

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

Plan Information

Plan Name: KP WA Gold 0/20
HIOS Plan ID: 23371WA1760003
Effective Date: 1/1/2022
Market Type: Individual
Exchange Status: Both inside and outside the exchange
Metal Level: Gold
Plan Type: Non-Standardized Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		317.14	302.04								317.14	302.04						
15		345.33	328.89								345.33	328.89						
16		356.11	339.15								356.11	339.15						
17		366.89	349.42								366.89	349.42						
18		378.49	360.47								378.49	360.47						
19		390.10	371.53								390.10	371.53						
20		402.12	382.98								402.12	382.98						
21		414.56	394.82								497.47	473.78						
22		414.56	394.82								497.47	473.78						
23		414.56	394.82								497.47	473.78						
24		414.56	394.82								497.47	473.78						
25		416.22	396.40								499.46	475.68						
26		424.51	404.30								509.41	485.15						
27		434.46	413.77								521.35	496.53						
28		450.63	429.17								540.75	515.00						
29		463.89	441.80								556.67	530.16						
30		470.53	448.12								564.63	537.74						
31		480.48	457.60								576.57	549.12						
32		490.43	467.07								588.51	560.49						
33		496.64	472.99								595.97	567.59						
34		503.28	479.31								603.93	575.17						
35		506.59	482.47								607.91	578.96						
36		509.91	485.63								611.89	582.75						
37		513.23	488.79								615.87	586.54						
38		516.54	491.95								619.85	590.33						
39		523.18	498.26								627.81	597.92						
40		529.81	504.58								635.77	605.50						
41		539.76	514.06								647.71	616.87						
42		549.29	523.14								659.15	627.76						
43		562.56	535.77								675.07	642.92						
44		579.14	551.56								694.97	661.88						
45		598.63	570.12								718.35	684.14						
46		621.84	592.23								746.21	710.68						
47		647.96	617.10								777.55	740.52						
48		677.81	645.53								813.37	774.64						
49		707.24	673.56								848.69	808.28						
50		740.41	705.15								888.49	846.18						
51		773.16	736.34								927.79	883.61						
52		809.22	770.69								971.07	924.83						
53		845.70	805.43								1014.85	966.52						
54		885.09	842.94								1062.11	1011.53						
55		924.47	880.45								1109.37	1056.54						
56		967.17	921.12								1160.60	1105.34						
57		1010.29	962.18								1212.34	1154.61						
58		1056.30	1006.00								1267.56	1207.20						
59		1079.10	1027.72								1294.92	1233.26						
60		1125.12	1071.54								1350.14	1285.85						
61		1164.92	1109.44								1397.90	1331.33						
62		1191.03	1134.32								1429.24	1361.18						
63		1223.78	1165.51								1468.54	1398.61						
64 and over		1243.68	1184.46								1492.41	1421.34						

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

Plan Information

Plan Name: KP WA Gold 2000/30
HIOS Plan ID: 23371WA1760001
Effective Date: 1/1/2022
Market Type: Individual
Exchange Status: Both inside and outside the exchange
Metal Level: Gold
Plan Type: Non-Standardized Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		290.65	276.81								290.65	276.81						
15		316.48	301.41								316.48	301.41						
16		326.36	310.82								326.36	310.82						
17		336.24	320.23								336.24	320.23						
18		346.88	330.36								346.88	330.36						
19		357.52	340.49								357.52	340.49						
20		368.53	350.98								368.53	350.98						
21		379.93	361.84								455.92	434.21						
22		379.93	361.84								455.92	434.21						
23		379.93	361.84								455.92	434.21						
24		379.93	361.84								455.92	434.21						
25		381.45	363.29								457.74	435.94						
26		389.05	370.52								466.86	444.63						
27		398.17	379.21								477.80	455.05						
28		412.99	393.32								495.58	471.98						
29		425.14	404.90								510.17	485.88						
30		431.22	410.69								517.47	492.83						
31		440.34	419.37								528.41	503.25						
32		449.46	428.06								539.35	513.67						
33		455.16	433.48								546.19	520.18						
34		461.24	439.27								553.48	527.13						
35		464.28	442.17								557.13	530.60						
36		467.32	445.06								560.78	534.08						
37		470.36	447.96								564.43	537.55						
38		473.40	450.85								568.07	541.02						
39		479.47	456.64								575.37	547.97						
40		485.55	462.43								582.66	554.92						
41		494.67	471.12								593.61	565.34						
42		503.41	479.44								604.09	575.33						
43		515.57	491.02								618.68	589.22						
44		530.77	505.49								636.92	606.59						
45		548.62	522.50								658.35	627.00						
46		569.90	542.76								683.88	651.31						
47		593.83	565.56								712.60	678.67						
48		621.19	591.61								745.43	709.93						
49		648.16	617.30								777.80	740.76						
50		678.56	646.25								814.27	775.50						
51		708.57	674.83								850.29	809.80						
52		741.63	706.31								889.95	847.57						
53		775.06	738.15								930.07	885.78						
54		811.15	772.53								973.39	927.03						
55		847.25	806.90								1016.70	968.28						
56		886.38	844.17								1063.66	1013.01						
57		925.89	881.80								1111.07	1058.16						
58		968.07	921.97								1161.68	1106.36						
59		988.96	941.87								1186.76	1130.24						
60		1031.14	982.03								1237.36	1178.44						
61		1067.61	1016.77								1281.13	1220.12						
62		1091.54	1039.57								1309.85	1247.48						
63		1121.56	1068.15								1345.87	1281.78						
64 and over		1139.79	1085.52								1367.76	1302.62						

