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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>	\$367.77	\$360.40	\$356.39
15 <sup>1</sup>	\$399.20	\$391.17	\$386.81
16 <sup>1</sup>	\$411.21	\$402.93	\$398.43
17 <sup>1</sup>	\$423.23	\$414.70	\$410.06
18 <sup>1</sup>	\$436.16	\$427.37	\$422.58
19	\$434.83	\$425.76	\$420.84
20	\$448.23	\$438.89	\$433.81
21	\$462.10	\$452.46	\$447.22
22	\$462.10	\$452.46	\$447.22
23	\$462.10	\$452.46	\$447.22
24	\$462.10	\$452.46	\$447.22
25	\$463.94	\$454.27	\$449.01
26	\$473.19	\$463.32	\$457.96
27	\$484.28	\$474.18	\$468.69
28	\$502.30	\$491.82	\$486.13
29	\$517.09	\$506.30	\$500.44
30	\$524.48	\$513.54	\$507.60
31	\$535.57	\$524.40	\$518.33
32	\$546.66	\$535.26	\$529.06
33	\$553.59	\$542.05	\$535.77
34	\$560.98	\$549.29	\$542.93
35	\$564.68	\$552.91	\$546.51
36	\$568.38	\$556.53	\$550.08
37	\$572.07	\$560.15	\$553.66
38	\$575.77	\$563.77	\$557.24
39	\$583.17	\$571.00	\$564.39
40	\$590.56	\$578.24	\$571.55
41	\$601.65	\$589.10	\$582.28
42	\$612.28	\$599.51	\$592.57
43	\$627.06	\$613.99	\$606.88
44	\$645.55	\$632.09	\$624.77
45	\$667.27	\$653.35	\$645.79
46	\$693.14	\$678.69	\$670.83
47	\$722.26	\$707.20	\$699.01
48	\$755.53	\$739.77	\$731.21
49	\$788.34	\$771.90	\$762.96
50	\$825.30	\$808.09	\$798.74
51	\$861.81	\$843.84	\$834.07
52	\$902.01	\$883.20	\$872.98
53	\$942.68	\$923.02	\$912.33
54	\$986.58	\$966.00	\$954.82
55	\$1,030.47	\$1,008.99	\$997.31
56	\$1,078.07	\$1,055.59	\$1,043.37
57	\$1,126.13	\$1,102.65	\$1,089.88
58	\$1,177.42	\$1,152.87	\$1,139.52
59	\$1,202.84	\$1,177.75	\$1,164.12
60	\$1,254.13	\$1,227.98	\$1,213.76
61	\$1,298.49	\$1,271.41	\$1,256.69
62	\$1,327.60	\$1,299.92	\$1,284.87
63	\$1,364.11	\$1,335.66	\$1,320.20
64+	\$1,386.30	\$1,357.38	\$1,341.66

<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>	\$341.05	\$330.97	\$315.45	\$288.49	\$290.59
15 <sup>1</sup>	\$370.10	\$359.12	\$342.22	\$312.86	\$315.15
16 <sup>1</sup>	\$381.21	\$369.88	\$352.45	\$322.18	\$324.54
17 <sup>1</sup>	\$392.32	\$380.64	\$362.69	\$331.50	\$333.93
18 <sup>1</sup>	\$404.28	\$392.24	\$373.71	\$341.54	\$344.05
19	\$401.97	\$389.56	\$370.47	\$337.30	\$339.89
20	\$414.35	\$401.56	\$381.88	\$347.70	\$350.36
21	\$427.17	\$413.98	\$393.69	\$358.45	\$361.20
22	\$427.17	\$413.98	\$393.69	\$358.45	\$361.20
23	\$427.17	\$413.98	\$393.69	\$358.45	\$361.20
24	\$427.17	\$413.98	\$393.69	\$358.45	\$361.20
25	\$428.88	\$415.64	\$395.27	\$359.89	\$362.64
26	\$437.42	\$423.92	\$403.14	\$367.06	\$369.87
27	\$447.67	\$433.85	\$412.59	\$375.66	\$378.54
28	\$464.33	\$450.00	\$427.95	\$389.64	\$392.62
29	\$478.00	\$463.25	\$440.54	\$401.11	\$404.18
30	\$484.84	\$469.87	\$446.84	\$406.84	\$409.96
31	\$495.09	\$479.81	\$456.29	\$415.45	\$418.63
32	\$505.34	\$489.74	\$465.74	\$424.05	\$427.30
33	\$511.75	\$495.95	\$471.65	\$429.43	\$432.72
