| . Forr≃ | 99 | 0 | Return of Organization Exempt From Income Tax | Ok | IB No | 1545-0047 |
|-------------------|-------------|-----------------------------|---|--|-----------|------------------------|
| | | | Under section 501(c), 527 or 4947(a)(1) of the Internal Revenue Code (except black lung | | 20 | 02 |
| | | | benefit trust or private foundation) | | | - |
| Depar | tment of th | e Treasu | ry | · . | _ | o Public |
| | al Revenue | | The organization may have to use a copy of this return to satisfy state reporting requirements calendar year OR tax year period beginning 1/1/2002 2002, and ending 12/31/2002 | <u></u> ' | ins pe | ection |
| A B | | e 200 <i>2</i> applicabl | | umber | | |
| ΓX | Address | | KAISER FOUNDATION HEALTH PLAN OF OHIO 34-0922268 | | | |
| | Name cl | hange | Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number | | | |
| | initial ref | turn | ONE KAISER PLAZA, SUITE 1550L (510) 271-6611 | | | |
| | Final ret | חנט | City or town State or Country ZIP code F Accounting method | Cash | Х | Accrual |
| | Amende | d return | OAKLAND CA 94612 | Other | (specif | 7) |
| | Applicat | on pendi | | _ | | |
| _ | 107.1 | | trusts must attach a completed Schedule A (Form 990 or 990-EZ) H(a) Is this a group return for affiliates? H(b) If "Yes" enter number of affiliates | ш | | X_₩∘ /A |
| _ <u>G</u> | Web s | ite i | /A H(b) if "Yes" enter number of affiliates H(c) Are all affiliates included? N/A | | Yes | No |
| J | Organi | ızatıon 1 | ype (check only one) X 501(c) (3 Xinserting) 4947(a)(1) 527 (if "No" attach a list. See instructions) | | | _ |
| _к | Check | here | If the organization's gross receipts are normally not more than \$25,000. The organization organization organization covered by a group ruling? | | Yes | Х Но |
| | need n | ot file a | return with the IRS but if the organization received a Form 990 Package in the mail it I Enter 4-digit GEN | | | |
| | should | file a re | um without financial data. Some states require a complete return. M. Check if the organization is not requ | ilred to | attach | |
| L | | | s Add lines 6b 8b, 9b, and 10b to line 12 534 903,532 Sch 8 (Form 990 990-EZ, or 990-PF) | | | |
| Par | ti R | | le, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on p | age 1 | 6) | |
| | | | Contributions, gifts, grants, and similar amounts received Direct public support 1a 31,689 | | ĺ | |
| | İ | | ndirect public support 1b | | ĺ | |
| | | | Government contributions (grants) | | ĺ | |
| | | | Total (add lines 1a through 1c) (cash \$ | 1d | | 31 689 |
| | | | Program service revenue including government fees and contracts (from Part VII, line 93) | 2 | 528 | 3 256 179 |
| | | | Membership dues and assessments nterest on savings and temporary cash investments | 3 | - | 615 664 |
| | | | Dividends and interest from securities | 5 | | 1013 004 |
| | - 1 | | Gross rents 6a | | ĺ | |
| | R | Ьį | ess rental expenses 6b | | ĺ | |
| | e | _ c t | let rental hours or loss at the 6b from line 6a) | 6c | <u> </u> | |
| | ٧ | | Other Investment meeme (describe) Groes amount from sales of asses other (A) Securities (B) Other | 7 | — | |
| | e n | | Grosslamount from sales of assets of ther (A) Securities (B) Other | | ĺ | |
| | ü | | ess cost or other basis and sales expenses 8b | | ĺ | |
| | e | c (| Gain or (less) (attach schedule) | | ĺ | |
| | | d t | N∳t gair kof (tōts)t∑∮N fbirte Jirfe 8c, dolumns (A) and (B)) | 8d | | |
| | - 1 | | pecial events and activities (attach schedule) | | ĺ | |
| | 1 | | Gross revenue (not including \$of | | ĺ | |
| | | | ess direct expenses other than fundraising expenses | | ĺ | |
| | | | Net income or (loss) from special events (subtract line 9b from line 9a) | 9c | Ĺ | |
| က္ | | 10a (| Gross sales of inventory, less returns and allowances | | | |
| 異 | | | ess cost of goods sold 10b | | ĺ | |
| 69 | | | Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) | 10c | | |
| 16 2003 | | | Other revenue (from Part VII, line 103) Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) | 12 | 534 | 4 903 532 |
| DEG | | | Program services (from line 44, column (B)) | 13 | | 9,566 742 |
| DE | Ex- | 14 ! | Management and general (from line 44, column (C)) | 14 | _ | 1 293 008 |
| F | en- | 15 1 | Fundraising (from line 44, column (D)) | 15 | | |
| Ω: | ses | | Payments to affiliates (attach schedule) | 16 | | 950 750 |
| ₩_ | | | Fotal expenses (add lines 16 and 44, column (A)) Excess or (deficit) for the year (subtract line 17 from line 12) | 17 18 | | 0 859 750 4 043 782 |
| 3 | Net | | Net assets or fund balances at beginning of year (from line 73, column (A)) | 19 | | 5 216 416 |
| | ssets | | Other changes in net assets or fund balances (attach explanation) SEE STATEMENT LINE 20 | | | 1 947 058) |
| Ø | | | Net assets or fund balances at end of year (combine lines 18, 19, and 20) | 21 | 58 | 3 313 140 |
| For | Paperw | ork Re | duction Act Notice, see the separate instructions | F | orm S | 990 (2002) |

| | KAISER FOUND | OITAC | N HEALTH PLA | N OF OHIO | 34-0922268 | Page |
|--|---------------------------------------|----------|------------------------|-----------------------------------|------------------------------------|---------------------------------|
| | All organizations must co | mpleta o | okumn (A). Cotumns (B) | (C), and (D) are required for sec | tion 501(c)(3) and (4) organizatio | ns |
| | | опехетр | | bonal for others (See Specific II | | |
| Do not include amounts reported on lin | ne | | (A) Total | (B) Program | (C) Management | (D) Fundraising |
| 6b, 8b 9b, 10b or 16 of Part I 22 Grants and allocations SEE S | STATEMENT LINE 22 | | | services | and general | |
| | 1 A 1 CWEIA! (14/C \$2 | 22 | 80,970 | 80 970 | | |
| (cash \$ 80,970 noncash \$ 23 Specific assistance to individuals (attach sci | nedule) | 23 | 00,310 | 00 070 | | |
| 24 Benefits paid to or for members (attach sche | | 24 | = | | | |
| 25 Compensation of officers directors, etc | sadie) | 25 | | | | |
| 26 Other salaries and wages | | 26 | 72,360,974 | 72,360 974 | | |
| 27 Pension plan contributions | | 27 | 3,801,768 | 3,801,768 | | |
| 28 Other employee benefits | | 28 | 14,320,556 | 14,320,556 | | |
| 29 Payroll taxes | | 29 | 6,483,856 | 6,483,856 | | |
| 30 Professional fundraising fees | | 30 | | | | |
| 31 Accounting fees | | 31 | 632,738 | 632,738 | annanuanana, | |
| 32 Legal fees | | 32 | 387,141 | 387,141 | | |
| 33 Supplies | | 33 | 60,254,669 | 60,254,669 | | |
| 34 Telephone | | 34 | 190,493 | 190,493 | | |
| 35 Postage and shipping | | 35 | 1,234,477 | 1,234,477 | | |
| 36 Occupancy | | 36 | 7,373,456 | 7,373,456 | · | |
| 37 Equipment rental and maintenance | | 37 | 2,138,081 | 2,138,081 | | |
| 38 Printing and publications | | 38 | 759 192 | 759,192 | | |
| 39 Travel | | 39 | 740,413 | 740,413 | | |
| 40 Conferences, conventions, and meetings | | 40 | | | | |
| 41 Interest | | 41 | 2,713,523 | 2,713,523 | | |
| 42 Depreciation, depletion, etc | STMT LINE 57 | 42 | 5,846,026 | 5 846,026 | | |
| 43 Other expenses (itemize) a | | 43a | | | | |
| b SEE STATEMENT LINE 43 | | 43b | 351,541,417 | 330,248,409 | 21,293 008 | |
| С | | 43c | | | | |
| d | | 43d | | | | |
| e | | 43e | | | | |
| f | | 43f | | | | |
| 44 Total functional expenses (add lines 22 through | | | | | | |
| Organizations completing columns (B) - (D) car | rry | 44 | E20 050 750 | 509,566,742 | 21,293,008 | |
| these totals to lines 13 15 | | ** | 530,859 750 | 303,300,742 | 21,293,006 | |
| Joint Costs Check If you are follow | - | | | | | |
| Are any joint costs from a combined education campa | _ | g solici | | - | Yes [| X No |
| If "Yes " enter (i) the aggregate amount of these joint | | \$ | N/A | • • • | ed to Program services | |
| (iii) the amount allocated to Management and general | | \$ | N/A | and (iv) the amount al | located to Fundraising \$ | N/A |
| Part III Statement of Program Service A | ccomplishme | nts | | (See Specific Instructions | on page 24) | |
| What is the organization's primary exempt purpose? | | SEE \$ | TATEMENT PART III | | | Program Service |
| All organizations must describe their exempt purpose | achievements in a | clear | and concise mann | er State the number | | Expenses |
| of clients served publications issued etc. Discuss ac | chievements that a | re not | measurable (Sec | tion 501(c)(3) and (4) | | (Required for 501(c)(3) and (4) |
| organizations and 4947(a)(1) nonexempt charitable to | usts must also ente | er the a | amount of grants a | ind | | arge and 4947(a)(1) (nustri but |
| allocations to others) | | | | | | optional for others) |
| a SEE STATEMENT PART III | | | | | | |
| | | | | | | |
| | | | /C | -t | 80,970 | E00 E00 741 |
| | · · · · · · · · · · · · · · · · · · · | | (Grants and alloc | ations \$ | - 60,970 | 509,566,742 |
| b | | | | | 1 | |
| | | | | | | |
| | | | (Grants and alloc | ations \$ | | |
| С | | | (Oranio and disco | 4 | | |
| • | | | | • | | |
| | | | | | j | |
| | | | (Grants and alloc | ations \$ | | |
| d | | | | | | |
| | | | | | 1 | |
| _ | | | | | | |
| - | | | (Grants and alloc | ations \$ | 1 | |

(Grants and allocations \$

509,566,742 Form 990 (2002)

e Other program services (attach schedule) (Grants and a formal of Total of Program Service Expenses (should equal line 44 column (B) Program services)

| Part | :IV | Balance Sheets | (See Specific Instruction | ns on page 24) | | | | | |
|-----------|--------|---|---------------------------------------|---------------------|-------------|---|-------------------|-----------|-------------|
| Note | ; | Where required, attached s | chedules and amounts | within the descript | tion | | (A) | | (B) |
| <u>.</u> | | column should be for end-c | of-year amounts only | | | | Beginning of year | | End of year |
| | | | Assets | | | | | | |
| | | - non-interest-bearing | | | | | 3,256,430 | 45 | 918,493 |
| 46 | Savin | ngs and temporary cash inve | stments | | | | | 46 | |
| 47. | A | ta | | | 147.1 | 450 000 507 | | | |
| | | unts receivable allowance for doubtful acco | sunte | | 47a 47b | 152,382,527 2,071,390 | 145,604,470 | 47c | 150 211 127 |
| D | LCSS | allowance for doubtful acco | Julius | | man 2 | international international contraction | 143,004,470 | | 150,311,137 |
| 4Ra | Pledo | ges receivable | | | 48a | | | | |
| | | allowance for doubtful acco | ounts | | 48b | | | 48c | |
| | | ts receivable | | | 11 | | | 49 | |
| | | evables from officers, direct | ors, trustees, and key er | nployees | | | | | |
| | | ch schedule) | | | | | | 50 | |
| 51a | Other | r notes and loans receivable | (attach schedule) | | 51a | | _ | | |
| b | Less | allowance for doubtful acco | ounts | | 51b | | | 51c | |
| | | tones for sale or use | | | | | 6,517,426 | 52 | 6,769,630 |
| | | aid expenses and deferred c | | - | | | 166,081 | 53 | 505,972 |
| | | ments - securities (attach schedule | · 1 | Cost | X | FM∨ | 477,140 | 54 | 502,727 |
| 55a | | stments - land, buildings, an | d equipment | | 1 1 | | | | |
| 1 | basis | | /_HL | | 55a | | | | |
| D | | accumulated depreciation | (attach | | | | | | |
| 56 | sched | oule) Itments - other (attach sched | lulo) | | 55b | | | 55c 56 | |
| | | , buildings, and equipment | · | | 57a | 150,962,615 | | | |
| | | accumulated depreciation | | EE STATEMENT LINE | | 87,977,860 | 63,398,696 | 57c | 62,984,755 |
| | | r assets (describe | SEE STATEMENT L | | S. [312] | 51,077,000 | 4,455,529 | 58 | 8,059,730 |
| | | • | | | | - | | | , |
| 59 | Total | assets (add lines 45 through | | | | | 223,875,772 | 59 | 230,052,444 |
| | _ | | Liabilities | | | | | | |
| | | unts payable and accrued ex | penses | | | | 57,638,394 | 60 | 64,850,636 |
| | | ts payable | | | | | 40.040.007 | 61 | 44.000.740 |
| | | rred revenue s from officers, directors, tru: | ctoos, and kou amployee | • | | | 19,840,697 | 62 | 14,328,748 |
| | | s from officers, directors, true exempt bond liabilities (attach | | 5 | | | | 63 64a | |
| | | gages and other notes payab | · · · · · · · · · · · · · · · · · · · | | | | | 64b | |
| | - | r liabilities (describe | SEE STATEMENT LINE | 65 | | | 80,180,265 | 65 | 92,559,920 |
| | | | | | | • • | 00,100,200 | | 52,000,020 |
| 66 | Total | liabilities (add lines 60 through | gh 65) | | | | 157,659 356 | 66 | 171,739,304 |
| | | N | et Assets or Fund Bala | ınces | • | | • | | |
| Orga | | ions that follow SFAS 117 | | and complete | lines | | | | |
| | | rough 69 and lines 73 and 7 | 74 | | | | | | |
| | | stricted | | | | | | 67 | <u> </u> |
| 68 | - | porarily restricted | | | | | | 68 | |
| 69 | | nanently restricted | | | | | | 69 | |
| Orga | | ions that do not follow SF | AS 117, check here | | X | ind - | | | |
| - | • | olete lines 70 through 74 | | | | | | | _ |
| | | al stock, trust principal, or cu | | | | | 66,216,416 | Ť | 58,313,140 |
| 71 | | In or capital surplus, or land, | | | | | | 71 | |
| 72 73 | | ined earnings, endowment, | | | | | | 72 | |
| 73 | | net assets or fund balances gh 72 column (A) must equ | - | | | | | | |
| | line 2 | | iai mie 15 and colulist (E | i musi equal | | | 66,216,416 | 73 | 58,313,140 |
| 74 | | liabilities and net assets/fund | d balances (add lines 66 : | and 73) | | ŀ | 223,875,772 | | 230,052,444 |
| | | | , | | | | | | |

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes. In Part III, the organization's programs and accomplishments.

| Form 990 | (2002) | KAISER FOUNI | DATIC | N HEALTH PLAN O | F OHIO | 34-0922268 | Page 4 |
|-----------|---|------------------------|----------------|--------------------------|-------------------|--------------------------|--|
| Part IV-A | Reconciliation of Revenue per Audite | d | Part | IV-B Reconciliatio | n of Expenses | per | |
| • | Financial Statements with Revenue p | er | | Audited Fina | ancial Statemen | ts with | |
| | Return (See Specific Instructions page 26) | N/A | | Expenses pe | er Return | | N/A |
| a Total | revenue gains, and other support | | а | Total expense and loss | ses per audited | | |
| per a | udited financial statements | 1 |] | financial statements | | | а |
| b Amo | unts included on line a but | | b | Amounts included on li | ine a but not on | | |
| not o | n line 12, Form 990 | | | line 17, Form 990 | | | |
| (1) Net u | ınrealized gains on | | (1) | Donated services and | | | |
| inves | stments | | | use of facilities | | | |
| (2) Dona | ated services and | | (2) | Prior year adjustments | reported | | |
| use | of facilities | | 1 | on line 20, Form 990 | | | |
| (3) Reco | overies of prior | | (3) | Losses reported on lin | e 20 | | |
| year | grants | | | Form 990 | | | |
| (4) Othe | r (specify) | | (4) | Other (specify) | | | |
| | | | 1 | | | | |
| | | | 1 | | | | |
| Add | amounts on lines (1) thru (4) | | | Add amounts on lines (| (1) thru (4) | | b |
| C Line | a minus line b | ; misinainameniaina | C | Line a minus line b | _ | | C C |
| d Amo | unts included on line 12, | | d | Amounts included on I | | | |
| Form | n 990 but not on line a | | | Form 990 but not on li | | | |
| ` ' | stment expenses not included on | | (1) | Investment expenses | | | |
| | 5b Form 990 | | 1 | included on line 6b. Fo | orm 990 | | |
| (2) Othe | r (specify) | | (2) | Other (specify) | | | |
| _ | | | | | | | |
| | | | 1 | | | | |
| | amounts on lines (1) and (2) | · | | Add amounts on lines | | | d |
| | I revenue per line 12, | | e | Total expenses per line | | | |
| | n 990 (line c plus line d) [6 List of Officers, Directors, Truste | oo and Kay Em | hlow | Form 990 (line c plus li | | / | e |
| Part V | Instructions on page 26) | es, and Key En | ibioy | ces | (List each one ev | en if not compensated, | see opecinc |
| | instructions on page 20) | <u> </u> | T | 3) Title and average | (C) Compen- | (D) Contributions to | (E) Expense |
| | (A) Name and address | | `` | hours per week | sation (if not | employee benefit plans & | account and other |
| | , | | | devoted to position | paid enter -0-) | deferred compensation | allowances |
| SEE | STATEMENT PART V | | Ì | | | | |
| | <u>-</u> | | <u> </u> | | 0 | 0 | 0 |
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| 75 00 | | laa re | | ta namananahan | aasa thas | | |
| | any officer, director, trustee, or key em | | | | | | |
| | 0,000 from your organization and all re rided by the related organizations? | iawu organizalions | 5, UT W | лисл люте итал этод | UUU Was | X Yes | No |
| | rided by the related organizations? 'es," attach schedule - see Specific Ins | tructions on nage (| 27 | SEE O | STATEMENT LINE 75 | | |
| | oo, atmorractionale - acc openie illa | a absolution page : | | OLL V | | - | |