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

Plan Information

Plan Name: KP Cascade Gold
HIOS Plan ID: 23371WA1940001
Effective Date: 1/1/2022
Market Type: Individual
Exchange Status: In the exchange
Metal Level: Gold
Plan Type: Standardized Non-Public Option Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		338.44	322.33								338.44	322.33						
15		368.53	350.98								368.53	350.98						
16		380.03	361.93								380.03	361.93						
17		391.53	372.89								391.53	372.89						
18		403.92	384.68								403.92	384.68						
19		416.30	396.48								416.30	396.48						
20		429.13	408.70								429.13	408.70						
21		442.41	421.34								530.89	505.61						
22		442.41	421.34								530.89	505.61						
23		442.41	421.34								530.89	505.61						
24		442.41	421.34								530.89	505.61						
25		444.18	423.03								533.01	507.63						
26		453.02	431.45								543.63	517.74						
27		463.64	441.56								556.37	529.88						
28		480.90	458.00								577.08	549.60						
29		495.05	471.48								594.06	565.78						
30		502.13	478.22								602.56	573.87						
31		512.75	488.33								615.30	586.00						
32		523.37	498.45								628.04	598.13						
33		530.00	504.77								636.00	605.72						
34		537.08	511.51								644.50	613.81						
35		540.62	514.88								648.75	617.85						
36		544.16	518.25								652.99	621.90						
37		547.70	521.62								657.24	625.94						
38		551.24	524.99								661.49	629.99						
39		558.32	531.73								669.98	638.08						
40		565.40	538.47								678.48	646.17						
41		576.01	548.58								691.22	658.30						
42		586.19	558.28								703.43	669.93						
43		600.35	571.76								720.42	686.11						
44		618.04	588.61								741.65	706.33						
45		638.84	608.41								766.60	730.10						
46		663.61	632.01								796.33	758.41						
47		691.48	658.55								829.78	790.27						
48		723.34	688.89								868.00	826.67						
49		754.75	718.81								905.70	862.57						
50		790.14	752.51								948.17	903.02						
51		825.09	785.80								990.11	942.96						
52		863.58	822.46								1036.29	986.95						
53		902.51	859.53								1083.01	1031.44						
54		944.54	899.56								1133.45	1079.47						
55		986.57	939.59								1183.88	1127.51						
56		1032.14	982.99								1238.56	1179.58						
57		1078.15	1026.81								1293.78	1232.17						
58		1127.25	1073.57								1352.70	1288.29						
59		1151.59	1096.75								1381.90	1316.10						
60		1200.69	1143.52								1440.83	1372.22						
61		1243.16	1183.97								1491.80	1420.76						
62		1271.04	1210.51								1525.24	1452.61						
63		1305.99	1243.80								1567.18	1492.55						
64 and over		1327.22	1264.02								1592.67	1516.82						

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

Plan Information

Plan Name: KP WA Silver 2500/40
HIOS Plan ID: 23371WA1760002
Effective Date: 1/1/2022
Market Type: Individual
Exchange Status: Both inside and outside the exchange
Metal Level: Silver
Plan Type: Non-Standardized Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		303.29	288.85								303.29	288.85						
15		330.25	314.52								330.25	314.52						
16		340.56	324.34								340.56	324.34						
17		350.87	334.16								350.87	334.16						
18		361.97	344.73								361.97	344.73						
19		373.07	355.30								373.07	355.30						
20		384.57	366.25								384.57	366.25						
21		396.46	377.58								475.75	453.10						
22		396.46	377.58								475.75	453.10						
23		396.46	377.58								475.75	453.10						
24		396.46	377.58								475.75	453.10						
25		398.04	379.09								477.65	454.91						
26		405.97	386.64								487.17	463.97						
27		415.49	395.70								498.59	474.84						
28		430.95	410.43								517.14	492.52						
29		443.64	422.51								532.37	507.01						
30		449.98	428.55								539.98	514.26						
31		459.50	437.62								551.40	525.14						
32		469.01	446.68								562.81	536.01						
33		474.96	452.34								569.95	542.81						
34		481.30	458.38								577.56	550.06						
35		484.47	461.40								581.37	553.68						
36		487.64	464.42								585.17	557.31						
37		490.82	467.44								588.98	560.93						
38		493.99	470.46								592.79	564.56						
39		500.33	476.51								600.40	571.81						
40		506.67	482.55								608.01	579.06						
41		516.19	491.61								619.43	589.93						
42		525.31	500.29								630.37	600.35						
43		537.99	512.38								645.59	614.85						
44		553.85	527.48								664.62	632.98						
45		572.49	545.23								686.98	654.27						
46		594.69	566.37								713.63	679.64						
47		619.67	590.16								743.60	708.19						
48		648.21	617.34								777.85	740.81						
49		676.36	644.15								811.63	772.98						
50		708.08	674.36								849.69	809.23						
51		739.40	704.19								887.28	845.02						
52		773.89	737.04								928.67	884.44						
53		808.78	770.26								970.53	924.32						
54		846.44	806.13								1015.73	967.36						
55		884.10	842.00								1060.92	1010.40						
56		924.94	880.89								1109.93	1057.07						
57		966.17	920.16								1159.40	1104.19						
58		1010.18	962.07								1212.21	1154.49						
59		1031.98	982.84								1238.38	1179.41						
60		1075.99	1024.75								1291.19	1229.70						
61		1114.05	1061.00								1336.86	1273.20						
62		1139.03	1084.79								1366.83	1301.74						
63		1170.35	1114.62								1404.42	1337.54						
64 and over		1189.38	1132.74								1427.25	1359.29						

