

COPAYMENT PLANS – RATES AT A GLANCE

The rate you pay for your coverage depends on the age of the oldest member of the family, where you live, and how many family members are enrolling.¹

Maryland

\$10/\$20 Copay Option Plan

Category Age	Single	Family of 2	Family of 3+
18–19	\$168	\$336	\$487
20–24	\$187	\$374	\$543
25–29	\$203	\$407	\$589
30–34	\$223	\$445	\$646
35–39	\$242	\$484	\$702
40–44	\$297	\$594	\$861
45–49	\$387	\$774	\$1,123
50–54	\$478	\$955	\$1,385
55–59	\$597	\$1,194	\$1,731
60–64	\$712	\$1,423	\$2,064
65+	\$744	\$1,489	\$2,158
65+ with Medicare ²	\$457	\$914	\$1,325

\$20/\$30 Copay Option Plan

Category Age	Single	Family of 2	Family of 3+
18–19	\$153	\$307	\$445
20–24	\$171	\$342	\$496
25–29	\$186	\$372	\$539
30–34	\$203	\$407	\$590
35–39	\$221	\$442	\$641
40–44	\$271	\$543	\$787
45–49	\$354	\$708	\$1,026
50–54	\$436	\$873	\$1,266
55–59	\$546	\$1,091	\$1,582
60–64	\$650	\$1,301	\$1,886
65+	\$680	\$1,361	\$1,973
65+ with Medicare ²	\$418	\$835	\$1,211

DEDUCTIBLE PLANS – RATES AT A GLANCE

The rate you pay for your coverage depends on the age of the oldest member of the family, where you live, and how many family members are enrolling.¹

Maryland

\$500 Deductible/20% Plan

Category Age	Single	Family of 2	Family of 3+
18–19	\$121	\$242	\$350
20–24	\$135	\$269	\$391
25–29	\$146	\$293	\$424
30–34	\$160	\$320	\$465
35–39	\$174	\$348	\$505
40–44	\$214	\$427	\$620
45–49	\$279	\$557	\$808
50–54	\$344	\$687	\$997
55–59	\$430	\$859	\$1,246
60–64	\$512	\$1,024	\$1,485
65+	\$536	\$1,071	\$1,554
65+ with Medicare ²	\$329	\$658	\$954

\$750 Deductible/20% Plan with Rx

Category Age	Single	Family of 2	Family of 3+
18–19	\$108	\$216	\$314
20–24	\$121	\$241	\$350
25–29	\$131	\$262	\$380
30–34	\$143	\$287	\$416
35–39	\$156	\$312	\$452
40–44	\$191	\$383	\$555
45–49	\$250	\$499	\$724
50–54	\$308	\$616	\$893
55–59	\$385	\$769	\$1,116
60–64	\$459	\$917	\$1,330
65+	\$480	\$959	\$1,391
65+ with Medicare ²	\$294	\$589	\$854

\$750 Deductible/20% Plan without Rx

Category Age	Single	Family of 2	Family of 3+
18–19	\$94	\$189	\$274
20–24	\$105	\$211	\$305
25–29	\$114	\$229	\$332
30–34	\$125	\$251	\$363
35–39	\$136	\$272	\$395
40–44	\$167	\$334	\$484
45–49	\$218	\$436	\$632
50–54	\$269	\$537	\$779
55–59	\$336	\$672	\$974
60–64	\$400	\$801	\$1,161
65+	\$419	\$837	\$1,214
65+ with Medicare ²	\$257	\$514	\$745

\$1,000 Deductible/30% Plan

Category Age	Single	Family of 2	Family of 3+
18–19	\$100	\$201	\$291
20–24	\$112	\$224	\$325
25–29	\$122	\$243	\$353
30–34	\$133	\$267	\$386
35–39	\$145	\$290	\$420
40–44	\$178	\$355	\$515
45–49	\$232	\$464	\$672
50–54	\$286	\$572	\$829
55–59	\$357	\$715	\$1,036
60–64	\$426	\$852	\$1,235
65+	\$446	\$891	\$1,292
65+ with Medicare ²	\$273	\$547	\$793

¹Rates are valid for Maryland subscribers. The rate of your coverage depends on the plan you choose, the age of the oldest family member, where you live, and how many members are enrolling. Offer is limited to persons who live in the coverage area. Rates are effective February 1, 2007, through January 31, 2008. Applicants are subject to medical review. For specific benefit information, see form *KFHP-NG (07) MD*.

²For Maryland residents only. Members with Medicare may enroll in an HSA-qualified plan; however, federal regulations prohibit persons with Medicare from opening a health savings account (HSA). Kaiser Permanente Individuals and Families plans are not available for Medicare-eligible residents of Virginia or Washington, DC.

