Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP WA Gold 0
HIOS Plan ID: 23371WA1760003
Effective Date: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		378.46	360.44								378.46	360.44						
15		412.10	392.48								412.10	392.48						
16		424.96	404.73								424.96	404.73						
17		437.83	416.98								437.83	416.98						
18		451.68	430.17								451.68	430.17						
19		465.53	443.36								465.53	443.36						
20		479.88	457.03								479.88	457.03						
21		494.72	471.16								494.72	471.16						
22		494.72	471.16								494.72	471.16						
23		494.72	471.16								494.72	471.16						
24		494.72	471.16								494.72	471.16						
25		496.70	473.04								496.70	473.04						
26		506.59	482.47								506.59	482.47						
27		518.46	493.78								518.46	493.78						
28		537.76	512.15								537.76	512.15						
29		553.59	527.23								553.59	527.23						
30		561.51	534.77								561.51	534.77						
31		573.38	546.07								573.38	546.07						
32		585.25	557.38								585.25	557.38						
33		592.67	564.45								592.67	564.45						
34		600.59	571.99								600.59	571.99						
35		604.55	575.76								604.55	575.76						
36		608.50	579.53								608.50	579.53						
37		612.46	583.30								612.46	583.30						
38		616.42	587.07								616.42	587.07						
39		624.33	594.60								624.33	594.60						
40		632.25	602.14								632.25	602.14						
41		644.12	613.45								644.12	613.45						
42		655.50	624.29								655.50	624.29						
43		671.33	639.36								671.33	639.36						
44		691.12	658.21								691.12	658.21						
45		714.37	680.36								714.37	680.36						
46		742.08	706.74								742.08	706.74						
47		773.24	736.42								773.24	736.42						
48		808.86	770.35								808.86	770.35						
49		843.99	803.80								843.99	803.80						
50		883.57	841.49								883.57	841.49						
51		922.65	878.71								922.65	878.71						
52		965.69	919.70								965.69	919.70						
53		1009.22	961.17								1009.22	961.17						
54		1056.22	1005.93								1056.22	1005.93						
55		1103.22	1050.69								1103.22	1050.69						
56		1154.18	1099.22								1154.18	1099.22						
57		1205.63	1148.22								1205.63	1148.22						
58		1260.54	1200.52								1260.54	1200.52						
59		1287.75	1226.43								1287.75	1226.43						
60		1342.66	1278.73								1342.66	1278.73						
61		1390.16	1323.96								1390.16	1323.96						
62		1421.33	1353.64								1421.33	1353.64						
63		1460.41	1390.86								1460.41	1390.86						
64 and over		1484.15	1413.48								1484.15	1413.48						

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP WA Gold 1750
HIOS Plan ID: 23371WA1760001
Effective Date: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		360.80	343.62								360.80	343.62						
15		392.87	374.16								392.87	374.16						
16		405.13	385.84								405.13	385.84						
17		417.39	397.52								417.39	397.52						
18		430.60	410.09								430.60	410.09						
19		443.80	422.67								443.80	422.67						
20		457.48	435.70								457.48	435.70						
21		471.63	449.17								471.63	449.17						
22		471.63	449.17								471.63	449.17						
23		471.63	449.17								471.63	449.17						
24		471.63	449.17								471.63	449.17						
25		473.52	450.97								473.52	450.97						
26		482.95	459.95								482.95	459.95						
27		494.27	470.73								494.27	470.73						
28		512.66	488.25								512.66	488.25						
29		527.75	502.62								527.75	502.62						
30		535.30	509.81								535.30	509.81						
31		546.62	520.59								546.62	520.59						
32		557.94	531.37								557.94	531.37						
33		565.01	538.11								565.01	538.11						
34		572.56	545.29								572.56	545.29						
35		576.33	548.89								576.33	548.89						
36		580.10	552.48								580.10	552.48						
37		583.88	556.07								583.88	556.07						
38		587.65	559.67								587.65	559.67						
39		595.20	566.85								595.20	566.85						
40		602.74	574.04								602.74	574.04						
41		614.06	584.82								614.06	584.82						
42		624.91	595.15								624.91	595.15						
43		640.00	609.53								640.00	609.53						
44		658.87	627.49								658.87	627.49						
45		681.03	648.60								681.03	648.60						
46		707.44	673.76								707.44	673.76						
47		737.16	702.05								737.16	702.05						
48		771.11	734.39								771.11	734.39						
49		804.60	766.29								804.60	766.29						
50		842.33	802.22								842.33	802.22						
51		879.59	837.70								879.59	837.70						
52		920.62	876.78								920.62	876.78						
53		962.12	916.31								962.12	916.31						
54		1006.93	958.98								1006.93	958.98						
55		1051.73	1001.65								1051.73	1001.65						
56		1100.31	1047.92								1100.31	1047.92						
57		1149.36	1094.63								1149.36	1094.63						
58		1201.71	1144.49								1201.71	1144.49						
59		1227.65	1169.19								1227.65	1169.19						
60		1280.00	1219.05								1280.00	1219.05						
61		1325.28	1262.17								1325.28	1262.17						
62		1354.99	1290.47								1354.99	1290.47						
63		1392.25	1325.95								1392.25	1325.95						
64 and over		1414.89	1347.51								1414.89	1347.51						

