

Rate Guide

CHOICE MADE SIMPLE

New and renewing business, effective October 1, 2023 through December 31, 2023

Small Business Group



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How to receive a quote

Rates displayed are for Affordable Care Act (ACA)-compliant plans.

If you would like to receive a formal quote from Health Net of California, Inc. (Health Net) Small Business Plans, please contact your authorized Health Net broker or Health Net account executive at 800-447-8812, option 1.

For quotes for renewing groups or groups on grandfathered plans, please contact Account Management at 800-447-8812, option 2.

Rates subject to change. Rates cannot be changed based on prior claims experience. For Grandfathered Plan Rating Regions, please see page 101.

Medical Rating Regions

New and renewing business, effective October 1, 2023 through December 31, 2023

Region	County
1	Alpine, Amador, Butte, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Mendocino, Modoc, Nevada, Plumas, Shasta, Sierra, Siskiyou, Sutter, Tehama, Trinity, Tuolumne, and Yuba
2	Marin, Napa, Solano, and Sonoma
3	El Dorado, Placer, Sacramento, and Yolo
4	San Francisco
5	Contra Costa
6	Alameda
7	Santa Clara
8	San Mateo
9	Monterey, San Benito and Santa Cruz
10	Mariposa, Merced, San Joaquin, Stanislaus, and Tulare
11	Fresno, Kings and Madera
12	San Luis Obispo, Santa Barbara and Ventura
13	Imperial, Inyo and Mono
14	Kern
15	Los Angeles. ZIP codes starting with 906–912, 915, 917–918, and 935
16	Los Angeles. ZIP codes not included in region 15
17	Riverside and San Bernardino
18	Orange
19	San Diego

Note: Not all ZIP codes may be available within these counties. Please contact your Health Net sales associate for confirmation.

Dental Rating Regions by Area

DENTAL HMO

Health Net Dental HMO plans are not available in Alpine, Amador, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Inyo, Lake, Lassen, Mariposa, Mendocino, Modoc, Mono, Nevada, Plumas, San Benito, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yuba counties.

These are the rating regions by ZIP codes for the PPO plans.

PPO rating area by ZIP codes

Area 1 contains the ZIP codes starting with 900–904 and 945–948.

Area 2 contains the ZIP codes starting with 905–930.

Area 3 contains the ZIP codes starting with 931, 940–941 and 943–944.

Area 4 contains the ZIP codes starting with 932–933 and 935–938.

Area 5 contains the ZIP codes starting with 934, 939 and 954–961.

Area 6 contains the ZIP codes starting with 942.

Area 7 contains the ZIP codes starting with 949–951.

Area 8 contains the ZIP codes starting with 952–953.

Note: Area is determined by the group's home-office ZIP code. Rates apply to new dental groups with an effective date of July 1, 2023.





Enhanced Choice Package

Health Net's Enhanced Choice offers small business groups a simplified package offering access to all plans.

- ✓ Full Network HMO
- ✓ Salud HMO y Más
- ✓ WholeCare HMO
- ✓ CommunityCare HMO
- ✓ SmartCare HMO
- ✓ Full Network PPO



Find your rate

Finding the rate that applies to you is easy:

- 1 Find the chart for your region on the following pages;
- 2 Select your age; then
- 3 Select a plan.

Premium payment options

- Online billing
- Monthly billing



Calculate your rate

The medical premium rate for a family is calculated using the sum of premiums for each family member age 21 or older and for no more than the three oldest covered children who are under age 21.

For the purpose of rating, the member's age is determined at the time a policy is issued or renewed.

PPO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 1

Alpine, Amador, Butte, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Mendocino, Modoc, Nevada, Plumas, Shasta, Sierra, Siskiyou, Sutter, Tehama, Trinity, Tuolumne, and Yuba counties

Age	Platinum PPO 0/15	Platinum PPO 250/15	Gold PPO 350/25	Gold PPO 0/35	Gold PPO 500/20	Gold PPO 1000/35	Gold PPO 1600/0	Gold PPO 750/15	Silver PPO 2500/55	Silver PPO 2250/60	Silver HDHP PPO 1500/50%	Silver PPO 1700/50	Bronze PPO 6300/65	Bronze HDHP PPO 7000/0%
0-14	458.79	449.02	394.25	389.64	388.42	376.17	373.40	355.80	325.48	324.77	316.82	315.04	310.83	308.15
15	499.57	488.94	429.30	424.27	422.95	409.61	406.59	387.43	354.41	353.64	344.98	343.04	338.46	335.54
16	515.16	504.20	442.70	437.51	436.15	422.39	419.28	399.52	365.47	364.67	355.75	353.75	349.03	346.01
17	530.75	519.46	456.10	450.76	449.35	435.18	431.97	411.61	376.53	375.71	366.51	364.45	359.59	356.48
18	547.54	535.89	470.53	465.02	463.57	448.94	445.64	424.64	388.45	387.60	378.11	375.98	370.97	367.76
19	564.34	552.33	484.96	479.28	477.78	462.71	459.30	437.66	400.36	399.48	389.71	387.51	382.35	379.04
20	581.73	569.35	499.90	494.05	492.51	476.97	473.46	451.15	412.70	411.80	401.72	399.46	394.13	390.72
21	599.72	586.96	515.36	509.33	507.74	491.72	488.10	465.10	425.46	424.53	414.14	411.81	406.32	402.80
22	599.72	586.96	515.36	509.33	507.74	491.72	488.10	465.10	425.46	424.53	414.14	411.81	406.32	402.80
23	599.72	586.96	515.36	509.33	507.74	491.72	488.10	465.10	425.46	424.53	414.14	411.81	406.32	402.80



PPO

NEW AND RENEWING BUSINESS,
EFFECTIVE OCTOBER 1, 2023 THROUGH DECEMBER 31, 2023

PPO
PLAN RATES

PPO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 2

Marin, Napa, Solano, and Sonoma counties

Age	Platinum PPO 0/15	Platinum PPO 250/15	Gold PPO 350/25	Gold PPO 0/35	Gold PPO 500/20	Gold PPO 1000/35	Gold PPO 1600/0	Gold PPO 750/15	Silver PPO 2500/55	Silver PPO 2250/60	Silver HDHP PPO 1500/50%	Silver PPO 1700/50	Bronze PPO 6300/65	Bronze HDHP PPO 7000/0%
0-14	512.63	501.72	440.52	435.37	434.01	420.32	417.22	397.56	363.68	362.88	354.00	352.01	347.32	344.31
15	558.20	546.32	479.68	474.06	472.59	457.68	454.31	432.90	396.00	395.14	385.47	383.30	378.19	374.92
16	575.62	563.37	494.65	488.86	487.34	471.96	468.49	446.41	408.37	407.47	397.50	395.26	389.99	386.62
17	593.04	580.43	509.62	503.66	502.09	486.25	482.67	459.92	420.73	419.81	409.53	407.23	401.80	398.32
18	611.81	598.79	525.75	519.59	517.97	501.63	497.94	474.47	434.04	433.09	422.49	420.11	414.51	410.92
19	630.57	617.15	541.87	535.53	533.86	517.02	513.21	489.02	447.35	446.37	435.44	432.99	427.22	423.52
20	650.00	636.17	558.57	552.03	550.31	532.95	529.03	504.09	461.13	460.13	448.86	446.34	440.39	436.58
21	670.11	655.85	575.85	569.11	567.33	549.44	545.39	519.68	475.40	474.36	462.74	460.14	454.01	450.08
22	670.11	655.85	575.85	569.11	567.33	549.44	545.39	519.68	475.40	474.36	462.74	460.14	454.01	450.08
23	670.11	655.85	575.85	569.11	567.33	549.44	545.39	519.68	475.40	474.36	462.74	460.14	454.01	450.08
24	670.11	655.85	575.85	569.11	567.33	549.44	545.39	519.68	475.40	474.36	462.74	460.14	454.01	450.08
25	672.79	658.47	578.15	571.38	569.60	551.63	547.57	521.76	477.30	476.25	464.60	461.98	455.82	451.88
26	686.19	671.59	589.67	582.76	580.95	562.62	558.48	532.16	486.81	485.74	473.85	471.19	464.90	460.88
27	702.27	687.33	603.49	596.42	594.56	575.81	571.57	544.63	498.21	497.13	484.96	482.23	475.80	471.68
28	728.40	712.91	625.95	618.62	616.69	597.24	592.84	564.90	516.76	515.63	503.00	500.17	493.51	489.24
29	749.85	733.89	644.37	636.83	634.84	614.82	610.29	581.53	531.97	530.81	517.81	514.90	508.03	503.64
30	760.57	744.39	653.59	645.93	643.92	623.61	619.02	589.84	539.57	538.39	525.22	522.26	515.30	510.84
31	776.65	760.13	667.41	659.59	657.53	636.80	632.11	602.31	550.98	549.78	536.32	533.30	526.19	521.64
32	792.73	775.87	681.23	673.25	671.15	649.98	645.19	614.79	562.39	561.16	547.43	544.35	537.09	532.44
33	802.79	785.71	689.86	681.79	679.66	658.22	653.38	622.58	569.52	568.28	554.37	551.25	543.90	539.19
34	813.51	796.20	699.08	690.89	688.74	667.01	662.10	630.90	577.13	575.87	561.77	558.61	551.16	546.40
35	818.87	801.45	703.69	695.45	693.28	671.41	666.46	635.05	580.93	579.66	565.47	562.29	554.80	550.00
36	824.23	806.69	708.29	700.00	697.82	675.81	670.83	639.21	584.74	583.46	569.18	565.97	558.43	553.60
37	829.59	811.94	712.90	704.55	702.35	680.20	675.19	643.37	588.54	587.25	572.88	569.66	562.06	557.20
38	834.95	817.19	717.51	709.11	706.89	684.60	679.55	647.53	592.34	591.05	576.58	573.34	565.69	560.80
39	845.67	827.68	726.72	718.21	715.97	693.39	688.28	655.84	599.95	598.64	583.98	580.70	572.96	568.00
40	856.39	838.17	735.93	727.32	725.05	702.18	697.01	664.16	607.56	606.23	591.39	588.06	580.22	575.20
41	872.48	853.91	749.75	740.98	738.66	715.36	710.10	676.63	618.97	617.61	602.49	599.11	591.12	586.00
42	887.89	869.00	763.00	754.06	751.71	728.00	722.64	688.58	629.90	628.52	613.14	609.69	601.56	596.36
43	909.33	889.99	781.42	772.28	769.87	745.58	740.09	705.21	645.11	643.70	627.94	624.41	616.09	610.76
44	936.14	916.22	804.46	795.04	792.56	767.56	761.91	726.00	664.13	662.68	646.45	642.82	634.25	628.76
45	967.63	947.04	831.52	821.79	819.22	793.38	787.54	750.42	686.47	684.97	668.20	664.45	655.59	649.91
46	1,005.16	983.77	863.77	853.66	850.99	824.15	818.08	779.53	713.09	711.53	694.12	690.21	681.01	675.12
47	1,047.37	1,025.09	900.05	889.51	886.74	858.77	852.44	812.27	743.04	741.42	723.27	719.20	709.61	703.47
48	1,095.62	1,072.31	941.51	930.49	927.58	898.33	891.71	849.68	777.27	775.57	756.59	752.33	742.30	735.88
49	1,143.20	1,118.88	982.40	970.89	967.86	937.34	930.43	886.58	811.03	809.25	789.44	785.00	774.54	767.84
50	1,196.81	1,171.34	1,028.46	1,016.42	1,013.25	981.29	974.06	928.16	849.06	847.20	826.46	821.81	810.86	803.84
51	1,249.75	1,223.16	1,073.95	1,061.38	1,058.07	1,024.70	1,017.15	969.21	886.61	884.68	863.02	858.17	846.72	839.40
52	1,308.05	1,280.22	1,124.05	1,110.89	1,107.43	1,072.50	1,064.60	1,014.42	927.97	925.94	903.28	898.20	886.22	878.55
53	1,367.02	1,337.93	1,174.73	1,160.98	1,157.35	1,120.85	1,112.59	1,060.16	969.81	967.69	944.00	938.69	926.17	918.16
54	1,430.68	1,400.24	1,229.43	1,215.04	1,211.25	1,173.04	1,164.40	1,109.53	1,014.97	1,012.75	987.96	982.40	969.31	960.92
55	1,494.34	1,462.54	1,284.14	1,269.11	1,265.14	1,225.24	1,216.22	1,158.90	1,060.13	1,057.82	1,031.92	1,026.12	1,012.44	1,003.68
56	1,563.36	1,530.09	1,343.45	1,327.72	1,323.58	1,281.83	1,272.39	1,212.42	1,109.10	1,106.67	1,079.58	1,073.51	1,059.20	1,050.03
57	1,633.05	1,598.30	1,403.34	1,386.91	1,382.58	1,338.97	1,329.11	1,266.47	1,158.54	1,156.01	1,127.71	1,121.37	1,106.42	1,096.84
58	1,707.43	1,671.10	1,467.26	1,450.08	1,445.56	1,399.96	1,389.65	1,324.16	1,211.31	1,208.66	1,179.07	1,172.44	1,156.81	1,146.80
59	1,744.28	1,707.17	1,498.93	1,481.38	1,476.76	1,430.18	1,419.65	1,352.74	1,237.46	1,234.75	1,204.52	1,197.75	1,181.78	1,171.56
60	1,818.67	1,779.97	1,562.85	1,544.55	1,539.73	1,491.17	1,480.18	1,410.42	1,290.22	1,287.40	1,255.89	1,248.83	1,232.18	1,221.52
61	1,883.00	1,842.93	1,618.13	1,599.19	1,594.20	1,543.91	1,532.54	1,460.31	1,335.86	1,332.94	1,300.31	1,293.00	1,275.76	1,264.72
62	1,925.21	1,884.25	1,654.41	1,635.04	1,629.94	1,578.53	1,566.90	1,493.05	1,365.81	1,362.83	1,329.47	1,321.99	1,304.36	1,293.08
63	1,978.15	1,936.06	1,699.90	1,680.00	1,674.76	1,621.93	1,609.99	1,534.11	1,403.37	1,400.30	1,366.02	1,358.34	1,340.23	1,328.63
64+	2,010.33	1,967.55	1,727.55	1,707.33	1,701.99	1,648.32	1,636.17	1,559.04	1,426.20	1,423.08	1,388.22	1,380.42	1,362.03	1,350.24

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business PPO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all PPO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

PPO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

4

San Francisco County

Age	Platinum PPO 0/15	Platinum PPO 250/15	Gold PPO 350/25	Gold PPO 0/35	Gold PPO 500/20	Gold PPO 1000/35	Gold PPO 1600/0	Gold PPO 750/15	Silver PPO 2500/55	Silver PPO 2250/60	Silver HDHP PPO 1500/50%	Silver PPO 1700/50	Bronze PPO 6300/65	Bronze HDHP PPO 7000/0%
0-14	548.75	537.07	471.56	466.04	464.58	449.93	446.62	425.57	389.30	388.45	378.94	376.81	371.79	368.57
15	597.53	584.81	513.48	507.47	505.88	489.93	486.32	463.40	423.91	422.98	412.62	410.30	404.83	401.33
16	616.18	603.07	529.50	523.30	521.67	505.22	501.50	477.86	437.14	436.18	425.50	423.11	417.47	413.86
17	634.83	621.32	545.53	539.14	537.46	520.51	516.67	492.32	450.37	449.38	438.38	435.92	430.10	426.38
18	654.91	640.98	562.79	556.20	554.47	536.98	533.02	507.90	464.62	463.60	452.25	449.71	443.71	439.87
19	675.00	660.63	580.05	573.26	571.47	553.44	549.37	523.48	478.87	477.82	466.12	463.50	457.32	453.36
20	695.80	680.99	597.93	590.93	589.08	570.50	566.30	539.61	493.62	492.54	480.49	477.78	471.41	467.34
21	717.32	702.06	616.42	609.20	607.30	588.15	583.81	556.30	508.89	507.78	495.35	492.56	485.99	481.79
22	717.32	702.06	616.42	609.20	607.30	588.15	583.81	556.30	508.89	507.78	495.35	492.56	485.99	481.79
23	717.32	702.06	616.42	609.20	607.30	588.15	583.81	556.30	508.89	507.78	495.35	492.56	485.99	481.79
24	717.32	702.06	616.42	609.20	607.30	588.15	583.81	556.30	508.89	507.78	495.35	492.56	485.99	481.79
25	720.19	704.86	618.88	611.64	609.73	590.50	586.15	558.52	510.93	509.81	497.33	494.53	487.94	483.72
26	734.53	718.90	631.21	623.82	621.88	602.26	597.82	569.65	521.10	519.96	507.24	504.38	497.66	493.35
27	751.75	735.75	646.01	638.44	636.45	616.38	611.84	583.00	533.32	532.15	519.12	516.20	509.32	504.92
28	779.72	763.13	670.05	662.20	660.14	639.31	634.61	604.70	553.16	551.95	538.44	535.41	528.28	523.71
29	802.68	785.60	689.77	681.70	679.57	658.13	653.29	622.50	569.45	568.20	554.29	551.18	543.83	539.12
30	814.16	796.83	699.63	691.44	689.29	667.55	662.63	631.40	577.59	576.33	562.22	559.06	551.60	546.83
31	831.37	813.68	714.43	706.06	703.86	681.66	676.64	644.75	589.80	588.51	574.11	570.88	563.27	558.39
32	848.59	830.53	729.22	720.69	718.44	695.78	690.65	658.10	602.02	600.70	586.00	582.70	574.93	569.96
33	859.35	841.06	738.47	729.82	727.55	704.60	699.41	666.45	609.65	608.32	593.43	590.09	582.22	577.18
34	870.82	852.30	748.33	739.57	737.26	714.01	708.75	675.35	617.79	616.44	601.35	597.97	590.00	584.89
35	876.56	857.91	753.26	744.44	742.12	718.71	713.42	679.80	621.86	620.50	605.31	601.91	593.88	588.75
36	882.30	863.53	758.19	749.32	746.98	723.42	718.09	684.25	625.93	624.57	609.28	605.85	597.77	592.60
37	888.04	869.14	763.13	754.19	751.84	728.12	722.76	688.70	630.01	628.63	613.24	609.79	601.66	596.46
38	893.78	874.76	768.06	759.07	756.70	732.83	727.43	693.15	634.08	632.69	617.20	613.73	605.55	600.31
39	905.25	885.99	777.92	768.81	766.41	742.24	736.77	702.05	642.22	640.81	625.13	621.61	613.32	608.02
40	916.73	897.23	787.78	778.56	776.13	751.65	746.11	710.95	650.36	648.94	633.05	629.49	621.10	615.73
41	933.95	914.08	802.58	793.18	790.71	765.77	760.13	724.30	662.57	661.13	644.94	641.31	632.76	627.29
42	950.45	930.22	816.75	807.19	804.67	779.29	773.55	737.10	674.28	672.80	656.33	652.64	643.94	638.37
43	973.40	952.69	836.48	826.69	824.11	798.11	792.23	754.90	690.56	689.05	672.19	668.41	659.49	653.79
44	1,002.09	980.77	861.14	851.05	848.40	821.64	815.59	777.15	710.92	709.36	692.00	688.11	678.93	673.06
45	1,035.81	1,013.77	890.11	879.69	876.94	849.28	843.03	803.30	734.84	733.23	715.28	711.26	701.78	695.70
46	1,075.98	1,053.08	924.63	913.80	910.95	882.22	875.72	834.45	763.33	761.67	743.02	738.84	728.99	722.68
47	1,121.17	1,097.31	963.46	952.18	949.21	919.27	912.50	869.50	795.39	793.66	774.23	769.87	759.61	753.04
48	1,172.81	1,147.86	1,007.84	996.04	992.94	961.62	954.53	909.55	832.03	830.22	809.89	805.34	794.60	787.73
49	1,223.74	1,197.71	1,051.61	1,039.30	1,036.05	1,003.38	995.99	949.05	868.17	866.27	845.06	840.31	829.11	821.93
50	1,281.13	1,253.87	1,100.92	1,088.03	1,084.64	1,050.43	1,042.69	993.55	908.88	906.89	884.69	879.71	867.99	860.48
51	1,337.80	1,309.33	1,149.62	1,136.16	1,132.62	1,096.89	1,088.81	1,037.50	949.08	947.00	923.82	918.63	906.38	898.54
52	1,400.20	1,370.41	1,203.25	1,189.16	1,185.45	1,148.06	1,139.60	1,085.90	993.35	991.18	966.92	961.48	948.66	940.45
53	1,463.33	1,432.19	1,257.49	1,242.77	1,238.89	1,199.82	1,190.98	1,134.85	1,038.13	1,035.87	1,010.51	1,004.83	991.43	982.85
54	1,531.47	1,498.89	1,316.05	1,300.65	1,296.59	1,255.69	1,246.44	1,187.70	1,086.48	1,084.10	1,057.57	1,051.62	1,037.60	1,028.62
55	1,599.62	1,565.58	1,374.61	1,358.52	1,354.28	1,311.56	1,301.90	1,240.55	1,134.82	1,132.34	1,104.62	1,098.41	1,083.77	1,074.39
56	1,673.50	1,637.90	1,438.10	1,421.27	1,416.83	1,372.14	1,362.04	1,297.85	1,187.24	1,184.64	1,155.64	1,149.15	1,133.82	1,124.01
57	1,748.10	1,710.91	1,502.21	1,484.62	1,479.99	1,433.31	1,422.75	1,355.70	1,240.16	1,237.45	1,207.16	1,200.37	1,184.37	1,174.12
58	1,827.73	1,788.84	1,570.63	1,552.25	1,547.40	1,498.59	1,487.56	1,417.45	1,296.65	1,293.82	1,262.14	1,255.05	1,238.31	1,227.60
59	1,867.18	1,827.45	1,604.54	1,585.75	1,580.80	1,530.94	1,519.67	1,448.05	1,324.64	1,321.74	1,289.39	1,282.14	1,265.04	1,254.10
60	1,946.80	1,905.38	1,672.96	1,653.37	1,648.21	1,596.23	1,584.47	1,509.80	1,381.13	1,378.11	1,344.37	1,336.81	1,318.99	1,307.58
61	2,015.66	1,972.78	1,732.14	1,711.86	1,706.51	1,652.69	1,640.52	1,563.20	1,429.98	1,426.85	1,391.93	1,384.10	1,365.64	1,353.83
62	2,060.85	2,017.01	1,770.97	1,750.24	1,744.77	1,689.74	1,677.30	1,598.25	1,462.04	1,458.84	1,423.13	1,415.13	1,396.26	1,384.18
63	2,117.52	2,072.47	1,819.67	1,798.36	1,792.75	1,736.21	1,723.42	1,642.19	1,502.24	1,498.96	1,462.26	1,454.04	1,434.65	1,422.24
64+	2,151.96	2,106.18	1,849.26	1,827.60	1,821.90	1,764.45	1,751.43	1,668.90	1,526.67	1,523.34	1,486.05	1,477.68	1,457.97	1,445.37

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business PPO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all PPO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

PPO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 5

Contra Costa County

Age	Platinum PPO 0/15	Platinum PPO 250/15	Gold PPO 350/25	Gold PPO 0/35	Gold PPO 500/20	Gold PPO 1000/35	Gold PPO 1600/0	Gold PPO 750/15	Silver PPO 2500/55	Silver PPO 2250/60	Silver HDHP PPO 1500/50%	Silver PPO 1700/50	Bronze PPO 6300/65	Bronze HDHP PPO 7000/0%
0-14	502.55	491.85	431.86	426.80	425.47	412.05	409.01	389.74	356.52	355.74	347.03	345.08	340.48	337.54
15	547.22	535.57	470.24	464.74	463.29	448.68	445.37	424.38	388.21	387.36	377.88	375.76	370.75	367.54
16	564.30	552.29	484.92	479.24	477.75	462.68	459.27	437.63	400.33	399.46	389.68	387.49	382.32	379.01
17	581.38	569.01	499.60	493.75	492.21	476.68	473.17	450.87	412.45	411.55	401.47	399.21	393.89	390.48
18	599.77	587.01	515.40	509.37	507.78	491.77	488.14	465.14	425.50	424.57	414.17	411.84	406.35	402.84
19	618.16	605.01	531.21	524.99	523.35	506.85	503.11	479.40	438.55	437.59	426.88	424.47	418.82	415.19
20	637.21	623.66	547.58	541.17	539.48	522.47	518.62	494.18	452.06	451.07	440.03	437.56	431.72	427.99
21	656.92	642.94	564.52	557.91	556.17	538.63	534.66	509.46	466.04	465.02	453.64	451.09	445.07	441.22
22	656.92	642.94	564.52	557.91	556.17	538.63	534.66	509.46	466.04	465.02	453.64	451.09	445.07	441.22
23	656.92	642.94	564.52	557.91	556.17	538.63	534.66	509.46	466.04	465.02	453.64	451.09	445.07	441.22
24	656.92	642.94	564.52	557.91	556.17	538.63	534.66	509.46	466.04	465.02	453.64	451.09	445.07	441.22
25	659.55	645.52	566.78	560.14	558.39	540.78	536.80	511.50	467.91	466.88	455.46	452.89	446.86	442.99
26	672.69	658.38	578.07	571.30	569.52	551.55	547.49	521.69	477.23	476.18	464.53	461.92	455.76	451.81
27	688.45	673.81	591.61	584.69	582.86	564.48	560.32	533.91	488.41	487.35	475.42	472.74	466.44	462.40
28	714.07	698.88	613.63	606.45	604.55	585.49	581.17	553.78	506.59	505.48	493.11	490.33	483.80	479.61
29	735.10	719.46	631.70	624.30	622.35	602.72	598.28	570.09	521.50	520.36	507.62	504.77	498.04	493.73
30	745.61	729.74	640.73	633.23	631.25	611.34	606.84	578.24	528.96	527.80	514.88	511.99	505.16	500.79
31	761.37	745.17	654.28	646.62	644.60	624.27	619.67	590.46	540.14	538.96	525.77	522.81	515.84	511.38
32	777.14	760.60	667.82	660.01	657.95	637.19	632.50	602.69	551.33	550.12	536.66	533.64	526.52	521.97
33	786.99	770.25	676.29	668.37	666.29	645.27	640.52	610.33	558.32	557.10	543.46	540.40	533.20	528.59
34	797.50	780.53	685.32	677.30	675.19	653.89	649.08	618.48	565.78	564.54	550.72	547.62	540.32	535.65
35	802.76	785.68	689.84	681.76	679.64	658.20	653.35	622.56	569.50	568.26	554.35	551.23	543.88	539.18
36	808.01	790.82	694.36	686.23	684.09	662.51	657.63	626.64	573.23	571.98	557.98	554.84	547.44	542.71
37	813.27	795.97	698.87	690.69	688.54	666.82	661.91	630.71	576.96	575.70	561.61	558.45	551.00	546.24
38	818.52	801.11	703.39	695.15	692.98	671.13	666.18	634.79	580.69	579.42	565.24	562.06	554.56	549.77
39	829.04	811.40	712.42	704.08	701.88	679.75	674.74	642.94	588.15	586.86	572.49	569.27	561.68	556.83
40	839.55	821.68	721.45	713.01	710.78	688.36	683.29	651.09	595.60	594.30	579.75	576.49	568.81	563.88
41	855.31	837.11	735.00	726.40	724.13	701.29	696.13	663.32	606.79	605.46	590.64	587.32	579.49	574.47
42	870.42	851.90	747.99	739.23	736.92	713.68	708.42	675.03	617.51	616.16	601.07	597.69	589.72	584.62
43	891.44	872.48	766.05	757.08	754.72	730.91	725.53	691.34	632.42	631.04	615.59	612.13	603.97	598.74
44	917.72	898.19	788.63	779.40	776.97	752.46	746.92	711.72	651.06	649.64	633.74	630.17	621.77	616.39
45	948.59	928.41	815.16	805.62	803.11	777.78	772.05	735.66	672.97	671.49	655.06	651.37	642.69	637.13
46	985.38	964.42	846.78	836.86	834.25	807.94	801.99	764.19	699.06	697.54	680.46	676.63	667.61	661.84
47	1,026.77	1,004.92	882.34	872.01	869.29	841.87	835.67	796.29	728.42	726.83	709.04	705.05	695.65	689.63
48	1,074.07	1,051.21	922.99	912.18	909.33	880.65	874.17	832.97	761.98	760.31	741.70	737.53	727.70	721.40
49	1,120.71	1,096.86	963.07	951.79	948.82	918.90	912.13	869.14	795.07	793.33	773.91	769.56	759.30	752.73
50	1,173.26	1,148.30	1,008.23	996.43	993.32	961.99	954.90	909.90	832.35	830.53	810.20	805.65	794.90	788.03
51	1,225.16	1,199.09	1,052.83	1,040.50	1,037.25	1,004.54	997.14	950.14	869.17	867.27	846.04	841.28	830.06	822.88
52	1,282.31	1,255.03	1,101.94	1,089.04	1,085.64	1,051.40	1,043.65	994.47	909.72	907.73	885.51	880.53	868.79	861.27
53	1,340.12	1,311.61	1,151.62	1,138.13	1,134.58	1,098.80	1,090.70	1,039.30	950.73	948.65	925.43	920.22	907.95	900.10
54	1,402.53	1,372.69	1,205.25	1,191.14	1,187.42	1,149.97	1,141.50	1,087.70	995.00	992.83	968.52	963.08	950.23	942.01
55	1,464.94	1,433.77	1,258.87	1,244.14	1,240.25	1,201.13	1,192.29	1,136.10	1,039.28	1,037.00	1,011.62	1,005.93	992.52	983.93
56	1,532.60	1,499.99	1,317.02	1,301.60	1,297.54	1,256.61	1,247.36	1,188.57	1,087.28	1,084.90	1,058.34	1,052.39	1,038.36	1,029.38
57	1,600.92	1,566.86	1,375.73	1,359.62	1,355.38	1,312.63	1,302.96	1,241.55	1,135.75	1,133.26	1,105.52	1,099.30	1,084.65	1,075.26
58	1,673.84	1,638.22	1,438.39	1,421.55	1,417.12	1,372.42	1,362.31	1,298.10	1,187.48	1,184.88	1,155.88	1,149.38	1,134.05	1,124.24
59	1,709.97	1,673.58	1,469.44	1,452.24	1,447.70	1,402.04	1,391.72	1,326.13	1,213.11	1,210.46	1,180.83	1,174.19	1,158.53	1,148.51
60	1,782.89	1,744.95	1,532.10	1,514.16	1,509.44	1,461.83	1,451.06	1,382.68	1,264.84	1,262.08	1,231.18	1,224.26	1,207.93	1,197.48
61	1,845.95	1,806.67	1,586.29	1,567.72	1,562.83	1,513.54	1,502.39	1,431.58	1,309.58	1,306.72	1,274.73	1,267.56	1,250.66	1,239.84
62	1,887.34	1,847.18	1,621.86	1,602.87	1,597.87	1,547.47	1,536.07	1,463.68	1,338.94	1,336.01	1,303.31	1,295.98	1,278.70	1,267.64
63	1,939.23	1,897.97	1,666.46	1,646.95	1,641.81	1,590.02	1,578.31	1,503.93	1,375.76	1,372.75	1,339.15	1,331.62	1,313.86	1,302.49
64+	1,970.76	1,928.82	1,693.56	1,673.73	1,668.51	1,615.89	1,603.98	1,528.38	1,398.12	1,395.06	1,360.92	1,353.27	1,335.21	1,323.66

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business PPO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all PPO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

PPO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

6

Alameda County

Age	Platinum PPO 0/15	Platinum PPO 250/15	Gold PPO 350/25	Gold PPO 0/35	Gold PPO 500/20	Gold PPO 1000/35	Gold PPO 1600/0	Gold PPO 750/15	Silver PPO 2500/55	Silver PPO 2250/60	Silver HDHP PPO 1500/50%	Silver PPO 1700/50	Bronze PPO 6300/65	Bronze HDHP PPO 7000/0%
0-14	497.62	487.03	427.62	422.62	421.30	408.01	405.01	385.92	353.03	352.26	343.63	341.70	337.15	334.23
15	541.85	530.32	465.64	460.18	458.75	444.28	441.01	420.22	384.41	383.57	374.18	372.08	367.11	363.94
16	558.77	546.88	480.17	474.55	473.07	458.15	454.77	433.34	396.41	395.54	385.86	383.69	378.57	375.30
17	575.68	563.43	494.70	488.91	487.39	472.01	468.54	446.45	408.41	407.51	397.54	395.30	390.03	386.66
18	593.89	581.26	510.35	504.38	502.81	486.95	483.36	460.58	421.33	420.41	410.12	407.81	402.37	398.89
19	612.11	599.08	526.01	519.85	518.23	501.88	498.18	474.70	434.25	433.30	422.69	420.32	414.71	411.12
20	630.97	617.55	542.22	535.87	534.20	517.35	513.54	489.33	447.63	446.65	435.72	433.27	427.49	423.79
21	650.48	636.64	558.99	552.44	550.72	533.35	529.42	504.47	461.48	460.47	449.20	446.67	440.71	436.90
22	650.48	636.64	558.99	552.44	550.72	533.35	529.42	504.47	461.48	460.47	449.20	446.67	440.71	436.90
23	650.48	636.64	558.99	552.44	550.72	533.35	529.42	504.47	461.48	460.47	449.20	446.67	440.71	436.90
24	650.48	636.64	558.99	552.44	550.72	533.35	529.42	504.47	461.48	460.47	449.20	446.67	440.71	436.90
25	653.09	639.19	561.22	554.65	552.92	535.48	531.54	506.49	463.32	462.31	450.99	448.46	442.48	438.65
26	666.10	651.92	572.40	565.70	563.93	546.15	542.13	516.58	472.55	471.52	459.98	457.39	451.29	447.39
27	681.71	667.20	585.82	578.96	577.15	558.95	554.83	528.68	483.63	482.57	470.76	468.11	461.87	457.87
28	707.08	692.03	607.62	600.50	598.63	579.75	575.48	548.36	501.62	500.53	488.28	485.53	479.06	474.91
29	727.89	712.41	625.51	618.18	616.25	596.82	592.42	564.50	516.39	515.26	502.65	499.82	493.16	488.89
30	738.30	722.59	634.45	627.02	625.06	605.35	600.89	572.57	523.78	522.63	509.84	506.97	500.21	495.88
31	753.91	737.87	647.86	640.28	638.28	618.15	613.60	584.68	534.85	533.68	520.62	517.69	510.79	506.37
32	769.52	753.15	661.28	653.54	651.50	630.95	626.30	596.79	545.93	544.73	531.40	528.41	521.36	516.85
33	779.28	762.70	669.67	661.83	659.76	638.95	634.24	604.35	552.85	551.64	538.14	535.11	527.97	523.41
34	789.69	772.89	678.61	670.66	668.57	647.48	642.71	612.42	560.23	559.01	545.32	542.26	535.03	530.40
35	794.89	777.98	683.08	675.08	672.98	651.75	646.95	616.46	563.92	562.69	548.92	545.83	538.55	533.89
36	800.10	783.07	687.55	679.50	677.38	656.02	651.19	620.50	567.62	566.37	552.51	549.40	542.08	537.39
37	805.30	788.17	692.02	683.92	681.79	660.28	655.42	624.53	571.31	570.06	556.10	552.98	545.60	540.88
38	810.50	793.26	696.50	688.34	686.19	664.55	659.66	628.57	575.00	573.74	559.70	556.55	549.13	544.38
39	820.91	803.45	705.44	697.18	695.01	673.08	668.13	636.64	582.38	581.11	566.88	563.70	556.18	551.37
40	831.32	813.63	714.38	706.02	703.82	681.62	676.60	644.71	589.77	588.48	574.07	570.84	563.23	558.36
41	846.93	828.91	727.80	719.28	717.03	694.42	689.30	656.82	600.84	599.53	584.85	581.56	573.81	568.84
42	861.89	843.55	740.66	731.99	729.70	706.69	701.48	668.42	611.46	610.12	595.18	591.84	583.95	578.89
43	882.71	863.93	758.54	749.66	747.32	723.75	718.42	684.56	626.22	624.85	609.56	606.13	598.05	592.87
44	908.73	889.39	780.90	771.76	769.35	745.09	739.60	704.74	644.68	643.27	627.53	624.00	615.68	610.35
45	939.30	919.31	807.18	797.73	795.24	770.15	764.48	728.45	666.37	664.91	648.64	644.99	636.39	630.88
46	975.73	954.97	838.48	828.66	826.08	800.02	794.13	756.70	692.21	690.70	673.79	670.00	661.07	655.35
47	1,016.71	995.08	873.70	863.47	860.77	833.62	827.48	788.48	721.29	719.71	702.09	698.14	688.84	682.88
48	1,063.54	1,040.91	913.94	903.24	900.42	872.02	865.60	824.81	754.51	752.86	734.43	730.30	720.57	714.33
49	1,109.73	1,086.12	953.63	942.47	939.52	909.89	903.19	860.62	787.28	785.56	766.33	762.02	751.86	745.35
50	1,161.77	1,137.05	998.35	986.66	983.58	952.56	945.54	900.98	824.20	822.39	802.26	797.75	787.11	780.30
51	1,213.15	1,187.34	1,042.51	1,030.30	1,027.09	994.69	987.37	940.83	860.65	858.77	837.75	833.04	821.93	814.82
52	1,269.75	1,242.73	1,091.14	1,078.37	1,075.00	1,041.09	1,033.43	984.72	900.80	898.83	876.83	871.90	860.27	852.83
53	1,326.99	1,298.75	1,140.33	1,126.98	1,123.46	1,088.03	1,080.01	1,029.12	941.41	939.35	916.36	911.20	899.06	891.28
54	1,388.78	1,359.24	1,193.44	1,179.46	1,175.78	1,138.70	1,130.31	1,077.04	985.25	983.10	959.03	953.64	940.92	932.78
55	1,450.58	1,419.72	1,246.54	1,231.95	1,228.10	1,189.37	1,180.60	1,124.96	1,029.09	1,026.84	1,001.71	996.07	982.79	974.29
56	1,517.58	1,485.29	1,304.11	1,288.85	1,284.82	1,244.30	1,235.13	1,176.92	1,076.62	1,074.27	1,047.97	1,042.08	1,028.18	1,019.29
57	1,585.23	1,551.50	1,362.25	1,346.30	1,342.10	1,299.77	1,290.19	1,229.39	1,124.62	1,122.16	1,094.69	1,088.53	1,074.02	1,064.73
58	1,657.43	1,622.17	1,424.30	1,407.62	1,403.23	1,358.97	1,348.96	1,285.38	1,175.84	1,173.27	1,144.55	1,138.11	1,122.94	1,113.22
59	1,693.21	1,657.19	1,455.04	1,438.01	1,433.52	1,388.30	1,378.08	1,313.13	1,201.22	1,198.60	1,169.26	1,162.68	1,147.18	1,137.25
60	1,765.42	1,727.85	1,517.09	1,499.33	1,494.65	1,447.51	1,436.84	1,369.13	1,252.45	1,249.71	1,219.12	1,212.26	1,196.10	1,185.75
61	1,827.86	1,788.97	1,570.75	1,552.36	1,547.52	1,498.71	1,487.67	1,417.56	1,296.75	1,293.91	1,262.24	1,255.14	1,238.41	1,227.69
62	1,868.84	1,829.08	1,605.97	1,587.17	1,582.21	1,532.31	1,521.02	1,449.34	1,325.82	1,322.92	1,290.54	1,283.28	1,266.17	1,255.22
63	1,920.23	1,879.37	1,650.13	1,630.81	1,625.72	1,574.44	1,562.85	1,489.19	1,362.28	1,359.30	1,326.02	1,318.57	1,300.99	1,289.73
64+	1,951.44	1,909.92	1,676.97	1,657.32	1,652.16	1,600.05	1,588.26	1,513.41	1,384.44	1,381.41	1,347.60	1,340.01	1,322.13	1,310.70

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business PPO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all PPO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

PPO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 7

Santa Clara County

Age	Platinum PPO 0/15	Platinum PPO 250/15	Gold PPO 350/25	Gold PPO 0/35	Gold PPO 500/20	Gold PPO 1000/35	Gold PPO 1600/0	Gold PPO 750/15	Silver PPO 2500/55	Silver PPO 2250/60	Silver HDHP PPO 1500/50%	Silver PPO 1700/50	Bronze PPO 6300/65	Bronze HDHP PPO 7000/0%
0-14	509.50	498.66	437.83	432.71	431.36	417.75	414.67	395.13	361.46	360.67	351.84	349.86	345.19	342.21
15	554.79	542.98	476.75	471.17	469.70	454.88	451.53	430.25	393.59	392.73	383.11	380.96	375.88	372.63
16	572.10	559.93	491.63	485.88	484.36	469.08	465.63	443.68	405.87	404.98	395.07	392.85	387.61	384.26
17	589.42	576.88	506.51	500.58	499.02	483.28	479.72	457.11	418.16	417.24	407.03	404.74	399.34	395.89
18	608.07	595.13	522.54	516.42	514.81	498.57	494.90	471.57	431.39	430.44	419.91	417.54	411.98	408.41
19	626.72	613.38	538.56	532.26	530.60	513.86	510.08	486.04	444.61	443.64	432.78	430.35	424.61	420.94
20	646.03	632.29	555.16	548.66	546.95	529.70	525.80	501.01	458.32	457.32	446.12	443.61	437.70	433.91
21	666.01	651.84	572.33	565.63	563.86	546.08	542.06	516.51	472.49	471.46	459.92	457.33	451.23	447.33
22	666.01	651.84	572.33	565.63	563.86	546.08	542.06	516.51	472.49	471.46	459.92	457.33	451.23	447.33
23	666.01	651.84	572.33	565.63	563.86	546.08	542.06	516.51	472.49	471.46	459.92	457.33	451.23	447.33
24	666.01	651.84	572.33	565.63	563.86	546.08	542.06	516.51	472.49	471.46	459.92	457.33	451.23	447.33
25	668.68	654.45	574.62	567.89	566.12	548.26	544.23	518.58	474.38	473.34	461.76	459.16	453.04	449.12
26	682.00	667.49	586.07	579.20	577.40	559.18	555.07	528.91	483.83	482.77	470.96	468.31	462.06	458.07
27	697.98	683.13	599.80	592.78	590.93	572.29	568.08	541.30	495.17	494.09	481.99	479.28	472.89	468.80
28	723.96	708.55	622.12	614.84	612.92	593.59	589.22	561.45	513.60	512.48	499.93	497.12	490.49	486.25
29	745.27	729.41	640.44	632.94	630.96	611.06	606.56	577.98	528.72	527.56	514.65	511.75	504.93	500.56
30	755.92	739.84	649.59	641.99	639.99	619.80	615.23	586.24	536.28	535.11	522.01	519.07	512.15	507.72
31	771.91	755.48	663.33	655.56	653.52	632.91	628.24	598.64	547.62	546.42	533.04	530.05	522.98	518.46
32	787.89	771.13	677.07	669.14	667.05	646.01	641.25	611.03	558.96	557.74	544.08	541.02	533.81	529.19
33	797.88	780.91	685.65	677.62	675.51	654.20	649.38	618.78	566.05	564.81	550.98	547.88	540.58	535.90
34	808.54	791.34	694.81	686.67	684.53	662.94	658.06	627.04	573.61	572.35	558.34	555.20	547.80	543.06
35	813.87	796.55	699.39	691.20	689.04	667.31	662.39	631.18	577.39	576.12	562.02	558.86	551.41	546.64
36	819.20	801.77	703.97	695.72	693.55	671.68	666.73	635.31	581.17	579.89	565.70	562.52	555.02	550.22
37	824.52	806.98	708.54	700.25	698.06	676.05	671.07	639.44	584.95	583.67	569.38	566.18	558.63	553.79
38	829.85	812.19	713.12	704.77	702.57	680.41	675.40	643.57	588.72	587.44	573.06	569.83	562.24	557.37
39	840.51	822.62	722.28	713.82	711.60	689.15	684.08	651.84	596.28	594.98	580.42	577.15	569.46	564.53
40	851.16	833.05	731.44	722.87	720.62	697.89	692.75	660.10	603.84	602.52	587.78	584.47	576.68	571.69
41	867.15	848.70	745.17	736.45	734.15	710.99	705.76	672.50	615.18	613.84	598.81	595.45	587.51	582.42
42	882.47	863.69	758.34	749.46	747.12	723.55	718.23	684.38	626.05	624.68	609.39	605.96	597.88	592.71
43	903.78	884.55	776.65	767.56	765.16	741.03	735.57	700.90	641.17	639.77	624.11	620.60	612.32	607.03
44	930.42	910.62	799.54	790.18	787.72	762.87	757.25	721.56	660.07	658.63	642.51	638.89	630.37	624.92
45	961.72	941.26	826.44	816.77	814.22	788.54	782.73	745.84	682.28	680.79	664.12	660.39	651.58	645.94
46	999.02	977.76	858.49	848.44	845.80	819.12	813.09	774.77	708.74	707.19	689.88	686.00	676.85	671.00
47	1,040.98	1,018.83	894.55	884.08	881.32	853.52	847.23	807.31	738.50	736.89	718.85	714.81	705.28	699.18
48	1,088.93	1,065.76	935.76	924.80	921.92	892.84	886.26	844.49	772.52	770.84	751.97	747.74	737.77	731.38
49	1,136.22	1,112.04	976.39	964.96	961.95	931.61	924.75	881.17	806.07	804.31	784.62	780.21	769.80	763.15
50	1,189.50	1,164.19	1,022.18	1,010.21	1,007.06	975.30	968.11	922.49	843.87	842.03	821.41	816.79	805.90	798.93
51	1,242.11	1,215.68	1,067.39	1,054.90	1,051.61	1,018.44	1,010.94	963.29	881.20	879.27	857.75	852.92	841.55	834.27
52	1,300.06	1,272.40	1,117.19	1,104.11	1,100.66	1,065.95	1,058.10	1,008.23	922.30	920.29	897.76	892.71	880.81	873.19
53	1,358.66	1,329.76	1,167.55	1,153.88	1,150.28	1,114.00	1,105.80	1,053.68	963.88	961.78	938.23	932.96	920.52	912.55
54	1,421.94	1,391.68	1,221.92	1,207.62	1,203.85	1,165.88	1,157.29	1,102.75	1,008.77	1,006.57	981.92	976.40	963.38	955.05
55	1,485.21	1,453.61	1,276.30	1,261.35	1,257.42	1,217.76	1,208.79	1,151.82	1,053.66	1,051.35	1,025.62	1,019.85	1,006.25	997.55
56	1,553.81	1,520.75	1,335.24	1,319.61	1,315.49	1,274.00	1,264.62	1,205.02	1,102.32	1,099.91	1,072.99	1,066.95	1,052.73	1,043.62
57	1,623.07	1,588.54	1,394.77	1,378.44	1,374.14	1,330.79	1,320.99	1,258.74	1,151.46	1,148.95	1,120.82	1,114.52	1,099.66	1,090.14
58	1,697.00	1,660.89	1,458.30	1,441.22	1,436.73	1,391.41	1,381.16	1,316.07	1,203.91	1,201.28	1,171.87	1,165.28	1,149.74	1,139.80
59	1,733.63	1,696.74	1,489.77	1,472.33	1,467.74	1,421.44	1,410.97	1,344.48	1,229.90	1,227.21	1,197.17	1,190.43	1,174.56	1,164.40
60	1,807.56	1,769.10	1,553.30	1,535.12	1,530.33	1,482.06	1,471.14	1,401.81	1,282.34	1,279.54	1,248.22	1,241.20	1,224.65	1,214.05
61	1,871.49	1,831.68	1,608.25	1,589.42	1,584.46	1,534.48	1,523.18	1,451.39	1,327.70	1,324.80	1,292.37	1,285.10	1,267.97	1,257.00
62	1,913.45	1,872.74	1,644.30	1,625.05	1,619.98	1,568.89	1,557.33	1,483.93	1,357.47	1,354.50	1,321.34	1,313.91	1,296.39	1,285.18
63	1,966.07	1,924.24	1,689.52	1,669.74	1,664.53	1,612.03	1,600.15	1,524.74	1,394.80	1,391.75	1,357.68	1,350.04	1,332.04	1,320.52
64+	1,998.03	1,955.52	1,716.99	1,696.89	1,691.58	1,638.24	1,626.18	1,549.53	1,417.47	1,414.38	1,379.76	1,371.99	1,353.69	1,341.99

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business PPO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all PPO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

