

**California Plain-Language Rate Filing Description**

Company Name: Kaiser Foundation Health Plan, Inc.  
 SERFF Tracking Number: KHPI-132515492

1) Actual Costs by Aggregate Benefit Category for experience period in PMPM:

	Dollar Cost:	Cost as a Percentage of Medicare:
Hospital Inpatient	\$135.91	280.0%
Hospital Outpatient (including ER)	\$94.84	286.4%
Physician/Other Professional Services		
Prescription Drug	\$42.79	N/A
Laboratory (other than inpatient)		
Radiology (other than inpatient)		
Capitation (professional)	\$149.50	N/A
Capitation (institutional)		
Capitation (other)		
Other (DME, Ambulance, Home Health)	\$12.25	N/A

2) Overall annual medical assumptions for all benefits

3.3%

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

	Trend attributable to: Use of Services	Trend attributable to: Price Inflation	Trend attributable to: Fees and Risk
Hospital Inpatient	-1.6%	0.5%	
Hospital Outpatient (including ER)	1.8%	1.0%	
Physician/Other Professional Services			
Prescription Drug	0.0%	5.0%	
Laboratory (other than inpatient)			
Radiology (other than inpatient)			
Capitation (professional)	1.9%	5.0%	
Capitation (institutional)			
Capitation (other)			
Other (DME, Ambulance, Home Health)	1.5%	-0.2%	

4) Other Information

**Place any needed comments here.**