| | 990 (2002) KAISER FOUNDATION HEALTH PLAN OF OHIO | 34-0922268 | | Page 9 |
|-----|--|-------------------|--------|-----------|
| | VI Other Information (See Specific Instructions on pages 27) | | | Yes or No |
| 76 | Did the organization engage in any activity not previously reported to the Internal Revenue Service? If "Yes, attach a detailed description of each activity | - | 76 | NO |
| 77 | Were any changes made in the organizing or governing documents, but not reported to the IRS? | SEE STMT LINE 77 | | YES |
| , , | If 'Yes,' attach a conformed copy of the changes | SEC STALL LINE // | 77 | TES |
| 782 | Did the organization have unrelated business gross income of \$1,000 or more during the year co- | uarad | | |
| roa | | reieu | | |
| _ | by this return? | | 78a | YES |
| | If 'Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," | . · | 78b | YES |
| 13 | - · · | 5, | | |
| 90- | attach a statement | | 79 | NO |
| ova | Is the organization related (other than by association with a statewide or nationwide organization) | | | |
| | through common membership, governing bodies, trustees, officers, etc., to any other exempt or | | | |
| L | nonexempt organization? | | 80a | YES |
| D | If "Yes," enter the name of the organization SEE STATEMENT LINE 80 | | | |
| | and check whether it is X exempt OR | X nonexempt | | |
| 81a | Enter the amount of political expenditures direct or indirect, as described | | | |
| | in the instructions for line 81 | 81a NONE | | |
| b | Did the organization file Form 1120-POL for this year? | | 81b | NO |
| 82a | Did the organization receive donated services or the use of materials, equipment, or facilities at | | | |
| | no charge or at substantially less than fair rental value? | | 82a | NO |
| b | If "Yes," you may indicate the value of these items here. Do not include this amount as revenue | | | |
| | in Part I or as an expense in Part II (See instructions for reporting in Part III) | 82b N/A | | |
| | Did the organization comply with the public inspection requirements for returns and exemption applications? | - | 83a | YES |
| | Did the organization comply with the disclosure requirements relating to quid pro quo contributions? | | 83b | N/A |
| | Did the organization solicit any contributions or gifts that were not tax deductible? | | 84a | N/A |
| b | If "Yes," did the organization include with every solicitation an express statement that such | | | |
| | contributions or gifts were not tax deductible? | | 84b | N/A |
| | 501(c)(4), (5), or (6) organizations (a) Were substantially all dues nondeductible by members? | | 85a | N/A |
| b | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | 85b | N/A |
| | If "Yes" to either 85a or 85b, do not complete 85c through 85h below unless the organization | | | |
| | received a waiver for proxy tax owed for the prior year | | | |
| C | Dues, assessments, and similar amounts from members | 85c N/A | | |
| d | Section 162(e) lobbying and political expenditures | 85d N/A | | |
| е | Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices | 85e N/A | | |
| | Taxable amount of lobbying and political expenditures (line 85d less 85e) | 85f N/A | | |
| _ | Does the organization elect to pay the section 6033(e) tax on the amount in 85f? | | 85g | N/A |
| h | If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount | | | |
| | in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political | | | |
| | expenditures for the following tax year? | | 85h | N/A |
| 86 | 501(c)(7) orgs - Enter (a) Initiation fees and capital contributions | | | |
| | included on line 12 | 86a N/A | | |
| | Gross receipts, included on line 12, for public use of club facilities | 86b N/A | | |
| | 501(c)(12) orgs - Enter a Gross income from members or shareholders | 87a N/A | | |
| Þ | Gross income from other sources (Do not net amounts due or paid to other | | | |
| | sources against amounts due or received from them) | 87b N/A | | |
| 88 | At any time during the year did the organization own a 50% or greater interest in a taxable corporation or partnership or an ent | · | | |
| | disregarded as separate from the organization under Regulations sections 301 7701 2 and 301 7701-32 II "Yes" complete Part | IX | 88 | NO |
| 89a | 501(c)(3) organizations - Enter Amount of tax paid during the year under | _ | | |
| _ | section 4911 NONE, section 4912 NONE, section 4955 | NONE | | |
| Þ | 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did | | | |
| | it become aware of an excess benefit transaction from a prior year? If "Yes" attach a statement explaining each transaction | | 89 | NO NO |
| С | Enter Amount of tax imposed on the organization managers or disqualified persons during the | | | |
| | year under section 4912, 4955 and 4958 | | | NONE |
| | Enter Amount of tax in 89c, above, reimbursed by the organization | | | NONE |
| | List the states with which a copy of this return is filed OHIO | | | |
| ь | Number of employees employed in the pay period that includes March 12, 2002 (See instructions |) | 90b | 1,695 |
| 91 | The books are in care of DONALD RUHL, NATIONAL TAX DIRECTOR | Telephone no | (510 2 | 271-6385 |
| | Located at ONE KAISER PLAZA, 1550L OAKLAND, CA | ZIP code | | 94612 |
| 92 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here | | | |
| | enter the amount of tax-exempt interest received or accrued during the tax year | 92 N/A | | |

Form 990 (2002)

| Form 990 (2002) | | KAISER FOUNDAT | ION HEALTH PL | AN OF OHIO | 34- | 0922268 | Page 6 |
|--------------------------|--|--|----------------------------|----------------------------------|------------------|------------------|--|
| | lysis of Income-Producing | Activities | · | | (Sec | Specific Instru | uctions on pages 32) |
| - | s amounts unless otherwise | Unrelated busin | ness income | Excluded by sec | tion 512 51 | 3 or 514 | (E) |
| ındıcated | | (A) | (B) | (C) | | (D) | Related or exempt |
| 9.3 Program se | rvice revenue | Business code | Amount | Exclusion code | 1 | Amount | function income |
| a MEMBERS | HEALTH CARE PREMIUMS | | | | | | 322,448 858 |
| b SUPPLEMEN | NTAL CHARGES | | | | | | 23,686,260 |
| C NON PLAN | AND INDUSTRIAL REVENUE | 621400 | 17,631 | | | | 1,465 734 |
| d OTHER PRO | GRAM SERVICE REVENUE | 621400 | 23,777 | 1 | | 3,504,386 | |
| e | | | | | | - | |
| f Medicare/M | edicaid payments | | | | | | 177,109,533 |
| g Fees and contr | acts from government agencies | | | | | | |
| 94 Membership di | Jes and assessments | | | | | | |
| 95 Interest on sav | ings and temporary cash investments | ** | † | 14 | 1 - | 6,615,664 | |
| 96 Omdends and | interest from securities | | 1 | | | | |
| | me (loss) from real estate | | | | | | |
| a debt fmanced | • • | sacamannan mannan m | | | ananan suma | | |
| b not debt financ | | | | | | | |
| | me or (loss) from personal property | | | | - + - | | |
| 99 Other investme | | | | | | | _ |
| | rom sales of assets other than inventory | _ | | | | | |
| | (loss) from special events | | | | | | |
| | (loss) from sales of eventory | | | | | | - |
| 103 Other revenue | (1003) Hart Sales of Effection y | | | | | | |
| b | | | | | <u> </u> | | |
| <u></u> | · · · · · · · · · · · · · · · · · · · | | | | | | |
| ă——— | T | | | | | | |
| <u>"</u> | · | | | | | | <u></u> |
| 404 Cubbatal /aa | IdI- (B) (D)d (E)) | | 41 400 | | anaman . | 40 400 050 | 504740.005 |
| | Id cols (B), (D), and (E)) Ine 104 columns (B) (D), and (E)) | | 41,408 | | | 10,120 050 | 524,710,385 |
| | | | - · · | | | | 534,871,843 |
| | 105 plus line 1d, Part I should equ | | | | | | |
| | ationship of Activities to th | | | | | | ctions on page 32) |
| Line No. | Explain how each activity for v | | | | | | |
| | accomplishment of the organiz | zauon's exempt purpose | es (other than by | providing tunds for si | uch purpos | ies) | · |
| | SEE STATEMENT LINE VIII | | | | | | |
| | | , | | · | | | |
| | | | | | | | |
| Da-410 1-4a | Daniel Viene | 6 | | | | | <u>.</u> |
| Part IX Infor | mation Regarding Taxable | Subsidiaries and Di | | | (See | | ctions on page 33) |
| | (A)_ | | (B) | (C) | | (D) | (E) |
| | Name address and EIN of corp | | Percentage of | Nature of activitie | es | Totai | End-of-year |
| | partnership or disregarded e | ntrty | ownership interest | | | income | assets |
| N/A | | <u> </u> | % | | | | |
| | <u>-</u> | | % | | | <u>—</u> | |
| | | | % | | | | |
| | | | <u>%</u> | | | | |
| Part X Infor | mation Regarding Transfer | rs Associated with P | Personal Benef | it Contracts | (See | Specific Instruc | ctions on page 33) |
| (a) Did the org | ganization, during the year, reci | eive any funds, directly | or indirectly, to p | ay premiums on a pe | rsonal | | |
| benefit cor | | | • • • | • | Yes | | X No |
| (b) Did the organ | nization, during the year, pay premium: | s directly or indirectly on a n | ersonal henefit contr | act7 | Yes | | X No |
| | (b), file Form 8870 and Form | | ou de lica de lica de lic | ucti | 1'es | | |
| 11010 11 103 (| | | | <u> </u> | | | |
| Please | Under penalties of perjury 1 declare | | _ | | | | |
| | and belief it is true, correct, and com | plete Declaration of preparer (of | her than officer) is based | on all information of which pre- | parer has any k | nowledge | |
| Sign | - 110.00 | 0 | l | | | | |
| Here | & KMISCHAND ZZ | THE SALE | 11-13-03 | DEBORAH STOK | | | |
| | Signature of officer | | Date | Type or print nam | | | Trtle |
| | Preparer s | * / . | C 1 7 | Date/ | Check if se | elf- | Preparer's SSN or PTIN |
| Paid | signature JOSEPH'S DE | TRANE ADDER | SeTuane | - 17/26/03 | X emp | loyed | |
| | | | Р | | EIN | | |
| | | | | | | | |

105

Phone

(415) 783-4000 Form 990 (2002)

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions)

OMB No 1545-0047

2002

Department of the Treasury Internal Revenue Service

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

| Name of the organization | AN OF OUR | | | Employer identification number |
|---|-----------------------|-----------------------|--------------------------|--------------------------------------|
| KAISER FOUNDATION HEALTH PI | AN OF UNIO | - Oil The Off | Distriction of | |
| Part 1 Compensation of the Five H (See page 1 of the instructions | | | | ing trustees |
| (a) Name and address of each | (b) Title and average | | (d) Contributions to | (e) Expense account |
| employee paid more than \$50,000 | hours per week | (c) Compensation | employee benefit plans & | and other |
| | devoted to position | 1 '' ' | deferred compensation | allowances |
| | Manager | | | |
| Lee C Verlei | Financial Mgmnt | | | |
| 1 Kaiser Plaza, Suite 1550L Ordway | 1 | 1 | • | |
| Oakland, CA 94612 | 40 Hours | 114,592 | 9,745 | 0 |
| | Director | - | · <u> </u> | |
| Tracy L Kanouff | Acct Mgmt & Bus Dev | | | |
| 1 Kaiser Plaza, Suite 1550L Ordway | | | | |
| Oakland, CA 94612 | 40 Hours | 111,516 | 14,894 | 0 |
| | Director | , | | |
| Jeffrey A Wallace | Pharmacies | | | |
| 1 Kaiser Plaza, Suite 1550L Ordway | 1 | j | | |
| Oakland, CA 94612 | 40 Hours | 107,023 | 17,244 | 0 |
| - Cariana, OA CHOTZ | Coordinator | | 7,1-17 | |
| Barbara Isabella | Pharmacy HmCare | | | |
| 1 Kaiser Plaza, Suite 1550L Ordway | 1 (tamae) imear | | | |
| Oakland, CA 94612 | 40 Hours | 106,454 | 3,485 | 0 |
| Oakialid, CA 34612 | Staff | 100,404 | 0,400 | |
| Edward S King | Pharmacist | | | |
| 1 Kaiser Plaza, Suite 1550L Ordway | 1 | | | |
| Oakland, CA 94612 | 40 Hours | 96,707 | 12,380 | O |
| Total number of other employees paid | 40 110413 | | | |
| over \$50,000 | 327 | | | |
| Part II Compensation of the Five H | | lent Contractors to | or Professional S | |
| (See page 1 of the instructions | | | | |
| (a) Name and address of each inde | | | of service | (c) Compensation |
| paid more than \$50, | • | (6) 1790 | OI SCIVICE | (e) compensus |
| paid filore dian 430, | | - | | |
| Ohlo Permanente Medical Group | | | | |
| 1001 Lakeside Avenue Suite 1200 | | Medical Services | | |
| Cleveland, OH 44114 | | Physicians Practic | e Group | 93,681,857 |
| Cleveland, On 44114 | | i ilysicialis i lacuo | c Group | 00,001,001 |
| Cleveland Clinic Foundation | | | | |
| 9500 Euclid Avenue | | Medical Services | | |
| | | Community Hospit | tal | 58,032,863 |
| Cleveland, OH 44114 | | Community nospin | iai | 30,032,003 |
| Summa Health System | | | | |
| 525 E Market Street | | Medical Services | | |
| | | Community Hospit | tal | 15,905,215 |
| Akron, OH 44309 | •• | Collinating Hospit | <u></u> | 10,500,210 |
| Metrohealth Medical Center | | 1 | | |
| 2500 Metrohealth Drive | | Medical Services | | |
| - | | Community Hospit | tal | 10,681,823 |
| Cleveland, OH 44109 | | 1 Community nospit | . <u> </u> | 10,001,023 |
| Laka Haamital | | | | |
| Lake Hospital system | | Madical Comme | | |
| 36000 Euclid Avenue | | Medical Services | hal | 0 242 020 |
| Willoughby, OH 44094 | | Community Hospit | ाव। सारकारमध्यान | 8,243,030 |
| Total number of others receiving over | 050 | | | |
| \$50,000 for professional services | 253 | | | Sahadula A (Form 990 or 990 E7) 2003 |

| Sche | dule A (Form 990 or 990-EZ) 2002 | KAISER FOUNDATION HEALTH PLAN OF OHIO | 34-092226 | 8 F | Page |
|---|--|--|--|-----|----------|
| Par | t III Statements About Activities | (See page 2 of the instructions) | | Yes | No |
| | including any attempt to influence public if "Yes," enter the total expenses paid (Must equal amounts on line 38, Pa Organizations that made an election of Part VI-A. Other organizations checking statement giving a detailed description During the year, has the organization, following acts with any of its trustees, members of their families, or with any affiliated as an officer, director, trustees. | inder section 501(h) by filing Form 5768 must complete ing "Yes," must complete Part VI-B AND attach a in of the lobbying activities either directly or indirectly, engaged in any of the directors, officers, creators, key employees, or taxable organization with which any such person is an any of the person is an any owner, or principal beneficiary | SEE STMT SCH A PART III LINE 1 42,367 | X | |
| | Sale, exchange, or leasing of property? Lending of money or other extension of | | SEE STMT SCH A PART III LINE 2 2a SEE STMT SCH A PART III LINE 2 2b | | |
| | Furnishing of goods, services, or facilities | | SEE STMT SCH A PART III LINE 2 2C | 1 | |
| | | | | | |
| | | or reimbursement of expenses if more than \$1,000)? | SEE STMT PART V 2d | X_ | <u> </u> |
| е | Transfer of any part of its income or assist the answer to any question is "Yes," | sets? ' attach a detailed statement explaining the transactions | 2e | | X |
| 4a Note | Do you have a section 403(b) annuity p Attach a statement to explain how the | scholarships, fellowships, student loans, etc? lan for your employees? e organization determines that individuals or organizations hantable programs "qualify" to receive payments | SEE STMT SCH A PART III LINE 3 4a receiving | X | X |
| Pari | IV Reason for Non-Private Four | ndation Status (See pages 3 through 6 o | f the instructions) | | |
| 5 6 7 8 9 10 11a 11b 12 | A church, convention of churches A school Section 170(b)(1)(A)(ii A hospital or a cooperative hospital or city, and state An organization operated for the Section 170(b)(1)(A)(iv) (Also cooperated public Section 170(b)(1) An organization that normally recommendership fees, and gross recommen | | governmental unit If unit or from the If an instance of the control of the cont | ie, | |
| , LOA | ide the following information about the | supported organizations (See page 5 of the instructions) ne(s) of supported organization(s) | | - | |
| | (a) Nair | no(o) or supported organization(s) | (b) Line number from above | | |
| 14 | An organization organized and o | perated to test for public safety Section 509(a)(4) (See p | page 6 of the instructions) | | |