PPO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

8

San Mateo County

Age	Platinum PPO 0/15	Platinum PPO 250/15	Gold PPO 350/25	Gold PPO 0/35	Gold PPO 500/20	Gold PPO 1000/35	Gold PPO 1600/0	Gold PPO 750/15	Silver PPO 2500/55	Silver PPO 2250/60	Silver HDHP PPO 1500/50%	Silver PPO 1700/50	Bronze PPO 6300/65	Bronze HDHP PPO 7000/0%
0-14	554.56	542.77	476.56	470.98	469.51	454.70	451.35	430.08	393.43	392.57	382.96	380.80	375.73	372.48
15	603.86	591.01	518.92	512.84	511.24	495.12	491.47	468.31	428.40	427.46	417.00	414.65	409.12	405.58
16	622.71	609.46	535.12	528.85	527.20	510.57	506.81	482.93	441.77	440.80	430.01	427.60	421.89	418.24
17	641.56	627.91	551.31	544.86	543.16	526.03	522.15	497.54	455.14	454.15	443.03	440.54	434.66	430.90
18	661.85	647.77	568.76	562.10	560.34	542.67	538.67	513.28	469.54	468.52	457.05	454.48	448.42	444.54
19	682.15	667.64	586.20	579.34	577.53	559.31	555.19	529.03	483.94	482.88	471.06	468.41	462.17	458.17
20	703.17	688.21	604.26	597.19	595.33	576.55	572.30	545.33	498.86	497.77	485.58	482.85	476.41	472.29
21	724.92	709.50	622.95	615.66	613.74	594.38	590.00	562.20	514.28	513.16	500.60	497.78	491.15	486.90
22	724.92	709.50	622.95	615.66	613.74	594.38	590.00	562.20	514.28	513.16	500.60	497.78	491.15	486.90
23	724.92	709.50	622.95	615.66	613.74	594.38	590.00	562.20	514.28	513.16	500.60	497.78	491.15	486.90
24	724.92	709.50	622.95	615.66	613.74	594.38	590.00	562.20	514.28	513.16	500.60	497.78	491.15	486.90
25	727.82	712.34	625.44	618.12	616.19	596.76	592.36	564.44	516.34	515.21	502.60	499.77	493.11	488.84
26	742.32	726.53	637.90	630.44	628.47	608.65	604.16	575.69	526.63	525.48	512.61	509.73	502.93	498.58
27	759.72	743.55	652.85	645.21	643.20	622.91	618.32	589.18	538.97	537.79	524.63	521.68	514.72	510.27
28	787.99	771.22	677.15	669.22	667.13	646.09	641.33	611.11	559.03	557.80	544.15	541.09	533.88	529.26
29	811.19	793.93	697.08	688.92	686.77	665.11	660.21	629.10	575.48	574.23	560.17	557.02	549.59	544.84
30	822.79	805.28	707.05	698.77	696.59	674.62	669.65	638.09	583.71	582.44	568.18	564.98	557.45	552.63
31	840.18	822.31	722.00	713.55	711.32	688.89	683.81	651.59	596.06	594.75	580.19	576.93	569.24	564.31
32	857.58	839.34	736.95	728.33	726.05	703.15	697.97	665.08	608.40	607.07	592.21	588.88	581.03	576.00
33	868.46	849.98	746.30	737.56	735.26	712.07	706.82	673.51	616.11	614.77	599.72	596.34	588.39	583.30
34	880.05	861.33	756.26	747.41	745.08	721.58	716.26	682.51	624.34	622.98	607.73	604.31	596.25	591.09
35	885.85	867.01	761.25	752.34	749.99	726.33	720.98	687.00	628.46	627.08	611.73	608.29	600.18	594.99
36	891.65	872.68	766.23	757.26	754.90	731.09	725.70	691.50	632.57	631.19	615.74	612.27	604.11	598.88
37	897.45	878.36	771.22	762.19	759.81	735.84	730.42	696.00	636.68	635.29	619.74	616.26	608.04	602.78
38	903.25	884.03	776.20	767.11	764.72	740.60	735.14	700.50	640.80	639.40	623.75	620.24	611.97	606.67
39	914.85	895.39	786.17	776.96	774.54	750.11	744.58	709.49	649.03	647.61	631.75	628.20	619.83	614.46
40	926.45	906.74	796.13	786.81	784.36	759.62	754.02	718.49	657.26	655.82	639.76	636.17	627.68	622.25
41	943.85	923.77	811.08	801.59	799.09	773.88	768.18	731.98	669.60	668.13	651.78	648.11	639.47	633.94
42	960.52	940.08	825.41	815.75	813.20	787.55	781.75	744.91	681.43	679.94	663.29	659.56	650.77	645.14
43	983.72	962.79	845.35	835.45	832.84	806.57	800.63	762.90	697.88	696.36	679.31	675.49	666.48	660.72
44	1,012.72	991.17	870.26	860.08	857.39	830.35	824.23	785.39	718.46	716.88	699.34	695.40	686.13	680.19
45	1,046.79	1,024.51	899.54	889.01	886.24	858.29	851.96	811.81	742.63	741.00	722.86	718.80	709.21	703.08
46	1,087.38	1,064.25	934.43	923.49	920.61	891.57	885.00	843.29	771.43	769.74	750.90	746.67	736.72	730.35
47	1,133.05	1,108.94	973.67	962.28	959.27	929.02	922.17	878.71	803.83	802.07	782.43	778.03	767.66	761.02
48	1,185.25	1,160.03	1,018.53	1,006.60	1,003.46	971.81	964.65	919.19	840.85	839.02	818.48	813.87	803.02	796.08
49	1,236.72	1,210.40	1,062.76	1,050.32	1,047.04	1,014.01	1,006.54	959.11	877.37	875.45	854.02	849.22	837.89	830.65
50	1,294.71	1,267.16	1,112.59	1,099.57	1,096.14	1,061.56	1,053.74	1,004.08	918.51	916.50	894.07	889.04	877.19	869.60
51	1,351.98	1,323.21	1,161.81	1,148.21	1,144.62	1,108.52	1,100.35	1,048.50	959.14	957.04	933.62	928.36	915.99	908.06
52	1,415.05	1,384.94	1,216.00	1,201.77	1,198.02	1,160.23	1,151.68	1,097.41	1,003.88	1,001.69	977.17	971.67	958.72	950.42
53	1,478.84	1,447.38	1,270.82	1,255.95	1,252.03	1,212.54	1,203.60	1,146.88	1,049.14	1,046.85	1,021.22	1,015.48	1,001.94	993.27
54	1,547.71	1,514.78	1,330.00	1,314.43	1,310.33	1,269.00	1,259.65	1,200.29	1,098.00	1,095.60	1,068.78	1,062.77	1,048.60	1,039.52
55	1,616.58	1,582.18	1,389.18	1,372.92	1,368.64	1,325.47	1,315.70	1,253.70	1,146.85	1,144.35	1,116.33	1,110.06	1,095.26	1,085.78
56	1,691.24	1,655.26	1,453.35	1,436.33	1,431.85	1,386.69	1,376.48	1,311.60	1,199.83	1,197.20	1,167.90	1,161.33	1,145.84	1,135.93
57	1,766.63	1,729.05	1,518.14	1,500.36	1,495.68	1,448.50	1,437.84	1,370.07	1,253.31	1,250.57	1,219.96	1,213.10	1,196.92	1,186.57
58	1,847.10	1,807.80	1,587.28	1,568.70	1,563.80	1,514.48	1,503.33	1,432.48	1,310.40	1,307.53	1,275.52	1,268.35	1,251.44	1,240.61
59	1,886.97	1,846.82	1,621.55	1,602.56	1,597.56	1,547.17	1,535.78	1,463.40	1,338.68	1,335.76	1,303.06	1,295.73	1,278.45	1,267.39
60	1,967.44	1,925.58	1,690.69	1,670.90	1,665.69	1,613.15	1,601.27	1,525.80	1,395.77	1,392.72	1,358.62	1,350.98	1,332.97	1,321.44
61	2,037.03	1,993.69	1,750.50	1,730.00	1,724.60	1,670.21	1,657.91	1,579.77	1,445.14	1,441.98	1,406.68	1,398.77	1,380.12	1,368.18
62	2,082.70	2,038.39	1,789.74	1,768.79	1,763.27	1,707.65	1,695.08	1,615.19	1,477.54	1,474.31	1,438.22	1,430.13	1,411.06	1,398.85
63	2,139.97	2,094.44	1,838.96	1,817.43	1,811.75	1,754.61	1,741.69	1,659.60	1,518.17	1,514.85	1,477.77	1,469.45	1,449.86	1,437.32
64+	2,174.76	2,128.50	1,868.85	1,846.98	1,841.22	1,783.14	1,770.00	1,686.60	1,542.84	1,539.48	1,501.80	1,493.34	1,473.45	1,460.70

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business PPO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all PPO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

PPO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 9

Monterey, San Benito and Santa Cruz counties

Age	Platinum PPO 0/15	Platinum PPO 250/15	Gold PPO 350/25	Gold PPO 0/35	Gold PPO 500/20	Gold PPO 1000/35	Gold PPO 1600/0	Gold PPO 750/15	Silver PPO 2500/55	Silver PPO 2250/60	Silver HDHP PPO 1500/50%	Silver PPO 1700/50	Bronze PPO 6300/65	Bronze HDHP PPO 7000/0%
0-14	567.96	555.88	488.07	482.36	480.85	465.68	462.25	440.47	402.93	402.05	392.21	390.00	384.80	381.47
15	618.44	605.29	531.45	525.23	523.59	507.08	503.34	479.62	438.75	437.79	427.07	424.67	419.01	415.38
16	637.75	624.18	548.04	541.63	539.93	522.90	519.05	494.59	452.44	451.45	440.40	437.92	432.08	428.35
17	657.05	643.07	564.63	558.02	556.28	538.73	534.76	509.56	466.13	465.12	453.73	451.18	445.16	441.31
18	677.84	663.42	582.49	575.67	573.88	555.78	551.68	525.68	480.88	479.83	468.09	465.45	459.25	455.27
19	698.63	683.76	600.36	593.33	591.48	572.82	568.60	541.80	495.63	494.55	482.44	479.73	473.33	469.24
20	720.16	704.84	618.86	611.61	609.71	590.47	586.13	558.50	510.90	509.79	497.31	494.51	487.92	483.70
21	742.43	726.63	638.00	630.53	628.56	608.74	604.25	575.78	526.71	525.55	512.69	509.81	503.01	498.66
22	742.43	726.63	638.00	630.53	628.56	608.74	604.25	575.78	526.71	525.55	512.69	509.81	503.01	498.66
23	742.43	726.63	638.00	630.53	628.56	608.74	604.25	575.78	526.71	525.55	512.69	509.81	503.01	498.66
24	742.43	726.63	638.00	630.53	628.56	608.74	604.25	575.78	526.71	525.55	512.69	509.81	503.01	498.66
25	745.40	729.54	640.55	633.05	631.08	611.17	606.67	578.08	528.81	527.66	514.74	511.85	505.02	500.65
26	760.25	744.07	653.31	645.66	643.65	623.35	618.75	589.59	539.35	538.17	524.99	522.04	515.08	510.62
27	778.07	761.51	668.62	660.80	658.73	637.96	633.26	603.41	551.99	550.78	537.30	534.28	527.15	522.59
28	807.02	789.85	693.51	685.39	683.25	661.70	656.82	625.87	572.53	571.28	557.29	554.16	546.77	542.04
29	830.78	813.10	713.92	705.56	703.36	681.18	676.16	644.29	589.38	588.10	573.70	570.47	562.87	558.00
30	842.66	824.73	724.13	715.65	713.42	690.92	685.83	653.50	597.81	596.50	581.90	578.63	570.91	565.98
31	860.48	842.17	739.44	730.78	728.50	705.53	700.33	667.32	610.45	609.12	594.21	590.87	582.99	577.94
32	878.30	859.61	754.75	745.92	743.59	720.14	714.83	681.14	623.09	621.73	606.51	603.10	595.06	589.91
33	889.43	870.51	764.32	755.37	753.02	729.27	723.89	689.78	630.99	629.61	614.20	610.75	602.60	597.39
34	901.31	882.13	774.53	765.46	763.07	739.01	733.56	698.99	639.42	638.02	622.40	618.90	610.65	605.37
35	907.25	887.95	779.63	770.51	768.10	743.88	738.40	703.60	643.63	642.23	626.51	622.98	614.68	609.36
36	913.19	893.76	784.74	775.55	773.13	748.75	743.23	708.20	647.85	646.43	630.61	627.06	618.70	613.35
37	919.13	899.57	789.84	780.60	778.16	753.62	748.07	712.81	652.06	650.64	634.71	631.14	622.72	617.34
38	925.07	905.39	794.95	785.64	783.19	758.49	752.90	717.42	656.28	654.84	638.81	635.22	626.75	621.33
39	936.95	917.01	805.15	795.73	793.25	768.23	762.57	726.63	664.70	663.25	647.01	643.38	634.80	629.31
40	948.83	928.64	815.36	805.82	803.30	777.97	772.24	735.84	673.13	671.66	655.22	651.53	642.85	637.28
41	966.65	946.08	830.67	820.95	818.39	792.58	786.74	749.66	685.77	684.27	667.52	663.77	654.92	649.25
42	983.72	962.79	845.35	835.45	832.84	806.58	800.64	762.90	697.89	696.36	679.31	675.49	666.49	660.72
43	1,007.48	986.04	865.76	855.63	852.96	826.06	819.97	781.33	714.74	713.18	695.72	691.81	682.58	676.68
44	1,037.18	1,015.11	891.28	880.85	878.10	850.40	844.14	804.36	735.81	734.20	716.23	712.20	702.70	696.62
45	1,072.07	1,049.26	921.27	910.49	907.64	879.02	872.54	831.42	760.56	758.90	740.32	736.16	726.34	720.06
46	1,113.65	1,089.95	957.00	945.79	942.84	913.10	906.38	863.66	790.06	788.33	769.03	764.71	754.51	747.99
47	1,160.42	1,135.73	997.19	985.52	982.44	951.46	944.45	899.94	823.24	821.44	801.33	796.83	786.20	779.40
48	1,213.87	1,188.05	1,043.13	1,030.92	1,027.70	995.28	987.95	941.39	861.16	859.28	838.25	833.53	822.42	815.30
49	1,266.59	1,239.64	1,088.43	1,075.68	1,072.33	1,038.50	1,030.86	982.27	898.56	896.60	874.65	869.73	858.13	850.71
50	1,325.98	1,297.77	1,139.47	1,126.13	1,122.61	1,087.20	1,079.20	1,028.33	940.70	938.64	915.66	910.51	898.37	890.60
51	1,384.63	1,355.17	1,189.87	1,175.94	1,172.27	1,135.29	1,126.93	1,073.82	982.31	980.16	956.17	950.79	938.11	930.00
52	1,449.23	1,418.39	1,245.37	1,230.79	1,226.95	1,188.25	1,179.50	1,123.91	1,028.13	1,025.88	1,000.77	995.14	981.87	973.38
53	1,514.56	1,482.33	1,301.52	1,286.28	1,282.27	1,241.82	1,232.68	1,174.58	1,074.48	1,072.13	1,045.89	1,040.00	1,026.14	1,017.26
54	1,585.09	1,551.36	1,362.13	1,346.18	1,341.98	1,299.65	1,290.08	1,229.28	1,124.52	1,122.06	1,094.59	1,088.44	1,073.92	1,064.63
55	1,655.62	1,620.40	1,422.74	1,406.08	1,401.69	1,357.48	1,347.48	1,283.98	1,174.55	1,171.99	1,143.30	1,136.87	1,121.71	1,112.01
56	1,732.09	1,695.24	1,488.45	1,471.03	1,466.44	1,420.18	1,409.72	1,343.28	1,228.81	1,226.12	1,196.10	1,189.38	1,173.52	1,163.37
57	1,809.30	1,770.81	1,554.80	1,536.60	1,531.81	1,483.49	1,472.56	1,403.16	1,283.58	1,280.78	1,249.42	1,242.40	1,225.83	1,215.23
58	1,891.71	1,851.46	1,625.62	1,606.59	1,601.58	1,551.06	1,539.64	1,467.07	1,342.05	1,339.11	1,306.33	1,298.99	1,281.67	1,270.58
59	1,932.55	1,891.43	1,660.71	1,641.27	1,636.15	1,584.54	1,572.87	1,498.74	1,371.02	1,368.02	1,334.53	1,327.02	1,309.33	1,298.00
60	2,014.96	1,972.09	1,731.53	1,711.26	1,705.92	1,652.11	1,639.94	1,562.65	1,429.48	1,426.36	1,391.44	1,383.61	1,365.17	1,353.36
61	2,086.23	2,041.84	1,792.78	1,771.79	1,766.26	1,710.55	1,697.95	1,617.93	1,480.04	1,476.81	1,440.66	1,432.55	1,413.45	1,401.23
62	2,133.00	2,087.62	1,832.97	1,811.51	1,805.86	1,748.90	1,736.02	1,654.20	1,513.23	1,509.92	1,472.96	1,464.67	1,445.14	1,432.64
63	2,191.66	2,145.03	1,883.37	1,861.32	1,855.52	1,796.99	1,783.75	1,699.69	1,554.84	1,551.44	1,513.46	1,504.95	1,484.88	1,472.04
64+	2,227.29	2,179.89	1,914.00	1,891.59	1,885.68	1,826.22	1,812.75	1,727.34	1,580.13	1,576.65	1,538.07	1,529.43	1,509.03	1,495.98

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business PPO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all PPO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

PPO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 10

Mariposa, Merced, San Joaquin, Stanislaus, and Tulare counties

Age	Platinum PPO 0/15	Platinum PPO 250/15	Gold PPO 350/25	Gold PPO 0/35	Gold PPO 500/20	Gold PPO 1000/35	Gold PPO 1600/0	Gold PPO 750/15	Silver PPO 2500/55	Silver PPO 2250/60	Silver HDHP PPO 1500/50%	Silver PPO 1700/50	Bronze PPO 6300/65	Bronze HDHP PPO 7000/0%
0-14	500.23	489.59	429.87	424.83	423.51	410.15	407.13	387.94	354.88	354.10	345.44	343.49	338.91	335.98
15	544.69	533.10	468.08	462.60	461.15	446.61	443.32	422.42	386.42	385.58	376.14	374.03	369.04	365.85
16	561.70	549.74	482.69	477.04	475.55	460.55	457.15	435.61	398.49	397.61	387.88	385.70	380.56	377.27
17	578.70	566.38	497.30	491.47	489.94	474.49	470.99	448.79	410.55	409.65	399.62	397.37	392.08	388.68
18	597.01	584.30	513.03	507.02	505.44	489.50	485.89	462.99	423.54	422.61	412.27	409.95	404.48	400.98
19	615.31	602.22	528.76	522.57	520.94	504.51	500.79	477.19	436.53	435.57	424.91	422.52	416.89	413.28
20	634.28	620.78	545.06	538.68	537.00	520.06	516.23	491.90	449.98	448.99	438.00	435.54	429.73	426.02
21	653.89	639.98	561.92	555.34	553.60	536.14	532.19	507.11	463.90	462.88	451.55	449.01	443.02	439.19
22	653.89	639.98	561.92	555.34	553.60	536.14	532.19	507.11	463.90	462.88	451.55	449.01	443.02	439.19
23	653.89	639.98	561.92	555.34	553.60	536.14	532.19	507.11	463.90	462.88	451.55	449.01	443.02	439.19
24	653.89	639.98	561.92	555.34	553.60	536.14	532.19	507.11	463.90	462.88	451.55	449.01	443.02	439.19
25	656.51	642.54	564.16	557.56	555.82	538.29	534.32	509.14	465.75	464.73	453.36	450.81	444.80	440.95
26	669.59	655.34	575.40	568.67	566.89	549.01	544.97	519.28	475.03	473.99	462.39	459.79	453.66	449.73
27	685.28	670.70	588.89	581.99	580.18	561.88	557.74	531.45	486.16	485.10	473.22	470.56	464.29	460.27
28	710.78	695.66	610.80	603.65	601.77	582.79	578.50	551.23	504.25	503.15	490.83	488.07	481.57	477.40
29	731.71	716.14	628.78	621.42	619.48	599.94	595.53	567.46	519.10	517.96	505.28	502.44	495.74	491.45
30	742.17	726.38	637.77	630.31	628.34	608.52	604.04	575.57	526.52	525.37	512.51	509.63	502.83	498.48
31	757.86	741.74	651.26	643.64	641.63	621.39	616.81	587.74	537.65	536.48	523.35	520.40	513.46	509.02
32	773.56	757.10	664.75	656.96	654.91	634.26	629.59	599.91	548.79	547.59	534.18	531.18	524.10	519.56
33	783.37	766.70	673.18	665.29	663.22	642.30	637.57	607.52	555.75	554.53	540.96	537.91	530.74	526.15
34	793.83	776.94	682.17	674.18	672.08	650.88	646.08	615.63	563.17	561.94	548.18	545.10	537.83	533.18
35	799.06	782.06	686.66	678.62	676.50	655.17	650.34	619.69	566.88	565.64	551.79	548.69	541.37	536.69
36	804.29	787.18	691.16	683.07	680.93	659.46	654.60	623.75	570.59	569.34	555.41	552.28	544.92	540.20
37	809.52	792.30	695.65	687.51	685.36	663.75	658.86	627.81	574.30	573.05	559.02	555.87	548.46	543.72
38	814.75	797.42	700.15	691.95	689.79	668.03	663.11	631.86	578.01	576.75	562.63	559.47	552.01	547.23
39	825.21	807.66	709.14	700.84	698.65	676.61	671.63	639.98	585.44	584.16	569.86	566.65	559.10	554.26
40	835.68	817.90	718.13	709.72	707.51	685.19	680.14	648.09	592.86	591.56	577.08	573.84	566.18	561.29
41	851.37	833.26	731.61	723.05	720.79	698.06	692.92	660.26	603.99	602.67	587.92	584.61	576.82	571.83
42	866.41	847.98	744.54	735.82	733.53	710.39	705.16	671.92	614.66	613.32	598.30	594.94	587.01	581.93
43	887.33	868.46	762.52	753.59	751.24	727.55	722.19	688.15	629.51	628.13	612.75	609.31	601.18	595.98
44	913.49	894.05	785.00	775.81	773.39	748.99	743.48	708.44	648.06	646.64	630.82	627.27	618.90	613.55
45	944.22	924.13	811.41	801.91	799.40	774.19	768.49	732.27	669.86	668.40	652.04	648.37	639.73	634.19
46	980.84	959.97	842.87	833.01	830.41	804.21	798.29	760.67	695.84	694.32	677.32	673.52	664.54	658.79
47	1,022.04	1,000.29	878.27	867.99	865.28	837.99	831.82	792.62	725.07	723.48	705.77	701.80	692.45	686.46
48	1,069.12	1,046.37	918.73	907.98	905.14	876.59	870.14	829.13	758.47	756.81	738.28	734.13	724.34	718.08
49	1,115.54	1,091.81	958.63	947.41	944.45	914.66	907.92	865.13	791.40	789.67	770.34	766.01	755.80	749.26
50	1,167.86	1,143.01	1,003.58	991.83	988.74	957.55	950.50	905.70	828.52	826.71	806.47	801.93	791.24	784.40
51	1,219.51	1,193.57	1,047.97	1,035.70	1,032.47	999.91	992.54	945.76	865.16	863.27	842.14	837.40	826.24	819.09
52	1,276.40	1,249.24	1,096.86	1,084.02	1,080.64	1,046.55	1,038.84	989.88	905.52	903.54	881.43	876.47	864.78	857.30
53	1,333.94	1,305.56	1,146.31	1,132.89	1,129.35	1,093.73	1,085.68	1,034.51	946.35	944.28	921.16	915.98	903.77	895.95
54	1,396.06	1,366.36	1,199.69	1,185.65	1,181.95	1,144.67	1,136.23	1,082.69	990.42	988.25	964.06	958.64	945.86	937.67
55	1,458.18	1,427.16	1,253.07	1,238.40	1,234.54	1,195.60	1,186.79	1,130.86	1,034.49	1,032.22	1,006.96	1,001.29	987.94	979.40
56	1,525.54	1,493.08	1,310.95	1,295.60	1,291.56	1,250.82	1,241.61	1,183.09	1,082.27	1,079.90	1,053.47	1,047.54	1,033.57	1,024.63
57	1,593.54	1,559.64	1,369.39	1,353.36	1,349.13	1,306.58	1,296.96	1,235.83	1,130.51	1,128.04	1,100.43	1,094.24	1,079.65	1,070.31
58	1,666.12	1,630.67	1,431.76	1,415.00	1,410.58	1,366.09	1,356.03	1,292.12	1,182.00	1,179.42	1,150.55	1,144.08	1,128.82	1,119.06
59	1,702.09	1,665.87	1,462.67	1,445.54	1,441.03	1,395.58	1,385.30	1,320.01	1,207.52	1,204.88	1,175.38	1,168.77	1,153.19	1,143.21
60	1,774.67	1,736.91	1,525.04	1,507.19	1,502.48	1,455.09	1,444.38	1,376.30	1,259.01	1,256.26	1,225.51	1,218.61	1,202.37	1,191.96
61	1,837.44	1,798.35	1,578.98	1,560.50	1,555.63	1,506.56	1,495.47	1,424.99	1,303.55	1,300.70	1,268.86	1,261.72	1,244.90	1,234.13
62	1,878.64	1,838.67	1,614.39	1,595.49	1,590.51	1,540.34	1,528.99	1,456.93	1,332.77	1,329.86	1,297.30	1,290.01	1,272.81	1,261.80
63	1,930.30	1,889.23	1,658.78	1,639.36	1,634.24	1,582.69	1,571.04	1,497.00	1,369.42	1,366.42	1,332.98	1,325.48	1,307.81	1,296.49
64+	1,961.67	1,919.94	1,685.76	1,666.02	1,660.80	1,608.42	1,596.57	1,521.33	1,391.70	1,388.64	1,354.65	1,347.03	1,329.06	1,317.57

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business PPO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all PPO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

PPO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 11

Fresno, Kings and Madera counties

Age	Platinum PPO 0/15	Platinum PPO 250/15	Gold PPO 350/25	Gold PPO 0/35	Gold PPO 500/20	Gold PPO 1000/35	Gold PPO 1600/0	Gold PPO 750/15	Silver PPO 2500/55	Silver PPO 2250/60	Silver HDHP PPO 1500/50%	Silver PPO 1700/50	Bronze PPO 6300/65	Bronze HDHP PPO 7000/0%
0-14	379.79	371.71	326.37	322.55	321.54	311.40	309.11	294.54	269.44	268.85	262.27	260.79	257.32	255.09
15	413.55	404.75	355.38	351.22	350.12	339.08	336.58	320.72	293.39	292.75	285.58	283.97	280.19	277.76
16	426.46	417.39	366.47	362.18	361.05	349.66	347.09	330.73	302.55	301.88	294.49	292.84	288.93	286.43
17	439.37	430.02	377.57	373.15	371.98	360.25	357.60	340.74	311.70	311.02	303.41	301.70	297.68	295.10
18	453.27	443.63	389.51	384.95	383.75	371.65	368.91	351.52	321.56	320.86	313.01	311.25	307.10	304.44
19	467.17	457.23	401.46	396.76	395.52	383.04	380.22	362.30	331.43	330.70	322.61	320.79	316.52	313.78
20	481.57	471.32	413.83	408.98	407.71	394.85	391.94	373.47	341.64	340.89	332.55	330.68	326.27	323.45
21	496.46	485.90	426.63	421.63	420.32	407.06	404.06	385.02	352.21	351.44	342.83	340.91	336.36	333.45
22	496.46	485.90	426.63	421.63	420.32	407.06	404.06	385.02	352.21	351.44	342.83	340.91	336.36	333.45
23	496.46	485.90	426.63	421.63	420.32	407.06	404.06	385.02	352.21	351.44	342.83	340.91	336.36	333.45
24	496.46	485.90	426.63	421.63	420.32	407.06	404.06	385.02	352.21	351.44	342.83	340.91	336.36	333.45
25	498.45	487.84	428.33	423.32	422.00	408.69	405.68	386.56	353.62	352.84	344.21	342.27	337.71	334.78
26	508.38	497.56	436.87	431.75	430.41	416.83	413.76	394.26	360.66	359.87	351.06	349.09	344.43	341.45
27	520.29	509.22	447.11	441.87	440.49	426.60	423.46	403.50	369.11	368.31	359.29	357.27	352.51	349.46
28	539.65	528.17	463.74	458.32	456.89	442.47	439.22	418.52	382.85	382.01	372.66	370.56	365.62	362.46
29	555.54	543.72	477.40	471.81	470.34	455.50	452.15	430.84	394.12	393.26	383.63	381.47	376.39	373.13
30	563.48	551.49	484.22	478.55	477.06	462.01	458.61	437.00	399.75	398.88	389.12	386.93	381.77	378.47
31	575.40	563.16	494.46	488.67	487.15	471.78	468.31	446.24	408.21	407.32	397.34	395.11	389.84	386.47
32	587.31	574.82	504.70	498.79	497.24	481.55	478.01	455.48	416.66	415.75	405.57	403.29	397.91	394.47
33	594.76	582.11	511.10	505.12	503.54	487.66	484.07	461.25	421.94	421.02	410.72	408.41	402.96	399.47
34	602.70	589.88	517.93	511.86	510.27	494.17	490.53	467.41	427.58	426.64	416.20	413.86	408.34	404.81
35	606.68	593.77	521.34	515.24	513.63	497.43	493.76	470.49	430.40	429.46	418.94	416.59	411.03	407.48
36	610.65	597.66	524.75	518.61	516.99	500.68	497.00	473.57	433.21	432.27	421.69	419.31	413.72	410.14
37	614.62	601.54	528.17	521.98	520.35	503.94	500.23	476.65	436.03	435.08	424.43	422.04	416.41	412.81
38	618.59	605.43	531.58	525.36	523.72	507.20	503.46	479.73	438.85	437.89	427.17	424.77	419.11	415.48
39	626.53	613.20	538.40	532.10	530.44	513.71	509.93	485.89	444.49	443.51	432.66	430.22	424.49	420.81
40	634.48	620.98	545.23	538.85	537.17	520.22	516.39	492.05	450.12	449.14	438.14	435.68	429.87	426.15
41	646.39	632.64	555.47	548.97	547.25	529.99	526.09	501.29	458.57	457.57	446.37	443.86	437.94	434.15
42	657.81	643.82	565.28	558.66	556.92	539.36	535.38	510.15	466.67	465.65	454.25	451.70	445.68	441.82
43	673.70	659.36	578.93	572.16	570.37	552.38	548.31	522.47	477.94	476.90	465.23	462.61	456.44	452.49
44	693.56	678.80	596.00	589.02	587.18	568.66	564.47	537.87	492.03	490.96	478.94	476.25	469.90	465.83
45	716.89	701.64	616.05	608.84	606.94	587.80	583.47	555.97	508.59	507.47	495.05	492.27	485.70	481.50
46	744.69	728.85	639.94	632.45	630.48	610.59	606.09	577.53	528.31	527.16	514.25	511.36	504.54	500.18
47	775.97	759.46	666.82	659.01	656.96	636.24	631.55	601.78	550.50	549.30	535.85	532.84	525.73	521.18
48	811.71	794.44	697.54	689.37	687.22	665.54	660.64	629.51	575.86	574.60	560.53	557.38	549.95	545.19
49	846.96	828.94	727.83	719.31	717.06	694.45	689.33	656.84	600.86	599.55	584.87	581.59	573.83	568.87
50	886.68	867.81	761.96	753.04	750.69	727.01	721.66	687.64	629.04	627.67	612.30	608.86	600.74	595.54
51	925.90	906.20	795.66	786.35	783.89	759.17	753.58	718.06	656.87	655.43	639.39	635.79	627.31	621.89
52	969.09	948.47	832.78	823.03	820.46	794.58	788.73	751.56	687.51	686.00	669.21	665.45	656.58	650.90
53	1,012.78	991.23	870.32	860.13	857.45	830.40	824.29	785.44	718.50	716.93	699.38	695.45	686.18	680.24
54	1,059.95	1,037.39	910.85	900.19	897.38	869.07	862.67	822.02	751.96	750.32	731.95	727.83	718.13	711.92
55	1,107.11	1,083.55	951.38	940.24	937.31	907.74	901.06	858.59	785.42	783.70	764.52	760.22	750.08	743.59
56	1,158.24	1,133.60	995.32	983.67	980.60	949.67	942.68	898.25	821.70	819.90	799.83	795.33	784.73	777.94
57	1,209.88	1,184.13	1,039.69	1,027.52	1,024.31	992.01	984.70	938.29	858.33	856.45	835.49	830.79	819.71	812.62
58	1,264.98	1,238.07	1,087.05	1,074.32	1,070.97	1,037.19	1,029.55	981.03	897.42	895.46	873.54	868.63	857.05	849.63
59	1,292.29	1,264.79	1,110.51	1,097.51	1,094.09	1,059.58	1,051.77	1,002.20	916.79	914.79	892.40	887.38	875.55	867.97
60	1,347.40	1,318.73	1,157.87	1,144.31	1,140.74	1,104.76	1,096.62	1,044.94	955.89	953.80	930.45	925.22	912.88	904.98
61	1,395.06	1,365.37	1,198.83	1,184.79	1,181.09	1,143.84	1,135.41	1,081.90	989.70	987.54	963.36	957.95	945.17	937.00
62	1,426.33	1,395.99	1,225.70	1,211.35	1,207.57	1,169.48	1,160.87	1,106.16	1,011.89	1,009.68	984.96	979.42	966.36	958.00
63	1,465.55	1,434.37	1,259.41	1,244.66	1,240.78	1,201.64	1,192.79	1,136.58	1,039.71	1,037.44	1,012.05	1,006.35	992.94	984.35
64+	1,489.38	1,457.70	1,279.89	1,264.89	1,260.96	1,221.18	1,212.18	1,155.06	1,056.63	1,054.32	1,028.49	1,022.73	1,009.08	1,000.35

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business PPO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all PPO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

PPO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 12

San Luis Obispo, Santa Barbara and Ventura counties

Age	Platinum PPO 0/15	Platinum PPO 250/15	Gold PPO 350/25	Gold PPO 0/35	Gold PPO 500/20	Gold PPO 1000/35	Gold PPO 1600/0	Gold PPO 750/15	Silver PPO 2500/55	Silver PPO 2250/60	Silver HDHP PPO 1500/50%	Silver PPO 1700/50	Bronze PPO 6300/65	Bronze HDHP PPO 7000/0%
0-14	434.42	425.18	373.31	368.94	367.79	356.19	353.57	336.90	308.19	307.52	299.99	298.30	294.33	291.78
15	473.04	462.97	406.50	401.74	400.48	387.85	385.00	366.85	335.59	334.85	326.66	324.82	320.49	317.72
16	487.80	477.42	419.19	414.28	412.99	399.96	397.01	378.30	346.06	345.31	336.85	334.96	330.49	327.63
17	502.57	491.87	431.87	426.82	425.49	412.06	409.03	389.75	356.54	355.76	347.05	345.10	340.50	337.55
18	518.47	507.43	445.54	440.32	438.95	425.10	421.97	402.08	367.82	367.01	358.03	356.02	351.27	348.23
19	534.37	523.00	459.20	453.83	452.41	438.14	434.91	414.42	379.10	378.27	369.01	366.93	362.04	358.91
20	550.83	539.11	473.35	467.81	466.35	451.64	448.32	427.19	390.78	389.93	380.38	378.24	373.20	369.97
21	567.87	555.79	487.99	482.28	480.77	465.61	462.18	440.40	402.87	401.99	392.15	389.94	384.74	381.41
22	567.87	555.79	487.99	482.28	480.77	465.61	462.18	440.40	402.87	401.99	392.15	389.94	384.74	381.41
23	567.87	555.79	487.99	482.28	480.77	465.61	462.18	440.40	402.87	401.99	392.15	389.94	384.74	381.41
24	567.87	555.79	487.99	482.28	480.77	465.61	462.18	440.40	402.87	401.99	392.15	389.94	384.74	381.41
25	570.14	558.01	489.94	484.21	482.70	467.47	464.03	442.16	404.48	403.59	393.71	391.50	386.28	382.94
26	581.50	569.13	499.70	493.85	492.31	476.78	473.27	450.97	412.54	411.63	401.56	399.30	393.97	390.57
27	595.13	582.47	511.42	505.43	503.85	487.96	484.37	461.54	422.20	421.28	410.97	408.66	403.21	399.72
28	617.27	604.14	530.45	524.24	522.60	506.12	502.39	478.71	437.92	436.96	426.26	423.86	418.21	414.60
29	635.45	621.93	546.06	539.67	537.99	521.02	517.18	492.81	450.81	449.82	438.81	436.34	430.53	426.80
30	644.53	630.82	553.87	547.39	545.68	528.47	524.58	499.85	457.25	456.25	445.09	442.58	436.68	432.90
31	658.16	644.16	565.58	558.96	557.22	539.64	535.67	510.42	466.92	465.90	454.50	451.94	445.91	442.06
32	671.79	657.50	577.30	570.54	568.76	550.82	546.76	520.99	476.59	475.55	463.91	461.30	455.15	451.21
33	680.31	665.83	584.61	577.77	575.97	557.80	553.69	527.60	482.63	481.58	469.79	467.15	460.92	456.93
34	689.39	674.73	592.42	585.49	583.66	565.25	561.09	534.64	489.08	488.01	476.06	473.39	467.08	463.03
35	693.94	679.17	596.33	589.35	587.51	568.98	564.78	538.17	492.30	491.23	479.20	476.51	470.15	466.09
36	698.48	683.62	600.23	593.20	591.35	572.70	568.48	541.69	495.53	494.44	482.34	479.63	473.23	469.14
37	703.02	688.07	604.13	597.06	595.20	576.43	572.18	545.21	498.75	497.66	485.48	482.75	476.31	472.19
38	707.57	692.51	608.04	600.92	599.04	580.15	575.88	548.74	501.97	500.87	488.61	485.87	479.39	475.24
39	716.65	701.40	615.85	608.64	606.74	587.60	583.27	555.78	508.42	507.31	494.89	492.10	485.54	481.34
40	725.74	710.30	623.65	616.35	614.43	595.05	590.67	562.83	514.86	513.74	501.16	498.34	491.70	487.45
41	739.37	723.64	635.37	627.93	625.97	606.22	601.76	573.40	524.53	523.39	510.57	507.70	500.93	496.60
42	752.43	736.42	646.59	639.02	637.03	616.93	612.39	583.53	533.80	532.63	519.59	516.67	509.78	505.37
43	770.60	754.20	662.21	654.45	652.41	631.83	627.18	597.62	546.69	545.49	532.14	529.15	522.09	517.58
44	793.31	776.44	681.73	673.74	671.64	650.46	645.67	615.24	562.80	561.57	547.83	544.75	537.48	532.83
45	820.00	802.56	704.66	696.41	694.24	672.34	667.39	635.94	581.74	580.47	566.26	563.07	555.57	550.76
46	851.81	833.68	731.99	723.42	721.16	698.42	693.27	660.60	604.30	602.98	588.22	584.91	577.11	572.12
47	887.58	868.70	762.73	753.80	751.45	727.75	722.39	688.34	629.68	628.30	612.92	609.48	601.35	596.15
48	928.47	908.71	797.87	788.53	786.07	761.27	755.67	720.05	658.69	657.25	641.16	637.55	629.05	623.61
49	968.79	948.17	832.52	822.77	820.20	794.33	788.48	751.32	687.29	685.79	669.00	665.24	656.37	650.69
50	1,014.22	992.64	871.55	861.35	858.66	831.58	825.45	786.55	719.52	717.95	700.37	696.43	687.15	681.20
51	1,059.08	1,036.54	910.11	899.45	896.64	868.36	861.97	821.34	751.35	749.70	731.35	727.24	717.54	711.33
52	1,108.48	1,084.90	952.56	941.41	938.47	908.87	902.18	859.66	786.40	784.68	765.47	761.16	751.01	744.52
53	1,158.46	1,133.81	995.50	983.85	980.78	949.84	942.85	898.41	821.85	820.05	799.98	795.48	784.87	778.08
54	1,212.40	1,186.61	1,041.86	1,029.67	1,026.45	994.08	986.76	940.25	860.12	858.24	837.23	832.52	821.42	814.32
55	1,266.35	1,239.41	1,088.22	1,075.48	1,072.13	1,038.31	1,030.66	982.09	898.39	896.43	874.48	869.57	857.97	850.55
56	1,324.84	1,296.65	1,138.49	1,125.16	1,121.65	1,086.27	1,078.27	1,027.45	939.89	937.83	914.88	909.73	897.60	889.84
57	1,383.90	1,354.46	1,189.24	1,175.32	1,171.65	1,134.69	1,126.33	1,073.25	981.79	979.64	955.66	950.28	937.61	929.50
58	1,446.93	1,416.15	1,243.40	1,228.85	1,225.01	1,186.37	1,177.64	1,122.14	1,026.50	1,024.26	999.19	993.57	980.32	971.84
59	1,478.17	1,446.72	1,270.24	1,255.37	1,251.46	1,211.98	1,203.06	1,146.36	1,048.66	1,046.37	1,020.75	1,015.01	1,001.48	992.82
60	1,541.20	1,508.41	1,324.41	1,308.91	1,304.82	1,263.67	1,254.36	1,195.24	1,093.38	1,090.99	1,064.28	1,058.30	1,044.19	1,035.15
61	1,595.72	1,561.76	1,371.26	1,355.21	1,350.98	1,308.36	1,298.73	1,237.52	1,132.06	1,129.58	1,101.93	1,095.73	1,081.12	1,071.77
62	1,631.49	1,596.78	1,402.00	1,385.59	1,381.26	1,337.70	1,327.85	1,265.27	1,157.44	1,154.91	1,126.63	1,120.30	1,105.36	1,095.80
63	1,676.35	1,640.69	1,440.55	1,423.69	1,419.25	1,374.48	1,364.36	1,300.06	1,189.26	1,186.66	1,157.61	1,151.10	1,135.76	1,125.93
64+	1,703.61	1,667.37	1,463.97	1,446.84	1,442.31	1,396.83	1,386.54	1,321.20	1,208.61	1,205.97	1,176.45	1,169.82	1,154.22	1,144.23

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business PPO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all PPO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

PPO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 14 Kern County

Age	Platinum PPO 0/15	Platinum PPO 250/15	Gold PPO 350/25	Gold PPO 0/35	Gold PPO 500/20	Gold PPO 1000/35	Gold PPO 1600/0	Gold PPO 750/15	Silver PPO 2500/55	Silver PPO 2250/60	Silver HDHP PPO 1500/50%	Silver PPO 1700/50	Bronze PPO 6300/65	Bronze HDHP PPO 7000/0%
0-14	380.43	372.34	326.92	323.09	322.08	311.93	309.63	295.04	269.89	269.30	262.71	261.23	257.75	255.52
15	414.25	405.43	355.98	351.81	350.71	339.65	337.15	321.26	293.88	293.24	286.06	284.45	280.66	278.23
16	427.18	418.09	367.09	362.79	361.66	350.25	347.67	331.29	303.05	302.39	294.99	293.33	289.42	286.92
17	440.11	430.74	378.20	373.77	372.61	360.85	358.20	341.32	312.23	311.55	303.92	302.21	298.18	295.60
18	454.03	444.37	390.17	385.60	384.40	372.27	369.53	352.11	322.11	321.40	313.53	311.77	307.61	304.95
19	467.96	458.00	402.13	397.43	396.18	383.69	380.86	362.91	331.98	331.26	323.15	321.33	317.05	314.31
20	482.38	472.11	414.53	409.67	408.39	395.51	392.60	374.10	342.22	341.47	333.11	331.24	326.82	323.99
21	497.30	486.72	427.35	422.34	421.03	407.75	404.74	385.67	352.80	352.03	343.41	341.48	336.93	334.01
22	497.30	486.72	427.35	422.34	421.03	407.75	404.74	385.67	352.80	352.03	343.41	341.48	336.93	334.01
23	497.30	486.72	427.35	422.34	421.03	407.75	404.74	385.67	352.80	352.03	343.41	341.48	336.93	334.01
24	497.30	486.72	427.35	422.34	421.03	407.75	404.74	385.67	352.80	352.03	343.41	341.48	336.93	334.01
25	499.29	488.66	429.06	424.03	422.71	409.38	406.36	387.21	354.21	353.44	344.78	342.85	338.27	335.35
26	509.23	498.40	437.60	432.48	431.13	417.53	414.46	394.92	361.27	360.48	351.65	349.68	345.01	342.03
27	521.17	510.08	447.86	442.62	441.23	427.32	424.17	404.18	369.73	368.93	359.89	357.87	353.10	350.04
28	540.56	529.06	464.53	459.09	457.65	443.22	439.95	419.22	383.49	382.65	373.29	371.19	366.24	363.07
29	556.48	544.64	478.20	472.60	471.13	456.27	452.91	431.56	394.78	393.92	384.28	382.12	377.02	373.76
30	564.43	552.42	485.04	479.36	477.86	462.79	459.38	437.73	400.43	399.55	389.77	387.58	382.41	379.10
31	576.37	564.10	495.29	489.50	487.97	472.58	469.10	446.99	408.89	408.00	398.01	395.77	390.50	387.12
32	588.30	575.79	505.55	499.63	498.07	482.36	478.81	456.24	417.36	416.45	406.26	403.97	398.58	395.14
33	595.76	583.09	511.96	505.97	504.39	488.48	484.88	462.03	422.65	421.73	411.41	409.09	403.64	400.15
34	603.72	590.87	518.80	512.72	511.12	495.00	491.36	468.20	428.30	427.36	416.90	414.56	409.03	405.49
35	607.70	594.77	522.22	516.10	514.49	498.27	494.60	471.29	431.12	430.18	419.65	417.29	411.72	408.16
36	611.68	598.66	525.64	519.48	517.86	501.53	497.83	474.37	433.94	432.99	422.40	420.02	414.42	410.83
37	615.65	602.55	529.05	522.86	521.23	504.79	501.07	477.46	436.77	435.81	425.14	422.75	417.12	413.51
38	619.63	606.45	532.47	526.24	524.60	508.05	504.31	480.54	439.59	438.63	427.89	425.48	419.81	416.18
39	627.59	614.24	539.31	533.00	531.33	514.57	510.78	486.71	445.23	444.26	433.38	430.95	425.20	421.52
40	635.55	622.02	546.15	539.75	538.07	521.10	517.26	492.88	450.88	449.89	438.88	436.41	430.59	426.87
41	647.48	633.70	556.40	549.89	548.17	530.88	526.97	502.14	459.35	458.34	447.12	444.61	438.68	434.88
42	658.92	644.90	566.23	559.60	557.86	540.26	536.28	511.01	467.46	466.44	455.02	452.46	446.43	442.57
43	674.83	660.47	579.91	573.12	571.33	553.31	549.24	523.35	478.75	477.70	466.01	463.39	457.21	453.25
44	694.72	679.94	597.00	590.01	588.17	569.62	565.43	538.78	492.86	491.78	479.75	477.05	470.69	466.61
45	718.10	702.82	617.09	609.86	607.96	588.78	584.45	556.90	509.44	508.33	495.89	493.10	486.52	482.31
46	745.95	730.07	641.02	633.52	631.54	611.62	607.11	578.50	529.20	528.04	515.12	512.22	505.39	501.02
47	777.28	760.74	667.94	660.12	658.06	637.31	632.61	602.80	551.43	550.22	536.75	533.73	526.62	522.06
48	813.08	795.78	698.71	690.53	688.38	666.66	661.75	630.57	576.83	575.57	561.48	558.32	550.88	546.11
49	848.39	830.34	729.05	720.52	718.27	695.61	690.49	657.95	601.88	600.56	585.86	582.56	574.80	569.82
50	888.17	869.28	763.24	754.31	751.95	728.23	722.87	688.80	630.10	628.72	613.33	609.88	601.75	596.55
51	927.46	907.73	797.00	787.67	785.21	760.45	754.84	719.27	657.97	656.53	640.46	636.86	628.37	622.93
52	970.72	950.07	834.18	824.41	821.84	795.92	790.06	752.82	688.66	687.16	670.34	666.57	657.68	651.99
53	1,014.49	992.90	871.79	861.58	858.89	831.80	825.67	786.76	719.71	718.14	700.56	696.62	687.33	681.38
54	1,061.73	1,039.14	912.38	901.70	898.89	870.54	864.12	823.40	753.23	751.58	733.18	729.06	719.34	713.12
55	1,108.97	1,085.38	952.98	941.83	938.89	909.27	902.58	860.04	786.74	785.02	765.81	761.50	751.35	744.85
56	1,160.19	1,135.51	997.00	985.33	982.25	951.27	944.26	899.76	823.08	821.28	801.18	796.67	786.05	779.25
57	1,211.91	1,186.13	1,041.44	1,029.25	1,026.04	993.68	986.36	939.87	859.77	857.89	836.89	832.19	821.09	813.99
58	1,267.11	1,240.15	1,088.88	1,076.13	1,072.77	1,038.94	1,031.28	982.68	898.93	896.97	875.01	870.09	858.49	851.06
59	1,294.46	1,266.92	1,112.38	1,099.36	1,095.93	1,061.36	1,053.54	1,003.89	918.34	916.33	893.90	888.87	877.02	869.43
60	1,349.66	1,320.95	1,159.82	1,146.24	1,142.66	1,106.62	1,098.47	1,046.70	957.50	955.41	932.02	926.78	914.42	906.51
61	1,397.41	1,367.67	1,200.84	1,186.78	1,183.08	1,145.77	1,137.33	1,083.72	991.37	989.20	964.98	959.56	946.76	938.57
62	1,428.73	1,398.34	1,227.77	1,213.39	1,209.61	1,171.45	1,162.82	1,108.02	1,013.59	1,011.38	986.62	981.07	967.99	959.62
63	1,468.02	1,436.79	1,261.53	1,246.76	1,242.87	1,203.67	1,194.80	1,138.49	1,041.46	1,039.19	1,013.75	1,008.05	994.61	986.00
64+	1,491.90	1,460.16	1,282.05	1,267.02	1,263.09	1,223.25	1,214.22	1,157.01	1,058.40	1,056.09	1,030.23	1,024.44	1,010.79	1,002.03

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business PPO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all PPO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

PPO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 17

Riverside and San Bernardino counties

Age	Platinum PPO 0/15	Platinum PPO 250/15	Gold PPO 350/25	Gold PPO 0/35	Gold PPO 500/20	Gold PPO 1000/35	Gold PPO 1600/0	Gold PPO 750/15	Silver PPO 2500/55	Silver PPO 2250/60	Silver HDHP PPO 1500/50%	Silver PPO 1700/50	Bronze PPO 6300/65	Bronze HDHP PPO 7000/0%
0-14	409.37	400.66	351.78	347.67	346.58	335.65	333.18	317.48	290.42	289.78	282.69	281.10	277.35	274.95
15	445.76	436.27	383.05	378.57	377.39	365.49	362.79	345.70	316.23	315.54	307.82	306.09	302.01	299.39
16	459.67	449.89	395.01	390.39	389.17	376.89	374.12	356.49	326.10	325.39	317.43	315.64	311.43	308.74
17	473.58	463.51	406.97	402.20	400.95	388.30	385.44	367.28	335.97	335.24	327.03	325.19	320.86	318.08
18	488.56	478.17	419.84	414.93	413.63	400.59	397.64	378.90	346.60	345.85	337.38	335.48	331.01	328.15
19	503.55	492.83	432.72	427.65	426.32	412.87	409.83	390.52	357.23	356.45	347.73	345.77	341.16	338.21
20	519.07	508.02	446.05	440.83	439.46	425.59	422.46	402.55	368.24	367.44	358.44	356.43	351.68	348.63
21	535.12	523.73	459.85	454.47	453.05	438.76	435.53	415.00	379.63	378.80	369.53	367.45	362.55	359.42
22	535.12	523.73	459.85	454.47	453.05	438.76	435.53	415.00	379.63	378.80	369.53	367.45	362.55	359.42
23	535.12	523.73	459.85	454.47	453.05	438.76	435.53	415.00	379.63	378.80	369.53	367.45	362.55	359.42
24	535.12	523.73	459.85	454.47	453.05	438.76	435.53	415.00	379.63	378.80	369.53	367.45	362.55	359.42
25	537.26	525.83	461.69	456.28	454.86	440.51	437.27	416.66	381.15	380.32	371.01	368.92	364.00	360.85
26	547.96	536.30	470.89	465.37	463.92	449.29	445.98	424.96	388.74	387.89	378.40	376.27	371.25	368.04
27	560.81	548.87	481.92	476.28	474.79	459.82	456.43	434.92	397.86	396.99	387.27	385.09	379.95	376.67
28	581.68	569.30	499.86	494.00	492.46	476.93	473.42	451.11	412.66	411.76	401.68	399.42	394.09	390.69
29	598.80	586.06	514.57	508.55	506.96	490.97	487.35	464.39	424.81	423.88	413.50	411.18	405.70	402.19
30	607.36	594.44	521.93	515.82	514.21	497.99	494.32	471.03	430.88	429.94	419.42	417.06	411.50	407.94
31	620.20	607.01	532.97	526.73	525.08	508.52	504.77	480.99	439.99	439.03	428.29	425.88	420.20	416.56
32	633.05	619.58	544.00	537.63	535.95	519.05	515.23	490.95	449.11	448.12	437.15	434.70	428.90	425.19
33	641.07	627.43	550.90	544.45	542.75	525.63	521.76	497.17	454.80	453.81	442.70	440.21	434.34	430.58
34	649.64	635.81	558.26	551.72	550.00	532.65	528.73	503.81	460.87	459.87	448.61	446.09	440.14	436.33
35	653.92	640.00	561.94	555.36	553.62	536.16	532.21	507.13	463.91	462.90	451.57	449.03	443.04	439.21
36	658.20	644.19	565.61	558.99	557.25	539.67	535.70	510.45	466.95	465.93	454.52	451.97	445.94	442.08
37	662.48	648.38	569.29	562.63	560.87	543.18	539.18	513.77	469.99	468.96	457.48	454.91	448.84	444.96
38	666.76	652.57	572.97	566.26	564.50	546.69	542.67	517.09	473.02	471.99	460.43	457.84	451.74	447.83
39	675.32	660.95	580.33	573.54	571.75	553.71	549.63	523.73	479.10	478.05	466.35	463.72	457.54	453.58
40	683.88	669.33	587.69	580.81	578.99	560.73	556.60	530.37	485.17	484.11	472.26	469.60	463.34	459.33
41	696.73	681.90	598.72	591.71	589.87	571.26	567.05	540.33	494.28	493.20	481.13	478.42	472.04	467.96
42	709.03	693.95	609.30	602.17	600.29	581.35	577.07	549.88	503.01	501.91	489.63	486.87	480.38	476.23
43	726.16	710.71	624.02	616.71	614.79	595.39	591.01	563.16	515.16	514.04	501.45	498.63	491.98	487.73
44	747.56	731.66	642.41	634.89	632.91	612.94	608.43	579.76	530.35	529.19	516.23	513.33	506.49	502.10
45	772.71	756.27	664.02	656.25	654.20	633.57	628.90	599.26	548.19	546.99	533.60	530.60	523.53	519.00
46	802.68	785.60	689.77	681.70	679.57	658.14	653.29	622.50	569.45	568.20	554.29	551.18	543.83	539.12
47	836.39	818.60	718.74	710.33	708.11	685.78	680.73	648.65	593.37	592.07	577.58	574.33	566.67	561.77
48	874.92	856.31	751.85	743.05	740.73	717.37	712.08	678.53	620.70	619.34	604.18	600.78	592.77	587.64
49	912.92	893.49	784.50	775.32	772.90	748.52	743.01	707.99	647.65	646.24	630.42	626.87	618.51	613.16
50	955.72	935.39	821.29	811.68	809.14	783.62	777.85	741.19	678.02	676.54	659.98	656.27	647.52	641.92
51	998.00	976.77	857.62	847.58	844.93	818.28	812.26	773.98	708.01	706.47	689.17	685.30	676.16	670.31
52	1,044.55	1,022.33	897.63	887.12	884.35	856.45	850.15	810.08	741.04	739.42	721.32	717.27	707.70	701.58
53	1,091.65	1,068.42	938.09	927.11	924.22	895.07	888.47	846.60	774.45	772.76	753.84	749.60	739.61	733.21
54	1,142.48	1,118.17	981.78	970.28	967.26	936.75	929.85	886.03	810.52	808.74	788.95	784.51	774.05	767.35
55	1,193.32	1,167.93	1,025.46	1,013.46	1,010.30	978.43	971.22	925.45	846.58	844.73	824.05	819.42	808.49	801.50
56	1,248.44	1,221.87	1,072.83	1,060.27	1,056.96	1,023.62	1,016.08	968.20	885.68	883.75	862.11	857.26	845.83	838.52
57	1,304.09	1,276.34	1,120.65	1,107.53	1,104.08	1,069.25	1,061.38	1,011.36	925.16	923.14	900.54	895.48	883.54	875.90
58	1,363.49	1,334.48	1,171.70	1,157.98	1,154.36	1,117.95	1,109.72	1,057.42	967.30	965.19	941.56	936.27	923.78	915.79
59	1,392.92	1,363.28	1,196.99	1,182.97	1,179.28	1,142.09	1,133.67	1,080.25	988.18	986.02	961.89	956.48	943.72	935.56
60	1,452.32	1,421.42	1,248.03	1,233.42	1,229.57	1,190.79	1,182.02	1,126.31	1,030.32	1,028.07	1,002.90	997.26	983.97	975.45
61	1,503.69	1,471.69	1,292.18	1,277.05	1,273.06	1,232.91	1,223.83	1,166.15	1,066.77	1,064.44	1,038.38	1,032.54	1,018.77	1,009.96
62	1,537.40	1,504.69	1,321.15	1,305.68	1,301.60	1,260.55	1,251.27	1,192.30	1,090.68	1,088.30	1,061.66	1,055.69	1,041.61	1,032.60
63	1,579.67	1,546.06	1,357.47	1,341.58	1,337.40	1,295.21	1,285.67	1,225.08	1,120.68	1,118.23	1,090.85	1,084.72	1,070.25	1,061.00
64+	1,605.36	1,571.19	1,379.55	1,363.41	1,359.15	1,316.28	1,306.59	1,245.00	1,138.89	1,136.40	1,108.59	1,102.35	1,087.65	1,078.26