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP Cascade Complete Gold
HIOS Plan ID: 23371WA1940001
Effective Date: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		375.55	357.66								375.55	357.66						
15		408.93	389.46								408.93	389.46						
16		421.69	401.61								421.69	401.61						
17		434.46	413.77								434.46	413.77						
18		448.20	426.86								448.20	426.86						
19		461.95	439.95								461.95	439.95						
20		476.18	453.51								476.18	453.51						
21		490.91	467.53								490.91	467.53						
22		490.91	467.53								490.91	467.53						
23		490.91	467.53								490.91	467.53						
24		490.91	467.53								490.91	467.53						
25		492.88	469.40								492.88	469.40						
26		502.69	478.76								502.69	478.76						
27		514.48	489.98								514.48	489.98						
28		533.62	508.21								533.62	508.21						
29		549.33	523.17								549.33	523.17						
30		557.18	530.65								557.18	530.65						
31		568.97	541.87								568.97	541.87						
32		580.75	553.09								580.75	553.09						
33		588.11	560.11								588.11	560.11						
34		595.97	567.59								595.97	567.59						
35		599.89	571.33								599.89	571.33						
36		603.82	575.07								603.82	575.07						
37		607.75	578.81								607.75	578.81						
38		611.68	582.55								611.68	582.55						
39		619.53	590.03								619.53	590.03						
40		627.38	597.51								627.38	597.51						
41		639.17	608.73								639.17	608.73						
42		650.46	619.48								650.46	619.48						
43		666.17	634.44								666.17	634.44						
44		685.80	653.15								685.80	653.15						
45		708.88	675.12								708.88	675.12						
46		736.37	701.30								736.37	701.30						
47		767.29	730.76								767.29	730.76						
48		802.64	764.42								802.64	764.42						
49		837.50	797.61								837.50	797.61						
50		876.77	835.02								876.77	835.02						
51		915.55	871.95								915.55	871.95						
52		958.26	912.63								958.26	912.63						
53		1001.46	953.77								1001.46	953.77						
54		1048.10	998.19								1048.10	998.19						
55		1094.73	1042.60								1094.73	1042.60						
56		1145.30	1090.76								1145.30	1090.76						
57		1196.35	1139.38								1196.35	1139.38						
58		1250.84	1191.28								1250.84	1191.28						
59		1277.84	1216.99								1277.84	1216.99						
60		1332.33	1268.89								1332.33	1268.89						
61		1379.46	1313.77								1379.46	1313.77						
62		1410.39	1343.23								1410.39	1343.23						
63		1449.17	1380.16								1449.17	1380.16						
64 and over		1472.73	1402.59								1472.73	1402.59						

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP WA Silver 1000
HIOS Plan ID: 23371WA1760002
Effective Date: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		458.82	436.97								458.82	436.97						
15		499.60	475.81								499.60	475.81						
16		515.20	490.66								515.20	490.66						
17		530.79	505.52								530.79	505.52						
18		547.59	521.51								547.59	521.51						
19		564.38	537.50								564.38	537.50						
20		581.77	554.07								581.77	554.07						
21		599.76	571.20								599.76	571.20						
22		599.76	571.20								599.76	571.20						
23		599.76	571.20								599.76	571.20						
24		599.76	571.20								599.76	571.20						
25		602.16	573.49								602.16	573.49						
26		614.16	584.91								614.16	584.91						
27		628.55	598.62								628.55	598.62						
28		651.94	620.90								651.94	620.90						
29		671.14	639.18								671.14	639.18						
30		680.73	648.32								680.73	648.32						
31		695.13	662.03								695.13	662.03						
32		709.52	675.73								709.52	675.73						
33		718.52	684.30								718.52	684.30						
34		728.11	693.44								728.11	693.44						
35		732.91	698.01								732.91	698.01						
36		737.71	702.58								737.71	702.58						
37		742.51	707.15								742.51	707.15						
38		747.31	711.72								747.31	711.72						
39		756.90	720.86								756.90	720.86						
40		766.50	730.00								766.50	730.00						
41		780.89	743.71								780.89	743.71						
42		794.69	756.85								794.69	756.85						
43		813.88	775.12								813.88	775.12						
44		837.87	797.97								837.87	797.97						
45		866.06	824.82								866.06	824.82						
46		899.65	856.81								899.65	856.81						
47		937.43	892.79								937.43	892.79						
48		980.62	933.92								980.62	933.92						
49		1023.20	974.47								1023.20	974.47						
50		1071.18	1020.17								1071.18	1020.17						
51		1118.56	1065.30								1118.56	1065.30						
52		1170.74	1114.99								1170.74	1114.99						
53		1223.52	1165.26								1223.52	1165.26						
54		1280.50	1219.52								1280.50	1219.52						
55		1337.48	1273.79								1337.48	1273.79						
56		1399.25	1332.62								1399.25	1332.62						
57		1461.63	1392.03								1461.63	1392.03						
58		1528.20	1455.43								1528.20	1455.43						
59		1561.19	1486.85								1561.19	1486.85						
60		1627.76	1550.25								1627.76	1550.25						
61		1685.34	1605.08								1685.34	1605.08						
62		1723.12	1641.07								1723.12	1641.07						
63		1770.51	1686.20								1770.51	1686.20						
64 and over		1799.28	1713.60								1799.28	1713.60						

