

California Plain-Language Rate Filing Description

Company Name: Kaiser Foundation Health Plan, Inc.
 SERFF Tracking Number: KHPI-133800635

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	\$148.92	275.4%
Hospital Outpatient (including ER)	\$113.02	278.4%
Physician/Other Professional Services		
Laboratory (other than inpatient)		
Radiology (other than inpatient)		
Capitation (professional)	\$194.24	
Capitation (institutional)		
Capitation (other)		
Other (describe here)	\$11.86	
Medical Services	\$468.04	
Rx	\$49.00	
Medical Services + Rx	\$517.04	

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

8.3%

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	1.1%	7.4%	0.0%	8.6%
Hospital Outpatient (including ER)	3.3%	7.5%	0.0%	11.0%
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)	3.1%	3.2%	0.0%	6.4%
Capitation (institutional)	0.0%	0.0%	0.0%	0.0%
Capitation (other)	0.0%	0.0%	0.0%	0.0%
Other (describe here)	1.6%	6.0%	0.0%	7.7%
Medical Services	3.1%	5.1%	0.0%	8.3%
Rx	0.0%	8.6%	0.0%	8.6%
Medical Services + Rx	2.0%	6.2%	0.0%	8.3%

4) Other Information

Please provide any needed comments below