HSA-QUALIFIED PLANS – RATES AT A GLANCE

The rate you pay for your coverage depends on the age of the oldest member of the family, where you live, and how many family members are enrolling.¹

Maryland

\$1,250 Deductible/20% Plan with HSA Option

Category Age	Single	Family of 2	Family of 3+
18-19	\$100	\$200	\$290
20-24	\$112	\$223	\$324
25-29	\$121	\$242	\$351
30-34	\$133	\$265	\$385
35-39	\$144	\$289	\$418
40-44	\$177	\$354	\$513
45-49	\$231	\$462	\$669
50-54	\$285	\$569	\$826
55-59	\$356	\$712	\$1,032
60-64	\$424	\$848	\$1,230
65+	\$444	\$887	\$1,287
65+ with Medicare ²	\$272	\$545	\$790

\$1,750 Deductible/30% Plan with HSA Option

Category Age	Single	Family of 2	Family of 3+
18-19	\$88	\$175	\$254
20-24	\$98	\$195	\$283
25-29	\$106	\$212	\$308
30-34	\$116	\$232	\$337
35-39	\$126	\$252	\$366
40-44	\$155	\$310	\$449
45-49	\$202	\$404	\$586
50-54	\$249	\$498	\$722
55-59	\$311	\$623	\$903
60-64	\$371	\$743	\$1,077
65+	\$388	\$777	\$1,126
65+ with Medicare ²	\$238	\$477	\$691

\$2,250 Deductible/30% Plan with HSA Option

Category Age	Single	Family of 2	Family of 3+
18-19	\$81	\$163	\$236
20-24	\$91	\$182	\$263
25-29	\$99	\$197	\$286
30-34	\$108	\$216	\$313
35-39	\$117	\$235	\$340
40-44	\$144	\$288	\$418
45-49	\$188	\$376	\$545
50-54	\$232	\$463	\$672
55-59	\$290	\$579	\$840
60-64	\$345	\$691	\$1,001
65+	\$361	\$722	\$1,047
65+ with Medicare ²	\$222	\$443	\$643

COPAYMENT PLANS – RATES AT A GLANCE

The rate you pay for your coverage depends on the age of the oldest member of the family, where you live, and how many family members are enrolling.¹

Virginia

\$10/\$20 Copay Option Plan

Category Age	Single	Family of 2	Family of 3+
18–19	\$153	\$306	\$444
20–24	\$171	\$341	\$495
25–29	\$185	\$371	\$537
30–34	\$203	\$406	\$589
35–39	\$221	\$441	\$640
40–44	\$271	\$541	\$785
45–49	\$353	\$706	\$1,024
50–54	\$435	\$871	\$1,262
55–59	\$544	\$1,088	\$1,578
60–64	\$691	\$1,383	\$2,005
65+	\$691	\$1,383	\$2,005

\$20/\$30 Copay Option Plan

Category Age	Single	Family of 2	Family of 3+
18–19	\$140	\$280	\$405
20–24	\$156	\$312	\$452
25–29	\$169	\$339	\$491
30–34	\$186	\$371	\$538
35–39	\$202	\$403	\$585
40–44	\$247	\$495	\$717
45–49	\$323	\$645	\$936
50–54	\$398	\$796	\$1,154
55–59	\$497	\$995	\$1,442
60–64	\$632	\$1,264	\$1,832
65+	\$632	\$1,264	\$1,832

DEDUCTIBLE PLANS – RATES AT A GLANCE

The rate you pay for your coverage depends on the age of the oldest member of the family, where you live, and how many family members are enrolling.¹

Virginia

\$500 Deductible/20% Plan

Category Age	Single	Family of 2	Family of 3+
18–19	\$129	\$258	\$373
20–24	\$144	\$287	\$417
25–29	\$156	\$312	\$452
30–34	\$171	\$342	\$496
35–39	\$186	\$371	\$539
40–44	\$228	\$456	\$661
45–49	\$297	\$594	\$862
50–54	\$366	\$733	\$1,063
55–59	\$458	\$916	\$1,329
60–64	\$582	\$1,164	\$1,688
65+	\$582	\$1,164	\$1,688

\$750 Deductible/20% Plan with Rx

Category Age	Single	Family of 2	Family of 3+
18–19	\$115	\$231	\$334
20–24	\$129	\$257	\$373
25–29	\$140	\$279	\$405
30–34	\$153	\$306	\$444
35–39	\$166	\$333	\$482
40–44	\$204	\$408	\$592
45–49	\$266	\$532	\$772
50–54	\$328	\$656	\$952
55–59	\$410	\$820	\$1,190
60–64	\$521	\$1,042	\$1,511
65+	\$521	\$1,042	\$1,511

