silver 70 HDHP HMO 2850/25% + Child Dental	Bronze 60 HMO 5800/60 + Child Dental	Bronze 60 HDHP HMO 6650/0 + Child Dental
0-14	$381.44	$374.48	$357.85	$345.56	$329.05	$288.93	$286.16	$269.87	$259.67	$249.38
15	$414.07	$406.50	$388.40	$375.01	$357.03	$313.35	$310.33	$292.59	$281.48	$270.28
16	$426.55	$418.74	$400.07	$386.27	$367.72	$322.68	$319.57	$301.28	$289.82	$278.27
17	$439.03	$430.98	$411.75	$397.53	$378.42	$332.02	$328.81	$309.96	$298.16	$286.26
18	$452.47	$444.17	$424.33	$409.66	$389.94	$342.07	$338.76	$319.32	$307.14	$294.87
19	$451.64	$443.08	$422.63	$407.51	$387.20	$337.85	$334.45	$314.40	$301.85	$289.20
20	$465.56	$456.74	$435.66	$420.07	$399.13	$348.26	$344.75	$324.09	$311.16	$298.12
21	$479.96	$470.86	$449.13	$433.06	$411.47	$359.03	$355.42	$334.12	$320.78	$307.34
22	$479.96	$470.86	$449.13	$433.06	$411.47	$359.03	$355.42	$334.12	$320.78	$307.34
23	$479.96	$470.86	$449.13	$433.06	$411.47	$359.03	$355.42	$334.12	$320.78	$307.34
24	$479.96	$470.86	$449.13	$433.06	$411.47	$359.03	$355.42	$334.12	$320.78	$307.34
25	$481.88	$472.75	$450.93	$434.80	$413.12	$360.47	$356.84	$335.45	$322.06	$308.57
26	$491.48	$482.16	$459.91	$443.46	$421.35	$367.65	$363.95	$342.13	$328.48	$314.71
27	$502.99	$493.46	$470.69	$453.85	$431.22	$376.27	$372.48	$350.15	$336.18	$322.09
28	$521.71	$511.83	$488.20	$470.74	$447.27	$390.27	$386.34	$363.18	$348.69	$334.08
29	$537.07	$526.89	$502.58	$484.60	$460.44	$401.76	$397.71	$373.88	$358.95	$343.91
30	$544.75	$534.43	$509.76	$491.53	$467.02	$407.50	$403.40	$379.22	$364.09	$348.83
31	$556.27	$545.73	$520.54	$501.92	$476.90	$416.12	$411.93	$387.24	$371.78	$356.20
32	$567.79	$557.03	$531.32	$512.32	$486.77	$424.74	$420.46	$395.26	$379.48	$363.58
33	$574.99	$564.09	$538.06	$518.81	$492.94	$430.12	$425.79	$400.27	$384.29	$368.19
34	$582.67	$571.63	$545.24	$525.74	$499.53	$435.87	$431.48	$405.62	$389.43	$373.11
35	$586.51	$575.39	$548.84	$529.21	$502.82	$438.74	$434.32	$408.29	$391.99	$375.57
36	$590.35	$579.16	$552.43	$532.67	$506.11	$441.61	$437.16	$410.96	$394.56	$378.03
37	$594.19	$582.93	$556.02	$536.13	$509.40	$444.49	$440.01	$413.64	$397.13	$380.48
38	$598.03	$586.69	$559.62	$539.60	$512.69	$447.36	$442.85	$416.31	$399.69	$382.94
39	$605.70	$594.23	$566.80	$546.53	$519.28	$453.10	$448.54	$421.65	$404.82	$387.86
40	$613.38	$601.76	$573.99	$553.46	$525.86	$458.85	$454.22	$427.00	$409.96	$392.78
41	$624.90	$613.06	$584.77	$563.85	$535.74	$467.46	$462.75	$435.02	$417.66	$400.15
42	$635.94	$623.89	$595.10	$573.81	$545.20	$475.72	$470.93	$442.70	$425.03	$407.22
43	$651.30	$638.96	$609.47	$587.67	$558.37	$487.21	$482.30	$453.40	$435.30	$417.06
44	$670.50	$657.79	$627.43	$604.99	$574.83	$501.57	$496.52	$466.76	$448.13	$429.35
45	$693.06	$679.92	$648.54	$625.35	$594.17	$518.45	$513.22	$482.46	$463.21	$443.80
46	$719.93	$706.29	$673.70	$649.60	$617.21	$538.55	$533.12	$501.17	$481.17	$461.01
47	$750.17	$735.96	$701.99	$676.88	$643.13	$561.17	$555.52	$522.22	$501.38	$480.37
48	$784.73	$769.86	$734.33	$708.06	$672.76	$587.02	$581.11	$546.28	$524.48	$502.50
49	$818.81	$803.29	$766.22	$738.81	$701.97	$612.51	$606.34	$570.00	$547.25	$524.32
50	$857.20	$840.96	$802.15	$773.45	$734.89	$641.24	$634.77	$596.73	$572.91	$548.91
51	$895.12	$878.16	$837.63	$807.67	$767.39	$669.60	$662.85	$623.13	$598.25	$573.18
52	$936.87	$919.12	$876.70	$845.34	$803.19	$700.84	$693.77	$652.19	$626.16	$599.92
53	$979.11	$960.56	$916.23	$883.45	$839.40	$732.43	$725.05	$681.60	$654.39	$626.97
54	$1,024.71	$1,005.29	$958.89	$924.59	$878.49	$766.54	$758.81	$713.34	$684.87	$656.17
55	$1,070.30	$1,050.02	$1,001.56	$965.73	$917.58	$800.65	$792.58	$745.08	$715.34	$685.36
56	$1,119.74	$1,098.52	$1,047.82	$1,010.34	$959.96	$837.63	$829.19	$779.49	$748.38	$717.02
57	$1,169.65	$1,147.49	$1,094.53	$1,055.38	$1,002.76	$874.97	$866.15	$814.24	$781.74	$748.98
58	$1,222.93	$1,199.76	$1,144.38	$1,103.45	$1,048.43	$914.82	$905.60	$851.33	$817.35	$783.10
59	$1,249.33	$1,225.65	$1,169.09	$1,127.27	$1,071.06	$934.57	$925.15	$869.70	$834.99	$800.00
60	$1,302.60	$1,277.92	$1,218.94	$1,175.34	$1,116.73	$974.42	$964.60	$906.79	$870.60	$834.11
61	$1,348.68	$1,323.12	$1,262.06	$1,216.91	$1,156.24	$1,008.89	$998.72	$938.87	$901.39	$863.62
62	$1,378.91	$1,352.79	$1,290.35	$1,244.20	$1,182.16	$1,031.51	$1,021.11	$959.91	$921.60	$882.98
63	$1,416.83	$1,389.98	$1,325.83	$1,278.41	$1,214.66	$1,059.87	$1,049.19	$986.31	$946.94	$907.26
64+	$1,439.88	$1,412.58	$1,347.39	$1,299.18	$1,234.41	$1,077.09	$1,066.26	$1,002.36	$962.34	$922.02

