

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE**

Plan Information

Plan Name: KP WA Gold 0
HIOS Plan ID: 23371WA1760003
Effective Date: 1/1/2025
Market Type: Individual
Exchange Status: In the exchange
Metal Level: Gold
Plan Type: Non-Standardized Plan

Plan Geographic Availability

Area Number	Available in area?	Counties where this plan is available
1	No	
2	Yes	Cowlitz
3	Yes	Clark
4	No	
5	No	
6	No	
7	No	
8	No	
9	No	

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		379.90	361.81								379.90	361.81						
15		413.67	393.97								413.67	393.97						
16		426.58	406.27								426.58	406.27						
17		439.49	418.56								439.49	418.56						
18		453.39	431.80								453.39	431.80						
19		467.30	445.05								467.30	445.05						
20		481.70	458.76								481.70	458.76						
21		496.60	472.95								496.60	472.95						
22		496.60	472.95								496.60	472.95						
23		496.60	472.95								496.60	472.95						
24		496.60	472.95								496.60	472.95						
25		498.59	474.84								498.59	474.84						
26		508.52	484.30								508.52	484.30						
27		520.44	495.65								520.44	495.65						
28		539.80	514.10								539.80	514.10						
29		555.69	529.23								555.69	529.23						
30		563.64	536.80								563.64	536.80						
31		575.56	548.15								575.56	548.15						
32		587.48	559.50								587.48	559.50						
33		594.93	566.60								594.93	566.60						
34		602.87	574.16								602.87	574.16						
35		606.84	577.95								606.84	577.95						
36		610.82	581.73								610.82	581.73						
37		614.79	585.51								614.79	585.51						
38		618.76	589.30								618.76	589.30						
39		626.71	596.86								626.71	596.86						
40		634.65	604.43								634.65	604.43						
41		646.57	615.78								646.57	615.78						
42		657.99	626.66								657.99	626.66						
43		673.88	641.79								673.88	641.79						
44		693.75	660.71								693.75	660.71						
45		717.09	682.94								717.09	682.94						
46		744.90	709.43								744.90	709.43						
47		776.18	739.22								776.18	739.22						
48		811.94	773.28								811.94	773.28						
49		847.20	806.85								847.20	806.85						
50		886.93	844.69								886.93	844.69						
51		926.16	882.05								926.16	882.05						
52		969.36	923.20								969.36	923.20						
53		1013.06	964.82								1013.06	964.82						
54		1060.24	1009.75								1060.24	1009.75						
55		1107.42	1054.68								1107.42	1054.68						
56		1158.57	1103.40								1158.57	1103.40						
57		1210.21	1152.58								1210.21	1152.58						
58		1265.33	1205.08								1265.33	1205.08						
59		1292.65	1231.09								1292.65	1231.09						
60		1347.77	1283.59								1347.77	1283.59						
61		1395.44	1328.99								1395.44	1328.99						
62		1426.73	1358.79								1426.73	1358.79						
63		1465.96	1396.15								1465.96	1396.15						
64 and over		1489.80	1418.85								1489.80	1418.85						

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE**

Plan Information

Plan Name: KP WA Gold 1750
HIOS Plan ID: 23371WA1760001
Effective Date: 1/1/2025
Market Type: Individual
Exchange Status: In the exchange
Metal Level: Gold
Plan Type: Non-Standardized Plan

Plan Geographic Availability

Area Number	Available in area?	Counties where this plan is available
1	No	
2	Yes	Cowlitz
3	Yes	Clark
4	No	
5	No	
6	No	
7	No	
8	No	
9	No	

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		352.18	335.41								352.18	335.41						
15		383.48	365.22								383.48	365.22						
16		395.45	376.62								395.45	376.62						
17		407.42	388.02								407.42	388.02						
18		420.31	400.30								420.31	400.30						
19		433.20	412.57								433.20	412.57						
20		446.55	425.29								446.55	425.29						
21		460.36	438.44								552.43	526.13						
22		460.36	438.44								552.43	526.13						
23		460.36	438.44								552.43	526.13						
24		460.36	438.44								552.43	526.13						
25		462.20	440.19								554.64	528.23						
26		471.41	448.96								565.69	538.76						
27		482.46	459.49								578.95	551.38						
28		500.41	476.58								600.50	571.90						
29		515.15	490.61								618.17	588.74						
30		522.51	497.63								627.01	597.16						
31		533.56	508.15								640.27	609.78						
32		544.61	518.67								653.53	622.41						
33		551.51	525.25								661.82	630.30						
34		558.88	532.27								670.66	638.72						
35		562.56	535.77								675.08	642.93						
36		566.25	539.28								679.49	647.14						
37		569.93	542.79								683.91	651.35						
38		573.61	546.30								688.33	655.56						
39		580.98	553.31								697.17	663.97						
40		588.34	560.33								706.01	672.39						
41		599.39	570.85								719.27	685.02						
42		609.98	580.93								731.98	697.12						
43		624.71	594.96								749.65	713.96						
44		643.13	612.50								771.75	735.00						
45		664.76	633.11								797.72	759.73						
46		690.54	657.66								828.65	789.19						
47		719.55	685.28								863.46	822.34						
48		752.69	716.85								903.23	860.22						
49		785.38	747.98								942.45	897.57						
50		822.21	783.05								986.65	939.66						
51		858.58	817.69								1030.29	981.23						
52		898.63	855.84								1078.35	1027.00						
53		939.14	894.42								1126.97	1073.30						
54		982.87	936.07								1179.45	1123.28						
55		1026.61	977.72								1231.93	1173.27						
56		1074.02	1022.88								1288.83	1227.46						
57		1121.90	1068.48								1346.28	1282.17						
58		1173.00	1117.15								1407.60	1340.57						
59		1198.32	1141.26								1437.99	1369.51						
60		1249.42	1189.93								1499.31	1427.91						
61		1293.62	1232.02								1552.34	1478.42						
62		1322.62	1259.64								1587.14	1511.57						
63		1358.99	1294.28								1630.79	1553.13						
64 and over		1381.08	1315.32								1657.29	1578.39						