| Schedule A (Form 990 or 990 EZ) 2002 KAISER FOUN | IDATION HEALTH PLAN | OF OHIO | | 34-0922268 | Page 3 |
|--|---------------------------|-----------------------|-------------------------|--|---------------|
| Part IV-A Support Schedule (Complete only | If you checked a box on | | | accounting | 5 |
| Note You may use the worksheet in the instructions | for converting from the a | ocrual to the cash me | ethod of accounting | - | |
| Calendar year (or fiscal year beginning in) | (a) 2001 | (b) 2000 | (c) 1999 | (d) 1998 | (e) Total |
| 15 Gifts grants, and contributions received (Do | | | | | |
| not include unusual grants See line 28) | 126 677 | 65,284 | 71 500 | 88 055 | 351 516 |
| 16 Membership fees received | | | <u> </u> | | |
| 17 Gross receipts from admissions merchandise | | | | | |
| sold or services performed or furnishing | | | | | |
| of facilities in any activity that is not a | | | | | |
| business unrelated to the organization's | | | | | |
| charitable etc purpose | 497 789 567 | 476 226 139 | 456 721 179 | 439 783,110 | 1,870 519,995 |
| 18 Gross income from interest, dividends amounts | | | | | |
| received from payments on securities loans | | | 1 | | |
| (section 512(a)(5)) rents, royalties, and unrelated | 1 | | į. | | |
| business taxable income (less section 511 taxes) | 1 | | İ | | |
| from businesses acquired by the organization | | | | | |
| after June 30 1975 | 287 181 | 1 069,761 | 2 765 430 | 3 208 487 | 7 330 859 |
| 19 Net income from unrelated business activities | 25, 10, | 1 333,137 | 21.00 | 1 200 401 | 7 000 000 |
| not included in line 18 | | | | | |
| 20 Tax revenues levied for the organization's benefit | - | | - | | |
| and either paid to it or expended on its behalf | | | | | |
| 21 The value of services or facilities furnished to the | - | - | _ | | |
| | | | | | |
| organization by a governmental unit without charge Do not include the value of services or facilities | | | | | |
| | | | | | |
| generally furnished to the public without charge 22 Other income Attach a schedule Do not include | | | | | - |
| gain or (loss) from sale of capital assets | İ | | | | |
| | 498 203,425 | 477 361 184 | 450 550 400 | 442.070.652 | 1 870 202 270 |
| 23 Total of lines 15 through 22 | | | 459 558 109 | 443 079 652 | 1,878 202 370 |
| 24 Line 23 minus line 17 | 413 858 | 1 135 045 | 2 836 930 | 3 296,542 | 7 682 375 |
| 25 Enter 1% of line 23 | 4 982 034 | 4,773,612 | 4 595 581 | 4 430 797 | |
| 26 Organizations described in lines 10 or 11 | | r 2% of amount in col | | 26a | |
| b Prepare a list for your records to show the name | | | | | |
| governmental unit or publicly supported organiza | | | | VIIIII III | |
| shown in line 26a Do not file this list with you | | i these excess amour | 11.5 | 26b | |
| c Total support for section 509(a)(1) test. Enter line | | | | 26c | |
| d Add Amounts from column (e) for lines | 18 19 | | | | |
| - Butte (top 200 top 20d total) | 22 <u>26</u> b | | | 26d | · |
| e Public support (line 26c minus line 26d total) | at dayled by two 20s (d. | | | 26e | |
| f Public support percentage (line 26e (numerato | | | | 26f | |
| 27 Organizations described on line 12 | a For amounts include | | | | |
| "disqualified person attach a list (which is not o | | | | | |
| year from, each "disqualified person Do not fil | | | such amounts for each | • | |
| (2001) (2000) | | (1999) | | (1998) | |
| b For any amount included in line 17 that was rece | | | | | |
| records to show the name of, and amount receiv | | | | | |
| year or (2) \$5,000 (Include in the list organization | | | | | |
| your return. After computing the difference between | | and the larger amou | int described in (1) or | (2), enter the | |
| sum of these differences (the excess amounts) f | or each year | (4000) | | | |
| (2001) (2000) | | (1999) | | (1998) | |
| | | | | | |
| c Add Amounts from column (e) for lines | 15 351,516 16 | | | 1.= 1 | |
| 17 1 870 519 995 | | | | 27c | 1,870,871,511 |
| d Add Line 27a total | and line 27b total | | | 27d | |
| e Public support (line 27c minus line 27d total) | | | | 27e | 1,870,871,511 |

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 28 Unusual Grants For an organization described in line 10 11 or 12 that received any unusual grants during 1998 through 2001 prepare a list for your records to show for each year, the name of the contributor, the date and amount of the grant, and a bnef description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

1 Total support for section 509(a)(2) test Enter amount on line 23 column (e)

g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) .

27g

99 61%

0 39%

271 1 878 202 370

| art | | | N 1/0 | |
|----------|--|------------------|--------------|--|
| • | (To be completed ONLY by schools that checked the box on line 6 in Part IV) | | N/A Yes | No |
| 20 | Does the organization have a racially nondiscriminatory policy toward students by statement in its | | | |
| | | 29 | | |
| 30 | Does the organization include a statement of its racially nondiscriminatory policy toward students | | | |
| | in all its brochures, catalogues, and other written communications with the public dealing with | | | |
| | | 30 | | |
| 31 | Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast | | | |
| | media during the period of solicitation for students, or during the registration period if it has no solicitation | | | |
| | program, in a way distributed are posses, to any to an party or are government, to an area | 31 | | |
| | If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement) | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | Does the organization maintain the following | | | |
| | ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, | 32a | | |
| | Records documenting that scholarships and other financial assistance are awarded on a racially | | | |
| | Total de la company de la comp | 32b | | |
| | Copies of all catalogues, brochures, announcements, and other written communications to the public | 32c | | |
| | - The state of the | 32d | | |
| | Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) | | | |
| | If you answered two to any of the above, please explain. (If you need more space, attach a separate statement) | | | |
| | | | | |
| 33 | Does the organization discriminate by race in any way with respect to | | | |
| | 2000 and anguine 2000 and any may be a series and any may be a series and a series | | | |
| а | Students' rights or privileges? | 33a | | ************ |
| h | Admissions policies? | 33ь | | |
| • | Admissions policies | | | |
| С | Employment of faculty or administrative staff? | 33c | | |
| | | | | |
| d | Scholarships or other financial assistance? | 33d | | |
| | | | | |
| е | Educational policies? | 33e | | |
| | Use of facilities? | 33f | | |
| ı | Ose of facilities? | 331 | _ | |
| а | Athletic programs? | 33g | | |
| 9 | | | | |
| h | Other extracumcular activities? | 33h | | |
| | | | | |
| | If you answered "Yes' to any of the above, please explain (If you need more space, attach a statement) | | | |
| | . | | | |
| | | | | |
| | | | | |
| . | Done the accompanies are a fermion and or experience from a garage month agency? | ////// 34a | | |
| 34a | Does the organization receive any financial aid or assistance from a governmental agency? | 3 4 4 | | |
| h | Has the organization's right to such aid ever been revoked or suspended? | 34ь | | |
| D | If you answered "Yes" to either 34a or b, please explain using an attached statement | | | |
| | 1 you dilongload 1 ou to close one of a product only all attached attached | | | |
| 35 | Does the organization certify that it has complied with the applicable requirements of sections 4 01 through | | | 11111111111111111111111111111111111111 |
| | | 35 | | |
| | Schedule A (Form 990 c | | 0-EZ) | 2002 |

| | edule A (Form 990 or 990-EZ) 2002 | | ATION HEALTH F | LAN OF OHIO | 2 | | 34-0922268 | Page 9 |
|------|---|---------------------------------------|-----------------------|------------------|--------|----------|-----------------|---|
| Part | rt VI-A Lobbying Expenditures by Elect | ing Public Charities | | | (See | page | 9 of the instru | |
| | (To be completed ONLYby an eligible orga | anization that filed Form 57 | 768) | | _ | | | N/A |
| Che | eck here a If the organization | n belongs to an affiliate | d group | | | | | |
| Che | eck here b If you checked "a | " and "limited control" p | provisions apply | | | | | |
| | , , | ' | | · | | 1 | (a) | (b) |
| | I imits on | Lobbying Expenditu | ires | | | | Affiliated | |
| | | ires" means amounts p | | | | | group totals | To be completed for ALL electing organizations |
| 36 | Total lobbying expenditures to influence public | | | | | 36 | group totals | |
| | Total lobbying expenditures to influence a legis | | | | | 37 | | |
| | Total lobbying expenditures (add lines 36 and | | ופייינ | | | 38 | | |
| | Other exempt purpose expenditures | o., | | | | 39 | | |
| | Total exempt purpose expenditures (add lines | 38 and 30\ | | | - 1 | 40 | | |
| | Lobbying nontaxable amount. Enter the amount | | tahle - | | 1 | | | |
| 41 | If the amount on line 40 is - | | ontaxable amoun | tic_ | | | | |
| | Not over \$500,000 | 20% of the amount | | . 13 - | | | | |
| | Over \$500,000 but not over \$1,000,000 | | of the excess over | 1500 000 | | | | |
| | Over \$1,000,000 but not over \$1,500,000 | · · · · · · · · · · · · · · · · · · · | of the excess over | · · | 1 | 41 | | |
| | Over \$1,500,000 but not over \$17,000,000 | | of the excess over \$ | | 7 | | | |
| | Over \$17,000,000 | \$1,000,000 | OI IIIC CYCC22 OACI D | 1,300,000 | J | | | |
| 40 | Grassroots nontaxable amount (enter 25% of | | | | | 42 | | |
| | Subtract line 42 from line 36 Enter -0- if line 4 | | | | - 1 | 43 | | |
| | Subtract line 41 from line 38 Enter -0- if line 4 | | | | 1 | 44 | | |
| 44 | Subtract line 41 non line 30 Enter -0- it time - | + i is illore trail time 30 | | | 1 | Willian. | | |
| | Caution: If there is an amount on either line | A3 or line 44 file Form | 4720 | | | | | |
| _ | | Year Averaging Pen | | n 501(b) | | | | |
| | (Some organizations that made | | | | f tha | five o | olumne bolow | |
| | | uctions for lines 45 thro | | | | | oldillis below | |
| | See the mist | degons for lines 45 and | agii so oli page 1 | i oi uie ilisuuc | ,40113 | <u>/</u> | _ | - |
| | | l | _obbying Expend | itures Durina | 4-Ye | ar Av | eraging Perio | nd |
| | | | | | | | | _ |
| | Calendar year (or fiscal | (a) | (b) | (c) | Ī | | (d) | (e) |
| | year beginning in) | 2002 | 2001 | 2000 | | | 1999 | Total |
| | | | | | | | | |
| 45 | Lobbying nontaxable amount | | | | | | | |
| | | | | | | | | |
| 46 | Lobbying ceiling amount (150% of line 45(e)) | | | | | | | |
| | | | | | | | | |
| 47 | Total lobbying expenditures | | | | | | | |
| | | | | | | | | |
| 48 | Grassroots nontaxable amount | | | | | | | |
| | | | | | | | | |
| 49 | Grassroots ceiling amount (150% of line 48(e)) | | | | | | | |
| | | | | | | | | |
| 50 | Grassroots lobbying expenditures | | | | | | | |
| Par | rt VI-B Lobbying Activity by Nonelecting | | | | | | | |
| | (For reporting by organizations that or | | | | ons) | | | |
| | ing the year, did the organization attempt to in | | | | Ī | | | |
| any | attempt to influence public opinion on a legisla | ative matter or referend | um, through the us | se of | Yes | No | Am | ount_ |
| а | Volunteers | | | | | Х | | |
| b | Paid staff or management (include compensa | tion in expenses reporte | ed on lines c throug | hh) [| Х | | | |
| С | | | | [| | _X | NONE | |
| d | | | | | I | X | NONE | |
| е | Publications, or published or broadcast statem | nents | | [| | X | NONE | |
| f | Grants to other organizations for lobbying purp | ooses | | Ī | | _X. | NONE | |
| g | | | gislative body | ľ | X | | 20 816 | |
| h | | | | Ì | Х | | 21 551 | · - |
| 1 | Total lobbying expenditures (add lines c through | | • | t t | | | 42,367 | |
| | · · | | | • | | | | |
| | If Yes" to any of the above, also attach a sta | itement giving a detaile | d description of th | e lobbying acti | vities | | | |
| _ | | | | | | | | |

| Part VII | (Form 990 or 990-EZ) Information Rega | 2002 KAISER FOUNDATION HEALT irding Transfers To and Transactions and | Relationships With Noncharitable Exempt | 4-0922268 | Page 6 |
|-----------------|--|--|--|---------------|--------|
| | Organizations | (| See page 12 of the instructions) | | |
| 51 Did th | ne reporting organiza | ation directly or indirectly engage in any of the fo | llowing with any other organization described in | · - | |
| section | on 501(c) of the Cod | le (other than section 501(c)(3) organizations) or | in section 527, relating to political organizations? | | |
| a Trans | sfers from the report | ing organization to a nonchantable exempt organ | nization of | | Yes No |
| (i) | Cash | • | | 51a(l) | X |
| (ii) | Other assets | | | a(ii) | X |
| b Other | r transactions | | | | |
| | | of assets with a noncharitable exempt organization | า | b(l) | X_ |
| (ii) | Purchases of assets | from a nonchantable exempt organization | | b(ii) | X |
| (iii) | Rental of facilities, ed | quipment, or other assets | | b(iii) | X |
| (iv) | Reimbursement arra | ingements | | b(IV) | X |
| (v) | Loans or loan guarar | ntees | | b(v) | X |
| | | nces or membership or fundraising solicitations | | b(vi) | X |
| c Shart | ng of facilities, equipi | ment, mailing lists, other assets, or paid employee | s | С | X |
| d If the | answer to any of the | e above is "Yes," complete the following schedu | le Column (b) should always show the fair market | value | |
| of the | goods, other asset | s, or services given by the reporting organization | n If the organization received less than fair market | t value | |
| in an | y transaction or shai | ring arrangement, show in column (d) the value o | of the goods, other assets, or services received | | |
| | | | | | |
| (a) | (b) | (c) | (d) | | |
| Line no | Amount involved | Name of noncharitable exempt organization | Description of transfers transactions and share | ing arrangeme | ents |
| N/A | | | | | |
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| 52a c the | a organization direct | by or indirectly affiliated with or related to one of | r more tax-exempt organizations | | |
| | | ly or indirectly affiliated with, or related to, one of | | Yes | X No. |
| desci | | c) of the Code (other than section 501(c)(3)) or in | | Yes | X No |

| b if "Yes," complete the following sched (a) | (b) | (c) |
|--|----------------------|-----------------------------|
| Name of organization | Type of organization | Description of relationship |
| N/A | | |
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Schedule A (Form 990 or 990-EZ) 2002

STATEMENT LINE 20 FORM 990 PART I, LINE 20--OTHER CHANGES IN FUND BALANCE

| DESCRIPTION | <u>AMOUNT</u> |
|---|---------------|
| RESERVE FOR MINIMUM PENSION LIABILITIES | (11,947,058) |
| TOTAL - OTHER CHANGES IN FUND BALANCE | (11,947,058) |

OTHER EXPENSES STATEMENT LINE 43 FORM 990, PART II, LINE 43

| | | PROGRAM | MANAGEMENT | Г |
|---|-------------|--------------|------------|-------------|
| DESCRIPTION | TOTAL | SERVICE | & GENERAL | FUNDRAISING |
| PURCHASED MEDICAL SERVICES - BCP | 184 224 942 | 184,224,942 | 0 | 0 |
| PURCHASED MEDICAL SERVICES - OUTSIDE SVCS | • | 2,552,226 | ő | ŏ |
| PURCHASED SERVICES - OTHER PROFESSIONAL | | 3,339,488 | ő | ő |
| PURCHASED SERVICES - OTHER NON-PROFESSIONAL | · · · · · | 100,559,988 | ő | ő |
| PROFESSIONAL & PUBLIC LIAB INSURANCE | | 19,655,865 | Ö | Ö |
| OTHER INSURANCE | 55,588 | | Ō | ő |
| INFORMATION TECHNOLOGY SERVICES | • | 22,941,807 | 0 | Ö |
| BUSINESS LICENSES & TAXES | - | 2,258,935 | 0 | 0 |
| PROPERTY TAXES | | 1,042,990 | 0 | 0 |
| BAD DEBTS | 2,767,032 | 2,767,032 | 0 | 0 |
| DUES & SUBSCRIPTIONS - PROFESSIONAL | 74,329 | | 0 | 0 |
| DUES & SUBSCRIPTIONS - OTHER | 197,685 | 197,685 | 0 | 0 |
| EMPLOYEE DEVELOPMENT EXPENSES | 220,332 | 220,332 | 0 | 0 |
| EMPLOYEE RELATED EXPENSES | 1,160,778 | 1,160,778 | 0 | 0 |
| ADVERTISING AND MARKETING EXPENSES | 4,599,030 | 4,599,030 | 0 | 0 |
| INTER-REGIONAL CHARGES | 5,315,843 | 5,315,843 | 0 | 0 |
| LOSS ON RETIREMENT OF FIXED ASSETS | 498,922 | 498,922 | 0 | 0 |
| CHARITABLE CARE | 32,887 | 32,887 | 0 | 0 |
| MISCELLANEOUS AND OTHER EXPENSES | 42,750 | 42,750 | | 0 |
| ALLOCATED ADMINSTRATIVE EXPENSES | 0 | (21,293,008) | 21,293,008 | 0 |
| TOTAL LINE 43 | 351,541,417 | 330,248,409 | 21,293,008 | 0 |

STATEMENT PART III FORM 990, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

The primary exempt purpose of Kaiser Foundation Health Plan of Ohio ("Health Plan"), an Ohio not-for-profit corporation organized for the public benefit and generally exempt from income tax under Internal Revenue Code Section 501(c)(3), and comparable state statute, is to provide a program of health care and medical services as a prepaid direct care group practice Health Maintenance Organization

Health Plan is a subsidiary of Kaiser Foundation Health Plan, Inc. an organization also exempt from tax under Internal Revenue Code Section 501(c)(3). Health Plan contracted with Kaiser Foundation Hospitals (Hospitals) and Ohio Permanente Medical Group, (Medical Group) to provide or arrange for hospital and medical services for its members. Contract payments to Hospitals and Medical Group represented a substantial portion of the expenses for medical and hospital services reported in prior reporting periods.

Please see the attachment, "Kaiser Permanente Community Benefit Report for Kaiser Foundation Health Plan of Ohio for 2002." This report will provide a description of the activities conducted by Health Plan in the accomplishment of its exempt purposes and for the benefit of the community in which it conducts its activities.