34	\$518.58	\$502.58	\$477.94	\$435.16	\$438.50
35	\$522.00	\$505.89	\$481.09	\$438.03	\$441.39
36	\$525.42	\$509.20	\$484.24	\$440.90	\$444.28
37	\$528.84	\$512.51	\$487.39	\$443.77	\$447.17
38	\$532.25	\$515.82	\$490.54	\$446.63	\$450.06
39	\$539.09	\$522.45	\$496.84	\$452.37	\$455.83
40	\$545.92	\$529.07	\$503.14	\$458.10	\$461.61
41	\$556.17	\$539.01	\$512.59	\$466.71	\$470.28
42	\$566.00	\$548.53	\$521.65	\$474.95	\$478.59
43	\$579.67	\$561.77	\$534.24	\$486.42	\$490.15
44	\$596.76	\$578.33	\$549.99	\$500.76	\$504.60
45	\$616.83	\$597.79	\$568.49	\$517.61	\$521.57
46	\$640.75	\$620.97	\$590.54	\$537.68	\$541.80
47	\$667.67	\$647.06	\$615.34	\$560.26	\$564.56
48	\$698.42	\$676.86	\$643.69	\$586.07	\$590.56
49	\$728.75	\$706.25	\$671.64	\$611.52	\$616.21
50	\$762.93	\$739.37	\$703.14	\$640.20	\$645.10
51	\$796.67	\$772.08	\$734.24	\$668.52	\$673.64
52	\$833.84	\$808.09	\$768.49	\$699.70	\$705.06
53	\$871.43	\$844.53	\$803.14	\$731.24	\$736.85
54	\$912.01	\$883.85	\$840.54	\$765.30	\$771.16
55	\$952.59	\$923.18	\$877.94	\$799.35	\$805.48
56	\$996.59	\$965.82	\$918.49	\$836.27	\$842.68
57	\$1,041.01	\$1,008.88	\$959.43	\$873.55	\$880.24
58	\$1,088.43	\$1,054.83	\$1,003.13	\$913.34	\$920.34
59	\$1,111.92	\$1,077.60	\$1,024.79	\$933.05	\$940.20
60	\$1,159.34	\$1,123.55	\$1,068.49	\$972.84	\$980.30
61	\$1,200.35	\$1,163.29	\$1,106.28	\$1,007.25	\$1,014.97
62	\$1,227.26	\$1,189.37	\$1,131.08	\$1,029.84	\$1,037.73
63	\$1,261.00	\$1,222.08	\$1,162.19	\$1,058.15	\$1,066.26
64+	\$1,281.51	\$1,241.94	\$1,181.07	\$1,075.35	\$1,083.60

<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>	\$274.71	\$269.60	\$273.02	\$260.85	\$252.74
15 <sup>1</sup>	\$297.86	\$292.30	\$296.02	\$282.77	\$273.94
16 <sup>1</sup>	\$306.71	\$300.98	\$304.82	\$291.15	\$282.04
17 <sup>1</sup>	\$315.56	\$309.66	\$313.61	\$299.53	\$290.15
18 <sup>1</sup>	\$325.10	\$319.00	\$323.08	\$308.55	\$298.88
19	\$320.36	\$314.08	\$318.28	\$303.31	\$293.33
20	\$330.23	\$323.76	\$328.09	\$312.66	\$302.37
21	\$340.44	\$333.77	\$338.24	\$322.33	\$311.73
22	\$340.44	\$333.77	\$338.24	\$322.33	\$311.73
23	\$340.44	\$333.77	\$338.24	\$322.33	\$311.73
24	\$340.44	\$333.77	\$338.24	\$322.33	\$311.73
25	\$341.81	\$335.11	\$339.59	\$323.62	\$312.97
26	\$348.62	\$341.78	\$346.36	\$330.06	\$319.21
27	\$356.79	\$349.79	\$354.47	\$337.80	\$326.69
28	\$370.06	\$362.81	\$367.67	\$350.37	\$338.85
29	\$380.96	\$373.49	\$378.49	\$360.68	\$348.82
30	\$386.40	\$378.83	\$383.90	\$365.84	\$353.81
31	\$394.58	\$386.84	\$392.02	\$373.58	\$361.29
32	\$402.75	\$394.85	\$400.14	\$381.31	\$368.77
33	\$407.85	\$399.86	\$405.21	\$386.15	\$373.45
34	\$413.30	\$405.20	\$410.62	\$391.30	\$378.44
35	\$416.02	\$407.87	\$413.33	\$393.88	\$380.93
36	\$418.75	\$410.54	\$416.03	\$396.46	\$383.42
37	\$421.47	\$413.21	\$418.74	\$399.04	\$385.92