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE**

Plan Information

Plan Name: KP Cascade Gold
HIOS Plan ID: 23371WA1940001
Effective Date: 1/1/2025
Market Type: Individual
Exchange Status: In the exchange
Metal Level: Gold
Plan Type: Standardized Non-Public Option Plan

Plan Geographic Availability

Area Number	Available in area?	Counties where this plan is available
1	No	
2	Yes	Cowlitz
3	Yes	Clark
4	No	
5	No	
6	No	
7	No	
8	No	
9	No	

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		399.74	380.71								399.74	380.71						
15		435.27	414.55								435.27	414.55						
16		448.86	427.48								448.86	427.48						
17		462.44	440.42								462.44	440.42						
18		477.08	454.36								477.08	454.36						
19		491.71	468.29								491.71	468.29						
20		506.86	482.72								506.86	482.72						
21		522.54	497.65								627.04	597.18						
22		522.54	497.65								627.04	597.18						
23		522.54	497.65								627.04	597.18						
24		522.54	497.65								627.04	597.18						
25		524.63	499.64								629.55	599.57						
26		535.08	509.60								642.09	611.52						
27		547.62	521.54								657.14	625.85						
28		568.00	540.95								681.60	649.14						
29		584.72	556.87								701.66	668.25						
30		593.08	564.84								711.69	677.80						
31		605.62	576.78								726.74	692.14						
32		618.16	588.72								741.79	706.47						
33		626.00	596.19								751.20	715.43						
34		634.36	604.15								761.23	724.98						
35		638.54	608.13								766.25	729.76						
36		642.72	612.11								771.26	734.54						
37		646.90	616.10								776.28	739.31						
38		651.08	620.08								781.30	744.09						
39		659.44	628.04								791.33	753.65						
40		667.80	636.00								801.36	763.20						
41		680.34	647.95								816.41	777.53						
42		692.36	659.39								830.83	791.27						
43		709.08	675.32								850.90	810.38						
44		729.98	695.22								875.98	834.27						
45		754.54	718.61								905.45	862.33						
46		783.80	746.48								940.57	895.78						
47		816.72	777.83								980.07	933.40						
48		854.35	813.66								1025.22	976.40						
49		891.45	849.00								1069.74	1018.80						
50		933.25	888.81								1119.90	1066.57						
51		974.53	928.12								1169.44	1113.75						
52		1019.99	971.42								1223.99	1165.70						
53		1065.97	1015.21								1279.17	1218.26						
54		1115.62	1062.49								1338.74	1274.99						
55		1165.26	1109.77								1398.31	1331.72						
56		1219.08	1161.03								1462.89	1393.23						
57		1273.42	1212.78								1528.11	1455.34						
58		1331.42	1268.02								1597.71	1521.63						
59		1360.16	1295.39								1632.20	1554.47						
60		1418.16	1350.63								1701.80	1620.76						
61		1468.33	1398.41								1761.99	1678.09						
62		1501.25	1429.76								1801.50	1715.71						
63		1542.53	1469.07								1851.03	1762.89						
64 and over		1567.61	1492.95								1881.12	1791.54						

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE**

Plan Information

Plan Name: KP WA Silver 750
HIOS Plan ID: 23371WA1760002
Effective Date: 1/1/2025
Market Type: Individual
Exchange Status: In the exchange
Metal Level: Silver
Plan Type: Non-Standardized Plan

Plan Geographic Availability

Area Number	Available in area?	Counties where this plan is available
1	No	
2	Yes	Cowlitz
3	Yes	Clark
4	No	
5	No	
6	No	
7	No	
8	No	
9	No	

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		371.24	353.56								371.24	353.56						
15		404.23	384.99								404.23	384.99						
16		416.85	397.00								416.85	397.00						
17		429.47	409.02								429.47	409.02						
18		443.06	421.96								443.06	421.96						
19		456.64	434.90								456.64	434.90						
20		470.72	448.30								470.72	448.30						
21		485.28	462.17								582.33	554.60						
22		485.28	462.17								582.33	554.60						
23		485.28	462.17								582.33	554.60						
24		485.28	462.17								582.33	554.60						
25		487.22	464.02								584.66	556.82						
26		496.92	473.26								596.31	567.91						
27		508.57	484.35								610.28	581.22						
28		527.49	502.38								632.99	602.85						
29		543.02	517.17								651.63	620.60						
30		550.79	524.56								660.95	629.47						
31		562.43	535.65								674.92	642.78						
32		574.08	546.74								688.90	656.09						
33		581.36	553.68								697.63	664.41						
34		589.12	561.07								706.95	673.29						
35		593.01	564.77								711.61	677.72						
36		596.89	568.47								716.27	682.16						
37		600.77	572.16								720.93	686.60						
38		604.65	575.86								725.58	691.03						
39		612.42	583.25								734.90	699.91						
40		620.18	590.65								744.22	708.78						
41		631.83	601.74								758.19	722.09						
42		642.99	612.37								771.59	734.85						
43		658.52	627.16								790.22	752.59						
44		677.93	645.65								813.52	774.78						
45		700.74	667.37								840.89	800.84						
46		727.91	693.25								873.50	831.90						
47		758.49	722.37								910.18	866.84						
48		793.43	755.64								952.11	906.77						
49		827.88	788.46								993.46	946.15						
50		866.70	825.43								1040.04	990.52						
51		905.04	861.94								1086.05	1034.33						
52		947.26	902.15								1136.71	1082.58						
53		989.96	942.82								1187.95	1131.39						
54		1036.06	986.73								1243.28	1184.07						
55		1082.16	1030.63								1298.60	1236.76						
56		1132.15	1078.24								1358.58	1293.88						
57		1182.62	1126.30								1419.14	1351.56						
58		1236.48	1177.60								1483.78	1413.12						
59		1263.17	1203.02								1515.81	1443.63						
60		1317.04	1254.32								1580.45	1505.19						
61		1363.62	1298.69								1636.35	1558.43						
62		1394.20	1327.81								1673.04	1593.37						
63		1432.53	1364.32								1719.04	1637.18						
64 and over		1455.83	1386.51								1746.99	1663.80						