STATEMENT LINE 54 - SECURITY INVESTMENTS FORM 990 PART IV

| DESCRIPTION | BEGINNING OF YEAR AMOUNT | END OF YEAR AMOUNT |
|--------------------------------------|--------------------------|--------------------|
| MARKETABLE SECURITIES | 477,140 | 502,727 |
| TOTAL LINE 54 - SECURITY INVESTMENTS | 477,140 | 502,727 |

STATEMENT LINE 57

| FIXED ASSETS | COST E | COST BASIS | | ACCUMULATED DEPRECIATION | |
|----------------------------------|----------------------|---------------------|----------------------|--------------------------|----------------------|
| DESCRIPTION | BEGINNING OF YEAR | END OF YEAR | BEGINNING OF YEAR | END OF YEAR | DEP/AMORT EXPENSE |
| LAND | 5 961 963 | 5 961 963 | 0 | 0 | 0 |
| LAND IMPROVEMENTS | 734 042 | 7 96 992 | 393 730 | 447 477 | 48 352 |
| BUILDINGS | 61 813 723 | 65 556 223 | 15 696 355 | 17 936 002 | 2 359,691 |
| LEASEHOLD IMPROVEMENTS | 6 817 384 | 6 911 516 | 5 470 941 | 5 696 117 | 225 175 |
| EQUIPMENT | 43 883 238 | 44 287 902 | 36 134 282 | 38 784 507 | 2 282 692 |
| CAPITALIZED SOFTWARE | 25 475 550 | 25,457 249 | 24 183 563 | 25 113 757 | 930 116 |
| CONSTRUCTION IN PROGRESS | 591 667 | 1 990 770 | 0 | 0 | 0 |
| TOTALS | 145 277 567 | 150 962 615 | 81 878 871 | 87 977 860 | 5 846 026 |
| TOTALS TO PART IV, LINE 57(A) | 145,277,567 | 150,962,615 | | | |
| PART IV, LINE 57(B) | | | 81,878,871 | 87 977,860 | |
| PART IV LINE 57(C) | 63,398 696 | 62 984 755 | | | |
| PART II LINE 42(A) - DEPRECIATIO | N AMORTIZATION DEPL | ETION ETC | | | 5 846 026 |

OTHER ASSETS STATEMENT LINE 58 FORM 990, PART IV, LINE 58

| DESCRIPTION | PRIOR YEAR AMOUNT | END OF YEAR AMOUNT | |
|-----------------------------|-------------------|--------------------|--|
| PENSION FUNDING - LONG TERM | 4,452,919 | 0 | |
| INTANGIBLE PENSION ASSETS | 0 | 8,057,120 | |
| DEPOSITS AND DEFERRED TAXES | 2,610 | 2,610 | |
| TOTAL LINE 58 | 4,455,529 | 8,059,730 | |

OTHER LIABILITIES STATEMENT LINE 65 FORM 990, PART IV, LINE 65

| DESCRIPTION | BEGINNING OF YEAR AMOUNT | END OF YEAR AMOUNT |
|--|---------------------------|--------------------|
| RESERVE FOR SELF-INSURED RISKS | 15,300,000 | 15,300,000 |
| RESERVE FOR PROPERTY & PUBLIC LIAB RISKS | 35,143,220 | 26,155,677 |
| RESERVE FOR WORKERS COMP RISKS | 564,641 | 573,100 |
| RESERVE FOR SELF-INSURED UNEMPLOYMENT | 0 | 300,244 |
| DEFINED PENSION LIABILITY | 0 | 18,131,223 |
| POST RETIREMENT LIABILITES | 28,663,471 | 30,791,994 |
| OTHER LIABILITIES | 364,796 | 1,165,106 |
| MEDICARE AUDIT RESERVE | 144,137 | 142,576 |
| TOTAL LINE 65 | 80,180,265 | 92,559,920 |

SCHEDULE FORM 990, PART V STATEMENT OF DIRECTORS, OFFICERS AND KEY EMPLOYEES COMPENSATION, BENEFITS AND REIMBURSEMENTS

| NAME and ADDRESS | TITLE | SCHEDULED HOURS | COMPENSATION | BENEFIT PLANS | OTHER PAYMENTS |
|---------------------------------|---------------------------------------|--------------------|--------------|---------------|-------------------|
| DIRECTORS | | | | | |
| James A Vohs | Chairman Ementus - to 4/30 | As Needed | 0 | 0 | 0 |
| David M Lawrence, MD | Chairman Emeritus - fm 5/1 and | As Needed | | | |
| | Director & Chair - to 4/30 | As Needed | 0 | 0 | 0 |
| George C Halvorson | Director & Chair - fm 5/1 | As Needed | 0 | 0 | 0 |
| L Dale Crandall | Director | As Needed | 0 | 0 | 0 |
| David R Andrews | Director | As Needed | 0 | 0 | 0 |
| Barbara B Blum | Director | As Needed | 0 | 0 | 0 |
| Thomas W Chapman | Director | As Needed | 0 | 0 | 0 |
| Daniel P Garcia | Director | As Needed | 0 | 0 | 0 |
| Henry M Kaiser | Director | As Needed | 0 | 0 | 0 |
| Dorothy H Mann, PhD, MPH | Director | As Needed | 0 | 0 | 0 |
| Dean O Morton | Director | As Needed | 0 | 0 | 0 |
| Edward E Penhoet | Director | As Needed | 0 | 0 | 0 |
| Mary E Reres, EdD | Director | As Needed | 0 | 0 | 0 |
| Robert L Ridgley | Director | As Needed | 0 | 0 | 0 |
| Chang-Lin Tien | Director | As Needed | 0 | 0 | 0 |
| Barry L Williams | Director | As Needed | 0 | 0 | 0 |
| OFFICERS AND KEY EMPLOY | /EES | | | | |
| Bernard J Tyson | Group President | As Needed | 0 | 0 | 0 |
| Patricia Kennedy-Scott | Regional President | As Needed | 0 | 0 | 0 |
| L Dale Crandall | Executive Vice President | As Needed | 0 | 0 | 0 |
| William A Gillespie, MD | Executive Vice President | As Needed | 0 | 0 | 0 |
| Richard R Pettingill | Executive Vice President | As Needed | 0 | 0 | 0 |
| Robert E Briggs | Senior Vice President | As Needed | 0 | 0 | 0 |
| Kirk E Miller | Senior Vice President | As Needed | 0 | 0 | 0 |
| Arthur M Southam, MD | Senior Vice President | As Needed | 0 | 0 | 0 |
| Steven R Zatkın | Senior Vice President | As Needed | 0 | 0 | 0 |
| Thomas R Meier | Vice President - Treasurer | As Needed | 0 | 0 | 0 |
| Deborah Stokes | Vice President - Controller | As Needed | 0 | 0 | 0 |
| Dinah Seiver | Assistant Secretary | As Needed | 0 | 0 | 0 |
| Victona B Zatkın | Assistant Secretary | As Needed | 0 | 0 | 0 |
| Total Compensation of Directors | s, Officers and Key Employees for Par | 1 V | 0 | 0 | 0 |

NOTES, See Notes on Statement Form 990, Part V, Line 75 for description of compensation, benefits and reimbursements

SCHEDULE FORM 990, PART V, LINE 75 STATEMENT OF DIRECTORS, OFFICERS AND KEY EMPLOYEES PAID BY RELATED EXEMPT ORGANIZATION

| NAME | TITLE | COMPENSATION | BENEFIT PLANS | OTHER PAYMENTS |
|--------------------------|--|-----------------|------------------|-----------------|
| See Note 2 | | See Notes 3 & 4 | See Notes 4 & 5 | See Notes 4 & 6 |
| DIRECTORS | | | | |
| James A Vohs | Chairman Emeritus - to 4/30 | 0 | 0 | 0 |
| David M Lawrence MD | Chairman Emeritus - fm 5/1 and | | | |
| | Director & Chair - to 4/30 | 926 924 | 4,559 427 | 0 |
| George C Halvorson | Director & Chair - fm 5/1 | 1 284,651 | 913 821 | 15 663 |
| L Dale Crandall | Director | See Below | See Below | See Below |
| David R Andrews | Director | 49 418 | 5 812 | 0 |
| Barbara B Blum | Director | 62,375 | 90 | 0 |
| Thomas W Chapman | Director | 64,730 | 18 756 | 0 |
| Daniel P Garcia | Director | 138 700 | 51 569 | 891 |
| Henry M Kaiser | Director | 60 018 | 5 817 | 0 |
| Dorothy H Mann PhD MPH | Director | 53 575 | 90 | 0 |
| Dean O Morton | Director | 60,918 | 5 817 | 0 |
| Edward E Penhoet | Director | 4 185 | 90 | 0 |
| Mary E Reres EdD | Director | 64 356 | 5 806 | 23,392 |
| Robert L Ridgley | Director | 65 806 | 11 377 | 0 |
| Chang-Lin Tien | Director | 5 268 | 5 727 | 0 |
| Barry L Williams | Director | 55 718 | 17,817 | 0 |
| OFFICERS AND KEY EMPLOYE | EES | | | |
| Bernard J Tyson | Group President | 794 823 | 997 938 | 0 |
| Patricia Kennedy-Scott | Regional President | 188 611 | 78 749 | 103,825 |
| L Dale Crandall | Executive Vice President | 4 723 765 | 2,723 388 | 1,080 |
| William A Gillespie MD | Executive Vice President | 1 267,294 | 2,466 903 | 960 |
| Richard R Pettingill | Executive Vice President | 813,804 | 3,884 924 | 855 |
| Robert E Briggs | Senior Vice President | 928,363 | 429 518 | 70 824 |
| Kirk E Miller | Senior Vice President | 483 216 | 1 047,175 | 2 158 |
| Arthur M Southam, MD | Senior Vice President | 825 077 | 937,710 | 1,920 |
| Steven R Zatkın | Senior Vice President | 388 022 | 578 530 | 1,920 |
| Thomas R Meier | Vice President - Treasurer | 253 096 | 201 527 | 2 160 |
| Deborah Stokes | Vice President - Controller | 334 087 | 201,161 | 2 055 |
| Dinah Server | Assistant Secretary | 218 654 | 182,957 | 248 |
| Victoria B Zatkin | Assistant Secretary | 145,955 | 144,923 | 1,920 |

NOTES for current and future compensation, benefits and other reimbursements

Note #1 - This Organization is one of the corporate entities listed on the Statement Line 80 "Related and Controlled Entities" which is included as a part of this return. This Organization is a participating member of the integrated direct service prepaid. health care program commonly referred to as "The Kaiser Permanente Medical Care Program" (Kaiser Permanente).

Note #2 - The above individuals can be contacted care/of

Kaiser Foundation Health Plan, Inc Program Office Controller's Department One Kaiser Plaza, Suite 15L Ordway Oakland, CA 94612

NOTES. See following page for continuation of notes applicable to the above reporting

SCHEDULE FORM 990, PART V, LINE 75 STATEMENT OF DIRECTORS, OFFICERS AND KEY EMPLOYEES PAID BY RELATED EXEMPT ORGANIZATION

Continuation of notes for current and future compensation, benefits and other reimbursements

Note #3 - The executive compensation plan for Kaiser Permanente is designed to recruit, retain and motivate qualified senior management personnel. The comprehensive compensation plan is designed for positions that have a significant impact on the high-level strategic and policy direction of the organization.

Base pay for executive positions is established at a level comparable to market compensation. Market data analyses are made of comparable organizations and comparable benchmark positions in the market. In addition, certain components of the total compensation plan bear an 'at-risk' feature designed to establish a total executive compensation which is equivalent to the general comparable outside market in which the organization must compete for executive leadership candidates. These plans create an environment that allows the executive to focus on individual and team performance objectives as identified by the organization over time

Note #4 - Compensation, benefit plan contributions and reimbursement for certain expenses (collectively referred to as "compensation") of Directors, Officers and Key Employees are paid by Kaiser Foundation Health Plan, Inc. (Health Plan) as common paymaster and disbursement agent for the participating member organizations of Kaiser Permanente. Certain Directors, Officers and/or Key Employees perform services for several of the Kaiser Permanente member organizations. Compensation for these individuals is included in a mix of other administrative costs and expenses allocated to the member entities based on membership and other factors. Specific allocation of these compensation elements are not shown by entity as they are not computed separately by management.

Note #5 - Some of the amounts shown as Benefits were earned in prior years and deferred. Other amounts were earned in 2002 and not paid until 2003. These amounts are shown on this 2002 report and will be shown again in 2003 when actually paid. These dollars are reported twice but paid only once.

Among the benefits offered all employees are a Defined Benefit Plan (Plan A), a Qualified Contribution Plan (Plan B), a Section 403(b) Tax Sheltered Annuity Plan (TSA), and health and welfare benefit plans. Included in Benefits reported for this purpose are the value of the annual contributions to Plan B, TSA and general health and welfare benefit plans for future payment, these amounts were not actually paid in 2002. Future benefits under Plan A are excluded from this reporting as they are not readily determinable on an annual basis but are actually determined at the time the individual qualifies for retirement benefits.

For other benefit plans available to executives which provide future benefits where the specific amounts are available and determinable by the time this tax report is filed, the amount is included in the Benefits reported in this return. This would include the amounts of compensation exchanged or converted under the Key Employee Savings Option Plan (KESOP) in the year. Amounts that are paid under the Annual Incentive Plan (AIP) and the Long Term Incentive Plan (LTIP) that are paid out to the individual participants in the following year but prior to filing the return are determined to be fixed or determinable as of year-end, and are included. Amounts known at year-end under termination of employment arrangements calling for a stream-of-payments in a subsequent year are included in the Benefit Plans column for this purpose. Individuals noted with (*) have amounts included by reason of termination of employment and/or have received payouts from benefit plan accounts that consist of amounts previously earned.

Where benefit plans provide for a future benefit that contain elements of a substantial risk-of-forfeiture conditioned on continued employment and on achieving individual and Program-wide performance targets these amounts are excluded from the reporting

Note #6 - The amounts reported as Other Payments include amounts for reimbursement of expenses. The included amounts do not include such ordinary and necessary expenses as travel, transportation, lodging, meals business meetings, conferences and other routine expenditures for which the individual accounts to the employer organization. These items are reimbursed on a specific expenditure basis, consistent with policies and procedures based on prudent fiduciary responsibilities and standards. The policies under which these individuals account to the payer meet the substantiation requirements of Internal Revenue Code Section 274. This reporting includes taxable moving and relocation reimbursements and allowances.

Note #7 - The above listed Officers and Key Employees are scheduled to work a minimum of 40 hours per week in their respective positions for the Kaiser Permanente Medical Care Program. The amount of time the individuals spend on management issues germane to a specific entity is appropriate to the needs of the entity.

THE REVISED BYLAWS WERE APPROVED AT A MEETING OF THE BOARD OF DIRECTORS ON DECEMBER 3, 2002 AND ARE ATTACHED

KAISER FOUNDATION HEALTH PLAN OF OHIO

BYLAWS CERTIFICATE

I, the undersigned, Victoria B Zatkin, hereby certify that I am the duly elected Assistant Secretary of Kaiser Foundation Health Plan of Ohio, an Ohio nonprofit corporation. I further certify that the Code of Regulations of Kaiser Foundation Health Plan of Ohio was last amended by the Board of Directors on September 11, 2002, and that the Code of Regulations has not been altered, amended or revoked since that date, and is, at the date of this certificate, in full force and effect

IN WITNESS WHEREOF, the undersigned has hereunto signed her name this 5th day of February, 2003

Victoria B Zatkin Assistant Secretary

AMENDED CODE OF REGULATIONS OF KAISER FOUNDATION HEALTH PLAN OF OHIO

ARTICLE A

PURPOSES

Section A-1. Principal Purpose.

This corporation exists for the principal purpose of establishing and maintaining a nonprofit comprehensive, predominantly prepaid, direct service health care plan at reasonable cost for members of the public, without regard to sex, race, religion or national origin.

Section A-2. Related Purposes.

This corporation's related purposes are to promote and encourage the advancement and improvement of the nation's health care delivery system, with special emphasis on organizing and providing health care services on a cost-effective basis to participate in activities designed and carried on to promote the community's general health; and, subject to Sections A-3 and A-4, to support such other charitable, scientific, educational and hospital endeavors as the corporation may deem advisable.

Section A-3. Nonprofit Character.

This corporation is a nonprofit corporation and is not organized for the private gain of any person. This corporation is organized for, and its assets are irrevocably dedicated to, public and charitable purposes. The corporation does not and shall not have the power to distribute gains, profits or dividends to its Directors or officers, and no part of its net earnings shall inure to the benefit of any Director or officer of the corporation or to any other individual, but the corporation may compensate Directors and officers for the reasonable value of goods or services that they furnish to the corporation.

Section A-4. Disposition of Assets on Liquidation or Dissolution.

Upon the corporation's liquidation or dissolution, the Board of Directors shall, after paying or adequately providing for the corporation's liabilities, distribute the corporation's assets to one or more organizations exempt from tax under \$501(c)(3) of the Internal Revenue Code of 1986 or any amendment or successor thereto. The corporation's assets may not be distributed so as to inure directly or indirectly to the benefit of any Director or officer of the corporation, or to any other individual, or to any corporation, trust or organization whose net earnings inure to the benefit of any individual.

Section A-5. Non-discrimination.

This corporation, in the operation of its nonprofit comprehensive health care plan and related activities, shall conduct its activities and shall offer the services and benefits of its plan and other activities to all persons equally, without discrimination because of race, color, religion, sex, or national origin, and shall take affirmative action to maintain equality in such matters.

ARTICLE B

OFFICES

Section B-1. Principal Office.

The principal office of this corporation shall be located at the Ordway Building, Kaiser Center, One Kaiser Plaza, Oakland, Alameda County, California. The Board of Directors may change the location of the principal office at any time.

Section B-2. Principal Office in Ohio.

The place in this State where the principal office of the corporation is located is in Cleveland, Cuyahoga County, Ohio.

Section B-3. Other Offices.

This corporation may at any time establish other offices at such place or places as the Board of Directors may designate.

ARTICLE C

MEMBERS

Section C-1. Status of Membership.

Kaiser Foundation Health Plan. Inc., a California nonprofit corporation, is the sole member of this corporation.

Section C-2. Changes in Membership.

Changes in membership may be affected in such manner as the Board of Directors of this corporation, acting with the approval of a majority of the members of this corporation, shall determine.

Section C-3. Termination.

All rights and powers incident to membership shall cease upon termination of membership.

Section C-4. Dues, Assessments and Liabilities.

No member of this corporation shall be subject to any charge for dues or assessments, nor shall any member be in any way liable for any debt, liability or obligation of the corporation.

Section C-5. Meetings.