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP Cascade Silver
HIOS Plan ID: 23371WA1940002
Effective Date: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		456.58	434.84								456.58	434.84						
15		497.16	473.49								497.16	473.49						
16		512.68	488.27								512.68	488.27						
17		528.20	503.05								528.20	503.05						
18		544.91	518.96								544.91	518.96						
19		561.62	534.88								561.62	534.88						
20		578.93	551.36								578.93	551.36						
21		596.84	568.42								596.84	568.42						
22		596.84	568.42								596.84	568.42						
23		596.84	568.42								596.84	568.42						
24		596.84	568.42								596.84	568.42						
25		599.22	570.69								599.22	570.69						
26		611.16	582.06								611.16	582.06						
27		625.48	595.70								625.48	595.70						
28		648.76	617.87								648.76	617.87						
29		667.86	636.06								667.86	636.06						
30		677.41	645.15								677.41	645.15						
31		691.73	658.79								691.73	658.79						
32		706.06	672.44								706.06	672.44						
33		715.01	680.96								715.01	680.96						
34		724.56	690.06								724.56	690.06						
35		729.33	694.60								729.33	694.60						
36		734.11	699.15								734.11	699.15						
37		738.88	703.70								738.88	703.70						
38		743.66	708.25								743.66	708.25						
39		753.21	717.34								753.21	717.34						
40		762.76	726.44								762.76	726.44						
41		777.08	740.08								777.08	740.08						
42		790.81	753.15								790.81	753.15						
43		809.91	771.34								809.91	771.34						
44		833.78	794.08								833.78	794.08						
45		861.83	820.79								861.83	820.79						
46		895.26	852.62								895.26	852.62						
47		932.86	888.43								932.86	888.43						
48		975.83	929.36								975.83	929.36						
49		1018.20	969.72								1018.20	969.72						
50		1065.95	1015.19								1065.95	1015.19						
51		1113.10	1060.10								1113.10	1060.10						
52		1165.03	1109.55								1165.03	1109.55						
53		1217.55	1159.57								1217.55	1159.57						
54		1274.25	1213.57								1274.25	1213.57						
55		1330.95	1267.57								1330.95	1267.57						
56		1392.42	1326.11								1392.42	1326.11						
57		1454.49	1385.23								1454.49	1385.23						
58		1520.74	1448.32								1520.74	1448.32						
59		1553.57	1479.59								1553.57	1479.59						
60		1619.81	1542.68								1619.81	1542.68						
61		1677.11	1597.25								1677.11	1597.25						
62		1714.71	1633.06								1714.71	1633.06						
63		1761.86	1677.96								1761.86	1677.96						
64 and over		1790.51	1705.26								1790.51	1705.26						

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP WA Bronze 9100
HIOS Plan ID: 23371WA1780003
Effective Date: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		296.64	282.51								296.64	282.51						
15		323.00	307.62								323.00	307.62						
16		333.08	317.22								333.08	317.22						
17		343.17	326.83								343.17	326.83						
18		354.02	337.17								354.02	337.17						
19		364.88	347.51								364.88	347.51						
20		376.13	358.22								376.13	358.22						
21		387.76	369.29								387.76	369.29						
22		387.76	369.29								387.76	369.29						
23		387.76	369.29								387.76	369.29						
24		387.76	369.29								387.76	369.29						
25		389.31	370.77								389.31	370.77						
26		397.07	378.16								397.07	378.16						
27		406.37	387.02								406.37	387.02						
28		421.49	401.42								421.49	401.42						
29		433.90	413.24								433.90	413.24						
30		440.11	419.15								440.11	419.15						
31		449.41	428.01								449.41	428.01						
32		458.72	436.88								458.72	436.88						
33		464.54	442.41								464.54	442.41						
34		470.74	448.32								470.74	448.32						
35		473.84	451.28								473.84	451.28						
36		476.94	454.23								476.94	454.23						
37		480.05	457.19								480.05	457.19						
38		483.15	460.14								483.15	460.14						
39		489.35	466.05								489.35	466.05						
40		495.56	471.96								495.56	471.96						
41		504.86	480.82								504.86	480.82						
42		513.78	489.31								513.78	489.31						
43		526.19	501.13								526.19	501.13						
44		541.70	515.90								541.70	515.90						
45		559.92	533.26								559.92	533.26						
46		581.64	553.94								581.64	553.94						
47		606.07	577.21								606.07	577.21						
48		633.99	603.80								633.99	603.80						
49		661.52	630.02								661.52	630.02						
50		692.54	659.56								692.54	659.56						
51		723.17	688.73								723.17	688.73						
52		756.91	720.86								756.91	720.86						
53		791.03	753.36								791.03	753.36						
54		827.87	788.44								827.87	788.44						
55		864.70	823.53								864.70	823.53						
56		904.64	861.56								904.64	861.56						
57		944.97	899.97								944.97	899.97						
58		988.01	940.96								988.01	940.96						
59		1009.34	961.27								1009.34	961.27						
60		1052.38	1002.26								1052.38	1002.26						
61		1089.60	1037.72								1089.60	1037.72						
62		1114.03	1060.98								1114.03	1060.98						
63		1144.66	1090.16								1144.66	1090.16						
64 and over		1163.28	1107.87								1163.28	1107.87						

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP WA Bronze HSA 7100
HIOS Plan ID: 23371WA1780004
Effective Date: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		302.08	287.70								302.08	287.70						
15		328.93	313.27								328.93	313.27						
16		339.20	323.05								339.20	323.05						
17		349.47	332.82								349.47	332.82						
18		360.52	343.35								360.52	343.35						
19		371.58	353.88								371.58	353.88						
20		383.03	364.79								383.03	364.79						
21		394.88	376.07								394.88	376.07						
22		394.88	376.07								394.88	376.07						
23		394.88	376.07								394.88	376.07						
24		394.88	376.07								394.88	376.07						
25		396.46	377.58								396.46	377.58						
26		404.35	385.10								404.35	385.10						
27		413.83	394.12								413.83	394.12						
28		429.23	408.79								429.23	408.79						
29		441.87	420.83								441.87	420.83						
30		448.19	426.84								448.19	426.84						
31		457.66	435.87								457.66	435.87						
32		467.14	444.89								467.14	444.89						
33		473.06	450.54								473.06	450.54						
34		479.38	456.55								479.38	456.55						
35		482.54	459.56								482.54	459.56						
36		485.70	462.57								485.70	462.57						
37		488.86	465.58								488.86	465.58						
38		492.02	468.59								492.02	468.59						
39		498.33	474.60								498.33	474.60						
40		504.65	480.62								504.65	480.62						
41		514.13	489.65								514.13	489.65						
42		523.21	498.30								523.21	498.30						
43		535.85	510.33								535.85	510.33						
44		551.64	525.37								551.64	525.37						
45		570.20	543.05								570.20	543.05						
46		592.32	564.11								592.32	564.11						
47		617.19	587.80								617.19	587.80						
48		645.62	614.88								645.62	614.88						
49		673.66	641.58								673.66	641.58						
50		705.25	671.67								705.25	671.67						
51		736.45	701.38								736.45	701.38						
52		770.80	734.10								770.80	734.10						
53		805.55	767.19								805.55	767.19						
54		843.06	802.92								843.06	802.92						
55		880.58	838.64								880.58	838.64						
56		921.25	877.38								921.25	877.38						
57		962.32	916.49								962.32	916.49						
58		1006.15	958.23								1006.15	958.23						
59		1027.86	978.92								1027.86	978.92						
60		1071.70	1020.66								1071.70	1020.66						
61		1109.60	1056.77								1109.60	1056.77						
62		1134.48	1080.46								1134.48	1080.46						
63		1165.68	1110.17								1165.68	1110.17						
64 and over		1184.63	1128.21								1184.63	1128.21						