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

Plan Information

Plan Name: KP Cascade Silver
HIOS Plan ID: 23371WA1940002
Effective Date: 1/1/2022
Market Type: Individual
Exchange Status: In the exchange
Metal Level: Silver
Plan Type: Standardized Non-Public Option Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		319.14	303.94								319.14	303.94						
15		347.51	330.96								347.51	330.96						
16		358.35	341.29								358.35	341.29						
17		369.20	351.62								369.20	351.62						
18		380.88	362.74								380.88	362.74						
19		392.56	373.87								392.56	373.87						
20		404.66	385.39								404.66	385.39						
21		417.18	397.31								500.61	476.77						
22		417.18	397.31								500.61	476.77						
23		417.18	397.31								500.61	476.77						
24		417.18	397.31								500.61	476.77						
25		418.84	398.90								502.61	478.68						
26		427.19	406.85								512.63	488.21						
27		437.20	416.38								524.64	499.66						
28		453.47	431.88								544.16	518.25						
29		466.82	444.59								560.18	533.51						
30		473.49	450.95								568.19	541.14						
31		483.51	460.48								580.21	552.58						
32		493.52	470.02								592.22	564.02						
33		499.78	475.98								599.73	571.17						
34		506.45	482.33								607.74	578.80						
35		509.79	485.51								611.75	582.62						
36		513.13	488.69								615.75	586.43						
37		516.46	491.87								619.76	590.24						
38		519.80	495.05								623.76	594.06						
39		526.48	501.41								631.77	601.69						
40		533.15	507.76								639.78	609.31						
41		543.16	517.30								651.80	620.76						
42		552.76	526.44								663.31	631.72						
43		566.11	539.15								679.33	646.98						
44		582.79	555.04								699.35	666.05						
45		602.40	573.72								722.88	688.46						
46		625.76	595.97								750.92	715.16						
47		652.05	621.00								782.45	745.19						
48		682.08	649.60								818.50	779.52						
49		711.70	677.81								854.04	813.37						
50		745.08	709.60								894.09	851.51						
51		778.03	740.98								933.64	889.18						
52		814.33	775.55								977.19	930.66						
53		851.04	810.51								1021.25	972.61						
54		890.67	848.26								1068.80	1017.91						
55		930.30	886.00								1116.36	1063.20						
56		973.27	926.92								1167.92	1112.31						
57		1016.66	968.24								1219.99	1161.89						
58		1062.96	1012.35								1275.56	1214.82						
59		1085.91	1034.20								1303.09	1241.04						
60		1132.21	1078.30								1358.66	1293.96						
61		1172.26	1116.44								1406.72	1339.73						
62		1198.55	1141.47								1438.25	1369.77						
63		1231.50	1172.86								1477.80	1407.43						
64 and over		1251.53	1191.93								1501.83	1430.31						

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

Plan Information

Plan Name: KP WA Bronze 6350/65
HIOS Plan ID: 23371WA1780002
Effective Date: 1/1/2022
Market Type: Individual
Exchange Status: Both inside and outside the exchange
Metal Level: Bronze
Plan Type: Non-Standardized Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		215.93	205.65								215.93	205.65						
15		235.12	223.93								235.12	223.93						
16		242.46	230.92								242.46	230.92						
17		249.80	237.91								249.80	237.91						
18		257.70	245.43								257.70	245.43						
19		265.61	252.96								265.61	252.96						
20		273.79	260.76								273.79	260.76						
21		282.26	268.82								338.71	322.58						
22		282.26	268.82								338.71	322.58						
23		282.26	268.82								338.71	322.58						
24		282.26	268.82								338.71	322.58						
25		283.39	269.90								340.07	323.87						
26		289.04	275.27								346.84	330.33						
27		295.81	281.72								354.97	338.07						
28		306.82	292.21								368.18	350.65						
29		315.85	300.81								379.02	360.97						
30		320.37	305.11								384.44	366.13						
31		327.14	311.56								392.57	373.87						
32		333.91	318.01								400.70	381.62						
33		338.15	322.05								405.78	386.46						
34		342.66	326.35								411.20	391.62						
35		344.92	328.50								413.91	394.20						
36		347.18	330.65								416.62	396.78						
37		349.44	332.80								419.33	399.36						
38		351.70	334.95								422.04	401.94						
39		356.21	339.25								427.46	407.10						
40		360.73	343.55								432.88	412.26						
41		367.50	350.00								441.00	420.00						
42		374.00	356.19								448.79	427.42						
43		383.03	364.79								459.63	437.75						
44		394.32	375.54								473.18	450.65						
45		407.58	388.18								489.10	465.81						
46		423.39	403.23								508.07	483.88						
47		441.17	420.17								529.41	504.20						
48		461.50	439.52								553.80	527.42						
49		481.54	458.61								577.84	550.33						
50		504.12	480.11								604.94	576.14						
51		526.42	501.35								631.70	601.62						
52		550.97	524.74								661.17	629.68						
53		575.81	548.39								690.97	658.07						
54		602.63	573.93								723.15	688.72						
55		629.44	599.47								755.33	719.36						
56		658.51	627.16								790.22	752.59						
57		687.87	655.11								825.44	786.14						
58		719.20	684.95								863.04	821.94						
59		734.73	699.74								881.67	839.69						
60		766.06	729.58								919.27	875.49						
61		793.15	755.38								951.78	906.46						
62		810.94	772.32								973.12	926.78						
63		833.23	793.56								999.88	952.27						
64 and over		846.78	806.46								1016.13	967.74						

