

Kaiser Foundation Health Plan of the Northwest

Rate Schedule

Without

Cost Sharing Reduction (CSR)* Funding

*Note: Only rates for silver plans sold inside the Exchange and those sold both inside and outside the Exchange are changing due to CSR funding ending. This is because CSRs only apply to silver Exchange plans. Rates for silver Exchange plans *if CSR funding is restored* are at the end of this document.

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

Plan Information

Plan Name: KP WA Gold 0/20
HIOS Plan ID: 23371WA1760003
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Both inside and outside the exchange
Metal Level: Gold

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		273.64	260.60				273.64	260.60		
15		297.96	283.77				297.96	283.77		
16		307.26	292.63				307.26	292.63		
17		316.56	301.48				316.56	301.48		
18		326.57	311.02				326.57	311.02		
19		336.59	320.56				336.59	320.56		
20		346.96	330.44				346.96	330.44		
21		357.69	340.66				429.23	408.79		
22		357.69	340.66				429.23	408.79		
23		357.69	340.66				429.23	408.79		
24		357.69	340.66				429.23	408.79		
25		359.12	342.02				430.95	410.43		
26		366.28	348.84				439.53	418.60		
27		374.86	357.01				449.83	428.41		
28		388.81	370.30				466.57	444.36		
29		400.26	381.20				480.31	457.44		
30		405.98	386.65				487.18	463.98		
31		414.57	394.82				497.48	473.79		
32		423.15	403.00				507.78	483.60		
33		428.52	408.11				514.22	489.73		
34		434.24	413.56				521.09	496.27		
35		437.10	416.29				524.52	499.54		
36		439.96	419.01				527.95	502.81		
37		442.82	421.74				531.39	506.08		
38		445.69	424.46				534.82	509.35		
39		451.41	429.91				541.69	515.90		
40		457.13	435.36				548.56	522.44		
41		465.72	443.54				558.86	532.25		
42		473.94	451.37				568.73	541.65		
43		485.39	462.28				582.47	554.73		
44		499.70	475.90				599.64	571.08		
45		516.51	491.91				619.81	590.30		
46		536.54	510.99				643.85	613.19		
47		559.07	532.45				670.89	638.94		
48		584.83	556.98				701.79	668.37		
49		610.22	581.17				732.27	697.40		
50		638.84	608.42				766.61	730.10		
51		667.10	635.33				800.52	762.40		
52		698.22	664.97				837.86	797.96		
53		729.69	694.95				875.63	833.94		
54		763.67	727.31				916.41	872.77		
55		797.66	759.67				957.19	911.61		
56		834.50	794.76				1001.40	953.71		
57		871.70	830.19				1046.04	996.23		
58		911.40	868.00				1093.68	1041.60		
59		931.07	886.74				1117.29	1064.09		
60		970.78	924.55				1164.93	1109.46		
61		1005.12	957.25				1206.14	1148.71		
62		1027.65	978.72				1233.18	1174.46		
63		1055.91	1005.63				1267.09	1206.75		
64 and over		1073.07	1021.98				1287.69	1226.37		

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP WA Gold 1000/20
HIOS Plan ID: 23371WA1760001
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Both inside and outside the exchange
Metal Level: Gold

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		255.36	243.20				255.36	243.20		
15		278.06	264.82				278.06	264.82		
16		286.74	273.08				286.74	273.08		
17		295.42	281.35				295.42	281.35		
18		304.76	290.25				304.76	290.25		
19		314.11	299.15				314.11	299.15		
20		323.79	308.37				323.79	308.37		
21		333.81	317.91				400.57	381.49		
22		333.81	317.91				400.57	381.49		
23		333.81	317.91				400.57	381.49		
24		333.81	317.91				400.57	381.49		
25		335.14	319.18				402.17	383.02		
26		341.82	325.54				410.18	390.65		
27		349.83	333.17				419.79	399.80		
28		362.85	345.57				435.42	414.68		
29		373.53	355.74				448.23	426.89		
30		378.87	360.83				454.64	432.99		
31		386.88	368.46				464.26	442.15		
32		394.89	376.09				473.87	451.31		
33		399.90	380.86				479.88	457.03		
34		405.24	385.94				486.29	463.13		
35		407.91	388.49				489.49	466.18		
36		410.58	391.03				492.70	469.24		
37		413.25	393.57				495.90	472.29		
38		415.92	396.12				499.11	475.34		
39		421.26	401.20				505.52	481.44		
40		426.60	406.29				511.92	487.55		
41		434.61	413.92				521.54	496.70		
42		442.29	421.23				530.75	505.48		
43		452.97	431.40				543.57	517.68		
44		466.33	444.12				559.59	532.94		
45		482.02	459.06				578.42	550.87		
46		500.71	476.87				600.85	572.24		
47		521.74	496.89				626.09	596.27		
48		545.77	519.78				654.93	623.74		
49		569.47	542.35				683.37	650.83		
50		596.18	567.79				715.41	681.34		
51		622.55	592.90				747.06	711.48		
52		651.59	620.56				781.91	744.67		
53		680.96	648.54				817.16	778.24		
54		712.67	678.74				855.21	814.49		
55		744.39	708.94				893.26	850.73		
56		778.77	741.68				934.52	890.02		
57		813.48	774.75				976.18	929.70		
58		850.54	810.03				1020.64	972.04		
59		868.90	827.52				1042.67	993.02		
60		905.95	862.81				1087.14	1035.37		
61		937.99	893.33				1125.59	1071.99		
62		959.02	913.36				1150.83	1096.03		
63		985.39	938.47				1182.47	1126.16		
64 and over		1001.42	953.73				1201.70	1144.47		

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE WITHOUT CSR FUNDING**

Plan Information

Plan Name: KP WA Silver 2500/30
HIOS Plan ID: 23371WA1760002
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Both inside and outside the exchange
Metal Level: Silver