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP Cascade Bronze
HIOS Plan ID: 23371WA1940003
Effective Date: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		302.06	287.68								302.06	287.68						
15		328.91	313.25								328.91	313.25						
16		339.18	323.03								339.18	323.03						
17		349.44	332.80								349.44	332.80						
18		360.50	343.33								360.50	343.33						
19		371.55	353.86								371.55	353.86						
20		383.01	364.77								383.01	364.77						
21		394.85	376.05								394.85	376.05						
22		394.85	376.05								394.85	376.05						
23		394.85	376.05								394.85	376.05						
24		394.85	376.05								394.85	376.05						
25		396.43	377.55								396.43	377.55						
26		404.33	385.07								404.33	385.07						
27		413.80	394.10								413.80	394.10						
28		429.20	408.76								429.20	408.76						
29		441.84	420.80								441.84	420.80						
30		448.16	426.81								448.16	426.81						
31		457.63	435.84								457.63	435.84						
32		467.11	444.86								467.11	444.86						
33		473.03	450.51								473.03	450.51						
34		479.35	456.52								479.35	456.52						
35		482.51	459.53								482.51	459.53						
36		485.67	462.54								485.67	462.54						
37		488.83	465.55								488.83	465.55						
38		491.98	468.56								491.98	468.56						
39		498.30	474.57								498.30	474.57						
40		504.62	480.59								504.62	480.59						
41		514.10	489.61								514.10	489.61						
42		523.18	498.26								523.18	498.26						
43		535.81	510.30								535.81	510.30						
44		551.61	525.34								551.61	525.34						
45		570.16	543.01								570.16	543.01						
46		592.28	564.07								592.28	564.07						
47		617.15	587.76								617.15	587.76						
48		645.58	614.84								645.58	614.84						
49		673.62	641.54								673.62	641.54						
50		705.20	671.62								705.20	671.62						
51		736.40	701.33								736.40	701.33						
52		770.75	734.05								770.75	734.05						
53		805.50	767.14								805.50	767.14						
54		843.01	802.86								843.01	802.86						
55		880.52	838.59								880.52	838.59						
56		921.19	877.32								921.19	877.32						
57		962.25	916.43								962.25	916.43						
58		1006.08	958.17								1006.08	958.17						
59		1027.80	978.85								1027.80	978.85						
60		1071.62	1020.59								1071.62	1020.59						
61		1109.53	1056.70								1109.53	1056.70						
62		1134.41	1080.39								1134.41	1080.39						
63		1165.60	1110.09								1165.60	1110.09						
64 and over		1184.55	1128.15								1184.55	1128.15						

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: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		381.99	363.80								381.99	363.80						
15		415.94	396.13								415.94	396.13						
16		428.92	408.50								428.92	408.50						
17		441.90	420.86								441.90	420.86						
18		455.89	434.18								455.89	434.18						
19		469.87	447.49								469.87	447.49						
20		484.35	461.28								484.35	461.28						
21		499.33	475.55								499.33	475.55						
22		499.33	475.55								499.33	475.55						
23		499.33	475.55								499.33	475.55						
24		499.33	475.55								499.33	475.55						
25		501.32	477.45								501.32	477.45						
26		511.31	486.96								511.31	486.96						
27		523.30	498.38								523.30	498.38						
28		542.77	516.92								542.77	516.92						
29		558.75	532.14								558.75	532.14						
30		566.74	539.75								566.74	539.75						
31		578.72	551.16								578.72	551.16						
32		590.70	562.58								590.70	562.58						
33		598.19	569.71								598.19	569.71						
34		606.18	577.32								606.18	577.32						
35		610.18	581.12								610.18	581.12						
36		614.17	584.93								614.17	584.93						
37		618.17	588.73								618.17	588.73						
38		622.16	592.54								622.16	592.54						
39		630.15	600.14								630.15	600.14						
40		638.14	607.75								638.14	607.75						
41		650.12	619.17								650.12	619.17						
42		661.61	630.10								661.61	630.10						
43		677.59	645.32								677.59	645.32						
44		697.56	664.34								697.56	664.34						
45		721.03	686.69								721.03	686.69						
46		748.99	713.32								748.99	713.32						
47		780.45	743.28								780.45	743.28						
48		816.40	777.52								816.40	777.52						
49		851.85	811.29								851.85	811.29						
50		891.80	849.33								891.80	849.33						
51		931.25	886.90								931.25	886.90						
52		974.69	928.27								974.69	928.27						
53		1018.63	970.12								1018.63	970.12						
54		1066.06	1015.30								1066.06	1015.30						
55		1113.50	1060.48								1113.50	1060.48						
56		1164.93	1109.46								1164.93	1109.46						
57		1216.86	1158.92								1216.86	1158.92						
58		1272.29	1211.70								1272.29	1211.70						
59		1299.75	1237.86								1299.75	1237.86						
60		1355.17	1290.64								1355.17	1290.64						
61		1403.11	1336.30								1403.11	1336.30						
62		1434.57	1366.25								1434.57	1366.25						
63		1474.01	1403.82								1474.01	1403.82						
64 and over		1497.98	1426.65								1497.98	1426.65						