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business PPO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all PPO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

PPO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region
18

Orange County

Age	Platinum PPO 0/15	Platinum PPO 250/15	Gold PPO 350/25	Gold PPO 0/35	Gold PPO 500/20	Gold PPO 1000/35	Gold PPO 1600/0	Gold PPO 750/15	Silver PPO 2500/55	Silver PPO 2250/60	Silver HDHP PPO 1500/50%	Silver PPO 1700/50	Bronze PPO 6300/65	Bronze HDHP PPO 7000/0%
0-14	412.54	403.77	354.51	350.36	349.27	338.25	335.76	319.94	292.67	292.03	284.88	283.28	279.50	277.09
15	449.21	439.66	386.03	381.51	380.32	368.32	365.61	348.38	318.69	317.99	310.21	308.46	304.35	301.72
16	463.23	453.38	398.08	393.41	392.19	379.82	377.02	359.25	328.63	327.92	319.89	318.09	313.85	311.13
17	477.26	467.10	410.12	405.32	404.06	391.31	388.43	370.12	338.58	337.84	329.57	327.72	323.35	320.55
18	492.36	481.88	423.10	418.15	416.84	403.69	400.72	381.83	349.29	348.53	340.00	338.09	333.58	330.69
19	507.46	496.66	436.08	430.97	429.63	416.07	413.01	393.55	360.01	359.22	350.43	348.45	343.81	340.83
20	523.09	511.96	449.51	444.25	442.87	428.90	425.74	405.67	371.10	370.29	361.23	359.19	354.40	351.34
21	539.27	527.80	463.42	457.99	456.56	442.16	438.91	418.22	382.58	381.74	372.40	370.30	365.37	362.20
22	539.27	527.80	463.42	457.99	456.56	442.16	438.91	418.22	382.58	381.74	372.40	370.30	365.37	362.20
23	539.27	527.80	463.42	457.99	456.56	442.16	438.91	418.22	382.58	381.74	372.40	370.30	365.37	362.20
24	539.27	527.80	463.42	457.99	456.56	442.16	438.91	418.22	382.58	381.74	372.40	370.30	365.37	362.20
25	541.43	529.91	465.27	459.82	458.39	443.93	440.66	419.89	384.11	383.27	373.89	371.78	366.83	363.65
26	552.21	540.47	474.54	468.98	467.52	452.77	449.44	428.26	391.76	390.90	381.33	379.19	374.13	370.90
27	565.16	553.13	485.66	479.98	478.48	463.39	459.97	438.29	400.94	400.07	390.27	388.08	382.90	379.59
28	586.19	573.72	503.73	497.84	496.28	480.63	477.09	454.61	415.86	414.95	404.80	402.52	397.15	393.72
29	603.45	590.61	518.56	512.49	510.89	494.78	491.13	467.99	428.11	427.17	416.71	414.37	408.84	405.31
30	612.07	599.05	525.98	519.82	518.20	501.85	498.16	474.68	434.23	433.28	422.67	420.29	414.69	411.10
31	625.02	611.72	537.10	530.81	529.16	512.47	508.69	484.72	443.41	442.44	431.61	429.18	423.46	419.80
32	637.96	624.39	548.22	541.80	540.11	523.08	519.22	494.75	452.59	451.60	440.55	438.07	432.23	428.49
33	646.05	632.30	555.17	548.67	546.96	529.71	525.81	501.03	458.33	457.33	446.13	443.62	437.71	433.92
34	654.68	640.75	562.59	556.00	554.27	536.78	532.83	507.72	464.45	463.43	452.09	449.55	443.55	439.72
35	658.99	644.97	566.30	559.67	557.92	540.32	536.34	511.06	467.51	466.49	455.07	452.51	446.48	442.61
36	663.30	649.19	570.00	563.33	561.57	543.86	539.85	514.41	470.57	469.54	458.05	455.47	449.40	445.51
37	667.62	653.41	573.71	566.99	565.22	547.40	543.36	517.76	473.63	472.60	461.03	458.43	452.32	448.41
38	671.93	657.64	577.42	570.66	568.88	550.93	546.88	521.10	476.69	475.65	464.01	461.40	455.25	451.31
39	680.56	666.08	584.83	577.99	576.18	558.01	553.90	527.79	482.81	481.76	469.97	467.32	461.09	457.10
40	689.19	674.53	592.25	585.31	583.49	565.08	560.92	534.49	488.93	487.87	475.92	473.25	466.94	462.90
41	702.13	687.19	603.37	596.31	594.44	575.69	571.45	544.52	498.12	497.03	484.86	482.13	475.71	471.59
42	714.54	699.33	614.03	606.84	604.95	585.86	581.55	554.14	506.92	505.81	493.43	490.65	484.11	479.92
43	731.79	716.22	628.86	621.49	619.56	600.01	595.59	567.52	519.16	518.02	505.34	502.50	495.80	491.51
44	753.36	737.33	647.39	639.81	637.82	617.70	613.15	584.25	534.46	533.29	520.24	517.31	510.42	506.00
45	778.71	762.14	669.17	661.34	659.28	638.48	633.78	603.91	552.44	551.24	537.74	534.72	527.59	523.02
46	808.91	791.70	695.13	686.99	684.84	663.24	658.36	627.33	573.87	572.61	558.60	555.45	548.05	543.31
47	842.88	824.95	724.32	715.84	713.61	691.10	686.01	653.68	597.97	596.66	582.06	578.78	571.07	566.13
48	881.71	862.95	757.69	748.82	746.48	722.93	717.61	683.79	625.52	624.15	608.87	605.44	597.37	592.20
49	920.00	900.42	790.59	781.33	778.90	754.33	748.77	713.48	652.68	651.25	635.31	631.74	623.31	617.92
50	963.14	942.65	827.66	817.97	815.42	789.70	783.88	746.94	683.28	681.79	665.10	661.36	652.54	646.90
51	1,005.74	984.34	864.27	854.15	851.49	824.63	818.56	779.98	713.51	711.95	694.52	690.61	681.41	675.51
52	1,052.66	1,030.26	904.59	894.00	891.21	863.10	856.74	816.37	746.79	745.16	726.92	722.83	713.19	707.02
53	1,100.12	1,076.71	945.37	934.30	931.39	902.01	895.37	853.17	780.46	778.75	759.69	755.42	745.35	738.90
54	1,151.35	1,126.85	989.40	977.81	974.76	944.02	937.06	892.90	816.80	815.02	795.07	790.60	780.06	773.31
55	1,202.58	1,176.99	1,033.42	1,021.32	1,018.13	986.02	978.76	932.63	853.15	851.28	830.45	825.78	814.76	807.72
56	1,258.12	1,231.35	1,081.15	1,068.49	1,065.16	1,031.56	1,023.97	975.71	892.56	890.60	868.80	863.92	852.40	845.02
57	1,314.21	1,286.24	1,129.35	1,116.13	1,112.64	1,077.55	1,069.61	1,019.20	932.34	930.30	907.53	902.43	890.40	882.69
58	1,374.07	1,344.83	1,180.79	1,166.96	1,163.32	1,126.63	1,118.33	1,065.62	974.81	972.68	948.87	943.53	930.95	922.90
59	1,403.73	1,373.86	1,206.27	1,192.15	1,188.43	1,150.95	1,142.47	1,088.63	995.85	993.67	969.35	963.90	951.05	942.82
60	1,463.58	1,432.44	1,257.71	1,242.99	1,239.11	1,200.03	1,191.19	1,135.05	1,038.32	1,036.05	1,010.69	1,005.00	991.60	983.02
61	1,515.35	1,483.11	1,302.20	1,286.96	1,282.94	1,242.48	1,233.32	1,175.20	1,075.04	1,072.69	1,046.44	1,040.55	1,026.68	1,017.79
62	1,549.33	1,516.36	1,331.40	1,315.81	1,311.70	1,270.33	1,260.97	1,201.55	1,099.15	1,096.74	1,069.90	1,063.88	1,049.69	1,040.61
63	1,591.93	1,558.06	1,368.01	1,351.99	1,347.77	1,305.26	1,295.65	1,234.59	1,129.37	1,126.90	1,099.32	1,093.13	1,078.56	1,069.23
64+	1,617.81	1,583.40	1,390.26	1,373.97	1,369.68	1,326.48	1,316.73	1,254.66	1,147.74	1,145.22	1,117.20	1,110.90	1,096.11	1,086.60

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business PPO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all PPO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

PPO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 19

San Diego County

Age	Platinum PPO 0/15	Platinum PPO 250/15	Gold PPO 350/25	Gold PPO 0/35	Gold PPO 500/20	Gold PPO 1000/35	Gold PPO 1600/0	Gold PPO 750/15	Silver PPO 2500/55	Silver PPO 2250/60	Silver HDHP PPO 1500/50%	Silver PPO 1700/50	Bronze PPO 6300/65	Bronze HDHP PPO 7000/0%
0-14	446.05	436.56	383.31	378.82	377.64	365.72	363.03	345.92	316.44	315.75	308.02	306.29	302.20	299.59
15	485.70	475.36	417.38	412.49	411.20	398.23	395.30	376.67	344.57	343.82	335.40	333.51	329.07	326.22
16	500.86	490.20	430.40	425.37	424.04	410.66	407.64	388.43	355.32	354.55	345.87	343.92	339.34	336.40
17	516.02	505.04	443.43	438.24	436.87	423.09	419.98	400.18	366.08	365.28	356.34	354.33	349.61	346.58
18	532.34	521.01	457.46	452.11	450.69	436.48	433.26	412.84	377.66	376.84	367.61	365.54	360.67	357.55
19	548.67	536.99	471.49	465.97	464.52	449.86	446.55	425.51	389.24	388.39	378.88	376.75	371.73	368.51
20	565.58	553.54	486.02	480.33	478.83	463.73	460.31	438.62	401.24	400.36	390.56	388.36	383.19	379.87
21	583.07	570.66	501.05	495.19	493.64	478.07	474.55	452.18	413.65	412.74	402.64	400.38	395.04	391.62
22	583.07	570.66	501.05	495.19	493.64	478.07	474.55	452.18	413.65	412.74	402.64	400.38	395.04	391.62
23	583.07	570.66	501.05	495.19	493.64	478.07	474.55	452.18	413.65	412.74	402.64	400.38	395.04	391.62
24	583.07	570.66	501.05	495.19	493.64	478.07	474.55	452.18	413.65	412.74	402.64	400.38	395.04	391.62
25	585.40	572.94	503.06	497.17	495.62	479.98	476.45	453.99	415.30	414.40	404.25	401.98	396.62	393.19
26	597.06	584.36	513.08	507.07	505.49	489.54	485.94	463.04	423.58	422.65	412.30	409.98	404.52	401.02
27	611.06	598.05	525.10	518.96	517.34	501.02	497.33	473.89	433.50	432.56	421.97	419.59	414.00	410.42
28	633.79	620.31	544.64	538.27	536.59	519.66	515.84	491.52	449.64	448.65	437.67	435.21	429.41	425.69
29	652.45	638.57	560.68	554.11	552.38	534.96	531.02	505.99	462.87	461.86	450.55	448.02	442.05	438.22
30	661.78	647.70	568.69	562.04	560.28	542.61	538.61	513.23	469.49	468.46	457.00	454.43	448.37	444.49
31	675.78	661.40	580.72	573.92	572.13	554.08	550.00	524.08	479.42	478.37	466.66	464.04	457.85	453.89
32	689.77	675.09	592.74	585.81	583.98	565.56	561.39	534.93	489.35	488.28	476.32	473.64	467.33	463.29
33	698.52	683.65	600.26	593.23	591.38	572.73	568.51	541.72	495.55	494.47	482.36	479.65	473.26	469.16
34	707.84	692.78	608.28	601.16	599.28	580.38	576.10	548.95	502.17	501.07	488.81	486.06	479.58	475.43
35	712.51	697.35	612.29	605.12	603.23	584.20	579.90	552.57	505.48	504.37	492.03	489.26	482.74	478.56
36	717.17	701.91	616.29	609.08	607.18	588.03	583.70	556.19	508.79	507.68	495.25	492.46	485.90	481.69
37	721.84	706.48	620.30	613.04	611.13	591.85	587.49	559.80	512.10	510.98	498.47	495.67	489.06	484.83
38	726.50	711.05	624.31	617.00	615.08	595.68	591.29	563.42	515.41	514.28	501.69	498.87	492.22	487.96
39	735.83	720.18	632.33	624.93	622.97	603.33	598.88	570.66	522.02	520.88	508.13	505.27	498.54	494.22
40	745.16	729.31	640.34	632.85	630.87	610.97	606.47	577.89	528.64	527.49	514.57	511.68	504.86	500.49
41	759.15	743.00	652.37	644.73	642.72	622.45	617.86	588.74	538.57	537.39	524.24	521.29	514.34	509.89
42	772.57	756.13	663.89	656.12	654.07	633.44	628.78	599.14	548.08	546.89	533.50	530.50	523.42	518.90
43	791.22	774.39	679.93	671.97	669.87	648.74	643.96	613.61	561.32	560.09	546.38	543.31	536.07	531.43
44	814.55	797.22	699.97	691.78	689.62	667.87	662.95	631.70	577.87	576.60	562.49	559.33	551.87	547.09
45	841.95	824.04	723.52	715.05	712.82	690.33	685.25	652.95	597.31	596.00	581.41	578.14	570.43	565.50
46	874.60	855.99	751.58	742.78	740.46	717.11	711.82	678.28	620.47	619.12	603.96	600.56	592.56	587.43
47	911.34	891.95	783.14	773.98	771.56	747.23	741.72	706.76	646.53	645.12	629.33	625.79	617.44	612.10
48	953.32	933.03	819.22	809.63	807.10	781.65	775.89	739.32	676.32	674.84	658.32	654.61	645.89	640.30
49	994.71	973.55	854.80	844.79	842.15	815.59	809.58	771.43	705.68	704.14	686.90	683.04	673.93	668.10
50	1,041.36	1,019.20	894.88	884.40	881.64	853.83	847.55	807.60	738.78	737.16	719.12	715.07	705.54	699.43
51	1,087.42	1,064.29	934.46	923.52	920.64	891.60	885.04	843.32	771.45	769.77	750.92	746.70	736.75	730.37
52	1,138.15	1,113.93	978.05	966.60	963.59	933.19	926.32	882.66	807.44	805.68	785.95	781.53	771.11	764.44
53	1,189.46	1,164.15	1,022.15	1,010.18	1,007.03	975.27	968.08	922.46	843.84	842.00	821.39	816.77	805.88	798.91
54	1,244.85	1,218.36	1,069.75	1,057.22	1,053.92	1,020.68	1,013.16	965.41	883.14	881.21	859.64	854.80	843.41	836.11
55	1,300.24	1,272.58	1,117.35	1,104.27	1,100.82	1,066.10	1,058.25	1,008.37	922.44	920.42	897.89	892.84	880.93	873.31
56	1,360.30	1,331.35	1,168.96	1,155.27	1,151.66	1,115.34	1,107.12	1,054.95	965.04	962.93	939.36	934.08	921.62	913.65
57	1,420.94	1,390.70	1,221.06	1,206.77	1,203.00	1,165.06	1,156.48	1,101.97	1,008.06	1,005.86	981.23	975.72	962.71	954.38
58	1,485.66	1,454.05	1,276.68	1,261.74	1,257.80	1,218.13	1,209.15	1,152.17	1,053.98	1,051.67	1,025.93	1,020.16	1,006.56	997.85
59	1,517.73	1,485.43	1,304.24	1,288.97	1,284.95	1,244.42	1,235.25	1,177.04	1,076.73	1,074.37	1,048.07	1,042.18	1,028.28	1,019.39
60	1,582.45	1,548.78	1,359.86	1,343.94	1,339.74	1,297.48	1,287.93	1,227.23	1,122.64	1,120.19	1,092.77	1,086.62	1,072.13	1,062.86
61	1,638.42	1,603.56	1,407.96	1,391.47	1,387.13	1,343.38	1,333.48	1,270.64	1,162.35	1,159.81	1,131.42	1,125.06	1,110.06	1,100.45
62	1,675.15	1,639.51	1,439.52	1,422.67	1,418.23	1,373.50	1,363.38	1,299.13	1,188.41	1,185.81	1,156.79	1,150.28	1,134.94	1,125.12
63	1,721.22	1,684.59	1,479.11	1,461.79	1,457.23	1,411.27	1,400.87	1,334.85	1,221.09	1,218.42	1,188.59	1,181.91	1,166.15	1,156.06
64+	1,749.21	1,711.98	1,503.15	1,485.57	1,480.92	1,434.21	1,423.65	1,356.54	1,240.95	1,238.22	1,207.92	1,201.14	1,185.12	1,174.86

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business PPO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all PPO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.



HMO Rates

NEW AND RENEWING BUSINESS,
EFFECTIVE OCTOBER 1, 2023 THROUGH DECEMBER 31, 2023

HMO
PLAN RATES

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

1

Nevada County

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	358.89	367.95	355.77	348.67	329.22	327.11	322.21	317.24	290.42
15	390.79	400.65	387.39	379.67	358.49	356.18	350.85	345.44	316.23
16	402.99	413.16	399.48	391.52	369.68	367.30	361.81	356.22	326.11
17	415.18	425.66	411.57	403.37	380.86	378.42	372.76	367.00	335.98
18	428.32	439.13	424.59	416.13	392.91	390.39	384.55	378.62	346.61
19	441.46	452.60	437.62	428.89	404.96	402.36	396.34	390.23	357.24
20	455.06	466.55	451.10	442.11	417.44	414.76	408.56	402.25	368.24
21	469.13	480.97	465.05	455.78	430.36	427.59	421.19	414.69	379.63
22	469.13	480.97	465.05	455.78	430.36	427.59	421.19	414.69	379.63
23	469.13	480.97	465.05	455.78	430.36	427.59	421.19	414.69	379.63
24	469.13	480.97	465.05	455.78	430.36	427.59	421.19	414.69	379.63
25	471.01	482.90	466.91	457.60	432.08	429.30	422.88	416.35	381.15
26	480.39	492.52	476.22	466.72	440.68	437.85	431.30	424.65	388.74
27	491.65	504.06	487.38	477.66	451.01	448.12	441.41	434.60	397.86
28	509.95	522.82	505.51	495.43	467.80	464.79	457.84	450.77	412.66
29	524.96	538.21	520.40	510.02	481.57	478.47	471.32	464.04	424.81
30	532.47	545.91	527.84	517.31	488.45	485.32	478.05	470.68	430.88
31	543.73	557.45	539.00	528.25	498.78	495.58	488.16	480.63	440.00
32	554.99	568.99	550.16	539.19	509.11	505.84	498.27	490.58	449.11
33	562.02	576.21	557.13	546.03	515.57	512.25	504.59	496.80	454.80
34	569.53	583.90	564.58	553.32	522.45	519.10	511.33	503.44	460.88
35	573.28	587.75	568.30	556.97	525.89	522.52	514.70	506.76	463.91
36	577.04	591.60	572.02	560.61	529.34	525.94	518.07	510.07	466.95
37	580.79	595.45	575.74	564.26	532.78	529.36	521.44	513.39	469.99
38	584.54	599.29	579.46	567.90	536.22	532.78	524.81	516.71	473.02
39	592.05	606.99	586.90	575.20	543.11	539.62	531.55	523.34	479.10
40	599.55	614.69	594.34	582.49	549.99	546.46	538.29	529.98	485.17
41	610.81	626.23	605.50	593.43	560.32	556.72	548.39	539.93	494.28
42	621.60	637.29	616.20	603.91	570.22	566.56	558.08	549.47	503.01
43	636.62	652.68	631.08	618.50	583.99	580.24	571.56	562.74	515.16
44	655.38	671.92	649.68	636.73	601.21	597.34	588.41	579.33	530.35
45	677.43	694.53	671.54	658.15	621.43	617.44	608.20	598.82	548.19
46	703.70	721.46	697.58	683.67	645.53	641.39	631.79	622.04	569.45
47	733.26	751.76	726.88	712.39	672.65	668.33	658.33	648.17	593.37
48	767.03	786.39	760.36	745.20	703.63	699.11	688.65	678.02	620.70
49	800.34	820.54	793.38	777.56	734.19	729.47	718.56	707.47	647.65
50	837.87	859.02	830.59	814.03	768.62	763.68	752.25	740.64	678.03
51	874.94	897.02	867.33	850.03	802.61	797.46	785.53	773.40	708.02
52	915.75	938.86	907.79	889.69	840.05	834.66	822.17	809.48	741.04
53	957.03	981.19	948.71	929.79	877.93	872.29	859.23	845.98	774.45
54	1,001.60	1,026.88	992.89	973.09	918.81	912.91	899.25	885.37	810.52
55	1,046.17	1,072.57	1,037.07	1,016.39	959.69	953.53	939.26	924.77	846.58
56	1,094.49	1,122.11	1,084.97	1,063.34	1,004.02	997.57	982.64	967.48	885.68
57	1,143.28	1,172.13	1,133.34	1,110.74	1,048.78	1,042.04	1,026.45	1,010.61	925.17
58	1,195.35	1,225.52	1,184.96	1,161.33	1,096.55	1,089.50	1,073.20	1,056.64	967.31
59	1,221.16	1,251.98	1,210.54	1,186.40	1,120.22	1,113.02	1,096.37	1,079.45	988.19
60	1,273.23	1,305.36	1,262.16	1,236.99	1,167.99	1,160.48	1,143.12	1,125.48	1,030.33
61	1,318.27	1,351.54	1,306.80	1,280.75	1,209.30	1,201.53	1,183.55	1,165.29	1,066.77
62	1,347.82	1,381.84	1,336.10	1,309.46	1,236.41	1,228.47	1,210.09	1,191.42	1,090.69
63	1,384.89	1,419.84	1,372.84	1,345.47	1,270.41	1,262.25	1,243.36	1,224.18	1,120.68
64+	1,407.39	1,442.91	1,395.15	1,367.34	1,291.08	1,282.77	1,263.57	1,244.07	1,138.89

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 1

Nevada County (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	396.78	406.80	393.33	385.49	363.99	354.41	341.99	326.19	299.25
15	432.05	442.96	428.30	419.76	396.34	385.92	372.39	355.18	325.85
16	445.54	456.78	441.66	432.86	408.71	397.96	384.01	366.27	336.02
17	459.02	470.61	455.03	445.96	421.08	410.01	395.63	377.35	346.19
18	473.55	485.50	469.43	460.07	434.40	422.98	408.15	389.29	357.15
19	488.07	500.39	483.82	474.18	447.73	435.95	420.67	401.23	368.10
20	503.11	515.81	498.74	488.79	461.52	449.39	433.63	413.60	379.44
21	518.67	531.76	514.16	503.91	475.80	463.29	447.04	426.39	391.18
22	518.67	531.76	514.16	503.91	475.80	463.29	447.04	426.39	391.18
23	518.67	531.76	514.16	503.91	475.80	463.29	447.04	426.39	391.18
24	518.67	531.76	514.16	503.91	475.80	463.29	447.04	426.39	391.18
25	520.75	533.89	516.22	505.92	477.70	465.14	448.83	428.09	392.74
26	531.12	544.52	526.50	516.00	487.22	474.41	457.77	436.62	400.57
27	543.57	557.29	538.84	528.10	498.64	485.52	468.50	446.86	409.96
28	563.80	578.02	558.89	547.75	517.19	503.59	485.93	463.48	425.21
29	580.39	595.04	575.34	563.87	532.42	518.42	500.24	477.13	437.73
30	588.69	603.55	583.57	571.94	540.03	525.83	507.39	483.95	443.99
31	601.14	616.31	595.91	584.03	551.45	536.95	518.12	494.18	453.38
32	613.59	629.07	608.25	596.12	562.87	548.07	528.85	504.42	462.76
33	621.37	637.05	615.96	603.68	570.01	555.02	535.56	510.81	468.63
34	629.67	645.56	624.19	611.74	577.62	562.43	542.71	517.64	474.89
35	633.82	649.81	628.30	615.78	581.42	566.14	546.28	521.05	478.02
36	637.97	654.07	632.42	619.81	585.23	569.84	549.86	524.46	481.15
37	642.12	658.32	636.53	623.84	589.04	573.55	553.44	527.87	484.28
38	646.26	662.57	640.64	627.87	592.84	577.26	557.01	531.28	487.41
39	654.56	671.08	648.87	635.93	600.46	584.67	564.17	538.10	493.67
40	662.86	679.59	657.10	644.00	608.07	592.08	571.32	544.92	499.93
41	675.31	692.35	669.44	656.09	619.49	603.20	582.05	555.16	509.31
42	687.24	704.58	681.26	667.68	630.43	613.85	592.33	564.96	518.31
43	703.84	721.60	697.71	683.80	645.66	628.68	606.64	578.61	530.83
44	724.58	742.87	718.28	703.96	664.69	647.21	624.52	595.66	546.48
45	748.96	767.86	742.45	727.64	687.05	668.99	645.53	615.70	564.86
46	778.01	797.64	771.24	755.86	713.70	694.93	670.56	639.58	586.77
47	810.68	831.14	803.63	787.61	743.67	724.12	698.73	666.45	611.41
48	848.03	869.43	840.65	823.89	777.93	757.47	730.91	697.15	639.58
49	884.85	907.18	877.16	859.67	811.71	790.37	762.65	727.42	667.35
50	926.35	949.73	918.29	899.98	849.77	827.43	798.42	761.53	698.65
51	967.32	991.73	958.91	939.79	887.36	864.03	833.73	795.21	729.55
52	1,012.45	1,038.00	1,003.64	983.63	928.76	904.34	872.63	832.31	763.58
53	1,058.09	1,084.79	1,048.89	1,027.97	970.63	945.10	911.96	869.83	798.00
54	1,107.36	1,135.31	1,097.73	1,075.84	1,015.83	989.12	954.43	910.34	835.17
55	1,156.64	1,185.83	1,146.58	1,123.72	1,061.03	1,033.13	996.90	950.85	872.33
56	1,210.06	1,240.60	1,199.53	1,175.62	1,110.04	1,080.85	1,042.95	994.76	912.62
57	1,264.00	1,295.90	1,253.01	1,228.03	1,159.52	1,129.03	1,089.44	1,039.11	953.30
58	1,321.57	1,354.93	1,310.08	1,283.96	1,212.33	1,180.45	1,139.06	1,086.44	996.72
59	1,350.10	1,384.17	1,338.36	1,311.67	1,238.50	1,205.94	1,163.65	1,109.89	1,018.24
60	1,407.67	1,443.20	1,395.43	1,367.61	1,291.32	1,257.36	1,213.27	1,157.22	1,061.66
61	1,457.47	1,494.25	1,444.79	1,415.98	1,336.99	1,301.84	1,256.19	1,198.15	1,099.21
62	1,490.14	1,527.75	1,477.18	1,447.73	1,366.97	1,331.02	1,284.35	1,225.01	1,123.86
63	1,531.12	1,569.76	1,517.80	1,487.54	1,404.55	1,367.62	1,319.67	1,258.70	1,154.76
64+	1,556.01	1,595.28	1,542.48	1,511.73	1,427.40	1,389.87	1,341.12	1,279.17	1,173.54

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

2

Marin, Napa, Solano, and Sonoma counties

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	351.67	360.54	348.61	341.66	322.60	320.53	315.73	310.86	284.58
15	382.93	392.59	379.60	372.03	351.27	349.02	343.80	338.49	309.87
16	394.88	404.85	391.45	383.64	362.24	359.91	354.53	349.06	319.55
17	406.83	417.10	403.29	395.25	373.20	370.81	365.26	359.62	329.22
18	419.70	430.30	416.05	407.76	385.01	382.54	376.81	371.00	339.63
19	432.58	443.49	428.81	420.26	396.82	394.27	388.37	382.38	350.05
20	445.91	457.16	442.03	433.21	409.05	406.42	400.34	394.16	360.84
21	459.70	471.30	455.70	446.61	421.70	418.99	412.72	406.35	372.00
22	459.70	471.30	455.70	446.61	421.70	418.99	412.72	406.35	372.00
23	459.70	471.30	455.70	446.61	421.70	418.99	412.72	406.35	372.00
24	459.70	471.30	455.70	446.61	421.70	418.99	412.72	406.35	372.00
25	461.54	473.18	457.52	448.40	423.39	420.67	414.37	407.98	373.48
26	470.73	482.61	466.64	457.33	431.82	429.05	422.63	416.10	380.92
27	481.76	493.92	477.57	468.05	441.94	439.10	432.53	425.86	389.85
28	499.69	512.30	495.34	485.47	458.39	455.44	448.63	441.70	404.36
29	514.40	527.38	509.93	499.76	471.88	468.85	461.83	454.71	416.26
30	521.76	534.92	517.22	506.91	478.63	475.55	468.44	461.21	422.22
31	532.79	546.24	528.15	517.62	488.75	485.61	478.34	470.96	431.14
32	543.82	557.55	539.09	528.34	498.87	495.66	488.25	480.71	440.07
33	550.72	564.62	545.93	535.04	505.19	501.95	494.44	486.81	445.65
34	558.07	572.16	553.22	542.19	511.94	508.65	501.04	493.31	451.60
35	561.75	575.93	556.86	545.76	515.32	512.01	504.34	496.56	454.58
36	565.43	579.70	560.51	549.33	518.69	515.36	507.65	499.81	457.56
37	569.11	583.47	564.16	552.91	522.06	518.71	510.95	503.06	460.53
38	572.78	587.24	567.80	556.48	525.44	522.06	514.25	506.31	463.51
39	580.14	594.78	575.09	563.63	532.18	528.76	520.85	512.82	469.46
40	587.49	602.32	582.38	570.77	538.93	535.47	527.46	519.32	475.41
41	598.53	613.63	593.32	581.49	549.05	545.52	537.36	529.07	484.34
42	609.10	624.47	603.80	591.76	558.75	555.16	546.85	538.42	492.90
43	623.81	639.55	618.38	606.05	572.24	568.57	560.06	551.42	504.80
44	642.20	658.40	636.61	623.92	589.11	585.33	576.57	567.67	519.68
45	663.80	680.56	658.03	644.91	608.93	605.02	595.97	586.77	537.16
46	689.55	706.95	683.55	669.92	632.55	628.48	619.08	609.53	557.99
47	718.51	736.64	712.26	698.06	659.11	654.88	645.08	635.13	581.43
48	751.61	770.57	745.07	730.21	689.48	685.05	674.80	664.38	608.21
49	784.24	804.04	777.42	761.92	719.42	714.80	704.10	693.24	634.63
50	821.02	841.74	813.88	797.65	753.15	748.32	737.12	725.74	664.39
51	857.34	878.97	849.88	832.93	786.47	781.42	769.72	757.85	693.77
52	897.33	919.98	889.52	871.79	823.16	817.87	805.63	793.20	726.14
53	937.78	961.45	929.63	911.09	860.26	854.74	841.95	828.96	758.87
54	981.45	1,006.22	972.92	953.52	900.33	894.54	881.16	867.56	794.21
55	1,025.12	1,051.00	1,016.21	995.95	940.39	934.35	920.37	906.16	829.55
56	1,072.47	1,099.54	1,063.15	1,041.95	983.82	977.50	962.88	948.02	867.87
57	1,120.28	1,148.56	1,110.54	1,088.40	1,027.68	1,021.08	1,005.80	990.28	906.56
58	1,171.31	1,200.87	1,161.12	1,137.97	1,074.49	1,067.59	1,051.61	1,035.38	947.85
59	1,196.59	1,226.79	1,186.18	1,162.53	1,097.68	1,090.63	1,074.31	1,057.73	968.31
60	1,247.62	1,279.11	1,236.77	1,212.11	1,144.49	1,137.14	1,120.12	1,102.84	1,009.60
61	1,291.75	1,324.35	1,280.51	1,254.98	1,184.97	1,177.36	1,159.75	1,141.85	1,045.31
62	1,320.71	1,354.04	1,309.22	1,283.12	1,211.54	1,203.76	1,185.75	1,167.45	1,068.75
63	1,357.03	1,391.27	1,345.22	1,318.40	1,244.85	1,236.86	1,218.35	1,199.55	1,098.13
64+	1,379.10	1,413.90	1,367.10	1,339.83	1,265.10	1,256.97	1,238.16	1,219.05	1,116.00

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

2

Marin, Napa, Solano, and Sonoma counties (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	388.80	398.61	385.42	377.74	356.66	347.28	335.11	319.63	293.23
15	423.36	434.05	419.68	411.31	388.37	378.15	364.89	348.04	319.30
16	436.58	447.59	432.78	424.15	400.49	389.96	376.28	358.90	329.26
17	449.79	461.14	445.88	436.99	412.61	401.76	387.67	369.76	339.23
18	464.02	475.73	459.98	450.81	425.66	414.47	399.94	381.46	349.96
19	478.25	490.32	474.09	464.64	438.72	427.18	412.20	393.16	360.69
20	492.99	505.43	488.70	478.96	452.24	440.35	424.91	405.28	371.81
21	508.24	521.06	503.82	493.77	466.23	453.97	438.05	417.81	383.31
22	508.24	521.06	503.82	493.77	466.23	453.97	438.05	417.81	383.31
23	508.24	521.06	503.82	493.77	466.23	453.97	438.05	417.81	383.31
24	508.24	521.06	503.82	493.77	466.23	453.97	438.05	417.81	383.31
25	510.27	523.15	505.83	495.75	468.09	455.78	439.80	419.48	384.84
26	520.44	533.57	515.91	505.62	477.42	464.86	448.56	427.84	392.51
27	532.63	546.08	528.00	517.47	488.61	475.76	459.08	437.87	401.71
28	552.45	566.40	547.65	536.73	506.79	493.46	476.16	454.16	416.66
29	568.72	583.07	563.77	552.53	521.71	507.99	490.18	467.53	428.92
30	576.85	591.41	571.83	560.43	529.17	515.25	497.19	474.22	435.06
31	589.05	603.91	583.92	572.28	540.36	526.15	507.70	484.24	444.26
32	601.25	616.42	596.02	584.13	551.55	537.04	518.21	494.27	453.46
33	608.87	624.23	603.57	591.54	558.54	543.85	524.78	500.54	459.21
34	617.00	632.57	611.63	599.44	566.00	551.12	531.79	507.22	465.34
35	621.07	636.74	615.66	603.39	569.73	554.75	535.30	510.57	468.40
36	625.13	640.91	619.69	607.34	573.46	558.38	538.80	513.91	471.47
37	629.20	645.08	623.73	611.29	577.19	562.01	542.30	517.25	474.54
38	633.26	649.25	627.76	615.24	580.92	565.64	545.81	520.59	477.60
39	641.40	657.58	635.82	623.14	588.38	572.91	552.82	527.28	483.74
40	649.53	665.92	643.88	631.04	595.84	580.17	559.83	533.96	489.87
41	661.73	678.43	655.97	642.89	607.03	591.07	570.34	543.99	499.07
42	673.41	690.41	667.56	654.25	617.75	601.51	580.41	553.60	507.89
43	689.68	707.08	683.68	670.05	632.67	616.03	594.43	566.97	520.15
44	710.01	727.93	703.83	689.80	651.32	634.19	611.95	583.68	535.48
45	733.90	752.42	727.51	713.01	673.23	655.53	632.54	603.32	553.50
46	762.36	781.60	755.73	740.66	699.34	680.95	657.07	626.72	574.96
47	794.38	814.42	787.47	771.77	728.71	709.55	684.67	653.04	599.11
48	830.97	851.94	823.74	807.32	762.28	742.24	716.21	683.12	626.71
49	867.05	888.94	859.51	842.37	795.38	774.47	747.31	712.79	653.93
50	907.71	930.62	899.82	881.88	832.68	810.79	782.35	746.21	684.59
51	947.86	971.78	939.62	920.88	869.51	846.65	816.96	779.22	714.87
52	992.08	1,017.12	983.45	963.84	910.07	886.14	855.07	815.57	748.22
53	1,036.80	1,062.97	1,027.79	1,007.29	951.10	926.09	893.62	852.33	781.95
54	1,085.09	1,112.47	1,075.65	1,054.20	995.39	969.22	935.23	892.03	818.37
55	1,133.37	1,161.97	1,123.51	1,101.11	1,039.68	1,012.35	976.85	931.72	854.78
56	1,185.72	1,215.64	1,175.40	1,151.97	1,087.71	1,059.11	1,021.97	974.75	894.26
57	1,238.58	1,269.83	1,227.80	1,203.32	1,136.19	1,106.32	1,067.52	1,018.21	934.13
58	1,294.99	1,327.67	1,283.73	1,258.13	1,187.94	1,156.71	1,116.15	1,064.58	976.67
59	1,322.94	1,356.33	1,311.44	1,285.29	1,213.59	1,181.68	1,140.24	1,087.56	997.76
60	1,379.36	1,414.17	1,367.36	1,340.10	1,265.34	1,232.07	1,188.86	1,133.94	1,040.30
61	1,428.15	1,464.19	1,415.73	1,387.50	1,310.10	1,275.65	1,230.92	1,174.05	1,077.10
62	1,460.17	1,497.02	1,447.47	1,418.61	1,339.47	1,304.25	1,258.51	1,200.37	1,101.25
63	1,500.32	1,538.18	1,487.27	1,457.61	1,376.30	1,340.11	1,293.12	1,233.38	1,131.53
64+	1,524.72	1,563.18	1,511.46	1,481.31	1,398.69	1,361.91	1,314.15	1,253.43	1,149.93

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 3

El Dorado, Placer, Sacramento, and Yolo counties

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	308.99	316.78	306.30	300.19	283.45	281.63	277.41	273.13	250.04
15	336.45	344.94	333.53	326.88	308.64	306.66	302.07	297.41	272.26
16	346.95	355.71	343.94	337.08	318.27	316.23	311.50	306.69	280.76
17	357.46	366.48	354.35	347.28	327.91	325.80	320.93	315.97	289.26
18	368.76	378.07	365.56	358.27	338.28	336.11	331.08	325.97	298.41
19	380.07	389.67	376.77	369.26	348.66	346.42	341.23	335.97	307.56
20	391.79	401.67	388.38	380.64	359.40	357.09	351.75	346.32	317.04
21	403.90	414.10	400.39	392.41	370.52	368.14	362.63	357.03	326.85
22	403.90	414.10	400.39	392.41	370.52	368.14	362.63	357.03	326.85
23	403.90	414.10	400.39	392.41	370.52	368.14	362.63	357.03	326.85
24	403.90	414.10	400.39	392.41	370.52	368.14	362.63	357.03	326.85
25	405.52	415.75	401.99	393.98	372.00	369.61	364.08	358.46	328.16
26	413.60	424.04	410.00	401.83	379.41	376.97	371.33	365.60	334.69
27	423.29	433.97	419.61	411.24	388.30	385.81	380.04	374.17	342.54
28	439.04	450.12	435.23	426.55	402.75	400.17	394.18	388.10	355.28
29	451.97	463.38	448.04	439.10	414.61	411.95	405.78	399.52	365.74
30	458.43	470.00	454.44	445.38	420.54	417.84	411.58	405.23	370.97
31	468.13	479.94	464.05	454.80	429.43	426.67	420.29	413.80	378.82
32	477.82	489.88	473.66	464.22	438.32	435.51	428.99	422.37	386.66
33	483.88	496.09	479.67	470.10	443.88	441.03	434.43	427.73	391.56
34	490.34	502.71	486.07	476.38	449.81	446.92	440.23	433.44	396.79
35	493.57	506.03	489.28	479.52	452.77	449.86	443.13	436.29	399.41
36	496.80	509.34	492.48	482.66	455.74	452.81	446.03	439.15	402.02
37	500.03	512.65	495.68	485.80	458.70	455.75	448.93	442.01	404.64
38	503.26	515.97	498.89	488.94	461.66	458.70	451.84	444.86	407.25
39	509.73	522.59	505.29	495.22	467.59	464.59	457.64	450.58	412.48
40	516.19	529.22	511.70	501.50	473.52	470.48	463.44	456.29	417.71
41	525.88	539.16	521.31	510.92	482.41	479.31	472.14	464.86	425.56
42	535.17	548.68	530.52	519.94	490.94	487.78	480.48	473.07	433.07
43	548.10	561.93	543.33	532.50	502.79	499.56	492.09	484.49	443.53
44	564.25	578.49	559.35	548.19	517.61	514.29	506.59	498.78	456.61
45	583.24	597.96	578.16	566.64	535.03	531.59	523.64	515.56	471.97
46	605.86	621.15	600.59	588.61	555.78	552.21	543.94	535.55	490.27
47	631.30	647.23	625.81	613.33	579.12	575.40	566.79	558.04	510.86
48	660.38	677.05	654.64	641.59	605.80	601.90	592.90	583.75	534.40
49	689.06	706.45	683.07	669.45	632.10	628.04	618.65	609.10	557.60
50	721.37	739.58	715.10	700.84	661.74	657.49	647.66	637.66	583.75
51	753.28	772.29	746.73	731.84	691.01	686.58	676.30	665.87	609.57
52	788.42	808.32	781.56	765.98	723.25	718.60	707.85	696.93	638.01
53	823.96	844.76	816.80	800.51	755.86	751.00	739.76	728.35	666.77
54	862.34	884.10	854.83	837.79	791.05	785.97	774.21	762.27	697.82
55	900.71	923.44	892.87	875.07	826.25	820.95	808.66	796.18	728.87
56	942.31	966.09	934.11	915.49	864.42	858.86	846.01	832.96	762.54
57	984.31	1,009.16	975.75	956.30	902.95	897.15	883.73	870.09	796.53
58	1,029.15	1,055.12	1,020.20	999.86	944.08	938.01	923.98	909.72	832.81
59	1,051.36	1,077.90	1,042.22	1,021.44	964.46	958.26	943.92	929.36	850.78
60	1,096.20	1,123.86	1,086.66	1,065.00	1,005.58	999.12	984.18	968.99	887.06
61	1,134.97	1,163.61	1,125.10	1,102.67	1,041.15	1,034.47	1,018.99	1,003.26	918.44
62	1,160.42	1,189.70	1,150.32	1,127.39	1,064.50	1,057.66	1,041.83	1,025.76	939.03
63	1,192.33	1,222.42	1,181.95	1,158.39	1,093.77	1,086.74	1,070.48	1,053.96	964.85
64+	1,211.70	1,242.30	1,201.17	1,177.23	1,111.56	1,104.42	1,087.89	1,071.09	980.55

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 3

El Dorado, Placer, Sacramento, and Yolo counties (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	334.13	342.56	331.22	324.62	306.51	298.45	287.99	274.68	252.00
15	363.83	373.01	360.67	353.47	333.76	324.98	313.58	299.10	274.40
16	375.19	384.66	371.92	364.51	344.17	335.12	323.37	308.43	282.96
17	386.54	396.30	383.18	375.54	354.59	345.27	333.16	317.77	291.53
18	398.77	408.84	395.30	387.42	365.81	356.19	343.70	327.82	300.75
19	411.00	421.37	407.43	399.30	377.03	367.11	354.24	337.88	309.97
20	423.67	434.36	419.98	411.61	388.65	378.43	365.16	348.29	319.53
21	436.77	447.79	432.97	424.34	400.67	390.13	376.45	359.06	329.41
22	436.77	447.79	432.97	424.34	400.67	390.13	376.45	359.06	329.41
23	436.77	447.79	432.97	424.34	400.67	390.13	376.45	359.06	329.41
24	436.77	447.79	432.97	424.34	400.67	390.13	376.45	359.06	329.41
25	438.52	449.59	434.70	426.04	402.27	391.69	377.96	360.50	330.73
26	447.25	458.54	443.36	434.52	410.28	399.49	385.49	367.68	337.32
27	457.74	469.29	453.75	444.71	419.90	408.86	394.52	376.29	345.22
28	474.77	486.75	470.64	461.26	435.53	424.07	409.20	390.30	358.07
29	488.75	501.08	484.50	474.84	448.35	436.56	421.25	401.79	368.61
30	495.74	508.25	491.42	481.63	454.76	442.80	427.27	407.53	373.88
31	506.22	518.99	501.81	491.81	464.37	452.16	436.31	416.15	381.79
32	516.70	529.74	512.21	501.99	473.99	461.53	445.34	424.77	389.69
33	523.25	536.46	518.70	508.36	480.00	467.38	450.99	430.15	394.63
34	530.24	543.62	525.63	515.15	486.41	473.62	457.01	435.90	399.90
35	533.73	547.20	529.09	518.54	489.62	476.74	460.02	438.77	402.54
36	537.23	550.79	532.56	521.94	492.82	479.86	463.04	441.64	405.17
37	540.72	554.37	536.02	525.33	496.03	482.98	466.05	444.52	407.81
38	544.22	557.95	539.48	528.73	499.23	486.10	469.06	447.39	410.44
39	551.21	565.12	546.41	535.52	505.64	492.35	475.08	453.13	415.72
40	558.19	572.28	553.34	542.31	512.05	498.59	481.11	458.88	420.99
41	568.68	583.03	563.73	552.49	521.67	507.95	490.14	467.50	428.89
42	578.72	593.33	573.69	562.25	530.88	516.92	498.80	475.75	436.47
43	592.70	607.66	587.54	575.83	543.71	529.41	510.85	487.24	447.01
44	610.17	625.57	604.86	592.80	559.73	545.01	525.90	501.61	460.19
45	630.70	646.61	625.21	612.75	578.56	563.35	543.60	518.48	475.67
46	655.16	671.69	649.46	636.51	601.00	585.20	564.68	538.59	494.12
47	682.67	699.90	676.74	663.24	626.24	609.78	588.39	561.21	514.87
48	714.12	732.14	707.91	693.79	655.09	637.87	615.50	587.06	538.59
49	745.13	763.94	738.65	723.92	683.54	665.56	642.23	612.56	561.97
50	780.07	799.76	773.29	757.87	715.59	696.78	672.34	641.28	588.33
51	814.58	835.14	807.49	791.39	747.24	727.60	702.08	669.65	614.35
52	852.58	874.09	845.16	828.31	782.10	761.54	734.83	700.88	643.01
53	891.01	913.50	883.26	865.65	817.36	795.87	767.96	732.48	672.00
54	932.51	956.04	924.40	905.96	855.42	832.93	803.72	766.59	703.29
55	974.00	998.58	965.53	946.28	893.49	869.99	839.49	800.70	734.58
56	1,018.99	1,044.70	1,010.12	989.98	934.76	910.18	878.26	837.69	768.51
57	1,064.41	1,091.27	1,055.15	1,034.11	976.43	950.75	917.41	875.03	802.77
58	1,112.89	1,140.98	1,103.21	1,081.22	1,020.90	994.06	959.20	914.88	839.34
59	1,136.92	1,165.61	1,127.03	1,104.56	1,042.94	1,015.51	979.90	934.63	857.45
60	1,185.40	1,215.31	1,175.09	1,151.66	1,087.41	1,058.82	1,021.69	974.49	894.02
61	1,227.33	1,258.30	1,216.65	1,192.39	1,125.88	1,096.27	1,057.83	1,008.96	925.64
62	1,254.84	1,286.51	1,243.93	1,219.13	1,151.12	1,120.85	1,081.55	1,031.58	946.40
63	1,289.35	1,321.89	1,278.13	1,252.65	1,182.77	1,151.67	1,111.29	1,059.94	972.42
64+	1,310.31	1,343.37	1,298.91	1,273.02	1,202.01	1,170.39	1,129.35	1,077.18	988.23

