

Eric Hagedstedt:

Good morning everybody. Welcome to our 2026 Small Group and Individual Broker Producer update. I'm Eric Hagedstedt, the senior director for small group and individual plans for Kaiser Permanente Northwest. I want to share our appreciation for you attending and being great partners alongside of us. At Kaiser Permanente we lead with care. You might ask yourself what that means. It's truly a statement about what makes us different from traditional insurers. It speaks to our purpose in the industry and reinforces our ability to integrate and create high quality effective care. It's also a promise to employers and partners like you who are deeply invested in the health of our communities we serve. Now I have a few housekeeping items to go over for today's presentation. Your mics have been disabled. Please submit any questions using the Q&A feature and we'll do our best to get all those questions answered.

We will be sending out a recording of the presentation and the materials to you after. Lastly, we have a short survey at the end of the presentation and your feedback helps us improve how we bring information to you. I want to take a minute to introduce those that you're going to be interacting with today. First, helping with the Q&A, we have Kristen Cook, the director of Small Group Account Management, and go to market execution. Next we have Matthew Woodburn, manager of Small Group new sales. Presenting the new sales portion and updates is Matty Teyema and he's a sales executive. We also have Crystal Fitzsimonds, the senior account manager and Melissa Hand with the Kaiser Permanente Individual and Family Plans as a territory manager for Northwest and Washington.

Today we're going to cover on the agenda the quality and access, updates and reminders. And then we're going to move into the 2026 medical and dental plan overview for small group and individual. And then we're going to cover what's new with renewals. And lastly, rates for 2026 and commission updates. Now I'm going to hand it over to Matty to start the presentation.

Matty Teyema:

Eric. Good morning everyone. On behalf of my colleagues in the small group department, I wanted to thank you for joining us today. I know it's a busy season for many of you and we really appreciate you taking the time to be with us as we go over updates for the upcoming year. For those of you whom I have not met, like Eric said, my name is Matty Teyema and I am a senior sales executive here in the northwest region of Kaiser Permanente, and I'll be getting us started this morning. So first I wanted to call out who we are at Kaiser Permanente on a national scale. We have 12.7 million total Kaiser members nationwide. Overall, we operate in eight states and in Washington DC. That basically means we're relevant to more than a quarter of the country and we are the largest health insurance company on the West coast. We are made up of hospitals, medical groups, and health plans providing integrated care and coverage to many across the United States.

So here specifically in our northwest region, we have 612,000 medical members and 285,000 dental members. We have two of our own hospitals, both who have won many awards for their outstanding care they deliver on a day-to-day basis. In addition, there are 31 medical and 20 dental offices located throughout our region to meet our members' needs. And then I thought a fun little fact that I throw in is that there are almost 12,000 of us Kaiser Permanente employees here in the Northwest region alone. Additionally, I wanted to call out that Kaiser Foundation Health Plan has tied for the highest rated commercial plans in Oregon and Southwest Washington and is the highest rated Medicare health plan according to the latest from the National Committee for Quality Assurance ratings.

Here's an exciting construction update at our Sunnyside Medical Center. We will be building a new seven-story 615,000 square foot hospital tower at our Sunnyside Medical Center campus with site clearance work kicking off later this year and construction of the new facility set to begin in early 2026. So the current hospital building will remain in use until the new hospital tower is built and then open on

the east side of the campus ensuring a smooth transition for patient care. Then once the new hospital tower is open, the older tower will be basically coming down and then replaced with additional parking, which we all know more parking is great, walkways and outdoor spaces.

So now I wanted to take an opportunity to speak to our Lane County footprint for just a minute and then also share some exciting news about the investments Kaiser Permanente is making to provide more choice, better access, and dedicated member support to our members in this area. So our Chase Gardens medical office is located in Eugene and it advances our mission to improve the health of the Lane County community. As you may be aware, care in Lane County is a bit different than in other parts of our service area. And with that said, Kaiser Permanente has been making targeted investments to improve both care and access for our members. We've recently brought on yet another provider to our Chase Gardens Medical Clinic and recently we expanded our access with providers at Peace Health, Orchid Health and Eugene Pediatric Associates among many other providers.

So then just a quick important reminder is that Kaiser Permanente's in Lane County can see any Peace Health provider on an in-network basis for primary care services. And then for dental care needs, we've added new operatories at our Valley River Dental office and even added support staff to expand appointment availability.

So no matter where work or life takes our members, Kaiser Permanente has them covered. If something unexpected happens while members are traveling, it's easier than ever for them to get care. So members can visit a Cigna Healthcare PPO network provider for urgent or emergency care outside of Kaiser Permanente states without having to pay on-site. They also have access to 24/7 virtual care across the United States. Then I thought I'd share a little personal story about how amazing the service is and how it really benefited myself. So last summer I was in Central Oregon running a relay race with 11 of my very dear friends, and on day two of three of the race, I woke up with a terrible eye infection. So what I did is I completed an e-visit online and even took pictures of my eye and submitted all of that online via the e-visit.

