

**California Plain-Language Rate Filing Description**

Company Name: Kaiser Foundation Health Plan, Inc.  
 SERFF Tracking Number: KHPI-133737326

1) Justification for any unreasonable rate increases  
*(Include all information as to why the rate increase is justified. Attach supporting documentation.)*

2) 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	\$159.13	276.5%
Hospital Outpatient (including ER)	\$113.26	279.8%
Prescription Drug	\$0.00	
Laboratory (other than inpatient)	\$0.00	
Radiology (other than inpatient)	\$0.00	
Capitation (professional)	\$113.25	
Capitation (institutional)	\$0.00	
Capitation (other)	\$73.06	
Other (describe here)	\$12.24	
<b>Medical Services</b>	<b>\$470.95</b>	
Rx	\$50.65	
<b>Medical Services + Rx</b>	<b>\$521.60</b>	

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

5.6%

4) 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	0.5%	4.6%	0.0%	5.2%
Hospital Outpatient (including ER)	2.6%	4.5%	0.0%	7.3%
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)	2.3%	2.5%	0.0%	4.8%
Capitation (institutional)	0.0%	0.0%	0.0%	0.0%
Capitation (other)	1.5%	2.4%	0.0%	3.9%
Other (describe here)	1.4%	1.9%	0.0%	3.3%
<b>Medical Services</b>	<b>2.0%</b>	<b>3.3%</b>	<b>0.0%</b>	<b>5.3%</b>
Rx	2.0%	5.5%	0.0%	7.6%
<b>Medical Services + Rx</b>	<b>2.0%</b>	<b>3.5%</b>	<b>0.0%</b>	<b>5.6%</b>

5) Other Information

Please provide any needed comments below