\$750 Deductible/20% Plan without Rx

Category Age	Single	Family of 2	Family of 3+
18–19	\$101	\$201	\$292
20–24	\$112	\$225	\$326
25–29	\$122	\$244	\$354
30–34	\$134	\$267	\$387
35–39	\$145	\$290	\$421
40–44	\$178	\$356	\$516
45–49	\$232	\$465	\$674
50–54	\$286	\$573	\$831
55–59	\$358	\$716	\$1,038
60–64	\$455	\$910	\$1,319
65+	\$455	\$910	\$1,319

\$1,000 Deductible/30% Plan

Category Age	Single	Family of 2	Family of 3+
18–19	\$107	\$214	\$311
20–24	\$119	\$239	\$346
25–29	\$130	\$259	\$376
30–34	\$142	\$284	\$412
35–39	\$154	\$309	\$448
40–44	\$189	\$379	\$549
45–49	\$247	\$494	\$717
50–54	\$305	\$610	\$884
55–59	\$381	\$762	\$1,105
60–64	\$484	\$968	\$1,403
65+	\$484	\$968	\$1,403

¹Rates are valid for Virginia subscribers. The rate of your coverage depends on the plan you choose, the age of the oldest family member, where you live, and how many members are enrolling. Offer is limited to persons who live in the coverage area. Rates are effective February 1, 2007, through January 31, 2008. Applicants are subject to medical review. For specific benefit information, see form KFHP-NG (07) VA.

HSA-QUALIFIED PLANS – RATES AT A GLANCE

The rate you pay for your coverage depends on the age of the oldest member of the family, where you live, and how many family members are enrolling.¹

Virginia

\$1,250 Deductible/20% Plan with HSA Option

Category Age	Single	Family of 2	Family of 3+
18-19	\$107	\$213	\$309
20-24	\$119	\$238	\$345
25-29	\$129	\$258	\$375
30-34	\$142	\$283	\$410
35-39	\$154	\$308	\$446
40-44	\$189	\$377	\$547
45-49	\$246	\$492	\$714
50-54	\$304	\$607	\$880
55-59	\$379	\$759	\$1,100
60-64	\$482	\$964	\$1,398
65+	\$482	\$964	\$1,398

\$1,750 Deductible/30% Plan with HSA Option

Category Age	Single	Family of 2	Family of 3+
18-19	\$93	\$187	\$271
20-24	\$104	\$208	\$302
25-29	\$113	\$226	\$328
30-34	\$124	\$248	\$359
35-39	\$135	\$269	\$390
40-44	\$165	\$330	\$479
45-49	\$215	\$431	\$625
50-54	\$266	\$531	\$770
55-59	\$332	\$664	\$963
60-64	\$422	\$844	\$1,223
65+	\$422	\$844	\$1,223

\$2,250 Deductible/30% Plan with HSA Option

Category Age	Single	Family of 2	Family of 3+
18-19	\$87	\$174	\$252
20-24	\$97	\$194	\$281
25-29	\$105	\$210	\$305
30-34	\$115	\$230	\$334
35-39	\$125	\$250	\$363
40-44	\$154	\$307	\$445
45-49	\$200	\$401	\$581
50-54	\$247	\$494	\$716
55-59	\$309	\$618	\$896
60-64	\$392	\$785	\$1,138
65+	\$392	\$785	\$1,138

COPAYMENT PLANS – RATES AT A GLANCE

The rate you pay for your coverage depends on the age of the oldest member of the family, where you live, and how many family members are enrolling.¹

Washington, DC

\$10/\$20 Copay Option Plan

Category Age	Single	Family of 2	Family of 3+
18–19	\$157	\$314	\$455
20–24	\$175	\$350	\$507
25–29	\$190	\$380	\$551
30–34	\$208	\$416	\$604
35–39	\$226	\$453	\$656
40–44	\$278	\$555	\$805
45–49	\$362	\$724	\$1,050
50–54	\$447	\$893	\$1,295
55–59	\$558	\$1,116	\$1,619
60–64	\$709	\$1,418	\$2,056
65+	\$709	\$1,418	\$2,056

\$20/\$30 Copay Option Plan

Category Age	Single	Family of 2	Family of 3+
18–19	\$143	\$287	\$416
20–24	\$160	\$320	\$464
25–29	\$174	\$347	\$504
30–34	\$190	\$381	\$552
35–39	\$207	\$414	\$600
40–44	\$254	\$507	\$736
45–49	\$331	\$662	\$960
50–54	\$408	\$816	\$1,184
55–59	\$510	\$1,020	\$1,479
60–64	\$648	\$1,296	\$1,879
65+	\$648	\$1,296	\$1,879