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

4

San Francisco County

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	351.71	360.59	348.65	341.70	322.64	320.56	315.77	310.90	284.61
15	382.97	392.64	379.64	372.07	351.32	349.06	343.84	338.53	309.91
16	394.93	404.89	391.49	383.69	362.28	359.95	354.57	349.10	319.58
17	406.88	417.15	403.34	395.30	373.25	370.85	365.30	359.66	329.26
18	419.75	430.35	416.10	407.81	385.06	382.58	376.86	371.04	339.67
19	432.63	443.54	428.86	420.31	396.86	394.32	388.42	382.42	350.09
20	445.96	457.21	442.08	433.27	409.10	406.47	400.39	394.21	360.88
21	459.75	471.35	455.75	446.67	421.75	419.04	412.77	406.40	372.04
22	459.75	471.35	455.75	446.67	421.75	419.04	412.77	406.40	372.04
23	459.75	471.35	455.75	446.67	421.75	419.04	412.77	406.40	372.04
24	459.75	471.35	455.75	446.67	421.75	419.04	412.77	406.40	372.04
25	461.59	473.24	457.58	448.45	423.44	420.72	414.42	408.03	373.53
26	470.79	482.67	466.69	457.39	431.87	429.10	422.68	416.15	380.97
27	481.82	493.98	477.63	468.11	441.99	439.15	432.58	425.91	389.90
28	499.75	512.36	495.40	485.53	458.44	455.50	448.68	441.76	404.41
29	514.46	527.45	509.99	499.82	471.94	468.90	461.89	454.76	416.31
30	521.82	534.99	517.28	506.97	478.68	475.61	468.49	461.26	422.27
31	532.85	546.30	528.22	517.69	488.81	485.67	478.40	471.02	431.19
32	543.89	557.61	539.16	528.41	498.93	495.72	488.31	480.77	440.12
33	550.78	564.68	545.99	535.11	505.25	502.01	494.50	486.87	445.70
34	558.14	572.22	553.28	542.25	512.00	508.71	501.10	493.37	451.66
35	561.82	575.99	556.93	545.83	515.38	512.07	504.40	496.62	454.63
36	565.49	579.77	560.58	549.40	518.75	515.42	507.71	499.87	457.61
37	569.17	583.54	564.22	552.97	522.12	518.77	511.01	503.12	460.59
38	572.85	587.31	567.87	556.55	525.50	522.12	514.31	506.37	463.56
39	580.21	594.85	575.16	563.69	532.25	528.83	520.91	512.88	469.52
40	587.56	602.39	582.45	570.84	538.99	535.53	527.52	519.38	475.47
41	598.60	613.70	593.39	581.56	549.12	545.59	537.43	529.13	484.40
42	609.17	624.54	603.87	591.83	558.82	555.23	546.92	538.48	492.95
43	623.88	639.63	618.46	606.13	572.31	568.64	560.13	551.48	504.86
44	642.27	658.48	636.69	623.99	589.18	585.40	576.64	567.74	519.74
45	663.88	680.64	658.11	644.99	609.00	605.09	596.04	586.84	537.23
46	689.63	707.03	683.63	670.00	632.62	628.56	619.15	609.60	558.06
47	718.59	736.73	712.34	698.14	659.19	654.96	645.16	635.20	581.50
48	751.69	770.66	745.16	730.30	689.56	685.13	674.88	664.46	608.29
49	784.34	804.13	777.51	762.01	719.50	714.88	704.18	693.32	634.70
50	821.12	841.84	813.97	797.74	753.24	748.40	737.21	725.83	664.46
51	857.44	879.08	849.98	833.03	786.56	781.51	769.81	757.94	693.86
52	897.43	920.08	889.63	871.89	823.25	817.96	805.73	793.29	726.22
53	937.89	961.56	929.73	911.20	860.37	854.84	842.05	829.05	758.96
54	981.57	1,006.34	973.03	953.63	900.43	894.65	881.26	867.66	794.31
55	1,025.25	1,051.12	1,016.33	996.06	940.50	934.46	920.48	906.27	829.65
56	1,072.60	1,099.67	1,063.27	1,042.07	983.94	977.62	962.99	948.13	867.97
57	1,120.41	1,148.69	1,110.67	1,088.52	1,027.80	1,021.20	1,005.92	990.40	906.66
58	1,171.45	1,201.01	1,161.26	1,138.10	1,074.61	1,067.71	1,051.74	1,035.51	947.96
59	1,196.73	1,226.94	1,186.32	1,162.67	1,097.81	1,090.76	1,074.44	1,057.86	968.42
60	1,247.77	1,279.26	1,236.91	1,212.25	1,144.62	1,137.27	1,120.26	1,102.97	1,009.72
61	1,291.90	1,324.51	1,280.66	1,255.13	1,185.11	1,177.50	1,159.88	1,141.98	1,045.43
62	1,320.87	1,354.20	1,309.38	1,283.27	1,211.68	1,203.90	1,185.89	1,167.59	1,068.87
63	1,357.19	1,391.44	1,345.38	1,318.56	1,245.00	1,237.00	1,218.49	1,199.69	1,098.26
64+	1,379.25	1,414.05	1,367.25	1,340.01	1,265.25	1,257.12	1,238.31	1,219.20	1,116.12

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

4

San Francisco County (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	388.85	398.66	385.47	377.78	356.71	347.33	335.15	319.66	293.27
15	423.41	434.10	419.73	411.36	388.41	378.20	364.94	348.08	319.33
16	436.63	447.65	432.83	424.20	400.54	390.00	376.33	358.94	329.30
17	449.84	461.20	445.93	437.04	412.66	401.81	387.72	369.81	339.27
18	464.08	475.79	460.04	450.87	425.71	414.52	399.99	381.51	350.00
19	478.31	490.38	474.15	464.69	438.77	427.23	412.25	393.21	360.74
20	493.05	505.49	488.76	479.01	452.29	440.40	424.96	405.32	371.85
21	508.30	521.13	503.88	493.83	466.28	454.02	438.10	417.86	383.35
22	508.30	521.13	503.88	493.83	466.28	454.02	438.10	417.86	383.35
23	508.30	521.13	503.88	493.83	466.28	454.02	438.10	417.86	383.35
24	508.30	521.13	503.88	493.83	466.28	454.02	438.10	417.86	383.35
25	510.33	523.21	505.89	495.81	468.15	455.84	439.85	419.53	384.89
26	520.50	533.63	515.97	505.68	477.47	464.92	448.61	427.89	392.56
27	532.70	546.14	528.06	517.53	488.66	475.81	459.13	437.92	401.76
28	552.52	566.46	547.71	536.79	506.85	493.52	476.21	454.21	416.71
29	568.78	583.14	563.84	552.60	521.77	508.05	490.23	467.59	428.97
30	576.92	591.48	571.90	560.50	529.23	515.31	497.24	474.27	435.11
31	589.12	603.98	583.99	572.35	540.42	526.21	507.76	484.30	444.31
32	601.32	616.49	596.09	584.20	551.61	537.11	518.27	494.33	453.51
33	608.94	624.31	603.64	591.61	558.61	543.92	524.84	500.60	459.26
34	617.07	632.65	611.71	599.51	566.07	551.18	531.85	507.28	465.39
35	621.14	636.82	615.74	603.46	569.80	554.81	535.36	510.63	468.46
36	625.21	640.98	619.77	607.41	573.53	558.45	538.86	513.97	471.53
37	629.27	645.15	623.80	611.36	577.26	562.08	542.37	517.31	474.59
38	633.34	649.32	627.83	615.31	580.99	565.71	545.87	520.65	477.66
39	641.47	657.66	635.89	623.21	588.45	572.97	552.88	527.34	483.79
40	649.60	666.00	643.95	631.11	595.91	580.24	559.89	534.03	489.93
41	661.80	678.51	656.05	642.97	607.10	591.13	570.41	544.05	499.13
42	673.49	690.49	667.64	654.32	617.82	601.58	580.48	553.66	507.95
43	689.76	707.17	683.76	670.13	632.74	616.11	594.50	567.04	520.21
44	710.09	728.01	703.91	689.88	651.39	634.27	612.03	583.75	535.55
45	733.98	752.51	727.60	713.09	673.31	655.61	632.62	603.39	553.56
46	762.45	781.69	755.81	740.74	699.42	681.03	657.15	626.79	575.03
47	794.47	814.52	787.56	771.86	728.80	709.63	684.75	653.12	599.18
48	831.07	852.04	823.84	807.41	762.37	742.32	716.29	683.20	626.79
49	867.16	889.04	859.61	842.47	795.48	774.56	747.40	712.87	654.00
50	907.82	930.73	899.92	881.98	832.78	810.88	782.45	746.30	684.67
51	947.97	971.90	939.73	920.99	869.61	846.75	817.06	779.31	714.96
52	992.20	1,017.24	983.57	963.96	910.18	886.25	855.17	815.66	748.31
53	1,036.93	1,063.10	1,027.91	1,007.41	951.21	926.20	893.72	852.43	782.04
54	1,085.22	1,112.60	1,075.78	1,054.33	995.51	969.33	935.34	892.13	818.46
55	1,133.50	1,162.11	1,123.64	1,101.24	1,039.81	1,012.47	976.96	931.83	854.88
56	1,185.86	1,215.79	1,175.54	1,152.11	1,087.83	1,059.23	1,022.09	974.87	894.37
57	1,238.72	1,269.98	1,227.95	1,203.46	1,136.33	1,106.45	1,067.65	1,018.33	934.24
58	1,295.14	1,327.83	1,283.88	1,258.28	1,188.08	1,156.84	1,116.28	1,064.71	976.79
59	1,323.10	1,356.49	1,311.59	1,285.44	1,213.73	1,181.82	1,140.37	1,087.69	997.87
60	1,379.52	1,414.33	1,367.52	1,340.25	1,265.49	1,232.21	1,189.00	1,134.07	1,040.43
61	1,428.32	1,464.36	1,415.89	1,387.66	1,310.25	1,275.80	1,231.06	1,174.19	1,077.23
62	1,460.34	1,497.19	1,447.64	1,418.77	1,339.63	1,304.40	1,258.66	1,200.51	1,101.38
63	1,500.49	1,538.36	1,487.44	1,457.79	1,376.46	1,340.27	1,293.27	1,233.52	1,131.66
64+	1,524.90	1,563.39	1,511.64	1,481.49	1,398.84	1,362.06	1,314.30	1,253.58	1,150.05

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

5

Contra Costa County

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	387.72	397.51	384.35	376.69	355.67	353.39	348.10	342.73	313.75
15	422.18	432.84	418.51	410.17	387.29	384.80	379.04	373.19	341.64
16	435.36	446.35	431.58	422.97	399.38	396.81	390.87	384.84	352.30
17	448.54	459.86	444.64	435.77	411.46	408.82	402.70	396.49	362.97
18	462.73	474.41	458.71	449.56	424.48	421.75	415.44	409.03	374.45
19	476.92	488.96	472.77	463.35	437.50	434.69	428.19	421.58	385.94
20	491.62	504.03	487.34	477.63	450.98	448.09	441.38	434.57	397.83
21	506.82	519.62	502.42	492.40	464.93	461.94	455.03	448.01	410.13
22	506.82	519.62	502.42	492.40	464.93	461.94	455.03	448.01	410.13
23	506.82	519.62	502.42	492.40	464.93	461.94	455.03	448.01	410.13
24	506.82	519.62	502.42	492.40	464.93	461.94	455.03	448.01	410.13
25	508.85	521.69	504.43	494.37	466.79	463.79	456.85	449.80	411.77
26	518.99	532.09	514.47	504.22	476.09	473.03	465.95	458.76	419.98
27	531.15	544.56	526.53	516.03	487.25	484.12	476.87	469.51	429.82
28	550.92	564.82	546.13	535.24	505.38	502.13	494.62	486.99	445.81
29	567.14	581.45	562.20	550.99	520.26	516.92	509.18	501.32	458.94
30	575.25	589.76	570.24	558.87	527.70	524.31	516.46	508.49	465.50
31	587.41	602.23	582.30	570.69	538.85	535.39	527.38	519.24	475.34
32	599.57	614.71	594.36	582.51	550.01	546.48	538.30	530.00	485.19
33	607.18	622.50	601.89	589.89	556.99	553.41	545.13	536.72	491.34
34	615.29	630.81	609.93	597.77	564.43	560.80	552.41	543.88	497.90
35	619.34	634.97	613.95	601.71	568.14	564.50	556.05	547.47	501.18
36	623.39	639.13	617.97	605.65	571.86	568.19	559.69	551.05	504.46
37	627.45	643.28	621.99	609.59	575.58	571.89	563.33	554.64	507.74
38	631.50	647.44	626.01	613.53	579.30	575.58	566.97	558.22	511.03
39	639.61	655.75	634.05	621.41	586.74	582.97	574.25	565.39	517.59
40	647.72	664.07	642.09	629.29	594.18	590.36	581.53	572.56	524.15
41	659.89	676.54	654.15	641.10	605.34	601.45	592.45	583.31	533.99
42	671.54	688.49	665.70	652.43	616.03	612.08	602.92	593.61	543.43
43	687.76	705.12	681.78	668.19	630.91	626.86	617.48	607.95	556.55
44	708.03	725.90	701.88	687.88	649.51	645.34	635.68	625.87	572.96
45	731.85	750.32	725.49	711.02	671.36	667.05	657.07	646.93	592.23
46	760.24	779.42	753.62	738.60	697.40	692.92	682.55	672.02	615.20
47	792.17	812.16	785.28	769.62	726.69	722.02	711.22	700.24	641.04
48	828.66	849.57	821.45	805.07	760.16	755.28	743.98	732.50	670.57
49	864.64	886.46	857.12	840.03	793.17	788.08	776.28	764.31	699.69
50	905.19	928.03	897.32	879.42	830.37	825.03	812.69	800.15	732.50
51	945.23	969.08	937.01	918.32	867.09	861.53	848.63	835.54	764.90
52	989.32	1,014.29	980.72	961.16	907.54	901.71	888.22	874.52	800.58
53	1,033.92	1,060.02	1,024.93	1,004.49	948.46	942.37	928.27	913.94	836.67
54	1,082.07	1,109.38	1,072.66	1,051.27	992.63	986.25	971.49	956.50	875.63
55	1,130.22	1,158.74	1,120.39	1,098.05	1,036.79	1,030.13	1,014.72	999.06	914.60
56	1,182.42	1,212.26	1,172.14	1,148.77	1,084.68	1,077.71	1,061.59	1,045.21	956.84
57	1,235.13	1,266.30	1,224.39	1,199.98	1,133.03	1,125.76	1,108.91	1,091.80	999.49
58	1,291.39	1,323.98	1,280.16	1,254.63	1,184.64	1,177.03	1,159.42	1,141.53	1,045.02
59	1,319.26	1,352.56	1,307.79	1,281.71	1,210.21	1,202.44	1,184.45	1,166.17	1,067.58
60	1,375.52	1,410.24	1,363.56	1,336.37	1,261.82	1,253.72	1,234.96	1,215.90	1,113.10
61	1,424.18	1,460.12	1,411.79	1,383.64	1,306.45	1,298.06	1,278.64	1,258.91	1,152.47
62	1,456.11	1,492.86	1,443.44	1,414.66	1,335.74	1,327.16	1,307.31	1,287.13	1,178.31
63	1,496.15	1,533.91	1,483.13	1,453.56	1,372.47	1,363.66	1,343.25	1,322.53	1,210.71
64+	1,520.46	1,558.86	1,507.26	1,477.20	1,394.79	1,385.82	1,365.09	1,344.03	1,230.39

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 5

Contra Costa County (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	428.66	439.48	424.93	416.46	393.23	382.89	369.46	352.39	323.29
15	466.76	478.54	462.70	453.48	428.18	416.92	402.30	383.72	352.03
16	481.33	493.48	477.15	467.63	441.55	429.94	414.86	395.69	363.02
17	495.90	508.42	491.59	481.79	454.91	442.95	427.42	407.67	374.01
18	511.59	524.50	507.14	497.03	469.30	456.96	440.94	420.57	385.84
19	527.28	540.59	522.69	512.27	483.70	470.98	454.46	433.47	397.67
20	543.53	557.25	538.80	528.06	498.60	485.49	468.47	446.82	409.93
21	560.34	574.48	555.47	544.39	514.02	500.51	482.96	460.64	422.61
22	560.34	574.48	555.47	544.39	514.02	500.51	482.96	460.64	422.61
23	560.34	574.48	555.47	544.39	514.02	500.51	482.96	460.64	422.61
24	560.34	574.48	555.47	544.39	514.02	500.51	482.96	460.64	422.61
25	562.58	576.78	557.69	546.57	516.08	502.51	484.89	462.49	424.30
26	573.79	588.27	568.80	557.46	526.36	512.52	494.55	471.70	432.75
27	587.24	602.06	582.13	570.52	538.70	524.53	506.14	482.76	442.89
28	609.09	624.46	603.79	591.75	558.74	544.05	524.97	500.72	459.37
29	627.02	642.85	621.57	609.18	575.19	560.07	540.43	515.46	472.90
30	635.99	652.04	630.46	617.89	583.42	568.08	548.16	522.83	479.66
31	649.44	665.83	643.79	630.95	595.75	580.09	559.75	533.89	489.80
32	662.88	679.61	657.12	644.02	608.09	592.10	571.34	544.94	499.94
33	671.29	688.23	665.45	652.18	615.80	599.61	578.58	551.85	506.28
34	680.25	697.42	674.34	660.89	624.02	607.62	586.31	559.22	513.04
35	684.74	702.02	678.78	665.25	628.14	611.62	590.17	562.91	516.42
36	689.22	706.61	683.22	669.60	632.25	615.62	594.04	566.59	519.81
37	693.70	711.21	687.67	673.96	636.36	619.63	597.90	570.28	523.19
38	698.19	715.81	692.11	678.31	640.47	623.63	601.76	573.96	526.57
39	707.15	725.00	701.00	687.02	648.70	631.64	609.49	581.33	533.33
40	716.12	734.19	709.89	695.73	656.92	639.65	617.22	588.70	540.09
41	729.56	747.98	723.22	708.80	669.26	651.66	628.81	599.76	550.23
42	742.45	761.19	735.99	721.32	681.08	663.17	639.92	610.35	559.95
43	760.38	779.57	753.77	738.74	697.53	679.19	655.37	625.09	573.48
44	782.80	802.55	775.99	760.52	718.09	699.21	674.69	643.52	590.38
45	809.13	829.55	802.09	786.10	742.25	722.73	697.39	665.17	610.24
46	840.51	861.72	833.20	816.59	771.03	750.76	724.43	690.97	633.91
47	875.81	897.92	868.20	850.89	803.42	782.29	754.86	719.99	660.53
48	916.16	939.28	908.19	890.08	840.43	818.33	789.63	753.15	690.96
49	955.94	980.07	947.63	928.73	876.92	853.86	823.92	785.86	720.97
50	1,000.77	1,026.03	992.06	972.28	918.05	893.91	862.56	822.71	754.77
51	1,045.04	1,071.41	1,035.95	1,015.29	958.65	933.45	900.71	859.10	788.16
52	1,093.79	1,121.39	1,084.27	1,062.65	1,003.37	976.99	942.73	899.18	824.93
53	1,143.10	1,171.94	1,133.15	1,110.56	1,048.61	1,021.03	985.23	939.71	862.12
54	1,196.33	1,226.52	1,185.92	1,162.28	1,097.44	1,068.58	1,031.11	983.48	902.26
55	1,249.56	1,281.10	1,238.69	1,213.99	1,146.27	1,116.13	1,076.99	1,027.24	942.41
56	1,307.28	1,340.27	1,295.91	1,270.07	1,199.22	1,167.68	1,126.74	1,074.68	985.94
57	1,365.55	1,400.01	1,353.67	1,326.68	1,252.67	1,219.74	1,176.97	1,122.59	1,029.89
58	1,427.75	1,463.78	1,415.33	1,387.11	1,309.73	1,275.29	1,230.57	1,173.72	1,076.80
59	1,458.57	1,495.38	1,445.88	1,417.05	1,338.00	1,302.82	1,257.14	1,199.06	1,100.04
60	1,520.77	1,559.15	1,507.54	1,477.48	1,395.06	1,358.38	1,310.74	1,250.19	1,146.95
61	1,574.56	1,614.30	1,560.86	1,529.74	1,444.40	1,406.42	1,357.11	1,294.41	1,187.52
62	1,609.86	1,650.49	1,595.86	1,564.04	1,476.79	1,437.96	1,387.53	1,323.43	1,214.15
63	1,654.13	1,695.87	1,639.74	1,607.05	1,517.40	1,477.50	1,425.69	1,359.82	1,247.53
64+	1,681.02	1,723.44	1,666.41	1,633.17	1,542.06	1,501.53	1,448.88	1,381.92	1,267.83

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

6

Alameda County

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	316.18	324.16	313.43	307.18	290.05	288.18	283.87	279.49	255.86
15	344.29	352.98	341.29	334.49	315.83	313.80	309.10	304.33	278.60
16	355.03	363.99	351.94	344.93	325.69	323.59	318.75	313.83	287.30
17	365.78	375.01	362.60	355.37	335.54	333.39	328.40	323.33	296.00
18	377.35	386.88	374.07	366.61	346.16	343.94	338.79	333.56	305.36
19	388.92	398.74	385.54	377.85	356.78	354.48	349.18	343.79	314.73
20	400.91	411.03	397.42	389.50	367.77	365.41	359.94	354.39	324.43
21	413.31	423.74	409.71	401.55	379.15	376.71	371.07	365.35	334.46
22	413.31	423.74	409.71	401.55	379.15	376.71	371.07	365.35	334.46
23	413.31	423.74	409.71	401.55	379.15	376.71	371.07	365.35	334.46
24	413.31	423.74	409.71	401.55	379.15	376.71	371.07	365.35	334.46
25	414.96	425.44	411.35	403.15	380.66	378.22	372.56	366.81	335.80
26	423.23	433.91	419.55	411.18	388.24	385.75	379.98	374.12	342.49
27	433.15	444.08	429.38	420.82	397.34	394.79	388.89	382.88	350.51
28	449.27	460.61	445.36	436.48	412.13	409.48	403.36	397.13	363.56
29	462.49	474.17	458.47	449.33	424.26	421.54	415.23	408.82	374.26
30	469.11	480.95	465.03	455.75	430.33	427.57	421.17	414.67	379.61
31	479.03	491.12	474.86	465.39	439.43	436.61	430.07	423.44	387.64
32	488.95	501.29	484.69	475.03	448.53	445.65	438.98	432.21	395.66
33	495.15	507.64	490.84	481.05	454.22	451.30	444.55	437.69	400.68
34	501.76	514.42	497.39	487.48	460.28	457.33	450.48	443.53	406.03
35	505.06	517.81	500.67	490.69	463.32	460.34	453.45	446.45	408.71
36	508.37	521.20	503.95	493.90	466.35	463.35	456.42	449.38	411.38
37	511.68	524.59	507.23	497.11	469.38	466.37	459.39	452.30	414.06
38	514.98	527.98	510.50	500.33	472.42	469.38	462.36	455.22	416.74
39	521.60	534.76	517.06	506.75	478.48	475.41	468.29	461.07	422.09
40	528.21	541.54	523.62	513.18	484.55	481.44	474.23	466.91	427.44
41	538.13	551.71	533.45	522.81	493.65	490.48	483.14	475.68	435.47
42	547.64	561.46	542.87	532.05	502.37	499.14	491.67	484.09	443.16
43	560.86	575.02	555.98	544.90	514.50	511.20	503.55	495.78	453.86
44	577.39	591.97	572.37	560.96	529.67	526.26	518.39	510.39	467.24
45	596.82	611.88	591.63	579.83	547.49	543.97	535.83	527.56	482.96
46	619.96	635.61	614.57	602.32	568.72	565.06	556.61	548.02	501.69
47	646.00	662.31	640.38	627.62	592.60	588.80	579.99	571.04	522.76
48	675.76	692.82	669.88	656.53	619.90	615.92	606.71	597.34	546.84
49	705.11	722.90	698.97	685.04	646.82	642.67	633.05	623.28	570.59
50	738.17	756.80	731.75	717.16	677.15	672.80	662.74	652.51	597.34
51	770.82	790.28	764.12	748.88	707.11	702.56	692.05	681.37	623.77
52	806.78	827.14	799.76	783.82	740.09	735.34	724.34	713.16	652.86
53	843.15	864.43	835.82	819.15	773.46	768.49	756.99	745.31	682.30
54	882.42	904.69	874.74	857.30	809.48	804.28	792.24	780.02	714.07
55	921.68	944.94	913.66	895.45	845.49	840.06	827.49	814.72	745.84
56	964.25	988.59	955.86	936.81	884.55	878.86	865.71	852.36	780.29
57	1,007.24	1,032.66	998.47	978.57	923.98	918.04	904.31	890.35	815.08
58	1,053.11	1,079.69	1,043.95	1,023.14	966.06	959.86	945.50	930.90	852.20
59	1,075.85	1,103.00	1,066.49	1,045.22	986.92	980.58	965.90	951.00	870.60
60	1,121.72	1,150.03	1,111.97	1,089.80	1,029.00	1,022.39	1,007.09	991.55	907.72
61	1,161.40	1,190.71	1,151.30	1,128.34	1,065.40	1,058.55	1,042.72	1,026.63	939.83
62	1,187.44	1,217.41	1,177.11	1,153.64	1,089.28	1,082.29	1,066.09	1,049.64	960.90
63	1,220.09	1,250.88	1,209.48	1,185.36	1,119.24	1,112.05	1,095.41	1,078.51	987.32
64+	1,239.93	1,271.22	1,229.13	1,204.65	1,137.45	1,130.13	1,113.21	1,096.05	1,003.38

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

6

Alameda County (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	349.57	358.39	346.53	339.62	320.67	312.24	301.29	287.37	263.64
15	380.64	390.25	377.33	369.81	349.18	340.00	328.07	312.92	287.08
16	392.52	402.43	389.11	381.35	360.08	350.61	338.31	322.68	296.04
17	404.40	414.61	400.88	392.89	370.97	361.22	348.55	332.45	305.00
18	417.20	427.73	413.57	405.32	382.71	372.65	359.58	342.97	314.65
19	429.99	440.84	426.25	417.75	394.45	384.08	370.61	353.49	324.30
20	443.24	454.43	439.39	430.63	406.60	395.91	382.03	364.38	334.29
21	456.95	468.48	452.98	443.95	419.18	408.16	393.85	375.65	344.63
22	456.95	468.48	452.98	443.95	419.18	408.16	393.85	375.65	344.63
23	456.95	468.48	452.98	443.95	419.18	408.16	393.85	375.65	344.63
24	456.95	468.48	452.98	443.95	419.18	408.16	393.85	375.65	344.63
25	458.78	470.36	454.79	445.72	420.86	409.79	395.42	377.15	346.01
26	467.92	479.73	463.85	454.60	429.24	417.95	403.30	384.67	352.90
27	478.89	490.97	474.72	465.26	439.30	427.75	412.75	393.68	361.17
28	496.71	509.24	492.39	482.57	455.65	443.67	428.11	408.33	374.61
29	511.33	524.23	506.88	496.78	469.06	456.73	440.71	420.35	385.64
30	518.64	531.73	514.13	503.88	475.77	463.26	447.01	426.36	391.16
31	529.61	542.97	525.00	514.53	485.83	473.05	456.47	435.38	399.43
32	540.57	554.22	535.87	525.19	495.89	482.85	465.92	444.39	407.70
33	547.43	561.24	542.67	531.85	502.18	488.97	471.83	450.03	412.87
34	554.74	568.74	549.91	538.95	508.88	495.50	478.13	456.04	418.38
35	558.40	572.49	553.54	542.50	512.24	498.77	481.28	459.04	421.14
36	562.05	576.24	557.16	546.05	515.59	502.03	484.43	462.05	423.90
37	565.71	579.98	560.79	549.60	518.94	505.30	487.58	465.05	426.65
38	569.36	583.73	564.41	553.16	522.30	508.56	490.73	468.06	429.41
39	576.67	591.23	571.66	560.26	529.01	515.10	497.03	474.07	434.92
40	583.98	598.72	578.91	567.36	535.71	521.63	503.33	480.08	440.44
41	594.95	609.97	589.78	578.02	545.77	531.42	512.79	489.10	448.71
42	605.46	620.74	600.19	588.23	555.41	540.81	521.85	497.74	456.64
43	620.08	635.73	614.69	602.43	568.83	553.87	534.45	509.76	467.66
44	638.36	654.47	632.81	620.19	585.59	570.20	550.20	524.78	481.45
45	659.84	676.49	654.10	641.06	605.30	589.38	568.71	542.44	497.65
46	685.43	702.73	679.47	665.92	628.77	612.24	590.77	563.48	516.95
47	714.22	732.24	708.00	693.89	655.18	637.95	615.58	587.14	538.66
48	747.12	765.97	740.62	725.85	685.36	667.34	643.94	614.19	563.47
49	779.56	799.23	772.78	757.37	715.12	696.32	671.90	640.86	587.94
50	816.12	836.71	809.02	792.89	748.66	728.97	703.41	670.91	615.51
51	852.22	873.72	844.80	827.96	781.77	761.21	734.52	700.59	642.74
52	891.97	914.48	884.21	866.58	818.24	796.72	768.79	733.27	672.72
53	932.18	955.71	924.07	905.65	855.13	832.64	803.45	766.33	703.05
54	975.59	1,000.21	967.11	947.82	894.95	871.42	840.86	802.01	735.79
55	1,019.00	1,044.72	1,010.14	990.00	934.77	910.19	878.28	837.70	768.53
56	1,066.07	1,092.97	1,056.80	1,035.73	977.95	952.23	918.84	876.39	804.02
57	1,113.59	1,141.70	1,103.91	1,081.90	1,021.54	994.68	959.80	915.46	839.86
58	1,164.31	1,193.70	1,154.19	1,131.17	1,068.07	1,039.99	1,003.52	957.16	878.12
59	1,189.45	1,219.46	1,179.10	1,155.59	1,091.13	1,062.43	1,025.18	977.82	897.07
60	1,240.17	1,271.47	1,229.38	1,204.87	1,137.65	1,107.74	1,068.90	1,019.51	935.33
61	1,284.04	1,316.44	1,272.87	1,247.49	1,177.90	1,146.92	1,106.71	1,055.58	968.41
62	1,312.82	1,345.96	1,301.40	1,275.46	1,204.30	1,172.64	1,131.52	1,079.24	990.12
63	1,348.92	1,382.97	1,337.19	1,310.53	1,237.42	1,204.88	1,162.63	1,108.92	1,017.35
64+	1,370.85	1,405.44	1,358.94	1,331.85	1,257.54	1,224.48	1,181.55	1,126.95	1,033.89

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

7

Santa Clara County

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	336.20	344.68	333.27	326.63	308.41	306.42	301.84	297.18	272.06
15	366.08	375.32	362.90	355.66	335.82	333.66	328.67	323.60	296.24
16	377.51	387.03	374.22	366.76	346.30	344.08	338.93	333.70	305.49
17	388.93	398.75	385.55	377.86	356.78	354.49	349.19	343.80	314.73
18	401.24	411.36	397.75	389.82	368.07	365.71	360.23	354.68	324.69
19	413.54	423.98	409.95	401.77	379.36	376.92	371.28	365.55	334.65
20	426.29	437.05	422.58	414.15	391.05	388.54	382.72	376.82	344.96
21	439.47	450.56	435.65	426.96	403.14	400.55	394.56	388.47	355.63
22	439.47	450.56	435.65	426.96	403.14	400.55	394.56	388.47	355.63
23	439.47	450.56	435.65	426.96	403.14	400.55	394.56	388.47	355.63
24	439.47	450.56	435.65	426.96	403.14	400.55	394.56	388.47	355.63
25	441.23	452.36	437.39	428.67	404.76	402.16	396.14	390.03	357.05
26	450.02	461.38	446.10	437.21	412.82	410.17	404.03	397.80	364.16
27	460.57	472.19	456.56	447.46	422.50	419.78	413.50	407.12	372.70
28	477.71	489.76	473.55	464.11	438.22	435.40	428.89	422.27	386.57
29	491.77	504.18	487.49	477.77	451.12	448.22	441.51	434.70	397.95
30	498.80	511.39	494.46	484.60	457.57	454.63	447.83	440.92	403.64
31	509.35	522.20	504.92	494.85	467.24	464.24	457.30	450.24	412.17
32	519.89	533.02	515.37	505.10	476.92	473.86	466.77	459.56	420.71
33	526.49	539.77	521.91	511.50	482.97	479.86	472.69	465.39	426.04
34	533.52	546.98	528.88	518.33	489.42	486.27	479.00	471.61	431.73
35	537.03	550.59	532.36	521.75	492.64	489.48	482.15	474.71	434.58
36	540.55	554.19	535.85	525.16	495.87	492.68	485.31	477.82	437.42
37	544.07	557.80	539.33	528.58	499.09	495.89	488.47	480.93	440.27
38	547.58	561.40	542.82	532.00	502.32	499.09	491.62	484.04	443.11
39	554.61	568.61	549.79	538.83	508.77	505.50	497.94	490.25	448.80
40	561.64	575.82	556.76	545.66	515.22	511.91	504.25	496.47	454.49
41	572.19	586.63	567.21	555.91	524.89	521.52	513.72	505.79	463.03
42	582.30	597.00	577.23	565.73	534.17	530.74	522.79	514.73	471.21
43	596.36	611.41	591.18	579.39	547.07	543.55	535.42	527.16	482.59
44	613.94	629.44	608.60	596.47	563.19	559.58	551.20	542.70	496.81
45	634.60	650.61	629.08	616.53	582.14	578.40	569.75	560.96	513.53
46	659.21	675.84	653.47	640.44	604.72	600.83	591.84	582.71	533.44
47	686.89	704.23	680.92	667.34	630.11	626.07	616.70	607.18	555.85
48	718.54	736.67	712.29	698.08	659.14	654.91	645.11	635.15	581.45
49	749.74	768.66	743.22	728.40	687.76	683.35	673.12	662.73	606.70
50	784.90	804.70	778.07	762.56	720.02	715.39	704.69	693.81	635.15
51	819.61	840.30	812.49	796.29	751.86	747.04	735.86	724.50	663.25
52	857.85	879.50	850.39	833.43	786.94	781.88	770.18	758.30	694.19
53	896.52	919.15	888.72	871.00	822.41	817.13	804.91	792.48	725.48
54	938.27	961.95	930.11	911.57	860.71	855.18	842.39	829.39	759.27
55	980.02	1,004.75	971.50	952.13	899.01	893.24	879.87	866.29	793.05
56	1,025.29	1,051.16	1,016.37	996.10	940.54	934.49	920.51	906.31	829.68
57	1,070.99	1,098.02	1,061.68	1,040.51	982.46	976.15	961.55	946.71	866.67
58	1,119.77	1,148.03	1,110.03	1,087.90	1,027.21	1,020.61	1,005.34	989.83	906.14
59	1,143.94	1,172.81	1,133.99	1,111.38	1,049.39	1,042.64	1,027.04	1,011.20	925.70
60	1,192.73	1,222.83	1,182.35	1,158.78	1,094.13	1,087.11	1,070.84	1,054.32	965.18
61	1,234.91	1,266.08	1,224.17	1,199.77	1,132.84	1,125.56	1,108.72	1,091.61	999.32
62	1,262.60	1,294.47	1,251.62	1,226.66	1,158.23	1,150.79	1,133.58	1,116.08	1,021.72
63	1,297.32	1,330.06	1,286.04	1,260.39	1,190.08	1,182.44	1,164.75	1,146.77	1,049.82
64+	1,318.41	1,351.68	1,306.95	1,280.88	1,209.42	1,201.65	1,183.68	1,165.41	1,066.89

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 7

Santa Clara County (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	363.55	372.73	360.39	353.21	333.50	324.73	313.35	298.87	274.19
15	395.87	405.86	392.43	384.60	363.15	353.60	341.20	325.43	298.56
16	408.22	418.53	404.67	396.61	374.48	364.63	351.85	335.59	307.88
17	420.58	431.20	416.92	408.61	385.82	375.67	362.50	345.75	317.20
18	433.89	444.84	430.11	421.54	398.02	387.56	373.97	356.69	327.24
19	447.19	458.48	443.30	434.47	410.23	399.44	385.44	367.63	337.27
20	460.98	472.61	456.97	447.85	422.87	411.75	397.31	378.96	347.66
21	475.23	487.23	471.10	461.71	435.95	424.49	409.60	390.68	358.42
22	475.23	487.23	471.10	461.71	435.95	424.49	409.60	390.68	358.42
23	475.23	487.23	471.10	461.71	435.95	424.49	409.60	390.68	358.42
24	475.23	487.23	471.10	461.71	435.95	424.49	409.60	390.68	358.42
25	477.13	489.17	472.98	463.55	437.69	426.18	411.24	392.24	359.85
26	486.64	498.92	482.41	472.79	446.41	434.67	419.43	400.05	367.02
27	498.04	510.61	493.71	483.87	456.88	444.86	429.26	409.43	375.62
28	516.58	529.61	512.08	501.87	473.88	461.42	445.24	424.67	389.60
29	531.79	545.21	527.16	516.65	487.83	475.00	458.34	437.17	401.07
30	539.39	553.00	534.70	524.04	494.80	481.79	464.90	443.42	406.80
31	550.79	564.70	546.00	535.12	505.27	491.98	474.73	452.80	415.41
32	562.20	576.39	557.31	546.20	515.73	502.17	484.56	462.17	424.01
33	569.33	583.70	564.38	553.12	522.27	508.53	490.70	468.03	429.38
34	576.93	591.49	571.91	560.51	529.24	515.33	497.26	474.28	435.12
35	580.73	595.39	575.68	564.20	532.73	518.72	500.53	477.41	437.99
36	584.54	599.29	579.45	567.90	536.22	522.12	503.81	480.53	440.85
37	588.34	603.19	583.22	571.59	539.71	525.51	507.09	483.66	443.72
38	592.14	607.08	586.99	575.29	543.19	528.91	510.36	486.79	446.59
39	599.74	614.88	594.53	582.67	550.17	535.70	516.92	493.04	452.32
40	607.35	622.67	602.06	590.06	557.14	542.49	523.47	499.29	458.06
41	618.75	634.37	613.37	601.14	567.61	552.68	533.30	508.66	466.66
42	629.68	645.57	624.21	611.76	577.63	562.44	542.72	517.65	474.90
43	644.89	661.17	639.28	626.54	591.58	576.03	555.83	530.15	486.37
44	663.90	680.65	658.12	645.00	609.02	593.01	572.21	545.78	500.71
45	686.24	703.55	680.27	666.70	629.51	612.96	591.46	564.14	517.55
46	712.85	730.84	706.65	692.56	653.92	636.73	614.40	586.02	537.63
47	742.79	761.53	736.33	721.65	681.39	663.47	640.21	610.63	560.21
48	777.01	796.61	770.25	754.89	712.78	694.03	669.70	638.76	586.01
49	810.75	831.21	803.69	787.67	743.73	724.17	698.78	666.50	611.46
50	848.77	870.19	841.38	824.61	778.61	758.13	731.55	697.75	640.13
51	886.31	908.68	878.60	861.08	813.05	791.67	763.91	728.61	668.45
52	927.65	951.07	919.58	901.25	850.97	828.60	799.54	762.60	699.63
53	969.47	993.94	961.04	941.88	889.34	865.95	835.59	796.98	731.17
54	1,014.62	1,040.23	1,005.80	985.74	930.75	906.28	874.50	834.10	765.22
55	1,059.77	1,086.51	1,050.55	1,029.60	972.17	946.60	913.41	871.21	799.27
56	1,108.72	1,136.70	1,099.07	1,077.16	1,017.07	990.33	955.60	911.45	836.19
57	1,158.14	1,187.37	1,148.07	1,125.18	1,062.41	1,034.47	998.20	952.08	873.46
58	1,210.89	1,241.45	1,200.36	1,176.43	1,110.80	1,081.59	1,043.66	995.45	913.25
59	1,237.03	1,268.25	1,226.27	1,201.82	1,134.78	1,104.94	1,066.19	1,016.94	932.96
60	1,289.78	1,322.33	1,278.56	1,253.07	1,183.17	1,152.06	1,111.66	1,060.30	972.74
61	1,335.40	1,369.11	1,323.79	1,297.39	1,225.02	1,192.81	1,150.98	1,097.81	1,007.15
62	1,365.34	1,399.80	1,353.47	1,326.48	1,252.48	1,219.55	1,176.79	1,122.42	1,029.73
63	1,402.89	1,438.29	1,390.68	1,362.96	1,286.92	1,253.08	1,209.14	1,153.28	1,058.05
64+	1,425.69	1,461.69	1,413.30	1,385.13	1,307.85	1,273.47	1,228.80	1,172.04	1,075.26

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 7

Santa Clara County (continued)

Age	SmartCare HMO Platinum \$0	SmartCare HMO Platinum \$10	SmartCare HMO Platinum \$20	SmartCare HMO Platinum \$30	SmartCare HMO Gold \$30	SmartCare HMO Gold \$35	SmartCare HMO Gold \$40	SmartCare HMO Gold \$50	SmartCare HMO Silver \$55
0-14	331.20	339.56	328.32	320.48	303.82	301.87	297.35	291.59	266.94
15	360.64	369.74	357.50	348.97	330.83	328.70	323.78	317.51	290.67
16	371.89	381.28	368.66	359.86	341.15	338.96	333.89	327.42	299.74
17	383.15	392.82	379.82	370.76	351.48	349.22	344.00	337.33	308.81
18	395.27	405.25	391.84	382.49	362.60	360.27	354.88	348.01	318.59
19	407.40	417.68	403.85	394.22	373.72	371.32	365.76	358.68	328.36
20	419.95	430.55	416.30	406.37	385.24	382.76	377.04	369.73	338.48
21	432.94	443.87	429.17	418.93	397.15	394.60	388.70	381.17	348.94
22	432.94	443.87	429.17	418.93	397.15	394.60	388.70	381.17	348.94
23	432.94	443.87	429.17	418.93	397.15	394.60	388.70	381.17	348.94
24	432.94	443.87	429.17	418.93	397.15	394.60	388.70	381.17	348.94
25	434.67	445.64	430.89	420.61	398.74	396.18	390.25	382.69	350.34
26	443.33	454.52	439.47	428.99	406.68	404.07	398.03	390.32	357.32
27	453.72	465.17	449.77	439.04	416.22	413.54	407.35	399.46	365.69
28	470.61	482.48	466.51	455.38	431.70	428.93	422.51	414.33	379.30
29	484.46	496.69	480.25	468.79	444.41	441.56	434.95	426.53	390.47
30	491.39	503.79	487.11	475.49	450.77	447.87	441.17	432.63	396.05
31	501.78	514.44	497.41	485.54	460.30	457.34	450.50	441.77	404.43
32	512.17	525.09	507.71	495.60	469.83	466.81	459.83	450.92	412.80
33	518.66	531.75	514.15	501.88	475.79	472.73	465.66	456.64	418.03
34	525.59	538.85	521.02	508.59	482.14	479.05	471.88	462.74	423.62
35	529.05	542.40	524.45	511.94	485.32	482.20	474.99	465.79	426.41
36	532.52	545.95	527.88	515.29	488.50	485.36	478.10	468.84	429.20
37	535.98	549.51	531.32	518.64	491.67	488.52	481.21	471.89	431.99
38	539.44	553.06	534.75	521.99	494.85	491.67	484.32	474.94	434.78
39	546.37	560.16	541.62	528.70	501.21	497.99	490.54	481.03	440.37
40	553.30	567.26	548.48	535.40	507.56	504.30	496.76	487.13	445.95
41	563.69	577.91	558.78	545.45	517.09	513.77	506.08	496.28	454.32
42	573.64	588.12	568.66	555.09	526.23	522.85	515.02	505.05	462.35
43	587.50	602.33	582.39	568.49	538.94	535.47	527.46	517.25	473.52
44	604.82	620.08	599.56	585.25	554.82	551.26	543.01	532.49	487.47
45	625.16	640.94	619.73	604.94	573.49	569.80	561.28	550.41	503.87
46	649.41	665.80	643.76	628.40	595.73	591.90	583.05	571.75	523.41
47	676.68	693.76	670.80	654.79	620.75	616.76	607.53	595.77	545.40
48	707.86	725.72	701.70	684.96	649.34	645.17	635.52	623.21	570.52
49	738.59	757.23	732.17	714.70	677.54	673.19	663.12	650.27	595.30
50	773.23	792.74	766.50	748.22	709.31	704.76	694.21	680.77	623.21
51	807.43	827.81	800.41	781.31	740.69	735.93	724.92	710.88	650.78
52	845.10	866.43	837.75	817.76	775.24	770.26	758.74	744.04	681.14
53	883.20	905.49	875.51	854.63	810.19	804.99	792.94	777.58	711.84
54	924.33	947.65	916.29	894.42	847.92	842.47	829.87	813.79	744.99
55	965.45	989.82	957.06	934.22	885.65	879.96	866.79	850.01	778.14
56	1,010.05	1,035.54	1,001.26	977.37	926.56	920.60	906.83	889.27	814.08
57	1,055.07	1,081.70	1,045.90	1,020.94	967.86	961.64	947.26	928.91	850.37
58	1,103.13	1,130.97	1,093.53	1,067.44	1,011.94	1,005.44	990.40	971.22	889.11
59	1,126.94	1,155.38	1,117.14	1,090.49	1,033.79	1,027.15	1,011.78	992.18	908.30
60	1,175.00	1,204.65	1,164.78	1,136.99	1,077.87	1,070.95	1,054.92	1,034.49	947.03
61	1,216.56	1,247.26	1,205.98	1,177.21	1,116.00	1,108.83	1,092.24	1,071.08	980.53
62	1,243.84	1,275.23	1,233.02	1,203.60	1,141.02	1,133.69	1,116.73	1,095.10	1,002.51
63	1,278.04	1,310.29	1,266.92	1,236.69	1,172.39	1,164.86	1,147.43	1,125.21	1,030.08
64+	1,298.82	1,331.61	1,287.51	1,256.79	1,191.45	1,183.80	1,166.10	1,143.51	1,046.82

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

8

Santa Mateo County

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	364.37	373.57	361.20	354.00	334.25	332.11	327.14	322.09	294.86
15	396.76	406.78	393.31	385.47	363.97	361.63	356.22	350.72	321.07
16	409.15	419.47	405.59	397.50	375.33	372.91	367.34	361.67	331.09
17	421.53	432.17	417.86	409.53	386.69	384.20	378.45	372.61	341.11
18	434.87	445.84	431.08	422.49	398.92	396.36	390.43	384.40	351.90
19	448.20	459.51	444.30	435.45	411.15	408.51	402.40	396.19	362.70
20	462.02	473.68	458.00	448.87	423.83	421.10	414.80	408.40	373.87
21	476.30	488.33	472.16	462.75	436.93	434.13	427.63	421.03	385.44
22	476.30	488.33	472.16	462.75	436.93	434.13	427.63	421.03	385.44
23	476.30	488.33	472.16	462.75	436.93	434.13	427.63	421.03	385.44
24	476.30	488.33	472.16	462.75	436.93	434.13	427.63	421.03	385.44
25	478.21	490.28	474.05	464.60	438.68	435.86	429.34	422.72	386.98
26	487.74	500.05	483.49	473.85	447.42	444.55	437.89	431.14	394.69
27	499.17	511.77	494.83	484.96	457.91	454.96	448.16	441.24	403.94
28	517.74	530.81	513.24	503.01	474.95	471.90	464.84	457.66	418.97
29	532.99	546.44	528.35	517.81	488.93	485.79	478.52	471.13	431.30
30	540.61	554.25	535.90	525.22	495.92	492.73	485.36	477.87	437.47
31	552.04	565.97	547.24	536.32	506.41	503.15	495.62	487.98	446.72
32	563.47	577.69	558.57	547.43	516.89	513.57	505.89	498.08	455.97
33	570.61	585.01	565.65	554.37	523.45	520.08	512.30	504.40	461.75
34	578.23	592.83	573.20	561.78	530.44	527.03	519.14	511.13	467.92
35	582.04	596.73	576.98	565.48	533.93	530.50	522.57	514.50	471.00
36	585.86	600.64	580.76	569.18	537.43	533.98	525.99	517.87	474.09
37	589.67	604.55	584.54	572.88	540.92	537.45	529.41	521.24	477.17
38	593.48	608.45	588.31	576.58	544.42	540.92	532.83	524.61	480.25
39	601.10	616.27	595.87	583.99	551.41	547.87	539.67	531.34	486.42
40	608.72	624.08	603.42	591.39	558.40	554.81	546.51	538.08	492.59
41	620.15	635.80	614.75	602.50	568.89	565.23	556.78	548.18	501.84
42	631.10	647.03	625.61	613.14	578.94	575.22	566.61	557.87	510.70
43	646.35	662.66	640.72	627.95	592.92	589.11	580.30	571.34	523.04
44	665.40	682.19	659.61	646.46	610.40	606.47	597.40	588.18	538.45
45	687.78	705.14	681.80	668.21	630.93	626.88	617.50	607.97	556.57
46	714.46	732.49	708.24	694.12	655.40	651.19	641.45	631.55	578.15
47	744.46	763.25	737.99	723.28	682.93	678.54	668.39	658.07	602.44
48	778.76	798.41	771.98	756.59	714.39	709.80	699.18	688.39	630.19
49	812.58	833.08	805.51	789.45	745.41	740.62	729.54	718.28	657.55
50	850.68	872.15	843.28	826.47	780.36	775.35	763.75	751.96	688.39
51	888.31	910.73	880.58	863.02	814.88	809.65	797.53	785.22	718.84
52	929.75	953.21	921.66	903.28	852.89	847.42	834.74	821.85	752.37
53	971.66	996.18	963.21	944.01	891.34	885.62	872.37	858.91	786.29
54	1,016.91	1,042.58	1,008.07	987.97	932.85	926.86	912.99	898.90	822.91
55	1,062.16	1,088.97	1,052.92	1,031.93	974.36	968.10	953.62	938.90	859.52
56	1,111.22	1,139.26	1,101.55	1,079.59	1,019.37	1,012.82	997.66	982.27	899.22
57	1,160.76	1,190.05	1,150.66	1,127.72	1,064.81	1,057.97	1,042.14	1,026.06	939.31
58	1,213.62	1,244.25	1,203.07	1,179.08	1,113.31	1,106.15	1,089.60	1,072.79	982.09
59	1,239.82	1,271.11	1,229.04	1,204.53	1,137.34	1,130.03	1,113.12	1,095.95	1,003.29
60	1,292.69	1,325.32	1,281.45	1,255.90	1,185.84	1,178.22	1,160.59	1,142.68	1,046.07
61	1,338.42	1,372.19	1,326.77	1,300.32	1,227.78	1,219.90	1,201.64	1,183.10	1,083.07
62	1,368.42	1,402.96	1,356.52	1,329.47	1,255.31	1,247.25	1,228.58	1,209.63	1,107.36
63	1,406.05	1,441.54	1,393.82	1,366.03	1,289.83	1,281.54	1,262.37	1,242.89	1,137.81
64+	1,428.90	1,464.99	1,416.48	1,388.25	1,310.79	1,302.39	1,282.89	1,263.09	1,156.32

