2024 Premium Rates

Transamerica – Kaiser (medical only)

Kaiser California, Colorado, Georgia, Maryland, Virginia, District of Columbia

Medical	Employee Premium Per-Pay-Period (24 Pay Periods)	Company Premium Per-Pay-Period (24 Pay Periods)
\$900 Deductible Plan		
Employee Only	\$48.96	\$288.72
Employee + Spouse	\$114.20	\$611.66
Employee + Child(ren)	\$91.36	\$516.42
Employee + Family	\$172.96	\$856.87
\$1,850 Deductible Plan		
Employee Only	\$22.65	\$288.72
Employee + Spouse	\$47.80	\$611.66
Employee + Child(ren)	\$40.43	\$516.42
Employee + Family	\$66.75	\$856.87
\$3,200 Deductible Plan		
Employee Only	\$2.87	\$288.72
Employee + Spouse	\$5.00	\$611.66
Employee + Child(ren)	\$4.75	\$516.42
Employee + Family	\$5.72	\$856.87

Kaiser Hawaii

Medical	Employee Premium Per-Pay-Period (24 Pay Periods)	Company Premium Per-Pay-Period (24 Pay Periods)
Employee Only	\$9.50	\$308.38
Employee + Spouse	\$71.78	\$611.66
Employee + Child(ren)	\$55.77	\$516.42
Employee + Family	\$112.67	\$856.87