DEDUCTIBLE PLANS – RATES AT A GLANCE

The rate you pay for your coverage depends on the age of the oldest member of the family, where you live, and how many family members are enrolling.¹

Washington, DC

\$500 Deductible/20% Plan

Category Age	Single	Family of 2	Family of 3+
18-19	\$132	\$264	\$383
20-24	\$147	\$295	\$427
25-29	\$160	\$320	\$464
30-34	\$175	\$351	\$508
35-39	\$190	\$381	\$552
40-44	\$234	\$467	\$678
45-49	\$305	\$610	\$884
50-54	\$376	\$752	\$1,090
55-59	\$470	\$940	\$1,363
60-64	\$597	\$1,194	\$1,731
65+	\$597	\$1,194	\$1,731

\$750 Deductible/20% Plan with Rx

Category Age	Single	Family of 2	Family of 3+
18-19	\$118	\$237	\$343
20-24	\$132	\$264	\$383
25-29	\$143	\$287	\$416
30-34	\$157	\$314	\$455
35-39	\$171	\$341	\$495
40-44	\$209	\$418	\$607
45-49	\$273	\$546	\$791
50-54	\$337	\$673	\$976
55-59	\$421	\$842	\$1,220
60-64	\$534	\$1,069	\$1,550
65+	\$534	\$1,069	\$1,550

\$750 Deductible/20% Plan without Rx

Category Age	Single	Family of 2	Family of 3+
18-19	\$103	\$206	\$299
20-24	\$115	\$230	\$334
25-29	\$125	\$250	\$363
30-34	\$137	\$274	\$397
35-39	\$149	\$298	\$432
40-44	\$183	\$365	\$530
45-49	\$238	\$476	\$691
50-54	\$294	\$588	\$852
55-59	\$367	\$735	\$1,065
60-64	\$467	\$933	\$1,353
65+	\$467	\$933	\$1,353

\$1,000 Deductible/30% Plan

Category Age	Single	Family of 2	Family of 3+
18-19	\$110	\$220	\$319
20-24	\$123	\$245	\$355
25-29	\$133	\$266	\$386
30-34	\$146	\$291	\$423
35-39	\$158	\$317	\$459
40-44	\$194	\$389	\$564
45-49	\$253	\$507	\$735
50-54	\$313	\$625	\$907
55-59	\$391	\$782	\$1,133
60-64	\$496	\$993	\$1,440
65+	\$496	\$993	\$1,440

¹Rates are valid for District of Columbia subscribers. The rate of your coverage depends on the plan you choose, the age of the oldest family member, where you live, and how many members are enrolling. Offer is limited to persons who live in the coverage area. Rates are effective February 1, 2007, through January 31, 2008. Applicants are subject to medical review. For specific benefit information, see form *KFHP-NG (07) DC*.

HSA-QUALIFIED PLANS – RATES AT A GLANCE

The rate you pay for your coverage depends on the age of the oldest member of the family, where you live, and how many family members are enrolling.¹

Washington, DC

\$1,250 Deductible/20% Plan with HSA Option

Category Age	Single	Family of 2	Family of 3+
18-19	\$109	\$219	\$317
20-24	\$122	\$244	\$354
25-29	\$133	\$265	\$384
30-34	\$145	\$290	\$421
35-39	\$158	\$316	\$458
40-44	\$194	\$387	\$561
45-49	\$252	\$505	\$732
50-54	\$311	\$623	\$903
55-59	\$389	\$778	\$1,129
60-64	\$494	\$989	\$1,434
65+	\$494	\$989	\$1,434

\$1,750 Deductible/30% Plan with HSA Option

Category Age	Single	Family of 2	Family of 3+
18-19	\$96	\$191	\$278
20-24	\$107	\$214	\$310
25-29	\$116	\$232	\$336
30-34	\$127	\$254	\$368
35-39	\$138	\$276	\$400
40-44	\$169	\$339	\$491
45-49	\$221	\$442	\$641
50-54	\$272	\$545	\$790
55-59	\$341	\$681	\$988
60-64	\$433	\$865	\$1,255
65+	\$433	\$865	\$1,255

\$2,250 Deductible/30% Plan with HSA Option

Category Age	Single	Family of 2	Family of 3+
18-19	\$89	\$178	\$258
20-24	\$99	\$199	\$288
25-29	\$108	\$216	\$313
30-34	\$118	\$236	\$343
35-39	\$128	\$257	\$372
40-44	\$158	\$315	\$457
45-49	\$205	\$411	\$596
50-54	\$253	\$507	\$735
55-59	\$317	\$633	\$919
60-64	\$402	\$805	\$1,167
65+	\$402	\$805	\$1,167