38	\$424.19	\$415.88	\$421.45	\$401.62	\$388.41
39	\$429.64	\$421.22	\$426.86	\$406.78	\$393.40
40	\$435.09	\$426.56	\$432.27	\$411.93	\$398.39
41	\$443.26	\$434.57	\$440.39	\$419.67	\$405.87
42	\$451.09	\$442.25	\$448.17	\$427.08	\$413.04
43	\$461.98	\$452.93	\$458.99	\$437.40	\$423.01
44	\$475.60	\$466.28	\$472.52	\$450.29	\$435.48
45	\$491.60	\$481.97	\$488.42	\$465.44	\$450.13
46	\$510.67	\$500.66	\$507.36	\$483.49	\$467.59
47	\$532.11	\$521.68	\$528.67	\$503.80	\$487.23
48	\$556.63	\$545.72	\$553.02	\$527.00	\$509.67
49	\$580.80	\$569.41	\$577.03	\$549.89	\$531.81
50	\$608.03	\$596.12	\$604.09	\$575.68	\$556.74
51	\$634.93	\$622.48	\$630.81	\$601.14	\$581.37
52	\$664.55	\$651.52	\$660.24	\$629.18	\$608.49
53	\$694.51	\$680.89	\$690.01	\$657.55	\$635.92
54	\$726.85	\$712.60	\$722.14	\$688.17	\$665.54
55	\$759.19	\$744.31	\$754.27	\$718.79	\$695.15
56	\$794.26	\$778.69	\$789.11	\$751.99	\$727.26
57	\$829.66	\$813.40	\$824.29	\$785.51	\$759.68
58	\$867.45	\$850.45	\$861.83	\$821.29	\$794.28
59	\$886.18	\$868.81	\$880.43	\$839.02	\$811.42
60	\$923.97	\$905.85	\$917.98	\$874.79	\$846.03
61	\$956.65	\$937.90	\$950.45	\$905.74	\$875.95
62	\$978.10	\$958.92	\$971.76	\$926.04	\$895.59
63	\$1,004.99	\$985.29	\$998.48	\$951.51	\$920.22
64+	\$1,021.32	\$1,001.31	\$1,014.72	\$966.99	\$935.19

<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>	\$231.63	\$236.62	\$231.03
15 <sup>1</sup>	\$250.95	\$256.38	\$250.30
16 <sup>1</sup>	\$258.33	\$263.94	\$257.67
17 <sup>1</sup>	\$265.72	\$271.49	\$265.03
18 <sup>1</sup>	\$273.68	\$279.63	\$272.97
19	\$267.36	\$273.50	\$266.63
20	\$275.60	\$281.93	\$274.85
21	\$284.13	\$290.65	\$283.35
22	\$284.13	\$290.65	\$283.35
23	\$284.13	\$290.65	\$283.35
24	\$284.13	\$290.65	\$283.35
25	\$285.26	\$291.81	\$284.48
26	\$290.94	\$297.62	\$290.15
27	\$297.76	\$304.60	\$296.95
28	\$308.84	\$315.93	\$308.00
29	\$317.94	\$325.23	\$317.07
30	\$322.48	\$329.89	\$321.60
31	\$329.30	\$336.86	\$328.40
32	\$336.12	\$343.84	\$335.20
33	\$340.38	\$348.20	\$339.45
34	\$344.93	\$352.85	\$343.99
35	\$347.20	\$355.17	\$346.25
36	\$349.47	\$357.50	\$348.52
37	\$351.75	\$359.82	\$350.79
38	\$354.02	\$362.15	\$353.05
39	\$358.57	\$366.80	\$357.59
40	\$363.11	\$371.45	\$362.12
41	\$369.93	\$378.42	\$368.92
42	\$376.47	\$385.11	\$375.44
43	\$385.56	\$394.41	\$384.51
44	\$396.92	\$406.03	\$395.84
45	\$410.28	\$419.70	\$409.16
46	\$426.19	\$435.97	\$425.03
47	\$444.09	\$454.28	\$442.88
48	\$464.55	\$475.21	\$463.28
49	\$484.72	\$495.85	\$483.40
50	\$507.45	\$519.10	\$506.06
51	\$529.89	\$542.06	\$528.45
52	\$554.61	\$567.34	\$553.10
53	\$579.62	\$592.92	\$578.03
54	\$606.61	\$620.53	\$604.95
55	\$633.60	\$648.14	\$631.87
56	\$662.87	\$678.08	\$661.06
57	\$692.41	\$708.31	\$690.52
58	\$723.95	\$740.57	\$721.98
59	\$739.58	\$756.56	\$737.56
60	\$771.12	\$788.82	\$769.01
61	\$798.39	\$816.72	\$796.21