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

Plan Information

Plan Name: KP WA Bronze 8550/75
HIOS Plan ID: 23371WA1780003
Effective Date: 1/1/2022
Market Type: Individual
Exchange Status: Both inside and outside the exchange
Metal Level: Bronze
Plan Type: Non-Standardized Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		210.44	200.41								210.44	200.41						
15		229.14	218.23								229.14	218.23						
16		236.29	225.04								236.29	225.04						
17		243.44	231.85								243.44	231.85						
18		251.15	239.19								251.15	239.19						
19		258.85	246.52								258.85	246.52						
20		266.83	254.12								266.83	254.12						
21		275.08	261.98								330.09	314.38						
22		275.08	261.98								330.09	314.38						
23		275.08	261.98								330.09	314.38						
24		275.08	261.98								330.09	314.38						
25		276.18	263.03								331.42	315.63						
26		281.68	268.27								338.02	321.92						
27		288.28	274.56								345.94	329.47						
28		299.01	284.77								358.81	341.73						
29		307.81	293.16								369.38	351.79						
30		312.21	297.35								374.66	356.82						
31		318.82	303.63								382.58	364.36						
32		325.42	309.92								390.50	371.91						
33		329.54	313.85								395.45	376.62						
34		333.95	318.04								400.74	381.65						
35		336.15	320.14								403.38	384.17						
36		338.35	322.24								406.02	386.68						
37		340.55	324.33								408.66	389.20						
38		342.75	326.43								411.30	391.71						
39		347.15	330.62								416.58	396.74						
40		351.55	334.81								421.86	401.77						
41		358.15	341.10								429.78	409.32						
42		364.48	347.12								437.38	416.55						
43		373.28	355.51								447.94	426.61						
44		384.29	365.99								461.14	439.18						
45		397.21	378.30								476.66	453.96						
46		412.62	392.97								495.14	471.56						
47		429.95	409.47								515.94	491.37						
48		449.75	428.34								539.70	514.00						
49		469.28	446.94								563.14	536.33						
50		491.29	467.90								589.55	561.48						
51		513.02	488.59								615.63	586.31						
52		536.95	511.38								644.35	613.66						
53		561.16	534.44								673.39	641.33						
54		587.29	559.33								704.75	671.19						
55		613.43	584.22								736.11	701.06						
56		641.76	611.20								770.11	733.44						
57		670.37	638.45								804.44	766.13						
58		700.90	667.53								841.08	801.03						
59		716.03	681.93								859.24	818.32						
60		746.56	711.01								895.88	853.22						
61		772.97	736.16								927.57	883.40						
62		790.30	752.67								948.36	903.20						
63		812.03	773.36								974.44	928.04						
64 and over		825.24	785.94								990.27	943.13						

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

Plan Information

Plan Name: KP WA Bronze 6900/0% HSA
HIOS Plan ID: 23371WA1780004
Effective Date: 1/1/2022
Market Type: Individual
Exchange Status: Both inside and outside the exchange
Metal Level: Bronze
Plan Type: Non-Standardized Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		215.30	205.04								215.30	205.04						
15		234.43	223.27								234.43	223.27						
16		241.75	230.24								241.75	230.24						
17		249.07	237.21								249.07	237.21						
18		256.95	244.71								256.95	244.71						
19		264.83	252.22								264.83	252.22						
20		272.99	259.99								272.99	259.99						
21		281.43	268.03								337.72	321.64						
22		281.43	268.03								337.72	321.64						
23		281.43	268.03								337.72	321.64						
24		281.43	268.03								337.72	321.64						
25		282.56	269.10								339.07	322.92						
26		288.19	274.46								345.82	329.36						
27		294.94	280.90								353.93	337.07						
28		305.92	291.35								367.10	349.62						
29		314.92	299.93								377.91	359.91						
30		319.42	304.21								383.31	365.06						
31		326.18	310.65								391.41	372.78						
32		332.93	317.08								399.52	380.50						
33		337.15	321.10								404.59	385.32						
34		341.66	325.39								409.99	390.47						
35		343.91	327.53								412.69	393.04						
36		346.16	329.68								415.39	395.61						
37		348.41	331.82								418.09	398.19						
38		350.66	333.97								420.80	400.76						
39		355.17	338.25								426.20	405.90						
40		359.67	342.54								431.60	411.05						
41		366.42	348.98								439.71	418.77						
42		372.90	355.14								447.48	426.17						
43		381.90	363.72								458.28	436.46						
44		393.16	374.44								471.79	449.33						
45		406.39	387.04								487.66	464.44						
46		422.15	402.05								506.58	482.45						
47		439.88	418.93								527.85	502.72						
48		460.14	438.23								552.17	525.87						
49		480.12	457.26								576.15	548.71						
50		502.64	478.70								603.16	574.44						
51		524.87	499.88								629.84	599.85						
52		549.35	523.19								659.23	627.83						
53		574.12	546.78								688.94	656.14						
54		600.86	572.24								721.03	686.69						
55		627.59	597.71								753.11	717.25						
56		656.58	625.31								787.90	750.38						
57		685.85	653.19								823.02	783.83						
58		717.09	682.94								860.50	819.53						
59		732.57	697.68								879.08	837.22						
60		763.81	727.43								916.57	872.92						
61		790.82	753.16								948.99	903.80						
62		808.55	770.05								970.26	924.06						
63		830.79	791.22								996.94	949.47						
64 and over		844.29	804.09								1013.15	964.91						