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

8

Santa Mateo County (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	393.87	403.81	390.44	382.66	361.31	351.81	339.48	323.79	297.05
15	428.88	439.70	425.15	416.67	393.43	383.08	369.65	352.57	323.46
16	442.27	453.43	438.42	429.68	405.71	395.04	381.19	363.58	333.55
17	455.65	467.15	451.69	442.68	417.99	407.00	392.73	374.58	343.65
18	470.07	481.93	465.98	456.69	431.21	419.87	405.15	386.43	354.52
19	484.49	496.71	480.27	470.70	444.44	432.75	417.58	398.28	365.40
20	499.42	512.02	495.07	485.20	458.13	446.09	430.45	410.56	376.66
21	514.86	527.86	510.38	500.21	472.30	459.88	443.76	423.26	388.31
22	514.86	527.86	510.38	500.21	472.30	459.88	443.76	423.26	388.31
23	514.86	527.86	510.38	500.21	472.30	459.88	443.76	423.26	388.31
24	514.86	527.86	510.38	500.21	472.30	459.88	443.76	423.26	388.31
25	516.92	529.97	512.43	502.21	474.19	461.72	445.53	424.95	389.86
26	527.22	540.52	522.63	512.21	483.64	470.92	454.41	433.42	397.63
27	539.58	553.19	534.88	524.22	494.97	481.96	465.06	443.57	406.94
28	559.66	573.78	554.79	543.73	513.39	499.89	482.37	460.08	422.09
29	576.13	590.67	571.12	559.73	528.51	514.61	496.57	473.62	434.51
30	584.37	599.12	579.29	567.74	536.06	521.97	503.67	480.40	440.73
31	596.73	611.79	591.53	579.74	547.40	533.01	514.32	490.55	450.05
32	609.08	624.45	603.78	591.75	558.73	544.04	524.97	500.71	459.37
33	616.80	632.37	611.44	599.25	565.82	550.94	531.62	507.06	465.19
34	625.04	640.82	619.61	607.25	573.38	558.30	538.72	513.83	471.40
35	629.16	645.04	623.69	611.25	577.15	561.98	542.27	517.22	474.51
36	633.28	649.26	627.77	615.26	580.93	565.66	545.82	520.61	477.62
37	637.40	653.49	631.86	619.26	584.71	569.34	549.37	523.99	480.72
38	641.52	657.71	635.94	623.26	588.49	573.02	552.92	527.38	483.83
39	649.76	666.15	644.10	631.26	596.05	580.37	560.02	534.15	490.04
40	657.99	674.60	652.27	639.27	603.60	587.73	567.12	540.92	496.25
41	670.35	687.27	664.52	651.27	614.94	598.77	577.77	551.08	505.57
42	682.19	699.41	676.26	662.78	625.80	609.35	587.98	560.82	514.51
43	698.67	716.30	692.59	678.78	640.92	624.06	602.18	574.36	526.93
44	719.26	737.41	713.01	698.79	659.81	642.46	619.93	591.29	542.46
45	743.46	762.22	736.99	722.30	682.01	664.07	640.79	611.18	560.71
46	772.29	791.78	765.58	750.31	708.46	689.83	665.64	634.89	582.46
47	804.73	825.04	797.73	781.82	738.21	718.80	693.59	661.55	606.92
48	841.80	863.04	834.48	817.84	772.22	751.91	725.54	692.03	634.88
49	878.35	900.52	870.71	853.35	805.75	784.56	757.05	722.08	662.45
50	919.54	942.75	911.55	893.37	843.53	821.35	792.55	755.94	693.51
51	960.22	984.45	951.87	932.89	880.85	857.68	827.61	789.37	724.19
52	1,005.01	1,030.37	996.27	976.41	921.94	897.69	866.22	826.20	757.97
53	1,050.32	1,076.83	1,041.18	1,020.42	963.50	938.16	905.27	863.44	792.14
54	1,099.23	1,126.97	1,089.67	1,067.94	1,008.37	981.85	947.42	903.65	829.03
55	1,148.14	1,177.12	1,138.16	1,115.46	1,053.24	1,025.54	989.58	943.86	865.92
56	1,201.17	1,231.49	1,190.73	1,166.98	1,101.88	1,072.91	1,035.29	987.46	905.92
57	1,254.72	1,286.39	1,243.81	1,219.01	1,151.00	1,120.74	1,081.44	1,031.48	946.30
58	1,311.87	1,344.98	1,300.46	1,274.53	1,203.43	1,171.78	1,130.70	1,078.46	989.40
59	1,340.19	1,374.01	1,328.53	1,302.04	1,229.41	1,197.08	1,155.10	1,101.74	1,010.76
60	1,397.34	1,432.60	1,385.18	1,357.56	1,281.83	1,248.13	1,204.36	1,148.72	1,053.86
61	1,446.76	1,483.28	1,434.18	1,405.58	1,327.17	1,292.27	1,246.96	1,189.35	1,091.14
62	1,479.20	1,516.53	1,466.33	1,437.10	1,356.93	1,321.25	1,274.92	1,216.02	1,115.60
63	1,519.87	1,558.23	1,506.65	1,476.61	1,394.24	1,357.58	1,309.97	1,249.45	1,146.28
64+	1,544.58	1,583.58	1,531.14	1,500.63	1,416.90	1,379.64	1,331.28	1,269.78	1,164.93

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

9

Santa Cruz County

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	344.89	353.60	341.89	335.07	316.38	314.35	309.65	304.87	279.09
15	375.55	385.03	372.28	364.86	344.51	342.29	337.17	331.97	303.90
16	387.27	397.04	383.90	376.25	355.26	352.98	347.70	342.33	313.39
17	398.99	409.06	395.52	387.64	366.01	363.66	358.22	352.69	322.87
18	411.62	422.00	408.04	399.90	377.59	375.17	369.55	363.85	333.09
19	424.24	434.95	420.55	412.16	389.17	386.67	380.89	375.01	343.30
20	437.31	448.35	433.51	424.87	401.16	398.59	392.62	386.57	353.88
21	450.84	462.22	446.92	438.01	413.57	410.92	404.77	398.52	364.83
22	450.84	462.22	446.92	438.01	413.57	410.92	404.77	398.52	364.83
23	450.84	462.22	446.92	438.01	413.57	410.92	404.77	398.52	364.83
24	450.84	462.22	446.92	438.01	413.57	410.92	404.77	398.52	364.83
25	452.64	464.07	448.70	439.76	415.23	412.56	406.39	400.12	366.29
26	461.66	473.31	457.64	448.52	423.50	420.78	414.48	408.09	373.58
27	472.48	484.40	468.37	459.03	433.42	430.64	424.20	417.65	382.34
28	490.06	502.43	485.80	476.11	449.55	446.67	439.98	433.19	396.57
29	504.49	517.22	500.10	490.13	462.79	459.81	452.93	445.95	408.24
30	511.70	524.62	507.25	497.14	469.40	466.39	459.41	452.32	414.08
31	522.52	535.71	517.98	507.65	479.33	476.25	469.13	461.89	422.84
32	533.34	546.80	528.70	518.16	489.26	486.11	478.84	471.45	431.59
33	540.10	553.74	535.41	524.73	495.46	492.28	484.91	477.43	437.06
34	547.32	561.13	542.56	531.74	502.08	498.85	491.39	483.80	442.90
35	550.92	564.83	546.13	535.24	505.39	502.14	494.63	486.99	445.82
36	554.53	568.53	549.71	538.75	508.69	505.43	497.86	490.18	448.74
37	558.14	572.22	553.28	542.25	512.00	508.71	501.10	493.37	451.66
38	561.74	575.92	556.86	545.76	515.31	512.00	504.34	496.56	454.58
39	568.96	583.32	564.01	552.76	521.93	518.58	510.82	502.93	460.41
40	576.17	590.71	571.16	559.77	528.55	525.15	517.29	509.31	466.25
41	586.99	601.81	581.89	570.28	538.47	535.01	527.01	518.87	475.01
42	597.36	612.44	592.17	580.36	547.98	544.46	536.32	528.04	483.40
43	611.79	627.23	606.47	594.37	561.22	557.61	549.27	540.79	495.07
44	629.82	645.72	624.34	611.90	577.76	574.05	565.46	556.73	509.66
45	651.01	667.44	645.35	632.48	597.20	593.36	584.48	575.46	526.81
46	676.26	693.32	670.38	657.01	620.36	616.37	607.15	597.78	547.24
47	704.66	722.44	698.53	684.60	646.41	642.26	632.65	622.89	570.23
48	737.12	755.72	730.71	716.14	676.19	671.85	661.79	651.58	596.49
49	769.13	788.54	762.44	747.24	705.55	701.02	690.53	679.88	622.40
50	805.20	825.52	798.19	782.28	738.64	733.90	722.91	711.76	651.58
51	840.81	862.03	833.50	816.88	771.31	766.36	754.89	743.24	680.40
52	880.04	902.25	872.38	854.99	807.29	802.11	790.11	777.91	712.14
53	919.71	942.92	911.71	893.53	843.69	838.27	825.73	812.98	744.25
54	962.54	986.83	954.17	935.14	882.98	877.30	864.18	850.84	778.91
55	1,005.37	1,030.74	996.63	976.75	922.27	916.34	902.63	888.70	813.57
56	1,051.81	1,078.35	1,042.66	1,021.87	964.86	958.67	944.32	929.75	851.14
57	1,098.69	1,126.42	1,089.14	1,067.42	1,007.88	1,001.40	986.42	971.20	889.09
58	1,148.74	1,177.73	1,138.74	1,116.04	1,053.78	1,047.01	1,031.35	1,015.43	929.58
59	1,173.53	1,203.15	1,163.33	1,140.13	1,076.53	1,069.61	1,053.61	1,037.35	949.65
60	1,223.58	1,254.46	1,212.93	1,188.75	1,122.43	1,115.22	1,098.54	1,081.59	990.14
61	1,266.86	1,298.83	1,255.84	1,230.80	1,162.14	1,154.67	1,137.40	1,119.84	1,025.17
62	1,295.26	1,327.95	1,283.99	1,258.39	1,188.19	1,180.56	1,162.90	1,144.95	1,048.15
63	1,330.88	1,364.46	1,319.30	1,293.00	1,220.86	1,213.02	1,194.87	1,176.43	1,076.97
64+	1,352.52	1,386.66	1,340.76	1,314.03	1,240.71	1,232.76	1,214.31	1,195.56	1,094.49

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

9

Santa Cruz County (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	381.31	390.93	377.99	370.46	349.79	340.59	328.65	313.47	287.58
15	415.20	425.68	411.59	403.39	380.88	370.87	357.86	341.33	313.14
16	428.16	438.97	424.44	415.98	392.77	382.44	369.03	351.98	322.92
17	441.12	452.26	437.29	428.57	404.66	394.02	380.20	362.64	332.69
18	455.08	466.56	451.12	442.13	417.46	406.48	392.23	374.11	343.22
19	469.04	480.87	464.96	455.69	430.26	418.95	404.26	385.58	353.74
20	483.49	495.69	479.28	469.73	443.52	431.86	416.72	397.47	364.65
21	498.44	511.02	494.11	484.26	457.24	445.22	429.61	409.76	375.92
22	498.44	511.02	494.11	484.26	457.24	445.22	429.61	409.76	375.92
23	498.44	511.02	494.11	484.26	457.24	445.22	429.61	409.76	375.92
24	498.44	511.02	494.11	484.26	457.24	445.22	429.61	409.76	375.92
25	500.44	513.07	496.08	486.19	459.07	447.00	431.33	411.40	377.43
26	510.41	523.29	505.97	495.88	468.22	455.90	439.92	419.59	384.95
27	522.37	535.55	517.83	507.50	479.19	466.59	450.23	429.43	393.97
28	541.81	555.48	537.10	526.39	497.02	483.95	466.98	445.41	408.63
29	557.76	571.83	552.91	541.88	511.65	498.20	480.73	458.52	420.66
30	565.73	580.01	560.81	549.63	518.97	505.32	487.60	465.08	426.67
31	577.70	592.28	572.67	561.25	529.94	516.01	497.91	474.91	435.69
32	589.66	604.54	584.53	572.88	540.92	526.69	508.23	484.75	444.72
33	597.14	612.21	591.94	580.14	547.78	533.37	514.67	490.89	450.36
34	605.11	620.38	599.85	587.89	555.09	540.50	521.54	497.45	456.37
35	609.10	624.47	603.80	591.76	558.75	544.06	524.98	500.73	459.38
36	613.09	628.56	607.75	595.64	562.41	547.62	528.42	504.00	462.39
37	617.07	632.65	611.71	599.51	566.07	551.18	531.85	507.28	465.39
38	621.06	636.73	615.66	603.38	569.72	554.74	535.29	510.56	468.40
39	629.04	644.91	623.56	611.13	577.04	561.87	542.16	517.12	474.41
40	637.01	653.09	631.47	618.88	584.36	568.99	549.04	523.67	480.43
41	648.97	665.35	643.33	630.50	595.33	579.67	559.35	533.51	489.45
42	660.44	677.11	654.69	641.64	605.85	589.91	569.23	542.93	498.10
43	676.39	693.46	670.50	657.14	620.48	604.16	582.98	556.04	510.13
44	696.33	713.90	690.27	676.51	638.77	621.97	600.16	572.43	525.16
45	719.75	737.92	713.49	699.27	660.26	642.90	620.35	591.69	542.83
46	747.67	766.53	741.16	726.38	685.86	667.83	644.41	614.64	563.88
47	779.07	798.73	772.29	756.89	714.67	695.88	671.48	640.45	587.57
48	814.96	835.52	807.87	791.76	747.59	727.93	702.41	669.96	614.63
49	850.34	871.81	842.95	826.14	780.05	759.54	732.91	699.05	641.32
50	890.22	912.69	882.48	864.88	816.63	795.16	767.28	731.83	671.40
51	929.60	953.06	921.51	903.14	852.76	830.33	801.22	764.20	701.10
52	972.96	997.52	964.50	945.27	892.54	869.07	838.59	799.85	733.80
53	1,016.82	1,042.49	1,007.98	987.88	932.77	908.25	876.40	835.91	766.88
54	1,064.18	1,091.03	1,054.92	1,033.89	976.21	950.54	917.21	874.84	802.60
55	1,111.53	1,139.58	1,101.86	1,079.89	1,019.65	992.84	958.02	913.76	838.31
56	1,162.87	1,192.22	1,152.75	1,129.77	1,066.75	1,038.70	1,002.27	955.97	877.03
57	1,214.71	1,245.36	1,204.14	1,180.13	1,114.30	1,085.00	1,046.95	998.58	916.12
58	1,270.03	1,302.09	1,258.99	1,233.89	1,165.05	1,134.42	1,094.64	1,044.07	957.85
59	1,297.45	1,330.19	1,286.16	1,260.52	1,190.20	1,158.90	1,118.27	1,066.60	978.53
60	1,352.78	1,386.92	1,341.01	1,314.27	1,240.95	1,208.32	1,165.95	1,112.09	1,020.26
61	1,400.63	1,435.97	1,388.44	1,360.76	1,284.85	1,251.06	1,207.20	1,151.42	1,056.34
62	1,432.03	1,468.17	1,419.57	1,391.27	1,313.66	1,279.11	1,234.26	1,177.24	1,080.03
63	1,471.41	1,508.54	1,458.61	1,429.53	1,349.78	1,314.29	1,268.20	1,209.61	1,109.73
64+	1,495.32	1,533.06	1,482.33	1,452.78	1,371.72	1,335.66	1,288.83	1,229.28	1,127.76

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

9

Santa Cruz County (continued)

Age	SmartCare HMO Platinum \$0	SmartCare HMO Platinum \$10	SmartCare HMO Platinum \$20	SmartCare HMO Platinum \$30	SmartCare HMO Gold \$30	SmartCare HMO Gold \$35	SmartCare HMO Gold \$40	SmartCare HMO Gold \$50	SmartCare HMO Silver \$55
0-14	339.77	348.34	336.81	328.77	311.68	309.68	305.04	299.14	273.85
15	369.97	379.30	366.75	358.00	339.38	337.20	332.16	325.73	298.19
16	381.51	391.14	378.20	369.17	349.98	347.73	342.53	335.89	307.50
17	393.06	402.98	389.64	380.35	360.57	358.25	352.89	346.06	316.80
18	405.50	415.73	401.97	392.38	371.98	369.59	364.06	357.01	326.83
19	417.93	428.48	414.30	404.41	383.39	380.92	375.22	367.96	336.85
20	430.81	441.69	427.07	416.88	395.20	392.66	386.79	379.30	347.23
21	444.14	455.35	440.27	429.77	407.42	404.81	398.75	391.03	357.97
22	444.14	455.35	440.27	429.77	407.42	404.81	398.75	391.03	357.97
23	444.14	455.35	440.27	429.77	407.42	404.81	398.75	391.03	357.97
24	444.14	455.35	440.27	429.77	407.42	404.81	398.75	391.03	357.97
25	445.91	457.17	442.04	431.49	409.05	406.43	400.35	392.59	359.40
26	454.80	466.27	450.84	440.08	417.20	414.52	408.32	400.41	366.56
27	465.46	477.20	461.41	450.40	426.98	424.24	417.89	409.80	375.15
28	482.78	494.96	478.58	467.16	442.87	440.03	433.44	425.05	389.11
29	496.99	509.53	492.67	480.91	455.91	452.98	446.20	437.56	400.57
30	504.10	516.82	499.71	487.79	462.43	459.46	452.58	443.82	406.29
31	514.76	527.75	510.28	498.10	472.21	469.17	462.15	453.20	414.89
32	525.41	538.67	520.84	508.42	481.98	478.89	471.72	462.59	423.48
33	532.08	545.51	527.45	514.86	488.10	484.96	477.70	468.45	428.85
34	539.18	552.79	534.49	521.74	494.61	491.44	484.08	474.71	434.57
35	542.74	556.43	538.02	525.18	497.87	494.68	487.27	477.84	437.44
36	546.29	560.08	541.54	528.62	501.13	497.91	490.46	480.96	440.30
37	549.84	563.72	545.06	532.06	504.39	501.15	493.65	484.09	443.17
38	553.40	567.36	548.58	535.49	507.65	504.39	496.84	487.22	446.03
39	560.50	574.65	555.63	542.37	514.17	510.87	503.22	493.48	451.76
40	567.61	581.93	562.67	549.25	520.69	517.34	509.60	499.73	457.48
41	578.27	592.86	573.24	559.56	530.47	527.06	519.17	509.12	466.08
42	588.48	603.33	583.36	569.45	539.84	536.37	528.35	518.11	474.31
43	602.69	617.91	597.45	583.20	552.88	549.32	541.11	530.62	485.76
44	620.46	636.12	615.06	600.39	569.17	565.52	557.06	546.27	500.08
45	641.33	657.52	635.76	620.59	588.32	584.54	575.80	564.64	516.91
46	666.21	683.02	660.41	644.66	611.14	607.21	598.13	586.54	536.95
47	694.19	711.71	688.15	671.73	636.81	632.71	623.25	611.18	559.51
48	726.17	744.49	719.85	702.67	666.14	661.86	651.96	639.33	585.28
49	757.70	776.82	751.11	733.19	695.07	690.60	680.27	667.09	610.69
50	793.23	813.25	786.33	767.57	727.66	722.99	712.17	698.37	639.33
51	828.32	849.22	821.11	801.52	759.85	754.97	743.67	729.27	667.61
52	866.96	888.84	859.42	838.91	795.29	790.18	778.36	763.29	698.76
53	906.04	928.91	898.16	876.73	831.15	825.81	813.45	797.70	730.26
54	948.23	972.16	939.99	917.56	869.85	864.26	851.33	834.84	764.26
55	990.43	1,015.42	981.81	958.39	908.56	902.72	889.21	871.99	798.27
56	1,036.17	1,062.32	1,027.16	1,002.65	950.52	944.42	930.29	912.27	835.14
57	1,082.36	1,109.68	1,072.95	1,047.35	992.89	986.52	971.76	952.93	872.37
58	1,131.66	1,160.22	1,121.82	1,095.05	1,038.12	1,031.45	1,016.02	996.34	912.10
59	1,156.09	1,185.27	1,146.03	1,118.69	1,060.53	1,053.71	1,037.95	1,017.84	931.79
60	1,205.39	1,235.81	1,194.90	1,166.40	1,105.75	1,098.65	1,082.21	1,061.25	971.53
61	1,248.03	1,279.52	1,237.17	1,207.65	1,144.86	1,137.51	1,120.49	1,098.79	1,005.89
62	1,276.01	1,308.21	1,264.91	1,234.73	1,170.53	1,163.01	1,145.61	1,123.42	1,028.44
63	1,311.09	1,344.18	1,299.69	1,268.68	1,202.72	1,194.99	1,177.11	1,154.31	1,056.72
64+	1,332.42	1,366.05	1,320.81	1,289.31	1,222.26	1,214.43	1,196.25	1,173.09	1,073.91

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 10

Merced, San Joaquin, Stanislaus, and Tulare counties

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	301.66	309.28	299.04	293.08	276.73	274.95	270.84	266.66	244.11
15	328.48	336.77	325.62	319.13	301.33	299.39	294.91	290.36	265.81
16	338.73	347.28	335.79	329.09	310.73	308.74	304.12	299.42	274.11
17	348.98	357.79	345.95	339.05	320.14	318.08	313.32	308.49	282.41
18	360.03	369.11	356.89	349.78	330.27	328.14	323.23	318.25	291.34
19	371.07	380.43	367.84	360.51	340.39	338.21	333.15	328.01	300.28
20	382.50	392.16	379.18	371.62	350.89	348.63	343.41	338.12	309.53
21	394.33	404.28	390.90	383.11	361.74	359.41	354.04	348.57	319.10
22	394.33	404.28	390.90	383.11	361.74	359.41	354.04	348.57	319.10
23	394.33	404.28	390.90	383.11	361.74	359.41	354.04	348.57	319.10
24	394.33	404.28	390.90	383.11	361.74	359.41	354.04	348.57	319.10
25	395.91	405.90	392.47	384.64	363.18	360.85	355.45	349.97	320.38
26	403.80	413.99	400.28	392.30	370.42	368.04	362.53	356.94	326.76
27	413.26	423.69	409.67	401.50	379.10	376.67	371.03	365.30	334.42
28	428.64	439.46	424.91	416.44	393.21	390.68	384.84	378.90	346.86
29	441.26	452.39	437.42	428.70	404.78	402.18	396.17	390.05	357.08
30	447.57	458.86	443.67	434.83	410.57	407.93	401.83	395.63	362.18
31	457.03	468.57	453.06	444.02	419.25	416.56	410.33	404.00	369.84
32	466.50	478.27	462.44	453.22	427.94	425.19	418.82	412.36	377.50
33	472.41	484.33	468.30	458.96	433.36	430.58	424.14	417.59	382.28
34	478.72	490.80	474.56	465.09	439.15	436.33	429.80	423.17	387.39
35	481.87	494.04	477.68	468.16	442.04	439.20	432.63	425.96	389.94
36	485.03	497.27	480.81	471.22	444.94	442.08	435.46	428.74	392.50
37	488.18	500.50	483.94	474.29	447.83	444.95	438.30	431.53	395.05
38	491.34	503.74	487.07	477.35	450.72	447.83	441.13	434.32	397.60
39	497.65	510.21	493.32	483.48	456.51	453.58	446.79	439.90	402.71
40	503.96	516.68	499.57	489.61	462.30	459.33	452.46	445.48	407.81
41	513.42	526.38	508.96	498.81	470.98	467.96	460.95	453.84	415.47
42	522.49	535.68	517.95	507.62	479.30	476.22	469.10	461.86	422.81
43	535.11	548.61	530.46	519.88	490.88	487.72	480.43	473.01	433.02
44	550.88	564.79	546.09	535.20	505.35	502.10	494.59	486.96	445.79
45	569.42	583.79	564.46	553.21	522.35	518.99	511.23	503.34	460.78
46	591.50	606.43	586.35	574.66	542.61	539.12	531.05	522.86	478.65
47	616.34	631.90	610.98	598.80	565.40	561.76	553.36	544.82	498.76
48	644.73	661.01	639.13	626.38	591.44	587.64	578.85	569.92	521.73
49	672.73	689.71	666.88	653.58	617.12	613.16	603.99	594.66	544.39
50	704.28	722.05	698.15	684.23	646.06	641.91	632.31	622.55	569.92
51	735.43	753.99	729.03	714.50	674.64	670.31	660.28	650.09	595.13
52	769.74	789.16	763.04	747.83	706.11	701.58	691.08	680.41	622.89
53	804.44	824.74	797.44	781.54	737.94	733.20	722.23	711.09	650.97
54	841.90	863.15	834.58	817.94	772.31	767.35	755.87	744.20	681.28
55	879.36	901.56	871.71	854.33	806.67	801.49	789.50	777.32	711.60
56	919.98	943.20	911.98	893.79	843.93	838.51	825.97	813.22	744.47
57	960.99	985.24	952.63	933.64	881.55	875.89	862.79	849.47	777.65
58	1,004.76	1,030.12	996.02	976.16	921.71	915.79	902.08	888.16	813.07
59	1,026.45	1,052.35	1,017.52	997.23	941.60	935.55	921.56	907.33	830.62
60	1,070.22	1,097.23	1,060.91	1,039.76	981.75	975.45	960.85	946.03	866.04
61	1,108.08	1,136.04	1,098.44	1,076.54	1,016.48	1,009.95	994.84	979.49	896.68
62	1,132.92	1,161.51	1,123.06	1,100.67	1,039.27	1,032.60	1,017.15	1,001.45	916.78
63	1,164.07	1,193.45	1,153.95	1,130.94	1,067.85	1,060.99	1,045.11	1,028.99	941.99
64+	1,182.99	1,212.84	1,172.70	1,149.33	1,085.22	1,078.23	1,062.12	1,045.71	957.30

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 10

Merced, San Joaquin, Stanislaus, and Tulare counties (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	333.52	341.94	330.62	324.03	305.95	297.90	287.46	274.18	251.54
15	363.16	372.33	360.01	352.83	333.14	324.38	313.01	298.55	273.90
16	374.50	383.95	371.24	363.84	343.54	334.51	322.78	307.87	282.45
17	385.83	395.57	382.48	374.85	353.94	344.63	332.55	317.19	290.99
18	398.04	408.09	394.58	386.71	365.14	355.54	343.07	327.22	300.20
19	410.25	420.60	406.68	398.57	376.34	366.44	353.59	337.26	309.41
20	422.89	433.56	419.21	410.86	387.94	377.74	364.49	347.65	318.94
21	435.97	446.97	432.18	423.56	399.93	389.42	375.76	358.40	328.81
22	435.97	446.97	432.18	423.56	399.93	389.42	375.76	358.40	328.81
23	435.97	446.97	432.18	423.56	399.93	389.42	375.76	358.40	328.81
24	435.97	446.97	432.18	423.56	399.93	389.42	375.76	358.40	328.81
25	437.72	448.76	433.91	425.26	401.53	390.98	377.27	359.84	330.12
26	446.43	457.70	442.55	433.73	409.53	398.76	384.78	367.00	336.70
27	456.90	468.43	452.92	443.89	419.13	408.11	393.80	375.61	344.59
28	473.90	485.86	469.78	460.41	434.73	423.30	408.45	389.58	357.41
29	487.85	500.16	483.61	473.97	447.53	435.76	420.48	401.05	367.94
30	494.83	507.32	490.52	480.74	453.92	441.99	426.49	406.79	373.20
31	505.29	518.04	500.90	490.91	463.52	451.33	435.51	415.39	381.09
32	515.75	528.77	511.27	501.07	473.12	460.68	444.53	423.99	388.98
33	522.29	535.48	517.75	507.43	479.12	466.52	450.16	429.37	393.91
34	529.27	542.63	524.67	514.20	485.52	472.75	456.18	435.10	399.17
35	532.76	546.20	528.12	517.59	488.72	475.87	459.18	437.97	401.80
36	536.24	549.78	531.58	520.98	491.92	478.98	462.19	440.84	404.43
37	539.73	553.35	535.04	524.37	495.12	482.10	465.19	443.70	407.06
38	543.22	556.93	538.50	527.76	498.32	485.21	468.20	446.57	409.69
39	550.20	564.08	545.41	534.54	504.72	491.44	474.21	452.30	414.95
40	557.17	571.23	552.33	541.31	511.12	497.68	480.22	458.04	420.22
41	567.63	581.96	562.70	551.48	520.71	507.02	489.24	466.64	428.11
42	577.66	592.24	572.64	561.22	529.91	515.98	497.89	474.88	435.67
43	591.61	606.54	586.47	574.77	542.71	528.44	509.91	486.35	446.19
44	609.05	624.42	603.75	591.72	558.71	544.02	524.94	500.69	459.34
45	629.54	645.43	624.07	611.62	577.50	562.32	542.60	517.53	474.80
46	653.96	670.46	648.27	635.34	599.90	584.13	563.64	537.60	493.21
47	681.42	698.62	675.50	662.03	625.10	608.66	587.32	560.18	513.93
48	712.81	730.80	706.61	692.52	653.89	636.70	614.37	585.99	537.60
49	743.77	762.54	737.30	722.60	682.29	664.35	641.05	611.43	560.94
50	778.65	798.30	771.87	756.48	714.28	695.50	671.11	640.11	587.25
51	813.09	833.61	806.01	789.94	745.88	726.26	700.80	668.42	613.23
52	851.02	872.49	843.61	826.79	780.67	760.14	733.49	699.60	641.83
53	889.38	911.83	881.65	864.07	815.86	794.41	766.56	731.14	670.77
54	930.80	954.29	922.70	904.31	853.86	831.41	802.25	765.19	702.00
55	972.22	996.75	963.76	944.54	891.85	868.40	837.95	799.24	733.24
56	1,017.12	1,042.79	1,008.27	988.17	933.05	908.51	876.65	836.15	767.11
57	1,062.46	1,089.28	1,053.22	1,032.22	974.64	949.01	915.73	873.43	801.30
58	1,110.86	1,138.89	1,101.19	1,079.24	1,019.03	992.24	957.44	913.21	837.80
59	1,134.83	1,163.47	1,124.96	1,102.53	1,041.03	1,013.65	978.11	932.92	855.88
60	1,183.23	1,213.09	1,172.93	1,149.55	1,085.42	1,056.88	1,019.82	972.70	892.38
61	1,225.08	1,256.00	1,214.42	1,190.21	1,123.81	1,094.26	1,055.89	1,007.11	923.95
62	1,252.55	1,284.16	1,241.65	1,216.89	1,149.01	1,118.80	1,079.57	1,029.69	944.66
63	1,286.99	1,319.47	1,275.79	1,250.36	1,180.60	1,149.56	1,109.25	1,058.00	970.64
64+	1,307.91	1,340.91	1,296.54	1,270.68	1,199.79	1,168.26	1,127.28	1,075.20	986.43

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

11

Fresno, Kings and Madera counties

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	316.05	324.02	313.30	307.05	289.92	288.06	283.75	279.37	255.75
15	344.14	352.82	341.15	334.34	315.69	313.66	308.97	304.20	278.48
16	354.88	363.84	351.79	344.78	325.55	323.45	318.62	313.70	287.18
17	365.62	374.85	362.44	355.22	335.40	333.25	328.26	323.19	295.87
18	377.19	386.71	373.91	366.45	346.01	343.79	338.64	333.42	305.23
19	388.76	398.57	385.38	377.69	356.62	354.33	349.03	343.64	314.59
20	400.74	410.85	397.25	389.33	367.61	365.25	359.79	354.23	324.29
21	413.13	423.56	409.54	401.37	378.98	376.55	370.91	365.19	334.32
22	413.13	423.56	409.54	401.37	378.98	376.55	370.91	365.19	334.32
23	413.13	423.56	409.54	401.37	378.98	376.55	370.91	365.19	334.32
24	413.13	423.56	409.54	401.37	378.98	376.55	370.91	365.19	334.32
25	414.78	425.25	411.18	402.98	380.50	378.05	372.40	366.65	335.65
26	423.05	433.72	419.37	411.01	388.08	385.59	379.82	373.95	342.34
27	432.96	443.89	429.20	420.64	397.17	394.62	388.72	382.72	350.36
28	449.07	460.41	445.17	436.29	411.95	409.31	403.18	396.96	363.40
29	462.30	473.96	458.27	449.14	424.08	421.36	415.05	408.65	374.10
30	468.91	480.74	464.83	455.56	430.15	427.38	420.99	414.49	379.45
31	478.82	490.90	474.66	465.19	439.24	436.42	429.89	423.26	387.47
32	488.74	501.07	484.48	474.82	448.34	445.46	438.79	432.02	395.50
33	494.93	507.42	490.63	480.85	454.02	451.10	444.36	437.50	400.51
34	501.54	514.20	497.18	487.27	460.08	457.13	450.29	443.34	405.86
35	504.85	517.59	500.46	490.48	463.12	460.14	453.26	446.26	408.53
36	508.15	520.98	503.73	493.69	466.15	463.15	456.22	449.18	411.21
37	511.46	524.37	507.01	496.90	469.18	466.17	459.19	452.11	413.88
38	514.76	527.75	510.29	500.11	472.21	469.18	462.16	455.03	416.56
39	521.37	534.53	516.84	506.53	478.28	475.20	468.09	460.87	421.91
40	527.98	541.31	523.39	512.96	484.34	481.23	474.03	466.71	427.26
41	537.90	551.47	533.22	522.59	493.44	490.27	482.93	475.48	435.28
42	547.40	561.22	542.64	531.82	502.15	498.93	491.46	483.88	442.97
43	560.62	574.77	555.74	544.66	514.28	510.98	503.33	495.56	453.67
44	577.15	591.71	572.13	560.72	529.44	526.04	518.17	510.17	467.04
45	596.56	611.62	591.37	579.58	547.25	543.74	535.60	527.33	482.75
46	619.70	635.34	614.31	602.06	568.47	564.82	556.37	547.79	501.47
47	645.73	662.02	640.11	627.35	592.35	588.54	579.74	570.79	522.53
48	675.47	692.52	669.60	656.25	619.64	615.66	606.44	597.09	546.61
49	704.80	722.59	698.67	684.74	646.54	642.39	632.78	623.01	570.34
50	737.85	756.48	731.44	716.85	676.86	672.52	662.45	652.23	597.09
51	770.49	789.94	763.79	748.56	706.80	702.26	691.76	681.08	623.50
52	806.43	826.79	799.42	783.48	739.77	735.02	724.02	712.85	652.58
53	842.79	864.06	835.46	818.80	773.12	768.16	756.67	744.99	682.00
54	882.04	904.30	874.37	856.93	809.13	803.93	791.90	779.68	713.76
55	921.29	944.54	913.27	895.06	845.13	839.70	827.14	814.37	745.52
56	963.84	988.16	955.45	936.40	884.17	878.49	865.34	851.99	779.96
57	1,006.80	1,032.21	998.05	978.15	923.58	917.65	903.92	889.97	814.73
58	1,052.66	1,079.23	1,043.51	1,022.70	965.65	959.44	945.09	930.51	851.84
59	1,075.38	1,102.52	1,066.03	1,044.78	986.49	980.16	965.49	950.59	870.22
60	1,121.24	1,149.54	1,111.49	1,089.33	1,028.56	1,021.95	1,006.66	991.13	907.33
61	1,160.90	1,190.20	1,150.80	1,127.86	1,064.94	1,058.10	1,042.27	1,026.19	939.43
62	1,186.93	1,216.88	1,176.61	1,153.15	1,088.82	1,081.82	1,065.64	1,049.19	960.49
63	1,219.57	1,250.35	1,208.96	1,184.85	1,118.76	1,111.57	1,094.94	1,078.04	986.90
64+	1,239.39	1,270.68	1,228.62	1,204.11	1,136.94	1,129.65	1,112.73	1,095.57	1,002.96

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

11

Fresno, Kings and Madera counties (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	349.42	358.24	346.38	339.47	320.54	312.11	301.16	287.25	263.53
15	380.48	390.08	377.17	369.65	349.03	339.85	327.93	312.78	286.95
16	392.35	402.26	388.94	381.19	359.92	350.46	338.17	322.55	295.91
17	404.23	414.43	400.71	392.72	370.82	361.06	348.40	332.31	304.87
18	417.02	427.54	413.39	405.15	382.55	372.49	359.43	342.82	314.51
19	429.81	440.65	426.07	417.57	394.28	383.91	370.45	353.34	324.16
20	443.05	454.23	439.20	430.44	406.43	395.74	381.87	364.22	334.15
21	456.76	468.28	452.78	443.76	419.00	407.98	393.68	375.49	344.48
22	456.76	468.28	452.78	443.76	419.00	407.98	393.68	375.49	344.48
23	456.76	468.28	452.78	443.76	419.00	407.98	393.68	375.49	344.48
24	456.76	468.28	452.78	443.76	419.00	407.98	393.68	375.49	344.48
25	458.58	470.16	454.59	445.53	420.68	409.61	395.25	376.99	345.86
26	467.72	479.52	463.65	454.41	429.06	417.77	403.12	384.50	352.75
27	478.68	490.76	474.52	465.06	439.11	427.57	412.57	393.51	361.02
28	496.49	509.02	492.18	482.36	455.45	443.48	427.93	408.16	374.45
29	511.11	524.01	506.66	496.56	468.86	456.53	440.52	420.17	385.48
30	518.42	531.50	513.91	503.66	475.57	463.06	446.82	426.18	390.99
31	529.38	542.74	524.78	514.31	485.62	472.85	456.27	435.19	399.26
32	540.34	553.98	535.64	524.96	495.68	482.64	465.72	444.20	407.52
33	547.19	561.00	542.43	531.62	501.96	488.76	471.62	449.84	412.69
34	554.50	568.50	549.68	538.72	508.67	495.29	477.92	455.84	418.20
35	558.16	572.24	553.30	542.27	512.02	498.55	481.07	458.85	420.96
36	561.81	575.99	556.92	545.82	515.37	501.82	484.22	461.85	423.71
37	565.46	579.73	560.55	549.37	518.72	505.08	487.37	464.86	426.47
38	569.12	583.48	564.17	552.92	522.07	508.35	490.52	467.86	429.23
39	576.43	590.97	571.41	560.02	528.78	514.87	496.82	473.87	434.74
40	583.73	598.47	578.66	567.12	535.48	521.40	503.12	479.87	440.25
41	594.70	609.70	589.52	577.77	545.54	531.19	512.57	488.89	448.52
42	605.20	620.48	599.94	587.98	555.18	540.58	521.62	497.52	456.44
43	619.82	635.46	614.43	602.18	568.58	553.63	534.22	509.54	467.46
44	638.09	654.19	632.54	619.93	585.34	569.95	549.97	524.56	481.24
45	659.56	676.20	653.82	640.78	605.04	589.13	568.47	542.21	497.43
46	685.13	702.42	679.17	665.63	628.50	611.97	590.52	563.23	516.72
47	713.91	731.93	707.70	693.59	654.90	637.68	615.32	586.89	538.43
48	746.80	765.64	740.30	725.54	685.07	667.05	643.66	613.92	563.23
49	779.23	798.89	772.45	757.05	714.81	696.02	671.61	640.58	587.69
50	815.77	836.35	808.67	792.55	748.33	728.66	703.11	670.62	615.25
51	851.85	873.35	844.44	827.60	781.44	760.89	734.21	700.29	642.46
52	891.59	914.09	883.83	866.21	817.89	796.38	768.46	732.95	672.43
53	931.78	955.30	923.68	905.26	854.76	832.28	803.10	766.00	702.74
54	975.17	999.78	966.69	947.42	894.57	871.04	840.50	801.67	735.47
55	1,018.57	1,044.27	1,009.71	989.57	934.37	909.80	877.90	837.34	768.20
56	1,065.61	1,092.50	1,056.34	1,035.28	977.53	951.82	918.45	876.02	803.68
57	1,113.11	1,141.21	1,103.43	1,081.43	1,021.10	994.25	959.39	915.07	839.50
58	1,163.81	1,193.19	1,153.69	1,130.69	1,067.61	1,039.54	1,003.09	956.75	877.74
59	1,188.94	1,218.94	1,178.59	1,155.10	1,090.66	1,061.98	1,024.74	977.40	896.69
60	1,239.64	1,270.92	1,228.85	1,204.35	1,137.17	1,107.26	1,068.44	1,019.08	934.93
61	1,283.48	1,315.88	1,272.32	1,246.95	1,177.39	1,146.43	1,106.23	1,055.12	968.00
62	1,312.26	1,345.38	1,300.85	1,274.91	1,203.79	1,172.13	1,131.03	1,078.78	989.70
63	1,348.34	1,382.37	1,336.62	1,309.97	1,236.89	1,204.36	1,162.13	1,108.44	1,016.91
64+	1,370.28	1,404.84	1,358.34	1,331.28	1,257.00	1,223.94	1,181.04	1,126.47	1,033.44

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 12

Santa Barbara and Ventura counties

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	292.67	300.06	290.13	284.34	268.48	266.75	262.76	258.71	236.84
15	318.69	326.73	315.91	309.62	292.34	290.47	286.12	281.70	257.89
16	328.63	336.93	325.78	319.28	301.47	299.53	295.05	290.50	265.94
17	338.58	347.13	335.64	328.94	310.59	308.60	303.98	299.29	273.99
18	349.29	358.11	346.25	339.35	320.42	318.36	313.60	308.76	282.66
19	360.01	369.09	356.87	349.76	330.25	328.13	323.22	318.23	291.32
20	371.10	380.47	367.87	360.54	340.42	338.24	333.18	328.04	300.30
21	382.58	392.23	379.25	371.69	350.95	348.70	343.48	338.18	309.59
22	382.58	392.23	379.25	371.69	350.95	348.70	343.48	338.18	309.59
23	382.58	392.23	379.25	371.69	350.95	348.70	343.48	338.18	309.59
24	382.58	392.23	379.25	371.69	350.95	348.70	343.48	338.18	309.59
25	384.11	393.80	380.77	373.17	352.36	350.09	344.86	339.53	310.83
26	391.76	401.65	388.35	380.61	359.38	357.07	351.73	346.30	317.02
27	400.94	411.06	397.45	389.53	367.80	365.44	359.97	354.41	324.45
28	415.86	426.36	412.24	404.02	381.49	379.04	373.36	367.60	336.52
29	428.10	438.91	424.38	415.92	392.72	390.19	384.36	378.42	346.43
30	434.23	445.18	430.45	421.87	398.33	395.77	389.85	383.84	351.38
31	443.41	454.60	439.55	430.79	406.75	404.14	398.10	391.95	358.81
32	452.59	464.01	448.65	439.71	415.18	412.51	406.34	400.07	366.24
33	458.33	469.89	454.34	445.28	420.44	417.74	411.49	405.14	370.89
34	464.45	476.17	460.41	451.23	426.06	423.32	416.99	410.55	375.84
35	467.51	479.31	463.44	454.20	428.86	426.11	419.73	413.26	378.32
36	470.57	482.45	466.48	457.18	431.67	428.90	422.48	415.96	380.80
37	473.63	485.58	469.51	460.15	434.48	431.69	425.23	418.67	383.27
38	476.69	488.72	472.54	463.12	437.29	434.48	427.98	421.37	385.75
39	482.81	495.00	478.61	469.07	442.90	440.06	433.47	426.78	390.70
40	488.93	501.27	484.68	475.02	448.52	445.64	438.97	432.20	395.66
41	498.12	510.69	493.78	483.94	456.94	454.01	447.21	440.31	403.09
42	506.91	519.71	502.51	492.49	465.01	462.03	455.11	448.09	410.21
43	519.16	532.26	514.64	504.38	476.24	473.18	466.10	458.91	420.11
44	534.46	547.95	529.81	519.25	490.28	487.13	479.84	472.44	432.50
45	552.44	566.38	547.64	536.72	506.78	503.52	495.99	488.33	447.05
46	573.87	588.35	568.87	557.53	526.43	523.05	515.22	507.27	464.38
47	597.97	613.06	592.77	580.95	548.54	545.02	536.86	528.58	483.89
48	625.51	641.30	620.07	607.71	573.81	570.12	561.59	552.93	506.18
49	652.68	669.15	647.00	634.10	598.73	594.88	585.98	576.94	528.16
50	683.28	700.53	677.34	663.83	626.80	622.78	613.46	603.99	552.93
51	713.51	731.51	707.30	693.20	654.53	650.32	640.59	630.71	577.38
52	746.79	765.64	740.30	725.54	685.06	680.66	670.48	660.13	604.32
53	780.46	800.15	773.67	758.24	715.94	711.35	700.70	689.89	631.56
54	816.80	837.42	809.70	793.55	749.29	744.47	733.33	722.02	660.97
55	853.15	874.68	845.73	828.86	782.63	777.60	765.96	754.14	690.38
56	892.55	915.08	884.79	867.15	818.77	813.51	801.34	788.98	722.27
57	932.34	955.87	924.23	905.80	855.27	849.78	837.06	824.15	754.47
58	974.81	999.41	966.33	947.06	894.23	888.48	875.19	861.69	788.83
59	995.85	1,020.98	987.19	967.50	913.53	907.66	894.08	880.29	805.86
60	1,038.31	1,064.52	1,029.28	1,008.76	952.49	946.37	932.21	917.82	840.23
61	1,075.04	1,102.17	1,065.69	1,044.44	986.18	979.84	965.18	950.29	869.95
62	1,099.14	1,126.88	1,089.58	1,067.86	1,008.29	1,001.81	986.82	971.59	889.45
63	1,129.37	1,157.87	1,119.54	1,097.22	1,036.01	1,029.36	1,013.96	998.31	913.91
64+	1,147.74	1,176.69	1,137.75	1,115.07	1,052.85	1,046.10	1,030.44	1,014.54	928.77

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 12

Santa Barbara and Ventura counties (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	323.58	331.74	320.76	314.37	296.83	289.02	278.89	266.00	244.04
15	352.34	361.23	349.27	342.31	323.21	314.71	303.68	289.65	265.73
16	363.33	372.50	360.17	352.99	333.30	324.54	313.16	298.69	274.03
17	374.33	383.78	371.08	363.68	343.39	334.36	322.64	307.73	282.32
18	386.18	395.92	382.82	375.18	354.25	344.94	332.84	317.47	291.25
19	398.02	408.06	394.56	386.69	365.12	355.52	343.05	327.20	300.18
20	410.29	420.64	406.72	398.61	376.37	366.47	353.62	337.29	309.43
21	422.97	433.65	419.30	410.94	388.01	377.81	364.56	347.72	319.00
22	422.97	433.65	419.30	410.94	388.01	377.81	364.56	347.72	319.00
23	422.97	433.65	419.30	410.94	388.01	377.81	364.56	347.72	319.00
24	422.97	433.65	419.30	410.94	388.01	377.81	364.56	347.72	319.00
25	424.67	435.38	420.97	412.58	389.56	379.32	366.02	349.11	320.28
26	433.13	444.06	429.36	420.80	397.32	386.88	373.31	356.06	326.66
27	443.28	454.46	439.42	430.66	406.64	395.94	382.06	364.41	334.32
28	459.77	471.38	455.77	446.69	421.77	410.68	396.28	377.97	346.76
29	473.31	485.25	469.19	459.84	434.18	422.77	407.94	389.10	356.97
30	480.08	492.19	475.90	466.41	440.39	428.81	413.78	394.66	362.07
31	490.23	502.60	485.96	476.27	449.70	437.88	422.53	403.01	369.73
32	500.38	513.01	496.03	486.14	459.02	446.95	431.28	411.35	377.38
33	506.72	519.51	502.32	492.30	464.84	452.61	436.74	416.57	382.17
34	513.49	526.45	509.02	498.88	471.05	458.66	442.58	422.13	387.27
35	516.87	529.92	512.38	502.16	474.15	461.68	445.49	424.91	389.82
36	520.26	533.39	515.73	505.45	477.25	464.70	448.41	427.69	392.38
37	523.64	536.86	519.09	508.74	480.36	467.73	451.33	430.47	394.93
38	527.03	540.33	522.44	512.03	483.46	470.75	454.24	433.26	397.48
39	533.79	547.27	529.15	518.60	489.67	476.79	460.08	438.82	402.58
40	540.56	554.20	535.86	525.18	495.88	482.84	465.91	444.38	407.69
41	550.71	564.61	545.92	535.04	505.19	491.91	474.66	452.73	415.34
42	560.44	574.59	555.57	544.49	514.11	500.60	483.04	460.73	422.68
43	573.98	588.46	568.98	557.64	526.53	512.69	494.71	471.85	432.89
44	590.90	605.81	585.76	574.08	542.05	527.80	509.29	485.76	445.65
45	610.78	626.19	605.46	593.39	560.29	545.56	526.43	502.10	460.64
46	634.46	650.47	628.94	616.40	582.02	566.71	546.84	521.58	478.51
47	661.11	677.79	655.36	642.29	606.46	590.51	569.81	543.48	498.60
48	691.56	709.02	685.55	671.88	634.40	617.72	596.06	568.52	521.57
49	721.59	739.81	715.32	701.06	661.95	644.54	621.94	593.21	544.22
50	755.43	774.50	748.86	733.93	692.99	674.77	651.11	621.02	569.74
51	788.85	808.76	781.99	766.39	723.64	704.61	679.91	648.49	594.94
52	825.65	846.48	818.46	802.15	757.40	737.48	711.62	678.75	622.70
53	862.87	884.64	855.36	838.31	791.54	770.73	743.70	709.34	650.77
54	903.05	925.84	895.20	877.35	828.40	806.62	778.34	742.38	681.08
55	943.23	967.04	935.03	916.39	865.26	842.51	812.97	775.41	711.38
56	986.80	1,011.70	978.22	958.71	905.23	881.43	850.52	811.23	744.24
57	1,030.79	1,056.80	1,021.82	1,001.45	945.58	920.72	888.43	847.39	777.41
58	1,077.74	1,104.94	1,068.36	1,047.06	988.65	962.66	928.90	885.99	812.82
59	1,101.00	1,128.79	1,091.43	1,069.66	1,009.99	983.44	948.95	905.11	830.37
60	1,147.95	1,176.92	1,137.97	1,115.28	1,053.06	1,025.37	989.42	943.71	865.78
61	1,188.56	1,218.55	1,178.22	1,154.73	1,090.31	1,061.64	1,024.42	977.09	896.40
62	1,215.21	1,245.87	1,204.64	1,180.62	1,114.76	1,085.44	1,047.38	998.99	916.50
63	1,248.62	1,280.13	1,237.76	1,213.08	1,145.41	1,115.29	1,076.18	1,026.46	941.70
64+	1,268.91	1,300.95	1,257.90	1,232.82	1,164.03	1,133.43	1,093.68	1,043.16	957.00