There shall be an annual meeting of members at the time of the first regular Board meeting each year. Meetings of members shall be governed by Section D-5, relating to meetings of Directors, except that meetings of members shall be held upon at least ten days' notice by first class mail.

Section C-6. Other Action by Members.

A majority of the members may, by written consent, take any action which the members of a Ohio nonprofit corporation are permitted to take without a meeting, and any action so taken shall have the same effect as, and be in all respects as valid as, action taken at a meeting duly held.

<u>Section C-7.</u> <u>Power and Authority of Members.</u>

Members shall have the maximum power and authority provided or permitted to members of Ohio nonprofit corporations under the law of the State of Ohio except that all such powers shall be exercised consistently with, and in furtherance of, the irrevocable dedication of the assets of this corporation to the purposes specified in Article A of these Regulations.

ARTICLE D

Directors

Section D-1. Power and Authority of Directors.

All corporate powers shall be exercised by or under the authority of the Board of Directors, and the Board shall control the business and affairs of the corporation. The Board shall have the maximum power and authority now or hereafter provided or permitted under Ohio law to directors of Ohio nonprofit corporations, acting as a board, except that all such powers shall be exercised consistently with, and in furtherance of, the irrevocable dedication of the assets of this corporation to the purposes specified in the Articles of Incorporation and in these Regulations.

The following powers of the corporation are illustrative only, and shall not be construed as constituting or implying any limitation upon powers exercisable by the Board or the corporation. The corporation shall have power to:

- (a) Commence, conduct and defend legal proceedings;
- (b) Adopt, use and alter a corporate seal, but failure to affix a seal shall not affect the validity of any act or instrument of the corporation;
- (c) Adopt, amend and repeal Regulations, subject to the power of the members to change or repeal the Regulations, except

that no change may be made by the Directors in the authorized manner of Directors;

- (d) Select, remove and prescribe powers, duties and compensation of officers, agents and employees, and require security for faithful service;
- (e) Qualify to conduct, and conduct activities anywhere in the world;
- (f) Acquire, hold, lease, encumber, convey, exchange, transfer upon trust, or otherwise dispose of real and personal property anywhere in the world, and receive and accept inter vivos or testamentary gifts of real or personal property, or both;
- (g) Borrow money, contract debts and issue bonds, debentures, notes or other evidences of indebtedness therefor, and secure the performance of obligations by mortgage or otherwise;
- (h) Acquire, subscribe for, hold, own, pledge and otherwise dispose of and represent shares of stock, bonds and securities of any other corporation, domestic or foreign;
- (1) Purchase or acquire its own bonds, debentures or other evidences of its indebtedness or obligations;
 - (j) Make donations for charitable purposes;

- (k) Act as director under any trust incidental to the principal objects of the corporation, and receive, hold, administer and expand funds and property subject to such trust;
- (1) Participate with others in any partnership, joint venture or other association, transaction or arrangement of any kind, whether or not such participation involves sharing or delegation of control with or to others;
- (m) Enter into any contracts, assume any obligations or do any other acts incidental to the conduct of corporate affairs or the attainment of corporate purposes;
- (n) Do all other acts necessary or expedient for administration of the affairs and attainment of the purposes of the corporation.

Section D-2. Number.

The number of Directors may be changed at any time by amendment of this Code of Regulations by the member. Until changed by the member, there shall be 14 Directors, one of whom shall be the Chairman of the Board of this corporation who shall serve ex officio and only so long as he or she holds such office, and one of whom shall be a senior officer of this corporation designated by the Chairman of the Board. Each Director, including the ex officio Director and the designated Director, shall be counted for purposes of determining the presence of a quorum and shall have one vote.

Section D-3. Vacancies.

A vacancy shall exist whenever a Director resigns, for any reason becomes unable to serve, is not re-elected as provided in Section D-4, is removed in accord with law, or is removed by the member at a meeting of the member's Board of Directors provided that the notice of the meeting of the member's Board of Directors indicates the purpose of the meeting. Additional vacancies shall arise whenever and to the extent that the number of Directors is increased as provided in Section D-2.

Section D-4. Election and Term of Office.

The twelve Directors other than the Chairman of the Board and the Director designated by the Chairman of the Board shall be divided into three classes of four Directors each. At the first regularly scheduled meeting of the member's Board of Directors in 1994 and each year thereafter, upon the expiration of the term of a class of Directors, Directors of that class shall be elected for a term which shall end at the later of the first regularly scheduled meeting of the member's Board of Directors in the third year following their election or when their successors are elected, except that in any event the term of a Director shall end on December 31 of the year in which he or she attains age 70, unless the Chairman of the Board specifically requests a Director to remain on the Board for an interim transition period, and the Chairman of the Board, upon his or her retirement or resignation as Chairman of the Board, shall be precluded from continuing to

serve as a Director. Any vacancy may be filled by the member, acting through its Board of Directors or its Executive Committee. Each Director shall hold office until the end of his or her term, or until he or she shall resign, become unable to serve as a Director, or be removed in accord with Section D-3.

Section D-5. Meetings.

- (a) <u>Place of Meetings</u>. Meetings shall be held at such place as the Board of Directors shall designate by resolution or written consent, but unless another place shall be so designated, all meetings shall be held at the principal office.
- (b) <u>Call of Meetings</u>. Meetings of the Board of Directors may be called at any time by the Chairman of the Board, or by any two Directors.
- (c) Notice. Notice of meetings shall be mailed, telegraphed, or personally delivered to each Director, at his or her usual business address. Meetings shall be held upon at least two days' notice by first class mail. Notice of a meeting need not be given to any Director who signs a waiver of notice or a written consent to holding the meeting or an approval of the minutes thereof whether before or after the meeting, or who attends the meeting without protesting, prior thereto or at its commencement, the lack of notice to such Director.
- (d) <u>Proof of Notice.</u> A statement showing service of any notice pursuant to Section D-5(c) may be entered in the minutes

of the meeting, and such entry shall be conclusive evidence that notice was duly given. Any waivers, consents and approvals given in lieu of regular notice shall be entered in the minutes of the meeting.

- (e) Quorum. 51% of the authorized number of Directors then in office shall constitute a quorum for the transaction of business. A meeting at which a quorum is initially present may continue to transact business notwithstanding the withdrawal of Directors, if any action taken is approved by at least a majority of the required quorum for such meeting.
- (f) Meetings Without Notice. If all Directors are present at any meeting, or if a quorum is present and all Directors not present either (1) sign a waiver of notice of such meeting, or a consent to the holding thereof, whether prior to or after the meeting, or (2) approve the minutes thereof, the transactions of such meeting shall be as valid as if conducted at a meeting regularly noticed.
- (g) Adjourned Meetings. A majority of the Directors present at any meeting, although less than a quorum, may adjourn the meeting from time to time, without further notice, until a quorum shall attend.

Section D-6. Action Without a Meeting.

Any action required or permitted to be taken by the Board of Directors may be taken without a meeting if all members of the

Board individually or collectively consent in writing to such action. Such action by written consent shall have the same force and effect as a unanimous vote of the Directors. Such written consent or consents shall be filed with the minutes of the proceedings of the Board.

ARTICLE E

OFFICERS

Section E-1. Officers.

The officers of the corporation shall be a Chairman of the Board, a President, one or more Executive or Senior Vice Presidents, a Secretary, a Chief Financial Officer, a Controller, a Treasurer and one or more Assistant Secretaries. These shall be the only officers of the corporation. The Chairman of the Board or the President of Kaiser Foundation Health Plan, Inc. may assign such other titles as may be appropriate to other individuals, including the title of Vice President, but such other individuals shall not be corporate officers. Only the Chairman of the Board must be a Director. One person may hold two or more offices, except that the same person may not be both President and Secretary.

Section E-2. Election or Appointment and Term of Office.

Each officer shall be elected by the Board of Directors at the first regular Board meeting each year or at any other meeting of the Board for a term of office which shall end at the first Board meeting the following year, or for such other term as the Board of Directors may specify, or until he or she shall resign or is not re-elected as provided in this section.

Section E-3. Subordinate Officials.

The Chairman of the Board or President may appoint or delegate authority to appoint such other officials as the needs of the corporation may require, each of whom shall hold office for such period, have such authority and perform such duties as the appointing officer, pursuant to authority conferred by the Board of Directors, may from time to time determine. These officials shall not be officers of the corporation. Such officials holding the title of Vice President shall have authority to sign contracts and other documents on behalf of the corporation.

Section E-4. Removal and Resignation.

Any officer may be removed, at any time, either with or without cause, by the Board of Directors. Except for officers chosen directly by the Board of Directors, any officer may be removed, either with or without cause, by any officer authorized to appoint such officer, or by any officer upon whom such power of removal may be conferred by the Board of Directors.

Any officer may resign at any time by giving written notice to the Board of Directors or to the President or to the Secretary. Any such resignation shall take effect upon receipt of such notice, or at any later time specified therein; unless otherwise specified therein, a resignation shall be effective without express acceptance.

Section E-5. Vacancies.

A vacancy in any office because of death, resignation, removal, inability or disqualification to serve, or otherwise, shall be filled in the manner provided in the Bylaws for regular election or appointment to such office.

Section E-6. Chairman of the Board.

The Chairman of the Board shall be the Chief Executive
Officer of the corporation and shall preside at all meetings of
the Board of Directors and shall have such other powers and
duties as the Board of Directors shall designate or the Bylaws
may provide.

Section E-7. President.

Subject to the direction of the Board of Directors and the Chairman of the Board, the President shall have the general powers and duties of management usually vested in the office of President of a corporation as well as such other powers and duties as the Board of Directors shall designate or as the Bylaws may provide. If there is not a Chairman of the Board of Directors in office and then acting, or if the Chairman of the Board is absent or disabled, the President shall perform all of the duties of the Chairman of the Board, and when so acting shall have the powers of, and be subject to the restrictions upon, the Chairman of the Board, as prescribed in the Bylaws or by the

Board of Directors.

The President shall have such other powers and perform such other duties as the Board of Directors shall designate or as the Bylaws may provide.

Section E-8. Executive or Senior Vice President.

Each Executive or Senior Vice President shall assist the President in the performance of his or her duties. In the absence or disability of the President, the Executive Vice President, if one is designated by the Board, or in the absence of such designation, the Senior Vice Presidents in order of their rank as fixed by the Board of Directors, shall perform the duties of the President, and when so acting, shall have all the powers of, and be subject to all restrictions upon, the President. Each Executive or Senior Vice President shall have such other powers and duties as the Board of Directors shall designate or as the Bylaws may provide.

Section E-9. Secretary.

The Secretary shall be responsible for keeping a book of , minutes at One Kaiser Plaza, Oakland, California or at such other place as the Board of Directors shall designate, of all meetings and all formal actions of the Board of Directors. Minutes of meetings shall reflect: the time and place of the meetings; whether they were held pursuant to notice, waiver, or consent; if

they were held pursuant to notice, the notice given; the names of persons present; the business transacted, and such other matters as the Board of Directors shall designate.

The Secretary shall be responsible for giving notice of meetings as required by the Bylaws. He or she shall maintain safe custody of the seal, shall make certificates and authenticate documents reflecting actions of the corporation as may be required or desirable, and shall have such other powers and perform such other duties as the Board of Directors shall designate or as the Bylaws may provide. Subject to the supervision of the Secretary, any Assistant Secretary may perform all or any part of the duties of the Secretary.

Section E-10. Chief Financial Officer.

The Chief Financial Officer shall supervise banking relations, including the handling, depositing and disbursing of all funds. The Chief Financial Officer shall render to the President and to the Board of Directors, on request, an account of his or her transactions as Chief Financial Officer and of the financial condition of the corporation. The Chief Financial Officer shall have such other powers and perform such other duties as the Board of Directors shall designate or as the Bylaws may provide. Subject to the supervision of the Chief Financial Officer, any other official may perform all or any part of the duties of the Chief Financial Officer.

ARTICLE F

COMMITTEES

Section F-1. Provision for Committees.

The corporation shall have an Executive Committee and such other committees as the Board of Directors may appoint to advise and assist the Board of Directors in managing the corporation's affairs.

Section F-2. Action Without a Meeting.

- (a) By Unanimous Consent. Any action required or permitted to be taken by a committee of the Board of Directors may be taken without a meeting if all members of the committee individually or collectively consent in writing to such action. Such action by written consent shall have the same force and effect as a unanimous vote of the committee. Such written consent or consents shall be filed with the minutes of the proceedings of the committee.
 - (b) By Telephone. Meetings of committees may be held by telephone. A Director may participate in a meeting of a committee by means of a conference telephone or similar communication equipment enabling all Directors participating in the meeting to hear on

another at the same time; participation in such a meeting shall constitute presence in person at such meeting.

Section F-3. Executive Committee.

- (a) <u>Composition</u>. The Executive Committee shall consist of six (6) Directors, who shall be selected by the Board of Directors, and who shall continue as members of the Executive Committee at the pleasure of the Board.
- Authority and Duties. The Executive Committee shall have authority to act for the Board of Directors between Board meetings. Unless otherwise provided by law, the Board of Directors, the Articles of Incorporation, or the Regulations, any action taken by the Executive Committee shall have the same force and effect as though taken by a majority of Directors present at a meeting of the Board duly called and held pursuant to the Regulations, except that the Executive Committee shall have no authority to: (1) Fill vacancies on the Board or the Executive Committee; (2) Fix the compensation of directors for serving on the Board or any committee; (3) Adopt, amend or repeal Regulations; (4) Amend or repeal any resolution of the Board which by its express terms is not so amendable or repealable; (5) Appoint committees of the Board or appoint the members thereof; (6) Change roles, titles or employment status of corporate officers; or (7) Approve any aspect of a transaction involving the corporation when a Director has a material financial interest

in that transaction, except as expressly provided by law.

(c) <u>Conduct of Business</u>. A quorum of the Executive Committee shall consist of three (3) committee members. The Executive Committee shall report to the Board of Directors regarding its actions and decisions.

Section F-4. Other Committees.

The Board of Directors may establish such other committees, of such composition and with such duties, authority and manner of conducting business, as the Board may from time to time deem advisable. Each such committee shall consist of three or more Directors, who shall be selected by the Board of Directors.

ARTICLE G

REGIONAL ADVISORY BOARD

Section G-1. Membership.

The corporation shall have a Regional Advisory Board ("Advisory Board"), consisting of Permanent Participants and Regular Participants. The Permanent Participants, comprising the permanent ex-officio membership of the Advisory Board, shall be the corporation's President (who shall be the Chairman of the Advisory Board), the corporation's Health Plan Manager, and the Executive Medical Director of the Ohio Permanente Medical Group, an Ohio partnership of physicians, or any corporate successor thereto ("Medical Group"). The Regular Participants shall consist of up to twenty-five (25) individuals selected by the Permanent Participants. The individuals so selected shall, to the extent possible, be representative of a cross section of the membership enrolled in this corporation's Health Plan ("enrollees") although one or more individuals may be designated because of their special knowledge of group practice prepayment plans. Each Regular Participant shall serve an initial term expiring December 31st of the year in which selected, and the term of a Regular Participant may be renewed annually each December 31st without any limit on the number of terms served.

Section G-2. Functions.

The functions of the Advisory Board shall be to consider (and through the Chairman to report periodically to this corporation's Board of Directors upon) matters such as benefits for enrollees, accessibility and availability of services to enrollees, the extent of and other matters relating to said enrollment, plans for additional facilities to serve enrollees, and actual or proposed federal, state and local legislation affecting the Kaiser-Permanente Medical Care Program and having an impact on enrollees, as well as such related subjects as from time to time the Advisory Board may find it appropriate to consider.

Section G-3. Meetings.

The Advisory Board will meet on the call of the Chairman as often as is deemed necessary and appropriate but in no event less often than annually, and the person calling the meeting shall invite thereto such representatives of this corporation, the Medical Group, Health Plan, Kaiser Foundation Hospitals (a California nonprofit corporation) and such other representatives as the Chairman considers appropriate.

ARTICLE H

INDEMNIFICATION OF DIRECTORS, OFFICERS, EMPLOYEES, AND OTHER AGENTS

Section H-1. Definitions.

As used in this Article:

- (a) "agent" means any person who is or was a Director, officer, employee, volunteer or other agent of this corporation, or who is or was serving at the request of this corporation as a director, director, officer, employee, volunteer or agent of another foreign or domestic corporation, partnership, joint venture, trust or other enterprise, or who was a director, officer, employee, volunteer or agent of a foreign or domestic corporation which was a predecessor corporation of this corporation or of another enterprise at the request of the predecessor corporation;
- (b) "proceeding" means any threatened, pending, or completed action, suit or proceeding, whether civil, criminal, administrative, or investigative;
- (c) "special proceeding" means an action by or in the right of this corporation to procure a judgment in its favor;
- (d) "<a href="expenses" includes attorneys" fees and any expenses of establishing a right to indemnification.

Section H-2. Agent Successful on the Merits.

To the extent that an agent of this corporation has been successful on the merits or otherwise in the defense of any proceeding or special proceeding by reason of the fact that the agent is or was an agent of the corporation, or in defense of any claim, issue, or matter therein, this corporation shall indemnify the agent against expenses actually and reasonably incurred by the agent in connection therewith.

Section H-3. Proceedings Other Than Special Proceedings When Agent Not Successful on the Merits.

Upon making the determination required by Section H-5, and subject to Section H-7, this corporation shall indemnify any agent who was or is a party or is threatened to be made a party to any threatened, pending or completed proceeding other than a special proceeding by reason of the fact that the agent is or was an agent of the corporation, against expenses, judgments, fines, settlements and other amounts actually and reasonably incurred in connection with any such proceeding, if the agent acted in good faith and in a manner the agent reasonably believed to be in or not opposed to the best interests of this corporation and, with respect to any criminal proceeding, the agent had no reasonable cause to believe his or her conduct was unlawful. The termination of any proceeding by judgment, order, settlement,

conviction or upon a plea of nolo contendere or its equivalent shall not, of itself, create a presumption that the agent did not act in good faith and in a manner which the agent reasonably believed to be in or not opposed to the best interests of this corporation, and with respect to any criminal proceeding, that the agent had reasonable cause to believe that his or her conduct was unlawful.

Section H-4. Special Proceedings When Agent Not Successful on the Merits.

