

2027 Complete Suite plan pairings

A variety of health plan combinations to best meet the needs of your business

With over 80 plan options, Complete Suite makes it easy to select and compare medical plans. This plan pairing guide provides recommended combinations of HMO plans with POS or PPO plans.¹

Pairing an HMO plan with a POS or PPO plan offers you and your employees flexibility and choice. And by choosing the Complete Suite pairing, you get streamlined benefit administration with the simplicity of dealing with one carrier.

THE COMPLETE SUITE PROVIDES A COMPREHENSIVE SOLUTION

HMO and Deductible HMO plans

POS plans

PPO plans

Kaiser Permanente providers



Kaiser Permanente providers

Participating providers



Participating providers

Nonparticipating providers

Nonparticipating providers

Our HMO plans provide the lowest out-of-pocket costs for your employees.

Our POS plans give your employees the freedom to see:

- Kaiser Permanente plan providers
- PHCS providers in Kaiser Permanente states
- Cigna HealthcareSM. PPO Network providers in all other states²
- Any other licensed provider

Our PPO plans give your employees the flexibility to see:

- PHCS providers in Kaiser Permanente states
- Cigna Healthcare PPO Network providers in all other states²
- Any other licensed provider

For employees who live or work inside a Kaiser Permanente service area.

For employees nationwide.

Ready to connect? Request a quote from your Kaiser Permanente account representative today.

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COMPLETE SUITE PLAN PAIRINGS

Choose from recommended Complete Suite plan combinations to find the best fit for your business. For easier reference, use this guide alongside the full 2027 plan comparison chart.

How to read the chart*

NCAL/SCAL plan ID – OOPM/ Primary care office visit/Generic Rx	NCAL/SCAL plan ID – OOPM/ Primary care office visit/Generic Rx	NCAL/SCAL plan ID – OOPM/ Primary care office visit/Generic Rx
HMO High	POS	PPO
19353/19354 - \$2,000/\$10/\$10	17209/17210 - \$2,000/\$30/\$15	10229/10230 - \$3,000/\$20/\$15
19357/19358 - \$2,000/\$15/\$10	17209/17210 - \$2,000/\$30/\$15	10229/10230 - \$3,000/\$20/\$15
19427/19428 - \$2,000/\$20/\$10	17209/17210 - \$2,000/\$30/\$15	10229/10230 - \$3,000/\$20/\$15
19431/19432 - \$2,000/\$15/\$10	17209/17210 - \$2,000/\$30/\$15	10229/10230 - \$3,000/\$20/\$15
19367/19368 - \$2,000/\$25/\$15	17209/17210 - \$2,000/\$30/\$15	17611/17612 - \$3,000/\$30/\$15
19371/19372 - \$2,000/\$20/\$15	17209/17210 - \$2,000/\$30/\$15	10229/10230 - \$3,000/\$20/\$15
19375/19376 - \$2,000/\$25/\$15	17209/17210 - \$2,000/\$30/\$15	17611/17612 - \$3,000/\$30/\$15
19379/19380 - \$2,000/\$30/\$15	17209/17210 - \$2,000/\$30/\$15	17611/17612 - \$3,000/\$30/\$15
HMO Mid	POS	PPO
19383/19384 - \$3,000/\$20/\$15	17213/17214 - \$3,000/\$30/\$15	10229/10230 - \$3,000/\$20/\$15
19387/19388 - \$3,000/\$30/\$15	17213/17214 - \$3,000/\$30/\$15	17611/17612 - \$3,000/\$30/\$15
19391/19392 - \$3,000/\$20/\$15	17213/17214 - \$3,000/\$30/\$15	10229/10230 - \$3,000/\$20/\$15
19395/19396 - \$3,000/\$25/\$15	17213/17214 - \$3,000/\$30/\$15	17611/17612 - \$3,000/\$30/\$15
19399/19400 - \$3,000/\$30/\$15	17213/17214 - \$3,000/\$30/\$15	17611/17612 - \$3,000/\$30/\$15
HMO Low	POS	PPO
19403/19404 - \$3,500/\$20/\$15	19572/19573 - \$4,000/\$40/\$15	17615/17616 - \$4,000/\$40/\$15
19407/19408 - \$3,500/\$20/\$15	19572/19573 - \$4,000/\$40/\$15	17615/17616 - \$4,000/\$40/\$15
19411/19412 - \$3,500/\$30/\$15	19572/19573 - \$4,000/\$40/\$15	17615/17616 - \$4,000/\$40/\$15
19415/19416 - \$3,500/\$30/\$15	19572/19573 - \$4,000/\$40/\$15	17615/17616 - \$4,000/\$40/\$15
19419/19420 - \$3,500/\$40/\$15	19572/19573 - \$4,000/\$40/\$15	17615/17616 - \$4,000/\$40/\$15
19423/19424 - \$3,500/\$30/\$15	19572/19573 - \$4,000/\$40/\$15	17615/17616 - \$4,000/\$40/\$15
HMO Low Coinsurance	POS	PPO
16072/16703 - \$4,000/\$35/\$15	19572/19573 - \$4,000/\$40/\$15	17615/17616 - \$4,000/\$40/\$15
16033/16035 - \$4,000/\$40/\$15	19572/19573 - \$4,000/\$40/\$15	17615/17616 - \$4,000/\$40/\$15

*Deductible is individual, out-of-pocket maximum (OOPM) is individual, AD means "after deductible," and NTE means "not to exceed."