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region
14
Kern County

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	286.00	293.21	283.51	277.85	262.35	260.67	256.77	252.81	231.43
15	311.42	319.28	308.71	302.55	285.67	283.84	279.59	275.28	252.01
16	321.14	329.24	318.34	312.00	294.59	292.70	288.32	283.87	259.87
17	330.86	339.21	327.98	321.44	303.51	301.56	297.05	292.46	267.74
18	341.32	349.94	338.36	331.61	313.11	311.10	306.44	301.72	276.21
19	351.79	360.67	348.73	341.78	322.71	320.64	315.84	310.97	284.68
20	362.63	371.79	359.48	352.31	332.66	330.52	325.58	320.55	293.45
21	373.85	383.28	370.60	363.21	342.95	340.74	335.65	330.47	302.53
22	373.85	383.28	370.60	363.21	342.95	340.74	335.65	330.47	302.53
23	373.85	383.28	370.60	363.21	342.95	340.74	335.65	330.47	302.53
24	373.85	383.28	370.60	363.21	342.95	340.74	335.65	330.47	302.53
25	375.35	384.82	372.08	364.66	344.32	342.11	336.99	331.79	303.74
26	382.82	392.48	379.49	371.93	351.18	348.92	343.70	338.40	309.79
27	391.79	401.68	388.39	380.64	359.41	357.10	351.76	346.33	317.05
28	406.37	416.63	402.84	394.81	372.78	370.39	364.85	359.22	328.85
29	418.34	428.90	414.70	406.43	383.76	381.29	375.59	369.79	338.53
30	424.32	435.03	420.63	412.24	389.25	386.74	380.96	375.08	343.37
31	433.29	444.23	429.52	420.96	397.48	394.92	389.01	383.01	350.63
32	442.26	453.43	438.42	429.68	405.71	403.10	397.07	390.94	357.89
33	447.87	459.18	443.98	435.12	410.85	408.21	402.10	395.90	362.43
34	453.85	465.31	449.91	440.94	416.34	413.66	407.47	401.19	367.27
35	456.84	468.37	452.87	443.84	419.08	416.39	410.16	403.83	369.69
36	459.84	471.44	455.84	446.75	421.83	419.12	412.84	406.47	372.11
37	462.83	474.51	458.80	449.65	424.57	421.84	415.53	409.12	374.53
38	465.82	477.57	461.77	452.56	427.31	424.57	418.21	411.76	376.95
39	471.80	483.71	467.69	458.37	432.80	430.02	423.59	417.05	381.79
40	477.78	489.84	473.62	464.18	438.29	435.47	428.96	422.34	386.63
41	486.75	499.04	482.52	472.90	446.52	443.65	437.01	430.27	393.89
42	495.35	507.85	491.04	481.25	454.40	451.49	444.73	437.87	400.85
43	507.31	520.12	502.90	492.87	463.38	462.39	455.47	448.44	410.53
44	522.27	535.45	517.73	507.40	479.10	476.02	468.90	461.66	422.63
45	539.84	553.46	535.14	524.47	495.22	492.03	484.67	477.19	436.85
46	560.77	574.93	555.90	544.81	514.42	511.12	503.47	495.70	453.79
47	584.33	599.07	579.24	567.70	536.03	532.58	524.61	516.52	472.85
48	611.24	626.67	605.93	593.85	560.72	557.12	548.78	540.31	494.63
49	637.79	653.88	632.24	619.63	585.07	581.31	572.61	563.78	516.11
50	667.70	684.55	661.89	648.69	612.50	608.57	599.46	590.21	540.31
51	697.23	714.83	691.17	677.38	639.60	635.49	625.98	616.32	564.21
52	729.75	748.17	723.41	708.98	669.43	665.13	655.18	645.07	590.53
53	762.65	781.90	756.02	740.95	699.61	695.12	684.72	674.15	617.16
54	798.17	818.31	791.23	775.45	732.19	727.49	716.60	705.55	645.90
55	833.69	854.73	826.43	809.96	764.77	759.86	748.49	736.94	674.64
56	872.19	894.20	864.61	847.37	800.10	794.96	783.06	770.98	705.80
57	911.07	934.07	903.15	885.14	835.76	830.39	817.97	805.35	737.26
58	952.57	976.61	944.28	925.46	873.83	868.22	855.23	842.03	770.84
59	973.13	997.69	964.67	945.43	892.69	886.96	873.69	860.20	787.48
60	1,014.63	1,040.23	1,005.80	985.75	930.76	924.78	910.94	896.89	821.06
61	1,050.52	1,077.03	1,041.38	1,020.62	963.68	957.49	943.17	928.61	850.10
62	1,074.07	1,101.18	1,064.73	1,043.50	985.29	978.96	964.31	949.43	869.16
63	1,103.60	1,131.46	1,094.01	1,072.19	1,012.38	1,005.88	990.83	975.54	893.06
64+	1,121.55	1,149.84	1,111.80	1,089.63	1,028.85	1,022.22	1,006.95	991.41	907.59

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

14

Kern County (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	316.19	324.17	313.44	307.19	290.06	282.43	272.53	259.94	238.47
15	344.30	352.99	341.31	334.50	315.84	307.53	296.75	283.04	259.67
16	355.05	364.01	351.96	344.94	325.70	317.13	306.01	291.88	267.77
17	365.79	375.02	362.61	355.38	335.56	326.73	315.28	300.71	275.88
18	377.37	386.89	374.08	366.63	346.17	337.07	325.25	310.22	284.61
19	388.94	398.75	385.56	377.87	356.79	347.41	335.23	319.74	293.34
20	400.93	411.04	397.44	389.51	367.78	358.11	345.56	329.59	302.38
21	413.33	423.76	409.73	401.56	379.16	369.19	356.24	339.79	311.73
22	413.33	423.76	409.73	401.56	379.16	369.19	356.24	339.79	311.73
23	413.33	423.76	409.73	401.56	379.16	369.19	356.24	339.79	311.73
24	413.33	423.76	409.73	401.56	379.16	369.19	356.24	339.79	311.73
25	414.98	425.45	411.37	403.17	380.68	370.67	357.67	341.14	312.97
26	423.25	433.93	419.56	411.20	388.26	378.05	364.79	347.94	319.21
27	433.16	444.10	429.40	420.84	397.36	386.91	373.34	356.10	326.69
28	449.28	460.62	445.38	436.50	412.15	401.31	387.24	369.35	338.85
29	462.51	474.18	458.49	449.35	424.28	413.12	398.64	380.22	348.82
30	469.12	480.96	465.04	455.77	430.35	419.03	404.34	385.66	353.81
31	479.04	491.13	474.88	465.41	439.45	427.89	412.89	393.81	361.29
32	488.96	501.30	484.71	475.05	448.55	436.75	421.44	401.97	368.77
33	495.16	507.66	490.86	481.07	454.23	442.29	426.78	407.06	373.45
34	501.78	514.44	497.41	487.49	460.30	448.20	432.48	412.50	378.44
35	505.08	517.83	500.69	490.71	463.33	451.15	435.33	415.22	380.93
36	508.39	521.22	503.97	493.92	466.37	454.10	438.18	417.94	383.42
37	511.70	524.61	507.25	497.13	469.40	457.06	441.03	420.65	385.92
38	515.00	528.00	510.52	500.34	472.43	460.01	443.88	423.37	388.41
39	521.62	534.78	517.08	506.77	478.50	465.92	449.58	428.81	393.40
40	528.23	541.56	523.64	513.19	484.57	471.82	455.28	434.25	398.39
41	538.15	551.73	533.47	522.83	493.67	480.68	463.83	442.40	405.87
42	547.66	561.48	542.89	532.07	502.39	489.18	472.02	450.22	413.04
43	560.88	575.04	556.00	544.92	514.52	500.99	483.42	461.09	423.01
44	577.42	591.99	572.39	560.98	529.69	515.76	497.67	474.68	435.48
45	596.84	611.90	591.65	579.85	547.51	533.11	514.42	490.65	450.13
46	619.99	635.63	614.60	602.34	568.74	553.78	534.37	509.68	467.59
47	646.03	662.33	640.41	627.64	592.63	577.04	556.81	531.09	487.23
48	675.79	692.84	669.91	656.55	619.93	603.63	582.46	555.55	509.67
49	705.13	722.93	699.00	685.06	646.85	629.84	607.75	579.67	531.81
50	738.20	756.83	731.78	717.19	677.18	659.37	636.25	606.86	556.75
51	770.85	790.31	764.15	748.91	707.13	688.54	664.40	633.70	581.37
52	806.81	827.17	799.79	783.85	740.12	720.66	695.39	663.26	608.49
53	843.18	864.46	835.85	819.18	773.49	753.15	726.74	693.16	635.92
54	882.45	904.72	874.77	857.33	809.51	788.22	760.58	725.44	665.54
55	921.72	944.98	913.70	895.48	845.53	823.29	794.42	757.72	695.15
56	964.29	988.62	955.90	936.84	884.58	861.32	831.12	792.72	727.26
57	1,007.27	1,032.69	998.51	978.60	924.01	899.72	868.17	828.06	759.68
58	1,053.15	1,079.73	1,043.99	1,023.18	966.10	940.70	907.71	865.77	794.28
59	1,075.89	1,103.04	1,066.53	1,045.26	986.95	961.00	927.30	884.46	811.43
60	1,121.77	1,150.08	1,112.01	1,089.84	1,029.04	1,001.98	966.85	922.18	846.03
61	1,161.44	1,190.76	1,151.34	1,128.39	1,065.44	1,037.42	1,001.05	954.80	875.95
62	1,187.48	1,217.45	1,177.15	1,153.68	1,089.33	1,060.68	1,023.49	976.20	895.59
63	1,220.14	1,250.93	1,209.52	1,185.41	1,119.28	1,089.85	1,051.63	1,003.05	920.22
64+	1,239.99	1,271.28	1,229.19	1,204.68	1,137.48	1,107.57	1,068.72	1,019.37	935.19

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 15

Los Angeles County. ZIP codes starting with 906–912, 915, 917–918, and 935

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0–14	263.87	270.53	261.57	256.36	242.06	240.50	236.90	233.25	213.53
15	287.32	294.57	284.82	279.14	263.57	261.88	257.96	253.98	232.51
16	296.29	303.77	293.71	287.86	271.80	270.05	266.01	261.91	239.76
17	305.26	312.96	302.60	296.57	280.03	278.23	274.06	269.83	247.02
18	314.92	322.86	312.18	305.95	288.88	287.03	282.73	278.37	254.84
19	324.57	332.77	321.75	315.34	297.74	295.83	291.41	286.91	262.65
20	334.58	343.02	331.67	325.05	306.92	304.95	300.39	295.75	270.75
21	344.92	353.63	341.92	335.11	316.41	314.38	309.68	304.90	279.12
22	344.92	353.63	341.92	335.11	316.41	314.38	309.68	304.90	279.12
23	344.92	353.63	341.92	335.11	316.41	314.38	309.68	304.90	279.12
24	344.92	353.63	341.92	335.11	316.41	314.38	309.68	304.90	279.12
25	346.30	355.04	343.29	336.45	317.68	315.64	310.92	306.12	280.24
26	353.20	362.12	350.13	343.15	324.01	321.93	317.11	312.22	285.82
27	361.48	370.60	358.34	351.19	331.60	329.47	324.54	319.53	292.52
28	374.93	384.40	371.67	364.26	343.94	341.73	336.62	331.42	303.40
29	385.97	395.71	382.61	374.98	354.07	351.79	346.53	341.18	312.34
30	391.49	401.37	388.08	380.35	359.13	356.82	351.48	346.06	316.80
31	399.77	409.86	396.29	388.39	366.72	364.37	358.92	353.38	323.50
32	408.05	418.34	404.50	396.43	374.32	371.91	366.35	360.69	330.20
33	413.22	423.65	409.63	401.46	379.06	376.63	370.99	365.27	334.39
34	418.74	429.31	415.10	406.82	384.13	381.66	375.95	370.15	338.85
35	421.50	432.14	417.83	409.50	386.66	384.17	378.42	372.59	341.08
36	424.26	434.96	420.57	412.18	389.19	386.69	380.90	375.02	343.32
37	427.02	437.79	423.30	414.86	391.72	389.20	383.38	377.46	345.55
38	429.78	440.62	426.04	417.54	394.25	391.72	385.86	379.90	347.78
39	435.29	446.28	431.51	422.91	399.31	396.75	390.81	384.78	352.25
40	440.81	451.94	436.98	428.27	404.38	401.78	395.77	389.66	356.72
41	449.09	460.43	445.19	436.31	411.97	409.32	403.20	396.98	363.41
42	457.02	468.56	453.05	444.02	419.25	416.55	410.32	403.99	369.83
43	468.06	479.88	463.99	454.74	429.37	426.61	420.23	413.75	378.77
44	481.86	494.02	477.67	468.14	442.03	439.19	432.62	425.94	389.93
45	498.07	510.64	493.74	483.89	456.90	453.97	447.17	440.27	403.05
46	517.39	530.44	512.89	502.66	474.62	471.57	464.51	457.35	418.68
47	539.12	552.72	534.43	523.77	494.55	491.38	484.02	476.56	436.26
48	563.95	578.18	559.05	547.90	517.34	514.01	506.32	498.51	456.36
49	588.44	603.29	583.32	571.69	539.80	536.33	528.31	520.16	476.18
50	616.04	631.58	610.68	598.50	565.11	561.48	553.08	544.55	498.51
51	643.28	659.52	637.69	624.97	590.11	586.32	577.55	568.63	520.56
52	673.29	690.28	667.44	654.13	617.64	613.67	604.49	595.16	544.84
53	703.65	721.40	697.53	683.62	645.48	641.34	631.74	621.99	569.41
54	736.41	755.00	730.01	715.45	675.54	671.20	661.16	650.96	595.92
55	769.18	788.59	762.49	747.29	705.60	701.07	690.58	679.92	622.44
56	804.71	825.02	797.71	781.80	738.19	733.45	722.48	711.33	651.19
57	840.58	861.80	833.27	816.66	771.10	766.14	754.68	743.04	680.22
58	878.87	901.05	871.22	853.85	806.22	801.04	789.06	776.88	711.20
59	897.84	920.50	890.03	872.28	823.62	818.33	806.09	793.65	726.55
60	936.13	959.75	927.98	909.48	858.74	853.23	840.46	827.49	757.53
61	969.24	993.70	960.81	941.65	889.12	883.41	870.19	856.76	784.33
62	990.97	1,015.98	982.35	962.76	909.05	903.21	889.70	875.97	801.91
63	1,018.22	1,043.91	1,009.36	989.24	934.05	928.05	914.17	900.06	823.96
64+	1,034.76	1,060.89	1,025.76	1,005.33	949.23	943.14	929.04	914.70	837.36

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 15

Los Angeles County. ZIP codes starting with 906–912, 915, 917–918, and 935 (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0–14	291.73	299.09	289.19	283.43	267.61	260.58	251.44	239.82	220.02
15	317.66	325.68	314.90	308.62	291.40	283.74	273.79	261.14	239.58
16	327.58	335.84	324.73	318.25	300.50	292.60	282.34	269.29	247.06
17	337.49	346.01	334.56	327.89	309.59	301.45	290.88	277.44	254.53
18	348.17	356.96	345.14	338.26	319.39	310.99	300.09	286.22	262.59
19	358.85	367.90	355.73	348.63	329.18	320.53	309.29	295.00	270.64
20	369.91	379.24	366.69	359.38	339.33	330.41	318.82	304.09	278.98
21	381.35	390.97	378.03	370.49	349.82	340.62	328.68	313.50	287.61
22	381.35	390.97	378.03	370.49	349.82	340.62	328.68	313.50	287.61
23	381.35	390.97	378.03	370.49	349.82	340.62	328.68	313.50	287.61
24	381.35	390.97	378.03	370.49	349.82	340.62	328.68	313.50	287.61
25	382.87	392.53	379.54	371.97	351.22	341.99	330.00	314.75	288.76
26	390.50	400.35	387.10	379.38	358.22	348.80	336.57	321.02	294.51
27	399.65	409.74	396.17	388.28	366.62	356.97	344.46	328.54	301.41
28	414.52	424.98	410.92	402.72	380.26	370.26	357.28	340.77	312.63
29	426.73	437.50	423.01	414.58	391.45	381.16	367.79	350.80	321.83
30	432.83	443.75	429.06	420.51	397.05	386.61	373.05	355.82	326.44
31	441.98	453.13	438.14	429.40	405.45	394.78	380.94	363.34	333.34
32	451.13	462.52	447.21	438.29	413.84	402.96	388.83	370.87	340.24
33	456.85	468.38	452.88	443.85	419.09	408.07	393.76	375.57	344.56
34	462.95	474.64	458.93	449.78	424.69	413.52	399.02	380.58	349.16
35	466.00	477.77	461.95	452.74	427.48	416.24	401.65	383.09	351.46
36	469.06	480.89	464.98	455.70	430.28	418.97	404.28	385.60	353.76
37	472.11	484.02	468.00	458.67	433.08	421.69	406.91	388.11	356.06
38	475.16	487.15	471.02	461.63	435.88	424.42	409.54	390.62	358.36
39	481.26	493.40	477.07	467.56	441.48	429.87	414.80	395.63	362.96
40	487.36	499.66	483.12	473.49	447.07	435.32	420.05	400.65	367.56
41	496.51	509.04	492.19	482.38	455.47	443.49	427.94	408.17	374.47
42	505.28	518.04	500.89	490.90	463.52	451.33	435.50	415.38	381.08
43	517.49	530.55	512.98	502.76	474.71	462.23	446.02	425.41	390.28
44	532.74	546.19	528.11	517.58	488.70	475.85	459.17	437.95	401.79
45	550.66	564.56	545.87	534.99	505.15	491.86	474.62	452.69	415.31
46	572.02	586.45	567.04	555.74	524.74	510.94	493.02	470.24	431.41
47	596.04	611.09	590.86	579.08	546.77	532.40	513.73	489.99	449.53
48	623.50	639.24	618.08	605.75	571.96	556.92	537.39	512.57	470.24
49	650.58	666.99	644.92	632.06	596.80	581.11	560.73	534.82	490.66
50	681.08	698.27	675.16	661.70	624.78	608.36	587.02	559.90	513.67
51	711.21	729.16	705.02	690.97	652.42	635.27	612.99	584.67	536.39
52	744.39	763.17	737.91	723.20	682.86	664.90	641.59	611.94	561.41
53	777.95	797.58	771.18	755.80	713.64	694.87	670.51	639.53	586.72
54	814.17	834.72	807.09	791.00	746.87	727.23	701.73	669.31	614.04
55	850.40	871.86	843.00	826.20	780.11	759.59	732.96	699.10	641.37
56	889.68	912.13	881.94	864.36	816.14	794.68	766.81	731.39	670.99
57	929.34	952.79	921.26	902.89	852.52	830.10	801.00	763.99	700.90
58	971.67	996.19	963.22	944.01	891.35	867.91	837.48	798.79	732.83
59	992.64	1,017.69	984.01	964.39	910.59	886.65	855.56	816.03	748.65
60	1,034.97	1,061.09	1,025.97	1,005.51	949.42	924.46	892.04	850.83	780.57
61	1,071.58	1,098.63	1,062.26	1,041.08	983.00	957.16	923.59	880.92	808.18
62	1,095.61	1,123.26	1,086.08	1,064.42	1,005.04	978.62	944.30	900.67	826.30
63	1,125.73	1,154.14	1,115.94	1,093.69	1,032.68	1,005.52	970.27	925.44	849.02
64+	1,144.05	1,172.91	1,134.09	1,111.47	1,049.46	1,021.86	986.04	940.50	862.83

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 15

Los Angeles County. ZIP codes starting with 906–912, 915, 917–918, and 935 (continued)

Age	SmartCare HMO Platinum \$0	SmartCare HMO Platinum \$10	SmartCare HMO Platinum \$20	SmartCare HMO Platinum \$30	SmartCare HMO Gold \$30	SmartCare HMO Gold \$35	SmartCare HMO Gold \$40	SmartCare HMO Gold \$50	SmartCare HMO Silver \$55
0–14	248.67	254.94	246.50	240.62	228.11	226.65	223.26	218.93	200.42
15	270.77	277.60	268.42	262.01	248.39	246.79	243.10	238.39	218.24
16	279.22	286.27	276.79	270.19	256.14	254.50	250.69	245.83	225.05
17	287.67	294.93	285.17	278.37	263.89	262.20	258.28	253.27	231.86
18	296.78	304.27	294.19	287.18	272.24	270.50	266.45	261.29	239.20
19	305.88	313.60	303.22	295.98	280.59	278.79	274.62	269.30	246.53
20	315.30	323.26	312.56	305.10	289.24	287.38	283.08	277.60	254.13
21	325.06	333.26	322.23	314.54	298.19	296.27	291.84	286.19	261.99
22	325.06	333.26	322.23	314.54	298.19	296.27	291.84	286.19	261.99
23	325.06	333.26	322.23	314.54	298.19	296.27	291.84	286.19	261.99
24	325.06	333.26	322.23	314.54	298.19	296.27	291.84	286.19	261.99
25	326.36	334.59	323.52	315.80	299.38	297.46	293.01	287.33	263.04
26	332.86	341.26	329.96	322.09	305.34	303.38	298.84	293.05	268.28
27	340.66	349.26	337.70	329.64	312.50	310.49	305.85	299.92	274.57
28	353.34	362.25	350.26	341.91	324.13	322.05	317.23	311.08	284.78
29	363.74	372.92	360.57	351.97	333.67	331.53	326.57	320.24	293.17
30	368.94	378.25	365.73	357.00	338.44	336.27	331.24	324.82	297.36
31	376.74	386.25	373.46	364.55	345.60	343.38	338.24	331.69	303.65
32	384.54	394.25	381.20	372.10	352.75	350.49	345.24	338.56	309.93
33	389.42	399.24	386.03	376.82	357.23	354.93	349.62	342.85	313.86
34	394.62	404.58	391.19	381.85	362.00	359.67	354.29	347.43	318.06
35	397.22	407.24	393.76	384.37	364.38	362.04	356.63	349.72	320.15
36	399.82	409.91	396.34	386.88	366.77	364.41	358.96	352.01	322.25
37	402.42	412.57	398.92	389.40	369.15	366.78	361.30	354.30	324.34
38	405.02	415.24	401.50	391.92	371.54	369.15	363.63	356.59	326.44
39	410.22	420.57	406.65	396.95	376.31	373.89	368.30	361.17	330.63
40	415.42	425.91	411.81	401.98	381.08	378.63	372.97	365.74	334.82
41	423.22	433.90	419.54	409.53	388.24	385.74	379.97	372.61	341.11
42	430.70	441.57	426.95	416.77	395.10	392.56	386.69	379.20	347.14
43	441.10	452.23	437.26	426.83	404.64	402.04	396.02	388.35	355.52
44	454.10	465.56	450.15	439.41	416.57	413.89	407.70	399.80	366.00
45	469.38	481.23	465.30	454.20	430.58	427.82	421.41	413.25	378.31
46	487.58	499.89	483.34	471.81	447.28	444.41	437.76	429.28	392.99
47	508.06	520.88	503.64	491.63	466.07	463.07	456.14	447.31	409.49
48	531.47	544.88	526.84	514.27	487.53	484.40	477.16	467.91	428.35
49	554.55	568.54	549.72	536.61	508.71	505.44	497.88	488.23	446.96
50	580.55	595.20	575.50	561.77	532.56	529.14	521.22	511.13	467.92
51	606.23	621.53	600.96	586.62	556.12	552.55	544.28	533.74	488.61
52	634.51	650.52	628.99	613.98	582.06	578.32	569.67	558.63	511.41
53	663.11	679.85	657.35	641.66	608.30	604.39	595.35	583.82	534.46
54	693.99	711.51	687.96	671.54	636.63	632.54	623.07	611.01	559.35
55	724.87	743.17	718.57	701.43	664.96	660.68	650.80	638.19	584.24
56	758.36	777.49	751.76	733.82	695.67	691.20	680.86	667.67	611.22
57	792.16	812.15	785.27	766.54	726.68	722.01	711.21	697.43	638.47
58	828.24	849.14	821.04	801.45	759.78	754.90	743.60	729.20	667.55
59	846.12	867.47	838.76	818.75	776.18	771.19	759.65	744.94	681.96
60	882.20	904.47	874.53	853.66	809.28	804.08	792.05	776.71	711.04
61	913.41	936.46	905.46	883.86	837.90	832.52	820.07	804.18	736.19
62	933.89	957.45	925.76	903.67	856.69	851.19	838.45	822.21	752.70
63	959.56	983.78	951.22	928.52	880.25	874.59	861.51	844.82	773.40
64+	975.18	999.78	966.69	943.62	894.57	888.81	875.52	858.57	785.97

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

15

Los Angeles County. ZIP codes starting with 906–912, 915, 917–918, and 935 (continued)

Age	CommunityCare HMO Silver \$2250/\$50	CommunityCare HMO Bronze \$6300/\$65
0–14	217.24	203.77
15	236.55	221.88
16	243.94	228.81
17	251.32	235.73
18	259.27	243.19
19	267.22	250.65
20	275.46	258.37
21	283.98	266.36
22	283.98	266.36
23	283.98	266.36
24	283.98	266.36
25	285.12	267.43
26	290.79	272.76
27	297.61	279.15
28	308.69	289.54
29	317.77	298.06
30	322.32	302.32
31	329.13	308.72
32	335.95	315.11
33	340.21	319.10
34	344.75	323.37
35	347.02	325.50
36	349.29	327.63
37	351.57	329.76
38	353.84	331.89
39	358.38	336.15
40	362.93	340.41
41	369.74	346.81
42	376.27	352.93
43	385.36	361.46
44	396.72	372.11
45	410.07	384.63
46	425.97	399.55
47	443.86	416.33
48	464.31	435.50
49	484.47	454.42
50	507.19	475.73
51	529.62	496.77
52	554.33	519.94
53	579.32	543.38
54	606.30	568.69
55	633.27	593.99
56	662.52	621.43
57	692.06	649.13
58	723.58	678.69
59	739.20	693.34
60	770.72	722.91
61	797.98	748.48
62	815.87	765.26
63	838.31	786.31
64+	851.94	799.08

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 16

Los Angeles County. ZIP codes not included in region 15

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	267.28	274.02	264.95	259.67	245.18	243.61	239.96	236.26	216.29
15	291.03	298.38	288.50	282.75	266.98	265.26	261.29	257.26	235.51
16	300.12	307.69	297.51	291.58	275.31	273.54	269.45	265.29	242.86
17	309.20	317.01	306.51	300.40	283.64	281.82	277.60	273.32	250.21
18	318.98	327.03	316.21	309.91	292.62	290.74	286.39	281.97	258.13
19	328.77	337.06	325.91	319.41	301.59	299.65	295.17	290.62	266.05
20	338.90	347.45	335.95	329.25	310.89	308.89	304.27	299.57	274.24
21	349.38	358.20	346.34	339.44	320.50	318.44	313.68	308.84	282.73
22	349.38	358.20	346.34	339.44	320.50	318.44	313.68	308.84	282.73
23	349.38	358.20	346.34	339.44	320.50	318.44	313.68	308.84	282.73
24	349.38	358.20	346.34	339.44	320.50	318.44	313.68	308.84	282.73
25	350.78	359.63	347.73	340.79	321.78	319.72	314.93	310.07	283.86
26	357.77	366.79	354.65	347.58	328.19	326.08	321.21	316.25	289.51
27	366.15	375.39	362.97	355.73	335.88	333.73	328.73	323.66	296.30
28	379.78	389.36	376.47	368.97	348.38	346.15	340.97	335.71	307.32
29	390.96	400.82	387.56	379.83	358.64	356.34	351.01	345.59	316.37
30	396.55	406.55	393.10	385.26	363.77	361.43	356.02	350.53	320.89
31	404.93	415.15	401.41	393.41	371.46	369.07	363.55	357.94	327.68
32	413.32	423.75	409.72	401.55	379.15	376.72	371.08	365.35	334.47
33	418.56	429.12	414.92	406.64	383.96	381.49	375.79	369.99	338.71
34	424.15	434.85	420.46	412.08	389.09	386.59	380.80	374.93	343.23
35	426.94	437.72	423.23	414.79	391.65	389.14	383.31	377.40	345.49
36	429.74	440.58	426.00	417.51	394.22	391.68	385.82	379.87	347.75
37	432.53	443.45	428.77	420.22	396.78	394.23	388.33	382.34	350.02
38	435.33	446.31	431.54	422.94	399.34	396.78	390.84	384.81	352.28
39	440.92	452.05	437.08	428.37	404.47	401.87	395.86	389.75	356.80
40	446.51	457.78	442.62	433.80	409.60	406.97	400.88	394.69	361.32
41	454.89	466.37	450.94	441.95	417.29	414.61	408.41	402.11	368.11
42	462.93	474.61	458.90	449.75	424.66	421.94	415.62	409.21	374.61
43	474.11	486.07	469.99	460.62	434.92	432.13	425.66	419.09	383.66
44	488.08	500.40	483.84	474.19	447.74	444.86	438.21	431.45	394.97
45	504.51	517.24	500.12	490.15	462.80	459.83	452.95	445.96	408.26
46	524.07	537.30	519.51	509.15	480.75	477.66	470.52	463.26	424.09
47	546.08	559.86	541.33	530.54	500.94	497.72	490.28	482.71	441.90
48	571.24	585.65	566.27	554.98	524.02	520.65	512.86	504.95	462.26
49	596.04	611.09	590.86	579.08	546.77	543.26	535.13	526.88	482.33
50	623.99	639.74	618.57	606.23	572.41	568.74	560.23	551.58	504.95
51	651.60	668.04	645.93	633.05	597.73	593.89	585.01	575.98	527.28
52	681.99	699.20	676.06	662.58	625.62	621.60	612.30	602.85	551.88
53	712.74	730.72	706.54	692.45	653.82	649.62	639.90	630.03	576.76
54	745.93	764.75	739.44	724.70	684.27	679.87	669.70	659.37	603.62
55	779.12	798.78	772.34	756.94	714.72	710.13	699.50	688.71	630.48
56	815.11	835.68	808.02	791.91	747.73	742.93	731.81	720.52	659.60
57	851.44	872.93	844.03	827.21	781.06	776.04	764.43	752.64	689.00
58	890.22	912.69	882.48	864.88	816.64	811.39	799.25	786.92	720.39
59	909.44	932.39	901.53	883.55	834.26	828.90	816.50	803.90	735.94
60	948.22	972.15	939.97	921.23	869.84	864.25	851.32	838.18	767.32
61	981.76	1,006.54	973.22	953.82	900.61	894.82	881.43	867.83	794.46
62	1,003.77	1,029.10	995.04	975.20	920.80	914.88	901.20	887.29	812.27
63	1,031.37	1,057.40	1,022.40	1,002.02	946.12	940.04	925.98	911.69	834.61
64+	1,048.14	1,074.60	1,039.02	1,018.32	961.50	955.32	941.04	926.52	848.19

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 16

Los Angeles County. ZIP codes not included in region 15 (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	300.79	308.38	298.17	292.23	275.92	268.67	259.25	247.27	226.85
15	327.52	335.79	324.67	318.20	300.45	292.55	282.29	269.25	247.02
16	337.75	346.27	334.81	328.13	309.83	301.68	291.10	277.65	254.73
17	347.97	356.75	344.94	338.06	319.21	310.81	299.91	286.06	262.44
18	358.98	368.04	355.86	348.76	329.30	320.65	309.40	295.11	270.74
19	369.99	379.32	366.77	359.46	339.40	330.48	318.89	304.16	279.04
20	381.39	391.01	378.07	370.53	349.86	340.66	328.72	313.53	287.64
21	393.18	403.11	389.76	381.99	360.68	351.20	338.88	323.23	296.54
22	393.18	403.11	389.76	381.99	360.68	351.20	338.88	323.23	296.54
23	393.18	403.11	389.76	381.99	360.68	351.20	338.88	323.23	296.54
24	393.18	403.11	389.76	381.99	360.68	351.20	338.88	323.23	296.54
25	394.76	404.72	391.32	383.52	362.13	352.60	340.24	324.52	297.72
26	402.62	412.78	399.12	391.16	369.34	359.63	347.02	330.99	303.65
27	412.06	422.46	408.47	400.33	378.00	368.06	355.15	338.74	310.77
28	427.39	438.18	423.67	415.23	392.06	381.75	368.37	351.35	322.34
29	439.97	451.08	436.15	427.45	403.61	392.99	379.21	361.69	331.83
30	446.26	457.53	442.38	433.56	409.38	398.61	384.63	366.86	336.57
31	455.70	467.20	451.74	442.73	418.03	407.04	392.77	374.62	343.69
32	465.14	476.88	461.09	451.90	426.69	415.47	400.90	382.38	350.80
33	471.04	482.92	466.94	457.63	432.10	420.74	405.98	387.23	355.25
34	477.33	489.37	473.17	463.74	437.87	426.36	411.41	392.40	360.00
35	480.47	492.60	476.29	466.80	440.76	429.17	414.12	394.99	362.37
36	483.62	495.82	479.41	469.85	443.64	431.98	416.83	397.57	364.74
37	486.76	499.05	482.53	472.91	446.53	434.79	419.54	400.16	367.11
38	489.91	502.27	485.65	475.96	449.41	437.59	422.25	402.74	369.49
39	496.20	508.72	491.88	482.08	455.18	443.21	427.67	407.91	374.23
40	502.49	515.17	498.12	488.19	460.95	448.83	433.10	413.09	378.98
41	511.93	524.85	507.47	497.36	469.61	457.26	441.23	420.84	386.09
42	520.97	534.12	516.44	506.14	477.91	465.34	449.02	428.28	392.91
43	533.55	547.02	528.91	518.37	489.45	476.58	459.87	438.62	402.40
44	549.28	563.14	544.50	533.65	503.88	490.63	473.42	451.55	414.26
45	567.76	582.09	562.82	551.60	520.83	507.13	489.35	466.74	428.20
46	589.78	604.66	584.65	572.99	541.03	526.80	508.33	484.84	444.81
47	614.55	630.06	609.20	597.06	563.75	548.93	529.68	505.21	463.49
48	642.86	659.08	637.27	624.56	589.72	574.21	554.08	528.48	484.84
49	670.77	687.70	664.94	651.68	615.33	599.15	578.14	551.43	505.89
50	702.23	719.95	696.12	682.24	644.18	627.24	605.25	577.29	529.62
51	733.29	751.80	726.91	712.42	672.68	654.99	632.02	602.82	553.04
52	767.50	786.87	760.82	745.65	704.06	685.54	661.50	630.94	578.84
53	802.10	822.34	795.12	779.27	735.80	716.45	691.33	659.39	604.94
54	839.45	860.64	832.15	815.56	770.06	749.81	723.52	690.09	633.11
55	876.80	898.93	869.18	851.85	804.33	783.18	755.71	720.80	661.28
56	917.30	940.45	909.32	891.19	841.48	819.35	790.62	754.09	691.82
57	958.19	982.37	949.86	930.92	878.99	855.87	825.86	787.71	722.66
58	1,001.84	1,027.12	993.12	973.32	919.02	894.86	863.48	823.59	755.58
59	1,023.46	1,049.29	1,014.56	994.33	938.86	914.17	882.12	841.36	771.89
60	1,067.10	1,094.03	1,057.82	1,036.73	978.90	953.16	919.73	877.24	804.80
61	1,104.85	1,132.73	1,095.24	1,073.40	1,013.52	986.87	952.27	908.27	833.27
62	1,129.62	1,158.13	1,119.79	1,097.47	1,036.25	1,009.00	973.62	928.64	851.95
63	1,160.68	1,189.97	1,150.59	1,127.65	1,064.74	1,036.74	1,000.39	954.17	875.38
64+	1,179.54	1,209.33	1,169.28	1,145.97	1,082.04	1,053.60	1,016.64	969.69	889.62

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 16

Los Angeles County. ZIP codes not included in region 15 (continued)

Age	SmartCare HMO Platinum \$0	SmartCare HMO Platinum \$10	SmartCare HMO Platinum \$20	SmartCare HMO Platinum \$30	SmartCare HMO Gold \$30	SmartCare HMO Gold \$35	SmartCare HMO Gold \$40	SmartCare HMO Gold \$50	SmartCare HMO Silver \$55
0-14	252.64	259.01	250.44	244.46	231.75	230.26	226.82	222.43	203.62
15	275.09	282.04	272.70	266.19	252.35	250.73	246.98	242.20	221.72
16	283.68	290.84	281.21	274.50	260.23	258.56	254.69	249.76	228.64
17	292.27	299.64	289.72	282.81	268.11	266.38	262.40	257.32	235.56
18	301.51	309.12	298.89	291.76	276.59	274.81	270.70	265.46	243.01
19	310.76	318.60	308.06	300.71	285.07	283.24	279.00	273.60	250.47
20	320.34	328.42	317.55	309.97	293.86	291.97	287.60	282.03	258.19
21	330.24	338.58	327.37	319.56	302.94	301.00	296.50	290.75	266.17
22	330.24	338.58	327.37	319.56	302.94	301.00	296.50	290.75	266.17
23	330.24	338.58	327.37	319.56	302.94	301.00	296.50	290.75	266.17
24	330.24	338.58	327.37	319.56	302.94	301.00	296.50	290.75	266.17
25	331.56	339.93	328.68	320.84	304.16	302.20	297.68	291.92	267.24
26	338.17	346.70	335.23	327.23	310.22	308.22	303.61	297.73	272.56
27	346.09	354.83	343.08	334.90	317.49	315.45	310.73	304.71	278.95
28	358.97	368.03	355.85	347.36	329.30	327.19	322.29	316.05	289.33
29	369.54	378.87	366.33	357.59	339.00	336.82	331.78	325.35	297.85
30	374.83	384.29	371.57	362.70	343.84	341.63	336.52	330.00	302.10
31	382.75	392.41	379.42	370.37	351.11	348.86	343.64	336.98	308.49
32	390.68	400.54	387.28	378.04	358.38	356.08	350.75	343.96	314.88
33	395.63	405.62	392.19	382.83	362.93	360.60	355.20	348.32	318.87
34	400.92	411.03	397.43	387.95	367.78	365.41	359.95	352.97	323.13
35	403.56	413.74	400.05	390.50	370.20	367.82	362.32	355.30	325.26
36	406.20	416.45	402.67	393.06	372.62	370.23	364.69	357.63	327.39
37	408.84	419.16	405.28	395.62	375.05	372.64	367.06	359.95	329.52
38	411.48	421.87	407.90	398.17	377.47	375.04	369.43	362.28	331.65
39	416.77	427.28	413.14	403.28	382.32	379.86	374.18	366.93	335.91
40	422.05	432.70	418.38	408.40	387.16	384.68	378.92	371.58	340.17
41	429.98	440.83	426.24	416.07	394.43	391.90	386.04	378.56	346.56
42	437.57	448.62	433.77	423.42	401.40	398.82	392.86	385.25	352.68
43	448.14	459.45	444.24	433.64	411.10	408.46	402.34	394.55	361.19
44	461.35	472.99	457.34	446.43	423.21	420.50	414.20	406.18	371.84
45	476.87	488.91	472.72	461.44	437.45	434.64	428.14	419.85	384.35
46	495.36	507.87	491.06	479.34	454.42	451.50	444.74	436.13	399.26
47	516.17	529.20	511.68	499.47	473.50	470.46	463.42	454.45	416.03
48	539.95	553.57	535.25	522.48	495.32	492.13	484.77	475.38	435.19
49	563.39	577.61	558.49	545.17	516.82	513.50	505.82	496.02	454.09
50	589.81	604.70	584.68	570.73	541.06	537.58	529.54	519.28	475.38
51	615.90	631.45	610.55	595.98	564.99	561.36	552.96	542.25	496.41
52	644.63	660.90	639.03	623.78	591.35	587.55	578.76	567.55	519.57
53	673.70	690.70	667.84	651.90	618.01	614.04	604.85	593.13	542.99
54	705.07	722.86	698.94	682.26	646.79	642.63	633.02	620.76	568.28
55	736.44	755.03	730.04	712.62	675.57	671.23	661.18	648.38	593.56
56	770.46	789.90	763.76	745.53	706.77	702.23	691.72	678.33	620.98
57	804.80	825.11	797.80	778.77	738.28	733.53	722.56	708.56	648.66
58	841.46	862.70	834.14	814.24	771.90	766.95	755.47	740.84	678.20
59	859.62	881.32	852.15	831.81	788.57	783.50	771.78	756.83	692.84
60	896.28	918.90	888.48	867.29	822.19	816.91	804.69	789.10	722.39
61	927.98	951.40	919.91	897.96	851.28	845.81	833.15	817.01	747.94
62	948.79	972.73	940.54	918.10	870.36	864.77	851.83	835.33	764.71
63	974.88	999.48	966.40	943.34	894.29	888.55	875.25	858.30	785.74
64+	990.72	1,015.74	982.11	958.68	908.82	903.00	889.50	872.25	798.51

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

16

Los Angeles County. ZIP codes not included in region 15 (continued)

Age	CommunityCare HMO Silver \$2250/\$50	CommunityCare HMO Bronze \$6300/\$65
0-14	225.09	211.13
15	245.10	229.90
16	252.75	237.07
17	260.40	244.25
18	268.64	251.97
19	276.88	259.70
20	285.41	267.71
21	294.24	275.99
22	294.24	275.99
23	294.24	275.99
24	294.24	275.99
25	295.41	277.09
26	301.30	282.61
27	308.36	289.23
28	319.84	300.00
29	329.25	308.83
30	333.96	313.24
31	341.02	319.87
32	348.08	326.49
33	352.50	330.63
34	357.20	335.05
35	359.56	337.25
36	361.91	339.46
37	364.27	341.67
38	366.62	343.88
39	371.33	348.29
40	376.04	352.71
41	383.10	359.33
42	389.86	365.68
43	399.28	374.51
44	411.05	385.55
45	424.88	398.52
46	441.36	413.98
47	459.89	431.37
48	481.08	451.24
49	501.97	470.83
50	525.51	492.91
51	548.75	514.71
52	574.35	538.72
53	600.24	563.01
54	628.20	589.23
55	656.15	615.45
56	686.46	643.87
57	717.06	672.58
58	749.72	703.21
59	765.90	718.39
60	798.56	749.02
61	826.81	775.52
62	845.34	792.91
63	868.59	814.71
64+	882.72	827.97

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 17

Riverside and San Bernardino counties

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	272.21	279.07	269.84	264.46	249.70	248.10	244.39	240.62	220.27
15	296.40	303.88	293.82	287.96	271.90	270.15	266.11	262.01	239.85
16	305.65	313.37	302.99	296.95	280.39	278.59	274.42	270.18	247.34
17	314.90	322.85	312.16	305.94	288.87	287.02	282.72	278.36	254.83
18	324.87	333.07	322.04	315.62	298.01	296.10	291.67	287.17	262.89
19	334.83	343.28	331.92	325.30	307.15	305.18	300.61	295.97	270.95
20	345.15	353.86	342.15	335.32	316.62	314.58	309.88	305.10	279.30
21	355.82	364.80	352.73	345.70	326.41	324.31	319.46	314.53	287.94
22	355.82	364.80	352.73	345.70	326.41	324.31	319.46	314.53	287.94
23	355.82	364.80	352.73	345.70	326.41	324.31	319.46	314.53	287.94
24	355.82	364.80	352.73	345.70	326.41	324.31	319.46	314.53	287.94
25	357.25	366.26	354.14	347.08	327.72	325.61	320.74	315.79	289.09
26	364.36	373.56	361.19	353.99	334.24	332.10	327.13	322.08	294.85
27	372.90	382.31	369.66	362.29	342.08	339.88	334.80	329.63	301.76
28	386.78	396.54	383.42	375.77	354.81	352.53	347.26	341.90	312.99
29	398.17	408.22	394.70	386.83	365.25	362.91	357.48	351.96	322.20
30	403.86	414.05	400.35	392.36	370.48	368.10	362.59	356.99	326.81
31	412.40	422.81	408.81	400.66	378.31	375.88	370.26	364.54	333.72
32	420.94	431.56	417.28	408.96	386.14	383.66	377.92	372.09	340.63
33	426.28	437.03	422.57	414.14	391.04	388.53	382.72	376.81	344.95
34	431.97	442.87	428.21	419.67	396.26	393.72	387.83	381.84	349.56
35	434.82	445.79	431.03	422.44	398.87	396.31	390.38	384.36	351.86
36	437.66	448.71	433.86	425.21	401.49	398.91	392.94	386.87	354.17
37	440.51	451.63	436.68	427.97	404.10	401.50	395.49	389.39	356.47
38	443.36	454.55	439.50	430.74	406.71	404.10	398.05	391.91	358.77
39	449.05	460.38	445.14	436.27	411.93	409.28	403.16	396.94	363.38
40	454.74	466.22	450.79	441.80	417.15	414.47	408.27	401.97	367.99
41	463.28	474.97	459.25	450.10	424.99	422.26	415.94	409.52	374.90
42	471.47	483.36	467.37	458.05	432.49	429.72	423.29	416.75	381.52
43	482.85	495.04	478.65	469.11	442.94	440.09	433.51	426.82	390.73
44	497.09	509.63	492.76	482.94	456.00	453.07	446.29	439.40	402.25
45	513.81	526.78	509.34	499.18	471.34	468.31	461.30	454.18	415.79
46	533.74	547.21	529.09	518.54	489.62	486.47	479.19	471.80	431.91
47	556.15	570.19	551.31	540.32	510.18	506.90	499.32	491.61	450.05
48	581.77	596.45	576.71	565.21	533.68	530.25	522.32	514.26	470.78
49	607.03	622.35	601.75	589.76	556.86	553.28	545.00	536.59	491.23
50	635.50	651.54	629.97	617.41	582.97	579.23	570.56	561.75	514.26
51	663.61	680.36	657.84	644.72	608.76	604.85	595.80	586.60	537.01
52	694.57	712.10	688.53	674.80	637.15	633.06	623.59	613.97	562.06
53	725.88	744.20	719.57	705.22	665.88	661.60	651.70	641.65	587.40
54	759.68	778.86	753.08	738.06	696.89	692.41	682.05	671.53	614.75
55	793.49	813.51	786.58	770.90	727.90	723.22	712.40	701.41	642.11
56	830.14	851.09	822.92	806.51	761.52	756.63	745.30	733.80	671.76
57	867.14	889.03	859.60	842.46	795.46	790.35	778.53	766.51	701.71
58	906.64	929.52	898.75	880.83	831.70	826.35	813.99	801.43	733.67
59	926.21	949.58	918.15	899.85	849.65	844.19	831.56	818.73	749.51
60	965.71	990.08	957.31	938.22	885.88	880.19	867.02	853.64	781.47
61	999.86	1,025.10	991.17	971.41	917.21	911.32	897.69	883.83	809.11
62	1,022.28	1,048.08	1,013.39	993.18	937.78	931.75	917.81	903.65	827.25
63	1,050.39	1,076.90	1,041.25	1,020.49	963.57	957.38	943.05	928.50	850.00
64+	1,067.46	1,094.40	1,058.19	1,037.10	979.23	972.93	958.38	943.59	863.82

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 17

Riverside and San Bernardino counties (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	294.49	301.93	291.93	286.11	270.15	263.05	253.82	242.10	222.11
15	320.67	328.76	317.88	311.54	294.16	286.43	276.39	263.62	241.85
16	330.68	339.03	327.80	321.27	303.35	295.37	285.01	271.84	249.40
17	340.69	349.29	337.73	330.99	312.53	304.31	293.64	280.07	256.95
18	351.47	360.34	348.41	341.46	322.41	313.94	302.93	288.93	265.07
19	362.25	371.39	359.10	351.94	332.30	323.56	312.22	297.79	273.20
20	373.41	382.83	370.16	362.78	342.54	333.54	321.84	306.97	281.62
21	384.96	394.67	381.61	374.00	353.14	343.85	331.80	316.47	290.33
22	384.96	394.67	381.61	374.00	353.14	343.85	331.80	316.47	290.33
23	384.96	394.67	381.61	374.00	353.14	343.85	331.80	316.47	290.33
24	384.96	394.67	381.61	374.00	353.14	343.85	331.80	316.47	290.33
25	386.50	396.25	383.14	375.50	354.55	345.23	333.12	317.73	291.50
26	394.20	404.15	390.77	382.98	361.61	352.10	339.76	324.06	297.30
27	403.44	413.62	399.93	391.95	370.09	360.36	347.72	331.66	304.27
28	418.45	429.01	414.81	406.54	383.86	373.77	360.66	344.00	315.59
29	430.77	441.64	427.02	418.51	395.16	384.77	371.28	354.13	324.88
30	436.93	447.96	433.13	424.49	400.81	390.27	376.59	359.19	329.53
31	446.17	457.43	442.29	433.47	409.29	398.52	384.55	366.78	336.50
32	455.41	466.90	451.45	442.44	417.76	406.78	392.51	374.38	343.46
33	461.18	472.82	457.17	448.05	423.06	411.93	397.49	379.13	347.82
34	467.34	479.13	463.28	454.04	428.71	417.44	402.80	384.19	352.47
35	470.42	482.29	466.33	457.03	431.53	420.19	405.45	386.72	354.79
36	473.50	485.45	469.38	460.02	434.36	422.94	408.11	389.25	357.11
37	476.58	488.61	472.43	463.01	437.18	425.69	410.76	391.79	359.43
38	479.66	491.76	475.49	466.01	440.01	428.44	413.42	394.32	361.76
39	485.82	498.08	481.59	471.99	445.66	433.94	418.73	399.38	366.40
40	491.98	504.39	487.70	477.97	451.31	439.44	424.03	404.44	371.05
41	501.22	513.87	496.86	486.95	459.79	447.70	432.00	412.04	378.01
42	510.07	522.94	505.63	495.55	467.91	455.60	439.63	419.32	384.69
43	522.39	535.57	517.85	507.52	479.21	466.61	450.25	429.44	393.98
44	537.79	551.36	533.11	522.48	493.33	480.36	463.52	442.10	405.60
45	555.88	569.91	551.05	540.06	509.93	496.52	479.11	456.98	419.24
46	577.44	592.01	572.42	561.00	529.71	515.78	497.69	474.70	435.50
47	601.69	616.88	596.46	584.56	551.95	537.44	518.60	494.64	453.79
48	629.41	645.29	623.93	611.49	577.38	562.20	542.48	517.42	474.70
49	656.74	673.31	651.03	638.05	602.45	586.61	566.04	539.89	495.31
50	687.54	704.89	681.56	667.97	630.70	614.12	592.59	565.21	518.54
51	717.95	736.07	711.70	697.51	658.60	641.28	618.80	590.21	541.47
52	751.44	770.40	744.90	730.05	689.33	671.20	647.66	617.74	566.73
53	785.32	805.14	778.49	762.96	720.40	701.46	676.86	645.59	592.28
54	821.89	842.63	814.74	798.49	753.95	734.12	708.38	675.66	619.86
55	858.46	880.12	850.99	834.02	787.50	766.79	739.90	705.72	647.44
56	898.11	920.78	890.30	872.55	823.87	802.21	774.08	738.32	677.35
57	938.14	961.82	929.98	911.44	860.60	837.97	808.58	771.23	707.54
58	980.88	1,005.63	972.34	952.96	899.80	876.14	845.41	806.36	739.77
59	1,002.05	1,027.34	993.33	973.53	919.22	895.05	863.66	823.76	755.74
60	1,044.78	1,071.15	1,035.69	1,015.04	958.42	933.21	900.49	858.89	787.97
61	1,081.73	1,109.03	1,072.33	1,050.95	992.32	966.22	932.34	889.27	815.84
62	1,105.99	1,133.90	1,096.37	1,074.51	1,014.57	987.89	953.25	909.21	834.13
63	1,136.40	1,165.08	1,126.51	1,104.05	1,042.46	1,015.05	979.46	934.21	857.06
64+	1,154.88	1,184.01	1,144.83	1,122.00	1,059.42	1,031.55	995.40	949.41	870.99

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 17

Riverside and San Bernardino counties (continued)