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		271.23	258.31				271.23	258.31		
15		295.33	281.27				295.33	281.27		
16		304.55	290.05				304.55	290.05		
17		313.77	298.83				313.77	298.83		
18		323.70	308.28				323.70	308.28		
19		333.62	317.74				333.62	317.74		
20		343.91	327.53				343.91	327.53		
21		354.54	337.66				425.45	405.19		
22		354.54	337.66				425.45	405.19		
23		354.54	337.66				425.45	405.19		
24		354.54	337.66				425.45	405.19		
25		355.96	339.01				427.15	406.81		
26		363.05	345.76				435.66	414.92		
27		371.56	353.87				445.87	424.64		
28		385.39	367.04				462.47	440.44		
29		396.73	377.84				476.08	453.41		
30		402.41	383.24				482.89	459.89		
31		410.92	391.35				493.10	469.62		
32		419.42	399.45				503.31	479.34		
33		424.74	404.52				509.69	485.42		
34		430.42	409.92				516.50	491.90		
35		433.25	412.62				519.90	495.14		
36		436.09	415.32				523.31	498.39		
37		438.92	418.02				526.71	501.63		
38		441.76	420.72				530.11	504.87		
39		447.43	426.13				536.92	511.35		
40		453.11	431.53				543.73	517.84		
41		461.61	439.63				553.94	527.56		
42		469.77	447.40				563.72	536.88		
43		481.11	458.20				577.34	549.85		
44		495.30	471.71				594.36	566.05		
45		511.96	487.58				614.35	585.10		
46		531.81	506.49				638.18	607.79		
47		554.15	527.76				664.98	633.32		
48		579.68	552.07				695.61	662.49		
49		604.85	576.05				725.82	691.26		
50		633.21	603.06				759.86	723.67		
51		661.22	629.74				793.47	755.68		
52		692.07	659.11				830.48	790.93		
53		723.27	688.83				867.92	826.59		
54		756.95	720.90				908.34	865.08		
55		790.63	752.98				948.76	903.58		
56		827.15	787.76				992.58	945.31		
57		864.02	822.88				1036.83	987.45		
58		903.38	860.36				1084.05	1032.43		
59		922.88	878.93				1107.45	1054.71		
60		962.23	916.41				1154.68	1099.69		
61		996.27	948.82				1195.52	1138.59		
62		1018.60	970.10				1222.32	1164.12		
63		1046.61	996.77				1255.93	1196.13		
64 and over		1063.62	1012.98				1276.35	1215.57		

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE WITHOUT CSR FUNDING**

Plan Information

Plan Name: KP WA Silver 3500/30
HIOS Plan ID: 23371WA1780001
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Both inside and outside the exchange
Metal Level: Silver

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		260.36	247.96				260.36	247.96		
15		283.50	270.00				283.50	270.00		
16		292.35	278.43				292.35	278.43		
17		301.20	286.86				301.20	286.86		
18		310.73	295.93				310.73	295.93		
19		320.26	305.01				320.26	305.01		
20		330.13	314.41				330.13	314.41		
21		340.34	324.13				408.40	388.96		
22		340.34	324.13				408.40	388.96		
23		340.34	324.13				408.40	388.96		
24		340.34	324.13				408.40	388.96		
25		341.70	325.43				410.04	390.51		
26		348.50	331.91				418.21	398.29		
27		356.67	339.69				428.01	407.63		
28		369.95	352.33				443.93	422.80		
29		380.84	362.70				457.00	435.24		
30		386.28	367.89				463.54	441.47		
31		394.45	375.67				473.34	450.80		
32		402.62	383.45				483.14	460.13		
33		407.72	388.31				489.27	465.97		
34		413.17	393.49				495.80	472.19		
35		415.89	396.09				499.07	475.30		
36		418.61	398.68				502.34	478.42		
37		421.34	401.27				505.60	481.53		
38		424.06	403.87				508.87	484.64		
39		429.50	409.05				515.41	490.86		
40		434.95	414.24				521.94	497.09		
41		443.12	422.02				531.74	506.42		
42		450.95	429.47				541.14	515.37		
43		461.84	439.84				554.20	527.81		
44		475.45	452.81				570.54	543.37		
45		491.45	468.04				589.74	561.65		
46		510.50	486.20				612.61	583.43		
47		531.95	506.62				638.34	607.94		
48		556.45	529.95				667.74	635.94		
49		580.61	552.97				696.74	663.56		
50		607.84	578.90				729.41	694.68		
51		634.73	604.50				761.67	725.40		
52		664.34	632.70				797.20	759.24		
53		694.29	661.23				833.14	793.47		
54		726.62	692.02				871.94	830.42		
55		758.95	722.81				910.74	867.37		
56		794.01	756.20				952.81	907.43		
57		829.40	789.90				995.28	947.89		
58		867.18	825.88				1040.61	991.06		
59		885.90	843.71				1063.08	1012.45		
60		923.67	879.69				1108.41	1055.63		
61		956.35	910.81				1147.61	1092.97		
62		977.79	931.23				1173.34	1117.47		
63		1004.67	956.83				1205.61	1148.20		
64 and over		1021.01	972.39				1225.20	1166.87		

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP WA Bronze 5000/50
HIOS Plan ID: 23371WA1780002
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Both inside and outside the exchange
Metal Level: Bronze