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE**

Plan Information

Plan Name: KP Cascade Silver
HIOS Plan ID: 23371WA1940002
Effective Date: 1/1/2025
Market Type: Individual
Exchange Status: In the exchange
Metal Level: Silver
Plan Type: Standardized Non-Public Option Plan

Plan Geographic Availability

Area Number	Available in area?	Counties where this plan is available
1	No	
2	Yes	Cowlitz
3	Yes	Clark
4	No	
5	No	
6	No	
7	No	
8	No	
9	No	

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		379.75	361.67								379.75	361.67						
15		413.50	393.81								413.50	393.81						
16		426.41	406.11								426.41	406.11						
17		439.32	418.40								439.32	418.40						
18		453.22	431.63								453.22	431.63						
19		467.12	444.87								467.12	444.87						
20		481.51	458.58								481.51	458.58						
21		496.40	472.77								496.40	472.77						
22		496.40	472.77								496.40	472.77						
23		496.40	472.77								496.40	472.77						
24		496.40	472.77								496.40	472.77						
25		498.39	474.66								498.39	474.66						
26		508.32	484.11								508.32	484.11						
27		520.23	495.46								520.23	495.46						
28		539.59	513.90								539.59	513.90						
29		555.48	529.02								555.48	529.02						
30		563.42	536.59								563.42	536.59						
31		575.33	547.93								575.33	547.93						
32		587.25	559.28								587.25	559.28						
33		594.69	566.37								594.69	566.37						
34		602.63	573.94								602.63	573.94						
35		606.60	577.72								606.60	577.72						
36		610.58	581.50								610.58	581.50						
37		614.55	585.28								614.55	585.28						
38		618.52	589.07								618.52	589.07						
39		626.46	596.63								626.46	596.63						
40		634.40	604.19								634.40	604.19						
41		646.32	615.54								646.32	615.54						
42		657.73	626.41								657.73	626.41						
43		673.62	641.54								673.62	641.54						
44		693.48	660.45								693.48	660.45						
45		716.81	682.67								716.81	682.67						
46		744.60	709.15								744.60	709.15						
47		775.88	738.93								775.88	738.93						
48		811.62	772.97								811.62	772.97						
49		846.86	806.54								846.86	806.54						
50		886.58	844.36								886.58	844.36						
51		925.79	881.71								925.79	881.71						
52		968.98	922.84								968.98	922.84						
53		1012.66	964.44								1012.66	964.44						
54		1059.82	1009.35								1059.82	1009.35						
55		1106.98	1054.27								1106.98	1054.27						
56		1158.11	1102.96								1158.11	1102.96						
57		1209.73	1152.13								1209.73	1152.13						
58		1264.84	1204.61								1264.84	1204.61						
59		1292.14	1230.61								1292.14	1230.61						
60		1347.24	1283.08								1347.24	1283.08						
61		1394.89	1328.47								1394.89	1328.47						
62		1426.17	1358.25								1426.17	1358.25						
63		1465.38	1395.60								1465.38	1395.60						
64 and over		1489.20	1418.31								1489.20	1418.31						

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE**

Plan Information

Plan Name: KP WA Bronze 9100
HIOS Plan ID: 23371WA1780003
Effective Date: 1/1/2025
Market Type: Individual
Exchange Status: In the exchange
Metal Level: Bronze
Plan Type: Non-Standardized Plan

Plan Geographic Availability

Area Number	Available in area?	Counties where this plan is available
1	No	
2	Yes	Cowlitz
3	Yes	Clark
4	No	
5	No	
6	No	
7	No	
8	No	
9	No	

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		265.62	252.97								265.62	252.97						
15		289.23	275.46								289.23	275.46						
16		298.26	284.05								298.26	284.05						
17		307.28	292.65								307.28	292.65						
18		317.00	301.91								317.00	301.91						
19		326.73	311.17								326.73	311.17						
20		336.80	320.76								336.80	320.76						
21		347.21	330.68								416.65	396.81						
22		347.21	330.68								416.65	396.81						
23		347.21	330.68								416.65	396.81						
24		347.21	330.68								416.65	396.81						
25		348.60	332.00								418.32	398.40						
26		355.55	338.61								426.65	406.34						
27		363.88	346.55								436.65	415.86						
28		377.42	359.45								452.90	431.34						
29		388.53	370.03								466.24	444.03						
30		394.09	375.32								472.90	450.38						
31		402.42	383.26								482.90	459.91						
32		410.75	391.19								492.90	469.43						
33		415.96	396.15								499.15	475.38						
34		421.52	401.44								505.82	481.73						
35		424.29	404.09								509.15	484.91						
36		427.07	406.73								512.49	488.08						
37		429.85	409.38								515.82	491.26						
38		432.63	412.03								519.15	494.43						
39		438.18	417.32								525.82	500.78						
40		443.74	422.61								532.48	507.13						
41		452.07	430.54								542.48	516.65						
42		460.06	438.15								552.07	525.78						
43		471.17	448.73								565.40	538.48						
44		485.06	461.96								582.07	554.35						
45		501.37	477.50								601.65	573.00						
46		520.82	496.02								624.98	595.22						
47		542.69	516.85								651.23	620.22						
48		567.69	540.66								681.23	648.79						
49		592.34	564.14								710.81	676.96						
50		620.12	590.59								744.15	708.71						
51		647.55	616.72								777.06	740.06						
52		677.76	645.48								813.31	774.58						
53		708.31	674.58								849.98	809.50						
54		741.30	706.00								889.56	847.20						
55		774.28	737.41								929.14	884.90						
56		810.05	771.47								972.06	925.77						
57		846.16	805.86								1015.39	967.04						
58		884.70	842.57								1061.64	1011.08						
59		903.79	860.76								1084.55	1032.91						
60		942.33	897.46								1130.80	1076.95						
61		975.67	929.21								1170.80	1115.05						
62		997.54	950.04								1197.05	1140.05						
63		1024.97	976.16								1229.97	1171.40						
64 and over		1041.63	992.04								1249.95	1190.43						