Age	SmartCare HMO Platinum \$0	SmartCare HMO Platinum \$10	SmartCare HMO Platinum \$20	SmartCare HMO Platinum \$30	SmartCare HMO Gold \$30	SmartCare HMO Gold \$35	SmartCare HMO Gold \$40	SmartCare HMO Gold \$50	SmartCare HMO Silver \$55
0-14	259.58	266.13	257.32	251.18	238.12	236.59	233.05	228.54	209.22
15	282.65	289.79	280.19	273.51	259.29	257.62	253.77	248.85	227.81
16	291.48	298.83	288.94	282.05	267.38	265.66	261.69	256.62	234.93
17	300.30	307.88	297.69	290.58	275.48	273.71	269.61	264.39	242.04
18	309.80	317.62	307.10	299.78	284.19	282.37	278.14	272.75	249.69
19	319.30	327.36	316.52	308.97	292.91	291.03	286.67	281.12	257.35
20	329.14	337.45	326.28	318.49	301.93	299.99	295.51	289.78	265.28
21	339.32	347.88	336.37	328.34	311.27	309.27	304.64	298.74	273.49
22	339.32	347.88	336.37	328.34	311.27	309.27	304.64	298.74	273.49
23	339.32	347.88	336.37	328.34	311.27	309.27	304.64	298.74	273.49
24	339.32	347.88	336.37	328.34	311.27	309.27	304.64	298.74	273.49
25	340.68	349.28	337.71	329.66	312.52	310.51	305.86	299.94	274.58
26	347.46	356.23	344.44	336.22	318.74	316.69	311.96	305.91	280.05
27	355.61	364.58	352.51	344.10	326.21	324.12	319.27	313.08	286.61
28	368.84	378.15	365.63	356.91	338.35	336.18	331.15	324.73	297.28
29	379.70	389.28	376.40	367.42	348.31	346.08	340.90	334.29	306.03
30	385.13	394.85	381.78	372.67	353.29	351.02	345.77	339.07	310.41
31	393.27	403.20	389.85	380.55	360.76	358.45	353.08	346.24	316.97
32	401.42	411.55	397.92	388.43	368.23	365.87	360.39	353.41	323.54
33	406.51	416.76	402.97	393.36	372.90	370.51	364.96	357.90	327.64
34	411.93	422.33	408.35	398.61	377.88	375.46	369.84	362.67	332.01
35	414.65	425.11	411.04	401.24	380.37	377.93	372.28	365.06	334.20
36	417.36	427.90	413.73	403.86	382.86	380.40	374.71	367.45	336.39
37	420.08	430.68	416.42	406.49	385.35	382.88	377.15	369.84	338.58
38	422.79	433.46	419.12	409.12	387.84	385.35	379.59	372.23	340.77
39	428.22	439.03	424.50	414.37	392.82	390.30	384.46	377.01	345.14
40	433.65	444.60	429.88	419.62	397.81	395.25	389.34	381.79	349.52
41	441.79	452.94	437.95	427.50	405.28	402.67	396.65	388.96	356.08
42	449.60	460.95	445.69	435.05	412.43	409.79	403.65	395.84	362.37
43	460.46	472.08	456.45	445.56	422.40	419.68	413.40	405.40	371.12
44	474.03	485.99	469.91	458.70	434.85	432.05	425.59	417.35	382.06
45	489.98	502.34	485.72	474.13	449.48	446.59	439.91	431.39	394.92
46	508.98	521.83	504.55	492.52	466.91	463.91	456.97	448.12	410.23
47	530.36	543.74	525.74	513.20	486.52	483.39	476.16	466.94	427.46
48	554.79	568.79	549.96	536.84	508.93	505.66	498.09	488.45	447.15
49	578.88	593.49	573.84	560.15	531.03	527.62	519.72	509.66	466.57
50	606.03	621.32	600.75	586.42	555.93	552.36	544.10	533.56	488.45
51	632.83	648.80	627.33	612.36	580.52	576.79	568.16	557.16	510.05
52	662.35	679.07	656.59	640.93	607.60	603.70	594.67	583.15	533.85
53	692.21	709.68	686.19	669.82	634.99	630.92	621.48	609.44	557.91
54	724.45	742.73	718.15	701.01	664.56	660.30	650.42	637.82	583.90
55	756.68	775.78	750.10	732.21	694.14	689.68	679.36	666.20	609.88
56	791.63	811.61	784.75	766.03	726.20	721.53	710.74	696.97	638.05
57	826.92	847.79	819.73	800.17	758.57	753.70	742.42	728.04	666.49
58	864.59	886.41	857.07	836.62	793.12	788.03	776.23	761.20	696.85
59	883.25	905.54	875.57	854.68	810.24	805.04	792.99	777.63	711.89
60	920.91	944.16	912.90	891.12	844.79	839.36	826.81	810.79	742.24
61	953.49	977.55	945.20	922.64	874.67	869.05	856.05	839.47	768.50
62	974.87	999.47	966.39	943.33	894.28	888.54	875.24	858.29	785.73
63	1,001.67	1,026.95	992.96	969.27	918.87	912.97	899.31	881.89	807.33
64+	1,017.96	1,043.64	1,009.11	985.02	933.81	927.81	913.92	896.22	820.47

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 18 Orange County

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	298.40	305.93	295.81	289.91	273.74	271.98	267.91	263.77	241.47
15	324.93	333.13	322.10	315.68	298.07	296.15	291.72	287.22	262.94
16	335.07	343.52	332.15	325.53	307.37	305.40	300.83	296.19	271.14
17	345.21	353.92	342.21	335.38	316.67	314.64	309.93	305.15	279.35
18	356.13	365.12	353.03	346.00	326.69	324.60	319.74	314.80	288.19
19	367.05	376.32	363.86	356.61	336.71	334.55	329.54	324.46	297.03
20	378.37	387.91	375.07	367.60	347.09	344.86	339.70	334.46	306.18
21	390.07	399.91	386.67	378.97	357.82	355.53	350.21	344.80	315.65
22	390.07	399.91	386.67	378.97	357.82	355.53	350.21	344.80	315.65
23	390.07	399.91	386.67	378.97	357.82	355.53	350.21	344.80	315.65
24	390.07	399.91	386.67	378.97	357.82	355.53	350.21	344.80	315.65
25	391.63	401.51	388.22	380.48	359.26	356.95	351.61	346.18	316.91
26	399.43	409.51	395.96	388.06	366.41	364.06	358.61	353.08	323.23
27	408.79	419.11	405.24	397.16	375.00	372.59	367.02	361.35	330.80
28	424.00	434.70	420.32	411.94	388.96	386.46	380.67	374.80	343.11
29	436.49	447.50	432.69	424.06	400.41	397.83	391.88	385.83	353.21
30	442.73	453.90	438.88	430.13	406.13	403.52	397.48	391.35	358.26
31	452.09	463.50	448.16	439.22	414.72	412.05	405.89	399.63	365.84
32	461.45	473.10	457.44	448.32	423.31	420.59	414.29	407.90	373.42
33	467.30	479.09	463.24	454.00	428.67	425.92	419.55	413.07	378.15
34	473.54	485.49	469.42	460.06	434.40	431.61	425.15	418.59	383.20
35	476.66	488.69	472.52	463.10	437.26	434.45	427.95	421.35	385.73
36	479.78	491.89	475.61	466.13	440.12	437.30	430.75	424.11	388.25
37	482.90	495.09	478.70	469.16	442.99	440.14	433.56	426.87	390.78
38	486.02	498.29	481.80	472.19	445.85	442.99	436.36	429.62	393.30
39	492.27	504.69	487.98	478.25	451.57	448.67	441.96	435.14	398.35
40	498.51	511.09	494.17	484.32	457.30	454.36	447.56	440.66	403.40
41	507.87	520.69	503.45	493.41	465.89	462.90	455.97	448.93	410.98
42	516.84	529.88	512.34	502.13	474.12	471.07	464.02	456.86	418.24
43	529.32	542.68	524.72	514.26	485.57	482.45	475.23	467.90	428.34
44	544.92	558.68	540.18	529.41	499.88	496.67	489.24	481.69	440.96
45	563.26	577.47	558.36	547.23	516.70	513.38	505.70	497.89	455.80
46	585.10	599.87	580.01	568.45	536.74	533.29	525.31	517.20	473.48
47	609.68	625.06	604.37	592.32	559.28	555.69	547.37	538.93	493.36
48	637.76	653.86	632.21	619.61	585.04	581.29	572.59	563.75	516.09
49	665.46	682.25	659.67	646.51	610.45	606.53	597.45	588.23	538.50
50	696.66	714.24	690.60	676.83	639.07	634.97	625.47	615.82	563.75
51	727.48	745.84	721.15	706.77	667.34	663.06	653.14	643.06	588.69
52	761.41	780.63	754.79	739.74	698.47	693.99	683.60	673.05	616.15
53	795.74	815.82	788.82	773.09	729.96	725.27	714.42	703.40	643.93
54	832.79	853.81	825.55	809.09	763.96	759.05	747.69	736.15	673.91
55	869.85	891.80	862.29	845.09	797.95	792.82	780.96	768.91	703.90
56	910.03	932.99	902.11	884.13	834.80	829.44	817.03	804.42	736.41
57	950.60	974.59	942.33	923.54	872.02	866.42	853.45	840.28	769.24
58	993.89	1,018.98	985.25	965.60	911.74	905.88	892.33	878.56	804.28
59	1,015.35	1,040.97	1,006.51	986.45	931.42	925.43	911.59	897.52	821.64
60	1,058.64	1,085.36	1,049.44	1,028.51	971.14	964.90	950.46	935.79	856.68
61	1,096.09	1,123.75	1,086.56	1,064.89	1,005.49	999.03	984.08	968.89	886.98
62	1,120.66	1,148.95	1,110.92	1,088.77	1,028.03	1,021.43	1,006.14	990.62	906.87
63	1,151.48	1,180.54	1,141.46	1,118.71	1,056.30	1,049.51	1,033.81	1,017.86	931.80
64+	1,170.21	1,199.73	1,160.01	1,136.91	1,073.46	1,066.59	1,050.63	1,034.40	946.95

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

18

Orange County (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	321.87	329.99	319.07	312.71	295.26	287.50	277.42	264.60	242.75
15	350.48	359.33	347.43	340.50	321.51	313.06	302.08	288.12	264.33
16	361.42	370.54	358.28	351.13	331.54	322.83	311.51	297.12	272.58
17	372.36	381.76	369.12	361.76	341.58	332.60	320.94	306.11	280.83
18	384.14	393.83	380.80	373.21	352.39	343.12	331.09	315.79	289.72
19	395.92	405.91	392.48	384.65	363.19	353.64	341.24	325.48	298.60
20	408.12	418.42	404.57	396.51	374.39	364.54	351.76	335.51	307.80
21	420.74	431.36	417.09	408.77	385.97	375.82	362.64	345.89	317.32
22	420.74	431.36	417.09	408.77	385.97	375.82	362.64	345.89	317.32
23	420.74	431.36	417.09	408.77	385.97	375.82	362.64	345.89	317.32
24	420.74	431.36	417.09	408.77	385.97	375.82	362.64	345.89	317.32
25	422.43	433.09	418.75	410.40	387.51	377.32	364.09	347.27	318.59
26	430.84	441.72	427.10	418.58	395.23	384.84	371.34	354.19	324.94
27	440.94	452.07	437.11	428.39	404.49	393.86	380.05	362.49	332.55
28	457.35	468.89	453.37	444.33	419.54	408.51	394.19	375.98	344.93
29	470.81	482.70	466.72	457.41	431.90	420.54	405.79	387.05	355.08
30	477.55	489.60	473.39	463.95	438.07	426.55	411.60	392.58	360.16
31	487.64	499.95	483.40	473.76	447.33	435.57	420.30	400.88	367.78
32	497.74	510.30	493.41	483.57	456.60	444.59	429.00	409.18	375.39
33	504.05	516.77	499.67	489.71	462.39	450.23	434.44	414.37	380.15
34	510.78	523.68	506.34	496.25	468.56	456.24	440.24	419.90	385.23
35	514.15	527.13	509.68	499.52	471.65	459.25	443.14	422.67	387.77
36	517.52	530.58	513.01	502.79	474.74	462.25	446.05	425.44	390.31
37	520.88	534.03	516.35	506.06	477.83	465.26	448.95	428.21	392.85
38	524.25	537.48	519.69	509.33	480.91	468.27	451.85	430.97	395.38
39	530.98	544.38	526.36	515.87	487.09	474.28	457.65	436.51	400.46
40	537.71	551.28	533.03	522.41	493.26	480.29	463.45	442.04	405.54
41	547.81	561.64	543.04	532.22	502.53	489.31	472.16	450.34	413.15
42	557.49	571.56	552.64	541.62	511.40	497.96	480.50	458.30	420.45
43	570.95	585.36	565.98	554.70	523.76	509.98	492.10	469.37	430.61
44	587.78	602.61	582.67	571.05	539.19	525.02	506.61	483.20	443.30
45	607.56	622.89	602.27	590.26	557.33	542.68	523.65	499.46	458.21
46	631.12	647.05	625.63	613.15	578.95	563.73	543.96	518.83	475.98
47	657.62	674.22	651.90	638.91	603.26	587.40	566.80	540.62	495.98
48	687.92	705.28	681.93	668.34	631.05	614.46	592.91	565.52	518.82
49	717.79	735.91	711.55	697.36	658.46	641.14	618.66	590.08	541.35
50	751.45	770.42	744.91	730.06	689.34	671.21	647.67	617.75	566.74
51	784.69	804.49	777.86	762.35	719.83	700.90	676.32	645.08	591.81
52	821.29	842.02	814.15	797.92	753.41	733.59	707.87	675.17	619.42
53	858.32	879.98	850.85	833.89	787.37	766.67	739.78	705.61	647.34
54	898.29	920.96	890.48	872.72	824.04	802.37	774.23	738.46	677.49
55	938.26	961.94	930.10	911.56	860.70	838.07	808.68	771.32	707.63
56	981.60	1,006.37	973.06	953.66	900.46	876.78	846.04	806.95	740.32
57	1,025.36	1,051.23	1,016.44	996.17	940.60	915.87	883.75	842.92	773.32
58	1,072.06	1,099.11	1,062.73	1,041.54	983.44	957.58	924.00	881.32	808.54
59	1,095.20	1,122.84	1,085.67	1,064.03	1,004.67	978.25	943.95	900.34	825.99
60	1,141.90	1,170.72	1,131.97	1,109.40	1,047.51	1,019.97	984.20	938.73	861.22
61	1,182.29	1,212.13	1,172.01	1,148.64	1,084.56	1,056.05	1,019.02	971.94	891.68
62	1,208.80	1,239.31	1,198.29	1,174.39	1,108.88	1,079.72	1,041.86	993.73	911.67
63	1,242.04	1,273.38	1,231.24	1,206.69	1,139.37	1,109.41	1,070.51	1,021.05	936.74
64+	1,262.22	1,294.08	1,251.27	1,226.31	1,157.91	1,127.46	1,087.92	1,037.67	951.96

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

18

Orange County (continued)

Age	SmartCare HMO Platinum \$0	SmartCare HMO Platinum \$10	SmartCare HMO Platinum \$20	SmartCare HMO Platinum \$30	SmartCare HMO Gold \$30	SmartCare HMO Gold \$35	SmartCare HMO Gold \$40	SmartCare HMO Gold \$50	SmartCare HMO Silver \$55
0-14	270.43	277.25	268.07	261.68	248.07	246.48	242.79	238.09	217.96
15	294.46	301.90	291.90	284.94	270.12	268.39	264.37	259.25	237.33
16	303.65	311.32	301.01	293.83	278.55	276.77	272.62	267.34	244.74
17	312.85	320.74	310.12	302.73	286.99	285.14	280.88	275.44	252.15
18	322.74	330.89	319.94	312.30	296.07	294.16	289.76	284.15	260.13
19	332.64	341.04	329.75	321.88	305.15	303.19	298.65	292.86	268.10
20	342.89	351.55	339.91	331.80	314.55	312.53	307.85	301.89	276.37
21	353.50	362.42	350.42	342.06	324.28	322.19	317.37	311.23	284.91
22	353.50	362.42	350.42	342.06	324.28	322.19	317.37	311.23	284.91
23	353.50	362.42	350.42	342.06	324.28	322.19	317.37	311.23	284.91
24	353.50	362.42	350.42	342.06	324.28	322.19	317.37	311.23	284.91
25	354.91	363.87	351.82	343.43	325.57	323.48	318.64	312.47	286.05
26	361.98	371.12	358.83	350.27	332.06	329.93	324.99	318.70	291.75
27	370.47	379.82	367.24	358.48	339.84	337.66	332.61	326.17	298.59
28	384.25	393.95	380.91	371.82	352.49	350.23	344.99	338.30	309.70
29	395.56	405.55	392.12	382.77	362.87	360.54	355.14	348.26	318.82
30	401.22	411.35	397.73	388.24	368.06	365.69	360.22	353.24	323.38
31	409.70	420.04	406.14	396.45	375.84	373.42	367.84	360.71	330.22
32	418.19	428.74	414.55	404.66	383.62	381.16	375.45	368.18	337.05
33	423.49	434.18	419.81	409.79	388.48	385.99	380.21	372.85	341.33
34	429.15	439.98	425.41	415.26	393.67	391.14	385.29	377.83	345.89
35	431.97	442.88	428.22	418.00	396.27	393.72	387.83	380.32	348.17
36	434.80	445.78	431.02	420.74	398.86	396.30	390.37	382.81	350.45
37	437.63	448.68	433.82	423.47	401.46	398.88	392.91	385.30	352.72
38	440.46	451.57	436.63	426.21	404.05	401.45	395.45	387.79	355.00
39	446.11	457.37	442.23	431.68	409.24	406.61	400.53	392.77	359.56
40	451.77	463.17	447.84	437.16	414.43	411.76	405.60	397.75	364.12
41	460.25	471.87	456.25	445.37	422.21	419.50	413.22	405.22	370.96
42	468.39	480.21	464.31	453.23	429.67	426.91	420.52	412.38	377.51
43	479.70	491.80	475.52	464.18	440.04	437.22	430.68	422.33	386.63
44	493.84	506.30	489.54	477.86	453.02	450.11	443.37	434.78	398.03
45	510.45	523.33	506.01	493.94	468.26	465.25	458.29	449.41	411.42
46	530.25	543.63	525.63	513.09	486.42	483.29	476.06	466.84	427.37
47	552.52	566.46	547.71	534.64	506.85	503.59	496.06	486.45	445.32
48	577.97	592.56	572.94	559.27	530.19	526.79	518.91	508.86	465.84
49	603.07	618.29	597.82	583.56	553.22	549.66	541.44	530.95	486.06
50	631.35	647.28	625.86	610.92	579.16	575.44	566.83	555.85	508.86
51	659.27	675.91	653.54	637.95	604.78	600.89	591.90	580.44	531.37
52	690.03	707.44	684.03	667.71	632.99	628.92	619.51	607.51	556.15
53	721.14	739.34	714.86	697.81	661.53	657.28	647.44	634.90	581.23
54	754.72	773.77	748.15	730.30	692.33	687.89	677.59	664.47	608.29
55	788.30	808.20	781.44	762.80	723.14	718.49	707.74	694.04	635.36
56	824.71	845.52	817.54	798.03	756.54	751.68	740.43	726.09	664.71
57	861.47	883.22	853.98	833.61	790.26	785.19	773.44	758.46	694.34
58	900.71	923.44	892.88	871.58	826.26	820.95	808.67	793.01	725.96
59	920.16	943.38	912.15	890.39	844.10	838.67	826.12	810.12	741.63
60	959.39	983.61	951.05	928.36	880.09	874.44	861.35	844.67	773.26
61	993.33	1,018.40	984.69	961.20	911.22	905.37	891.82	874.55	800.61
62	1,015.60	1,041.23	1,006.77	982.75	931.65	925.67	911.82	894.15	818.56
63	1,043.53	1,069.86	1,034.45	1,009.77	957.27	951.12	936.89	918.74	841.07
64+	1,060.50	1,087.26	1,051.26	1,026.18	972.84	966.57	952.11	933.69	854.73

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

18

Orange County (continued)

Age	CommunityCare HMO Silver \$2250/\$50	CommunityCare HMO Bronze \$6300/\$65
0-14	223.05	209.22
15	242.88	227.81
16	250.46	234.92
17	258.04	242.03
18	266.20	249.69
19	274.37	257.35
20	282.82	265.28
21	291.57	273.48
22	291.57	273.48
23	291.57	273.48
24	291.57	273.48
25	292.74	274.58
26	298.57	280.05
27	305.57	286.61
28	316.94	297.28
29	326.27	306.03
30	330.93	310.40
31	337.93	316.97
32	344.93	323.53
33	349.30	327.63
34	353.97	332.01
35	356.30	334.20
36	358.63	336.39
37	360.96	338.57
38	363.30	340.76
39	367.96	345.14
40	372.63	349.51
41	379.63	356.08
42	386.33	362.37
43	395.66	371.12
44	407.32	382.06
45	421.03	394.91
46	437.36	410.23
47	455.73	427.46
48	476.72	447.15
49	497.42	466.56
50	520.75	488.44
51	543.78	510.05
52	569.15	533.84
53	594.80	557.91
54	622.50	583.89
55	650.20	609.87
56	680.23	638.04
57	710.56	666.48
58	742.92	696.84
59	758.96	711.88
60	791.32	742.24
61	819.31	768.49
62	837.68	785.72
63	860.72	807.32
64+	874.71	820.44

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

19

San Diego County

Age	WholeCare HMO Platinum \$0	WholeCare HMO Platinum \$10	WholeCare HMO Platinum \$20	WholeCare HMO Platinum \$30	WholeCare HMO Gold \$30	WholeCare HMO Gold \$35	WholeCare HMO Gold \$40	WholeCare HMO Gold \$50	WholeCare HMO Silver \$55
0-14	301.59	309.20	298.97	293.01	276.66	274.88	270.77	266.59	244.05
15	328.40	336.69	325.54	319.05	301.25	299.32	294.84	290.29	265.75
16	338.65	347.20	335.70	329.01	310.66	308.66	304.04	299.35	274.04
17	348.90	357.70	345.86	338.97	320.06	318.00	313.25	308.41	282.34
18	359.94	369.02	356.81	349.69	330.19	328.06	323.16	318.17	291.27
19	370.98	380.34	367.75	360.42	340.31	338.13	333.07	327.93	300.20
20	382.41	392.06	379.08	371.52	350.80	348.55	343.33	338.03	309.45
21	394.24	404.19	390.81	383.02	361.65	359.33	353.95	348.49	319.02
22	394.24	404.19	390.81	383.02	361.65	359.33	353.95	348.49	319.02
23	394.24	404.19	390.81	383.02	361.65	359.33	353.95	348.49	319.02
24	394.24	404.19	390.81	383.02	361.65	359.33	353.95	348.49	319.02
25	395.81	405.80	392.37	384.55	363.10	360.76	355.37	349.88	320.30
26	403.70	413.89	400.19	392.21	370.33	367.95	362.44	356.85	326.68
27	413.16	423.59	409.57	401.40	379.01	376.57	370.94	365.21	334.34
28	428.53	439.35	424.81	416.34	393.11	390.59	384.74	378.81	346.78
29	441.15	452.28	437.31	428.59	404.68	402.09	396.07	389.96	356.99
30	447.46	458.75	443.57	434.72	410.47	407.83	401.73	395.53	362.09
31	456.92	468.45	452.95	443.91	419.15	416.46	410.23	403.90	369.75
32	466.38	478.15	462.32	453.11	427.83	425.08	418.72	412.26	377.41
33	472.30	484.21	468.19	458.85	433.25	430.47	424.03	417.49	382.19
34	478.60	490.68	474.44	464.98	439.04	436.22	429.69	423.06	387.30
35	481.76	493.92	477.57	468.04	441.93	439.10	432.53	425.85	389.85
36	484.91	497.15	480.69	471.11	444.83	441.97	435.36	428.64	392.40
37	488.06	500.38	483.82	474.17	447.72	444.85	438.19	431.43	394.95
38	491.22	503.62	486.95	477.24	450.61	447.72	441.02	434.22	397.50
39	497.53	510.08	493.20	483.37	456.40	453.47	446.68	439.79	402.61
40	503.83	516.55	499.45	489.49	462.19	459.22	452.35	445.37	407.71
41	513.30	526.25	508.83	498.69	470.87	467.84	460.84	453.73	415.37
42	522.36	535.55	517.82	507.50	479.18	476.11	468.98	461.75	422.71
43	534.98	548.48	530.33	519.75	490.76	487.60	480.31	472.90	432.92
44	550.75	564.65	545.96	535.07	505.22	501.98	494.47	486.84	445.68
45	569.28	583.64	564.33	553.07	522.22	518.87	511.10	503.22	460.67
46	591.35	606.28	586.21	574.52	542.47	538.99	530.92	522.73	478.54
47	616.19	631.74	610.83	598.65	565.26	561.63	553.22	544.69	498.64
48	644.58	660.84	638.97	626.23	591.30	587.50	578.71	569.78	521.60
49	672.57	689.54	666.72	653.42	616.97	613.01	603.84	594.52	544.26
50	704.11	721.88	697.98	684.07	645.90	641.76	632.15	622.40	569.78
51	735.25	753.81	728.86	714.32	674.47	670.14	660.12	649.93	594.98
52	769.55	788.97	762.86	747.65	705.94	701.40	690.91	680.25	622.74
53	804.24	824.54	797.25	781.35	737.76	733.02	722.06	710.91	650.81
54	841.69	862.94	834.37	817.74	772.12	767.16	755.68	744.02	681.12
55	879.15	901.33	871.50	854.12	806.48	801.30	789.31	777.13	711.42
56	919.75	942.97	911.75	893.57	843.73	838.31	825.76	813.02	744.28
57	960.75	985.00	952.40	933.41	881.34	875.68	862.57	849.26	777.46
58	1,004.51	1,029.87	995.78	975.92	921.48	915.56	901.86	887.95	812.87
59	1,026.20	1,052.10	1,017.27	996.99	941.37	935.32	921.33	907.11	830.42
60	1,069.96	1,096.96	1,060.65	1,039.50	981.51	975.21	960.62	945.79	865.83
61	1,107.80	1,135.76	1,098.17	1,076.27	1,016.23	1,009.70	994.60	979.25	896.46
62	1,132.64	1,161.23	1,122.79	1,100.40	1,039.02	1,032.34	1,016.90	1,001.20	916.56
63	1,163.79	1,193.16	1,153.66	1,130.66	1,067.59	1,060.73	1,044.86	1,028.73	941.76
64+	1,182.72	1,212.57	1,172.43	1,149.06	1,084.95	1,077.99	1,061.85	1,045.47	957.06

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

19

San Diego County (continued)

Age	Full Network HMO Platinum \$0	Full Network HMO Platinum \$10	Full Network HMO Platinum \$20	Full Network HMO Platinum \$30	Full Network HMO Gold \$30	Full Network HMO Gold \$35	Full Network HMO Gold \$40	Full Network HMO Gold \$50	Full Network HMO Silver \$55
0-14	326.13	334.36	323.30	316.85	299.17	291.31	281.09	268.11	245.97
15	355.12	364.08	352.03	345.01	325.77	317.20	306.08	291.94	267.83
16	366.21	375.45	363.02	355.78	335.94	327.10	315.63	301.05	276.19
17	377.29	386.81	374.01	366.55	346.10	337.00	325.19	310.16	284.55
18	389.23	399.05	385.84	378.15	357.05	347.66	335.47	319.97	293.55
19	401.16	411.29	397.67	389.75	368.00	358.33	345.76	329.79	302.56
20	413.53	423.96	409.93	401.76	379.34	369.37	356.42	339.95	311.88
21	426.32	437.08	422.61	414.18	391.08	380.79	367.44	350.47	321.53
22	426.32	437.08	422.61	414.18	391.08	380.79	367.44	350.47	321.53
23	426.32	437.08	422.61	414.18	391.08	380.79	367.44	350.47	321.53
24	426.32	437.08	422.61	414.18	391.08	380.79	367.44	350.47	321.53
25	428.02	438.82	424.30	415.84	392.64	382.32	368.91	351.87	322.81
26	436.55	447.57	432.75	424.12	400.46	389.93	376.26	358.88	329.24
27	446.78	458.06	442.89	434.06	409.85	399.07	385.08	367.29	336.96
28	463.41	475.10	459.38	450.22	425.10	413.92	399.41	380.96	349.50
29	477.05	489.09	472.90	463.47	437.62	426.11	411.17	392.17	359.79
30	483.87	496.08	479.66	470.10	443.87	432.20	417.05	397.78	364.93
31	494.10	506.57	489.80	480.04	453.26	441.34	425.86	406.19	372.65
32	504.33	517.06	499.95	489.98	462.64	450.48	434.68	414.60	380.36
33	510.73	523.62	506.28	496.19	468.51	456.19	440.19	419.86	385.19
34	517.55	530.61	513.05	502.82	474.77	462.28	446.07	425.46	390.33
35	520.96	534.11	516.43	506.13	477.90	465.33	449.01	428.27	392.90
36	524.37	537.60	519.81	509.44	481.02	468.38	451.95	431.07	395.48
37	527.78	541.10	523.19	512.76	484.15	471.42	454.89	433.88	398.05
38	531.19	544.60	526.57	516.07	487.28	474.47	457.83	436.68	400.62
39	538.01	551.59	533.33	522.70	493.54	480.56	463.71	442.29	405.76
40	544.83	558.58	540.09	529.32	499.80	486.65	469.59	447.89	410.91
41	555.06	569.07	550.24	539.27	509.18	495.79	478.41	456.31	418.63
42	564.87	579.13	559.96	548.79	518.18	504.55	486.86	464.37	426.02
43	578.51	593.11	573.48	562.05	530.69	516.74	498.62	475.58	436.31
44	595.56	610.59	590.38	578.61	546.33	531.97	513.32	489.60	449.17
45	615.60	631.14	610.25	598.08	564.71	549.87	530.58	506.07	464.28
46	639.47	655.61	633.91	621.27	586.62	571.19	551.16	525.70	482.29
47	666.33	683.15	660.54	647.37	611.25	595.18	574.31	547.78	502.54
48	697.03	714.62	690.96	677.19	639.41	622.60	600.77	573.01	525.69
49	727.30	745.65	720.97	706.59	667.18	649.63	626.85	597.89	548.52
50	761.40	780.62	754.78	739.73	698.46	680.10	656.25	625.93	574.24
51	795.08	815.15	788.16	772.45	729.36	710.18	685.28	653.62	599.64
52	832.17	853.17	824.93	808.48	763.38	743.31	717.24	684.11	627.62
53	869.69	891.63	862.12	844.93	797.80	776.82	749.58	714.95	655.91
54	910.19	933.16	902.27	884.28	834.95	812.99	784.49	748.24	686.46
55	950.69	974.68	942.42	923.63	872.10	849.17	819.39	781.54	717.00
56	994.60	1,019.70	985.94	966.29	912.38	888.39	857.24	817.64	750.12
57	1,038.93	1,065.15	1,029.90	1,009.36	953.05	927.99	895.45	854.08	783.56
58	1,086.25	1,113.67	1,076.81	1,055.34	996.46	970.26	936.24	892.99	819.25
59	1,109.70	1,137.71	1,100.05	1,078.12	1,017.97	991.21	956.45	912.26	836.93
60	1,157.02	1,186.22	1,146.96	1,124.09	1,061.38	1,033.47	997.23	951.16	872.62
61	1,197.95	1,228.18	1,187.53	1,163.85	1,098.93	1,070.03	1,032.51	984.81	903.49
62	1,224.81	1,255.72	1,214.15	1,189.95	1,123.56	1,094.02	1,055.66	1,006.89	923.74
63	1,258.49	1,290.25	1,247.54	1,222.67	1,154.46	1,124.10	1,084.69	1,034.57	949.14
64+	1,278.96	1,311.24	1,267.83	1,242.54	1,173.24	1,142.37	1,102.32	1,051.41	964.59

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 19

San Diego County (continued)

Age	SmartCare HMO Platinum \$0	SmartCare HMO Platinum \$10	SmartCare HMO Platinum \$20	SmartCare HMO Platinum \$30	SmartCare HMO Gold \$30	SmartCare HMO Gold \$35	SmartCare HMO Gold \$40	SmartCare HMO Gold \$50	SmartCare HMO Silver \$55
0-14	271.58	278.43	269.21	262.79	249.13	247.53	243.82	239.10	218.89
15	295.72	303.18	293.14	286.15	271.27	269.53	265.50	260.35	238.34
16	304.95	312.64	302.29	295.08	279.74	277.94	273.78	268.48	245.78
17	314.18	322.10	311.44	304.01	288.21	286.35	282.07	276.61	253.22
18	324.12	332.30	321.30	313.63	297.32	295.41	290.99	285.36	261.23
19	334.06	342.49	331.15	323.25	306.44	304.47	299.92	294.11	269.24
20	344.35	353.04	341.36	333.21	315.89	313.86	309.16	303.17	277.54
21	355.00	363.96	351.91	343.52	325.66	323.56	318.72	312.55	286.13
22	355.00	363.96	351.91	343.52	325.66	323.56	318.72	312.55	286.13
23	355.00	363.96	351.91	343.52	325.66	323.56	318.72	312.55	286.13
24	355.00	363.96	351.91	343.52	325.66	323.56	318.72	312.55	286.13
25	356.42	365.42	353.32	344.89	326.96	324.86	320.00	313.80	287.27
26	363.52	372.69	360.36	351.76	333.47	331.33	326.37	320.05	292.99
27	372.04	381.43	368.80	360.01	341.29	339.10	334.02	327.55	299.86
28	385.89	395.62	382.53	373.40	353.99	351.71	346.45	339.74	311.02
29	397.25	407.27	393.79	384.40	364.41	362.07	356.65	349.74	320.17
30	402.93	413.09	399.42	389.89	369.62	367.25	361.75	354.74	324.75
31	411.45	421.83	407.87	398.14	377.44	375.01	369.40	362.24	331.62
32	419.97	430.56	416.31	406.38	385.25	382.78	377.05	369.75	338.49
33	425.29	436.02	421.59	411.53	390.14	387.63	381.83	374.43	342.78
34	430.97	441.85	427.22	417.03	395.35	392.81	386.93	379.43	347.36
35	433.81	444.76	430.04	419.78	397.95	395.40	389.48	381.94	349.65
36	436.65	447.67	432.85	422.53	400.56	397.98	392.03	384.44	351.93
37	439.49	450.58	435.67	425.27	403.16	400.57	394.58	386.94	354.22
38	442.33	453.49	438.48	428.02	405.77	403.16	397.13	389.44	356.51
39	448.01	459.32	444.11	433.52	410.98	408.34	402.23	394.44	361.09
40	453.69	465.14	449.74	439.01	416.19	413.52	407.33	399.44	365.67
41	462.21	473.88	458.19	447.26	424.00	421.28	414.98	406.94	372.54
42	470.38	482.25	466.28	455.16	431.49	428.72	422.31	414.13	379.12
43	481.74	493.89	477.55	466.15	441.92	439.08	432.51	424.13	388.27
44	495.94	508.45	491.62	479.89	454.94	452.02	445.26	436.63	399.72
45	512.62	525.56	508.16	496.04	470.25	467.23	460.24	451.32	413.17
46	532.50	545.94	527.87	515.27	488.48	485.35	478.08	468.82	429.19
47	554.87	568.87	550.04	536.92	509.00	505.73	498.16	488.51	447.21
48	580.43	595.07	575.38	561.65	532.45	529.03	521.11	511.02	467.82
49	605.63	620.92	600.36	586.04	555.57	552.00	543.74	533.21	488.13
50	634.03	650.03	628.52	613.52	581.62	577.89	569.24	558.21	511.02
51	662.08	678.79	656.32	640.66	607.35	603.45	594.42	582.90	533.62
52	692.96	710.45	686.93	670.54	635.68	631.60	622.15	610.10	558.52
53	724.20	742.48	717.90	700.77	664.34	660.07	650.19	637.60	583.70
54	757.93	777.05	751.33	733.41	695.28	690.81	680.47	667.29	610.88
55	791.65	811.63	784.77	766.04	726.21	721.55	710.75	696.98	638.06
56	828.22	849.12	821.01	801.42	759.76	754.88	743.58	729.18	667.53
57	865.14	886.97	857.61	837.15	793.62	788.53	776.73	761.68	697.29
58	904.54	927.37	896.67	875.28	829.77	824.44	812.11	796.38	729.05
59	924.07	947.39	916.03	894.17	847.68	842.24	829.64	813.57	744.79
60	963.47	987.79	955.09	932.30	883.83	878.15	865.01	848.26	776.55
61	997.55	1,022.73	988.87	965.28	915.09	909.22	895.61	878.26	804.01
62	1,019.92	1,045.66	1,011.05	986.92	935.61	929.60	915.69	897.95	822.04
63	1,047.96	1,074.41	1,038.85	1,014.06	961.34	955.16	940.87	922.65	844.64
64+	1,065.00	1,091.88	1,055.73	1,030.56	976.98	970.68	956.16	937.65	858.39

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

HMO Rates

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 19

San Diego County (continued)

Age	CommunityCare HMO Silver \$2250/\$50	CommunityCare HMO Bronze \$6300/\$65
0-14	244.00	228.86
15	265.69	249.20
16	273.98	256.98
17	282.27	264.76
18	291.20	273.14
19	300.13	281.51
20	309.38	290.19
21	318.95	299.16
22	318.95	299.16
23	318.95	299.16
24	318.95	299.16
25	320.23	300.36
26	326.60	306.34
27	334.26	313.52
28	346.70	325.19
29	356.90	334.77
30	362.01	339.55
31	369.66	346.73
32	377.32	353.91
33	382.10	358.40
34	387.21	363.19
35	389.76	365.58
36	392.31	367.97
37	394.86	370.37
38	397.41	372.76
39	402.51	377.55
40	407.62	382.33
41	415.27	389.51
42	422.61	396.39
43	432.81	405.97
44	445.57	417.93
45	460.56	431.99
46	478.42	448.75
47	498.52	467.59
48	521.48	489.13
49	544.13	510.37
50	569.64	534.31
51	594.84	557.94
52	622.59	583.97
53	650.66	610.30
54	680.96	638.72
55	711.26	667.14
56	744.11	697.95
57	777.28	729.06
58	812.68	762.27
59	830.23	778.73
60	865.63	811.93
61	896.25	840.65
62	916.34	859.50
63	941.54	883.13
64+	956.85	897.48

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.



Salud HMO y Más

PLAN RATES

Salud HMO y Más

NEW AND RENEWING BUSINESS,
EFFECTIVE OCTOBER 1, 2023 THROUGH DECEMBER 31, 2023

Salud HMO y Más

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 14 Kern County

Age	Salud HMO y Más Platinum \$0	Salud HMO y Más Platinum \$10	Salud HMO y Más Platinum \$20	Salud HMO y Más Platinum \$30	Salud HMO y Más Gold \$30	Salud HMO y Más Gold \$35	Salud HMO y Más Gold \$40	Salud HMO y Más Gold \$50	Salud HMO y Más Silver \$55
0-14	265.30	271.99	262.99	256.71	243.37	241.80	238.19	233.57	213.55
15	288.88	296.17	286.36	279.53	265.00	263.30	259.36	254.33	232.53
16	297.89	305.41	295.30	288.26	273.27	271.51	267.45	262.27	239.79
17	306.91	314.66	304.24	296.98	281.54	279.73	275.55	270.21	247.05
18	316.62	324.61	313.87	306.38	290.45	288.58	284.27	278.76	254.86
19	326.33	334.57	323.49	315.77	299.36	297.43	292.98	287.31	262.68
20	336.39	344.88	333.46	325.51	308.58	306.60	302.01	296.16	270.77
21	346.79	355.54	343.78	335.57	318.13	316.08	311.35	305.32	279.15
22	346.79	355.54	343.78	335.57	318.13	316.08	311.35	305.32	279.15
23	346.79	355.54	343.78	335.57	318.13	316.08	311.35	305.32	279.15
24	346.79	355.54	343.78	335.57	318.13	316.08	311.35	305.32	279.15
25	348.18	356.97	345.15	336.92	319.40	317.35	312.60	306.54	280.27
26	355.12	364.08	352.03	343.63	325.76	323.67	318.83	312.65	285.85
27	363.44	372.61	360.28	351.68	333.40	331.25	326.30	319.98	292.55
28	376.96	386.48	373.68	364.77	345.80	343.58	338.44	331.89	303.43
29	388.06	397.85	384.68	375.51	355.98	353.70	348.40	341.66	312.37
30	393.61	403.54	390.19	380.88	361.07	358.75	353.39	346.54	316.83
31	401.93	412.08	398.44	388.93	368.71	366.34	360.86	353.87	323.53
32	410.25	420.61	406.69	396.98	376.34	373.93	368.33	361.20	330.23
33	415.46	425.94	411.84	402.02	381.11	378.67	373.00	365.78	334.42
34	421.01	431.63	417.34	407.39	386.20	383.72	377.98	370.66	338.89
35	423.78	434.47	420.09	410.07	388.75	386.25	380.47	373.10	341.12
36	426.55	437.32	422.84	412.76	391.29	388.78	382.96	375.55	343.35
37	429.33	440.16	425.59	415.44	393.84	391.31	385.46	377.99	345.59
38	432.10	443.01	428.34	418.12	396.38	393.84	387.95	380.43	347.82
39	437.65	448.70	433.84	423.49	401.47	398.90	392.93	385.32	352.29
40	443.20	454.39	439.35	428.86	406.56	403.95	397.91	390.20	356.75
41	451.52	462.92	447.60	436.92	414.20	411.54	405.38	397.53	363.45
42	459.50	471.10	455.50	444.64	421.52	418.81	412.54	404.55	369.87
43	470.60	482.47	466.50	455.37	431.70	428.92	422.51	414.32	378.80
44	484.47	496.70	480.25	468.80	444.42	441.57	434.96	426.54	389.97
45	500.77	513.41	496.41	484.57	459.37	456.42	449.59	440.89	403.09
46	520.19	533.32	515.66	503.36	477.19	474.12	467.03	457.98	418.72
47	542.04	555.72	537.32	524.50	497.23	494.04	486.65	477.22	436.31
48	567.00	581.31	562.07	548.66	520.14	516.79	509.06	499.20	456.41
49	591.63	606.56	586.48	572.49	542.72	539.24	531.17	520.88	476.23
50	619.37	635.00	613.98	599.33	568.17	564.52	556.08	545.31	498.56
51	646.77	663.09	641.14	625.84	593.30	589.49	580.67	569.43	520.61
52	676.94	694.02	671.05	655.04	620.98	616.99	607.76	595.99	544.90
53	707.46	725.31	701.30	684.57	648.98	644.81	635.16	622.86	569.46
54	740.40	759.09	733.96	716.45	679.20	674.84	664.74	651.86	595.98
55	773.35	792.86	766.62	748.33	709.42	704.86	694.32	680.87	622.50
56	809.07	829.48	802.03	782.89	742.19	737.42	726.39	712.32	651.25
57	845.13	866.46	837.78	817.79	775.27	770.29	758.77	744.07	680.29
58	883.63	905.93	875.94	855.04	810.58	805.38	793.33	777.96	711.27
59	902.70	925.48	894.85	873.50	828.08	822.76	810.45	794.75	726.62
60	941.19	964.95	933.01	910.75	863.39	857.85	845.01	828.64	757.61
61	974.49	999.08	966.01	942.96	893.93	888.19	874.90	857.96	784.41
62	996.33	1,021.48	987.67	964.10	913.98	908.10	894.52	877.19	801.99
63	1,023.73	1,049.57	1,014.83	990.61	939.11	933.08	919.11	901.31	824.05
64+	1,040.37	1,066.62	1,031.34	1,006.71	954.39	948.24	934.05	915.96	837.45

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

Salud HMO y Más

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 15

Los Angeles County. ZIP codes starting with 906–912, 915, 917–918, and 935

Age	Salud HMO y Más Platinum \$0	Salud HMO y Más Platinum \$10	Salud HMO y Más Platinum \$20	Salud HMO y Más Platinum \$30	Salud HMO y Más Gold \$30	Salud HMO y Más Gold \$35	Salud HMO y Más Gold \$40	Salud HMO y Más Gold \$50	Salud HMO y Más Silver \$55
0–14	244.77	250.95	242.64	236.85	224.54	223.09	219.76	215.50	197.03
15	266.53	273.25	264.21	257.90	244.50	242.93	239.29	234.66	214.54
16	274.85	281.78	272.46	265.95	252.13	250.51	246.76	241.98	221.24
17	283.16	290.31	280.70	274.00	259.76	258.09	254.23	249.30	227.93
18	292.12	299.50	289.58	282.67	267.98	266.26	262.27	257.19	235.14
19	301.08	308.68	298.46	291.34	276.19	274.42	270.31	265.08	242.36
20	310.36	318.19	307.66	300.32	284.71	282.88	278.65	273.25	249.82
21	319.96	328.04	317.18	309.61	293.51	291.63	287.26	281.70	257.55
22	319.96	328.04	317.18	309.61	293.51	291.63	287.26	281.70	257.55
23	319.96	328.04	317.18	309.61	293.51	291.63	287.26	281.70	257.55
24	319.96	328.04	317.18	309.61	293.51	291.63	287.26	281.70	257.55
25	321.24	329.35	318.45	310.85	294.69	292.79	288.41	282.83	258.58
26	327.64	335.91	324.79	317.04	300.56	298.63	294.16	288.46	263.73
27	335.32	343.78	332.40	324.47	307.60	305.62	301.05	295.22	269.91
28	347.80	356.57	344.77	336.55	319.05	317.00	312.26	306.21	279.96
29	358.04	367.07	354.92	346.45	328.44	326.33	321.45	315.22	288.20
30	363.15	372.32	360.00	351.41	333.14	331.00	326.04	319.73	292.32
31	370.83	380.19	367.61	358.84	340.18	338.00	332.94	326.49	298.50
32	378.51	388.07	375.22	366.27	347.22	344.99	339.83	333.25	304.68
33	383.31	392.99	379.98	370.91	351.63	349.37	344.14	337.48	308.55
34	388.43	398.23	385.05	375.87	356.32	354.03	348.74	341.98	312.67
35	390.99	400.86	387.59	378.34	358.67	356.37	351.04	344.24	314.73
36	393.55	403.48	390.13	380.82	361.02	358.70	353.33	346.49	316.79
37	396.11	406.11	392.67	383.30	363.37	361.03	355.63	348.74	318.85
38	398.67	408.73	395.20	385.77	365.72	363.37	357.93	351.00	320.91
39	403.79	413.98	400.28	390.73	370.41	368.03	362.53	355.50	325.03
40	408.91	419.23	405.35	395.68	375.11	372.70	367.12	360.01	329.15
41	416.59	427.10	412.96	403.11	382.15	379.70	374.02	366.77	335.33
42	423.95	434.65	420.26	410.23	388.90	386.41	380.62	373.25	341.25
43	434.19	445.14	430.41	420.14	398.30	395.74	389.82	382.27	349.50
44	446.98	458.27	443.10	432.52	410.04	407.40	401.31	393.53	359.80
45	462.02	473.68	458.00	447.08	423.83	421.11	414.81	406.77	371.90
46	479.94	492.05	475.77	464.41	440.27	437.44	430.90	422.55	386.33
47	500.10	512.72	495.75	483.92	458.76	455.81	448.99	440.30	402.55
48	523.13	536.34	518.58	506.21	479.89	476.81	469.68	460.58	421.10
49	545.85	559.63	541.10	528.19	500.73	497.52	490.07	480.58	439.38
50	571.45	585.87	566.48	552.96	524.21	520.85	513.05	503.11	459.99
51	596.73	611.79	591.54	577.42	547.40	543.88	535.75	525.37	480.33
52	624.56	640.32	619.13	604.36	572.94	569.26	560.74	549.88	502.74
53	652.72	669.19	647.04	631.60	598.76	594.92	586.02	574.67	525.40
54	683.12	700.36	677.17	661.02	626.65	622.62	613.31	601.43	549.87
55	713.51	731.52	707.30	690.43	654.53	650.33	640.60	628.19	574.34
56	746.47	765.31	739.97	722.32	684.76	680.37	670.19	657.20	600.87
57	779.74	799.42	772.96	754.52	715.29	710.69	700.06	686.50	627.65
58	815.26	835.83	808.17	788.89	747.87	743.06	731.95	717.77	656.24
59	832.86	853.88	825.61	805.91	764.01	759.10	747.75	733.26	670.40
60	868.37	890.29	860.82	840.28	796.59	791.47	779.63	764.53	698.99
61	899.09	921.78	891.27	870.00	824.77	819.47	807.21	791.57	723.72
62	919.25	942.44	911.25	889.51	843.26	837.84	825.31	809.32	739.94
63	944.52	968.36	936.31	913.97	866.45	860.88	848.00	831.58	760.29
64+	959.88	984.12	951.54	928.83	880.53	874.89	861.78	845.10	772.65

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

Salud HMO y Más

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 16

Los Angeles County. ZIP codes not included in region 15

Age	Salud HMO y Más Platinum \$0	Salud HMO y Más Platinum \$10	Salud HMO y Más Platinum \$20	Salud HMO y Más Platinum \$30	Salud HMO y Más Gold \$30	Salud HMO y Más Gold \$35	Salud HMO y Más Gold \$40	Salud HMO y Más Gold \$50	Salud HMO y Más Silver \$55
0-14	251.38	257.72	249.19	243.25	230.60	229.12	225.69	221.32	202.35
15	273.72	280.63	271.34	264.87	251.10	249.48	245.75	240.99	220.33
16	282.27	289.39	279.81	273.14	258.94	257.27	253.42	248.51	227.21
17	290.81	298.15	288.28	281.40	266.77	265.06	261.09	256.04	234.09
18	300.01	307.58	297.40	290.31	275.21	273.44	269.35	264.14	241.49
19	309.21	317.02	306.52	299.21	283.65	281.83	277.61	272.24	248.90
20	318.74	326.79	315.97	308.43	292.39	290.52	286.17	280.63	256.57
21	328.60	336.89	325.74	317.97	301.44	299.50	295.02	289.31	264.51
22	328.60	336.89	325.74	317.97	301.44	299.50	295.02	289.31	264.51
23	328.60	336.89	325.74	317.97	301.44	299.50	295.02	289.31	264.51
24	328.60	336.89	325.74	317.97	301.44	299.50	295.02	289.31	264.51
25	329.91	338.24	327.04	319.24	302.64	300.70	296.20	290.46	265.56
26	336.49	344.98	333.56	325.60	308.67	306.69	302.10	296.25	270.85
27	344.37	353.06	341.38	333.23	315.91	313.88	309.18	303.19	277.20
28	357.19	366.20	354.08	345.63	327.66	325.56	320.69	314.48	287.52
29	367.70	376.98	364.51	355.81	337.31	335.14	330.13	323.73	295.98
30	372.96	382.37	369.72	360.90	342.13	339.93	334.85	328.36	300.21
31	380.85	390.46	377.53	368.53	349.37	347.12	341.93	335.31	306.56
32	388.73	398.54	385.35	376.16	356.60	354.31	349.01	342.25	312.91
33	393.66	403.60	390.24	380.93	361.12	358.80	353.43	346.59	316.88
34	398.92	408.99	395.45	386.02	365.95	363.59	358.15	351.22	321.11
35	401.55	411.68	398.06	388.56	368.36	365.99	360.51	353.53	323.23
36	404.18	414.38	400.66	391.10	370.77	368.39	362.88	355.85	325.34
37	406.81	417.07	403.27	393.65	373.18	370.78	365.24	358.16	327.46
38	409.44	419.77	405.87	396.19	375.59	373.18	367.60	360.47	329.57
39	414.69	425.16	411.09	401.28	380.41	377.97	372.32	365.10	333.81
40	419.95	430.55	416.30	406.37	385.24	382.76	377.04	369.73	338.04
41	427.84	438.63	424.12	414.00	392.47	389.95	384.12	376.68	344.39
42	435.40	446.38	431.61	421.31	399.41	396.84	390.90	383.33	350.47
43	445.91	457.16	442.03	431.49	409.05	406.42	400.34	392.59	358.93
44	459.05	470.64	455.06	444.20	421.11	418.40	412.14	404.16	369.51
45	474.50	486.47	470.37	459.15	435.28	432.48	426.01	417.76	381.95
46	492.90	505.34	488.61	476.96	452.16	449.25	442.53	433.96	396.76
47	513.60	526.56	509.13	496.99	471.15	468.12	461.12	452.18	413.42
48	537.26	550.82	532.59	519.88	492.85	489.68	482.36	473.01	432.47
49	560.59	574.74	555.72	542.46	514.25	510.95	503.30	493.56	451.25
50	586.88	601.69	581.77	567.89	538.37	534.91	526.91	516.70	472.41
51	612.84	628.31	607.51	593.01	562.18	558.57	550.21	539.56	493.30
52	641.43	657.62	635.85	620.68	588.41	584.63	575.88	564.72	516.31
53	670.34	687.26	664.51	648.66	614.93	610.98	601.84	590.18	539.59
54	701.56	719.27	695.46	678.87	643.57	639.44	629.87	617.67	564.72
55	732.78	751.27	726.40	709.07	672.21	667.89	657.90	645.15	589.85
56	766.62	785.97	759.96	741.82	703.25	698.74	688.28	674.95	617.09
57	800.80	821.01	793.83	774.89	734.60	729.89	718.96	705.04	644.60
58	837.27	858.40	829.99	810.19	768.06	763.13	751.71	737.15	673.96
59	855.35	876.93	847.91	827.68	784.64	779.60	767.94	753.06	688.51
60	891.82	914.33	884.06	862.97	818.10	812.85	800.69	785.18	717.87
61	923.37	946.67	915.33	893.50	847.04	841.60	829.01	812.95	743.26
62	944.07	967.89	935.86	913.53	866.03	860.47	847.59	831.18	759.92
63	970.03	994.51	961.59	938.65	889.84	884.13	870.90	854.03	780.82
64+	985.80	1,010.67	977.22	953.91	904.32	898.50	885.06	867.93	793.53