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		179.74	171.18				179.74	171.18		
15		195.72	186.40				195.72	186.40		
16		201.83	192.22				201.83	192.22		
17		207.94	198.04				207.94	198.04		
18		214.52	204.30				214.52	204.30		
19		221.10	210.57				221.10	210.57		
20		227.91	217.06				227.91	217.06		
21		234.96	223.77				281.95	268.52		
22		234.96	223.77				281.95	268.52		
23		234.96	223.77				281.95	268.52		
24		234.96	223.77				281.95	268.52		
25		235.90	224.67				283.08	269.60		
26		240.60	229.14				288.72	274.97		
27		246.24	234.51				295.48	281.41		
28		255.40	243.24				306.48	291.89		
29		262.92	250.40				315.50	300.48		
30		266.68	253.98				320.01	304.77		
31		272.32	259.35				326.78	311.22		
32		277.96	264.72				333.55	317.66		
33		281.48	268.08				337.78	321.69		
34		285.24	271.66				342.29	325.99		
35		287.12	273.45				344.54	328.14		
36		289.00	275.24				346.80	330.28		
37		290.88	277.03				349.05	332.43		
38		292.76	278.82				351.31	334.58		
39		296.52	282.40				355.82	338.88		
40		300.28	285.98				360.33	343.17		
41		305.92	291.35				367.10	349.62		
42		311.32	296.50				373.58	355.79		
43		318.84	303.66				382.61	364.39		
44		328.24	312.61				393.88	375.13		
45		339.28	323.12				407.14	387.75		
46		352.44	335.66				422.93	402.79		
47		367.24	349.75				440.69	419.70		
48		384.16	365.86				460.99	439.04		
49		400.84	381.75				481.01	458.10		
50		419.64	399.65				503.56	479.58		
51		438.20	417.33				525.84	500.80		
52		458.64	436.80				550.37	524.16		
53		479.32	456.49				575.18	547.79		
54		501.64	477.75				601.96	573.30		
55		523.96	499.01				628.75	598.81		
56		548.16	522.06				657.79	626.47		
57		572.59	545.33				687.11	654.39		
58		598.67	570.17				718.41	684.20		
59		611.60	582.47				733.92	698.97		
60		637.68	607.31				765.21	728.77		
61		660.23	628.79				792.28	754.55		
62		675.04	642.89				810.04	771.47		
63		693.60	660.57				832.32	792.68		
64 and over		704.88	671.31				845.85	805.56		

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP WA Bronze 6500/50
HIOS Plan ID: 23371WA1780003
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Both inside and outside the exchange
Metal Level: Bronze

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		174.59	166.28				174.59	166.28		
15		190.11	181.06				190.11	181.06		
16		196.05	186.71				196.05	186.71		
17		201.98	192.36				201.98	192.36		
18		208.37	198.45				208.37	198.45		
19		214.76	204.54				214.76	204.54		
20		221.38	210.84				221.38	210.84		
21		228.23	217.36				273.87	260.83		
22		228.23	217.36				273.87	260.83		
23		228.23	217.36				273.87	260.83		
24		228.23	217.36				273.87	260.83		
25		229.14	218.23				274.97	261.88		
26		233.71	222.58				280.45	267.09		
27		239.18	227.79				287.02	273.35		
28		248.08	236.27				297.70	283.52		
29		255.39	243.23				306.46	291.87		
30		259.04	246.70				310.85	296.04		
31		264.52	251.92				317.42	302.30		
32		269.99	257.14				323.99	308.56		
33		273.42	260.40				328.10	312.48		
34		277.07	263.88				332.48	316.65		
35		278.89	265.61				334.67	318.74		
36		280.72	267.35				336.86	320.82		
37		282.55	269.09				339.06	322.91		
38		284.37	270.83				341.25	325.00		
39		288.02	274.31				345.63	329.17		
40		291.68	277.79				350.01	333.34		
41		297.15	283.00				356.58	339.60		
42		302.40	288.00				362.88	345.60		
43		309.71	294.96				371.65	353.95		
44		318.83	303.65				382.60	364.38		
45		329.56	313.87				395.47	376.64		
46		342.34	326.04				410.81	391.25		
47		356.72	339.73				428.06	407.68		
48		373.15	355.38				447.78	426.46		
49		389.36	370.82				467.23	444.98		
50		407.62	388.20				489.14	465.85		
51		425.65	405.38				510.77	486.45		
52		445.50	424.29				534.60	509.14		
53		465.59	443.41				558.70	532.10		
54		487.27	464.06				584.72	556.88		
55		508.95	484.71				610.74	581.66		
56		532.46	507.10				638.95	608.52		
57		556.19	529.71				667.43	635.65		
58		581.52	553.83				697.83	664.60		
59		594.08	565.79				712.89	678.95		
60		619.41	589.92				743.29	707.90		
61		641.32	610.78				769.58	732.94		
62		655.70	624.48				786.84	749.37		
63		673.73	641.65				808.47	769.98		
64 and over		684.68	652.08				821.61	782.49		

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

Plan Information

Plan Name: KP WA Bronze 5700/30% HSA
HIOS Plan ID: 23371WA1780004
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Both inside and outside the exchange
Metal Level: Bronze

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		168.40	160.38				168.40	160.38		
15		183.37	174.64				183.37	174.64		
16		189.09	180.09				189.09	180.09		
17		194.82	185.54				194.82	185.54		
18		200.98	191.41				200.98	191.41		
19		207.14	197.28				207.14	197.28		
20		213.53	203.36				213.53	203.36		
21		220.13	209.65				220.13	209.65		
22		220.13	209.65				220.13	209.65		
23		220.13	209.65				220.13	209.65		
24		220.13	209.65				220.13	209.65		
25		221.01	210.49				221.01	210.49		
26		225.42	214.68				225.42	214.68		
27		230.70	219.71				230.70	219.71		
28		239.28	227.89				239.28	227.89		
29		246.33	234.60				246.33	234.60		
30		249.85	237.95				249.85	237.95		
31		255.13	242.98				255.13	242.98		
32		260.42	248.02				260.42	248.02		
33		263.72	251.16				263.72	251.16		
34		267.24	254.52				267.24	254.52		
35		269.00	256.19				269.00	256.19		
36		270.76	257.87				270.76	257.87		
37		272.52	259.55				272.52	259.55		
38		274.29	261.22				274.29	261.22		
39		277.81	264.58				277.81	264.58		
40		281.33	267.93				281.33	267.93		
41		286.61	272.96				286.61	272.96		
42		291.68	277.79				291.68	277.79		
43		298.72	284.50				298.72	284.50		
44		307.53	292.88				307.53	292.88		
45		317.87	302.73				317.87	302.73		
46		330.20	314.48				330.20	314.48		
47		344.07	327.68				344.07	327.68		
48		359.92	342.78				359.92	342.78		
49		375.55	357.66				375.55	357.66		
50		393.16	374.43				393.16	374.43		
51		410.55	391.00				410.55	391.00		
52		429.70	409.24				429.70	409.24		
53		449.07	427.69				449.07	427.69		
54		469.98	447.60				469.98	447.60		
55		490.90	467.52				490.90	467.52		
56		513.57	489.11				513.57	489.11		
57		536.46	510.92				536.46	510.92		
58		560.90	534.19				560.90	534.19		
59		573.00	545.72				573.00	545.72		
60		597.44	568.99				597.44	568.99		
61		618.57	589.12				618.57	589.12		
62		632.44	602.32				632.44	602.32		
63		649.83	618.89				649.83	618.89		
64 and over		660.39	628.95				660.39	628.95		