And literally within 15 minutes I had an email from one of our own doctors that said, yes, I do have an eye infection. And he sent over a prescription for an antibiotic eye drop to a local pharmacy in Bend. All of this was done literally within 30 minutes. It did not require me to come in and see a provider and it didn't even require me to speak to someone over the phone. So just a really amazing service that can save our members so much time when they're really away from home and needing services. And then additionally, members can call our Away From Home Travel Line for assistance. They can always call our 24/7 nurse advice line and then also use the Kaiser Permanente app to get answers to our most common questions. And then for more information about care while traveling, folks can always go to our website, which would be kp.org/travel.

All right then as a sales executive, I really wanted to call out this slide simply to the fact it spells out our resources for ensuring new members that are set up for the best success possible. So first off, we offer enrollment packets to all new members and new groups coming on board with us. Please contact your sales executive for enrollment packets when you have a group coming on board with us. Also, sales executives like myself, we are always more than willing to accompany you to new group enrollment meetings whenever you'd like. I personally feel like having a sales exec at an enrollment meeting really helps set the group up and its employees for success with our transition to Kaiser Permanente. We also have an amazing team of dedicated reps at our membership services call center who work solely with new members and they are a part of basically the new member welcome desk.

They're available to any new member and any related questions they may have. And the key specific phone numbers are listed on the slide. I'm not going to read them off, but they are listed there in the middle of the slide. And then also the web address is kp.org/new-member. Then lastly, there are many

steps in place to ensure a smooth transition of care. Our goal here really is to help determine if there are any unique needs to connect new members with their doctors, any specialists, and then specifically prescription medications they need to effectively manage their care transition. Every onboarding process is approached uniquely and every visit gets coordinated efficiently among doctors, lab personnel, specialists, and other medical staff.

And here's another fun fact is that 27% of our primary care services and visits happen virtually here at Kaiser Permanente, and outside of Kaiser Permanente, telehealth accounts for only about 5% of all primary care visits. What this means is that we're able to allow our members to have access to the care where and how they'd like. When we leverage virtual and in-person care, the member can achieve a better health outcome than when they are limited to only being able to access care in one method. At Kaiser Permanente, we make accessing care simple with our integrated medical record, which allows us to provide a seamless care experience whether or not the member is receiving care in person or virtually. Kp.org and the Kaiser Permanente mobile app allows our members to stay connected to their care team and informed about their personal care journey. Their health information goes to the same place whether they get care in person or virtually.

All right, and when we look at prescriptions, we at Kaiser know that fragmented care can lead to delays, non-adherence, and higher costs on drugs. A carved out prescription plan basically interrupts coordinated care by increasing risks like delayed treatments and non-adherence without visibility into whether prescriptions are filled or refilled. And physicians really face blind spots that could lead to gaps in care and higher costs. Outside of Kaiser Permanente, disconnected pharmacy services create unnecessary complications for patients, often delaying, often causing delays, and oftentimes a lot of frustration. But at Kaiser Permanente, collaboration between pharmacists and doctors promotes effective adjustments based on patient outcomes. By keeping care integrated, you avoid the inefficiencies of fragmented pharmacy services, and this means fewer delays, better adherence, and lower overall costs, all supporting healthier, more productive members. Kaiser Permanente's connected model helps ensure your groups get the care they need when they need it, and that translates to healthier outcomes and savings for all of our members.

So transitioning to look at healthcare as a whole, we know that not all healthcare is created equal. As businesses and healthcare organizations face ongoing challenges, choosing the right health plan is more essential than ever. Our industry-leading value-based care models offers effective, sustainable solutions to your most pressing workforce health concerns and delivers high quality, affordable, and accessible care to all of our members. Our unique model brings care and coverage together in a way that really empowers our doctors to be doctors and to do simply what's best for their patient. This means they get to proactively engage with every member in their care sooner and potentially to prevent illnesses in ways that traditional insurers or providers simply cannot, solving for cost, quality and sustainability. Our providers get to focus on helping their patients simply get well quickly and efficiently instead of jumping through the hoops of prior authorizations and benefit levels. We really provide a convenient access to care often in one place under one roof, whether that's in person, sometimes virtually for a simple experience that saves people time and leads to better engagements with their health.

So we're all pretty aware that there are really two standard styles of care. First, the typical fee for service, and second, and integrated care delivery system like ours at Kaiser Permanente. But the difference between the two are drastically different and can really impact the quality of care received for patients accessing care under those models. In the traditional fee-for-service world, disconnected healthcare provides less value. When clinicians have limited connections to other providers, they have restricted information about the full range of their patient's medical diagnoses, tests, and treatments from other clinicians or hospitals. Additionally, a typical fee-for-service approach also leads to a focus on quantity of services rather than on high-quality care.

Now let's contrast that with Kaiser Permanente and our experience. In our integrated care delivery system, we bring high-quality care and coverage together in a single physical and digital ecosystem to simply better deliver what matters most. Improved health, better clinical outcomes, more value, and consistent service. When everyone's connected, care is better and far more cost-effective.