A SEPARATE $20 ADMINISTRATION FEE WILL BE ADDED TO CALCULATE THE SUBSCRIBER MONTHLY RATE

Rate Region	County	Zip Codes
Region Code 01	Colusa	Partial coverage - 95912
Region Code 01	Humboldt	Partial coverage - 95501, 95502, 95503, 95518, 95519, 95521, 95524, 95525, 95526, 95528, 95534, 95536, 95537, 95540, 95546, 95547, 95549, 95550, 95551, 95562, 95564, 95565, 95570, 95571, 95573
Region Code 02	Marin	All Zip Codes
Region Code 02	Napa	All Zip Codes
Region Code 02	Solano	All Zip Codes
Region Code 02	Sonoma	All Zip Codes
Region Code 03	El Dorado	Partial coverage - 95613, 95614, 95619, 95623, 95633, 95634, 95635, 95636, 95651, 95656, 95664, 95667, 95672, 95682, 95684, 95709, 95726, 95762
Region Code 03	Placer	Partial coverage - 95602, 95603, 95604, 95626, 95631, 95648, 95650, 95658, 95661, 95663, 95668, 95677, 95678, 95681, 95703, 95713, 95722, 95736, 95746, 95747, 95765
Region Code 03	Sacramento	Partial coverage - 95501, 95502, 95503, 95518, 95519, 95521, 95524, 95525, 95526, 95528, 95534, 95536, 95537, 95540, 95546, 95547, 95549, 95550, 95551, 95562, 95564, 95565, 95570, 95571, 95573
Region Code 03	Yolo	All Zip Codes
Region Code 03	Yolo	All Zip Codes