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP WA Catastrophic 7350/0
HIOS Plan ID: 23371WA1760004
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Both inside and outside the exchange
Metal Level: Catastrophic

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		176.04	167.66				176.04	167.66		
15		191.69	182.56				191.69	182.56		
16		197.67	188.26				197.67	188.26		
17		203.65	193.96				203.65	193.96		
18		210.10	200.09				210.10	200.09		
19		216.54	206.23				216.54	206.23		
20		223.21	212.59				223.21	212.59		
21		230.12	219.16				276.14	262.99		
22		230.12	219.16				276.14	262.99		
23		230.12	219.16				276.14	262.99		
24		230.12	219.16				276.14	262.99		
25		231.04	220.04				277.25	264.04		
26		235.64	224.42				282.77	269.30		
27		241.16	229.68				289.40	275.62		
28		250.14	238.23				300.17	285.87		
29		257.50	245.24				309.00	294.29		
30		261.18	248.75				313.42	298.50		
31		266.71	254.01				320.05	304.81		
32		272.23	259.27				326.68	311.12		
33		275.68	262.55				330.82	315.06		
34		279.36	266.06				335.24	319.27		
35		281.20	267.81				337.45	321.38		
36		283.05	269.57				339.65	323.48		
37		284.89	271.32				341.86	325.58		
38		286.73	273.07				344.07	327.69		
39		290.41	276.58				348.49	331.90		
40		294.09	280.09				352.91	336.10		
41		299.61	285.35				359.54	342.42		
42		304.91	290.39				365.89	348.46		
43		312.27	297.40				374.72	356.88		
44		321.47	306.17				385.77	367.40		
45		332.29	316.47				398.75	379.76		
46		345.18	328.74				414.21	394.49		
47		359.67	342.55				431.61	411.06		
48		376.24	358.33				451.49	429.99		
49		392.58	373.89				471.10	448.66		
50		410.99	391.42				493.19	469.70		
51		429.17	408.73				515.00	490.48		
52		449.19	427.80				539.03	513.36		
53		469.44	447.09				563.33	536.50		
54		491.30	467.91				589.56	561.49		
55		513.16	488.73				615.80	586.47		
56		536.87	511.30				644.24	613.56		
57		560.80	534.09				672.96	640.91		
58		586.34	558.42				703.61	670.10		
59		599.00	570.47				718.80	684.57		
60		624.54	594.80				749.45	713.76		
61		646.63	615.84				775.96	739.01		
62		661.13	629.65				793.35	755.58		
63		679.31	646.96				815.17	776.35		
64 and over		690.35	657.48				828.42	788.97		

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP WA Gold 0/20 with Pediatric Dental
HIOS Plan ID: 23371WA1770003
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Gold

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		276.71	263.53				276.71	263.53		
15		301.31	286.96				301.31	286.96		
16		310.71	295.92				310.71	295.92		
17		320.12	304.87				320.12	304.87		
18		330.25	314.52				330.25	314.52		
19		340.37	324.17				340.37	324.17		
20		350.86	334.16				350.86	334.16		
21		361.71	344.49				434.06	413.39		
22		361.71	344.49				434.06	413.39		
23		361.71	344.49				434.06	413.39		
24		361.71	344.49				434.06	413.39		
25		363.16	345.87				435.79	415.04		
26		370.40	352.76				444.47	423.31		
27		379.08	361.03				454.89	433.23		
28		393.18	374.46				471.82	449.35		
29		404.76	385.48				485.71	462.58		
30		410.55	391.00				492.66	469.20		
31		419.23	399.26				503.07	479.12		
32		427.91	407.53				513.49	489.04		
33		433.33	412.70				520.00	495.24		
34		439.12	418.21				526.95	501.85		
35		442.02	420.97				530.42	505.16		
36		444.91	423.72				533.89	508.47		
37		447.80	426.48				537.36	511.77		
38		450.70	429.23				540.84	515.08		
39		456.48	434.75				547.78	521.70		
40		462.27	440.26				554.73	528.31		
41		470.95	448.53				565.14	538.23		
42		479.27	456.45				575.13	547.74		
43		490.85	467.47				589.02	560.97		
44		505.32	481.25				606.38	577.50		
45		522.32	497.44				626.78	596.93		
46		542.57	516.74				651.09	620.08		
47		565.36	538.44				678.43	646.13		
48		591.40	563.24				709.68	675.89		
49		617.08	587.70				740.50	705.24		
50		646.02	615.26				775.23	738.31		
51		674.60	642.47				809.52	770.97		
52		706.07	672.44				847.28	806.93		
53		737.90	702.76				885.48	843.31		
54		772.26	735.49				926.71	882.58		
55		806.62	768.21				967.95	921.86		
56		843.88	803.70				1012.66	964.43		
57		881.50	839.52				1057.80	1007.43		
58		921.65	877.76				1105.98	1053.31		
59		941.54	896.71				1129.85	1076.05		
60		981.69	934.95				1178.03	1121.94		
61		1016.42	968.02				1219.70	1161.62		
62		1039.21	989.72				1247.05	1187.66		
63		1067.78	1016.93				1281.34	1220.32		
64 and over		1085.13	1033.47				1302.17	1240.16		