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE**

Plan Information

Plan Name: KP WA Bronze HSA 7100
HIOS Plan ID: 23371WA1780004
Effective Date: 1/1/2025
Market Type: Individual
Exchange Status: In the exchange
Metal Level: Bronze
Plan Type: Non-Standardized Plan

Plan Geographic Availability

Area Number	Available in area?	Counties where this plan is available
1	No	
2	Yes	Cowlitz
3	Yes	Clark
4	No	
5	No	
6	No	
7	No	
8	No	
9	No	

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		274.29	261.23								274.29	261.23						
15		298.67	284.45								298.67	284.45						
16		307.99	293.33								307.99	293.33						
17		317.32	302.21								317.32	302.21						
18		327.35	311.77								327.35	311.77						
19		337.39	321.33								337.39	321.33						
20		347.79	331.23								347.79	331.23						
21		358.55	341.47								430.26	409.77						
22		358.55	341.47								430.26	409.77						
23		358.55	341.47								430.26	409.77						
24		358.55	341.47								430.26	409.77						
25		359.98	342.84								431.98	411.41						
26		367.15	349.67								440.58	419.60						
27		375.76	357.87								450.91	429.44						
28		389.74	371.18								467.69	445.42						
29		401.22	382.11								481.46	458.53						
30		406.95	387.57								488.34	465.09						
31		415.56	395.77								498.67	474.92						
32		424.16	403.96								509.00	484.76						
33		429.54	409.09								515.45	490.90						
34		435.28	414.55								522.33	497.46						
35		438.15	417.28								525.78	500.74						
36		441.01	420.01								529.22	504.02						
37		443.88	422.75								532.66	507.29						
38		446.75	425.48								536.10	510.57						
39		452.49	430.94								542.99	517.13						
40		458.22	436.40								549.87	523.69						
41		466.83	444.60								560.20	533.52						
42		475.08	452.45								570.09	542.94						
43		486.55	463.38								583.86	556.06						
44		500.89	477.04								601.07	572.45						
45		517.74	493.09								621.29	591.71						
46		537.82	512.21								645.39	614.65						
47		560.41	533.72								672.49	640.47						
48		586.23	558.31								703.47	669.97						
49		611.68	582.56								734.02	699.07						
50		640.37	609.87								768.44	731.85						
51		668.69	636.85								802.43	764.22						
52		699.89	666.56								839.86	799.87						
53		731.44	696.61								877.73	835.93						
54		765.50	729.05								918.60	874.86						
55		799.56	761.49								959.48	913.79						
56		836.49	796.66								1003.79	955.99						
57		873.78	832.17								1048.54	998.61						
58		913.58	870.08								1096.30	1044.09						
59		933.30	888.86								1119.96	1066.63						
60		973.10	926.76								1167.72	1112.11						
61		1007.52	959.54								1209.03	1151.45						
62		1030.11	981.06								1236.13	1177.27						
63		1058.43	1008.03								1270.12	1209.64						
64 and over		1075.65	1024.41								1290.77	1229.31						

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE**

Plan Information

Plan Name: KP Cascade Bronze
HIOS Plan ID: 23371WA1940003
Effective Date: 1/1/2025
Market Type: Individual
Exchange Status: In the exchange
Metal Level: Bronze
Plan Type: Standardized Non-Public Option Plan

Plan Geographic Availability

Area Number	Available in area?	Counties where this plan is available
1	No	
2	Yes	Cowlitz
3	Yes	Clark
4	No	
5	No	
6	No	
7	No	
8	No	
9	No	

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		272.58	259.60								272.58	259.60						
15		296.81	282.68								296.81	282.68						
16		306.08	291.50								306.08	291.50						
17		315.34	300.32								315.34	300.32						
18		325.32	309.82								325.32	309.82						
19		335.29	319.33								335.29	319.33						
20		345.63	329.17								345.63	329.17						
21		356.32	339.35								427.58	407.22						
22		356.32	339.35								427.58	407.22						
23		356.32	339.35								427.58	407.22						
24		356.32	339.35								427.58	407.22						
25		357.74	340.71								429.29	408.85						
26		364.87	347.49								437.84	416.99						
27		373.42	355.64								448.10	426.76						
28		387.32	368.87								464.78	442.65						
29		398.72	379.73								478.46	455.68						
30		404.42	385.16								485.30	462.19						
31		412.97	393.30								495.56	471.97						
32		421.52	401.45								505.83	481.74						
33		426.87	406.54								512.24	487.85						
34		432.57	411.97								519.08	494.36						
35		435.42	414.68								522.50	497.62						
36		438.27	417.40								525.92	500.88						
37		441.12	420.11								529.34	504.14						
38		443.97	422.83								532.76	507.39						
39		449.67	428.26								539.60	513.91						
40		455.37	433.69								546.45	520.42						
41		463.92	441.83								556.71	530.20						
42		472.12	449.64								566.54	539.56						
43		483.52	460.50								580.22	552.59						
44		497.77	474.07								597.33	568.88						
45		514.52	490.02								617.42	588.02						
46		534.47	509.02								641.37	610.83						
47		556.92	530.40								668.31	636.48						
48		582.58	554.83								699.09	665.80						
49		607.87	578.93								729.45	694.71						
50		636.38	606.08								763.66	727.29						
51		664.53	632.88								797.43	759.46						
52		695.53	662.41								834.63	794.89						
53		726.88	692.27								872.26	830.72						
54		760.73	724.51								912.88	869.41						
55		794.58	756.75								953.50	908.10						
56		831.28	791.70								997.54	950.04						
57		868.34	826.99								1042.01	992.39						
58		907.89	864.66								1089.47	1037.59						
59		927.49	883.32								1112.99	1059.99						
60		967.04	920.99								1160.45	1105.19						
61		1001.25	953.57								1201.50	1144.28						
62		1023.69	974.95								1228.43	1169.94						
63		1051.84	1001.76								1262.21	1202.11						
64 and over		1068.95	1018.05								1282.74	1221.66						

