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## Plan rates

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For effective dates January 1–December 1, 2024

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### Rating policy for small group metal plans

Metal plan rates are calculated using 2 factors – rating area and member age.

#### ■ Rate areas

- Businesses located in California: rates are based on the business’s verified physical address (ZIP+4 and county).
- Businesses located outside of California are assigned to rating area 4.
- When a group is located outside the Kaiser Permanente service area, then only employees living in the service area are eligible to enroll based on their home address (ZIP+4 and county).

- **Member age** – Rates are calculated by the age of each covered member on the plan’s effective date.

This includes:

- Your employee
- Employee’s spouse or domestic partner
- A family will pay a premium per child up to 3 of the oldest children under age 21, each additional child after the third will be \$0.
- A premium will apply to every age from 21-26.

### Child dental coverage

Child dental services is one of the essential health benefits required to be provided to dependents under 19 years old when enrolled in ACA-compliant metal medical plan(s). When these dependents enroll in your selected HMO medical plan(s), they will be enrolled in a separate child dental benefit underwritten by Delta Dental of California with services provided through the DeltaCare® USA network. When dependents enroll in your selected PPO medical plans, they will receive child dental PPO benefits as part of their coverage and not as a separate plan and with services provided through the Delta Dental PPO network.

### What does “Alt” mean?

ALT denotes Kaiser Permanente designed plans which includes chiropractic and acupuncture benefits (except for the Gold 80 HDHP HMO 1750/15% plan). These plans are different from the standard plans and offered at Covered California for Small Business and CaliforniaChoice®.

## Small Business medical plan rates

Age on 2024 effective date	Platinum 90 HMO 0/10 + Child Dental Alt	Platinum 90 HMO 0/20 + Child Dental	Platinum 90 HMO 250/30 + Child Dental Alt
0-14 <sup>1</sup>	\$378.55	\$370.96	\$366.83
15 <sup>1</sup>	\$410.93	\$402.66	\$398.17
16 <sup>1</sup>	\$423.32	\$414.79	\$410.15
17 <sup>1</sup>	\$435.70	\$426.91	\$422.13
18 <sup>1</sup>	\$449.03	\$439.96	\$435.04
19	\$448.09	\$438.75	\$433.67
20	\$461.90	\$452.27	\$447.03
21	\$476.19	\$466.26	\$460.86
22	\$476.19	\$466.26	\$460.86
23	\$476.19	\$466.26	\$460.86
24	\$476.19	\$466.26	\$460.86
25	\$478.09	\$468.12	\$462.70
26	\$487.62	\$477.45	\$471.92
27	\$499.04	\$488.64	\$482.98
28	\$517.62	\$506.82	\$500.96
29	\$532.85	\$521.74	\$515.70
30	\$540.47	\$529.20	\$523.08
31	\$551.90	\$540.39	\$534.14
32	\$563.33	\$551.58	\$545.20
33	\$570.47	\$558.58	\$552.11
34	\$578.09	\$566.04	\$559.48
35	\$581.90	\$569.77	\$563.17
36	\$585.71	\$573.50	\$566.86
37	\$589.52	\$577.23	\$570.55
38	\$593.33	\$580.96	\$574.23
39	\$600.95	\$588.42	\$581.61
40	\$608.57	\$595.88	\$588.98
41	\$620.00	\$607.07	\$600.04
42	\$630.95	\$617.79	\$610.64
43	\$646.19	\$632.71	\$625.39
44	\$665.23	\$651.36	\$643.82
45	\$687.62	\$673.28	\$665.48
46	\$714.28	\$699.39	\$691.29
47	\$744.28	\$728.76	\$720.32
48	\$778.57	\$762.33	\$753.51
49	\$812.38	\$795.44	\$786.23
50	\$850.47	\$832.74	\$823.10
51	\$888.09	\$869.57	\$859.50
52	\$929.52	\$910.14	\$899.60
53	\$971.42	\$951.17	\$940.16
54	\$1,016.66	\$995.46	\$983.94
55	\$1,061.90	\$1,039.76	\$1,027.72
56	\$1,110.95	\$1,087.78	\$1,075.19
57	\$1,160.47	\$1,136.27	\$1,123.12
58	\$1,213.33	\$1,188.03	\$1,174.27
59	\$1,239.52	\$1,213.67	\$1,199.62
60	\$1,292.37	\$1,265.42	\$1,250.78
61	\$1,338.09	\$1,310.19	\$1,295.02
62	\$1,368.09	\$1,339.56	\$1,324.05
63	\$1,405.71	\$1,376.39	\$1,360.46
64+	\$1,428.57	\$1,398.78	\$1,382.58

<sup>1</sup>HMO 0-14, 15, 16, 17 and 18 age rates include the cost of \$14.27 for Child Dental coverage.