So our primary care physicians are part of an exclusive network of clinicians who deliver the highest level of care to our members and that they deserve. They are deeply invested in the long-term health of their patients and only provide care to Kaiser Permanente members. Our primary care physicians work with specialists and teams across the region to provide access in the most effective way possible. Our PCPs can connect members to specialty care directly with no prior authorization required. There is a real-time collaboration going on with specialists which brings more experience and skill into the room to accelerate care and improve outcomes. And our physicians truly strive for quality rather than chasing volume, working in a system built on shared values and aligned incentives where clinical excellence can really flourish. Their goal is simple, to improve the health of our members. They're supported in doing this through our connected system, which really enables us to quickly develop, share, standardize, and scale best practices that improve care delivery, leveraging our physicians and clinicians' expertise to consistently raise the bar for medical excellence.

And I wanted to call out this slide because I really feel like the information on here is quite telling. In our communities, Kaiser Permanente members are 20% less likely to lose years of life due to a cancer diagnosis and 33% less likely to lose years of life due to heart disease. This really all encompasses Kaiser Permanente's core mission, that's simply to provide high quality, affordable healthcare services and to improve the health of members and the communities we serve. Next slide please.

So the goal of the services... One more slide please. The goal of the services on this slide is to improve the health of our members, to elevate care experiences, to continue to build trust and create culturally responsive care. Some of the ways in which we do this are listed on the slide and I'd like to call out special attention specifically to our Center for Black Health and Wellness, which literally just opened up this year in 2025.

The Center for Black Health and Wellness is located at our East Interstate building and is the very first of its kind within any other Kaiser region. It's led by a team of amazing clinicians with experience in providing exceptional, culturally competent care to Black patients and their families. These providers are truly passionate about improving the health of their members and elevate their care experience. The team will develop and share best practices across our organization and also the healthcare community, which may very well lead to other regions following in our footsteps. Additionally, aside from the Center for Black Health and Wellness, we also have other specialties. One of those would be our Gender Pathways Clinic, which provides consultations in a safe, compassionate environment with the knowledge to help members move towards their true authentic life. So Gender Pathways Clinic, some of the services include basic information and referrals, education and preparation for transition related care, and of course medical, surgical and other gender affirming services.

We also have Salud en Espanol. That truly just comes down to the fact that good communication is important for our members to their overall health and well-being. That's why we have several different locations where members can get care from Spanish speaking providers, including doctors, nurses, and many support staff. We also have interpreter services, which there is no cost to our members to utilize. These services are available 24 hours a day, seven days a week. It's all provided by video, by phone, or in person by a medical interpreter. And it's available for many, many, many different languages. And then lastly, there is the HIV Prevention and Care Clinic, which is formerly known as the Immune Deficiency Clinic. This also is located on the Interstate campus. There is no referral needed for this specific clinic and it's basically for HIV prevention, for testing, for treatment and resources.

All right. And then through primary care services, we have collaborative care and it's an evidence-based care management program aimed at supporting members with moderate depression and anxiety. It allows these patients to effectively be treated in primary care without needing additional specialty mental health services. We believe in supporting members wherever they are on their care journey and reducing the barriers to accessing care. But of course, members can always access the mental health department directly without a referral any day.

Then here's a great program that many folks just simply don't know exists, and that's why we wanted to call it out today. But that is our Kaiser Permanente Community Support Hub and that really brings all of our existing social health programs together, including phone support, community referrals, proactive outreach to all of our members in government programs. This program is leveraging enhanced data and technology to identify members with social needs and link them to vital programs. We truly believe that making sure our members have access to necessary resources today is essential to avoiding costly health problems tomorrow. So some of the resources available with the Kaiser Permanente Community Support Hub are like food and housing assistance, employment services for job seekers, and even for small businesses, legal aid and money management advice, and help paying for childcare, utilities, and then lastly, social and spiritual enrichment opportunities.

All right, and here's an awesome partnership that we wanted to also call out today, and that is with One Pass. I personally, I'm signed up with them simply because of the significant cost savings compared to what I was paying month to month at other gym memberships in the community. There are no long-term contracts and are paid monthly. You can really basically cancel any time and you can even change gym tiers every month if you wanted to. Like I said, you can cancel any time with a 30-day notice and you can browse all of the locations in each tier before deciding to purchase. And you can also add unlimited friends and family at 10% off. The next slide will show you some of the different gyms, but they do vary from region to region. But here are just some examples of some of the partners with One Pass, and as you can see, there are really some great options on here to choose from.

All right. And then another exciting new update that I have to share with you today is that Kaiser Permanente will be launching a rewards program. This will be beginning January 1st of 2026. So the rewards program will include adult commercial, small group and large group members in the Northwest and Washington. So big call out here is that it does not include KPIF, Medicaid, or Medicare members. So this is only for commercial small group and large group members here in the Northwest and also the Washington regions. But this really is Kaiser Permanente's new direct-to-consumer rewards offering and is not employer sponsored program. So this is through Kaiser Permanente these members will be getting.

It is part of our preventative care approach to keep employees engaged in healthy lifestyles. Employees on commercial small and large group plans can earn up to \$150 annually for completing a wide range of easy to earn lifestyle focus, rewardable healthy activities and some of the things including participating in fitness and exercise activities, engaging in self-care and wellness initiatives, making healthy eating choices, completing the total health assessment, receiving a flu vaccine, those kinds of things.