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

Salud HMO y Más

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 17

Riverside and San Bernardino counties

Age	Salud HMO y Más Platinum \$0	Salud HMO y Más Platinum \$10	Salud HMO y Más Platinum \$20	Salud HMO y Más Platinum \$30	Salud HMO y Más Gold \$30	Salud HMO y Más Gold \$35	Salud HMO y Más Gold \$40	Salud HMO y Más Gold \$50	Salud HMO y Más Silver \$55
0-14	258.29	264.81	256.04	249.93	236.94	235.42	231.89	227.40	207.91
15	281.25	288.35	278.80	272.15	258.00	256.34	252.51	247.62	226.39
16	290.03	297.35	287.50	280.64	266.05	264.34	260.39	255.34	233.45
17	298.80	306.35	296.21	289.14	274.10	272.34	268.27	263.07	240.52
18	308.26	316.04	305.58	298.29	282.78	280.96	276.76	271.40	248.13
19	317.71	325.73	314.95	307.43	291.45	289.58	285.24	279.72	255.74
20	327.50	335.77	324.65	316.91	300.43	298.50	294.04	288.34	263.62
21	337.63	346.15	334.70	326.71	309.72	307.73	303.13	297.26	271.78
22	337.63	346.15	334.70	326.71	309.72	307.73	303.13	297.26	271.78
23	337.63	346.15	334.70	326.71	309.72	307.73	303.13	297.26	271.78
24	337.63	346.15	334.70	326.71	309.72	307.73	303.13	297.26	271.78
25	338.98	347.54	336.03	328.02	310.96	308.96	304.34	298.45	272.86
26	345.74	354.46	342.73	334.55	317.16	315.12	310.40	304.39	278.30
27	353.84	362.77	350.76	342.39	324.59	322.50	317.68	311.53	284.82
28	367.01	376.27	363.81	355.13	336.67	334.51	329.50	323.12	295.42
29	377.81	387.34	374.52	365.59	346.58	344.35	339.20	332.63	304.12
30	383.21	392.88	379.88	370.82	351.54	349.28	344.05	337.39	308.46
31	391.32	401.19	387.91	378.66	358.97	356.66	351.33	344.52	314.99
32	399.42	409.50	395.94	386.50	366.40	364.05	358.60	351.66	321.51
33	404.48	414.69	400.96	391.40	371.05	368.66	363.15	356.11	325.59
34	409.89	420.23	406.32	396.63	376.00	373.59	368.00	360.87	329.94
35	412.59	423.00	409.00	399.24	378.48	376.05	370.42	363.25	332.11
36	415.29	425.77	411.67	401.85	380.96	378.51	372.85	365.63	334.28
37	417.99	428.54	414.35	404.47	383.44	380.97	375.27	368.00	336.46
38	420.69	431.31	417.03	407.08	385.91	383.44	377.70	370.38	338.63
39	426.09	436.84	422.39	412.31	390.87	388.36	382.55	375.14	342.98
40	431.49	442.38	427.74	417.54	395.83	393.28	387.40	379.90	347.33
41	439.60	450.69	435.77	425.38	403.26	400.67	394.67	387.03	353.85
42	447.36	458.65	443.47	432.89	410.38	407.75	401.65	393.87	360.10
43	458.17	469.73	454.18	443.35	420.29	417.59	411.35	403.38	368.80
44	471.67	483.58	467.57	456.41	432.68	429.90	423.47	415.27	379.67
45	487.54	499.84	483.30	471.77	447.24	444.37	437.72	429.24	392.44
46	506.45	519.23	502.04	490.06	464.58	461.60	454.69	445.89	407.66
47	527.72	541.04	523.13	510.65	484.10	480.99	473.79	464.61	424.78
48	552.03	565.96	547.23	534.17	506.40	503.14	495.62	486.02	444.35
49	576.00	590.54	570.99	557.37	528.39	524.99	517.14	507.12	463.65
50	603.01	618.23	597.77	583.50	553.17	549.61	541.39	530.90	485.39
51	629.68	645.57	624.21	609.31	577.63	573.92	565.34	554.39	506.86
52	659.06	675.69	653.32	637.74	604.58	600.70	591.71	580.25	530.51
53	688.77	706.15	682.78	666.49	631.83	627.78	618.38	606.41	554.42
54	720.84	739.04	714.57	697.53	661.26	657.01	647.18	634.64	580.24
55	752.92	771.92	746.37	728.56	690.68	686.25	675.98	662.88	606.06
56	787.70	807.57	780.84	762.21	722.58	717.94	707.20	693.50	634.05
57	822.81	843.57	815.65	796.19	754.79	749.95	738.73	724.42	662.32
58	860.29	882.00	852.80	832.46	789.17	784.10	772.37	757.41	692.48
59	878.86	901.04	871.21	850.43	806.21	801.03	789.05	773.76	707.43
60	916.33	939.46	908.36	886.69	840.59	835.19	822.69	806.76	737.60
61	948.75	972.69	940.49	918.05	870.32	864.73	851.79	835.29	763.69
62	970.02	994.50	961.58	938.64	889.83	884.12	870.89	854.02	780.81
63	996.69	1,021.84	988.02	964.45	914.30	908.43	894.84	877.50	802.28
64+	1,012.89	1,038.45	1,004.10	980.13	929.16	923.19	909.39	891.78	815.34

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

Salud HMO y Más

New and renewing business, effective October 1, 2023 through December 31, 2023

Region 18 Orange County

Age	Salud HMO y Más Platinum \$0	Salud HMO y Más Platinum \$10	Salud HMO y Más Platinum \$20	Salud HMO y Más Platinum \$30	Salud HMO y Más Gold \$30	Salud HMO y Más Gold \$35	Salud HMO y Más Gold \$40	Salud HMO y Más Gold \$50	Salud HMO y Más Silver \$55
0-14	269.08	275.87	266.74	260.38	246.84	245.25	241.58	236.90	216.60
15	293.00	300.39	290.45	283.52	268.78	267.05	263.06	257.96	235.85
16	302.14	309.77	299.52	292.37	277.17	275.39	271.27	266.01	243.21
17	311.29	319.15	308.58	301.22	285.56	283.72	279.48	274.07	250.57
18	321.14	329.24	318.34	310.75	294.59	292.70	288.32	282.74	258.50
19	330.99	339.34	328.11	320.28	303.63	301.68	297.16	291.41	266.43
20	341.19	349.80	338.22	330.15	312.98	310.97	306.32	300.39	274.64
21	351.74	360.62	348.68	340.36	322.66	320.59	315.80	309.68	283.13
22	351.74	360.62	348.68	340.36	322.66	320.59	315.80	309.68	283.13
23	351.74	360.62	348.68	340.36	322.66	320.59	315.80	309.68	283.13
24	351.74	360.62	348.68	340.36	322.66	320.59	315.80	309.68	283.13
25	353.15	362.06	350.07	341.72	323.96	321.87	317.06	310.92	284.26
26	360.18	369.27	357.05	348.53	330.41	328.29	323.37	317.11	289.93
27	368.62	377.93	365.42	356.70	338.15	335.98	330.95	324.54	296.72
28	382.34	391.99	379.02	369.97	350.74	348.48	343.27	336.62	307.76
29	393.60	403.53	390.17	380.86	361.06	358.74	353.37	346.53	316.82
30	399.22	409.30	395.75	386.31	366.22	363.87	358.43	351.48	321.35
31	407.67	417.95	404.12	394.48	373.97	371.57	366.01	358.92	328.15
32	416.11	426.61	412.49	402.65	381.71	379.26	373.59	366.35	334.94
33	421.38	432.02	417.72	407.75	386.55	384.07	378.32	370.99	339.19
34	427.01	437.79	423.30	413.20	391.71	389.20	383.38	375.95	343.72
35	429.83	440.67	426.09	415.92	394.30	391.76	385.90	378.43	345.99
36	432.64	443.56	428.88	418.64	396.88	394.33	388.43	380.90	348.25
37	435.45	446.44	431.67	421.37	399.46	396.89	390.95	383.38	350.52
38	438.27	449.33	434.46	424.09	402.04	399.46	393.48	385.86	352.78
39	443.90	455.10	440.03	429.54	407.20	404.59	398.53	390.81	357.31
40	449.52	460.87	445.61	434.98	412.37	409.72	403.59	395.77	361.84
41	457.96	469.52	453.98	443.15	420.11	417.41	411.17	403.20	368.64
42	466.05	477.82	462.00	450.98	427.53	424.78	418.43	410.32	375.15
43	477.31	489.36	473.16	461.87	437.86	435.04	428.53	420.23	384.21
44	491.38	503.78	487.11	475.48	450.76	447.87	441.17	432.62	395.53
45	507.91	520.73	503.49	491.48	465.93	462.93	456.01	447.18	408.84
46	527.61	540.92	523.02	510.54	484.00	480.89	473.69	464.52	424.70
47	549.77	563.64	544.99	531.98	504.32	501.08	493.59	484.03	442.53
48	575.09	589.61	570.09	556.49	527.56	524.17	516.32	506.32	462.92
49	600.07	615.21	594.85	580.66	550.47	546.93	538.75	528.31	483.02
50	628.21	644.06	622.74	607.88	576.28	572.58	564.01	553.09	505.67
51	655.99	672.55	650.29	634.77	601.77	597.90	588.96	577.55	528.04
52	686.60	703.92	680.62	664.38	629.84	625.80	616.43	604.49	552.67
53	717.55	735.66	711.31	694.34	658.24	654.01	644.22	631.74	577.59
54	750.96	769.92	744.43	726.67	688.89	684.46	674.22	661.16	604.48
55	784.38	804.17	777.56	759.01	719.54	714.92	704.22	690.58	631.38
56	820.61	841.32	813.47	794.06	752.78	747.94	736.75	722.48	660.54
57	857.19	878.82	849.73	829.46	786.33	781.28	769.59	754.69	689.99
58	896.23	918.85	888.44	867.24	822.15	816.87	804.65	789.06	721.42
59	915.58	938.68	907.61	885.96	839.90	834.50	822.01	806.09	736.99
60	954.62	978.71	946.32	923.74	875.71	870.09	857.07	840.47	768.42
61	988.39	1,013.33	979.79	956.41	906.69	900.86	887.38	870.20	795.60
62	1,010.55	1,036.05	1,001.76	977.86	927.01	921.06	907.28	889.71	813.44
63	1,038.33	1,064.54	1,029.30	1,004.75	952.51	946.39	932.23	914.17	835.80
64+	1,055.22	1,081.86	1,046.04	1,021.08	967.98	961.77	947.40	929.04	849.39

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.

Salud HMO y Más

New and renewing business, effective October 1, 2023 through December 31, 2023

Region

19

San Diego County

Age	Salud HMO y Más Platinum \$0	Salud HMO y Más Platinum \$10	Salud HMO y Más Platinum \$20	Salud HMO y Más Platinum \$30	Salud HMO y Más Gold \$30	Salud HMO y Más Gold \$35	Salud HMO y Más Gold \$40	Salud HMO y Más Gold \$50	Salud HMO y Más Silver \$55
0-14	270.19	277.01	267.84	261.45	247.85	246.26	242.58	237.88	217.49
15	294.20	301.63	291.65	284.69	269.89	268.15	264.14	259.02	236.82
16	303.39	311.04	300.75	293.57	278.31	276.52	272.38	267.11	244.21
17	312.57	320.46	309.85	302.46	286.73	284.89	280.63	275.19	251.60
18	322.46	330.60	319.65	312.03	295.81	293.90	289.51	283.90	259.56
19	332.35	340.74	329.46	321.60	304.88	302.92	298.39	292.61	267.52
20	342.59	351.24	339.61	331.51	314.27	312.25	307.58	301.62	275.77
21	353.19	362.10	350.11	341.76	323.99	321.91	317.09	310.95	284.30
22	353.19	362.10	350.11	341.76	323.99	321.91	317.09	310.95	284.30
23	353.19	362.10	350.11	341.76	323.99	321.91	317.09	310.95	284.30
24	353.19	362.10	350.11	341.76	323.99	321.91	317.09	310.95	284.30
25	354.60	363.55	351.52	343.13	325.29	323.20	318.36	312.20	285.43
26	361.66	370.79	358.52	349.96	331.77	329.64	324.71	318.42	291.12
27	370.14	379.48	366.92	358.17	339.54	337.36	332.32	325.88	297.94
28	383.91	393.60	380.57	371.50	352.18	349.92	344.68	338.01	309.03
29	395.22	405.19	391.78	382.43	362.55	360.22	354.83	347.96	318.13
30	400.87	410.98	397.38	387.90	367.73	365.37	359.90	352.93	322.68
31	409.34	419.67	405.78	396.10	375.51	373.10	367.51	360.39	329.50
32	417.82	428.36	414.19	404.30	383.28	380.82	375.12	367.86	336.32
33	423.12	433.80	419.44	409.43	388.14	385.65	379.88	372.52	340.59
34	428.77	439.59	425.04	414.90	393.33	390.80	384.95	377.50	345.14
35	431.59	442.49	427.84	417.63	395.92	393.38	387.49	379.98	347.41
36	434.42	445.38	430.64	420.37	398.51	395.95	390.03	382.47	349.68
37	437.25	448.28	433.44	423.10	401.10	398.53	392.56	384.96	351.96
38	440.07	451.18	436.24	425.84	403.69	401.10	395.10	387.45	354.23
39	445.72	456.97	441.85	431.30	408.88	406.25	400.17	392.42	358.78
40	451.37	462.76	447.45	436.77	414.06	411.40	405.25	397.40	363.33
41	459.85	471.45	455.85	444.97	421.84	419.13	412.86	404.86	370.15
42	467.97	479.78	463.90	452.83	429.29	426.53	420.15	412.01	376.69
43	479.27	491.37	475.11	463.77	439.66	436.83	430.30	421.96	385.79
44	493.40	505.85	489.11	477.44	452.62	449.71	442.98	434.40	397.16
45	510.00	522.87	505.57	493.50	467.84	464.84	457.88	449.02	410.52
46	529.78	543.15	525.17	512.64	485.99	482.87	475.64	466.43	426.44
47	552.03	565.96	547.23	534.17	506.40	503.15	495.62	486.02	444.36
48	577.46	592.03	572.44	558.78	529.73	526.32	518.45	508.41	464.82
49	602.54	617.74	597.30	583.05	552.73	549.18	540.96	530.49	485.01
50	630.79	646.71	625.31	610.39	578.65	574.93	566.33	555.36	507.75
51	658.69	675.32	652.96	637.39	604.25	600.36	591.38	579.93	530.21
52	689.42	706.82	683.42	667.12	632.43	628.37	618.97	606.98	554.95
53	720.50	738.69	714.23	697.19	660.94	656.70	646.87	634.34	579.96
54	754.05	773.08	747.50	729.66	691.72	687.28	677.00	663.88	606.97
55	787.61	807.48	780.76	762.13	722.50	717.86	707.12	693.42	633.98
56	823.99	844.78	816.82	797.33	755.87	751.02	739.78	725.45	663.26
57	860.72	882.44	853.23	832.87	789.57	784.50	772.76	757.79	692.83
58	899.92	922.63	892.09	870.81	825.53	820.23	807.96	792.31	724.39
59	919.35	942.55	911.35	889.61	843.35	837.93	825.40	809.41	740.02
60	958.55	982.74	950.21	927.54	879.32	873.67	860.60	843.93	771.58
61	992.46	1,017.50	983.82	960.35	910.42	904.57	891.04	873.78	798.87
62	1,014.71	1,040.31	1,005.88	981.88	930.83	924.85	911.01	893.37	816.78
63	1,042.61	1,068.92	1,033.54	1,008.88	956.43	950.28	936.06	917.93	839.24
64+	1,059.57	1,086.30	1,050.33	1,025.28	971.97	965.73	951.27	932.85	852.90

Employer can choose the optional infertility benefit to be added to Health Net of California, Inc. Small Business HMO plans. The average additional premium is \$3.44 per member, but actual rates will vary by rating region and age. If the employer chooses the infertility benefit, all HMO plans offered will have the infertility benefit and the additional premium will be applied to each person on the policy. Rates subject to change. Rates cannot be changed based on prior claims experience.



Ancillary

PLAN RATES

Ancillary

NEW AND RENEWING BUSINESS,
EFFECTIVE OCTOBER 1, 2023 THROUGH DECEMBER 31, 2023

Dental Rates

New dental business, effective October 1, 2023 through December 31, 2023 (Renewing dental business, please contact Account Management for rates.)

Dental – HMO

Plan code	Specialty referral	Minimum enrolled	Minimum participation	Employee	Employee and spouse/ domestic partner	Employee and child(ren)	Family
Employer-paid group plan Plus DHMO 150-S (Plan code TW)	✓	2	50%	\$18.03	\$34.27	\$36.04	\$51.38
Plus DHMO 225-S (Plan code TX)	✓	2	50%	\$15.44	\$29.34	\$30.88	\$44.01
Voluntary group plan Plus DHMO 150 (V)-S (Plan code U1)	✓	2	Less than 50%	\$19.02	\$36.12	\$38.01	\$54.19
Plus DHMO 225 (V)-S (Plan code U2)	✓	2	Less than 50%	\$16.02	\$30.44	\$32.03	\$45.67

Employer paid rates require a minimum employer contribution of 50% of the employee premium and a minimum participation of 50% of the eligible employees. Voluntary rates apply to groups with less than 50% participation and/or less than 50% contribution.



Dental Rates

New dental business, effective October 1, 2023 through December 31, 2023 (Renewing dental business, please contact Account Management for rates.)

Employer-paid Dental – DPPO

Plan Name	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8
Classic 4 1500 (Plan Code 14U)								
Employee	\$56.54	\$55.19	\$56.90	\$41.14	\$52.29	\$51.15	\$60.82	\$52.53
Employee & Spouse/Domestic Partner	\$113.08	\$110.36	\$113.80	\$82.29	\$104.57	\$102.31	\$121.65	\$105.07
Employee & Child(ren)	\$125.21	\$122.22	\$126.00	\$91.35	\$115.85	\$113.36	\$134.57	\$116.39
Family	\$190.91	\$186.33	\$192.13	\$139.17	\$176.62	\$172.81	\$205.23	\$177.44
Classic 5 1500 with Ortho (Plan Code TV)								
Employee	\$55.95	\$54.60	\$56.23	\$41.00	\$51.40	\$50.28	\$58.33	\$51.77
Employee & Spouse/Domestic Partner	\$111.88	\$109.20	\$112.45	\$81.99	\$102.81	\$100.58	\$116.65	\$103.55
Employee & Child(ren)	\$131.02	\$127.88	\$130.88	\$96.16	\$119.81	\$117.23	\$134.82	\$120.90
Family	\$196.97	\$192.25	\$197.05	\$144.50	\$180.33	\$176.44	\$203.34	\$181.89
Essential 2 1000 (Plan Code TT)								
Employee	\$34.77	\$33.95	\$36.40	\$28.45	\$32.19	\$31.52	\$32.15	\$34.01
Employee & Spouse/Domestic Partner	\$69.54	\$67.92	\$72.82	\$56.90	\$64.37	\$63.04	\$64.30	\$68.04
Employee & Child(ren)	\$77.35	\$75.56	\$80.96	\$63.44	\$71.67	\$70.19	\$71.57	\$75.69
Family	\$117.80	\$115.07	\$123.30	\$96.56	\$109.11	\$106.85	\$108.98	\$115.26
Essential 5 1500 with Ortho (Plan Code 14S)								
Employee	\$42.70	\$41.69	\$43.77	\$33.18	\$39.63	\$38.80	\$40.48	\$40.16
Employee & Spouse/Domestic Partner	\$85.40	\$83.37	\$87.54	\$66.35	\$79.26	\$77.58	\$80.95	\$80.31
Employee & Child(ren)	\$103.31	\$100.87	\$104.85	\$79.84	\$95.34	\$93.31	\$97.86	\$96.70
Family	\$154.08	\$150.44	\$156.77	\$119.23	\$142.40	\$139.37	\$145.98	\$144.40
Essential 6 1500 (Plan Code TU)								
Employee	\$39.98	\$39.04	\$41.32	\$31.27	\$37.31	\$36.52	\$37.93	\$37.75
Employee & Spouse/Domestic Partner	\$79.97	\$78.07	\$82.64	\$62.54	\$74.63	\$73.04	\$75.86	\$75.52
Employee & Child(ren)	\$88.81	\$86.74	\$91.74	\$69.65	\$82.94	\$81.19	\$84.29	\$83.92
Family	\$135.30	\$132.15	\$139.79	\$106.03	\$126.34	\$123.68	\$128.40	\$127.83

Employer paid rates require a minimum employer contribution of 50% of the employee premium and a minimum participation of 50% of the eligible employees.

Area is determined by group's home-office ZIP code.

Dental Rates

New dental business, effective October 1, 2023 through December 31, 2023
(Renewing dental business, please contact Account Management for rates.)

Voluntary Dental – DPPO

Plan Name	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8
Classic 4 1500 (Plan Code 14V)								
Employee	\$59.62	\$58.18	\$60.00	\$43.33	\$55.13	\$53.92	\$64.15	\$55.39
Employee & Spouse/Domestic Partner	\$119.25	\$116.36	\$120.01	\$86.67	\$110.25	\$107.85	\$128.30	\$110.77
Employee & Child(ren)	\$131.98	\$128.81	\$132.83	\$96.17	\$122.09	\$119.45	\$141.88	\$122.66
Family	\$201.24	\$196.41	\$202.53	\$146.56	\$186.14	\$182.11	\$216.40	\$187.01
Classic 5 1500 with Ortho (Plan Code U0)								
Employee	\$58.82	\$57.42	\$59.15	\$43.07	\$54.06	\$52.88	\$61.36	\$54.44
Employee & Spouse/Domestic Partner	\$117.66	\$114.82	\$118.29	\$86.15	\$108.11	\$105.76	\$122.71	\$108.89
Employee & Child(ren)	\$137.29	\$134.00	\$137.21	\$100.68	\$125.56	\$122.85	\$141.37	\$126.68
Family	\$206.58	\$201.62	\$206.77	\$151.43	\$189.15	\$185.06	\$213.39	\$190.75
Essential 2 1000 (Plan Code TY)								
Employee	\$36.59	\$35.74	\$38.34	\$29.92	\$33.87	\$33.16	\$33.84	\$35.80
Employee & Spouse/Domestic Partner	\$73.20	\$71.49	\$76.67	\$59.84	\$67.75	\$66.32	\$67.67	\$71.60
Employee & Child(ren)	\$81.37	\$79.49	\$85.18	\$66.68	\$75.37	\$73.80	\$75.27	\$79.62
Family	\$123.94	\$121.07	\$129.77	\$101.49	\$114.77	\$112.38	\$114.63	\$121.26
Essential 5 1500 with Ortho (Plan Code 14T)								
Employee	\$44.83	\$43.77	\$45.97	\$34.80	\$41.61	\$40.72	\$42.49	\$42.16
Employee & Spouse/Domestic Partner	\$89.65	\$87.52	\$91.96	\$69.61	\$83.23	\$81.45	\$84.97	\$84.31
Employee & Child(ren)	\$107.99	\$105.43	\$109.70	\$83.42	\$99.68	\$97.55	\$102.28	\$101.10
Family	\$161.24	\$157.41	\$164.18	\$124.71	\$149.04	\$145.85	\$152.75	\$151.13
Essential 6 1500 (Plan Code TZ)								
Employee	\$42.11	\$41.11	\$43.52	\$32.90	\$39.29	\$38.46	\$39.94	\$39.76
Employee & Spouse/Domestic Partner	\$84.22	\$82.23	\$87.04	\$65.79	\$78.57	\$76.90	\$79.89	\$79.51
Employee & Child(ren)	\$93.50	\$91.30	\$96.60	\$73.23	\$87.28	\$85.45	\$88.72	\$88.32
Family	\$142.46	\$139.12	\$147.20	\$111.50	\$132.97	\$130.17	\$135.17	\$134.55

Voluntary rates apply to groups with less than 50% participation and/or less than 50% contribution.

Area is determined by group's home-office ZIP code.

Vision, Chiropractic and Life

Vision – Employer-paid

New vision business, effective October 1, 2023 through December 31, 2023
(Vision rates are for New and Renewing Business.)

Plan	Exam copay	Materials copay	Employee	Employee and spouse / domestic partner	Employee and child(ren)	Family
Elite 1010-1 (Plan code VL)	\$10	\$10	\$9.21	\$17.50	\$18.42	\$27.63
Supreme 010-2 (Plan code VR)	\$0	\$10	\$8.41	\$15.98	\$16.82	\$25.23
Preferred 1025-2 (Plan code VN)	\$10	\$25	\$7.06	\$13.41	\$14.12	\$21.18
Preferred 1025-3 (Plan code VP)	\$10	\$25	\$6.71	\$12.75	\$13.42	\$20.13
Preferred Value 10-3 (Plan code VT)	Not covered	\$10	\$4.98	\$9.46	\$9.96	\$14.94
Plus 20-1 (Plan code VV)	\$20	\$50-\$105	\$2.33	\$4.43	\$4.66	\$6.99
Exam only (Plan code VX)	\$0	Not covered	\$1.89	\$3.59	\$3.78	\$5.67

Employer paid rates require a minimum employer contribution of 50% of the employee premium and a minimum participation of 50% of the eligible employees.

Vision – Voluntary

New vision business, effective October 1, 2023 through December 31, 2023
(Vision rates are for New and Renewing Business.)

Plan	Exam copay	Materials copay	Employee	Employee and spouse / domestic partner	Employee and child(ren)	Family
Elite 1010-1 (Plan code VK)	\$10	\$10	\$12.21	\$23.20	\$24.42	\$36.63
Supreme 010-2 (Plan code VQ)	\$0	\$10	\$11.41	\$21.68	\$22.82	\$34.23
Preferred 1025-2 (Plan code VM)	\$10	\$25	\$10.06	\$19.11	\$20.12	\$30.18
Preferred 1025-3 (Plan code VO)	\$10	\$25	\$9.71	\$18.45	\$19.42	\$29.13
Preferred Value 10-3 (Plan code VS)	Not covered	\$10	\$7.98	\$15.16	\$15.96	\$23.94
Plus 20-1 (Plan code VU)	\$20	\$50-\$105	\$5.33	\$10.13	\$10.66	\$15.99
Exam only (Plan code VW)	\$0	Not covered	\$4.89	\$9.29	\$9.78	\$14.67

Voluntary rates apply to groups with less than 50% participation and/or less than 50% contribution.

Chiropractic

New and renewing business, effective October 1, 2023 through December 31, 2023

Paired network	Chiro rate per member, per month
Full Network HMO	\$3.00
WholeCare HMO	\$3.00
Salud HMO y Más	\$3.00
SmartCare HMO	\$3.00
CommunityCare HMO	\$3.00
Full PPO	\$3.00

Basic Life and Accidental Death & Dismemberment

New business, effective October 1, 2023 through December 31, 2023

Age	Life and Add rate
Under 30	\$0.14
30-34	\$0.15
35-39	\$0.18
40-44	\$0.24
45-49	\$0.34
50-54	\$0.54
55-59	\$0.84
60-64	\$1.68
65-69	\$2.79
70-74	\$4.57
75-79	\$7.13
80-84	\$10.36
85 and over	\$21.38



Grandfathered Plan Rating Regions

Small business group non-HIPC grandfathered counties by region.

HMO

Region 101

Amador,* Butte,* Calaveras,* Colusa,* El Dorado, Glenn,* Humboldt,* Lake,* Mendocino,* Monterey,* Napa, Plumas,* Shasta,* Sierra,* Sutter,* Tehama,* Tuolumne,* Yuba*

Region 102

El Dorado,** Marin, Mariposa,* Merced, Nevada, San Benito,* San Joaquin, Santa Cruz, Solano, Sonoma, Stanislaus

Region 103

Alameda, Contra Costa, Kings, Madera, Placer, Sacramento, San Francisco, San Mateo, Santa Clara, Yolo

Region 104

Santa Barbara, Ventura

Region 105

Riverside, San Bernardino

Region 106

Kern, Orange, San Luis Obispo*

Region 107

Fresno, Imperial,* San Diego, Tulare

Region 108

Los Angeles¹

Region 109

Los Angeles²

PPO

Region 101

Amador,* Butte,* Calaveras,* Colusa,* Glenn,* Humboldt,* Lake,* Mendocino,* Monterey,* Napa, Plumas,* Shasta,* Sierra,* Sutter,* Tehama,* Tulare, Tuolumne,* Yuba*

Region 102

Mariposa,* Merced, Nevada, San Benito,* San Joaquin, Santa Cruz, Solano, Sonoma, Stanislaus

Region 103

Kings, Madera, San Francisco, San Mateo

Region 104

Marin, Kern, Santa Barbara, Ventura

Region 105

Los Angeles,² Riverside, San Bernardino

Region 106

Orange, San Luis Obispo*

Region 107

Imperial,* San Diego

Region 108

Los Angeles¹

Region 109

Alameda, Contra Costa, El Dorado, Fresno, Placer, Sacramento, Santa Clara, Yolo

*Marketable for PPO business only.

**Includes El Dorado ZIP codes 95667, 95672, 95682, and 95762 only. These ZIP codes are excluded from Region 101.

For HMO:

¹Los Angeles region 108 consists of those Los Angeles ZIP codes not in region 109.

²Los Angeles region 109 consists of Los Angeles ZIP codes beginning with 906–912, 915, 917, 918, and 935.

For PPO:

¹Los Angeles region 108 consists of those Los Angeles ZIP codes not in region 105.

²Los Angeles region 105 consists of Los Angeles ZIP codes beginning with 906–912, 915, 917, 918, and 935.



Glossary

Coinsurance

Refers to the percentage of covered costs payable by member; i.e., if a member's coinsurance is 20%, Health Net pays 80% of the covered costs, and the member is responsible for the remaining 20% of the costs.

Deductible

This is the amount members must pay for services before the plan begins covering them. (This amount may not apply to routine and preventive care visits.)

HMO (health maintenance organization)

Plans that offer primary care physician guidance and referrals within our large statewide network.

OON (out-of-network)

A physician, provider group or hospital that is not a contracted participant of the Health Net provider network. Generally, if you go out-of-network, you will pay more.

PCP (primary care physician)

The physician a member designates as the primary doctor, following the requirements for an HMO plan. With an HMO plan, a member must see this physician first for all health matters and obtain referrals from the PCP.

PPO (preferred provider organization)

Plans that offer members access to visit any physician or hospital in our large statewide PPO network. When visiting in-network physicians, members receive in-network specific discounts and a lower coinsurance than for out-of-network providers.

Salud HMO y Más plans

The Health Net Salud plans address the needs of the Latino population in California and offer access to health care on both sides of the California/Mexico border. California members access a select network of doctors and physician groups in their local service area but also have the freedom to visit participating SIMNSA providers in Mexico, no referral required.

Nondiscrimination Notice

In addition to the State of California nondiscrimination requirements (as described in benefit coverage documents), Health Net of California, Inc. (Health Net) complies with applicable federal civil rights laws and does not discriminate, exclude people or treat them differently on the basis of race, color, national origin, ancestry, religion, marital status, gender, gender identity, sexual orientation, age, disability, or sex.

HEALTH NET:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats (large print, accessible electronic formats, other formats).
- Provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services, contact Health Net's Customer Contact Center at:

Individual & Family Plan (IFP) Members On Exchange/Covered California 1-888-926-4988 (TTY: 711)

Individual & Family Plan (IFP) Members Off Exchange 1-800-839-2172 (TTY: 711)

Individual & Family Plan (IFP) Applicants 1-877-609-8711 (TTY: 711)

Group Plans through Health Net 1-800-522-0088 (TTY: 711)

If you believe that Health Net has failed to provide these services or discriminated in another way based on one of the characteristics listed above, you can file a grievance by calling Health Net's Customer Contact Center at the number above and telling them you need help filing a grievance. Health Net's Customer Contact Center is available to help you file a grievance. You can also file a grievance by mail, fax or email at:

Health Net of California, Inc. Appeals & Grievances

PO Box 10348

Van Nuys, CA 91410-0348

Fax: 1-877-831-6019

Email: Member.Discrimination.Complaints@healthnet.com (Members) or

Non-Member.Discrimination.Complaints@healthnet.com (Applicants)

If your health problem is urgent, if you already filed a complaint with Health Net of California, Inc. and are not satisfied with the decision or it has been more than 30 days since you filed a complaint with Health Net of California, Inc., you may submit an Independent Medical Review/Complaint Form with the Department of Managed Health Care (DMHC). You may submit a complaint form by calling the DMHC Help Desk at 1-888-466-2219 (TDD: 1-877-688-9891) or online at www.dmhc.ca.gov/FileaComplaint.

If you believe you have been discriminated against because of race, color, national origin, age, disability, or sex, you can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights (OCR), electronically through the OCR Complaint Portal, at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019 (TDD: 1-800-537-7697).

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

English

No Cost Language Services. You can get an interpreter. You can get documents read to you and some sent to you in your language. For help, call the Customer Contact Center at the number on your ID card or call Individual & Family Plan (IFP) Off Exchange: 1-800-839-2172 (TTY: 711). For California marketplace, call IFP On Exchange 1-888-926-4988 (TTY: 711) or Small Business 1-888-926-5133 (TTY: 711). For Group Plans through Health Net, call 1-800-522-0088 (TTY: 711).

Arabic

خدمات لغوية مجانية. يمكننا أن نوفر لك مترجم فوري. ويمكننا أن نقرأ لك الوثائق بلغتك. للحصول على المساعدة اللازمة، يرجى التواصل مع مركز خدمة العملاء عبر الرقم المبين على بطاقتك أو الاتصال بالرقم الفرعي لخطة الأفراد والعائلة: (TTY: 711) 1-800-839-2172. للتواصل في كاليفورنيا، يرجى الاتصال بالرقم الفرعي لخطة الأفراد والعائلة عبر الرقم: (TTY: 711) 1-888-926-4988 أو المشروعات الصغيرة (TTY: 711) 1-888-926-5133. لخطط المجموعة عبر Health Net، يرجى الاتصال بالرقم (TTY: 711) 1-800-522-0088.

Armenian

Անվճար լեզվական ծառայություններ: Դուք կարող եք բանավոր թարգմանիչ ստանալ: Փաստաթղթերը կարող են կարդալ ձեր լեզվով: Օգնության համար զանգահարեք Հաճախորդների սպասարկման կենտրոն ձեր ID քարտի վրա նշված հեռախոսահամարով կամ զանգահարեք Individual & Family Plan (IFP) Off Exchange՝ 1-800-839-2172 հեռախոսահամարով (TTY՝ 711): Կալիֆոռնիայի համար զանգահարեք IFP On Exchange՝ 1-888-926-4988 հեռախոսահամարով (TTY՝ 711) կամ Փոքր բիզնեսի համար՝ 1-888-926-5133 հեռախոսահամարով (TTY՝ 711): Health Net-ի Խմբային ծրագրերի համար զանգահարեք 1-800-522-0088 հեռախոսահամարով (TTY՝ 711):

Chinese

免費語言服務。您可使用口譯員服務。您可請人將文件唸給您聽並請我們將某些文件翻譯成您的語言寄給您。如需協助，請撥打您會員卡上的電話號碼與客戶聯絡中心聯絡或者撥打健康保險交易市場外的 Individual & Family Plan (IFP) 專線：1-800-839-2172（聽障專線：711）。如為加州保險交易市場，請撥打健康保險交易市場的 IFP 專線 1-888-926-4988（聽障專線：711），小型企業則請撥打 1-888-926-5133（聽障專線：711）。如為透過 Health Net 取得的團保計畫，請撥打 1-800-522-0088（聽障專線：711）。

Hindi

बिना शुल्क भाषा सेवाएं। आप एक दुभाषिया प्राप्त कर सकते हैं। आप दस्तावेजों को अपनी भाषा में पढ़वा सकते हैं। मदद के लिए, अपने आईडी कार्ड में दिए गए नंबर पर ग्राहक सेवा केंद्र को कॉल करें या व्यक्तिगत और फैमिली प्लान (आईएफपी) ऑफ एक्सचेंज: 1-800-839-2172 (TTY: 711) पर कॉल करें। कैलिफोर्निया बाजारों के लिए, आईएफपी ऑन एक्सचेंज 1-888-926-4988 (TTY: 711) या स्मॉल बिजनेस 1-888-926-5133 (TTY: 711) पर कॉल करें। हेल्थ नेट के माध्यम से ग्रुप प्लान के लिए 1-800-522-0088 (TTY: 711) पर कॉल करें।

Hmong

Tsis Muaj Tus Nqi Pab Txhais Lus. Koj tuaj yeem tau txais ib tus kws pab txhais lus. Koj tuaj yeem muaj ib tus neeg nyeem cov ntaub ntauv rau koj ua koj hom lus hais. Txhawm rau pab, hu xovtooj rau Neeg Qhua Lub Chaw Tiv Toj ntawm tus npawb nyob ntawm koj daim npav ID lossis hu rau Tus Neeg thiab Tsev Neeg Qhov Kev Npaj (IFP) Ntawm Sib Hloov Pauv: 1-800-839-2172 (TTY: 711). Rau California qhov chaw kiab khw, hu rau IFP Ntawm Qhov Sib Hloov Pauv 1-888-926-4988 (TTY: 711) lossis Lag Luam Me 1-888-926-5133 (TTY: 711). Rau Cov Pab Pawg Chaw Npaj Kho Mob hla Health Net, hu rau 1-800-522-0088 (TTY: 711).

Japanese

無料の言語サービスを提供しております。通訳者もご利用いただけます。日本語で文書をお読みすることも可能です。ヘルプが必要な場合は、IDカードに記載されている番号で顧客連絡センターまでお問い合わせいただくか、Individual & Family Plan (IFP) (個人・家族向けプラン) Off Exchange: 1-800-839-2172 (TTY: 711) までお電話ください。カリフォルニア州のマーケットプレイスについては、IFP On Exchange 1-888-926-4988 (TTY: 711) または Small Business 1-888-926-5133 (TTY: 711) までお電話ください。Health Netによるグループプランについては、1-800-522-0088 (TTY: 711) までお電話ください。

Khmer

សេវាភាសាដោយឥតគិតថ្លៃ។ លោកអ្នកអាចទទួលបានអ្នកបកប្រែផ្ទាល់មាត់។ លោកអ្នកអាចស្តាប់គេអានឯកសារឱ្យលោកអ្នកជាភាសារបស់លោកអ្នក។ សម្រាប់ជំនួយ សូមហៅទូរស័ព្ទទៅកាន់មជ្ឈមណ្ឌលទំនាក់ទំនងអតិថិជនតាមលេខដែលមាននៅលើប័ណ្ណសម្គាល់ខ្លួនរបស់លោកអ្នក ឬហៅទូរស័ព្ទទៅកាន់កម្មវិធី Off Exchange របស់គម្រោងជាលក្ខណៈបុគ្គល និងក្រុមគ្រួសារ (IFP) តាមរយៈលេខ៖ 1-800-839-2172 (TTY: 711)។ សម្រាប់ទីផ្សាររដ្ឋ California សូមហៅទូរស័ព្ទទៅកាន់កម្មវិធី On Exchange របស់គម្រោង IFP តាមរយៈលេខ 1-888-926-4988 (TTY: 711) ឬក្រុមហ៊ុនអាជីវកម្មខ្នាតតូចតាមរយៈលេខ 1-888-926-5133 (TTY: 711)។ សម្រាប់គម្រោងជាក្រុមតាមរយៈ Health Net សូមហៅទូរស័ព្ទទៅកាន់លេខ 1-800-522-0088 (TTY: 711)។

Korean

무료 언어 서비스입니다. 통역 서비스를 받으실 수 있습니다. 문서 낭독 서비스를 받으실 수 있으며 일부 서비스는 귀하가 구사하는 언어로 제공됩니다. 도움이 필요하시면 ID 카드에 수록된 번호로 고객센터 센터에 연락하시거나 개인 및 가족 플랜(IFP)의 경우 Off Exchange: 1-800-839-2172(TTY: 711)번으로 전화해 주십시오. 캘리포니아 주 마켓플레이스의 경우 IFP On Exchange 1-888-926-4988(TTY: 711), 소규모 비즈니스의 경우 1-888-926-5133(TTY: 711)번으로 전화해 주십시오. Health Net을 통한 그룹 플랜의 경우 1-800-522-0088(TTY: 711)번으로 전화해 주십시오.

Navajo

Doo bą́ąh ílínígóó saad bee háká ada'iiyeed. Ata' halne'ígíí da ła' ná hádídot'íjį. Naaltsos da t'áá shí shizaad k'ehjí shichí' yídoolta nínízingo t'áá ná ákódooníí. Ákót'éego shíká a'doowoł nínízingo Customer Contact Center hoolyéhíjį' hodílnih ninaaltsos nanítingo bee néého'dolzinígíí hodoonihjį' bikáá' éí doodago kojį' hólne' Individual & Family Plan (IFP) Off Exchange: 1-800-839-2172 (TTY: 711). California marketplace báhígíí kojį' hólne' IFP On Exchange 1-888- 926-4988 (TTY: 711) éí doodago Small Business báhígíí kojį' hólne' 1-888-926-5133 (TTY: 711). Group Plans through Health Net báhígíí éí kojį' hólne' 1-800-522-0088 (TTY: 711).

Persian (Farsi)

خدمات زبان بدون هزینه. می توانید یک مترجم شفاهی بگیرید. می توانید درخواست کنید اسناد به زبان شما برایتان خوانده شوند. دریافت کمک، با مرکز تماس مشتریان به شماره روی کارت شناسایی یا طرح فردی و خانوادگی (IFP) Off Exchange) به شماره: 1-800-839-2172 (TTY:711) تماس بگیرید. برای بازار کالیفرنیا، با IFP On Exchange شماره 1-888-926-4988 (TTY:711) یا کسب و کار کوچک 1-888-926-5133 (TTY:711) تماس بگیرید. برای طرح های گروهی از طریق Health Net، با 1-800-522-0088 (TTY:711) تماس بگیرید.

Panjabi (Punjabi)

ਬਿਨਾਂ ਕਿਸੇ ਲਾਗਤ ਵਾਲੀਆਂ ਭਾਸ਼ਾ ਸੇਵਾਵਾਂ। ਤੁਸੀਂ ਇੱਕ ਦੁਭਾਸ਼ੀਏ ਦੀ ਸੇਵਾ ਹਾਸਲ ਕਰ ਸਕਦੇ ਹੋ। ਤੁਹਾਨੂੰ ਦਸਤਾਵੇਜ਼ ਤੁਹਾਡੀ ਭਾਸ਼ਾ ਵਿੱਚ ਪੜ੍ਹ ਕੇ ਸੁਣਾਏ ਜਾ ਸਕਦੇ ਹਨ। ਮਦਦ ਲਈ, ਆਪਣੇ ਆਈਡੀ ਕਾਰਡ ਤੇ ਦਿੱਤੇ ਨੰਬਰ ਤੇ ਗਾਹਕ ਸੰਪਰਕ ਕੇਂਦਰ ਨੂੰ ਕਾਲ ਕਰੋ ਜਾਂ ਵਿਅਕਤੀਗਤ ਅਤੇ ਪਰਿਵਾਰਕ ਯੋਜਨਾ (IFP) ਔਫ਼ ਐਕਸਚੇਂਜ 'ਤੇ ਕਾਲ ਕਰੋ: 1-800-839-2172 (TTY: 711)। ਕੈਲੀਫੋਰਨੀਆ ਮਾਰਕਿਟਪਲੇਸ ਲਈ, IFP ਔਨ ਐਕਸਚੇਂਜ ਨੂੰ 1-888-926-4988 (TTY: 711) ਜਾਂ ਸਮੱਲ ਬਿਜਨੈਸ ਨੂੰ 1-888-926-5133 (TTY: 711) 'ਤੇ ਕਾਲ ਕਰੋ। ਹੈਲਥ ਨੈੱਟ ਰਾਹੀਂ ਸਾਮੂਹਿਕ ਪਲੈਨਾਂ ਲਈ, 1-800-522-0088 (TTY: 711) 'ਤੇ ਕਾਲ ਕਰੋ।

Russian

Бесплатная помощь переводчиков. Вы можете получить помощь переводчика. Вам могут прочесть документы на Вашем родном языке. Если Вам нужна помощь, звоните по телефону Центра помощи клиентам, указанному на вашей карте участника плана. Вы также можете позвонить в отдел помощи участникам не представленных на федеральном рынке планов для частных лиц и семей (IFP) Off Exchange 1-800-839-2172 (TTY: 711). Участники планов от California marketplace: звоните в отдел помощи участникам представленных на федеральном рынке планов IFP (On Exchange) по телефону 1-888-926-4988 (TTY: 711) или в отдел планов для малого бизнеса (Small Business) по телефону 1-888-926-5133 (TTY: 711). Участники коллективных планов, предоставляемых через Health Net: звоните по телефону 1-800-522-0088 (TTY: 711).

Spanish

Servicios de idiomas sin costo. Puede solicitar un intérprete, obtener el servicio de lectura de documentos y recibir algunos en su idioma. Para obtener ayuda, comuníquese con el Centro de Comunicación con el Cliente al número que figura en su tarjeta de identificación o llame al plan individual y familiar que no pertenece al Mercado de Seguros de Salud al 1-800-839-2172 (TTY: 711). Para planes del mercado de seguros de salud de California, llame al plan individual y familiar que pertenece al Mercado de Seguros de Salud al 1-888-926-4988 (TTY: 711); para los planes de pequeñas empresas, llame al 1-888-926-5133 (TTY: 711). Para planes grupales a través de Health Net, llame al 1-800-522-0088 (TTY: 711).

Tagalog

Walang Bayad na Mga Serbisyo sa Wika. Makakakuha kayo ng interpreter. Makakakuha kayo ng mga dokumento na babasahin sa inyo sa inyong wika. Para sa tulong, tumawag sa Customer Contact Center sa numerong nasa ID card ninyo o tumawag sa Off Exchange ng Planong Pang-indibidwal at Pampamilya (Individual & Family Plan, IFP): 1-800-839-2172 (TTY: 711). Para sa California marketplace, tumawag sa IFP On Exchange 1-888-926-4988 (TTY: 711) o Maliliit na Negosyo 1-888-926-5133 (TTY: 711). Para sa mga Planong Pang-grupo sa pamamagitan ng Health Net, tumawag sa 1-800-522-0088 (TTY: 711).

Thai

ไม่มีค่าบริการด้านภาษา คุณสามารถใช้ล่ามได้ คุณสามารถให้อ่านเอกสารให้ฟังเป็นภาษาของคุณได้ หากต้องการความช่วยเหลือ โทรหาศูนย์ลูกค้าสัมพันธ์ได้ที่หมายเลขบรรทัดประจำตัวของคุณ หรือโทรหาฝ่ายแผนบุคคลและครอบครัวของเอกชน (Individual & Family Plan (IFP) Off Exchange) ที่ 1-800-839-2172 (โทรมด TTY: 711) สำหรับเขตแคลิฟอร์เนีย โทรหาฝ่ายแผนบุคคลและครอบครัวของรัฐ (IFP On Exchange) ได้ที่ 1-888-926-4988 (โทรมด TTY: 711) หรือ ฝ่ายธุรกิจขนาดเล็ก (Small Business) ที่ 1-888-926-5133 (โทรมด TTY: 711) สำหรับแผนแบบกลุ่มผ่านทาง Health Net โทร 1-800-522-0088 (โทรมด TTY: 711)

Vietnamese

Các Dịch Vụ Ngôn Ngữ Miễn Phí. Quý vị có thể có một phiên dịch viên. Quý vị có thể yêu cầu được đọc cho nghe tài liệu bằng ngôn ngữ của quý vị. Để được giúp đỡ, vui lòng gọi Trung Tâm Liên Lạc Khách Hàng theo số điện thoại ghi trên thẻ ID của quý vị hoặc gọi Chương Trình Bảo Hiểm Cá Nhân & Gia Đình (IFP) Phi Tập Trung: 1-800-839-2172 (TTY: 711). Đối với thị trường California, vui lòng gọi IFP Tập Trung 1-888-926-4988 (TTY: 711) hoặc Doanh Nghiệp Nhỏ 1-888-926-5133 (TTY: 711). Đối với các Chương Trình Bảo Hiểm Nhóm qua Health Net, vui lòng gọi 1-800-522-0088 (TTY: 711).

CA Commercial On and Off-Exchange Member Notice of Language Assistance

FLY017549EH00 (12/17)

For more information, please contact:

Health Net

PO Box 9103
Van Nuys, CA 91409-9103

Broker Services

800-448-4411, option 4

Small Business Group

Sales and Service Administration

800-447-8812 (English)
877-891-9050 (Cantonese)
877-339-8596 (Korean)
877-891-9053 (Mandarin)
800-331-1777 (Spanish)
877-891-9051 (Tagalog)
877-339-8621 (Vietnamese)

Assistance for the hearing and speech impaired

TTY: 711

Other options

Coverage for individuals and families

800-909-3447

Coverage for family members over AGE 65

800-944-7287

Coverage for children in a low-income household

800-327-0502

Coverage for businesses with 101+ employees

800-448-4411, option 2

www.healthnet.com/broker

www.healthnet.com/employer/reformguide

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