## Small Business medical plan rates

Age on 2024 effective date	Gold 80 HMO 0/35 + Child Dental Alt	Gold 80 HMO 250/35 + Child Dental	Gold 80 HMO 1000/40 + Child Dental Alt	Gold 80 HDHP HMO 1750/15% + Child Dental Alt	Gold 80 HRA HMO 2250/35 + Child Dental
0-14 <sup>1</sup>	\$351.02	\$340.62	\$324.63	\$296.85	\$299.01
15 <sup>1</sup>	\$380.95	\$369.63	\$352.22	\$321.97	\$324.33
16 <sup>1</sup>	\$392.40	\$380.73	\$362.77	\$331.57	\$334.00
17 <sup>1</sup>	\$403.84	\$391.82	\$373.31	\$341.18	\$343.68
18 <sup>1</sup>	\$416.17	\$403.76	\$384.67	\$351.52	\$354.10
19	\$414.22	\$401.44	\$381.76	\$347.59	\$350.25
20	\$426.99	\$413.81	\$393.53	\$358.30	\$361.05
21	\$440.20	\$426.61	\$405.70	\$369.38	\$372.21
22	\$440.20	\$426.61	\$405.70	\$369.38	\$372.21
23	\$440.20	\$426.61	\$405.70	\$369.38	\$372.21
24	\$440.20	\$426.61	\$405.70	\$369.38	\$372.21
25	\$441.96	\$428.31	\$407.32	\$370.86	\$373.70
26	\$450.76	\$436.85	\$415.44	\$378.25	\$381.15
27	\$461.33	\$447.08	\$425.17	\$387.11	\$390.08
28	\$478.49	\$463.72	\$441.00	\$401.52	\$404.60
29	\$492.58	\$477.37	\$453.98	\$413.34	\$416.51
30	\$499.62	\$484.20	\$460.47	\$419.25	\$422.46
31	\$510.19	\$494.44	\$470.21	\$428.12	\$431.40
32	\$520.75	\$504.68	\$479.94	\$436.98	\$440.33
33	\$527.36	\$511.08	\$486.03	\$442.52	\$445.91
34	\$534.40	\$517.90	\$492.52	\$448.43	\$451.87
35	\$537.92	\$521.31	\$495.77	\$451.39	\$454.85
36	\$541.44	\$524.73	\$499.01	\$454.34	\$457.82
37	\$544.96	\$528.14	\$502.26	\$457.30	\$460.80
38	\$548.48	\$531.55	\$505.50	\$460.25	\$463.78
39	\$555.53	\$538.38	\$511.99	\$466.16	\$469.74
40	\$562.57	\$545.20	\$518.48	\$472.07	\$475.69
41	\$573.14	\$555.44	\$528.22	\$480.94	\$484.62
42	\$583.26	\$565.26	\$537.55	\$489.43	\$493.18
43	\$597.35	\$578.91	\$550.54	\$501.25	\$505.10
44	\$614.95	\$595.97	\$566.76	\$516.03	\$519.98
45	\$635.64	\$616.02	\$585.83	\$533.39	\$537.48
46	\$660.29	\$639.91	\$608.55	\$554.08	\$558.32
47	\$688.03	\$666.79	\$634.11	\$577.35	\$581.77
48	\$719.72	\$697.50	\$663.32	\$603.94	\$608.57
49	\$750.98	\$727.79	\$692.12	\$630.17	\$635.00
50	\$786.19	\$761.92	\$724.58	\$659.72	\$664.78
51	\$820.97	\$795.62	\$756.63	\$688.90	\$694.18
52	\$859.26	\$832.74	\$791.93	\$721.04	\$726.56
53	\$898.00	\$870.28	\$827.63	\$753.54	\$759.32
54	\$939.82	\$910.81	\$866.17	\$788.64	\$794.68
55	\$981.64	\$951.33	\$904.71	\$823.73	\$830.04
56	\$1,026.98	\$995.28	\$946.50	\$861.77	\$868.38
57	\$1,072.76	\$1,039.64	\$988.69	\$900.19	\$907.09
58	\$1,121.62	\$1,087.00	\$1,033.72	\$941.19	\$948.40
59	\$1,145.83	\$1,110.46	\$1,056.04	\$961.51	\$968.88
60	\$1,194.69	\$1,157.81	\$1,101.07	\$1,002.51	\$1,010.19
61	\$1,236.95	\$1,198.77	\$1,140.02	\$1,037.97	\$1,045.92
62	\$1,264.68	\$1,225.64	\$1,165.58	\$1,061.24	\$1,069.37
63	\$1,299.46	\$1,259.35	\$1,197.63	\$1,090.42	\$1,098.78
64+	\$1,320.60	\$1,279.83	\$1,217.10	\$1,108.14	\$1,116.63