Upon making the determination required by Section H-5, and subject to Section H-7, this corporation shall indemnify any agent who was or is a party or is threatened to be made a party to any threatened, pending or completed special proceeding by reason of the fact that the agent is or was an agent of this corporation, against expenses actually and reasonably incurred by the agent in connection with the defense or settlement of such a proceeding if the agent acted in good faith, and in a manner the agent believed to be in or not opposed to the best interests of the corporation.

No indemnification shall be made under this section with respect to any action or suit in which liability is asserted against the agent pursuant to \$1702.12(E)(2)(b) and \$1702.55 of the Ohio Revised Code, or with respect to any claim, issue or

matter as to which the agent shall have been adjudged to be liable for negligence or misconduct in the performance of the agent's duty to this corporation, unless and only to the extent that the Court of Common Pleas or the court in which such proceeding is or was brought shall determine upon application that, despite the adjudication of liability but in view of all the circumstances of the case, the agent is fairly and reasonably entitled to indemnity for such expenses as the court shall deem proper.

Section H-5. Authorization of Indemnification When Agent Not Successful on the Merits.

Any indemnification under Section H-3 or H-4, unless ordered by a court, shall be made by this corporation only upon a determination that indemnification of the agent is proper in the circumstances because the agent has met the applicable standard of conduct set forth in Section H-3 or H-4, by:

- (a) A majority vote of a quorum consisting of Directors who were not and are not parties to or threatened with any such proceeding; or
- (b) If such a quorum is not obtainable, or if a majority of a quorum of disinterested Directors so directs, in a written opinion by independent legal counsel other than an attorney, or a firm having associated with it an attorney, who has been retained

by, or who has performed services for, the corporation or any person to be indemnified within the past five years; or

- (c) By the members; or
- (d) By the Court of Common Pleas or the court in which such proceeding was brought.

The corporation shall promptly communicate any determination made pursuant to subsection (a) or (b) of this section to the person who threatened or brought the action if such action is by or in the right of the corporation.

Section H-6. Advance of Expenses.

Expenses incurred in defending any proceeding may be advanced by this corporation before the final disposition of the proceeding upon receipt of an undertaking satisfactory in form and amount to the Board of Directors by or on behalf of the agent to repay the amount of the advance unless it is determined ultimately that the agent is entitled to be indemnified as authorized in this Article.

Section H-7. Other Limitations on Indemnification.

Nothing in this Article shall affect any other right to indemnification to which an agent may be entitled by contract or otherwise, both as to action in his or her official capacity and as to action in another capacity while holding such office.

Section H-8. Indemnification to the Full Extent of Law.

Notwithstanding the above provisions, the corporation shall indemnify agents to the fullest extent permitted by law.

Section H-9. Insurance.

This corporation shall have the power to purchase and maintain insurance or furnish similar protection, including, but not limited to trust funds, letters of credit, or self insurance, for or on behalf of any agent against any liability asserted against and incurred by the agent in such capacity or arising out of the agent's status as such, whether or not the corporation would have the power to indemnify the agent against such liability under the provisions of this Article.

ARTICLE I

MISCELLANEOUS

Section I-1. Inspection of Corporate Records.

The books of account, minute book and records of committee actions and proceedings shall be open to inspection upon written demand by any Director or member at any reasonable time and for any purpose reasonably related to his or her interests as a Director or member. Such inspection may be made in person, or by any agent or attorney designated by the Director or member, and shall include the right to make extracts and copies. Demands for inspection may be presented to the Board of Directors at any meeting, or to the President or Secretary, or if such demand relates to the books of account, to the Controller. Each such demand may be granted by the officer to whom it is presented, but unless so granted, shall be referred by such officer to the Board of Directors.

Section I-2. Execution or Endorsement of Checks.

All checks, drafts or other orders for payment of money, and notes or other evidences of indebtedness issued in the name of or payable to the corporation shall be signed or endorsed by such person or persons, and in such manner, as the Board of Directors shall from time to time by resolution determine.

Section I-3. Execution of Contracts.

The Board of Directors may authorize any officer or officers and any agent or agents to enter into any contract or execute any instrument in the name of, and on behalf of, the corporation, and such authority may be general or limited to specified instances.

No officer, agent or employee shall have any power or authority to bind or obligate the corporation by any commitment, contract or engagement, or to pledge its credit or render it liable for any purpose or in any amount unless duly authorized by the Board of Directors.

Section I-4. Regulations, Minutes and Membership Records.

The original or a certified copy of the Regulations, together with all amendments thereto, and the minute book shall be kept at the principal office of the corporation and shall be subject to inspection as provided in Section H-1.

Section I-5. Representation of Shares of Other Corporations.

The President or any Vice President, acting together with the Secretary or any Assistant Secretary of this corporation, are authorized to vote, represent and exercise on behalf of this corporation all rights incident to any and all shares of stock of any other corporation or corporations which may be owned by or stand in the name of this corporation, and such authority may be exercised by such officers in person or by any person authorized

by proxy or power of attorney duly executed by such officers.

Section I-6. Fiscal Year

The fiscal year of this corporation shall be the calendar year.

Section I-7. Annual Report.

No annual report shall be required in connection with the activities of the corporation except as required by the laws of Ohio.

ARTICLE J

AMENDMENT AND EFFECT OF REGULATIONS

Section J-1. Previous Regulations Superseded.

These amended Regulations supersede the previous Regulations of this corporation and all amendments thereto.

Section J-2. Effect of Regulations.

These Regulations are in all respects subordinate to, and shall be controlled by, applicable provisions of the laws of the State of Ohio, other applicable laws, and the Articles of Incorporation of this corporation. Except as these Regulations may be inconsistent with said laws and Articles, they shall regulate the conduct of the business and affairs of this corporation with respect to all matters to which they relate.

Section J-3. Manner of Amendment.

- (a) In any Legal Way. These Regulations may be amended in any manner now or hereafter provided by the applicable provisions of the laws of the State of Ohio, except as provided in Section J-3(b) of this Article.
- (b) <u>By Directors.</u> These Regulations may be amended by a majority vote of the Board of Directors at any meeting, provided a quorum of the Board is present and voting, except that those portions of Article D, Section D-4 of these Regulations regarding

election of Directors may be amended only by the member.

34-0922268

ATTACHMENT FOR.

FORM 990 PART VI, QUESTION 80 - RELATED AND AFFILIATED ENTITIES AND/OR

FORM 1120, SCHEDULE K, QUESTIONS 3, 4 AND 5

KAISER FOUNDATION HEALTH PLAN, INC. AND KAISER FOUNDATION HOSPITALS, CALIFORNIA NOT-FOR PROFIT CORPORATIONS, EXEMPT FROM INCOME TAX UNDER INTERNAL REVENUE CODE SECTION 501(C)(3), HAVE A CONTROLLING OR AFFILIATED INTEREST IN THE FOLLOWING CORPORATIONS AS OF DECEMBER 31, 2002

| EMPLOYER ID# | ENTITY NAME | | DIRECT & INDIRECT % CONTROLLED BY KFHP, INC |
|---------------|--|------------|---|
| | ENTITIES THAT ARE OWNED DIRECTLY OR INDIRECTLY BY KAIS | | |
| | HEALTH PLAN, INC, THAT ARE ALSO EXEMPT FROM FEDERAL RC SECTION 501(C)(3) | INCOME | |
| TAX GIBER III | (0.020.1011.001(0)(0) | | |
| 93-0798039 | KAISER FOUNDATION HEALTH PLAN OF THE NORTHWEST | | 100% |
| 84-0591617 | KAISER FOUNDATION HEALTH PLAN OF COLORADO | | 100% |
| 48-0924402 | KAISER FOUNDATION HEALTH PLAN OF KANSAS CITY, INC | | 100% |
| 58-1592076 | KAISER FOUNDATION HEALTH PLAN OF GEORGIA, INC | | 100% |
| 56-1421313 | KAISER FOUNDATION HEALTH PLAN OF NORTH CAROLINA | | 100% |
| 52-0954463 | KAISER FOUNDATION HEALTH PLAN OF THE MID-ATLANTIC ST | TATES, INC | 100% |
| 34-0922268 | KAISER FOUNDATION HEALTH PLAN OF OHIO | | 100% |
| 23-7425486 | COMMUNITY HEALTH PLAN | | 100% |
| 94-3299124 | KAISER HEALTH PLAN ASSET MANAGEMENT, INC | | 100% |
| 93-0954562 | KAISER HEALTH ALTERNATIVES | | 100% |
| 94-3299123 | CAMP BOWIE SERVICE CENTER | | 100% |
| 93-0480268 | OHP | | 100% |
| 91-2171891 | LOKAHI ASSURANCE, LTD | | 100% |
| | | | |
| | | | |
| | INTITIES THAT ARE OWNED DIRECTLY OR INDIRECTLY BY KAIS | SER . | |
| | HEALTH PLAN, INC. THAT ARE TAXABLE FOR FEDERAL AND | | |
| STATE INCOM | E TAX PURPOSES | | |
| 02 0220700 | OAK TREE ACCURANCE LTD | | 100% |
| 03-0329760 | OAK TREE ASSURANCE, LTD | | 100% |
| 94-3113684 | KAISER PERMANENTE HEALTH ALTERNATIVES, INC | | |
| 94-3259432 | KAISER PROPERTIES SERVICES, INC | | 100% |
| 91-1814507 | CHP COMPANIES, INC | | 100% |
| | | | |
| KAISER FOUN | DATION HEALTH PLAN, INC. IS AFFILIATED WITH THE FOLLOWI | ING | |
| | MPT FROM FEDERAL INCOME TAX UNDER IRC SECTION 501(C)(| | |
| | . , , | · - | |
| 94-1105628 | KAISER FOUNDATION HOSPITALS | *(1) | N/A |
| 94-3299125 | KAISER HOSPITALS ASSET MANAGEMENT, INC | *(2) | N/A |
| | | | |

ATTACHMENT FOR:

FORM 990 PART VI, QUESTION 80 - RELATED AND AFFILIATED ENTITIES AND/OR

FORM 1120, SCHEDULE K, QUESTIONS 3, 4 AND 5

KAISER FOUNDATION HEALTH PLAN, INC. AND KAISER FOUNDATION HOSPITALS, CALIFORNIA NOT-FOR PROFIT CORPORATIONS, EXEMPT FROM INCOME TAX UNDER INTERNAL REVENUE CODE SECTION 501(C)(3), HAVE A CONTROLLING OR AFFILIATED INTEREST IN THE FOLLOWING CORPORATIONS AS OF DECEMBER 31, 2002

| EMPLOYER | ENTITY NAME | _ | DIRECT & INDIRECT % CONTROLLED BY KFHP, INC | | | | |
|---|---|--|---|--|--|--|--|
| KAISER FOUNDATION HEALTH PLAN, INC. IS AFFILIATED WITH THE FOLLOWING ENTITIES THAT ARE NOT EXEMPT FROM FEDERAL INCOME TAX | | | | | | | |
| 94-3245176 94-3292262 68-0444615 91-2166347 94-3203402 N/A | KAISER PERMANENTE INTERNATIONAL KAISER PERMANENTE VENTURES CARETOUCH, INC KP ONCALL, LLC KAISER PERMANENTE INSURANCE COMPANY HAMI - COLORADO, LLC | *(2) *(2) *(2) *(2) *(3) *(4) | N/A N/A N/A N/A 50% N/A | | | | |
| 94-3289704 NOTE *(1) | KAIVEST I, LLC *(5) N/A KAISER FOUNDATION HOSPITALS, A CALIFORNIA NOT-FOR-PROFIT CORPORATION, EXEMPT FROM INCOME TAX UNDER THE PROVISIONS OF INTERNAL REVENUE CODE SECTION 501(C)(3), SHARES A COMMON BOARD OF DIRECTORS WITH KAISER FOUNDATION HEALTH PLAN, INC | | | | | | |
| NOTE *(2) | THESE ENTITIES ARE SUBSIDIARIES OF KAISER FOUNDATION HOSPITAL KAISER PERMANENTE INSURANCE COMPANYIS A NON-EXEMPT PROPE CASUALTY INSURANCE COMPANY OF WHICH 100% OF THE PREFERRED 50% OF THE COMMON STOCK ARE OWNED BY KAISER FOUNDATION HE. THE REMAINING 50% OF COMMON STOCK IS OWNED BY NON-AFFILIATE PHYSICIANS PRACTICE GROUPS | RTY AN STOCK ALTH PL | AND | | | | |
| NOTE *(4) | HAMI - COLORADO, LLC - THE SOLE MEMBER OF THIS LIMITED LIABILITY IS KAISER HOSPITALS ASSET MANAGEMENT, INC | COMP | ANY | | | | |
| NOTE *(5) | KAIVEST I, LLC - THIS CASH POOLING INVESTMENT FUND HAS THREE AI KAISER FOUNDATION HEALTH PLAN OF COLORADO, KAISER FOUNDATION HEALTH PLAN OF THE NORTHWEST, and KAISER FOUNDATION HEALTH PLAN OF THE MID-ATLANTIC STATES, | | ED MEMBERS | | | | |

THE COMMON ADDRESS FOR ALL ENTITIES LISTED ABOVE IS.

C/O KAISER FOUNDATION HEALTH PLAN, INC PROGRAM OFFICE CONTROLLER'S DEPARTMENT - TAX ONE KAISER PLAZA, 1550 ORDWAY OAKLAND, CA 94612

KAISER FOUNDATION HEALTH PLAN OF OHIO 34-0922268 12/31/2002

STATEMENT FORM 990 PART VIII RELATIONSHIP OF ACTIVITIES TO EXEMPT PURPOSE

LINE NUMBER - 93

93A MEMBERS HEALTH CARE PREMIUMS

Revenue received from or on behalf of members for prepaid health care coverage under the prepaid HMO health and medical care plans offered by Health Plan to its members Revenue excluded under the provisions of Revenue Ruling 68-27

93B SUPPLEMENTAL CHARGES

Revenue received for co-payments from or on behalf of members for health care services provided under the plans refereed to in 93A above Revenue excluded under the provisions of internal revenue regulation 1 501(c)(3)-1

93C NON-PLAN AND INDUSTRIAL REVENUE

Revenue received from non-members for health care and from outside insurers for reimbursement for health care services provided to members for work-related injuries or conditions

Revenue excluded under the provisions of internal revenue regulation 1 501(c)(3)-1

93F MEDICARE/MEDICAID PAYMENTS

Revenue received from the Social Security Administration for medical and health care services provided to Plan members covered under Part B of Medicare Revenue excluded under the provisions of internal revenue regulation 1 501(c)(3)-1

KAISER FOUNDATION HEALTH PLAN OF OHIO 34-0922268 12/31/2002

INFLUENCE LEGISLATIVE MATTER FORM 990, SCHEDULE A, PART III, LINE 1

The Organization is a member of the Kaiser Permanente Medical Care Program and participated in and benefited from lobbying activities conducted at the national level by the parent organization for the benefit of its members and of the healthcare industry as a whole. As an organization generally exempt from income tax under Internal Revenue Code Section 501(c)(3), Health Plan did not participate in nor conduct political campaigns.

Health Plan may have to an insubstantial degree made comments or statements concerning legislation which may affect the health care industry. Health Plan has not intervened in any political campaign. Health Plan may have possibly engaged in telephone conversations and/or written letters to various federal, state, and local officials regarding matters which affected the healthcare industry as a whole. The amount of time and money involved in these activities was negligible.

Health Plan has several employees and/or may retain a full time professional political consultants to represent Health Plan's interests in various legislative and regulatory bodies and from time-to-time to keep informed of Federal and State legislation having an impact on Health Plan's charitable activities as an exempt Health Maintenance Organization

These individuals attempt to ensure that proposed legislation and enacted laws are compatible with the interests of Health Plan and its members by performing the following activities

- Collecting, analyzing and distribution within the Organization, public and private policy recommendations regarding proposed legislation and enacted laws that affect the operation of Health Plan and its ability to provide quality health and medical care services to its members in a cost effective environment
- Providing appropriate informational materials to legislators and to their staffs that pertain to matters of common interest in the health care community and in the not-for-profit community
- * Also by preparing written and oral testimony, these individuals appear at legislative hearings, monitor legislative proceedings and meet with legislators and/or their staffs regarding issues pertinent to the mission of Health Plan. Those individuals appearing at such hearings and meetings for and on behalf of Health Plan often are representing the interests of common interest groups as well as the interests of the members of Health Plan.
- Other employees and officers perform services by delivering speeches at various public and private functions and in serving as faculty for numerous health care related educational programs

KAISER FOUNDATION HEALTH PLAN OF OHIO 34-0922268 12/31/2002

STATEMENT ABOUT ACTIVITIES STATEMENT SCH A P III LN 2 FORM 990, SCHEDULE A, PART III, LINE 2

As reflected in Statement Line 80, Kaiser Foundation Health Plan of Ohio (Health Plan) was affiliated with other organizations, exempt and non-exempt. During the year, in the normal course of business in carrying out the exempt charitable care purpose of the organization, Health Plan may have entered into leases, the extension of credit, and/or the furnishing of services, goods and/or facilities with these organizations. Health Plan may have also entered into these types of transactions with organizations whose officers were board members of Health Plan, such transactions would have been at a price which is not less than cost or more than fair-market-value.