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

Plan Information

Plan Name: KP Cascade Bronze
HIOS Plan ID: 23371WA1940003
Effective Date: 1/1/2022
Market Type: Individual
Exchange Status: In the exchange
Metal Level: Bronze
Plan Type: Standardized Non-Public Option Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		213.91	203.72								213.91	203.72						
15		232.92	221.83								232.92	221.83						
16		240.19	228.75								240.19	228.75						
17		247.46	235.68								247.46	235.68						
18		255.29	243.13								255.29	243.13						
19		263.12	250.59								263.12	250.59						
20		271.23	258.31								271.23	258.31						
21		279.62	266.30								335.54	319.56						
22		279.62	266.30								335.54	319.56						
23		279.62	266.30								335.54	319.56						
24		279.62	266.30								335.54	319.56						
25		280.73	267.37								336.88	320.84						
26		286.33	272.69								343.59	327.23						
27		293.04	279.08								351.64	334.90						
28		303.94	289.47								364.73	347.36						
29		312.89	297.99								375.47	357.59						
30		317.36	302.25								380.84	362.70						
31		324.07	308.64								388.89	370.37						
32		330.78	315.03								396.94	378.04						
33		334.98	319.03								401.97	382.83						
34		339.45	323.29								407.34	387.95						
35		341.69	325.42								410.03	390.50						
36		343.93	327.55								412.71	393.06						
37		346.16	329.68								415.40	395.62						
38		348.40	331.81								418.08	398.17						
39		352.87	336.07								423.45	403.28						
40		357.35	340.33								428.82	408.40						
41		364.06	346.72								436.87	416.07						
42		370.49	352.85								444.59	423.42						
43		379.44	361.37								455.33	433.64						
44		390.62	372.02								468.75	446.43						
45		403.76	384.54								484.52	461.44						
46		419.42	399.45								503.31	479.34						
47		437.04	416.23								524.45	499.47						
48		457.17	435.40								548.60	522.48						
49		477.02	454.31								572.43	545.17						
50		499.39	475.61								599.27	570.73						
51		521.48	496.65								625.78	595.98						
52		545.81	519.82								654.97	623.78						
53		570.41	543.25								684.50	651.90						
54		596.98	568.55								716.37	682.26						
55		623.54	593.85								748.25	712.62						
56		652.34	621.28								782.81	745.53						
57		681.42	648.97								817.71	778.77						
58		712.46	678.53								854.95	814.24						
59		727.84	693.18								873.41	831.81						
60		758.88	722.74								910.65	867.29						
61		785.72	748.30								942.86	897.96						
62		803.33	765.08								964.00	918.10						
63		825.42	786.12								990.51	943.34						
64 and over		838.85	798.90								1006.61	958.68						

**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: 1/1/2022
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Gold
Plan Type: Non-Standardized Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		317.42	302.31								317.42	302.31						
15		345.64	329.18								345.64	329.18						
16		356.42	339.45								356.42	339.45						
17		367.21	349.73								367.21	349.73						
18		378.83	360.79								378.83	360.79						
19		390.45	371.85								390.45	371.85						
20		402.48	383.31								402.48	383.31						
21		414.93	395.17								497.91	474.20						
22		414.93	395.17								497.91	474.20						
23		414.93	395.17								497.91	474.20						
24		414.93	395.17								497.91	474.20						
25		416.59	396.75								499.91	476.10						
26		424.89	404.65								509.86	485.58						
27		434.85	414.14								521.81	496.97						
28		451.03	429.55								541.23	515.46						
29		464.30	442.20								557.17	530.63						
30		470.94	448.52								565.13	538.22						
31		480.90	458.00								577.08	549.60						
32		490.86	467.49								589.03	560.98						
33		497.08	473.41								596.50	568.10						
34		503.72	479.74								604.47	575.68						
35		507.04	482.90								608.45	579.48						
36		510.36	486.06								612.43	583.27						
37		513.68	489.22								616.42	587.06						
38		517.00	492.38								620.40	590.86						
39		523.64	498.70								628.37	598.45						
40		530.28	505.03								636.33	606.03						
41		540.24	514.51								648.28	617.41						
42		549.78	523.60								659.74	628.32						
43		563.06	536.25								675.67	643.49						
44		579.66	552.05								695.59	662.46						
45		599.16	570.63								718.99	684.75						
46		622.39	592.76								746.87	711.31						
47		648.53	617.65								778.24	741.18						
48		678.41	646.10								814.09	775.32						
49		707.87	674.16								849.44	808.99						
50		741.06	705.77								889.27	846.93						
51		773.84	736.99								928.61	884.39						
52		809.94	771.37								971.93	925.65						
53		846.45	806.15								1015.74	967.38						
54		885.87	843.69								1063.05	1012.43						
55		925.29	881.23								1110.35	1057.47						
56		968.03	921.93								1161.63	1106.32						
57		1011.18	963.03								1213.42	1155.64						
58		1057.24	1006.89								1268.69	1208.27						
59		1080.06	1028.63								1296.07	1234.35						
60		1126.12	1072.49								1351.34	1286.99						
61		1165.95	1110.43								1399.14	1332.51						
62		1192.09	1135.32								1430.51	1362.39						
63		1224.87	1166.54								1469.84	1399.85						
64 and over		1244.79	1185.51								1493.73	1422.60						

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

Plan Information

Plan Name: KP WA Gold 2000/30 with Pediatric Dental
HIOS Plan ID: 23371WA1770001
Effective Date: 1/1/2022
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Gold
Plan Type: Non-Standardized Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		291.03	277.17								291.03	277.17						
15		316.90	301.81								316.90	301.81						
16		326.79	311.23								326.79	311.23						
17		336.69	320.65								336.69	320.65						
18		347.34	330.80								347.34	330.80						
19		357.99	340.94								357.99	340.94						
20		369.02	351.45								369.02	351.45						
21		380.44	362.32								456.52	434.78						
22		380.44	362.32								456.52	434.78						
23		380.44	362.32								456.52	434.78						
24		380.44	362.32								456.52	434.78						
25		381.96	363.77								458.35	436.52						
26		389.57	371.02								467.48	445.22						
27		398.70	379.71								478.44	455.65						
28		413.53	393.84								496.24	472.61						
29		425.71	405.44								510.85	486.52						
30		431.79	411.23								518.15	493.48						
31		440.93	419.93								529.11	503.91						
32		450.06	428.62								540.07	514.35						
33		455.76	434.06								546.91	520.87						
34		461.85	439.86								554.22	527.83						
35		464.89	442.76								557.87	531.31						
36		467.94	445.65								561.52	534.78						
37		470.98	448.55								565.18	538.26						
38		474.02	451.45								568.83	541.74						
39		480.11	457.25								576.13	548.70						
40		486.20	463.04								583.44	555.65						
41		495.33	471.74								594.39	566.09						
42		504.08	480.07								604.89	576.09						
43		516.25	491.67								619.50	590.00						
44		531.47	506.16								637.76	607.39						
45		549.35	523.19								659.22	627.83						
46		570.65	543.48								684.78	652.18						
47		594.62	566.31								713.55	679.57						
48		622.01	592.39								746.42	710.87						
49		649.02	618.12								778.83	741.74						
50		679.46	647.10								815.35	776.52						
51		709.51	675.73								851.42	810.87						
52		742.61	707.25								891.13	848.70						
53		776.09	739.13								931.31	886.96						
54		812.23	773.55								974.68	928.26						
55		848.37	807.97								1018.05	969.57						
56		887.56	845.29								1065.07	1014.35						
57		927.12	882.97								1112.55	1059.57						
58		969.35	923.19								1163.22	1107.83						
59		990.27	943.12								1188.33	1131.74						
60		1032.50	983.34								1239.00	1180.00						
61		1069.03	1018.12								1282.83	1221.74						
62		1092.99	1040.95								1311.59	1249.13						
63		1123.05	1069.57								1347.66	1283.48						
64 and over		1141.31	1086.96								1369.56	1304.34						