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE**

Plan Information

Plan Name: KP WA Gold 0 with Pediatric Dental
HIOS Plan ID: 23371WA1770003
Effective Date: 1/1/2025
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Gold
Plan Type: Non-Standardized Plan

Plan Geographic Availability

Area Number	Available in area?	Counties where this plan is available
1	No	
2	Yes	Cowlitz
3	Yes	Clark
4	No	
5	No	
6	No	
7	No	
8	No	
9	No	

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		383.83	365.55								383.83	365.55						
15		417.95	398.05								417.95	398.05						
16		431.00	410.47								431.00	410.47						
17		444.04	422.90								444.04	422.90						
18		458.09	436.28								458.09	436.28						
19		472.14	449.66								472.14	449.66						
20		486.69	463.51								486.69	463.51						
21		501.74	477.85								602.09	573.42						
22		501.74	477.85								602.09	573.42						
23		501.74	477.85								602.09	573.42						
24		501.74	477.85								602.09	573.42						
25		503.75	479.76								604.50	575.71						
26		513.78	489.32								616.54	587.18						
27		525.82	500.78								630.99	600.94						
28		545.39	519.42								654.47	623.31						
29		561.45	534.71								673.74	641.65						
30		569.48	542.36								683.37	650.83						
31		581.52	553.83								697.82	664.59						
32		593.56	565.29								712.27	678.35						
33		601.09	572.46								721.30	686.95						
34		609.11	580.11								730.94	696.13						
35		613.13	583.93								735.75	700.72						
36		617.14	587.75								740.57	705.30						
37		621.15	591.58								745.39	709.89						
38		625.17	595.40								750.20	714.48						
39		633.20	603.04								759.84	723.65						
40		641.22	610.69								769.47	732.83						
41		653.27	622.16								783.92	746.59						
42		664.81	633.15								797.77	759.78						
43		680.86	648.44								817.03	778.13						
44		700.93	667.55								841.12	801.06						
45		724.51	690.01								869.42	828.02						
46		752.61	716.77								903.13	860.13						
47		784.22	746.88								941.06	896.25						
48		820.35	781.28								984.42	937.54						
49		855.97	815.21								1027.16	978.25						
50		896.11	853.44								1075.33	1024.12						
51		935.75	891.19								1122.90	1069.42						
52		979.40	932.76								1175.28	1119.31						
53		1023.55	974.81								1228.26	1169.77						
54		1071.22	1020.21								1285.46	1224.25						
55		1118.88	1065.60								1342.66	1278.72						
56		1170.56	1114.82								1404.67	1337.78						
57		1222.74	1164.52								1467.29	1397.42						
58		1278.44	1217.56								1534.12	1461.07						
59		1306.03	1243.84								1567.24	1492.61						
60		1361.72	1296.88								1634.07	1556.26						
61		1409.89	1342.75								1691.87	1611.30						
62		1441.50	1372.86								1729.80	1647.43						
63		1481.14	1410.61								1777.37	1692.73						
64 and over		1505.22	1433.55								1806.27	1720.26						

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE**

Plan Information

Plan Name: KP WA Gold 1750 with Pediatric Dental
HIOS Plan ID: 23371WA1770001
Effective Date: 1/1/2025
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Gold
Plan Type: Non-Standardized Plan

Plan Geographic Availability

Area Number	Available in area?	Counties where this plan is available
1	No	
2	Yes	Cowlitz
3	Yes	Clark
4	No	
5	No	
6	No	
7	No	
8	No	
9	No	

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		355.99	339.04								355.99	339.04						
15		387.63	369.17								387.63	369.17						
16		399.73	380.70								399.73	380.70						
17		411.83	392.22								411.83	392.22						
18		424.86	404.63								424.86	404.63						
19		437.89	417.04								437.89	417.04						
20		451.38	429.89								451.38	429.89						
21		465.34	443.18								558.41	531.82						
22		465.34	443.18								558.41	531.82						
23		465.34	443.18								558.41	531.82						
24		465.34	443.18								558.41	531.82						
25		467.21	444.96								560.65	533.95						
26		476.51	453.82								571.81	544.59						
27		487.68	464.46								585.22	557.35						
28		505.83	481.74								606.99	578.09						
29		520.72	495.92								624.86	595.11						
30		528.17	503.01								633.80	603.62						
31		539.33	513.65								647.20	616.38						
32		550.50	524.29								660.60	629.15						
33		557.48	530.94								668.98	637.12						
34		564.93	538.03								677.91	645.63						
35		568.65	541.57								682.38	649.89						
36		572.37	545.12								686.85	654.14						
37		576.10	548.66								691.32	658.40						
38		579.82	552.21								695.78	662.65						
39		587.26	559.30								704.72	671.16						
40		594.71	566.39								713.65	679.67						
41		605.88	577.03								727.05	692.43						
42		616.58	587.22								739.90	704.66						
43		631.47	601.40								757.77	721.68						
44		650.09	619.13								780.10	742.96						
45		671.96	639.96								806.35	767.95						
46		698.02	664.78								837.62	797.73						
47		727.33	692.70								872.80	831.24						
48		760.84	724.61								913.01	869.53						
49		793.88	756.07								952.65	907.29						
50		831.10	791.53								997.33	949.83						
51		867.87	826.54								1041.44	991.85						
52		908.35	865.10								1090.02	1038.12						
53		949.30	904.10								1139.16	1084.92						
54		993.51	946.20								1192.21	1135.44						
55		1037.72	988.30								1245.26	1185.96						
56		1085.65	1033.95								1302.78	1240.74						
57		1134.04	1080.04								1360.85	1296.05						
58		1185.70	1129.23								1422.84	1355.08						
59		1211.29	1153.61								1453.55	1384.33						
60		1262.94	1202.80								1515.53	1443.36						
61		1307.62	1245.35								1569.14	1494.42						
62		1336.93	1273.27								1604.32	1527.92						
63		1373.70	1308.28								1648.43	1569.94						
64 and over		1396.02	1329.54								1675.23	1595.46						