KAISER FOUNDATION HEALTH PLAN OF OHIO 34-0922268 12/31/2002

STATEMENT ABOUT ACTIVITIES STATEMENT SCH A P III LN 3 FORM 990, SCHEDULE A, PART III, LINE 3

Grants made during the year are to organizations qualified under Internal Revenue Code Section 501(c)(3)

All programs that are supported are for the betterment of the health of the members of Kaiser Permanente and/or the health of the members of the communities in which Kaiser Foundation Health Plan of Ohio conducts its activities

Health Plan provides its services directly to the members of the community through its mostly prepaid health care programs. For an explanation of these programs and those that benefit the community, please refer to the "Kaiser Permanente Community Benefit Report for Kaiser Foundation Health Plan of Ohio for 2002" which is included as a part of this return

CONSENT TO APPORTIONMENT PLAN FOR TAXABLE INCOME BRACKETS BY CONTROLLED GROUP MEMBERS

PURSUANT TO REGULATIONS ISSUED UNDER INTERNAL REVENUE CODE SECTION 1561(a)(1), WITH RESPECT TO THE TAXABLE INCOME BRACKETS AS ENUMERATED IN THE TAX TABLES AT IRC SECTION, 11(b), THE UNDERSIGNED CORPORATIONS, COMPONENT MEMBERS OF A CONTROLLED GROUP OF CORPORATIONS, WITHIN THE MEANING OF IRC SECTION 1563(a), HEREBY CONSENT TO THE APPORTIONMENT PLAN LISTED BELOW WITH RESPECT TO THE TAXABLE YEAR OF EACH CORPORATION THAT INCLUDES DECEMBER 31, 2002

| | | | Tax Bracket Allocations | | | | |
|-----------------|---|---------|-------------------------|----------|----------|-----------|-------------|
| EMPLOYER | | TAX | First | Next | Next | Next | Next |
| TAX ID# | NAME AND ADDRESS | FORM | \$50,000 | \$25,000 | \$25,000 | \$235,000 | \$9,665,000 |
| | TAX BRACKET RAT | E | 15% | 25% | 34% | 39% | 34% |
| KAISER FOUN | IDATION HEALTH PLAN GROUP | | | | | | |
| 94 1340523 | KAISER FOUNDATION HEALTH PLAN, INC | 990-T | \$44 000 | \$22,000 | \$22 000 | \$206 800 | \$9 015 000 |
| 93-0798039 | KAISER FOUNDATION HEALTH PLAN OF THE NORTHWEST | 990-T | NONE | NONE | NONE | NONE | NONE |
| 84-0591617 | KAISER FOUNDATION HEALTH PLAN OF COLORADO | 990-T | NONE | NONE | NONE | NONE | NONE |
| 48-0924402 | KAISER FOUNDATION HEALTH PLAN OF KANSAS CITY, INC. | 990-T | NONE | NONE | NONE | NONE | NONE |
| 58-1592076 | KAISER FOUNDATION HEALTH PLAN OF GEORGIA INC | 990-T | NONE | NONE | NONE | NONE | NONE |
| 56 1421313 | KAISER FOUNDATION HEALTH PLAN OF NORTH CAROLINA | 990-T | NONE | NONE | NONE | NONE | NONE |
| 52-0954463 | KAISER FOUNDATION HP OF THE MID ATLANTIC STATES INC | 990-T | NONE | NONE | NONE | NONE | NONE |
| 34-0922268 | KAISER FOUNDATION HEALTH PLAN OF OHIO | 990-T | NONE | NONE | NONE | NONE | NONE |
| 23-7425486 | COMMUNITY HEALTH PLAN | 990 T | NONE | NONE | NONE | NONE | NONE |
| 94-3299124 | KAISER HEALTH PLAN ASSET MANAGEMENT, INC | 990-T | NONE | NONE | NONE | NONE | NONE |
| 93-0954562 | KAISER HEALTH ALTERNATIVES | 990-T | NONE | NONE | NONE | NONE | NONE |
| 94-3299123 | CAMP BOWIE SERVICE CENTER | 990-T | NONE | NONE | NONE | NONE | NONE |
| 93-0480268 | OHP | 990-T | NONE | NONE | NONE | NONE | NONE |
| 91 2171891 | LOKAHI ASSURANCE, LTD | 990-T | NONE | NONE | NONE | NONE | NONE |
| 03-0329760 | OAK TREE ASSURANCE LTD | 1120-PC | NONE | NONE | NONE | NONE | \$300,000 |
| 94-3113684 | KAISER PERMANENTE HEALTH ALTERNATIVES | 1120 | \$6 000 | \$3 000 | \$3 000 | \$28,200 | \$350 000 |
| 94 3259432 | KAISER PROPERTIES SERVICES, INC | 1120 | NONE | NONE | NONE | NONE | NONE |
| 91-1814507 | CHP COMPANIES INC | 1120 | NONE | NONE | NONE | NONE | NONE |
| 94 3289704 | KAIVEST I LLC | 1065 | NONE | NONE | NONE | NONE | NONE |
| KAISER FOUR | NDATION HOSPITALS GROUP | | | | | | |
| 94 1105628 | KAISER FOUNDATION HOSPITALS | 990-T | NONE | NONE | NONE | NONE | NONE |
| 94 3299125 | KAISER HOSPITALS ASSET MANAGEMENT INC | 990-T | NONE | NONE | NONE | NONE | NONE |
| 94 3245176 | KAISER PERMANENTE INTERNATIONAL | 1120 | NONE | NONE | NONE | NONE | NONE |
| 94-3292262 | KAISER PERMANENTE VENTURES | 1120 | NONE | NONE | NONE | NONE | NONE |
| 68-0444615 | CARETOUCH INC | 1120 | NONE | NONE | NONE | NONE | NONE |
| 91-2166347 | KP ONCALL LLC (DISREGARDED ENTITY) | | NONE | NONE | NONE | NONE | NONE |
| N/A | HAMI - COLORADO LLC (DISREGARDED ENTITY) | | NONE | NONE | NONE | NONE | NONE |
| | TOTAL OF EACH BRACKET ALLOCATED | | \$50,000 | \$25,000 | \$25,000 | \$235,000 | \$9,665,000 |

THE COMMON ADDRESS OF ALL ENTITIES JOINING IN THIS ELECTION OF APPORTIONMENT AS LISTED ABOVE IS

C/O KAISER FOUNDATION HEALTH PLAN, INC PROGRAM OFFICE CONTROLLER'S DEPARTMENT - TAX ONE KAISER PLAZA, 1550 ORDWAY OAKLAND, CA 94612

AUTHORIZATION CONSENT FOR ALLOCATION ON BEHALF OF ALL MEMBER COMPANIES

DEBORAH STOKES VICE PRESIDENT AND CONTROLLER OF

KAISER FOUNDATION HEALTH PLAN INC. AND OF KAISER FOUNDATION HOSPITALS
THE ULTIMATE PARENT CORPORATION AND/OR SOLE MEMBER OF EACH OF THE ABOVE
ENTITIES JOINING IN THIS ELECTION OF APPORTIONMENT

CONSENT TO APPORTIONMENT PLAN FOR ALTERNATIVE MINIMUM TAX EXEMPTION BY CONTROLLED GROUP MEMBERS

PURSUANT TO REGULATIONS ISSUED UNDER INTERNAL REVENUE CODE SECTION 1561(a)(3), THE UNDERSIGNED CORPORATIONS, COMPONENT MEMBERS OF A CONTROLLED GROUP OF CORPORATIONS, WITHIN THE MEANING OF IRC SECTION 1563(a), HEREBY CONSENT TO THE APPORTIONMENT PLAN LISTED BELOW WITH RESPECT TO THE TAXABLE YEAR OF EACH CORPORATION WHICH INCLUDES DECEMBER 31, 2002

| KAISER FOUNDATION HEALTH PLAN GROUP. 94-1340523 KAISER FOUNDATION HEALTH PLAN, INC 990-T \$40,000 93-0798039 KAISER FOUNDATION HEALTH PLAN OF THE NORTHWEST 990-T NONE 84-0924402 KAISER FOUNDATION HEALTH PLAN OF COLORADO 990-T NONE 58-1592076 KAISER FOUNDATION HEALTH PLAN OF KANSAS CITY, INC 990-T NONE 56-1421313 KAISER FOUNDATION HEALTH PLAN OF GEORGIA, INC 990-T NONE 52-0954463 KAISER FOUNDATION HEALTH PLAN OF NORTH CAROLINA 990-T NONE 23-7425486 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 94-3299124 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 94-3299125 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 94-3299126 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 94-3299127 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 94-3299128 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 94-3299125 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE < | EMPLOYER | | APPLIC- ABLE TAX | ALLOCATION OF \$40,000 | | | | |
|--|---------------------------------------|--|------------------------|------------------------------|--|--|--|--|
| 94-1340523 KAISER FOUNDATION HEALTH PLAN, INC 990-T \$40,000 93-0798039 KAISER FOUNDATION HEALTH PLAN OF THE NORTHWEST 990-T NONE 84-0591617 KAISER FOUNDATION HEALTH PLAN OF COLORADO 990-T NONE 48-0924402 KAISER FOUNDATION HEALTH PLAN OF KANSAS CITY, INC 990-T NONE 58-1592076 KAISER FOUNDATION HEALTH PLAN OF GEORGIA, INC 990-T NONE 56-1421313 KAISER FOUNDATION HEALTH PLAN OF NORTH CARCIINA 990-T NONE 52-0954463 KAISER FOUNDATION HEALTH PLAN OF THE MID-ATLANTIC STATES INC 990-T NONE 34-0922268 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 23-7425486 COMMUNITY HEALTH PLAN 990-T NONE 24-3299124 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 94-3299125 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 94-3299126 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 94-3299125 KAISER FOUNDATION HOSE 990-T NONE 94-3299125 KAISER PERMANENTE HEALTH ALTERNATIVES | TAX ID# | NAME AND ADDRESS | FORM | EXEMPTION | | | | |
| 94-1340523 KAISER FOUNDATION HEALTH PLAN, INC 990-T \$40,000 93-0798039 KAISER FOUNDATION HEALTH PLAN OF THE NORTHWEST 990-T NONE 84-0591617 KAISER FOUNDATION HEALTH PLAN OF COLORADO 990-T NONE 48-0924402 KAISER FOUNDATION HEALTH PLAN OF KANSAS CITY, INC 990-T NONE 58-1592076 KAISER FOUNDATION HEALTH PLAN OF GEORGIA, INC 990-T NONE 56-1421313 KAISER FOUNDATION HEALTH PLAN OF NORTH CARCIINA 990-T NONE 52-0954463 KAISER FOUNDATION HEALTH PLAN OF THE MID-ATLANTIC STATES INC 990-T NONE 34-0922268 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 23-7425486 COMMUNITY HEALTH PLAN 990-T NONE 24-3299124 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 94-3299125 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 94-3299126 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 94-3299125 KAISER FOUNDATION HOSE 990-T NONE 94-3299125 KAISER PERMANENTE HEALTH ALTERNATIVES | KAISER FOUNDATION HEALTH PLAN GROUP | | | | | | | |
| 93-0798039 KAISER FOUNDATION HEALTH PLAN OF THE NORTHWEST 990-T NONE 84-0591617 KAISER FOUNDATION HEALTH PLAN OF COLORADO 990-T NONE 54-0591617 KAISER FOUNDATION HEALTH PLAN OF COLORADO 990-T NONE 58-1592076 KAISER FOUNDATION HEALTH PLAN OF KANSAS CITY, INC 990-T NONE 56-1421313 KAISER FOUNDATION HEALTH PLAN OF GEORGIA, INC 990-T NONE 56-1421313 KAISER FOUNDATION HEALTH PLAN OF NORTH CAROLINA 990-T NONE 52-0954463 KAISER FOUNDATION HEALTH PLAN OF NORTH CAROLINA 990-T NONE 34-0922268 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 94-3299124 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 94-3299124 KAISER HEALTH PLAN ASSET MANAGEMENT, INC 990-T NONE 94-3299123 CAMP BOWIE SERVICE CENTER 990-T NONE 91-2171891 LOKAHI ASSURANCE, LTD 990-T NONE 91-2171891 LOKAHI ASSURANCE, LTD 990-T NONE 94-3113684 KAISER PERMANENTE HEALTH ALTERNATIVES 1120 NONE 94-3259432 KAISER PROPERTIES SERVICES, INC 1120 NONE 94-3289704 KAISER PROPERTIES SERVICES, INC 1120 NONE 94-3289704 KAISER PROPERTIES SERVICES, INC 1120 NONE 94-32899704 KAISER PROMENTE HEALTH ALTERNATIVES 1120 NONE 94-3289704 KAISER PROPERTIES SERVICES, INC 1120 NONE 94-3289704 KAISER PROPERTIES SERVICES, INC 1120 NONE 94-3289704 KAISER PROPERTIES SERVICES, INC 1120 NONE 94-3289704 KAISER PROPERTIES SERVICES, INC 1120 NONE 94-3289704 KAISER FOUNDATION HOSPITALS GROUP 990-T NONE 94-3292262 KAISER PROPERTIES SERVICES MANAGEMENT, INC 990-T NONE 94-3245176 KAISER FOUNDATION HOSPITALS GROUP 990-T NONE 94-3245176 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3245176 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3229262 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3229262 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3245176 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3265476 5 CARETOUCH, INC | | | 990-T | \$40,000 | | | | |
| 84-0591617 KAISER FOUNDATION HEALTH PLAN OF COLORADO 990-T NONE 48-0924402 KAISER FOUNDATION HEALTH PLAN OF KANSAS CITY, INC 990-T NONE 58-1592076 KAISER FOUNDATION HEALTH PLAN OF KANSAS CITY, INC 990-T NONE 56-1421313 KAISER FOUNDATION HEALTH PLAN OF NORTH CAROLINA 990-T NONE 52-0954463 KAISER FOUNDATION HEALTH PLAN OF NORTH CAROLINA 990-T NONE 34-0922268 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 23-7425486 COMMUNITY HEALTH PLAN OF OHIO 990-T NONE 94-3299124 KAISER HEALTH PLAN ASSET MANAGEMENT, INC 990-T NONE 94-3299124 KAISER HEALTH ALTERNATIVES 990-T NONE 94-3299123 CAMP BOWIE SERVICE CENTER 990-T NONE 94-2171891 LOKAHI ASSURANCE, LTD 990-T NONE 94-2171891 LOKAHI ASSURANCE, LTD 990-T NONE 94-313684 KAISER PERMANENTE HEALTH ALTERNATIVES 1120 NONE 94-3259432 KAISER PROPERTIES SERVICES, INC 1120 NONE 94-3259432 KAISER PROPERTIES SERVICES, INC 1120 NONE 94-3289704 KAIVEST I, LLC 1065 NONE 94-3245176 KAISER HOSPITALS GROUP 94-1105628 KAISER FOUNDATION HOSPITALS GROUP 94-1105628 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3245176 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3245176 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3245176 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3245176 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3245176 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3245176 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3245176 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3245176 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3245176 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3245176 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-32626 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3265476 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3265476 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3265476 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3265476 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3265476 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3265476 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3265476 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3265476 KAISER PERMANENTE INTERNATIONAL 1120 NONE 9 | 93-0798039 | | | • | | | | |
| 48-0924402 KAISER FOUNDATION HEALTH PLAN OF KANSAS CITY, INC 990-T NONE 58-1592076 KAISER FOUNDATION HEALTH PLAN OF GEORGIA, INC 990-T NONE 56-1421313 KAISER FOUNDATION HEALTH PLAN OF NORTH CAROLINA 990-T NONE 52-0954463 KAISER FOUNDATION HEALTH PLAN OF THE MID-ATLANTIC STATES INC 990-T NONE 34-0922268 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 23-7425486 COMMUNITY HEALTH PLAN 990-T NONE 94-3299124 KAISER HEALTH PLAN ASSET MANAGEMENT, INC 990-T NONE 94-3299123 CAMP BOWIE SERVICE CENTER 990-T NONE 93-0480268 OHP 990-T NONE 91-2171891 LOKAHI ASSURANCE, LTD 990-T NONE 94-3113684 KAISER PERMANENTE HEALTH ALTERNATIVES 1120-PC NONE 94-3259432 KAISER PROPERTIES SERVICES, INC 1120-NONE 94-3289704 KAIVEST I, LLC 1120-NONE 94-3289704 KAIVEST I, LLC 1065-NONE KAISER FOUNDATION HOSPITALS GROUP 990-T-NONE NONE | 84-0591617 | KAISER FOUNDATION HEALTH PLAN OF COLORADO | 990-T | | | | | |
| 58-1592076 KAISER FOUNDATION HEALTH PLAN OF GEORGIA, INC 990-T NONE 56-1421313 KAISER FOUNDATION HEALTH PLAN OF NORTH CAROLINA 990-T NONE 52-0954463 KAISER FOUNDATION HEALTH PLAN OF THE MID-ATLANTIC STATES INC 990-T NONE 34-0922268 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 23-7425486 COMMUNITY HEALTH PLAN 990-T NONE 94-3299124 KAISER HEALTH PLAN ASSET MANAGEMENT, INC 990-T NONE 93-0954562 KAISER HEALTH ALTERNATIVES 990-T NONE 94-3299123 CAMP BOWIE SERVICE CENTER 990-T NONE 93-0480268 OHP 990-T NONE 91-2171891 LOKAHI ASSURANCE, LTD 990-T NONE 94-3113684 KAISER PERMANENTE HEALTH ALTERNATIVES 1120-PC NONE 94-3259432 KAISER PERMANENTE HEALTH ALTERNATIVES 1120-NONE 94-3289704 KAISER POPERTIES SERVICES, INC 1120-NONE 94-3289704 KAIVEST I, LLC 1065-NONE VAISER FOUNDATION HOSPITALS GROUP 990-T-NONE NONE | 48-0924402 | KAISER FOUNDATION HEALTH PLAN OF KANSAS CITY, INC | 990-T | | | | | |
| 52-0954463 KAISER FOUNDATION HEALTH PLAN OF THE MID-ATLANTIC STATES INC 990-T NONE 34-092268 KAISER FOUNDATION HEALTH PLAN 990-T NONE 23-7425486 COMMUNITY HEALTH PLAN 990-T NONE 94-3299124 KAISER HEALTH PLAN ASSET MANAGEMENT, INC 990-T NONE 93-0954562 KAISER HEALTH ALTERNATIVES 990-T NONE 94-3299123 CAMP BOWIE SERVICE CENTER 990-T NONE 93-0480268 OHP 990-T NONE 91-2171891 LOKAHI ASSURANCE, LTD 990-T NONE 94-3113684 KAISER PERMANENTE HEALTH ALTERNATIVES 1120 NONE 94-3259432 KAISER PROPERTIES SERVICES, INC 1120 NONE 94-3259432 KAISER PROPERTIES SERVICES, INC 1120 NONE 94-3289704 KAIVEST I, LLC 1065 NONE 94-3289704 KAIVEST I, LLC 990-T NONE 94-3299125 KAISER HOSPITALS ASSET MANAGEMENT, INC 990-T NONE 94-3299126 KAISER PERMANENTE INTERNATIONAL 1120 <td< td=""><td>58-1592076</td><td>KAISER FOUNDATION HEALTH PLAN OF GEORGIA, INC</td><td>990-T</td><td>- ·-</td></td<> | 58-1592076 | KAISER FOUNDATION HEALTH PLAN OF GEORGIA, INC | 990-T | - ·- | | | | |
| 34-0922268 KAISER FOUNDATION HEALTH PLAN OF OHIO 990-T NONE 23-7425486 COMMUNITY HEALTH PLAN 990-T NONE 94-3299124 KAISER HEALTH PLAN ASSET MANAGEMENT, INC 990-T NONE 93-0954562 KAISER HEALTH ALTERNATIVES 990-T NONE 94-3299123 CAMP BOWIE SERVICE CENTER 990-T NONE 93-0480268 OHP 990-T NONE 91-2171891 LOKAHI ASSURANCE, LTD 990-T NONE 94-3113684 KAISER PERMANENTE HEALTH ALTERNATIVES 1120 NONE 94-3259432 KAISER PROPERTIES SERVICES, INC 1120 NONE 91-1814507 CHP COMPANIES, INC 1120 NONE 94-3289704 KAIVEST I, LLC 1065 NONE KAISER FOUNDATION HOSPITALS GROUP 94-1105628 KAISER FOUNDATION HOSPITALS 990-T NONE 94-3299125 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3292262 KAISER PERMANENTE VENTURES 1120 NONE 94-3292265 KAISER PERMANENTE VENTURES 1120 | 56-1421313 | KAISER FOUNDATION HEALTH PLAN OF NORTH CAROLINA | 990-T | NONE | | | | |
| 23-7425486 COMMUNITY HEALTH PLAN 990-T NONE 94-3299124 KAISER HEALTH PLAN ASSET MANAGEMENT, INC 990-T NONE 93-0954562 KAISER HEALTH ALTERNATIVES 990-T NONE 94-3299123 CAMP BOWIE SERVICE CENTER 990-T NONE 93-0480268 OHP 990-T NONE 91-2171891 LOKAHI ASSURANCE, LTD 990-T NONE 03-0329760 OAK TREE ASSURANCE, LTD 1120-PC NONE 94-3113684 KAISER PERMANENTE HEALTH ALTERNATIVES 1120 NONE 94-3259432 KAISER PROPERTIES SERVICES, INC 1120 NONE 94-3259432 KAISER PROPERTIES SERVICES, INC 1120 NONE 94-3289704 KAIVEST I, LLC 1065 NONE KAISER FOUNDATION HOSPITALS GROUP 94-1105628 KAISER FOUNDATION HOSPITALS 990-T NONE 94-3299125 KAISER HOSPITALS ASSET MANAGEMENT, INC 990-T NONE 94-3299126 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3292262 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3292262 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3292262 KAISER PERMANENTE VENTURES 1120 NONE 94-3292264 KAISER PERMANENTE VENTURES 1120 NONE 94-2166347 KP ONCALL, LLC (DISREGARDED ENTITY) - NONE N/A HAMI-COLORADO, LLC (DISREGARDED ENTITY) - NONE | 52-0954463 | KAISER FOUNDATION HEALTH PLAN OF THE MID-ATLANTIC STATES INC | 990-T | NONE | | | | |
| 94-3299124 KAISER HEALTH PLAN ASSET MANAGEMENT, INC 990-T NONE 93-0954562 KAISER HEALTH ALTERNATIVES 990-T NONE 94-3299123 CAMP BOWIE SERVICE CENTER 990-T NONE 93-0480268 OHP 990-T NONE 91-2171891 LOKAHI ASSURANCE, LTD 990-T NONE 94-3113684 KAISER PERMANENTE HEALTH ALTERNATIVES 1120-PC NONE 94-321342 KAISER PERMANENTE HEALTH ALTERNATIVES 1120 NONE 94-3259432 KAISER PROPERTIES SERVICES, INC 1120 NONE 91-1814507 CHP COMPANIES, INC 1120 NONE 94-3289704 KAIVEST I, LLC 1065 NONE VAISER FOUNDATION HOSPITALS GROUP 990-T NONE 94-3299125 KAISER HOSPITALS ASSET MANAGEMENT, INC 990-T NONE 94-329215 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3292262 KAISER PERMANENTE VENTURES 1120 NONE 68-0444615 CARETOUCH, INC 1120 NONE 91-2166347 KP ONCALL, LLC (DISREGARDED ENTITY) - NONE < | 34-0922268 | KAISER FOUNDATION HEALTH PLAN OF OHIO | 990-T | NONE | | | | |
| 93-0954562 KAISER HEALTH ALTERNATIVES 990-T NONE 94-3299123 CAMP BOWIE SERVICE CENTER 990-T NONE 93-0480268 OHP 990-T NONE 91-2171891 LOKAHI ASSURANCE, LTD 990-T NONE 03-0329760 OAK TREE ASSURANCE, LTD 1120-PC NONE 94-3113684 KAISER PERMANENTE HEALTH ALTERNATIVES 1120 NONE 94-3259432 KAISER PROPERTIES SERVICES, INC 1120 NONE 91-1814507 CHP COMPANIES, INC 1120 NONE 94-3289704 KAIVEST I, LLC 1065 NONE KAISER FOUNDATION HOSPITALS GROUP 990-T NONE 94-3299125 KAISER HOSPITALS ASSET MANAGEMENT, INC 990-T NONE 94-3299125 KAISER HOSPITALS ASSET MANAGEMENT, INC 990-T NONE 94-3292126 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3292262 KAISER PERMANENTE VENTURES 1120 NONE 68-0444615 CARETOUCH, INC 1120 NONE 91-2166347 KP ONCALL, LLC (DISREGARDED ENTITY) - NONE <td>23-7425486</td> <td>COMMUNITY HEALTH PLAN</td> <td>990-T</td> <td>NONE</td> | 23-7425486 | COMMUNITY HEALTH PLAN | 990-T | NONE | | | | |
| 94-3299123 CAMP BOWIE SERVICE CENTER 93-0480268 OHP 91-2171891 LOKAHI ASSURANCE, LTD 91-2171891 LOKAHI ASSURANCE, LTD 94-3113684 KAISER PERMANENTE HEALTH ALTERNATIVES 94-3113684 KAISER PROPERTIES SERVICES, INC 94-3259432 KAISER PROPERTIES SERVICES, INC 91-1814507 CHP COMPANIES, INC 94-3289704 KAIVEST I, LLC 94-3289704 KAIVEST I, LLC 94-3289704 KAISER FOUNDATION HOSPITALS GROUP 94-3299125 KAISER HOSPITALS ASSET MANAGEMENT, INC 94-3299126 KAISER PERMANENTE INTERNATIONAL 94-329262 KAISER PERMANENTE INTERNATIONAL 94-329262 KAISER PERMANENTE VENTURES 1120 NONE 94-329262 KAISER PERMANENTE VENTURES 1120 NONE 91-2166347 KP ONCALL, LLC (DISREGARDED ENTITY) - NONE N/A HAMI-COLORADO, LLC (DISREGARDED ENTITY) - NONE | 94-3299124 | KAISER HEALTH PLAN ASSET MANAGEMENT, INC | 990-T | NONE | | | | |
| 93-0480268 OHP 91-2171891 LOKAHI ASSURANCE, LTD 91-2171891 LOKAHI ASSURANCE, LTD 990-T NONE 03-0329760 OAK TREE ASSURANCE, LTD 1120-PC NONE 94-3113684 KAISER PERMANENTE HEALTH ALTERNATIVES 1120 NONE 94-3259432 KAISER PROPERTIES SERVICES, INC 1120 NONE 91-1814507 CHP COMPANIES, INC 1120 NONE 94-3289704 KAIVEST I, LLC 1065 NONE KAISER FOUNDATION HOSPITALS GROUP 94-1105628 KAISER FOUNDATION HOSPITALS 94-3299125 KAISER HOSPITALS ASSET MANAGEMENT, INC 94-3295125 KAISER HOSPITALS ASSET MANAGEMENT, INC 94-3245176 KAISER PERMANENTE INTERNATIONAL 1120 NONE 94-3292262 KAISER PERMANENTE VENTURES 1120 NONE 94-3292262 KAISER PERMANENTE VENTURES 1120 NONE 91-2166347 KP ONCALL, LLC (DISREGARDED ENTITY) - NONE N/A HAMI-COLORADO, LLC (DISREGARDED ENTITY) - NONE | 93-0954562 | | 990-T | NONE | | | | |
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| | | TOTAL ALTERNATIVE MINIMUM TAX EXEMPTION | - | \$40,000 | | | | |