<sup>1</sup>HMO 0-14, 15, 16, 17 and 18 age rates include the cost of \$14.27 for Child Dental coverage.

## Small Business medical plan rates

Age on 2024 effective date	Silver 70 HMO 1900/65 + Child Dental Alt	Silver 70 HMO 2300/65 + Child Dental Alt	Silver 70 HMO 2500/55 + Child Dental	Silver 70 HMO 2950/65 + Child Dental Alt	Silver 70 HDHP HMO 2850/25% + Child Dental
0-14 <sup>1</sup>	\$282.65	\$277.39	\$280.91	\$268.37	\$260.01
15 <sup>1</sup>	\$306.51	\$300.78	\$304.61	\$290.96	\$281.86
16 <sup>1</sup>	\$315.63	\$309.72	\$313.68	\$299.59	\$290.21
17 <sup>1</sup>	\$324.75	\$318.67	\$322.74	\$308.23	\$298.56
18 <sup>1</sup>	\$334.57	\$328.30	\$332.50	\$317.53	\$307.56
19	\$330.13	\$323.66	\$327.99	\$312.56	\$302.28
20	\$340.30	\$333.63	\$338.10	\$322.19	\$311.60
21	\$350.83	\$343.95	\$348.55	\$332.16	\$321.23
22	\$350.83	\$343.95	\$348.55	\$332.16	\$321.23
23	\$350.83	\$343.95	\$348.55	\$332.16	\$321.23
24	\$350.83	\$343.95	\$348.55	\$332.16	\$321.23
25	\$352.23	\$345.33	\$349.95	\$333.48	\$322.52
26	\$359.25	\$352.20	\$356.92	\$340.13	\$328.94
27	\$367.67	\$360.46	\$365.28	\$348.10	\$336.65
28	\$381.35	\$373.87	\$378.88	\$361.05	\$349.18
29	\$392.57	\$384.88	\$390.03	\$371.68	\$359.46
30	\$398.19	\$390.38	\$395.61	\$377.00	\$364.60
31	\$406.61	\$398.64	\$403.97	\$384.97	\$372.31
32	\$415.03	\$406.89	\$412.34	\$392.94	\$380.02
33	\$420.29	\$412.05	\$417.57	\$397.92	\$384.84
34	\$425.90	\$417.55	\$423.14	\$403.24	\$389.98
35	\$428.71	\$420.31	\$425.93	\$405.89	\$392.55
36	\$431.52	\$423.06	\$428.72	\$408.55	\$395.12
37	\$434.32	\$425.81	\$431.51	\$411.21	\$397.69
38	\$437.13	\$428.56	\$434.30	\$413.87	\$400.26
39	\$442.74	\$434.06	\$439.87	\$419.18	\$405.40
40	\$448.36	\$439.57	\$445.45	\$424.50	\$410.54
41	\$456.78	\$447.82	\$453.82	\$432.47	\$418.25
42	\$464.84	\$455.73	\$461.83	\$440.11	\$425.63
43	\$476.07	\$466.74	\$472.99	\$450.74	\$435.91
44	\$490.10	\$480.50	\$486.93	\$464.02	\$448.76
45	\$506.59	\$496.66	\$503.31	\$479.63	\$463.86
46	\$526.24	\$515.92	\$522.83	\$498.23	\$481.85
47	\$548.34	\$537.59	\$544.79	\$519.16	\$502.09
48	\$573.60	\$562.36	\$569.88	\$543.08	\$525.22
49	\$598.51	\$586.78	\$594.63	\$566.66	\$548.02
50	\$626.58	\$614.29	\$622.52	\$593.23	\$573.72
51	\$654.29	\$641.47	\$650.05	\$619.47	\$599.10
52	\$684.81	\$671.39	\$680.38	\$648.37	\$627.05
53	\$715.69	\$701.66	\$711.05	\$677.60	\$655.32
54	\$749.01	\$734.33	\$744.16	\$709.15	\$685.83
55	\$782.34	\$767.01	\$777.27	\$740.71	\$716.35
56	\$818.48	\$802.43	\$813.17	\$774.92	\$749.44
57	\$854.96	\$838.21	\$849.42	\$809.46	\$782.84
58	\$893.91	\$876.38	\$888.11	\$846.33	\$818.50
59	\$913.20	\$895.30	\$907.28	\$864.60	\$836.17
60	\$952.14	\$933.48	\$945.97	\$901.47	\$871.83
61	\$985.82	\$966.50	\$979.43	\$933.36	\$902.66
62	\$1,007.92	\$988.17	\$1,001.39	\$954.28	\$922.90
63	\$1,035.64	\$1,015.34	\$1,028.93	\$980.53	\$948.28
64+	\$1,052.49	\$1,031.85	\$1,045.65	\$996.48	\$963.69

