

# Table Rates

Zip:91436 (Los Angeles) 12/01/24 Monthly

Age	Kaiser Region 16	Kaiser Region 16
	Platinum 90 HMO 0/20 + Child Dental	Gold 80 HMO 250/35 + Child Dental
0 -14	359.70	330.33
15 -15	390.41	358.42
16 -16	402.15	369.16
17 -17	413.89	379.90
18 -18	426.53	391.47
19 -19	424.90	388.77
20 -20	438.00	400.75
21 -21	451.55	413.15
22 -22	451.55	413.15
23 -23	451.55	413.15
24 -24	451.55	413.15
25 -25	453.35	414.80
26 -26	462.38	423.06
27 -27	473.22	432.98
28 -28	490.83	449.09
29 -29	505.28	462.31
30 -30	512.50	468.92
31 -31	523.34	478.84
32 -32	534.18	488.75
33 -33	540.95	494.95
34 -34	548.18	501.56
35 -35	551.79	504.87
36 -36	555.40	508.17
37 -37	559.01	511.48
38 -38	562.63	514.78
39 -39	569.85	521.39
40 -40	577.08	528.00
41 -41	587.91	537.92
42 -42	598.30	547.42
43 -43	612.75	560.64
44 -44	630.81	577.17
45 -45	652.03	596.58
46 -46	677.32	619.72
47 -47	705.77	645.75
48 -48	738.28	675.49
49 -49	770.34	704.83
50 -50	806.46	737.88
51 -51	842.13	770.52
52 -52	881.42	806.46
53 -53	921.15	842.82
54 -54	964.05	882.07
55 -55	1006.95	921.32
56 -56	1053.46	963.87
57 -57	1100.42	1006.84
58 -58	1150.54	1052.70
59 -59	1175.37	1075.42
60 -60	1225.50	1121.28
61 -61	1268.84	1160.94
62 -62	1297.29	1186.97
63 -63	1332.96	1219.61
64 -99	1354.65	1239.45

This report doesn't include rider rates in the premium.

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