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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>	\$366.08	\$358.75	\$354.76
15 <sup>1</sup>	\$397.36	\$389.37	\$385.03
16 <sup>1</sup>	\$409.31	\$401.08	\$396.60
17 <sup>1</sup>	\$421.27	\$412.78	\$408.17
18 <sup>1</sup>	\$434.15	\$425.39	\$420.63
19	\$432.75	\$423.73	\$418.82
20	\$446.09	\$436.79	\$431.73
21	\$459.89	\$450.30	\$445.08
22	\$459.89	\$450.30	\$445.08
23	\$459.89	\$450.30	\$445.08
24	\$459.89	\$450.30	\$445.08
25	\$461.73	\$452.10	\$446.86
26	\$470.92	\$461.10	\$455.77
27	\$481.96	\$471.91	\$466.45
28	\$499.90	\$489.47	\$483.81
29	\$514.61	\$503.88	\$498.05
30	\$521.97	\$511.09	\$505.17
31	\$533.01	\$521.89	\$515.85
32	\$544.05	\$532.70	\$526.53
33	\$550.94	\$539.46	\$533.21
34	\$558.30	\$546.66	\$540.33
35	\$561.98	\$550.26	\$543.89
36	\$565.66	\$553.87	\$547.45
37	\$569.34	\$557.47	\$551.01
38	\$573.02	\$561.07	\$554.58
39	\$580.38	\$568.28	\$561.70
40	\$587.74	\$575.48	\$568.82
41	\$598.77	\$586.29	\$579.50
42	\$609.35	\$596.64	\$589.74
43	\$624.07	\$611.05	\$603.98
44	\$642.46	\$629.07	\$621.78
45	\$664.08	\$650.23	\$642.70
46	\$689.83	\$675.45	\$667.63
47	\$718.80	\$703.81	\$695.67
48	\$751.92	\$736.24	\$727.71
49	\$784.57	\$768.21	\$759.31
50	\$821.36	\$804.23	\$794.92
51	\$857.69	\$839.80	\$830.08
52	\$897.70	\$878.98	\$868.80
53	\$938.17	\$918.61	\$907.97
54	\$981.86	\$961.38	\$950.26
55	\$1,025.55	\$1,004.16	\$992.54
56	\$1,072.92	\$1,050.54	\$1,038.38
57	\$1,120.74	\$1,097.37	\$1,084.67
58	\$1,171.79	\$1,147.36	\$1,134.07
59	\$1,197.09	\$1,172.12	\$1,158.55
60	\$1,248.13	\$1,222.11	\$1,207.96
61	\$1,292.28	\$1,265.34	\$1,250.69
62	\$1,321.26	\$1,293.70	\$1,278.73
63	\$1,357.59	\$1,329.28	\$1,313.89
64+	\$1,379.67	\$1,350.90	\$1,335.24

<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>	\$339.49	\$329.45	\$314.01	\$287.18	\$289.27
15 <sup>1</sup>	\$368.40	\$357.47	\$340.65	\$311.43	\$313.71
16 <sup>1</sup>	\$379.45	\$368.18	\$350.84	\$320.71	\$323.06
17 <sup>1</sup>	\$390.51	\$378.89	\$361.02	\$329.98	\$332.40
18 <sup>1</sup>	\$402.41	\$390.43	\$371.99	\$339.97	\$342.47
19	\$400.05	\$387.70	\$368.70	\$335.69	\$338.26
20	\$412.37	\$399.64	\$380.06	\$346.04	\$348.69
21	\$425.13	\$412.00	\$391.81	\$356.74	\$359.47
22	\$425.13	\$412.00	\$391.81	\$356.74	\$359.47
23	\$425.13	\$412.00	\$391.81	\$356.74	\$359.47
24	\$425.13	\$412.00	\$391.81	\$356.74	\$359.47
25	\$426.83	\$413.65	\$393.38	\$358.17	\$360.91
26	\$435.33	\$421.89	\$401.22	\$365.30	\$368.10
27	\$445.53	\$431.78	\$410.62	\$373.86	\$376.73
28	\$462.11	\$447.85	\$425.90	\$387.78	\$390.75
29	\$475.72	\$461.03	\$438.44	\$399.19	\$402.25
30	\$482.52	\$467.62	\$444.71	\$404.90	\$408.00
31	\$492.72	\$477.51	\$454.11	\$413.46	\$416.63
32	\$502.93	\$487.40	\$463.51	\$422.02	\$425.26
33	\$509.30	\$493.58	\$469.39	\$427.37	\$430.65