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

Plan Information

Plan Name: KP WA Silver 2500/40 with Pediatric Dental
HIOS Plan ID: 23371WA1770002
Effective Date: 1/1/2022
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Silver
Plan Type: Non-Standardized Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		272.46	259.49								272.46	259.49						
15		296.68	282.55								296.68	282.55						
16		305.94	291.37								305.94	291.37						
17		315.20	300.19								315.20	300.19						
18		325.17	309.69								325.17	309.69						
19		335.15	319.19								335.15	319.19						
20		345.48	329.02								345.48	329.02						
21		356.16	339.20								427.39	407.04						
22		356.16	339.20								427.39	407.04						
23		356.16	339.20								427.39	407.04						
24		356.16	339.20								427.39	407.04						
25		357.58	340.56								429.10	408.67						
26		364.71	347.34								437.65	416.81						
27		373.26	355.48								447.91	426.58						
28		387.15	368.71								464.58	442.45						
29		398.54	379.56								478.25	455.48						
30		404.24	384.99								485.09	461.99						
31		412.79	393.13								495.35	471.76						
32		421.34	401.27								505.60	481.53						
33		426.68	406.36								512.02	487.63						
34		432.38	411.79								518.85	494.15						
35		435.23	414.50								522.27	497.40						
36		438.08	417.22								525.69	500.66						
37		440.93	419.93								529.11	503.92						
38		443.78	422.64								532.53	507.17						
39		449.47	428.07								539.37	513.68						
40		455.17	433.50								546.21	520.20						
41		463.72	441.64								556.46	529.97						
42		471.91	449.44								566.29	539.33						
43		483.31	460.29								579.97	552.35						
44		497.56	473.86								597.07	568.63						
45		514.30	489.80								617.15	587.77						
46		534.24	508.80								641.09	610.56						
47		556.68	530.17								668.01	636.20						
48		582.32	554.59								698.79	665.51						
49		607.61	578.68								729.13	694.41						
50		636.10	605.81								763.32	726.97						
51		664.24	632.61								797.09	759.13						
52		695.22	662.12								834.27	794.54						
53		726.57	691.97								871.88	830.36						
54		760.40	724.19								912.48	869.03						
55		794.24	756.42								953.08	907.70						
56		830.92	791.35								997.11	949.62						
57		867.96	826.63								1041.55	991.96						
58		907.50	864.28								1088.99	1037.14						
59		927.08	882.94								1112.50	1059.53						
60		966.62	920.59								1159.94	1104.71						
61		1000.81	953.15								1200.97	1143.78						
62		1023.25	974.52								1227.90	1169.43						
63		1051.38	1001.32								1261.66	1201.58						
64 and over		1068.48	1017.60								1282.17	1221.12						

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

Plan Information

Plan Name: KP WA Silver 4500/40 with Pediatric Dental
HIOS Plan ID: 23371WA1790001
Effective Date: 1/1/2022
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Silver
Plan Type: Non-Standardized Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		236.79	225.51								236.79	225.51						
15		257.84	245.56								257.84	245.56						
16		265.89	253.22								265.89	253.22						
17		273.93	260.89								273.93	260.89						
18		282.60	269.14								282.60	269.14						
19		291.27	277.40								291.27	277.40						
20		300.24	285.95								300.24	285.95						
21		309.53	294.79								371.44	353.75						
22		309.53	294.79								371.44	353.75						
23		309.53	294.79								371.44	353.75						
24		309.53	294.79								371.44	353.75						
25		310.77	295.97								372.92	355.16						
26		316.96	301.86								380.35	362.24						
27		324.39	308.94								389.26	370.73						
28		336.46	320.44								403.75	384.52						
29		346.36	329.87								415.64	395.84						
30		351.32	334.59								421.58	401.50						
31		358.74	341.66								430.49	409.99						
32		366.17	348.74								439.41	418.48						
33		370.82	353.16								444.98	423.79						
34		375.77	357.88								450.92	429.45						
35		378.25	360.23								453.89	432.28						
36		380.72	362.59								456.87	435.11						
37		383.20	364.95								459.84	437.94						
38		385.67	367.31								462.81	440.77						
39		390.63	372.02								468.75	446.43						
40		395.58	376.74								474.69	452.09						
41		403.01	383.82								483.61	460.58						
42		410.13	390.60								492.15	468.72						
43		420.03	400.03								504.04	480.04						
44		432.41	411.82								518.90	494.19						
45		446.96	425.68								536.35	510.81						
46		464.29	442.19								557.15	530.62						
47		483.79	460.76								580.55	552.91						
48		506.08	481.98								607.30	578.38						
49		528.06	502.91								633.67	603.49						
50		552.82	526.49								663.38	631.79						
51		577.27	549.78								692.73	659.74						
52		604.20	575.43								725.04	690.52						
53		631.44	601.37								757.73	721.65						
54		660.85	629.38								793.01	755.25						
55		690.25	657.38								828.30	788.86						
56		722.13	687.75								866.56	825.29						
57		754.32	718.40								905.19	862.08						
58		788.68	751.12								946.42	901.35						
59		805.71	767.34								966.85	920.81						
60		840.06	800.06								1008.08	960.07						
61		869.78	828.36								1043.73	994.03						
62		889.28	846.93								1067.13	1016.32						
63		913.73	870.22								1096.48	1044.26						
64 and over		928.59	884.37								1114.31	1061.24						