62	\$816.29	\$835.03	\$814.06
63	\$838.74	\$857.99	\$836.45
64+	\$852.39	\$871.95	\$850.05

<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	\$703.96	\$630.13	\$524.65	\$459.22
15	\$766.53	\$686.15	\$571.28	\$500.04
16	\$790.46	\$707.56	\$589.11	\$515.65
17	\$814.38	\$728.98	\$606.95	\$531.25
18	\$840.15	\$752.04	\$626.15	\$548.06
19	\$865.92	\$775.11	\$645.35	\$564.87
20	\$892.60	\$798.99	\$665.24	\$582.28
21	\$920.21	\$823.71	\$685.81	\$600.29
22	\$920.21	\$823.71	\$685.81	\$600.29
23	\$920.21	\$823.71	\$685.81	\$600.29
24	\$920.21	\$823.71	\$685.81	\$600.29
25	\$923.89	\$827.00	\$688.56	\$602.69
26	\$942.29	\$843.47	\$702.27	\$614.69
27	\$964.38	\$863.24	\$718.73	\$629.10
28	\$1,000.27	\$895.37	\$745.48	\$652.51
29	\$1,029.71	\$921.73	\$767.43	\$671.72
30	\$1,044.44	\$934.91	\$778.40	\$681.33
31	\$1,066.52	\$954.67	\$794.86	\$695.73
32	\$1,088.61	\$974.44	\$811.32	\$710.14
33	\$1,102.41	\$986.80	\$821.60	\$719.14
34	\$1,117.13	\$999.98	\$832.58	\$728.75
35	\$1,124.49	\$1,006.57	\$838.06	\$733.55
36	\$1,131.86	\$1,013.16	\$843.55	\$738.35
37	\$1,139.22	\$1,019.75	\$849.04	\$743.16
38	\$1,146.58	\$1,026.34	\$854.52	\$747.96
39	\$1,161.30	\$1,039.52	\$865.50	\$757.56
40	\$1,176.03	\$1,052.70	\$876.47	\$767.17
41	\$1,198.11	\$1,072.46	\$892.93	\$781.57
42	\$1,219.28	\$1,091.41	\$908.70	\$795.38
43	\$1,248.72	\$1,117.77	\$930.65	\$814.59
44	\$1,285.53	\$1,150.72	\$958.08	\$838.60
45	\$1,328.78	\$1,189.43	\$990.31	\$866.81
46	\$1,380.31	\$1,235.56	\$1,028.72	\$900.43
47	\$1,438.28	\$1,287.45	\$1,071.93	\$938.25
48	\$1,504.54	\$1,346.76	\$1,121.31	\$981.47
49	\$1,569.87	\$1,405.24	\$1,170.00	\$1,024.09
50	\$1,643.49	\$1,471.14	\$1,224.86	\$1,072.11
51	\$1,716.19	\$1,536.21	\$1,279.04	\$1,119.54
52	\$1,796.25	\$1,607.87	\$1,338.71	\$1,171.76
53	\$1,877.22	\$1,680.36	\$1,399.06	\$1,224.59
54	\$1,964.64	\$1,758.61	\$1,464.21	\$1,281.61
55	\$2,052.06	\$1,836.86	\$1,529.36	\$1,338.64
56	\$2,146.84	\$1,921.71	\$1,600.00	\$1,400.47
57	\$2,242.55	\$2,007.37	\$1,671.33	\$1,462.90
58	\$2,344.69	\$2,098.80	\$1,747.45	\$1,529.53
59	\$2,395.30	\$2,144.11	\$1,785.17	\$1,562.55
60	\$2,497.44	\$2,235.54	\$1,861.30	\$1,629.18
61	\$2,585.78	\$2,314.61	\$1,927.14	\$1,686.81
62	\$2,643.76	\$2,366.51	\$1,970.34	\$1,724.63
63	\$2,716.45	\$2,431.58	\$2,024.52	\$1,772.05
64+	\$2,760.63	\$2,471.13	\$2,057.43	\$1,800.87

Below is a listing of all ZIP codes within Rate Area 18

County	Rate Area	County + ZIP code combinations in Kaiser Permanente service area									
Orange	18	90620-24	90720-21	92609-10	92637	92688	92711-12	92799	92821-23	92850	92885-87
		90630-33	90740	92612	92646-63	92690-94	92728	92801-09	92825	92856-57	92899
		90638	90742-43	92614-20	92672-79	92697-98	92735	92811-12	92831-38	92859	
		90680	92602-07	92623-30	92683-85	92701-08	92780-82	92814-17	92840-46	92861-71	