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: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		364.27	346.92								364.27	346.92						
15		396.65	377.76								396.65	377.76						
16		409.03	389.55								409.03	389.55						
17		421.41	401.34								421.41	401.34						
18		434.74	414.04								434.74	414.04						
19		448.07	426.74								448.07	426.74						
20		461.88	439.89								461.88	439.89						
21		476.17	453.49								476.17	453.49						
22		476.17	453.49								476.17	453.49						
23		476.17	453.49								476.17	453.49						
24		476.17	453.49								476.17	453.49						
25		478.07	455.31								478.07	455.31						
26		487.60	464.38								487.60	464.38						
27		499.02	475.26								499.02	475.26						
28		517.59	492.95								517.59	492.95						
29		532.83	507.46								532.83	507.46						
30		540.45	514.71								540.45	514.71						
31		551.88	525.60								551.88	525.60						
32		563.31	536.48								563.31	536.48						
33		570.45	543.28								570.45	543.28						
34		578.07	550.54								578.07	550.54						
35		581.88	554.17								581.88	554.17						
36		585.69	557.80								585.69	557.80						
37		589.50	561.42								589.50	561.42						
38		593.31	565.05								593.31	565.05						
39		600.92	572.31								600.92	572.31						
40		608.54	579.56								608.54	579.56						
41		619.97	590.45								619.97	590.45						
42		630.92	600.88								630.92	600.88						
43		646.16	615.39								646.16	615.39						
44		665.21	633.53								665.21	633.53						
45		687.59	654.84								687.59	654.84						
46		714.25	680.24								714.25	680.24						
47		744.25	708.81								744.25	708.81						
48		778.53	741.46								778.53	741.46						
49		812.34	773.66								812.34	773.66						
50		850.44	809.94								850.44	809.94						
51		888.05	845.77								888.05	845.77						
52		929.48	885.22								929.48	885.22						
53		971.38	925.13								971.38	925.13						
54		1016.62	968.21								1016.62	968.21						
55		1061.85	1011.29								1061.85	1011.29						
56		1110.90	1058.00								1110.90	1058.00						
57		1160.42	1105.16								1160.42	1105.16						
58		1213.28	1155.50								1213.28	1155.50						
59		1239.47	1180.44								1239.47	1180.44						
60		1292.32	1230.78								1292.32	1230.78						
61		1338.03	1274.32								1338.03	1274.32						
62		1368.03	1302.89								1368.03	1302.89						
63		1405.65	1338.71								1405.65	1338.71						
64 and over		1428.50	1360.47								1428.50	1360.47						

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP WA Silver 1000 with Pediatric Dental
HIOS Plan ID: 23371WA1770002
Effective Date: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		333.72	317.83								333.72	317.83						
15		363.39	346.08								363.39	346.08						
16		374.73	356.88								374.73	356.88						
17		386.07	367.69								386.07	367.69						
18		398.29	379.32								398.29	379.32						
19		410.50	390.95								410.50	390.95						
20		423.15	403.00								423.15	403.00						
21		436.24	415.46								436.24	415.46						
22		436.24	415.46								436.24	415.46						
23		436.24	415.46								436.24	415.46						
24		436.24	415.46								436.24	415.46						
25		437.98	417.13								437.98	417.13						
26		446.71	425.44								446.71	425.44						
27		457.18	435.41								457.18	435.41						
28		474.19	451.61								474.19	451.61						
29		488.15	464.90								488.15	464.90						
30		495.13	471.55								495.13	471.55						
31		505.60	481.52								505.60	481.52						
32		516.07	491.49								516.07	491.49						
33		522.61	497.73								522.61	497.73						
34		529.59	504.37								529.59	504.37						
35		533.08	507.70								533.08	507.70						
36		536.57	511.02								536.57	511.02						
37		540.06	514.35								540.06	514.35						
38		543.55	517.67								543.55	517.67						
39		550.53	524.32								550.53	524.32						
40		557.51	530.96								557.51	530.96						
41		567.98	540.93								567.98	540.93						
42		578.01	550.49								578.01	550.49						
43		591.97	563.79								591.97	563.79						
44		609.42	580.40								609.42	580.40						
45		629.93	599.93								629.93	599.93						
46		654.36	623.20								654.36	623.20						
47		681.84	649.37								681.84	649.37						
48		713.25	679.28								713.25	679.28						
49		744.22	708.78								744.22	708.78						
50		779.12	742.02								779.12	742.02						
51		813.58	774.84								813.58	774.84						
52		851.54	810.99								851.54	810.99						
53		889.92	847.55								889.92	847.55						
54		931.37	887.02								931.37	887.02						
55		972.81	926.49								972.81	926.49						
56		1017.74	969.28								1017.74	969.28						
57		1063.11	1012.49								1063.11	1012.49						
58		1111.53	1058.60								1111.53	1058.60						
59		1135.53	1081.45								1135.53	1081.45						
60		1183.95	1127.57								1183.95	1127.57						
61		1225.83	1167.46								1225.83	1167.46						
62		1253.31	1193.63								1253.31	1193.63						
63		1287.77	1226.45								1287.77	1226.45						
64 and over		1308.71	1246.38								1308.71	1246.38						