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE**

Plan Information

Plan Name: KP WA Silver 750 with Pediatric Dental
HIOS Plan ID: 23371WA1770002
Effective Date: 1/1/2025
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Silver
Plan Type: Non-Standardized Plan

Plan Geographic Availability

Area Number	Available in area?	Counties where this plan is available
1	No	
2	Yes	Cowlitz
3	Yes	Clark
4	No	
5	No	
6	No	
7	No	
8	No	
9	No	

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		335.99	319.99								335.99	319.99						
15		365.85	348.43								365.85	348.43						
16		377.27	359.31								377.27	359.31						
17		388.69	370.18								388.69	370.18						
18		400.99	381.89								400.99	381.89						
19		413.28	393.60								413.28	393.60						
20		426.02	405.73								426.02	405.73						
21		439.20	418.28								527.04	501.94						
22		439.20	418.28								527.04	501.94						
23		439.20	418.28								527.04	501.94						
24		439.20	418.28								527.04	501.94						
25		440.95	419.96								529.15	503.95						
26		449.74	428.32								539.69	513.99						
27		460.28	438.36								552.33	526.03						
28		477.41	454.67								572.89	545.61						
29		491.46	468.06								589.75	561.67						
30		498.49	474.75								598.19	569.70						
31		509.03	484.79								610.84	581.75						
32		519.57	494.83								623.48	593.79						
33		526.16	501.10								631.39	601.32						
34		533.19	507.80								639.82	609.36						
35		536.70	511.14								644.04	613.37						
36		540.21	514.49								648.26	617.39						
37		543.73	517.83								652.47	621.40						
38		547.24	521.18								656.69	625.42						
39		554.27	527.87								665.12	633.45						
40		561.29	534.57								673.55	641.48						
41		571.83	544.60								686.20	653.53						
42		581.94	554.23								698.32	665.07						
43		595.99	567.61								715.19	681.13						
44		613.56	584.34								736.27	701.21						
45		634.20	604.00								761.04	724.80						
46		658.80	627.42								790.56	752.91						
47		686.47	653.78								823.76	784.53						
48		718.09	683.89								861.71	820.67						
49		749.27	713.59								899.12	856.31						
50		784.41	747.05								941.29	896.46						
51		819.10	780.10								982.92	936.12						
52		857.31	816.49								1028.78	979.79						
53		895.96	853.30								1075.16	1023.96						
54		937.69	893.03								1125.22	1071.64						
55		979.41	932.77								1175.29	1119.33						
56		1024.65	975.85								1229.58	1171.03						
57		1070.32	1019.36								1284.39	1223.23						
58		1119.07	1065.79								1342.89	1278.94						
59		1143.23	1088.79								1371.88	1306.55						
60		1191.98	1135.22								1430.38	1362.26						
61		1234.14	1175.38								1480.97	1410.45						
62		1261.81	1201.73								1514.18	1442.07						
63		1296.51	1234.77								1555.81	1481.73						
64 and over		1317.59	1254.84								1581.11	1505.82						

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE**

Plan Information

Plan Name: KP WA Silver 4500 with Pediatric Dental
HIOS Plan ID: 23371WA1790001
Effective Date: 1/1/2025
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Silver
Plan Type: Non-Standardized Plan

Plan Geographic Availability

Area Number	Available in area?	Counties where this plan is available
1	No	
2	Yes	Cowlitz
3	Yes	Clark
4	No	
5	No	
6	No	
7	No	
8	No	
9	No	

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		301.62	287.26								301.62	287.26						
15		328.43	312.79								328.43	312.79						
16		338.68	322.56								338.68	322.56						
17		348.93	332.32								348.93	332.32						
18		359.97	342.83								359.97	342.83						
19		371.01	353.35								371.01	353.35						
20		382.45	364.24								382.45	364.24						
21		394.28	375.50								473.13	450.60						
22		394.28	375.50								473.13	450.60						
23		394.28	375.50								473.13	450.60						
24		394.28	375.50								473.13	450.60						
25		395.85	377.00								475.02	452.40						
26		403.74	384.51								484.49	461.42						
27		413.20	393.53								495.84	472.23						
28		428.58	408.17								514.29	489.80						
29		441.19	420.19								529.43	504.22						
30		447.50	426.19								537.00	511.43						
31		456.97	435.21								548.36	522.25						
32		466.43	444.22								559.71	533.06						
33		472.34	449.85								566.81	539.82						
34		478.65	455.86								574.38	547.03						
35		481.81	458.86								578.17	550.63						
36		484.96	461.87								581.95	554.24						
37		488.11	464.87								585.74	557.84						
38		491.27	467.87								589.52	561.45						
39		497.58	473.88								597.09	568.66						
40		503.88	479.89								604.66	575.87						
41		513.35	488.90								616.02	586.68						
42		522.42	497.54								626.90	597.05						
43		535.03	509.55								642.04	611.47						
44		550.80	524.57								660.96	629.49						
45		569.33	542.22								683.20	650.67						
46		591.41	563.25								709.70	675.90						
47		616.25	586.91								739.50	704.29						
48		644.64	613.94								773.57	736.73						
49		672.64	640.60								807.16	768.73						
50		704.18	670.64								845.01	804.77						
51		735.32	700.31								882.39	840.37						
52		769.63	732.98								923.55	879.57						
53		804.32	766.02								965.19	919.23						
54		841.78	801.69								1010.14	962.03						
55		879.24	837.37								1055.08	1004.84						
56		919.85	876.04								1103.82	1051.25						
57		960.85	915.10								1153.02	1098.12						
58		1004.62	956.78								1205.54	1148.13						
59		1026.30	977.43								1231.56	1172.92						
60		1070.07	1019.11								1284.08	1222.93						
61		1107.92	1055.16								1329.50	1266.19						
62		1132.76	1078.81								1359.31	1294.58						
63		1163.90	1108.48								1396.68	1330.17						
64 and over		1182.83	1126.50								1419.39	1351.80						