<sup>1</sup>HMO 0-14, 15, 16, 17 and 18 age rates include the cost of \$14.27 for Child Dental coverage.

## Small Business medical plan rates

Age on 2024 effective date	Bronze 60 HMO 5400/60 + Child Dental Alt	Bronze 60 HMO 6300/60 + Child Dental	Bronze 60 HDHP HMO 7050/0 + Child Dental
0-14 <sup>1</sup>	\$238.25	\$243.40	\$237.64
15 <sup>1</sup>	\$258.16	\$263.76	\$257.50
16 <sup>1</sup>	\$265.78	\$271.55	\$265.09
17 <sup>1</sup>	\$273.39	\$279.34	\$272.68
18 <sup>1</sup>	\$281.59	\$287.72	\$280.86
19	\$275.52	\$281.84	\$274.76
20	\$284.01	\$290.53	\$283.23
21	\$292.79	\$299.51	\$291.99
22	\$292.79	\$299.51	\$291.99
23	\$292.79	\$299.51	\$291.99
24	\$292.79	\$299.51	\$291.99
25	\$293.96	\$300.71	\$293.16
26	\$299.82	\$306.70	\$299.00
27	\$306.84	\$313.89	\$306.01
28	\$318.26	\$325.57	\$317.39
29	\$327.63	\$335.15	\$326.74
30	\$332.32	\$339.95	\$331.41
31	\$339.34	\$347.13	\$338.42
32	\$346.37	\$354.32	\$345.43
33	\$350.76	\$358.81	\$349.81
34	\$355.45	\$363.61	\$354.48
35	\$357.79	\$366.00	\$356.81
36	\$360.13	\$368.40	\$359.15
37	\$362.47	\$370.79	\$361.48
38	\$364.82	\$373.19	\$363.82
39	\$369.50	\$377.98	\$368.49
40	\$374.19	\$382.78	\$373.16
41	\$381.21	\$389.96	\$380.17
42	\$387.95	\$396.85	\$386.89
43	\$397.32	\$406.44	\$396.23
44	\$409.03	\$418.42	\$407.91
45	\$422.79	\$432.49	\$421.63
46	\$439.19	\$449.27	\$437.99
47	\$457.63	\$468.14	\$456.38
48	\$478.71	\$489.70	\$477.41
49	\$499.50	\$510.97	\$498.14
50	\$522.92	\$534.93	\$521.50
51	\$546.05	\$558.59	\$544.56
52	\$571.53	\$584.65	\$569.97
53	\$597.29	\$611.00	\$595.66
54	\$625.11	\$639.46	\$623.40
55	\$652.92	\$667.91	\$651.14
56	\$683.08	\$698.76	\$681.21
57	\$713.53	\$729.91	\$711.58
58	\$746.03	\$763.15	\$743.99
59	\$762.13	\$779.63	\$760.05
60	\$794.63	\$812.87	\$792.46
61	\$822.74	\$841.63	\$820.49
62	\$841.19	\$860.50	\$838.89
63	\$864.32	\$884.16	\$861.96
64+	\$878.37	\$898.53	\$875.97

<sup>1</sup>HMO 0-14, 15, 16, 17 and 18 age rates include the cost of \$14.27 for Child Dental coverage.