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

Plan Information

Plan Name: KP WA Silver 3000/20% HSA with Pediatric Dental
HIOS Plan ID: 23371WA1790004
Effective Date: 1/1/2022
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Silver
Plan Type: Non-Standardized Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		254.53	242.41								254.53	242.41						
15		277.16	263.96								277.16	263.96						
16		285.81	272.20								285.81	272.20						
17		294.46	280.44								294.46	280.44						
18		303.78	289.31								303.78	289.31						
19		313.09	298.18								313.09	298.18						
20		322.74	307.37								322.74	307.37						
21		332.72	316.88								332.72	316.88						
22		332.72	316.88								332.72	316.88						
23		332.72	316.88								332.72	316.88						
24		332.72	316.88								332.72	316.88						
25		334.05	318.15								334.05	318.15						
26		340.71	324.49								340.71	324.49						
27		348.69	332.09								348.69	332.09						
28		361.67	344.45								361.67	344.45						
29		372.32	354.59								372.32	354.59						
30		377.64	359.66								377.64	359.66						
31		385.63	367.26								385.63	367.26						
32		393.61	374.87								393.61	374.87						
33		398.60	379.62								398.60	379.62						
34		403.93	384.69								403.93	384.69						
35		406.59	387.23								406.59	387.23						
36		409.25	389.76								409.25	389.76						
37		411.91	392.30								411.91	392.30						
38		414.57	394.83								414.57	394.83						
39		419.90	399.90								419.90	399.90						
40		425.22	404.97								425.22	404.97						
41		433.21	412.58								433.21	412.58						
42		440.86	419.87								440.86	419.87						
43		451.51	430.01								451.51	430.01						
44		464.82	442.68								464.82	442.68						
45		480.45	457.57								480.45	457.57						
46		499.09	475.32								499.09	475.32						
47		520.05	495.28								520.05	495.28						
48		544.00	518.10								544.00	518.10						
49		567.63	540.60								567.63	540.60						
50		594.25	565.95								594.25	565.95						
51		620.53	590.98								620.53	590.98						
52		649.48	618.55								649.48	618.55						
53		678.76	646.44								678.76	646.44						
54		710.37	676.54								710.37	676.54						
55		741.97	706.64								741.97	706.64						
56		776.25	739.28								776.25	739.28						
57		810.85	772.24								810.85	772.24						
58		847.78	807.41								847.78	807.41						
59		866.08	824.84								866.08	824.84						
60		903.01	860.01								903.01	860.01						
61		934.95	890.43								934.95	890.43						
62		955.92	910.40								955.92	910.40						
63		982.20	935.43								982.20	935.43						
64 and over		998.16	950.64								998.16	950.64						

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

Plan Information

Plan Name: KP WA Bronze 6350/65 with Pediatric Dental
HIOS Plan ID: 23371WA1790002
Effective Date: 1/1/2022
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Bronze
Plan Type: Non-Standardized Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		216.64	206.32								216.64	206.32						
15		235.89	224.66								235.89	224.66						
16		243.26	231.67								243.26	231.67						
17		250.62	238.68								250.62	238.68						
18		258.55	246.24								258.55	246.24						
19		266.48	253.79								266.48	253.79						
20		274.69	261.61								274.69	261.61						
21		283.19	269.70								339.82	323.64						
22		283.19	269.70								339.82	323.64						
23		283.19	269.70								339.82	323.64						
24		283.19	269.70								339.82	323.64						
25		284.32	270.78								341.18	324.93						
26		289.98	276.17								347.98	331.41						
27		296.78	282.65								356.13	339.17						
28		307.82	293.16								369.39	351.80						
29		316.88	301.79								380.26	362.15						
30		321.41	306.11								385.70	367.33						
31		328.21	312.58								393.85	375.10						
32		335.01	319.06								402.01	382.87						
33		339.26	323.10								407.11	387.72						
34		343.79	327.42								412.54	392.90						
35		346.05	329.57								415.26	395.49						
36		348.32	331.73								417.98	398.08						
37		350.58	333.89								420.70	400.67						
38		352.85	336.05								423.42	403.26						
39		357.38	340.36								428.86	408.43						
40		361.91	344.68								434.29	413.61						
41		368.71	351.15								442.45	421.38						
42		375.22	357.35								450.26	428.82						
43		384.28	365.98								461.14	439.18						
44		395.61	376.77								474.73	452.13						
45		408.92	389.45								490.70	467.34						
46		424.78	404.55								509.73	485.46						
47		442.62	421.54								531.14	505.85						
48		463.01	440.96								555.61	529.15						
49		483.11	460.11								579.74	552.13						
50		505.77	481.68								606.92	578.02						
51		528.14	502.99								633.77	603.59						
52		552.78	526.45								663.33	631.75						
53		577.70	550.19								693.24	660.23						
54		604.60	575.81								725.52	690.97						
55		631.50	601.43								757.80	721.72						
56		660.67	629.21								792.80	755.05						
57		690.12	657.26								828.15	788.71						
58		721.56	687.20								865.87	824.63						
59		737.13	702.03								884.56	842.43						
60		768.56	731.97								922.28	878.36						
61		795.75	757.86								954.90	909.43						
62		813.59	774.85								976.31	929.82						
63		835.96	796.15								1003.15	955.39						
64 and over		849.56	809.10								1019.46	970.92						