WHA

Rating Region 2
Small Business Medical Rate Plans

Effective: December 1, 2025 through November 30, 2026

Counties: Marin, Napa, Sonoma, Solano

Age	GATEWAY 30 Platinum 90 HMO	GATEWAY 70 Platinum 90 HMO	Gateway 4010 Gold 80 HMO	Gateway 2600 Gold 80 HDHP HMO	Gateway 5020 Silver 70 HMO	GATEWAY 6650 Bronze 60 HDHP HMO
0-14	400.63	393.43	357.07	339.40	304.40	309.56
15	436.24	428.40	388.81	369.57	331.46	337.08
16	449.86	441.77	400.95	381.10	341.81	347.60
17	463.48	455.14	413.08	392.64	352.15	358.12
18	478.14	469.54	426.15	405.06	363.29	369.45
19	492.80	483.94	439.22	417.48	374.43	380.78
20	507.99	498.85	452.76	430.35	385.97	392.52
21	523.70	514.28	466.76	443.66	397.91	404.66
22	523.70	514.28	466.76	443.66	397.91	404.66
23	523.70	514.28	466.76	443.66	397.91	404.66
24	523.70	514.28	466.76	443.66	397.91	404.66
25	525.80	516.34	468.63	445.43	399.50	406.28
26	536.27	526.63	477.96	454.31	407.46	414.37
27	548.84	538.97	489.17	464.95	417.01	424.08
28	569.26	559.03	507.37	482.26	432.53	439.86
29	586.02	575.48	522.31	496.45	445.26	452.81
30	594.40	583.71	529.78	503.55	451.63	459.29
31	606.97	596.05	540.98	514.20	461.18	469.00
32	619.54	608.40	552.18	524.85	470.73	478.71
33	627.40	616.11	559.18	531.50	476.70	484.78
34	635.77	624.34	566.65	538.60	483.06	491.26
35	639.96	628.45	570.38	542.15	486.25	494.49
36	644.15	632.57	574.12	545.70	489.43	497.73
37	648.34	636.68	577.85	549.25	492.61	500.97
38	652.53	640.80	581.59	552.80	495.80	504.21
39	660.91	649.02	589.05	559.90	502.16	510.68
40	669.29	657.25	596.52	566.99	508.53	517.15
41	681.86	669.60	607.72	577.64	518.08	526.87
42	693.91	681.42	618.46	587.85	527.23	536.17
43	710.66	697.88	633.40	602.04	539.97	549.12
44	731.61	718.45	652.07	619.79	555.88	565.31
45	756.23	742.62	674.01	640.64	574.58	584.33
46	785.55	771.42	700.14	665.49	596.87	606.99
47	818.55	803.82	729.55	693.44	621.94	632.48
48	856.25	840.85	763.16	725.38	650.59	661.62
49	893.44	877.37	796.30	756.88	678.84	690.35
50	935.33	918.51	833.64	792.37	710.67	722.72
51	976.70	959.14	870.51	827.42	742.10	754.69
52	1,022.27	1,003.88	911.12	866.02	776.72	789.89
53	1,068.35	1,049.14	952.20	905.06	811.74	825.50
54	1,118.10	1,097.99	996.54	947.21	849.54	863.95
55	1,167.86	1,146.85	1,040.88	989.36	887.34	902.39
56	1,221.80	1,199.82	1,088.96	1,035.05	928.33	944.07
57	1,276.26	1,253.31	1,137.50	1,081.19	969.71	986.15
58	1,334.39	1,310.39	1,189.31	1,130.44	1,013.88	1,031.07
59	1,363.20	1,338.68	1,214.98	1,154.84	1,035.76	1,053.33
60	1,421.33	1,395.76	1,266.79	1,204.09	1,079.93	1,098.25
61	1,471.60	1,445.13	1,311.60	1,246.68	1,118.13	1,137.09
62	1,504.60	1,477.53	1,341.01	1,274.63	1,143.20	1,162.59
63	1,545.97	1,518.16	1,377.88	1,309.68	1,174.63	1,194.55
64+	1,571.11	1,542.85	1,400.29	1,330.97	1,193.73	1,213.98