**Small Business medical plan rates**

Age on 2024 effective date	Platinum 90 PPO 0/15 + Child Dental	Gold 80 PPO 350/25 + Child Dental	Silver 70 PPO 2500/55 + Child Dental	Bronze 60 PPO 6300/60 + Child Dental
0-14	\$670.44	\$600.13	\$499.66	\$437.35
15	\$730.03	\$653.47	\$544.08	\$476.23
16	\$752.82	\$673.87	\$561.06	\$491.09
17	\$775.60	\$694.27	\$578.04	\$505.96
18	\$800.14	\$716.23	\$596.33	\$521.96
19	\$824.68	\$738.20	\$614.62	\$537.97
20	\$850.10	\$760.95	\$633.56	\$554.55
21	\$876.39	\$784.48	\$653.16	\$571.70
22	\$876.39	\$784.48	\$653.16	\$571.70
23	\$876.39	\$784.48	\$653.16	\$571.70
24	\$876.39	\$784.48	\$653.16	\$571.70
25	\$879.89	\$787.62	\$655.77	\$573.99
26	\$897.42	\$803.31	\$668.83	\$585.42
27	\$918.45	\$822.14	\$684.51	\$599.14
28	\$952.63	\$852.73	\$709.98	\$621.44
29	\$980.68	\$877.83	\$730.88	\$639.73
30	\$994.70	\$890.39	\$741.33	\$648.88
31	\$1,015.73	\$909.21	\$757.01	\$662.60
32	\$1,036.77	\$928.04	\$772.68	\$676.32
33	\$1,049.91	\$939.81	\$782.48	\$684.90
34	\$1,063.94	\$952.36	\$792.93	\$694.05
35	\$1,070.95	\$958.64	\$798.16	\$698.62
36	\$1,077.96	\$964.91	\$803.38	\$703.19
37	\$1,084.97	\$971.19	\$808.61	\$707.77
38	\$1,091.98	\$977.46	\$813.83	\$712.34
39	\$1,106.00	\$990.02	\$824.28	\$721.49
40	\$1,120.02	\$1,002.57	\$834.73	\$730.64
41	\$1,141.06	\$1,021.39	\$850.41	\$744.36
42	\$1,161.21	\$1,039.44	\$865.43	\$757.51
43	\$1,189.26	\$1,064.54	\$886.33	\$775.80
44	\$1,224.31	\$1,095.92	\$912.46	\$798.67
45	\$1,265.50	\$1,132.79	\$943.16	\$825.54
46	\$1,314.58	\$1,176.72	\$979.73	\$857.55
47	\$1,369.79	\$1,226.14	\$1,020.88	\$893.57
48	\$1,432.89	\$1,282.63	\$1,067.91	\$934.73
49	\$1,495.12	\$1,338.33	\$1,114.28	\$975.32
50	\$1,565.23	\$1,401.08	\$1,166.54	\$1,021.06
51	\$1,634.46	\$1,463.06	\$1,218.14	\$1,066.22
52	\$1,710.71	\$1,531.31	\$1,274.96	\$1,115.96
53	\$1,787.83	\$1,600.34	\$1,332.44	\$1,166.27
54	\$1,871.09	\$1,674.87	\$1,394.49	\$1,220.58
55	\$1,954.35	\$1,749.39	\$1,456.54	\$1,274.90
56	\$2,044.61	\$1,830.20	\$1,523.81	\$1,333.78
57	\$2,135.76	\$1,911.78	\$1,591.74	\$1,393.24
58	\$2,233.04	\$1,998.86	\$1,664.24	\$1,456.70
59	\$2,281.24	\$2,042.01	\$1,700.16	\$1,488.14
60	\$2,378.52	\$2,129.08	\$1,772.66	\$1,551.60
61	\$2,462.65	\$2,204.39	\$1,835.37	\$1,606.48
62	\$2,517.86	\$2,253.82	\$1,876.52	\$1,642.50
63	\$2,587.10	\$2,315.79	\$1,928.12	\$1,687.66
64+	\$2,629.17	\$2,353.44	\$1,959.48	\$1,715.10

**Below is a listing of all ZIP codes within Rate Area 12**

<b>County</b>	<b>Rate Area</b>	<b>County + ZIP code combinations in Kaiser Permanente service area</b>								
<b>San Luis Obispo</b>	<b>12</b>									
<b>Santa Barbara</b>	<b>12</b>									
<b>Ventura</b>	<b>12</b>	90265	91307	91319-20	91377	93009-12	93020-22	93040-44	93094	93252
		91304	91311	91358-62	93001-07	93015-16	93030-36	93060-66	93099	