34	\$516.10	\$500.17	\$475.66	\$433.08	\$436.40
35	\$519.51	\$503.47	\$478.79	\$435.94	\$439.28
36	\$522.91	\$506.76	\$481.93	\$438.79	\$442.15
37	\$526.31	\$510.06	\$485.06	\$441.64	\$445.03
38	\$529.71	\$513.36	\$488.20	\$444.50	\$447.90
39	\$536.51	\$519.95	\$494.47	\$450.21	\$453.66
40	\$543.31	\$526.54	\$500.74	\$455.91	\$459.41
41	\$553.52	\$536.43	\$510.14	\$464.48	\$468.03
42	\$563.29	\$545.91	\$519.15	\$472.68	\$476.30
43	\$576.90	\$559.09	\$531.69	\$484.10	\$487.81
44	\$593.90	\$575.57	\$547.36	\$498.37	\$502.18
45	\$613.88	\$594.93	\$565.78	\$515.13	\$519.08
46	\$637.69	\$618.01	\$587.72	\$535.11	\$539.21
47	\$664.47	\$643.96	\$612.40	\$557.58	\$561.86
48	\$695.08	\$673.63	\$640.61	\$583.27	\$587.74
49	\$725.27	\$702.88	\$668.43	\$608.60	\$613.26
50	\$759.28	\$735.84	\$699.78	\$637.14	\$642.02
51	\$792.86	\$768.39	\$730.73	\$665.32	\$670.42
52	\$829.85	\$804.23	\$764.82	\$696.36	\$701.69
53	\$867.26	\$840.49	\$799.30	\$727.75	\$733.33
54	\$907.65	\$879.63	\$836.52	\$761.64	\$767.48
55	\$948.03	\$918.77	\$873.74	\$795.53	\$801.63
56	\$991.82	\$961.21	\$914.10	\$832.27	\$838.65
57	\$1,036.04	\$1,004.05	\$954.85	\$869.37	\$876.04
58	\$1,083.23	\$1,049.79	\$998.34	\$908.97	\$915.94
59	\$1,106.61	\$1,072.45	\$1,019.89	\$928.59	\$935.71
60	\$1,153.80	\$1,118.18	\$1,063.38	\$968.19	\$975.61
61	\$1,194.61	\$1,157.73	\$1,100.99	\$1,002.44	\$1,010.12
62	\$1,221.39	\$1,183.69	\$1,125.68	\$1,024.91	\$1,032.77
63	\$1,254.98	\$1,216.24	\$1,156.63	\$1,053.10	\$1,061.17
64+	\$1,275.39	\$1,236.00	\$1,175.43	\$1,070.22	\$1,078.41

<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>	\$273.46	\$268.38	\$271.79	\$259.67	\$251.60
15 <sup>1</sup>	\$296.50	\$290.97	\$294.68	\$281.48	\$272.70
16 <sup>1</sup>	\$305.31	\$299.61	\$303.43	\$289.83	\$280.76
17 <sup>1</sup>	\$314.12	\$308.25	\$312.18	\$298.17	\$288.83
18 <sup>1</sup>	\$323.61	\$317.55	\$321.61	\$307.15	\$297.52
19	\$318.83	\$312.58	\$316.76	\$301.86	\$291.93
20	\$328.65	\$322.21	\$326.52	\$311.16	\$300.93
21	\$338.82	\$332.18	\$336.62	\$320.79	\$310.24
22	\$338.82	\$332.18	\$336.62	\$320.79	\$310.24
23	\$338.82	\$332.18	\$336.62	\$320.79	\$310.24
24	\$338.82	\$332.18	\$336.62	\$320.79	\$310.24
25	\$340.17	\$333.50	\$337.97	\$322.07	\$311.48
26	\$346.95	\$340.15	\$344.70	\$328.48	\$317.68
27	\$355.08	\$348.12	\$352.78	\$336.18	\$325.13
28	\$368.29	\$361.07	\$365.91	\$348.69	\$337.23
29	\$379.14	\$371.70	\$376.68	\$358.96	\$347.15
30	\$384.56	\$377.02	\$382.07	\$364.09	\$352.12
31	\$392.69	\$384.99	\$390.14	\$371.79	\$359.56
32	\$400.82	\$392.96	\$398.22	\$379.49	\$367.01
33	\$405.90	\$397.95	\$403.27	\$384.30	\$371.66
34	\$411.32	\$403.26	\$408.66	\$389.43	\$376.63
35	\$414.03	\$405.92	\$411.35	\$392.00	\$379.11
36	\$416.74	\$408.58	\$414.04	\$394.57	\$381.59
37	\$419.46	\$411.23	\$416.74	\$397.13	\$384.07
38	\$422.17	\$413.89	\$419.43	\$399.70	\$386.55