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

Plan Information

Plan Name: KP WA Bronze 8550/75 with Pediatric Dental
HIOS Plan ID: 23371WA1790003
Effective Date: 1/1/2022
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Bronze
Plan Type: Non-Standardized Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		211.17	201.11								211.17	201.11						
15		229.94	218.99								229.94	218.99						
16		237.11	225.82								237.11	225.82						
17		244.29	232.66								244.29	232.66						
18		252.02	240.02								252.02	240.02						
19		259.75	247.38								259.75	247.38						
20		267.75	255.00								267.75	255.00						
21		276.03	262.89								331.24	315.47						
22		276.03	262.89								331.24	315.47						
23		276.03	262.89								331.24	315.47						
24		276.03	262.89								331.24	315.47						
25		277.14	263.94								332.57	316.73						
26		282.66	269.20								339.19	323.04						
27		289.28	275.51								347.14	330.61						
28		300.05	285.76								360.06	342.91						
29		308.88	294.17								370.66	353.01						
30		313.30	298.38								375.96	358.06						
31		319.92	304.69								383.91	365.63						
32		326.55	311.00								391.86	373.20						
33		330.69	314.94								396.83	377.93						
34		335.11	319.15								402.13	382.98						
35		337.31	321.25								404.78	385.50						
36		339.52	323.35								407.43	388.03						
37		341.73	325.46								410.08	390.55						
38		343.94	327.56								412.73	393.07						
39		348.36	331.77								418.03	398.12						
40		352.77	335.97								423.33	403.17						
41		359.40	342.28								431.28	410.74						
42		365.75	348.33								438.89	418.00						
43		374.58	356.74								449.49	428.09						
44		385.62	367.26								462.74	440.71						
45		398.59	379.61								478.31	455.54						
46		414.05	394.34								496.86	473.20						
47		431.44	410.90								517.73	493.08						
48		451.32	429.83								541.58	515.79						
49		470.91	448.49								565.10	538.19						
50		493.00	469.52								591.60	563.43						
51		514.80	490.29								617.77	588.35						
52		538.82	513.16								646.58	615.79						
53		563.11	536.30								675.73	643.55						
54		589.33	561.27								707.20	673.52						
55		615.56	586.24								738.67	703.49						
56		643.99	613.32								772.79	735.99						
57		672.70	640.66								807.24	768.80						
58		703.34	669.84								844.00	803.81						
59		718.52	684.30								862.22	821.16						
60		749.16	713.48								898.99	856.18						
61		775.66	738.72								930.79	886.47						
62		793.05	755.28								951.66	906.34						
63		814.85	776.05								977.82	931.26						
64 and over		828.09	788.67								993.72	946.40						

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

Plan Information

Plan Name: KP WA Bronze 6900/0% HSA with Pediatric Dental
HIOS Plan ID: 23371WA1790005
Effective Date: 1/1/2022
Market Type: Individual
Exchange Status: Outside the exchange
Metal Level: Bronze
Plan Type: Non-Standardized Plan

Plan Geographic Availability

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

Plan Rates

Age Band	Non-Smoker Rates									Smoker Rates								
	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8	Area 9
0-14		215.99	205.70								215.99	205.70						
15		235.18	223.99								235.18	223.99						
16		242.53	230.98								242.53	230.98						
17		249.87	237.97								249.87	237.97						
18		257.77	245.50								257.77	245.50						
19		265.68	253.03								265.68	253.03						
20		273.86	260.82								273.86	260.82						
21		282.33	268.89								338.80	322.67						
22		282.33	268.89								338.80	322.67						
23		282.33	268.89								338.80	322.67						
24		282.33	268.89								338.80	322.67						
25		283.46	269.97								340.16	323.96						
26		289.11	275.34								346.93	330.41						
27		295.89	281.80								355.06	338.16						
28		306.90	292.28								368.28	350.74						
29		315.93	300.89								379.12	361.07						
30		320.45	305.19								384.54	366.23						
31		327.23	311.64								392.67	373.97						
32		334.00	318.10								400.80	381.72						
33		338.24	322.13								405.88	386.56						
34		342.75	326.43								411.30	391.72						
35		345.01	328.58								414.02	394.30						
36		347.27	330.73								416.73	396.88						
37		349.53	332.89								419.44	399.46						
38		351.79	335.04								422.15	402.04						
39		356.31	339.34								427.57	407.21						
40		360.82	343.64								432.99	412.37						
41		367.60	350.09								441.12	420.11						
42		374.09	356.28								448.91	427.54						
43		383.13	364.88								459.75	437.86						
44		394.42	375.64								473.31	450.77						
45		407.69	388.28								489.23	465.93						
46		423.50	403.34								508.20	484.00						
47		441.29	420.28								529.55	504.33						
48		461.62	439.64								553.94	527.56						
49		481.66	458.73								578.00	550.47						
50		504.25	480.24								605.10	576.29						
51		526.55	501.48								631.86	601.78						
52		551.12	524.87								661.34	629.85						
53		575.96	548.54								691.15	658.24						
54		602.78	574.08								723.34	688.90						
55		629.61	599.62								755.53	719.55						
56		658.69	627.32								790.42	752.78						
57		688.05	655.28								825.66	786.34						
58		719.39	685.13								863.27	822.16						
59		734.92	699.92								881.90	839.90						
60		766.26	729.77								919.51	875.72						
61		793.36	755.58								952.03	906.70						
62		811.15	772.52								973.38	927.03						
63		833.45	793.76								1000.14	952.52						
64 and over		846.99	806.67								1016.40	968.00						