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP WA Silver 5500 with Pediatric Dental
HIOS Plan ID: 23371WA1790001
Effective Date: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		312.83	297.94								312.83	297.94						
15		340.64	324.42								340.64	324.42						
16		351.27	334.55								351.27	334.55						
17		361.91	344.67								361.91	344.67						
18		373.36	355.58								373.36	355.58						
19		384.81	366.48								384.81	366.48						
20		396.66	377.78								396.66	377.78						
21		408.93	389.46								408.93	389.46						
22		408.93	389.46								408.93	389.46						
23		408.93	389.46								408.93	389.46						
24		408.93	389.46								408.93	389.46						
25		410.57	391.02								410.57	391.02						
26		418.75	398.81								418.75	398.81						
27		428.56	408.15								428.56	408.15						
28		444.51	423.34								444.51	423.34						
29		457.60	435.81								457.60	435.81						
30		464.14	442.04								464.14	442.04						
31		473.95	451.38								473.95	451.38						
32		483.77	460.73								483.77	460.73						
33		489.90	466.57								489.90	466.57						
34		496.44	472.80								496.44	472.80						
35		499.72	475.92								499.72	475.92						
36		502.99	479.04								502.99	479.04						
37		506.26	482.15								506.26	482.15						
38		509.53	485.27								509.53	485.27						
39		516.07	491.50								516.07	491.50						
40		522.62	497.73								522.62	497.73						
41		532.43	507.08								532.43	507.08						
42		541.84	516.03								541.84	516.03						
43		554.92	528.50								554.92	528.50						
44		571.28	544.08								571.28	544.08						
45		590.50	562.38								590.50	562.38						
46		613.40	584.19								613.40	584.19						
47		639.16	608.73								639.16	608.73						
48		668.61	636.77								668.61	636.77						
49		697.64	664.42								697.64	664.42						
50		730.35	695.58								730.35	695.58						
51		762.66	726.34								762.66	726.34						
52		798.24	760.23								798.24	760.23						
53		834.22	794.50								834.22	794.50						
54		873.07	831.50								873.07	831.50						
55		911.92	868.50								911.92	868.50						
56		954.04	908.61								954.04	908.61						
57		996.57	949.11								996.57	949.11						
58		1041.96	992.34								1041.96	992.34						
59		1064.45	1013.76								1064.45	1013.76						
60		1109.84	1056.99								1109.84	1056.99						
61		1149.10	1094.38								1149.10	1094.38						
62		1174.86	1118.92								1174.86	1118.92						
63		1207.17	1149.69								1207.17	1149.69						
64 and over		1226.79	1168.38								1226.79	1168.38						

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP WA Silver HSA 3600 with Pediatric Dental
HIOS Plan ID: 23371WA1790004
Effective Date: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		317.44	302.32								317.44	302.32						
15		345.65	329.19								345.65	329.19						
16		356.44	339.47								356.44	339.47						
17		367.23	349.74								367.23	349.74						
18		378.85	360.81								378.85	360.81						
19		390.47	371.88								390.47	371.88						
20		402.50	383.34								402.50	383.34						
21		414.95	395.19								414.95	395.19						
22		414.95	395.19								414.95	395.19						
23		414.95	395.19								414.95	395.19						
24		414.95	395.19								414.95	395.19						
25		416.61	396.77								416.61	396.77						
26		424.91	404.68								424.91	404.68						
27		434.87	414.16								434.87	414.16						
28		451.05	429.57								451.05	429.57						
29		464.33	442.22								464.33	442.22						
30		470.97	448.54								470.97	448.54						
31		480.93	458.03								480.93	458.03						
32		490.89	467.51								490.89	467.51						
33		497.11	473.44								497.11	473.44						
34		503.75	479.76								503.75	479.76						
35		507.07	482.92								507.07	482.92						
36		510.39	486.09								510.39	486.09						
37		513.71	489.25								513.71	489.25						
38		517.03	492.41								517.03	492.41						
39		523.67	498.73								523.67	498.73						
40		530.31	505.05								530.31	505.05						
41		540.27	514.54								540.27	514.54						
42		549.81	523.63								549.81	523.63						
43		563.09	536.27								563.09	536.27						
44		579.69	552.08								579.69	552.08						
45		599.19	570.66								599.19	570.66						
46		622.43	592.79								622.43	592.79						
47		648.57	617.68								648.57	617.68						
48		678.44	646.14								678.44	646.14						
49		707.91	674.20								707.91	674.20						
50		741.10	705.81								741.10	705.81						
51		773.88	737.03								773.88	737.03						
52		809.98	771.41								809.98	771.41						
53		846.50	806.19								846.50	806.19						
54		885.92	843.73								885.92	843.73						
55		925.34	881.28								925.34	881.28						
56		968.08	921.98								968.08	921.98						
57		1011.24	963.08								1011.24	963.08						
58		1057.29	1006.95								1057.29	1006.95						
59		1080.12	1028.68								1080.12	1028.68						
60		1126.18	1072.55								1126.18	1072.55						
61		1166.01	1110.49								1166.01	1110.49						
62		1192.15	1135.38								1192.15	1135.38						
63		1224.94	1166.60								1224.94	1166.60						
64 and over		1244.85	1185.57								1244.85	1185.57						