39	\$427.59	\$419.21	\$424.82	\$404.83	\$391.52
40	\$433.01	\$424.52	\$430.20	\$409.96	\$396.48
41	\$441.14	\$432.49	\$438.28	\$417.66	\$403.93
42	\$448.93	\$440.13	\$446.02	\$425.04	\$411.06
43	\$459.77	\$450.76	\$456.80	\$435.31	\$420.99
44	\$473.33	\$464.05	\$470.26	\$448.14	\$433.40
45	\$489.25	\$479.66	\$486.08	\$463.21	\$447.98
46	\$508.23	\$498.26	\$504.93	\$481.18	\$465.35
47	\$529.57	\$519.19	\$526.14	\$501.39	\$484.90
48	\$553.97	\$543.11	\$550.38	\$524.48	\$507.24
49	\$578.02	\$566.69	\$574.28	\$547.26	\$529.26
50	\$605.13	\$593.27	\$601.21	\$572.92	\$554.08
51	\$631.89	\$619.51	\$627.80	\$598.27	\$578.59
52	\$661.37	\$648.41	\$657.09	\$626.17	\$605.58
53	\$691.19	\$677.64	\$686.71	\$654.40	\$632.88
54	\$723.37	\$709.19	\$718.69	\$684.88	\$662.36
55	\$755.56	\$740.75	\$750.67	\$715.35	\$691.83
56	\$790.46	\$774.97	\$785.34	\$748.39	\$723.78
57	\$825.70	\$809.51	\$820.35	\$781.76	\$756.05
58	\$863.31	\$846.38	\$857.71	\$817.36	\$790.48
59	\$881.94	\$864.65	\$876.23	\$835.01	\$807.55
60	\$919.55	\$901.52	\$913.59	\$870.61	\$841.98
61	\$952.08	\$933.41	\$945.91	\$901.41	\$871.76
62	\$973.42	\$954.34	\$967.11	\$921.62	\$891.31
63	\$1,000.19	\$980.58	\$993.71	\$946.96	\$915.82
64+	\$1,016.46	\$996.54	\$1,009.86	\$962.37	\$930.72

<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>	\$230.59	\$235.55	\$230.00
15 <sup>1</sup>	\$249.82	\$255.22	\$249.17
16 <sup>1</sup>	\$257.17	\$262.74	\$256.50
17 <sup>1</sup>	\$264.52	\$270.26	\$263.84
18 <sup>1</sup>	\$272.44	\$278.36	\$271.73
19	\$266.08	\$272.19	\$265.36
20	\$274.28	\$280.58	\$273.54
21	\$282.77	\$289.26	\$282.00
22	\$282.77	\$289.26	\$282.00
23	\$282.77	\$289.26	\$282.00
24	\$282.77	\$289.26	\$282.00
25	\$283.90	\$290.42	\$283.12
26	\$289.55	\$296.20	\$288.76
27	\$296.34	\$303.14	\$295.53
28	\$307.37	\$314.42	\$306.53
29	\$316.42	\$323.68	\$315.55
30	\$320.94	\$328.31	\$320.06
31	\$327.73	\$335.25	\$326.83
32	\$334.51	\$342.19	\$333.60
33	\$338.76	\$346.53	\$337.83
34	\$343.28	\$351.16	\$342.34
35	\$345.54	\$353.47	\$344.60
36	\$347.80	\$355.79	\$346.85
37	\$350.07	\$358.10	\$349.11
38	\$352.33	\$360.42	\$351.37
39	\$356.85	\$365.04	\$355.88
40	\$361.38	\$369.67	\$360.39
41	\$368.16	\$376.61	\$367.16
42	\$374.67	\$383.27	\$373.64
43	\$383.72	\$392.52	\$382.67
44	\$395.03	\$404.09	\$393.95
45	\$408.32	\$417.69	\$407.20
46	\$424.15	\$433.89	\$422.99
47	\$441.97	\$452.11	\$440.76
48	\$462.32	\$472.94	\$461.06
49	\$482.40	\$493.47	\$481.08
50	\$505.02	\$516.62	\$503.64
51	\$527.36	\$539.47	\$525.92
52	\$551.96	\$564.63	\$550.46
53	\$576.85	\$590.09	\$575.27
54	\$603.71	\$617.57	\$602.06
55	\$630.57	\$645.05	\$628.85
56	\$659.70	\$674.84	\$657.90
57	\$689.10	\$704.92	\$687.22
58	\$720.49	\$737.03	\$718.52
59	\$736.04	\$752.94	\$734.03
60	\$767.43	\$785.05	\$765.34
61	\$794.58	\$812.82	\$792.41
62	\$812.39	\$831.04	\$810.17