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP WA Gold 1000/20 with Pediatric Dental
HIOS Plan ID: 23371WA1770001
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Gold

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		258.23	245.93				258.23	245.93		
15		281.18	267.79				281.18	267.79		
16		289.96	276.15				289.96	276.15		
17		298.74	284.51				298.74	284.51		
18		308.19	293.51				308.19	293.51		
19		317.64	302.51				317.64	302.51		
20		327.43	311.84				327.43	311.84		
21		337.55	321.48				405.06	385.78		
22		337.55	321.48				405.06	385.78		
23		337.55	321.48				405.06	385.78		
24		337.55	321.48				405.06	385.78		
25		338.90	322.77				406.69	387.32		
26		345.66	329.20				414.79	395.03		
27		353.76	336.91				424.51	404.29		
28		366.92	349.45				440.31	419.34		
29		377.72	359.74				453.27	431.68		
30		383.12	364.88				459.75	437.86		
31		391.23	372.60				469.47	447.11		
32		399.33	380.31				479.19	456.37		
33		404.39	385.13				485.27	462.16		
34		409.79	390.28				491.75	468.33		
35		412.49	392.85				494.99	471.42		
36		415.19	395.42				498.23	474.50		
37		417.89	397.99				501.47	477.59		
38		420.59	400.56				504.71	480.68		
39		425.99	405.71				511.19	486.85		
40		431.39	410.85				517.67	493.02		
41		439.50	418.57				527.39	502.28		
42		447.26	425.96				536.71	511.15		
43		458.06	436.25				549.67	523.50		
44		471.56	449.11				565.88	538.93		
45		487.43	464.22				584.91	557.06		
46		506.33	482.22				607.60	578.66		
47		527.60	502.47				633.12	602.97		
48		551.90	525.62				662.28	630.74		
49		575.87	548.44				691.04	658.13		
50		602.87	574.16				723.45	689.00		
51		629.54	599.56				755.45	719.47		
52		658.91	627.53				790.69	753.03		
53		688.61	655.82				826.33	786.98		
54		720.68	686.36				864.81	823.63		
55		752.75	716.90				903.29	860.28		
56		787.51	750.01				945.02	900.02		
57		822.62	783.45				987.14	940.14		
58		860.09	819.13				1032.11	982.96		
59		878.65	836.81				1054.38	1004.17		
60		916.12	872.50				1099.35	1047.00		
61		948.53	903.36				1138.23	1084.03		
62		969.79	923.61				1163.75	1108.33		
63		996.46	949.01				1195.75	1138.81		
64 and over		1012.65	964.44				1215.18	1157.33		

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

Plan Information

Plan Name: KP WA Silver 2500/30 with Pediatric Dental
HIOS Plan ID: 23371WA1770002
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Silver

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		234.14	222.99				234.14	222.99		
15		254.95	242.81				254.95	242.81		
16		262.91	250.39				262.91	250.39		
17		270.87	257.97				270.87	257.97		
18		279.44	266.13				279.44	266.13		
19		288.01	274.29				288.01	274.29		
20		296.88	282.75				296.88	282.75		
21		306.06	291.49				367.28	349.79		
22		306.06	291.49				367.28	349.79		
23		306.06	291.49				367.28	349.79		
24		306.06	291.49				367.28	349.79		
25		307.29	292.66				368.75	351.19		
26		313.41	298.49				376.09	358.18		
27		320.76	305.48				384.91	366.58		
28		332.69	316.85				399.23	380.22		
29		342.49	326.18				410.98	391.41		
30		347.38	330.84				416.86	397.01		
31		354.73	337.84				425.67	405.40		
32		362.07	344.83				434.49	413.80		
33		366.67	349.21				440.00	419.05		
34		371.56	353.87				445.87	424.64		
35		374.01	356.20				448.81	427.44		
36		376.46	358.53				451.75	430.24		
37		378.91	360.86				454.69	433.04		
38		381.36	363.20				457.63	435.84		
39		386.25	367.86				463.50	441.43		
40		391.15	372.52				469.38	447.03		
41		398.50	379.52				478.20	455.42		
42		405.54	386.22				486.64	463.47		
43		415.33	395.55				498.40	474.66		
44		427.57	407.21				513.09	488.65		
45		441.96	420.91				530.35	505.09		
46		459.10	437.24				550.92	524.68		
47		478.38	455.60				574.05	546.72		
48		500.42	476.59				600.50	571.90		
49		522.15	497.28				626.58	596.74		
50		546.63	520.60				655.96	624.72		
51		570.81	543.63				684.97	652.35		
52		597.44	568.99				716.93	682.79		
53		624.37	594.64				749.25	713.57		
54		653.45	622.33				784.14	746.80		
55		682.52	650.02				819.03	780.03		
56		714.05	680.05				856.86	816.06		
57		745.88	710.36				895.06	852.43		
58		779.85	742.72				935.82	891.26		
59		796.69	758.75				956.02	910.50		
60		830.66	791.10				996.79	949.32		
61		860.04	819.09				1032.05	982.90		
62		879.32	837.45				1055.19	1004.94		
63		903.50	860.48				1084.20	1032.57		
64 and over		918.18	874.47				1101.83	1049.36		

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

Plan Information

Plan Name: KP WA Silver 3500/30 with Pediatric Dental
HIOS Plan ID: 23371WA1790001
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Silver