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COMPLETE SUITE PLAN PAIRINGS

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Deductible HMO HO	POS	PPO
19433/19434 – \$250/\$3,000/\$20/10%/\$10	17845/17846 – \$250/\$3,000/\$20/10%/\$10	10229/10230 – \$500/\$3,000/\$20/20%/\$15
19437/19438 – \$500/\$3,000/\$30/15%/\$15	17847/17848 – \$500/\$3,000/\$30/20%/\$15	17611/17612 – \$1,000/\$3,000/\$30/20%/\$15
19441/19442 – \$750/\$3,000/\$30/20%/\$15	17849/17850 – \$750/\$3,000/\$30/20%/\$15	17611/17612 – \$1,000/\$3,000/\$30/20%/\$15
19445/19446 – \$1,000/\$3,000/\$30/20%/\$15	17851/17852 – \$1,000/\$3,000/\$30/20%/\$15	17611/17612 – \$1,000/\$3,000/\$30/20%/\$15
19449/19450 – \$1,500/\$4,000/\$30/20%/\$15	19587/19588 – \$1,500/\$4,000/\$40/30%/\$15	17619/17620 – \$2,000/\$4,500/\$30/20%/\$15
17678/17679 – \$2,000/\$4,500/\$30/20%/\$10	19591/19592 – \$2,500/\$6,000/\$30/20%/\$15	17619/17620 – \$2,000/\$4,500/\$30/20%/\$15
19453/19454 – \$1,500/\$4,000/\$40/30%/\$15	19587/19588 – \$1,500/\$4,000/\$40/30%/\$15	17615/17616 – \$1,500/\$4,000/\$40/30%/\$15
19457/19458 – \$2,500/\$6,000/\$30/20%/\$15	19591/19592 – \$2,500/\$6,000/\$30/20%/\$15	17623/17624 – \$3,000/\$6,000/\$40/30%/\$15
Deductible HMO XD	POS	PPO
19461/19462 – \$250/\$3,000/\$20/10%/\$10	17845/17846 – \$250/\$3,000/\$20/10%/\$10	10229/10230 – \$500/\$3,000/\$20/20%/\$15
19465/19466 – \$500/\$3,000/\$30/20%/\$15	17847/17848 – \$500/\$3,000/\$30/20%/\$15	17611/17612 – \$1,000/\$3,000/\$30/20%/\$15
19469/19470 – \$750/\$3,000/\$30/20%/\$15	17849/17850 – \$750/\$3,000/\$30/20%/\$15	17611/17612 – \$1,000/\$3,000/\$30/20%/\$15
19473/19474 – \$1,000/\$3,000/\$30/20%/\$15	17851/17852 – \$1,000/\$3,000/\$30/20%/\$15	17611/17612 – \$1,000/\$3,000/\$30/20%/\$15
19477/19478 – \$1,000/\$4,000/\$30/30%/\$15	19575/19576 – \$1,000/\$4,000/\$30/30%/\$15	17615/17616 – \$1,500/\$4,000/\$40/30%/\$15
19481/19482 – \$2,000/\$4,000/\$30/20%/\$15	19595/19596 – \$2,000/\$4,000/\$40/30%/\$15	17619/17620 – \$2,000/\$4,500/\$30/20%/\$15
19485/19486 – \$1,500/\$4,000/\$30/20%/\$15	19587/19588 – \$1,500/\$4,000/\$40/30%/\$15	17619/17620 – \$2,000/\$4,500/\$30/20%/\$15
19489/19490 – \$1,500/\$4,000/\$40/30%/\$15	19587/19588 – \$1,500/\$4,000/\$40/30%/\$15	17615/17616 – \$1,500/\$4,000/\$40/30%/\$15
19493/19494 – \$2,500/\$6,000/\$40/30%/\$15	19599/19600 – \$3,500/\$6,500/\$40/30%/\$15	17623/17624 – \$3,000/\$6,000/\$40/30%/\$15
19497/19498 – \$3,000/\$6,000/\$40/30%/\$15	19599/19600 – \$3,500/\$6,500/\$40/30%/\$15	17623/17624 – \$3,000/\$6,000/\$40/30%/\$15
19501/19502 – \$3,500/\$6,500/\$40/30%/\$15	19599/19600 – \$3,500/\$6,500/\$40/30%/\$15	19581/19582 – \$3,500/\$6,500/\$40/30%/\$15