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: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		301.11	286.77								301.11	286.77						
15		327.88	312.26								327.88	312.26						
16		338.11	322.01								338.11	322.01						
17		348.34	331.75								348.34	331.75						
18		359.36	342.25								359.36	342.25						
19		370.38	352.75								370.38	352.75						
20		381.80	363.62								381.80	363.62						
21		393.61	374.86								393.61	374.86						
22		393.61	374.86								393.61	374.86						
23		393.61	374.86								393.61	374.86						
24		393.61	374.86								393.61	374.86						
25		395.18	376.36								395.18	376.36						
26		403.05	383.86								403.05	383.86						
27		412.50	392.86								412.50	392.86						
28		427.85	407.48								427.85	407.48						
29		440.45	419.47								440.45	419.47						
30		446.74	425.47								446.74	425.47						
31		456.19	434.47								456.19	434.47						
32		465.64	443.46								465.64	443.46						
33		471.54	449.09								471.54	449.09						
34		477.84	455.09								477.84	455.09						
35		480.99	458.08								480.99	458.08						
36		484.14	461.08								484.14	461.08						
37		487.29	464.08								487.29	464.08						
38		490.44	467.08								490.44	467.08						
39		496.73	473.08								496.73	473.08						
40		503.03	479.08								503.03	479.08						
41		512.48	488.07								512.48	488.07						
42		521.53	496.70								521.53	496.70						
43		534.13	508.69								534.13	508.69						
44		549.87	523.69								549.87	523.69						
45		568.37	541.30								568.37	541.30						
46		590.41	562.30								590.41	562.30						
47		615.21	585.91								615.21	585.91						
48		643.55	612.90								643.55	612.90						
49		671.49	639.52								671.49	639.52						
50		702.98	669.51								702.98	669.51						
51		734.08	699.12								734.08	699.12						
52		768.32	731.74								768.32	731.74						
53		802.96	764.72								802.96	764.72						
54		840.35	800.34								840.35	800.34						
55		877.75	835.95								877.75	835.95						
56		918.29	874.56								918.29	874.56						
57		959.22	913.54								959.22	913.54						
58		1002.91	955.15								1002.91	955.15						
59		1024.56	975.77								1024.56	975.77						
60		1068.25	1017.38								1068.25	1017.38						
61		1106.04	1053.37								1106.04	1053.37						
62		1130.83	1076.99								1130.83	1076.99						
63		1161.93	1106.60								1161.93	1106.60						
64 and over		1180.82	1124.58								1180.82	1124.58						

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: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		299.94	285.66								299.94	285.66						
15		326.61	311.05								326.61	311.05						
16		336.80	320.76								336.80	320.76						
17		346.99	330.47								346.99	330.47						
18		357.97	340.93								357.97	340.93						
19		368.95	351.38								368.95	351.38						
20		380.32	362.21								380.32	362.21						
21		392.08	373.41								392.08	373.41						
22		392.08	373.41								392.08	373.41						
23		392.08	373.41								392.08	373.41						
24		392.08	373.41								392.08	373.41						
25		393.65	374.91								393.65	374.91						
26		401.49	382.38								401.49	382.38						
27		410.90	391.34								410.90	391.34						
28		426.20	405.90								426.20	405.90						
29		438.74	417.85								438.74	417.85						
30		445.02	423.82								445.02	423.82						
31		454.43	432.79								454.43	432.79						
32		463.84	441.75								463.84	441.75						
33		469.72	447.35								469.72	447.35						
34		475.99	453.32								475.99	453.32						
35		479.13	456.31								479.13	456.31						
36		482.26	459.30								482.26	459.30						
37		485.40	462.29								485.40	462.29						
38		488.54	465.27								488.54	465.27						
39		494.81	471.25								494.81	471.25						
40		501.08	477.22								501.08	477.22						
41		510.49	486.18								510.49	486.18						
42		519.51	494.77								519.51	494.77						
43		532.06	506.72								532.06	506.72						
44		547.74	521.66								547.74	521.66						
45		566.17	539.21								566.17	539.21						
46		588.13	560.12								588.13	560.12						
47		612.83	583.65								612.83	583.65						
48		641.06	610.53								641.06	610.53						
49		668.90	637.04								668.90	637.04						
50		700.26	666.92								700.26	666.92						
51		731.24	696.42								731.24	696.42						
52		765.35	728.90								765.35	728.90						
53		799.85	761.76								799.85	761.76						
54		837.10	797.24								837.10	797.24						
55		874.35	832.71								874.35	832.71						
56		914.73	871.17								914.73	871.17						
57		955.51	910.01								955.51	910.01						
58		999.03	951.46								999.03	951.46						
59		1020.60	972.00								1020.60	972.00						
60		1064.12	1013.44								1064.12	1013.44						
61		1101.76	1049.29								1101.76	1049.29						
62		1126.46	1072.82								1126.46	1072.82						
63		1157.43	1102.32								1157.43	1102.32						
64 and over		1176.24	1120.23								1176.24	1120.23						

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: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		305.40	290.86								305.40	290.86						
15		332.55	316.71								332.55	316.71						
16		342.93	326.60								342.93	326.60						
17		353.31	336.48								353.31	336.48						
18		364.49	347.13								364.49	347.13						
19		375.66	357.78								375.66	357.78						
20		387.24	368.80								387.24	368.80						
21		399.22	380.21								399.22	380.21						
22		399.22	380.21								399.22	380.21						
23		399.22	380.21								399.22	380.21						
24		399.22	380.21								399.22	380.21						
25		400.81	381.73								400.81	381.73						
26		408.80	389.33								408.80	389.33						
27		418.38	398.46								418.38	398.46						
28		433.95	413.29								433.95	413.29						
29		446.72	425.45								446.72	425.45						
30		453.11	431.54								453.11	431.54						
31		462.69	440.66								462.69	440.66						
32		472.27	449.79								472.27	449.79						
33		478.26	455.49								478.26	455.49						
34		484.65	461.57								484.65	461.57						
35		487.84	464.61								487.84	464.61						
36		491.04	467.65								491.04	467.65						
37		494.23	470.70								494.23	470.70						
38		497.43	473.74								497.43	473.74						
39		503.81	479.82								503.81	479.82						
40		510.20	485.90								510.20	485.90						
41		519.78	495.03								519.78	495.03						
42		528.96	503.77								528.96	503.77						
43		541.74	515.94								541.74	515.94						
44		557.71	531.15								557.71	531.15						
45		576.47	549.02								576.47	549.02						
46		598.83	570.31								598.83	570.31						
47		623.98	594.26								623.98	594.26						
48		652.72	621.64								652.72	621.64						
49		681.07	648.63								681.07	648.63						
50		713.00	679.05								713.00	679.05						
51		744.54	709.09								744.54	709.09						
52		779.27	742.16								779.27	742.16						
53		814.40	775.62								814.40	775.62						
54		852.33	811.74								852.33	811.74						
55		890.26	847.86								890.26	847.86						
56		931.37	887.02								931.37	887.02						
57		972.89	926.57								972.89	926.57						
58		1017.21	968.77								1017.21	968.77						
59		1039.16	989.68								1039.16	989.68						
60		1083.48	1031.88								1083.48	1031.88						
61		1121.80	1068.38								1121.80	1068.38						
62		1146.95	1092.34								1146.95	1092.34						
63		1178.49	1122.37								1178.49	1122.37						
64 and over		1197.65	1140.63								1197.65	1140.63						