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE**

Plan Information

Plan Name: KP WA Silver HSA 3300 with Pediatric Dental
HIOS Plan ID: 23371WA1790004
Effective Date: 1/1/2025
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Silver
Plan Type: Non-Standardized Plan

Plan Geographic Availability

Area Number	Available in area?	Counties where this plan is available
1	No	
2	Yes	Cowlitz
3	Yes	Clark
4	No	
5	No	
6	No	
7	No	
8	No	
9	No	

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		305.74	291.18								305.74	291.18						
15		332.91	317.06								332.91	317.06						
16		343.30	326.96								343.30	326.96						
17		353.70	336.85								353.70	336.85						
18		364.89	347.51								364.89	347.51						
19		376.08	358.17								376.08	358.17						
20		387.67	369.21								387.67	369.21						
21		399.66	380.63								479.59	456.75						
22		399.66	380.63								479.59	456.75						
23		399.66	380.63								479.59	456.75						
24		399.66	380.63								479.59	456.75						
25		401.26	382.15								481.51	458.58						
26		409.25	389.76								491.10	467.71						
27		418.84	398.90								502.61	478.67						
28		434.43	413.74								521.31	496.49						
29		447.22	425.92								536.66	511.10						
30		453.61	432.01								544.33	518.41						
31		463.20	441.14								555.84	529.37						
32		472.79	450.28								567.35	540.34						
33		478.79	455.99								574.55	547.19						
34		485.18	462.08								582.22	554.49						
35		488.38	465.12								586.06	558.15						
36		491.58	468.17								589.89	561.80						
37		494.77	471.21								593.73	565.46						
38		497.97	474.26								597.57	569.11						
39		504.37	480.35								605.24	576.42						
40		510.76	486.44								612.91	583.73						
41		520.35	495.57								624.42	594.69						
42		529.54	504.33								635.45	605.19						
43		542.33	516.51								650.80	619.81						
44		558.32	531.73								669.98	638.08						
45		577.10	549.62								692.52	659.55						
46		599.48	570.94								719.38	685.13						
47		624.66	594.92								749.60	713.90						
48		653.44	622.32								784.13	746.79						
49		681.81	649.35								818.18	779.22						
50		713.79	679.80								856.54	815.76						
51		745.36	709.87								894.43	851.84						
52		780.13	742.98								936.16	891.58						
53		815.30	776.48								978.36	931.77						
54		853.27	812.63								1023.92	975.16						
55		891.23	848.79								1069.48	1018.55						
56		932.40	888.00								1118.88	1065.60						
57		973.96	927.58								1168.76	1113.10						
58		1018.32	969.83								1221.99	1163.80						
59		1040.31	990.77								1248.37	1188.92						
60		1084.67	1033.02								1301.60	1239.62						
61		1123.03	1069.56								1347.64	1283.47						
62		1148.21	1093.54								1377.86	1312.24						
63		1179.79	1123.61								1415.74	1348.33						
64 and over		1198.97	1141.89								1438.76	1370.25						

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE**

Plan Information

Plan Name: KP WA Bronze 6000 with Pediatric Dental
HIOS Plan ID: 23371WA1790002
Effective Date: 1/1/2025
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Bronze
Plan Type: Non-Standardized Plan

Plan Geographic Availability

Area Number	Available in area?	Counties where this plan is available
1	No	
2	Yes	Cowlitz
3	Yes	Clark
4	No	
5	No	
6	No	
7	No	
8	No	
9	No	

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		278.43	265.17								278.43	265.17						
15		303.18	288.74								303.18	288.74						
16		312.64	297.75								312.64	297.75						
17		322.10	306.76								322.10	306.76						
18		332.29	316.47								332.29	316.47						
19		342.48	326.17								342.48	326.17						
20		353.04	336.23								353.04	336.23						
21		363.96	346.63								436.75	415.95						
22		363.96	346.63								436.75	415.95						
23		363.96	346.63								436.75	415.95						
24		363.96	346.63								436.75	415.95						
25		365.41	348.01								438.49	417.61						
26		372.69	354.94								447.23	425.93						
27		381.43	363.26								457.71	435.92						
28		395.62	376.78								474.74	452.14						
29		407.27	387.87								488.72	465.45						
30		413.09	393.42								495.71	472.10						
31		421.83	401.74								506.19	482.09						
32		430.56	410.06								516.67	492.07						
33		436.02	415.26								523.22	498.31						
34		441.84	420.80								530.21	504.96						
35		444.75	423.58								533.71	508.29						
36		447.67	426.35								537.20	511.62						
37		450.58	429.12								540.69	514.95						
38		453.49	431.89								544.19	518.27						
39		459.31	437.44								551.18	524.93						
40		465.14	442.99								558.16	531.58						
41		473.87	451.31								568.65	541.57						
42		482.24	459.28								578.69	551.13						
43		493.89	470.37								592.67	564.44						
44		508.45	484.24								610.14	581.08						
45		525.55	500.53								630.66	600.63						
46		545.93	519.94								655.12	623.93						
47		568.86	541.77								682.64	650.13						
48		595.07	566.73								714.08	680.08						
49		620.91	591.34								745.09	709.61						
50		650.03	619.07								780.03	742.89						
51		678.78	646.46								814.53	775.75						
52		710.44	676.61								852.53	811.93						
53		742.47	707.12								890.97	848.54						
54		777.05	740.04								932.46	888.05						
55		811.62	772.97								973.95	927.57						
56		849.11	808.68								1018.93	970.41						
57		886.96	844.73								1064.35	1013.67						
58		927.36	883.20								1112.83	1059.84						
59		947.38	902.27								1136.85	1082.72						
60		987.78	940.74								1185.33	1128.89						
61		1022.72	974.02								1227.26	1168.82						
62		1045.65	995.85								1254.78	1195.02						
63		1074.40	1023.24								1289.28	1227.88						
64 and over		1091.87	1039.89								1310.24	1247.85						