All right, and then just two more slides for me. The first thing that I really wanted to talk about on the next slide is that we are and have been offering, big news, Level Funded plans that officially launched in July of this year. So we are now offering Level Funded plans for groups of five to a hundred employees that are located in Oregon. We've seen this product be extremely successful in other regions and are very, very, very excited to bring it here in the Northwest. We have already done one training when the product launched, but really encourage you to reach out to your sales executive or account manager for more information or if you'd like some additional training, we're absolutely more than happy to do that.

And as a quick reminder, so quotes for new-to-Kaiser business for a Level Funded plan, it can now be submitted on Wired Quote, that comes straight to us, or you can just simply send the request to your assigned sales executive. And then for existing Kaiser groups who are then interested in possibly moving over to a Level Funded plan, you can reach out to your assigned account manager and they can assist you with that.

All right, and then lastly, I'm just going to talk about something that we've had for a few years, but it's always worth mentioning and that is our KP Plus plans. So I really just feel like this is such a great option for new groups when they're moving over to us at Kaiser from another carrier. KP Plus, it was launched in January of 2023 here in the Northwest at least, and it's really designed to be a hybrid product between our more traditional products like a zero deductible, deductible HSA plan, whatever it may be. Then also our Added Choice Three Tier POS product. So these plans were basically designed to bridge the gap for customers that may not be as familiar with Kaiser's model and want to have the option to access our high quality system, but also in addition to having the flexibility to see out of network providers on a limited basis. And that's it for myself. Thanks so much.

Crystal Fitzsimonds:

Thanks Matty. As Matty and Eric both mentioned, my name is Crystal Fitzsimonds. I'm a senior account manager here at Kaiser Permanente Northwest. So let's just go ahead and dive into different plan changes with the next slide.

So for 2026, we have two significant changes to the Oregon small group portfolio. First, we have added a pediatric dental coverage to all of our non-Standard plans. The Standard plans will continue to exclude pediatric dental coverage and groups have the option to purchase a family dental plan. I'll go over more details shortly as to what may be needed to be addressed with your clients. Secondly, we have added a gold level HSA eligible high deductible health plan with an \$1,800 deductible. Our new high deductible health plan uses the aggregate accumulation for the deductible and then embedded accumulation for the out-of-pocket maximum. The 2026 AV calculator increased the plan's AVs this year by approximately 1%, increases to cost sharing and out-of-pocket maximums were required in platinum, gold and silver tiers to get them back into the desired AV ranges. For those of you who do maintain spreadsheets, please be sure to update the plan names and cost share changes. Full cost share changes can be found in our 2026 plan updates document, which should be available on business.kp.org soon. So moving to the next slide.

Here is a view of our Oregon Medical portfolio. As you can see, we offer a wide variety of different plans from traditional plans with and without deductibles, HSA qualified plans, KP Plus, and our Added Choice Point of Service plans. Lastly, we also do have plans available to employees who live and work outside of our service area. For those plans, please refer to our rating and underwriting assumptions for 2026 to see if your clients meet those qualifications to enroll. We have multiple plan options to offer choice and flexibility. All of our plans, except the Standard plans, are available with two buy-up options, the first being embedded adult vision and hardware, and the second being an embedded adult vision exam, hardware, and massage. Lastly, as a reminder, for groups that wish to claim the small employer tax credit, they must select a plan that does not include the buy-up coverage and is not an Added Choice or KP Plus product. Next page please.

For 2026, pediatric dental standalone plans are being discontinued and now will be built into our Oregon non-standard medical plans. So it's very similar to Washington. The built-in coverage will not be subject to the plan's medical deductible with the exception of our HSA plans which will be subject to that annual deductible. Cost shares will be applied to the out-of-pocket maximum, and as you can see, preventative will be continued to be covered at a \$0 cost share while basic and major will be 50% coinsurance. So

these plans will still allow our pediatric dental members to continue seeking dental services from Kaiser Permanente dental facilities as well as more than over 200,000 participating providers in our Dental Choice PPO network. And I'll discuss how to handle these changes in coming slides. Next page please.

For Washington, same as in Oregon, we have added a gold level HSA high deductible health plan with an \$1,800 deductible. This new plan also has the aggregate accumulation for deductible and an embedded accumulation for the out-of-pocket maximum. In addition, Washington selected a new Benchmark plan for 2026, which will add coverage for new essential health benefits. So hearing aids and artificial insemination will now be covered as an essential health benefit. The 2026 AV calculator increased the plan's AVs by again another approximately 1%. Increases to cost sharing and out-of-pocket maximums were required in platinum, gold, and silver metal tiers to get those back into the desired AV ranges.

So here is our Washington portfolio for Clark and Cowlitz counties. We try to keep Washington as similar as possible to the Oregon plans. However, regulatory changes over the past few years have resulted in some small differences between Washington and Oregon portfolios. Same as in Oregon, we offer many different types of plans, including the out-of-area plans, which are subject to qualification outlined in the rating and underwriting assumptions. All Washington plans are available with a buy-up option of embedded adult vision exam with \$250 hardware allowance. So now switching gears, let's move on to the dental changes and updates on the next slide.