WHA

Rating Region 3
Small Business Medical Rate Plans

Effective: December 1, 2025 through November 30, 2026

Sacramento ,Yolo, Parts of El Dorado, Parts of Placer

Age	GATEWAY 30 Platinum 90 HMO	GATEWAY 70 Platinum 90 HMO	Gateway 4010 Gold 80 HMO	Gateway 2600 Gold 80 HDHP HMO	Gateway 5020 Silver 70 HMO	GATEWAY 7050 Bronze 60 HDHP HMO
0-14	373.73	367.00	333.09	316.47	284.29	294.76
15	406.95	399.63	362.70	344.60	309.56	320.96
16	419.66	412.10	374.02	355.36	319.22	330.97
17	432.36	424.57	385.34	366.12	328.88	340.99
18	446.04	438.01	397.53	377.70	339.29	351.78
19	459.72	451.44	409.72	389.28	349.70	362.57
20	473.88	465.35	422.35	401.28	360.47	373.74
21	488.54	479.74	435.41	413.69	371.62	385.30
22	488.54	479.74	435.41	413.69	371.62	385.30
23	488.54	479.74	435.41	413.69	371.62	385.30
24	488.54	479.74	435.41	413.69	371.62	385.30
25	490.49	481.66	437.15	415.34	373.11	386.84
26	500.27	491.26	445.86	423.62	380.54	394.55
27	511.99	502.77	456.31	433.55	389.46	403.80
28	531.04	521.48	473.29	449.68	403.95	418.82
29	546.68	536.83	487.22	462.92	415.84	431.15
30	554.49	544.51	494.19	469.54	421.79	437.32
31	566.22	556.02	504.64	479.47	430.71	446.57
32	577.94	567.54	515.09	489.40	439.63	455.81
33	585.27	574.73	521.62	495.60	445.20	461.59
34	593.09	582.41	528.59	502.22	451.15	467.76
35	597.00	586.25	532.07	505.53	454.12	470.84
36	600.90	590.09	535.55	508.84	457.09	473.92
37	604.81	593.92	539.04	512.15	460.07	477.00
38	608.72	597.76	542.52	515.46	463.04	480.09
39	616.54	605.44	549.49	522.08	468.99	486.25
40	624.35	613.11	556.45	528.70	474.93	492.42
41	636.08	624.63	566.90	538.62	483.85	501.66
42	647.32	635.66	576.92	548.14	492.40	510.53
43	662.95	651.01	590.85	561.38	504.29	522.86
44	682.49	670.20	608.27	577.93	519.15	538.27
45	705.45	692.75	628.73	597.37	536.62	556.38
46	732.81	719.62	653.11	620.54	557.43	577.95
47	763.59	749.84	680.54	646.60	580.84	602.23
48	798.76	784.38	711.89	676.38	607.60	629.97
49	833.45	818.44	742.81	705.76	633.99	657.33
50	872.53	856.82	777.64	738.85	663.71	688.15
51	911.13	894.72	812.04	771.53	693.07	718.59
52	953.63	936.46	849.92	807.52	725.40	752.11
53	996.62	978.68	888.24	843.93	758.11	786.02
54	1,043.03	1,024.25	929.60	883.23	793.41	822.62
55	1,089.44	1,069.83	970.96	922.53	828.71	859.22
56	1,139.76	1,119.24	1,015.81	965.14	866.99	898.91
57	1,190.57	1,169.14	1,061.09	1,008.16	905.64	938.98
58	1,244.80	1,222.39	1,109.42	1,054.08	946.89	981.75
59	1,271.67	1,248.77	1,133.37	1,076.84	967.33	1,002.94
60	1,325.90	1,302.03	1,181.70	1,122.76	1,008.58	1,045.71
61	1,372.80	1,348.08	1,223.50	1,162.47	1,044.25	1,082.70
62	1,403.58	1,378.31	1,250.93	1,188.53	1,067.67	1,106.97
63	1,442.17	1,416.21	1,285.33	1,221.21	1,097.02	1,137.41
64+	1,465.62	1,439.23	1,306.23	1,241.07	1,114.86	1,155.91

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