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		223.09	212.46				223.09	212.46		
15		242.92	231.35				242.92	231.35		
16		250.50	238.57				250.50	238.57		
17		258.08	245.79				258.08	245.79		
18		266.25	253.57				266.25	253.57		
19		274.41	261.34				274.41	261.34		
20		282.87	269.40				282.87	269.40		
21		291.62	277.73				349.94	333.28		
22		291.62	277.73				349.94	333.28		
23		291.62	277.73				349.94	333.28		
24		291.62	277.73				349.94	333.28		
25		292.78	278.84				351.34	334.61		
26		298.62	284.40				358.34	341.27		
27		305.61	291.06				366.74	349.27		
28		316.99	301.89				380.38	362.27		
29		326.32	310.78				391.58	372.94		
30		330.98	315.22				397.18	378.27		
31		337.98	321.89				405.58	386.27		
32		344.98	328.55				413.98	394.27		
33		349.36	332.72				419.23	399.26		
34		354.02	337.16				424.83	404.60		
35		356.36	339.39				427.63	407.26		
36		358.69	341.61				430.43	409.93		
37		361.02	343.83				433.23	412.60		
38		363.35	346.05				436.02	415.26		
39		368.02	350.50				441.62	420.59		
40		372.69	354.94				447.22	425.93		
41		379.68	361.60				455.62	433.93		
42		386.39	367.99				463.67	441.59		
43		395.72	376.88				474.87	452.26		
44		407.39	387.99				488.87	465.59		
45		421.09	401.04				505.31	481.25		
46		437.42	416.60				524.91	499.91		
47		455.80	434.09				546.96	520.91		
48		476.79	454.09				572.15	544.91		
49		497.50	473.81				597.00	568.57		
50		520.83	496.03				624.99	595.23		
51		543.86	517.97				652.64	621.56		
52		569.24	542.13				683.08	650.55		
53		594.90	566.57				713.88	679.88		
54		622.60	592.95				747.12	711.54		
55		650.30	619.34				780.37	743.21		
56		680.34	647.94				816.41	777.53		
57		710.67	676.83				852.80	812.19		
58		743.04	707.66				891.65	849.19		
59		759.08	722.93				910.89	867.52		
60		791.45	753.76				949.74	904.51		
61		819.44	780.42				983.33	936.51		
62		837.81	797.92				1005.38	957.50		
63		860.85	819.86				1033.02	983.83		
64 and over		874.85	833.19				1049.82	999.83		

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

Plan Information

Plan Name: KP WA Bronze 5000/50 with Pediatric Dental
HIOS Plan ID: 23371WA1790002
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Bronze

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		181.77	173.11				181.77	173.11		
15		197.92	188.50				197.92	188.50		
16		204.10	194.38				204.10	194.38		
17		210.28	200.27				210.28	200.27		
18		216.93	206.60				216.93	206.60		
19		223.59	212.94				223.59	212.94		
20		230.48	219.50				230.48	219.50		
21		237.60	226.29				285.13	271.55		
22		237.60	226.29				285.13	271.55		
23		237.60	226.29				285.13	271.55		
24		237.60	226.29				285.13	271.55		
25		238.55	227.20				286.27	272.63		
26		243.31	231.72				291.97	278.07		
27		249.01	237.15				298.81	284.58		
28		258.28	245.98				309.93	295.17		
29		265.88	253.22				319.06	303.86		
30		269.68	256.84				323.62	308.21		
31		275.38	262.27				330.46	314.72		
32		281.09	267.70				337.30	321.24		
33		284.65	271.10				341.58	325.31		
34		288.45	274.72				346.14	329.66		
35		290.35	276.53				348.42	331.83		
36		292.25	278.34				350.70	334.00		
37		294.15	280.15				352.99	336.18		
38		296.06	281.96				355.27	338.35		
39		299.86	285.58				359.83	342.69		
40		303.66	289.20				364.39	347.04		
41		309.36	294.63				371.23	353.56		
42		314.83	299.83				377.79	359.80		
43		322.43	307.08				386.92	368.49		
44		331.93	316.13				398.32	379.35		
45		343.10	326.76				411.72	392.12		
46		356.41	339.44				427.69	407.32		
47		371.38	353.69				445.65	424.43		
48		388.48	369.98				466.18	443.98		
49		405.35	386.05				486.42	463.26		
50		424.36	404.15				509.23	484.98		
51		443.13	422.03				531.76	506.44		
52		463.80	441.72				556.56	530.06		
53		484.71	461.63				581.66	553.96		
54		507.29	483.13				608.74	579.75		
55		529.86	504.63				635.83	605.55		
56		554.33	527.93				665.20	633.52		
57		579.04	551.47				694.85	661.76		
58		605.42	576.59				726.50	691.90		
59		618.48	589.03				742.18	706.84		
60		644.86	614.15				773.83	736.98		
61		667.67	635.87				801.20	763.05		
62		682.64	650.13				819.17	780.16		
63		701.41	668.01				841.69	801.61		
64 and over		712.80	678.87				855.38	814.64		

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

Plan Information

Plan Name: KP WA Bronze 6500/50 with Pediatric Dental
HIOS Plan ID: 23371WA1790003
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Bronze

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		176.55	168.15				176.55	168.15		
15		192.25	183.09				192.25	183.09		
16		198.25	188.81				198.25	188.81		
17		204.25	194.52				204.25	194.52		
18		210.71	200.68				210.71	200.68		
19		217.17	206.83				217.17	206.83		
20		223.87	213.21				223.87	213.21		
21		230.79	219.80				276.95	263.76		
22		230.79	219.80				276.95	263.76		
23		230.79	219.80				276.95	263.76		
24		230.79	219.80				276.95	263.76		
25		231.71	220.68				278.06	264.82		
26		236.33	225.08				283.59	270.09		
27		241.87	230.35				290.24	276.42		
28		250.87	238.92				301.04	286.71		
29		258.25	245.96				309.90	295.15		
30		261.95	249.47				314.34	299.37		
31		267.49	254.75				320.98	305.70		
32		273.02	260.02				327.63	312.03		
33		276.49	263.32				331.78	315.98		
34		280.18	266.84				336.21	320.20		
35		282.03	268.60				338.43	322.31		
36		283.87	270.35				340.65	324.42		
37		285.72	272.11				342.86	326.53		
38		287.56	273.87				345.08	328.64		
39		291.26	277.39				349.51	332.87		
40		294.95	280.90				353.94	337.09		
41		300.49	286.18				360.59	343.42		
42		305.80	291.24				366.96	349.48		
43		313.18	298.27				375.82	357.92		
44		322.41	307.06				386.90	368.47		
45		333.26	317.39				399.91	380.87		
46		346.19	329.70				415.42	395.64		
47		360.72	343.55				432.87	412.26		
48		377.34	359.37				452.81	431.25		
49		393.73	374.98				472.47	449.97		
50		412.19	392.56				494.63	471.08		
51		430.42	409.93				516.51	491.91		
52		450.50	429.05				540.60	514.86		
53		470.81	448.39				564.97	538.07		
54		492.74	469.27				591.28	563.13		
55		514.66	490.15				617.59	588.18		
56		538.43	512.79				646.12	615.35		
57		562.44	535.65				674.92	642.78		
58		588.05	560.05				705.66	672.06		
59		600.75	572.14				720.90	686.57		
60		626.36	596.54				751.64	715.84		
61		648.52	617.64				778.22	741.17		
62		663.06	631.49				795.67	757.78		
63		681.29	648.85				817.55	778.62		
64 and over		692.37	659.40				830.84	791.28		