63	\$834.73	\$853.89	\$832.45
64+	\$848.31	\$867.78	\$846.00

<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	\$665.92	\$596.08	\$496.30	\$434.40
15	\$725.11	\$649.07	\$540.41	\$473.02
16	\$747.74	\$669.33	\$557.28	\$487.78
17	\$770.37	\$689.58	\$574.15	\$502.54
18	\$794.75	\$711.40	\$592.31	\$518.44
19	\$819.12	\$733.22	\$610.48	\$534.34
20	\$844.36	\$755.82	\$629.29	\$550.81
21	\$870.48	\$779.19	\$648.75	\$567.85
22	\$870.48	\$779.19	\$648.75	\$567.85
23	\$870.48	\$779.19	\$648.75	\$567.85
24	\$870.48	\$779.19	\$648.75	\$567.85
25	\$873.96	\$782.31	\$651.35	\$570.12
26	\$891.37	\$797.89	\$664.32	\$581.48
27	\$912.26	\$816.59	\$679.89	\$595.10
28	\$946.21	\$846.98	\$705.19	\$617.25
29	\$974.07	\$871.92	\$725.95	\$635.42
30	\$987.99	\$884.38	\$736.33	\$644.51
31	\$1,008.89	\$903.08	\$751.90	\$658.14
32	\$1,029.78	\$921.78	\$767.47	\$671.76
33	\$1,042.83	\$933.47	\$777.20	\$680.28
34	\$1,056.76	\$945.94	\$787.58	\$689.37
35	\$1,063.73	\$952.17	\$792.77	\$693.91
36	\$1,070.69	\$958.41	\$797.96	\$698.45
37	\$1,077.65	\$964.64	\$803.15	\$702.99
38	\$1,084.62	\$970.87	\$808.34	\$707.54
39	\$1,098.54	\$983.34	\$818.72	\$716.62
40	\$1,112.47	\$995.81	\$829.10	\$725.71
41	\$1,133.36	\$1,014.51	\$844.67	\$739.34
42	\$1,153.38	\$1,032.43	\$859.60	\$752.40
43	\$1,181.24	\$1,057.36	\$880.36	\$770.57
44	\$1,216.06	\$1,088.53	\$906.31	\$793.28
45	\$1,256.97	\$1,125.15	\$936.80	\$819.97
46	\$1,305.72	\$1,168.79	\$973.13	\$851.77
47	\$1,360.56	\$1,217.88	\$1,014.00	\$887.55
48	\$1,423.23	\$1,273.98	\$1,060.71	\$928.43
49	\$1,485.04	\$1,329.30	\$1,106.77	\$968.75
50	\$1,554.68	\$1,391.64	\$1,158.67	\$1,014.18
51	\$1,623.44	\$1,453.19	\$1,209.92	\$1,059.04
52	\$1,699.17	\$1,520.98	\$1,266.36	\$1,108.44
53	\$1,775.78	\$1,589.55	\$1,323.45	\$1,158.41
54	\$1,858.47	\$1,663.57	\$1,385.08	\$1,212.35
55	\$1,941.17	\$1,737.60	\$1,446.72	\$1,266.30
56	\$2,030.83	\$1,817.85	\$1,513.54	\$1,324.79
57	\$2,121.36	\$1,898.89	\$1,581.01	\$1,383.84
58	\$2,217.98	\$1,985.38	\$1,653.02	\$1,446.87
59	\$2,265.86	\$2,028.24	\$1,688.70	\$1,478.11
60	\$2,362.48	\$2,114.73	\$1,760.71	\$1,541.14
61	\$2,446.05	\$2,189.53	\$1,822.99	\$1,595.65
62	\$2,500.89	\$2,238.62	\$1,863.86	\$1,631.43
63	\$2,569.65	\$2,300.17	\$1,915.11	\$1,676.29
64+	\$2,611.44	\$2,337.57	\$1,946.25	\$1,703.55

Below is a listing of all ZIP codes within Rate Area 11

County	Rate Area	County + ZIP code combinations in Kaiser Permanente service area									
Fresno	11	93242	93611-13	93630-31	93656-57	93675	93737	93750	93771-79	93888	
		93602	93616	93646	93660	93701-12	93740-41	93755	93786		
		93606-07	93618-19	93648-52	93662	93714-18	93744-45	93760-61	93790-94		
		93609	93624-27	93654	93667-68	93720-30	93747	93764-65	93844		
Kings	11	93230	93232	93242	93631	93656					
Madera	11	93601-02	93604	93614	93623	93626	93636-39	93643-45	93653	93669	93720