

KAISER HEALTHCARD FAMILY RATES

Plan <u>EXCLUDES</u> Major Hospitals	HEALTH 600	HEALTH 800
Benefit LIMIT	65,000.00	75,000.00
ROOM & BOARD	600.00	800.00

	Membership fee	Annual	Annual
PRINCIPAL & 1 DEPENDENT	300.00	21,435.00	23,579.00
PRINCIPAL & 2 DEPENDENTS	300.00	30,597.00	33,421.00
PRINCIPAL & 3 DEPENDENTS	300.00	39,754.00	42,871.00
PRINCIPAL & 4 DEPENDENTS	300.00	49,009.00	52,419.00
PRINCIPAL & 5 DEPENDENTS	300.00	58,812.00	62,905.00
PRINCIPAL & 6 DEPENDENTS	300.00	68,615.00	73,388.00
PRINCIPAL & 7 DEPENDENTS	300.00	78,416.00	83,873.00
PRINCIPAL & 8 DEPENDENTS	300.00	88,218.00	94,356.00
PRINCIPAL & 9 DEPENDENTS	300.00	98,019.00	104,840.00

Plan <u>INCLUDES</u> Major Hospitals	HEALTH 1200	HEALTH 1600
Benefit LIMIT	90,000.00	115,000.00
ROOM & BOARD	1,200.00	1,600.00

	Membership fee	Annual	Annual
PRINCIPAL & 1 DEPENDENT	500.00	32,154.00	38,196.00
PRINCIPAL & 2 DEPENDENTS	500.00	45,796.00	54,758.00
PRINCIPAL & 3 DEPENDENTS	500.00	60,996.00	71,226.00
PRINCIPAL & 4 DEPENDENTS	500.00	75,318.00	88,182.00
PRINCIPAL & 5 DEPENDENTS	500.00	90,383.00	105,818.00
PRINCIPAL & 6 DEPENDENTS	500.00	105,444.00	123,453.00
PRINCIPAL & 7 DEPENDENTS	500.00	120,507.00	141,089.00
PRINCIPAL & 8 DEPENDENTS	500.00	135,571.00	158,726.00
PRINCIPAL & 9 DEPENDENTS	500.00	150,634.00	176,361.00

Effective rates as of 08.15.2019. The company reserves the exclusive right to change, update and revise prices at any given time.

KAISER HEALTHCARD CORPORATE RATES (100 TO 299 MEMBERS)

MAJOR HOSPITALS

MMC Makati Medical Center **SLMC** Saint Luke Medical Center
TMC The Medical City **CSMC** Cardinal Santos Medical Center
AHMC Asian Hospital Medical Center

Plan <u>INCLUDES</u> Major Hospitals	Member ship fee	Monthly	Quarterly	Semi-Annual	Annual	Benefits
Ward up to H- 1600	500.00	1,232.00	3,361.00	6,111.00	11,109.00	85,000.00
Semi- private up to H-2800	500.00	1,686.00	4,598.00	8,360.00	15,200.00	115,000.00
Small private up to H-3200	500.00	2,140.00	5,837.00	10,612.00	19,293.00	125,000.00
Large private up to H-4200	500.00	3,026.00	8,252.00	15,005.00	27,282.00	165,000.00

KAISER HEALTHCARD GROUP RATES (50-99 MEMBERS)

Plan <u>EXCLUDES</u> Major Hospitals	Member ship fee	Monthly	Quarterly	Semi-Annual	Annual	Benefits
Ward up to H-500	300.00	735.00	2,005.00	3,644.00	6,628.00	65,000.00
Semi- private up to H-800	300.00	822.00	2,240.00	4,072.00	7,405.00	75,000.00
Small private up to H-1200	500.00	993.00	2,712.00	4,930.00	8,965.00	85,000.00
Large private up to H-1900	500.00	1,491.00	4,068.00	7,395.00	13,445.00	95,000.00
Small SUITE up to H-2600	500.00	1,772.00	4,833.00	8,789.00	15,978.00	105,000.00

KAISER HEALTHCARD MINI-GROUPS (10-49 MEMBERS)

Plan <u>EXCLUDES</u> Major hospitals	Membership fee	Semi-Annual	Annual	Benefits
Ward up to H-500	300.00	4,287.00	7,795.00	65,000.00
Semi- private up to H-800	300.00	4,716.00	8,575.00	75,000.00
Small private up to H-1200	500.00	5,680.00	10,329.00	85,000.00
Large private up to H-1900	500.00	8,735.00	15,784.00	95,000.00
Small SUITE up to H-2600	500.00	10,182.00	18,513.00	105,000.00

Plan <u>INCLUDES</u> Major Hospitals	Member ship fee	Monthly	Quarterly	Semi-Annual	Annual	Benefits
Ward up to H- 1600	500.00	1,318.00	3,596.00	6,537.00	11,887.00	85,000.00
Semi- private up to H-2800	500.00	1,837.00	5,011.00	9,110.00	16,565.00	115,000.00
Small private up to H-3200	500.00	2,334.00	6,366.00	11,575.00	21,045.00	125,000.00
Large private up to H-4200	500.00	3,287.00	8,960.00	16,291.00	29,621.00	165,000.00

Plan <u>INCLUDES</u> Major Hospitals	Membership fee	Semi-Annual	Annual	Benefits
Ward up to H- 1600	500.00	7,715.00	14,029.00	85,000.00
Semi- private up to H-2800	500.00	10,611.00	19,293.00	115,000.00
Small private up to H-3200	500.00	13,505.00	24,554.00	125,000.00
Large private up to H-4200	500.00	19,077.00	34,686.00	165,000.00

KAISER HEALTHCARD CORPORATE RATES (100 to 299 MEMBERS)

Plan <u>EXCLUDES</u> Major Hospitals	Member ship fee	Monthly	Quarterly	Semi-Annual	Annual	Benefits
Ward up to H- 500	300.00	670.00	1,827.00	3,322.00	6,041.00	65,000.00
Semi- private up to H-800	300.00	757.00	2,064.00	3,752.00	6,822.00	75,000.00
Small private up to H-1200	500.00	908.00	2,475.00	4,501.00	8,184.00	85,000.00
Large private up to H-1900	500.00	1,362.00	3,671.00	6,755.00	12,282.00	95,000.00
Small SUITE up to H-2600	500.00	1,621.00	4,421.00	8,039.00	14,616.00	105,000.00

KAISER HEALTHCARD INDIVIDUAL RATES:

Plan <u>EXCLUDES</u> Major Hospitals	Membership fee	Annual	Benefits
Ward up to H- 500	300.00	11,108.00	55,000.00
Semi- private up to H-800	300.00	12,279.00	65,000.00
Small private up to H-1200	500.00	14,810.00	75,000.00
Large private up to H-1900	500.00	22,411.00	85,000.00
Small SUITE up to H-2600	500.00	26,502.00	95,000.00

Plan <u>INCLUDES</u> Major Hospitals	Membership fee	Annual	Benefits
Ward up to H-1600	500.00	20,073.00	75,000.00
Semi- private up to H-2800	500.00	27,672.00	105,000.00
Small private up to H-3200	500.00	35,077.00	115,000.00
Large private up to H-4200	500.00	49,499.00	155,000.00
Large private up to H-4200	500.00	65,999.00	205,000.00