So as many of you are aware, Kaiser Permanente Dental is very unique to the Northwest as we have our own dental facilities providing that truly integrated care experience. So we offer not just traditional dental plans, but we also offer PPO dental plans that provide more flexibility to our members. We offer dental coverage to employer groups in Oregon and Washington that have at least two members. We have plans that range from a thousand up to \$3,000 benefit maximums with different deductibles, and we also have plans available with orthodontia and/or implants. We also offer voluntary dental plans in both traditional and choice designs. These plans can be offered to groups with the greater of five subscribers or 25% enrollment. Groups are able to offer a base and a buy-up option with an opportunity to select either traditional and a PPO product. Our dental plans cover preventative services which do not reduce the annual benefit maximum and there are no waiting periods even for major or orthodontia services.

Medical and dental integration really plays a vital role in improving overall health outcomes as dentists are uniquely positioned to help close those medical care gaps, especially since most members visit their dentists more consistently than they do their primary care providers. There's a link at the top of this page that will take you to business.kp.org where you can find the full dental portfolio as well as our individual summary of benefits for each of our plans. And you can also learn more about our dental program by visiting kp.org/dental/nw.

So we also wanted to touch on our dental access updates. So 60% of our members are seen within 10 business days of their due date compared to 54% same time last year. Beginning February of 2025, Kaiser Permanente Dental opened more than 22,000 more dental hygiene appointments and we recently updated our transfer policy, which will now allow all of our members to make hygiene appointments for cleanings, cleanings and exams, periodontal therapy and sealants at any location with any available provider to really provide that timely access to care at times and locations that work best for our members. We're increasing the availability of 40 minute hygiene appointments for members with low to moderate risk who have been seen within the last two years. This targeted expansion really supports timely preventative care while maximizing appointment availability. To improve access and planning flexibility, we are also extending the scheduling window for routine recall visits and periodontal treatment appointments from 12 weeks to 18 weeks. So this change really allows our members to book

further in advance and help reduce appointment bottlenecks. So next we'll go over our integrated care model.

So members with both medical and dental coverage typically weigh less, smoke less, and have fewer hospital and emergency visits. Our medical and dental teams collaborate to keep members healthy and productive in reducing overall costs. Our physicians and dentists can access members' electronic health records providing a complete view of their health. So dentists can see prescription history, health conditions, and preventative screening reminders, really ensuring that coordinated high-quality care. And members receive consistent coordinated dental care. Doctors can prioritize the right care over more care and dentists can help identify health issues like high blood pressure and connect with their doctors as patients, again, often visit dentists more frequently than they do their primary care physicians. So medical-dental integration has a big impact. By October of last year, our dental offices had given over 1,700 flu vaccines, over 700 COVID vaccines, more than 1,400 tobacco counseling sessions, over 10,000 nurse visits by our LPNs in our dental offices and closed over 12,000 care gaps. So our medical integration simplifies members' care by providing that consistent, coordinated high-quality services.

So we have made dental care easy with scheduling tickets that are initiated by existing member treatment plans, making most dental appointments available online and through the mobile app. This includes hygiene, general dentistry, endodontic, pediatric, and orthodontic services. Our tele-dentistry is available at no cost where members can seek service or advice by phone, email, or through their kp.org account. Virtual dentistry received over 7,300 calls just this last year alone and made almost 4,500 outbound calls and received more than 2,300 messages through kp.org alone. So as we move to the next slide, I'll talk more about our Choice Dental PPO offering.

So our PPO dental plans, which we refer to as Choice Dental, includes not just Kaiser Permanente dental facilities, but four additional major network partners, Dentemax, GEHA Connection Dental Network, Careington and Maverest Dental Network. With the greater number of providers in our PPO Dental network across our service area, we deliver a superior level of access and convenience really setting us apart from other carriers. Now let's move on to what's changing with our next slide.

So moving into what's changing with our dental in 2026, as mentioned earlier, pediatric dental will now be baked into all of our non-standard medical plans. Our dental plans will now cover composite fillings on posterior teeth. Prior authorizations will be shifting from anything over \$500 to just a set list of procedural codes that can be found on kp.org. There'll be three plans that will replace our pediatric only plans on the Oregon shop eligibility list. Pediatric out-of-pocket is increasing on family plans from \$425 to 450 for members that are under the age of 19, and we will be discontinuing all of the pediatric-only dental plans. As a reminder, we do also offer voluntary dental plans available on both our traditional and Choice PPO dental products. So now let's move into our pediatric dental slide.

So I wanted to share with you how implementation of the pediatric dental plan change will work since we are trimming those standalone pediatric plans. If a member is only enrolled on a standalone pediatric dental plan and does not have medical coverage with us, they will lose access to all dental coverage. Action would be required to enroll the member into a family dental plan or a medical plan. So it's also really important to note that the pediatric dental coverage included in the medical plans does not include cosmetic orthodontia. So to maintain this coverage, members must be enrolled in a family dental plan that offers this coverage. If members are currently undergoing treatment, please reach out to your account manager to discuss the transition of needs and how to best proceed. So members that are enrolled on an Oregon Standard plan or not enrolled in a medical plan with Kaiser Permanente may access coverage through Kaiser Permanente Dental or Family dental plans. And just please remember that for dependents to enroll, the subscriber must also enroll.