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE**

Plan Information

Plan Name: KP WA Bronze 9100 with Pediatric Dental
HIOS Plan ID: 23371WA1790003
Effective Date: 1/1/2025
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Bronze
Plan Type: Non-Standardized Plan

Plan Geographic Availability

Area Number	Available in area?	Counties where this plan is available
1	No	
2	Yes	Cowlitz
3	Yes	Clark
4	No	
5	No	
6	No	
7	No	
8	No	
9	No	

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		268.95	256.14								268.95	256.14						
15		292.85	278.91								292.85	278.91						
16		301.99	287.61								301.99	287.61						
17		311.13	296.32								311.13	296.32						
18		320.98	305.69								320.98	305.69						
19		330.82	315.07								330.82	315.07						
20		341.02	324.78								341.02	324.78						
21		351.56	334.82								421.88	401.79						
22		351.56	334.82								421.88	401.79						
23		351.56	334.82								421.88	401.79						
24		351.56	334.82								421.88	401.79						
25		352.97	336.16								423.56	403.40						
26		360.00	342.86								432.00	411.43						
27		368.44	350.89								442.13	421.07						
28		382.15	363.95								458.58	436.74						
29		393.40	374.67								472.08	449.60						
30		399.03	380.02								478.83	456.03						
31		407.46	388.06								488.96	465.67						
32		415.90	396.10								499.08	475.32						
33		421.17	401.12								505.41	481.34						
34		426.80	406.48								512.16	487.77						
35		429.61	409.15								515.53	490.98						
36		432.42	411.83								518.91	494.20						
37		435.24	414.51								522.28	497.41						
38		438.05	417.19								525.66	500.63						
39		443.67	422.55								532.41	507.06						
40		449.30	427.90								539.16	513.49						
41		457.74	435.94								549.28	523.13						
42		465.82	443.64								558.99	532.37						
43		477.07	454.36								572.49	545.23						
44		491.14	467.75								589.36	561.30						
45		507.66	483.48								609.19	580.18						
46		527.35	502.24								632.82	602.68						
47		549.50	523.33								659.39	627.99						
48		574.81	547.44								689.77	656.92						
49		599.77	571.21								719.72	685.45						
50		627.89	597.99								753.47	717.59						
51		655.67	624.45								786.80	749.33						
52		686.25	653.58								823.50	784.29						
53		717.19	683.04								860.63	819.65						
54		750.59	714.85								900.71	857.82						
55		783.99	746.66								940.79	895.99						
56		820.20	781.14								984.24	937.37						
57		856.76	815.96								1028.12	979.16						
58		895.79	853.13								1074.94	1023.76						
59		915.12	871.55								1098.15	1045.85						
60		954.15	908.71								1144.98	1090.45						
61		987.90	940.85								1185.48	1129.02						
62		1010.04	961.95								1212.05	1154.34						
63		1037.82	988.40								1245.38	1186.08						
64 and over		1054.68	1004.46								1265.63	1205.37						

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE**

Plan Information

Plan Name: KP WA Bronze HSA 7100 with Pediatric Dental
HIOS Plan ID: 23371WA1790005
Effective Date: 1/1/2025
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Bronze
Plan Type: Non-Standardized Plan

Plan Geographic Availability

Area Number	Available in area?	Counties where this plan is available
1	No	
2	Yes	Cowlitz
3	Yes	Clark
4	No	
5	No	
6	No	
7	No	
8	No	
9	No	

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		277.66	264.43								277.66	264.43						
15		302.34	287.94								302.34	287.94						
16		311.77	296.93								311.77	296.93						
17		321.21	305.91								321.21	305.91						
18		331.37	315.59								331.37	315.59						
19		341.53	325.27								341.53	325.27						
20		352.06	335.29								352.06	335.29						
21		362.95	345.66								435.54	414.80						
22		362.95	345.66								435.54	414.80						
23		362.95	345.66								435.54	414.80						
24		362.95	345.66								435.54	414.80						
25		364.40	347.05								437.28	416.46						
26		371.66	353.96								445.99	424.75						
27		380.37	362.26								456.44	434.71						
28		394.52	375.74								473.43	450.88						
29		406.14	386.80								487.37	464.16						
30		411.95	392.33								494.33	470.80						
31		420.66	400.63								504.79	480.75						
32		429.37	408.92								515.24	490.71						
33		434.81	414.11								521.77	496.93						
34		440.62	419.64								528.74	503.56						
35		443.52	422.40								532.23	506.88						
36		446.43	425.17								535.71	510.20						
37		449.33	427.93								539.20	513.52						
38		452.23	430.70								542.68	516.84						
39		458.04	436.23								549.65	523.47						
40		463.85	441.76								556.62	530.11						
41		472.56	450.06								567.07	540.07						
42		480.91	458.01								577.09	549.61						
43		492.52	469.07								591.02	562.88						
44		507.04	482.89								608.45	579.47						
45		524.10	499.14								628.92	598.97						
46		544.42	518.50								653.31	622.20						
47		567.29	540.27								680.74	648.33						
48		593.42	565.16								712.10	678.19						
49		619.19	589.70								743.03	707.64						
50		648.22	617.36								777.87	740.83						
51		676.90	644.66								812.28	773.60						
52		708.47	674.74								850.17	809.68						
53		740.41	705.16								888.50	846.19						
54		774.89	737.99								929.87	885.59						
55		809.37	770.83								971.25	925.00						
56		846.76	806.44								1016.11	967.72						
57		884.50	842.38								1061.40	1010.86						
58		924.79	880.75								1109.75	1056.90						
59		944.75	899.76								1133.70	1079.72						
60		985.04	938.13								1182.05	1125.76						
61		1019.88	971.32								1223.86	1165.58						
62		1042.75	993.09								1251.30	1191.71						
63		1071.42	1020.40								1285.71	1224.48						
64 and over		1088.84	1036.98								1306.61	1244.40						