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Deductible HMO Everyday Care	POS
19536/19537 - \$2,000/\$2,000/\$0/\$0/\$0	19611/19612 - \$6,000/\$6,000/\$30/\$0/\$15
19540/19541 - \$3,000/\$3,000/\$0/\$0/\$0	19611/19612 - \$6,000/\$6,000/\$30/\$0/\$15
19546/19547 - \$4,000/\$4,000/\$0/\$0/\$0	19611/19612 - \$6,000/\$6,000/\$30/\$0/\$15
19551/19552 - \$2,000/\$2,000/\$10/\$0/\$10	19611/19612 - \$6,000/\$6,000/\$30/\$0/\$15
19555/19556 - \$3,000/\$3,000/\$10/\$0/\$10	19611/19612 - \$6,000/\$6,000/\$30/\$0/\$15
19560/19561 - \$4,000/\$4,000/\$10/\$0/\$10	19611/19612 - \$6,000/\$6,000/\$30/\$0/\$15
19564/19565 - \$5,000/\$5,000/\$10/\$0/\$10	19611/19612 - \$6,000/\$6,000/\$30/\$0/\$15
19568/19569 - \$6,000/\$6,000/\$10/\$0/\$10	19611/19612 - \$6,000/\$6,000/\$30/\$0/\$15
Deductible HMO CDO	POS
19505/19506 - \$1,000/\$2,000/\$20 AD/20%/\$15	19603/19604 - \$2,500/\$5,000/\$20 AD/20%/\$15
19509/19510 - \$1,500/\$3,000/\$20 AD/20%/\$15	19603/19604 - \$2,500/\$5,000/\$20 AD/20%/\$15
19513/19514 - \$2,000/\$4,000/\$20 AD/20%/\$10	19603/19604 - \$2,500/\$5,000/\$20 AD/20%/\$15
19517/19518 - \$2,500/\$5,000/\$20 AD/20%/\$15	19603/19604 - \$2,500/\$5,000/\$20 AD/20%/\$15
19521/19522 - \$3,000/\$6,000/30% AD/30%/30% NTE \$50	19607/19608 - \$4,000/\$7,000/30% AD/30%/30% NTE \$50
19525/19526 - \$3,500/\$6,500/30% AD/30%/30% NTE \$50	19607/19608 - \$4,000/\$7,000/30% AD/30%/30% NTE \$50
19529/19530 - \$4,000/\$7,000/30% AD/30%/30% NTE \$50	19607/19608 - \$4,000/\$7,000/30% AD/30%/30% NTE \$50
HSA Qualified HDHP HMO³	POS
TBD/TBD - \$3,500/\$3,500/10% AD/10%/\$10 AD	19615/19616 - \$3,500/\$6,000/\$30 AD/30%/\$15 AD
TBD/TBD - \$3,500/\$3,500/\$20 AD/\$150/\$10 AD	19615/19616 - \$3,500/\$6,000/\$30 AD/30%/\$15 AD
TBD/TBD - \$3,500/\$3,600/\$30 AD/\$150/\$10 AD	19615/19616 - \$3,500/\$6,000/\$30 AD/30%/\$15 AD
TBD/TBD - \$3,500/\$3,500/\$0 AD/\$0/\$0 AD	19615/19616 - \$3,500/\$6,000/\$30 AD/30%/\$15 AD
TBD/TBD - \$3,500/\$4,600/\$30 AD/\$150/\$10 AD	19615/19616 - \$3,500/\$6,000/\$30 AD/30%/\$15 AD
TBD/TBD - \$3,500/\$5,350/\$30 AD/30%/\$15 AD	19615/19616 - \$3,500/\$6,000/\$30 AD/30%/\$15 AD
14670/14671 - \$3,500/\$6,000/\$30 AD/30%/\$15 AD	19615/19616 - \$3,500/\$6,000/\$30 AD/30%/\$15 AD

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13 Complete Suite plans aren't shown as they don't have a recommended paired POS or PPO plan. If you're interested in a Complete Suite plan that is not on this list, please talk to your account representative to find a viable combination.

1. Kaiser Foundation Health Plan, Inc. (KFHP) underwrites the HMO Tier, and Kaiser Permanente Insurance Company (KPIC), a subsidiary of Kaiser Foundation Health Plan, Inc., underwrites the Participating Provider Tier and the Non-Participating Provider Tier of the PPO and POS plans. 2. The Cigna HealthcareSM. PPO Network refers to the health care providers (doctors, hospitals, specialists) contracted as part of the Cigna Healthcare PPO for Shared Administration. Cigna Healthcare is an independent company and not affiliated with Kaiser Foundation Health Plan, Inc., and its subsidiary health plans. Access to the Cigna Healthcare PPO Network is available through Cigna Healthcare's contractual relationship with the Kaiser Permanente health plans. The Cigna Healthcare PPO Network is provided exclusively by or through operating subsidiaries of The Cigna Group, including Cigna Health and Life Insurance Company. The Cigna Healthcare name, logo, and other marks are owned by Cigna Intellectual Property, Inc. 3. Plan designs are subject to change. Once IRS rules for 2027 HDHPs are available, plan designs may need to change to align with HDHP requirements.