Pediatric dental members will remain enrolled on the Family dental plans unless a member termination is submitted, and members may also choose to be dual enrolled. So being enrolled in a medical plan as well as a family dental plan and then the coordination of benefits rules would apply. So now for our Washington changes. For Washington Dental, you will notice that we do not have any plans that are being discontinued. We currently have pediatric dental that is built into the plan offerings. Pediatric out-of-pocket maximum is increasing from \$425 to 450 for the 2026 for members that are under the age of 19. Our dental plans will now cover composite fillings on posterior teeth. Prior authorizations will be shifting from anything over \$500 to that set list of procedural codes that can be found on kp.org. And we also offer voluntary dental plans available both our traditional and our Choice PPO. So now let's transition into the new look of our renewal packets with the next slide.

So this year has been very exciting as we started to transition and upgrade our membership system. So as we migrate all of your small groups to our new system, you will see a new renewal packet design as well as additional features on your broker portals at business.kp.org. So now you'll get a sneak peek at some of the great changes that will be made available to you soon on the coming slide.

So we are excited to introduce you to the new self-service feature coming soon on business.kp.org under your existing sign in. From your dashboard, you'll be able to view your upcoming renewals, compare renewal plans and rates, submit your final plan changes via the portal, and generate custom open enrollment and support materials. We expect this to be available by Q2 of next year, and as this does get closer to launching, we will be sending out communications to you along with an instruction video. So now let's move on and take a look at what the new renewal packet looks like.

So as we continue enhancing our systems and processes, making it easier for you to do business with us here at Kaiser Permanente, as part of our system migration, the renewal packet has been redesigned. This began with a small set of September and October of 2025 dental-only renewals. You can expect to see the new format and many of the small group ones starting with the January 2026 renewals. The end result is intended to be an online tool. So many elements will be different than what you're used to seeing. So please do connect with your account manager to walk you through the first few if needed. If your group renewed with Kaiser Permanente Northwest last year, please reference last year's renewal packet for previous renewal census information as the previous year is no longer included in the new design. So only the current enrollment will be shown in the new packets.

With the new format, there are a few changes to the normal process of submitting renewal decisions. For any plan changes. Please utilize the renewal changes form that'll be found on the back of your renewal packets. The group should sign under the relevant section and then you or the group can return the form to the small group respond inbox no later than 15 days prior to the effective date to ensure timely processing. A confirmation will be sent once the changes are fully processed. If your groups are not requesting any changes, there's no need to submit the new renewal changes form, but simply email your account manager and the Small Group team that there's going to be no changes and the group will be renewing as offered. So once the self-service feature is available in your broker portal, there will be a place for you to note that on your renewals that the renewing is offered within your Book of Business once you've finalize the group's renewal. To the next slide, please.

Also new for 2026, member level ages or age rates for all the Southwest Washington plans will be located on business.kp.org instead of within the renewal packet. We will also have a composite rating option available sometime in Q1. For additional support, when these do become available, please contact your small group or small business account management team. So now let's move on to our pricing and commissions.

So with Kaiser Permanente, our pricing strategy has always been aimed at low and sustainable rate increases, which we continue today making it easier than ever to do business with Kaiser Permanente.

So we value your partnership and really aim to offer competitive commissions and bonus programs. In Oregon and Southwest Washington, Kaiser Permanente Northwest filed an average 6.6% rate increase. In Southwest Washington, we filed the lowest rate increase. These have all been filed with the states and are just pending approval. Next slide please.

Our small group dental rate increases really aims to maintain our market position and continue to deliver stable rate increases. So our rates have been filed in Oregon and Washington and we are still awaiting final approval. And Oregon, our HMO and PPO dental offerings have an average increase of 3% with our HMO plans priced 17% below our PPO plans. In Southwest Washington, our HMO average increase was 4.1% and PPO averaged an increase of 3.1%, with our HMO plans being priced 19% below the PPO prices.

So we value your partnership and still aim to offer competitive commissions and bonus programs for all of our broker partners. Our new medical members will remain at \$20 per member per month. Renewing members will remain at \$18 per member per month, and dental will remain at \$3 per member per month. In addition to the growth and retention bonuses that we do offer year-run, we announce additional bonus programs during the year to help add energy and bring focus to new products and growth opportunities. So please connect with your sales executive or your account manager if you'd like to know additional information on current bonus programs that we are running.

So we continue to partner with Quoterain and Wired Quote for obtaining Kaiser Permanente quotes here in the Northwest. Wired Quote is a quoting and enrolling solution for agents in Oregon and Washington, allowing you to compare rates and benefits side by side as well as enrolling groups via Wired Enroll. Quoterain is also a small group quoting and proposal tool for agents in Oregon and Washington. Agents can quote and create custom [inaudible 00:48:06] proposals in their service offers innovative tools that are built right into their website, making it a one-stop spot for summaries, formularies, provider searches, and so much more.

If you would like more information, please feel free to connect with your sales executive or your account manager. We also want to point out that there will be a minor change for new sold groups starting January 1st. For all new groups five and under, we will require copies of quarterly employee wage reports and appropriate employer tax documentation. So please reach out to your sales executive if you have any questions. So this sums up our small group updates for 2026. Are there any questions in the Q&A that we should address before moving on?

