

**California Plain-Language Rate Filing Description**

Company Name: Kaiser Foundation Health Plan, Inc.  
 SERFF Tracking Number: KHPI-134234603

1) Actual Allowed Costs by Aggregate Benefit Category for the most recently completed calendar year in PMPM:

Service Category	Allowed Cost PMPM	Cost as % of Medicare
Hospital Inpatient	\$150.94	173.1%
Hospital Outpatient (including ER)	\$117.57	264.7%
Physician/Other Professional Services		
Laboratory (other than inpatient)		
Radiology (other than inpatient)		
Capitation (professional)	\$202.02	
Capitation (institutional)		
Capitation (other)		
Other (describe here)	\$13.25	
<b>Medical Services</b>	<b>\$483.78</b>	
Rx	\$52.41	
<b>Medical Services + Rx</b>	<b>\$536.19</b>	

2) Projected Annual Medical Services + Rx trend assumptions for all benefits

5.5%

3) Projected Medical Services + Rx Allowed Trend, by Aggregate Benefit Category, Attributable to Use of Services, Price Inflation, Fees and Risk

Service Category	Trend attributable to: Use of Services	Trend attributable to: Price Inflation	Trend attributable to: Fees and Risk	Overall Trend
Hospital Inpatient	0.0%	3.8%	0.0%	3.8%
Hospital Outpatient (including ER)	0.0%	3.7%	0.0%	3.7%
Physician/Other Professional Services	0.0%	0.0%	0.0%	0.0%
Laboratory (other than inpatient)	0.0%	0.0%	0.0%	0.0%
Radiology (other than inpatient)	0.0%	0.0%	0.0%	0.0%
Capitation (professional)	0.0%	6.1%	0.0%	6.1%
Capitation (institutional)	0.0%	0.0%	0.0%	0.0%
Capitation (other)	0.0%	0.0%	0.0%	0.0%
Other (describe here)	0.0%	5.8%	0.0%	5.8%
<b>Medical Services</b>	<b>0.0%</b>	<b>4.8%</b>	<b>0.0%</b>	<b>4.8%</b>
Rx	3.4%	9.2%	0.0%	12.9%
<b>Medical Services + Rx</b>	<b>1.3%</b>	<b>4.2%</b>	<b>0.0%</b>	<b>5.5%</b>

4) Other Information

Please provide any needed comments below