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP WA Gold HSA 2100 with Pediatric Dental
HIOS Plan ID: 23371WA1790006
Effective Date: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		356.67	339.68								356.67	339.68						
15		388.37	369.87								388.37	369.87						
16		400.49	381.42								400.49	381.42						
17		412.61	392.96								412.61	392.96						
18		425.67	405.40								425.67	405.40						
19		438.72	417.83								438.72	417.83						
20		452.24	430.71								452.24	430.71						
21		466.23	444.03								466.23	444.03						
22		466.23	444.03								466.23	444.03						
23		466.23	444.03								466.23	444.03						
24		466.23	444.03								466.23	444.03						
25		468.09	445.80								468.09	445.80						
26		477.42	454.68								477.42	454.68						
27		488.61	465.34								488.61	465.34						
28		506.79	482.66								506.79	482.66						
29		521.71	496.87								521.71	496.87						
30		529.17	503.97								529.17	503.97						
31		540.36	514.63								540.36	514.63						
32		551.55	525.28								551.55	525.28						
33		558.54	531.95								558.54	531.95						
34		566.00	539.05								566.00	539.05						
35		569.73	542.60								569.73	542.60						
36		573.46	546.15								573.46	546.15						
37		577.19	549.71								577.19	549.71						
38		580.92	553.26								580.92	553.26						
39		588.38	560.36								588.38	560.36						
40		595.84	567.47								595.84	567.47						
41		607.03	578.12								607.03	578.12						
42		617.75	588.34								617.75	588.34						
43		632.67	602.55								632.67	602.55						
44		651.32	620.31								651.32	620.31						
45		673.23	641.18								673.23	641.18						
46		699.34	666.04								699.34	666.04						
47		728.72	694.02								728.72	694.02						
48		762.28	725.99								762.28	725.99						
49		795.39	757.51								795.39	757.51						
50		832.68	793.03								832.68	793.03						
51		869.52	828.11								869.52	828.11						
52		910.08	866.74								910.08	866.74						
53		951.11	905.82								951.11	905.82						
54		995.40	948.00								995.40	948.00						
55		1039.69	990.18								1039.69	990.18						
56		1087.71	1035.92								1087.71	1035.92						
57		1136.20	1082.10								1136.20	1082.10						
58		1187.95	1131.38								1187.95	1131.38						
59		1213.59	1155.80								1213.59	1155.80						
60		1265.35	1205.09								1265.35	1205.09						
61		1310.10	1247.72								1310.10	1247.72						
62		1339.48	1275.69								1339.48	1275.69						
63		1376.31	1310.77								1376.31	1310.77						
64 and over		1398.69	1332.09								1398.69	1332.09						

Kaiser Foundation Health Plan of the Northwest
RATE SCHEDULE

Plan Information

Plan Name: KP Cascade Vital Gold
HIOS Plan ID: 23371WA1940004
Effective Date: 1/1/2026
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	Non-Smoker Rates									Smoker Rates								
Band	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		353.14	336.32								353.14	336.32						
15		384.53	366.22								384.53	366.22						
16		396.53	377.65								396.53	377.65						
17		408.53	389.08								408.53	389.08						
18		421.46	401.39								421.46	401.39						
19		434.38	413.70								434.38	413.70						
20		447.77	426.45								447.77	426.45						
21		461.62	439.64								461.62	439.64						
22		461.62	439.64								461.62	439.64						
23		461.62	439.64								461.62	439.64						
24		461.62	439.64								461.62	439.64						
25		463.47	441.40								463.47	441.40						
26		472.70	450.19								472.70	450.19						
27		483.78	460.74								483.78	460.74						
28		501.78	477.89								501.78	477.89						
29		516.55	491.95								516.55	491.95						
30		523.94	498.99								523.94	498.99						
31		535.02	509.54								535.02	509.54						
32		546.09	520.09								546.09	520.09						
33		553.02	526.68								553.02	526.68						
34		560.41	533.72								560.41	533.72						
35		564.10	537.24								564.10	537.24						
36		567.79	540.75								567.79	540.75						
37		571.48	544.27								571.48	544.27						
38		575.18	547.79								575.18	547.79						
39		582.56	554.82								582.56	554.82						
40		589.95	561.86								589.95	561.86						
41		601.03	572.41								601.03	572.41						
42		611.64	582.52								611.64	582.52						
43		626.42	596.59								626.42	596.59						
44		644.88	614.17								644.88	614.17						
45		666.58	634.84								666.58	634.84						
46		692.43	659.46								692.43	659.46						
47		721.51	687.15								721.51	687.15						
48		754.75	718.81								754.75	718.81						
49		787.52	750.02								787.52	750.02						
50		824.45	785.19								824.45	785.19						
51		860.92	819.92								860.92	819.92						
52		901.08	858.17								901.08	858.17						
53		941.70	896.86								941.70	896.86						
54		985.56	938.62								985.56	938.62						
55		1029.41	980.39								1029.41	980.39						
56		1076.96	1025.67								1076.96	1025.67						
57		1124.96	1071.40								1124.96	1071.40						
58		1176.20	1120.19								1176.20	1120.19						
59		1201.59	1144.37								1201.59	1144.37						
60		1252.83	1193.17								1252.83	1193.17						
61		1297.15	1235.38								1297.15	1235.38						
62		1326.23	1263.08								1326.23	1263.08						
63		1362.70	1297.81								1362.70	1297.81						
64 and over		1384.86	1318.92								1384.86	1318.92						