Melissa Hand:

You're good.

Crystal Fitzsimonds:

All right, well I would love to hand this off to Melissa Hand, our KPIF extraordinaire, to review all the individual and family changes.

Melissa Hand:

Thank you, Crystal. Hi, everyone. As Crystal mentioned, my name is Melissa Hand. I am the KPIF territory manager for the Northwest and Washington regions. I've worked with many of you in the past and I'm excited to continue partnerships going forward. So let's go ahead and get started with our medical updates for 2026.

So overall, we've made cost share changes to offset the 2026 AV calculator increases. The silver plans were most impacted by these AV calculations. We've added a gold HSA plan for Oregon to provide a

more robust portfolio for each middle tier for employees who either might be offered an ICHRA or for members who might be at risk for losing enhanced subsidies for next year. We are not discontinuing any plans for 2026. Let's go ahead and advance to the next slide to take a look at the grid. Give it.

So this grid showcases our on and off-exchange plans for Oregon. We feature 18 plans on-exchange. That includes nine cost share plans in the silver tier and then 11 plans off-exchange. The bolded plans represent plans that have been modified in order to fit the AV, and those blue plans are those Oregon Standard plans. For additional plan benefit details, you can reference the 2026 KPIF enrollment guide in the coming weeks and that's at business.kp.org.

Moving forward to Washington Medical Plan updates. Same as Oregon and Washington for 2026, we have maintained the current AV ranges and we've made cost share changes to offset the 2026 AV calculator increases. We've also added a gold HSA plan in Washington, and again that's just to provide a more robust portfolio for each metal tier for people who might be offered an ICHRA or who might be at risk of losing their enhanced subsidy going into 2026.

Washington added a second gold Standard plan naming it VitalGold and changed the current Cascade Gold plan to Complete Gold. And then just a reminder, Washington selected a new Benchmark plan for 2026 which will add coverage for new essential health benefits. So those benefits include hearing aids and artificial insemination. So those will be covered as essential health benefits going into 2026. We'll take a look at the grid showcasing some of these outline changes. The next slide.

So our on and off-exchange plan offerings for Washington Plans in Clark and Cowlitz counties are listed here. We feature 15 plans on-exchange, including six cost share reduction plans in the silver tier and then nine off-exchange plans. Again, same as the Oregon grid, the bolded plans represent those that have been modified to fit the AV and the green color plans represent those Cascade Standard plans. An additional reminder, our off-exchange plans in Washington have embedded pediatric dental and for more details on the pediatric dental benefits for each medical plan, you can, there's a slide in the appendix at the end of this presentation for you to look at a later time.

Let's move forward to dental changes. So for 2026, there are no new dental plans and no dental plans that are being discontinued. Composite fillings for posterior teeth will be covered as plans renew in 2026. In Oregon, there will now be a cost share for members 12 and under for nitrous oxide. So this is something that changed last year in Washington and this year it will be affecting Oregon as well.

Go ahead to the next slide and take a look at the grid. So this grid showcases those dental plan offerings. So as you can see, we only offer traditional plans in KPIF, we do not have that PPO option as we do in Small Group. Additionally, PreventaMax is not included in our KPIF dental plans at this time, so I just want to make sure to call that out. And then in order to have individual dental coverage, you must have Kaiser Permanente individual medical coverage as well. So at this time we do not offer standalone dental. Oregon Family Dental plans will continue to be offered on an off-exchange. Again, similar to medical, for additional benefit details, you can reference the KPIF open enrollment guide in coming months. And as always, you can learn more about our dental program at kp.org/dental.

So let's move on to some administrative updates. So open enrollment will last until January 15th again this year in both Oregon and Washington. Just a reminder to obtain January 1st coverage for your members, for your clients, we must receive the completed application no later than December 15th. If your client is applying during an SEP, be sure to please follow all the instructions in the SEP guide and SEP documentation form. More information about that can be found at kp.org/specialenrollment. And then another call out. Renewals are only sent to subscribers. We do not send renewals to brokers at this time. If members would like to sign up for paperless renewals, they can go ahead and visit kp.org/paperlessrenewals to do that.

All right, let's move forward and talk about our Sign Me Up tool. So the Sign Me Up sales tool provides a quick and easy way to enroll your clients into Kaiser Permanente off-exchange plans. In this site, you can start and submit applications electronically, request signatures, and upload any necessary documentation needed to enroll them. You must be appointed with Kaiser Permanente in order to use the SMU site. So to register, you can simply click register in the top right of the screen and select broker register from the drop down. Let's move on to Business.kp.org Overview. So business.kp.org is Kaiser's broker and employer group website. Here you can find access to your broker portal, applications, any forms, plan and product information, tools to support you in selling your KPIF plans, compensation statements and information, and Book of Business information for KPIF applicants and members. So let's go ahead and dive into that a little more on the next slide.