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

Plan Information

Plan Name: KP WA Silver 2750/20% HSA with Pediatric Dental
HIOS Plan ID: 23371WA1790004
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Silver

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		209.35	199.38				209.35	199.38		
15		227.96	217.10				227.96	217.10		
16		235.08	223.88				235.08	223.88		
17		242.19	230.66				242.19	230.66		
18		249.85	237.96				249.85	237.96		
19		257.52	245.25				257.52	245.25		
20		265.45	252.81				265.45	252.81		
21		273.66	260.63				328.39	312.76		
22		273.66	260.63				328.39	312.76		
23		273.66	260.63				328.39	312.76		
24		273.66	260.63				328.39	312.76		
25		274.76	261.67				329.71	314.01		
26		280.23	266.89				336.28	320.26		
27		286.80	273.14				344.16	327.77		
28		297.47	283.30				356.96	339.97		
29		306.23	291.64				367.47	349.97		
30		310.61	295.82				372.73	354.98		
31		317.17	302.07				380.61	362.48		
32		323.74	308.33				388.49	369.99		
33		327.85	312.23				393.42	374.68		
34		332.23	316.40				398.67	379.69		
35		334.41	318.49				401.30	382.19		
36		336.60	320.57				403.92	384.69		
37		338.79	322.66				406.55	387.19		
38		340.98	324.74				409.18	389.69		
39		345.36	328.92				414.43	394.70		
40		349.74	333.09				419.69	399.70		
41		356.31	339.34				427.57	407.21		
42		362.60	345.33				435.12	414.40		
43		371.36	353.67				445.63	424.41		
44		382.31	364.10				458.77	436.92		
45		395.17	376.35				474.20	451.62		
46		410.49	390.95				492.59	469.13		
47		427.73	407.36				513.28	488.84		
48		447.44	426.13				536.92	511.36		
49		466.87	444.63				560.24	533.56		
50		488.76	465.49				586.51	558.58		
51		510.38	486.07				612.45	583.29		
52		534.19	508.75				641.02	610.50		
53		558.27	531.69				669.92	638.02		
54		584.27	556.45				701.12	667.73		
55		610.27	581.20				732.32	697.45		
56		638.45	608.05				766.14	729.66		
57		666.91	635.16				800.30	762.19		
58		697.29	664.09				836.75	796.90		
59		712.34	678.42				854.81	814.10		
60		742.72	707.35				891.26	848.82		
61		768.99	732.37				922.79	878.84		
62		786.23	748.79				943.48	898.55		
63		807.85	769.38				969.42	923.26		
64 and over		820.98	781.89				985.17	938.27		

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP WA Bronze 5700/30% HSA with Pediatric Dental
HIOS Plan ID: 23371WA1790005
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Bronze

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		170.30	162.19				170.30	162.19		
15		185.43	176.60				185.43	176.60		
16		191.22	182.12				191.22	182.12		
17		197.01	187.63				197.01	187.63		
18		203.24	193.57				203.24	193.57		
19		209.48	199.50				209.48	199.50		
20		215.93	205.65				215.93	205.65		
21		222.61	212.01				222.61	212.01		
22		222.61	212.01				267.13	254.41		
23		222.61	212.01				267.13	254.41		
24		222.61	212.01				267.13	254.41		
25		223.50	212.86				268.20	255.43		
26		227.95	217.10				273.54	260.52		
27		233.30	222.19				279.95	266.62		
28		241.98	230.45				290.37	276.55		
29		249.10	237.24				298.92	284.69		
30		252.66	240.63				303.20	288.76		
31		258.01	245.72				309.61	294.86		
32		263.35	250.81				316.02	300.97		
33		266.69	253.99				320.02	304.79		
34		270.25	257.38				324.30	308.86		
35		272.03	259.08				326.44	310.89		
36		273.81	260.77				328.57	312.93		
37		275.59	262.47				330.71	314.96		
38		277.37	264.16				332.85	317.00		
39		280.93	267.56				337.12	321.07		
40		284.50	270.95				341.40	325.14		
41		289.84	276.04				347.81	331.24		
42		294.96	280.91				353.95	337.10		
43		302.08	287.70				362.50	345.24		
44		310.99	296.18				373.18	355.41		
45		321.45	306.14				385.74	367.37		
46		333.92	318.02				400.70	381.62		
47		347.94	331.37				417.53	397.65		
48		363.97	346.64				436.76	415.96		
49		379.77	361.69				455.73	434.03		
50		397.58	378.65				477.10	454.38		
51		415.17	395.40				498.20	474.48		
52		434.54	413.84				521.44	496.61		
53		454.13	432.50				544.95	519.00		
54		475.27	452.64				570.33	543.17		
55		496.42	472.78				595.71	567.34		
56		519.35	494.62				623.22	593.54		
57		542.50	516.67				651.00	620.00		
58		567.21	540.20				680.65	648.24		
59		579.46	551.86				695.35	662.23		
60		604.16	575.40				725.00	690.47		
61		625.54	595.75				750.64	714.90		
62		639.56	609.10				767.47	730.93		
63		657.15	625.85				788.58	751.02		
64 and over		667.83	636.03				801.39	763.23		

