

Attachment B

KAISER PERMANENTE 2010 MEDICAL INSURANCE PREMIUMS

Twice-Monthly Premium Schedule

Effective January 1, 2010 through December 31, 2010

Twice monthly premiums include \$2.33 for Employee Assistance Plans

Active Employees

KAISER HMO LOW OPTION (Zip code based eligibility)	Medical Premium	County Contribution	Pre-Tax Employee Cost	After-Tax Employee
Employee Only	171.94	-171.94	0.00	
with 1 Dependent	324.59	-171.94	152.65	
with 2 or More Dependents	494.20	-171.94	322.26	
Employee + Domestic Partner	324.59	-171.94	0.00	152.65
with 1 Dependent	494.20	-171.94	152.65	169.61
with 2 or More Dependents	494.20	-171.94	322.26	
with 1 or More DP Dependents	494.20	-171.94		322.26
with 1 Dependent & 1 or More DP Dependents	494.20	-171.94	152.65	169.61

KAISER HMO HIGH OPTION (Zip code based eligibility)	Medical Premium	County Contribution	Pre-Tax Employee Cost	After-Tax Employee
Employee Only	178.58	-178.58	0.00	
with 1 Dependent	337.21	-178.58	158.63	
with 2 or More Dependents	513.45	-178.58	334.87	
Employee + Domestic Partner	337.21	-178.58	0.00	158.63
with 1 Dependent	513.45	-178.58	158.63	176.25
with 2 or More Dependents	513.45	-178.58	334.87	
with 1 or More DP Dependents	513.45	-178.58		334.87
with 1 Dependent & 1 or More DP Dependents	513.45	-178.58	158.63	176.25

KAISER PERMANENTE 2010 MEDICAL INSURANCE PREMIUMS - SOUTHERN CALIFORNIA

Monthly Premium Rates - Retiree rates

Effective January 1, 2010 through December 31, 2010

EARLY (UNDER 65) RETIREES

KAISER HMO LOW OPTION (Zip code based eligibility)	Medical Premium (monthly)
Single	454.95
with 1 Dependent	864.41
with 2 or More Dependents	1,319.36

KAISER HMO HIGH OPTION (Zip code based eligibility)	Medical Premium (monthly)
Single	484.01
with 1 Dependent	919.62
with 2 or More Dependents	1,403.64

RETIREES POST-65

KAISER HMO LOW OPTION (Zip code based eligibility)	Medical Premium (monthly)
Retiree w/ MC	144.48
Retiree w/o MC	454.95
Retiree + 1 Dep, both w/ MC	288.96
Retiree + 1 Dep, both w/o MC	864.41
Retiree w/o MC + 1 Dep, w/ MC	599.43
Retiree w/ MC + 1 Dep, w/o MC	553.94
Retiree + 2 Deps, all w/o MC	1,319.36
Retiree w/ MC + 2 Deps w/o MC	1,008.89

KAISER HMO HIGH OPTION (Zip code based eligibility)	Medical Premium (monthly)
Retiree w/ MC	155.60
Retiree w/o MC	484.01
Retiree + 1 Dep, both w/ MC	311.20
Retiree + 1 Dep, both w/o MC	919.62
Retiree w/o MC + 1 Dep, w/ MC	639.61
Retiree w/ MC + 1 Dep, w/o MC	591.21
Retiree + 2 Deps, all w/o MC	1,403.64
Retiree w/ MC + 2 Deps w/o MC	1,075.23

Attachment B

KAISER PERMANENTE 2010 MEDICAL INSURANCE PREMIUMS - NORTHERN CALIFORNIA

Monthly Premium Rates - Retiree rates

Effective January 1, 2010 through December 31, 2010

EARLY (UNDER 65) RETIREES

KAISER HMO LOW OPTION (Zip code based eligibility)	Medical Premium (monthly)
Single	454.95
with 1 Dependent	864.41
with 2 or More Dependents	1,319.36
KAISER HMO HIGH OPTION (Zip code based eligibility)	Medical Premium (monthly)
Single	484.01
with 1 Dependent	919.62
with 2 or More Dependents	1,403.64

RETIREES POST-65

KAISER HMO LOW OPTION (Zip code based eligibility)	Medical Premium (monthly)
Retiree w/ MC	261.04
Retiree w/o MC	454.95
Retiree + 1 Dep, both w/ MC	522.08
Retiree + 1 Dep, both w/o MC	864.41
Retiree w/o MC + 1 Dep, w/ MC	715.99
Retiree w/ MC + 1 Dep, w/o MC	670.50
Retiree + 2 Deps, all w/o MC	1,319.36
Retiree w/ MC + 2 Deps w/o MC	1,125.45
KAISER HMO HIGH OPTION (Zip code based eligibility)	Medical Premium (monthly)
Retiree w/ MC	290.66
Retiree w/o MC	484.01
Retiree + 1 Dep, both w/ MC	581.32
Retiree + 1 Dep, both w/o MC	919.62
Retiree w/o MC + 1 Dep, w/ MC	774.67
Retiree w/ MC + 1 Dep, w/o MC	726.27
Retiree + 2 Deps, all w/o MC	1,403.64
Retiree w/ MC + 2 Deps w/o MC	1,210.28