So our broker Book of Business tool helps you to support your KPIF clients by providing real time data. So this is new as of this year. We used to only update this information about once a month, but now it is updated live, which gives you more access to your client's information and therefore you can support them better going forward. So please reference this slide for instructions on how to access your business.kp.org account. Just a side note, the principal agent of the agency must acknowledge the BAA in order to access the Book of Business. So once you have access to the Book of Business, you can search your applicants and members have access to their MRN information, their billing unit ID, and premium billing summaries, and then you can download that information in an easy CSV format, which is also a new feature as of this year.

All right, moving forward to application and plan changes. We highly recommend, I feel like we say this every year, but please submit your applications online if you can, if that's easiest for you. It does allow for quicker processing times and then it just has less room for error when you submit everything online. It doesn't let you leave any information out. If you do prefer to submit paper application, we do recommend faxing that application to the number listed here as this also allows for quicker processing times. All right. Going forward, we'll talk about billing next. So with our individual members being moved to the new Kaiser Permanente membership Connect system in 2024, on-exchange members were moved to a new payment vendor and we're required to change how they made payments. So this slide features ways your clients can make payments that's both for on and off-exchange. So I just encourage you to save this slide in particular to reference as needed as it has changed slightly since we moved to the new site.

So Oregon launched a new program called Oregon Health Plan Bridge in July of 2024. OHP Bridge covers adults between 138 and 200% of the federal poverty level and it's completely free to members. So many marketplace enrollees will move over to OHP Bridge. If any updates are made to marketplace applications like a change in contact information or income, information will be sent to the state to determine eligibility for OHP Bridge and people eligible will no longer be eligible for marketplace based financial help like tax credits. So during renewal, just to call out that if enrollees are not signed up for auto enrollment and they qualify for OHP Bridge, they will automatically be moved over in 2026.

So the Washington Health Benefit Exchange aims to improve health equity for all consumers enrolled through Washington Health Plan Finder. To support this goal, the exchange and carriers are collecting enrollee race and ethnicity data to understand health disparities among our enrollees and inform targeted action to address inequities. So the easiest way for carriers to get this information from enrollees is by completing the race and ethnicity questions in the Health Plan Finder application. If this has not been filled out already, please encourage your clients to complete the race and ethnicity sections in the Health Plan Finder app, and for additional information you can contact Washington Health Plan Finder directly.

All right, let's move on to some legislative updates. Since 2021, as many of you already know, the federal government has been offering enhanced premium tax subsidies or tax credits to make individual and family health insurance more affordable. These enhanced premium tax credits are set to expire December 31st of this year unless extended by Congress. So reduced subsidies will still be available in 2026 for people who qualify. But we do encourage your clients to log into their exchange account and confirm their income and their household details to ensure they're receiving the correct subsidy going into 2026. We also encourage your clients to keep income documentation handy so they can submit it promptly if requested, and ensure they're receiving that correct financial assistance. So we'll provide additional resources and communications as we receive them in the coming weeks. So just please keep an eye out for those updates as we receive them. Let's move on to medical rate updates.

So due to the elimination of silver loading and subsidies changing in 2026, the average rate increase across carriers came in around 10%. Our medical rates in Oregon came in a little higher than the industry averages here at about 12.9% increase. That's across three geographic rating areas, Portland Metro, Salem, and Eugene-Springfield. And then our Washington rates came in at an average increase of about 8.5% for both Clark and Cowlitz counties. So let's go over the dental rates. For Oregon KPIF Family Dental rates, we came in at about a 3.1% increase for 2026 and adult rates in Washington are increasing by an average of 9.3%. Pediatric is increasing by an average of 23%.

All right. Moving on to some commissions information. So there are no changes to commissions for 2026 for medical or dental plans. Our broker compensation program is for all 2026 plan members on and off-exchange, new and existing. So it will be \$20 per member per month for all KPIF members medical and then \$2.50 for all dental members in KPIF. And for more information you can refer to our commission schedule flyer, which is available on business.kp.org. All right. Let's talk about your support team. Go ahead. Next slide.

So our national broker support team is available to support you for things like enrollment status, billing inquiries, commissions questions, and general plan questions. As always, I am here to assist you as well as your partner with any inquiries, trending issues, and I look forward to continuing to partner with each of you in the coming years.

Last but not least, if you are interested in contracting to sell our individual Medicare products or if you're already contracted and have questions, please reach out to Debra Kranyak at her contact information listed here. She is a wealth of knowledge and is wonderful to work with. As a side note, brokers who are currently appointed to sell Kaiser Permanente individual and family plans or commercial group plans are not automatically eligible to sell Medicare products. So please reach out to Debra if you have any questions about this program. Next slide.

So that concludes my portion of the presentation. Thank you all for your time. I will refer back to Eric Hagedstedt to close this out.

Eric Hagedstedt:

All right. Thanks, Melissa. And thanks to Matty and Crystal for also presenting today. So I believe we've answered all the questions that have been put in the Q&A, so thank you for those good questions. And if you do have anything that wasn't answered or would like additional details, please connect with your sales executive or account manager and they can provide you the additional details. Lastly, in closing, we want to say thank you again for your partnership in collaboration as we head into 2026. We presented you a lot of information today, and if you do have additional questions on any of that information that was presented, reach out to our team and please remember to stick around and we have a brief survey that we would like you to fill out. So thank you very much and excited to see everybody in 2026.