Rate Schedule

With

Cost Share Reduction (CSR) Funding

(For silver plans sold only inside the exchange or inside and outside the Exchange)

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE WITH CSR FUNDING**

Plan Information

Plan Name: KP WA Silver 2500/30
HIOS Plan ID: 23371WA1760002
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Both inside and outside the exchange
Metal Level: Silver

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		231.54	220.51				231.54	220.51		
15		252.12	240.11				252.12	240.11		
16		259.99	247.61				259.99	247.61		
17		267.86	255.10				267.86	255.10		
18		276.33	263.17				276.33	263.17		
19		284.81	271.24				284.81	271.24		
20		293.58	279.60				293.58	279.60		
21		302.66	288.25				302.66	288.25		
22		302.66	288.25				302.66	288.25		
23		302.66	288.25				302.66	288.25		
24		302.66	288.25				302.66	288.25		
25		303.87	289.40				303.87	289.40		
26		309.93	295.17				309.93	295.17		
27		317.19	302.09				317.19	302.09		
28		328.99	313.33				328.99	313.33		
29		338.68	322.55				338.68	322.55		
30		343.52	327.16				343.52	327.16		
31		350.79	334.08				350.79	334.08		
32		358.05	341.00				358.05	341.00		
33		362.59	345.32				362.59	345.32		
34		367.43	349.94				367.43	349.94		
35		369.85	352.24				369.85	352.24		
36		372.27	354.55				372.27	354.55		
37		374.70	356.85				374.70	356.85		
38		377.12	359.16				377.12	359.16		
39		381.96	363.77				381.96	363.77		
40		386.80	368.38				386.80	368.38		
41		394.07	375.30				394.07	375.30		
42		401.03	381.93				401.03	381.93		
43		410.71	391.16				410.71	391.16		
44		422.82	402.69				422.82	402.69		
45		437.04	416.23				437.04	416.23		
46		453.99	432.38				453.99	432.38		
47		473.06	450.53				473.06	450.53		
48		494.85	471.29				494.85	471.29		
49		516.34	491.75				516.34	491.75		
50		540.56	514.81				540.56	514.81		
51		564.47	537.59				564.47	537.59		
52		590.80	562.66				590.80	562.66		
53		617.43	588.03				617.43	588.03		
54		646.18	615.41				646.18	615.41		
55		674.94	642.80				674.94	642.80		
56		706.11	672.49				706.11	672.49		
57		737.59	702.47				737.59	702.47		
58		771.18	734.46				771.18	734.46		
59		787.83	750.31				787.83	750.31		
60		821.43	782.31				821.43	782.31		
61		850.48	809.98				850.48	809.98		
62		869.55	828.14				869.55	828.14		
63		893.46	850.91				893.46	850.91		
64 and over		907.98	864.75				907.98	864.75		

**Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE WITH CSR FUNDING**

Plan Information

Plan Name: KP WA Silver 3500/30
HIOS Plan ID: 23371WA1780001
Effective Date: 1/1/2018
Market Type: Individual
Exchange Status: Both inside and outside the exchange
Metal Level: Silver

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	

Plan Rates

Age Band	Non-Smoker Rates					Smoker Rates				
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 1	Area 2	Area 3	Area 4	Area 5
0-14		220.61	210.11				220.61	210.11		
15		240.22	228.78				240.22	228.78		
16		247.72	235.92				247.72	235.92		
17		255.22	243.07				255.22	243.07		
18		263.29	250.76				263.29	250.76		
19		271.37	258.45				271.37	258.45		
20		279.73	266.41				279.73	266.41		
21		288.38	274.65				346.06	329.58		
22		288.38	274.65				346.06	329.58		
23		288.38	274.65				346.06	329.58		
24		288.38	274.65				346.06	329.58		
25		289.54	275.75				347.44	330.90		
26		295.30	281.24				354.36	337.49		
27		302.22	287.83				362.67	345.40		
28		313.47	298.54				376.17	358.25		
29		322.70	307.33				387.24	368.80		
30		327.31	311.73				392.78	374.07		
31		334.24	318.32				401.08	381.98		
32		341.16	324.91				409.39	389.89		
33		345.48	329.03				414.58	394.84		
34		350.10	333.43				420.12	400.11		
35		352.40	335.62				422.88	402.75		
36		354.71	337.82				425.65	405.38		
37		357.02	340.02				428.42	408.02		
38		359.32	342.21				431.19	410.66		
39		363.94	346.61				436.73	415.93		
40		368.55	351.00				442.26	421.20		
41		375.47	357.59				450.57	429.11		
42		382.11	363.91				458.53	436.69		
43		391.34	372.70				469.60	447.24		
44		402.87	383.69				483.44	460.42		
45		416.42	396.59				499.71	475.91		
46		432.57	411.98				519.09	494.37		
47		450.74	429.28				540.89	515.13		
48		471.51	449.05				565.81	538.86		
49		491.98	468.55				590.38	562.26		
50		515.05	490.52				618.06	588.63		
51		537.83	512.22				645.40	614.67		
52		562.92	536.12				675.51	643.34		
53		588.30	560.29				705.96	672.34		
54		615.70	586.38				738.84	703.65		
55		643.09	612.47				771.71	734.96		
56		672.80	640.76				807.36	768.91		
57		702.79	669.32				843.35	803.19		
58		734.80	699.81				881.76	839.77		
59		750.66	714.91				900.79	857.90		
60		782.67	745.40				939.20	894.48		
61		810.35	771.77				972.43	926.12		
62		828.52	789.07				994.23	946.88		
63		851.31	810.77				1021.57	972.92		
64 and over		865.14	823.95				1038.18	988.74		