THE COMMON ADDRESS OF ALL ENTITIES JOINING IN THIS ELECTION OF APPORTIONMENT AS LISTED ABOVE IS

c/o KAISER FOUNDATION HEALTH PLAN, INC PROGRAM OFFICE CONTROLLER'S DEPARTMENT-TAX ONE KAISER PLAZA, 1850 ORDWAY OAKLAND, CA 94612

CONSENT AND AUTHORIZATION FOR ALLOCATION ON BEHALF OF ALL MEMBER COMPANIES

/ Debouh Street

DEBORAH STOKES, VICE PRESIDENT AND CONTROLLER OF
KAISER FOUNDATION HEALTH PLAN, INC. AND OF KAISER FOUNDATION HOSPITALS
THE ULTIMATE PARENT CORPORATION AND/OR SOLE MEMBER OF EACH OF THE ABOVE
ENTITIES JOINING IN THIS ELECTION OF APPORTIONMENT



COMMUNITY BENEFIT REPORT for KAISER FOUNDATION HEALTH PLAN OF OHIO FY 2002

For Attachment to the Internal Revenue Service Form 990 Return of Organization Exempt from Income Tax



KAISER PERMANENTE®

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INTRODUCTION

Kaiser Foundation Health Plan of Ohio ("Ohio Health Plan") is a nonprofit, federally qualified HMO that is a subsidiary of Kaiser Foundation Health Plan, Inc. (KFHP), with its five principal operating tax exempt subsidiary health plans (Kaiser Foundation Health Plan of Colorado, Kaiser Foundation Health Plan of Georgia, Inc., Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc., Kaiser Foundation Health Plan of the Northwest, and Kaiser Foundation Health Plan of Ohio) as well as Kaiser Foundation Hospitals (KFH) are nonprofit corporations that are part of the integrated health care delivery system known as the Kaiser Permanente Medical Care Program ("Kaiser Permanente") Additionally, Kaiser Foundation Health Plan, Inc. has five subsidiary health plans that are no longer operating and have been or are being dissolved because Kaiser Permanente has divested its Northeast, North Carolina, and Kansas City Regions (Kaiser Foundation Health Plan of Connecticut, Inc., Kaiser Foundation Health Plan of Kansas City, Inc., Kaiser Foundation Health Plan of North Carolina, CHP Companies, Inc., and Community Health Plan)

In 2002, Kaiser Permanente served over 8 4 million people in 9 states (California, Colorado, Georgia, Hawaii, Maryland, Ohio, Oregon, Virginia and Washington) and the District of Columbia The program is the largest private non-profit health care program in the United States and has more than 131,000 employees and over 11,000 contracting physicians. In the Ohio Region, the Health Plan serves more than 158,000 members, 1,832 employees as well as 280 Permanente physicians.

This report describes the structure of Kaiser Permanente and documents the national community benefit activities, programs and services of KFHP and its subsidiaries, and KFH (combined), and the specific community benefit provided in the Ohio Region

Kaiser Permanente is not just a financial arrangement but is an integrated health care delivery system that combines the provision and financing of health care services. People who elect to enroll in Kaiser Permanente receive a full range of prepaid health care services, including hospital care, professional care in hospitals and physicians' offices, x-ray and laboratory services, physical therapy, emergency, ambulance, and preventive services, health education, and prescribed drugs

In the Ohio Region, three separate legal organizations comprise Kaiser Permanente Ohio Health Plan, an Ohio nonprofit corporation and federally qualified health maintenance organization exempt from federal income tax under Internal Revenue Code §501(c)(3), KFH, a California nonprofit public benefit corporation exempt from federal income tax under Internal Revenue Code §501(c)(3), and Ohio Permanente Medical Group ("Permanente Physicians"), an independent multi-specialty group of physicians organized as a professional corporation

Persons enroll in Kaiser Permanente through KFHP or one of its subsidiaries ("Health Plan") Health Plan provides and arranges comprehensive health care services for members on a predominantly prepaid basis and fulfills its contractual obligations to group and individual

members by contracting with KFH and Ohio Permanente Physicians to provide the required health care services

Persons enroll in Kaiser Permanente through Health Plan Health Plan undertakes to arrange comprehensive health care services for members on a predominantly prepaid basis. Health Plan fulfills its contractual obligations to group and individual members by contracting with Hospitals and a Permanente Medical Group to provide the required health care services.

Members receive services from various Permanente Medical Groups in the respective Kaiser Permanente regions. In the Ohio region, Permanente accept responsibility for professional care of Health Plan members, are responsible for their own physician recruitment, selection and staffing, and are legally separate entities independent from Health Plan, KFH and each other Ohio Permanente Physicians treat members in facilities owned or leased by Health Plan and KFH

KFHP and KFH are separate corporations governed by identical boards of directors KFH accepts responsibility to provide or arrange necessary hospital services and facilities for Health Plan members. In the Ohio Region, KFH contracts with community hospitals to provide hospital services to members for specialized care and other services.

Membership in KFHP and its health plan subsidiaries is available without regard to sex, race, religion, ethnic background, sexual orientation, occupational status, or income level. Health Plan members are broadly representative of the various ages, social, and income groups within the areas served. Once enrolled, a member is free to maintain membership regardless of age, health status, or employment.

KAISER PERMANENTE'S COMMITMENT TO THE COMMUNITY

Through the Kaiser Permanente mission, the organization contributes to the health of the communities in two related ways. First, Kaiser Permanente strives for excellence in serving its more than eight million members, through market leading performance in quality, service and affordability. By doing this, Kaiser Permanente raises the bar for the performance of all healthcare organizations, benefits more people as it grows, provides a discipline in the marketplace by demonstrating the greatest value, and generates resources to reinvest in the community's health

Second, Kaiser Permanente directly invests in improvements to its communities' health, working to increase access for the underserved, disseminate care improvements, alter the social determinants of health, and inform public policy

This latter approach, which Kaiser Permanente calls the Direct Community Benefit Investment program (DCBI), is fundamental to being a nonprofit organization. It embodies the organization's commitment to improve the health of communities beyond services to Health Plan members. It is more than traditional corporate citizenship or corporate philanthropy. It is intentional, planned, budgeted, measurable, accountable creation of better health in our

communities It is done in collaboration with, not isolation from, the community Direct Community Benefit fulfills Kaiser Permanente's social purpose, justifies its tax-exempt status, and differentiates it from other healthcare organizations

This tradition of community benefit dates from the earliest days of the Program, when charitable care to non-employees, and later, non-members, was initiated. That heritage has continued through the years in Kaiser Permanente's early participation in the Medicaid and Medicare programs, establishment of residency training and medical research programs, and later in the development of the Educational Theatre, Community Health Partnerships and Dues Subsidy programs

In 2001, the Board reaffirmed Community Benefit as a national program and set the following four goals

- Address critical questions in American health care that the Program's history, culture and competencies position it uniquely to examine
- Build the reputation of Kaiser Permanente for its leadership in helping solve major health challenges
- Create a program that engages the creativity and spirit of the people of Kaiser Permanente at all levels
- Meet the requirements placed on KFH, KFHP, and it subsidiary health plans, as taxexempt organizations that return value to the communities served beyond the provision of health care to members

The Board directed that this new community benefit program be guided by a national strategy, with continued local flexibility and implementation, supported by national and regional funding pools, and built on the organization's integrated healthcare system. Community benefit investments are to be concentrated in four areas.

- Vulnerable Populations Address the financing and delivery problems of populations that are vulnerable because of socioeconomic status, illness, ethnicity, age, or other disabling factors
- Evidence-based Medicine Develop and communicate the evidence basis to determine what form of medical care works, for which patients and populations, under what circumstances, at what cost and in which delivery settings
- Education Evaluate and demonstrate educational models for the health professions in integrated care systems and for health care consumers for managing their own health and obtaining health care services
- Public Policy Develop and disseminate public policy information that reflects the interests of the nation as a whole
 - The Board elaborated that at least 75% of total community benefit funding will be directed to Program priorities within the four focus areas, and the remaining 25% of funding will be

directed by local Regions to respond to local community benefit needs and opportunities that may or may not be within the four key focus areas

As part of the new approach, the Board also approved the formation of a national Community Benefit Governance Council to oversee the new program, and designated a national executive of KFHP and KFH to lead Kaiser Permanente's Community Benefit Program as a full time assignment Raymond J Baxter, PhD is the Senior Vice President of Community Benefit

COMMUNITY BENEFIT PROVIDED BY KAISER FOUNDATION HEALTH PLAN, INC.

KFHP's primary social mission is the organization and provision of comprehensive health care services on a prepaid basis through an integrated health care delivery system, available to the community as a whole. Because the Health Plan is a nonprofit organization, revenues that exceed the cost of operations and provision of care are used to benefit members through improved facilities and service, increase benefits, and maintain affordable rates rather than to pay dividends to stockholders. Providing affordable, high quality, comprehensive health benefits coverage and care that emphasizes prevention helps to minimize medical indigence and contributes to quality of life in the communities we serve. KFHP has incorporated the following elements that support and facilitate the attainment of its social mission into its operations.

- Integrated Services and Facilities KFHP has organized and integrated the professional and physical resources required to provide comprehensive health care. In hospital-based Kaiser Permanente Regions, this care primarily occurs at major medical centers, as well as at nearby outpatient medical offices owned by KFH and at medical office buildings owned or leased by KFHP. Our members typically have available in one place all the services and professional care they require which facilitates a coordinated approach to care. Equipment and supporting personnel are shared and high-technology services such as neurosurgery, open heart surgery, and cancer treatment centers are also centralized to facilitate development and transfer of best clinical practices among all Permanente providers
- Group Practice Contracting Permanente Medical Groups are organized into large multispecialty group practices that take responsibility for providing comprehensive care to a
 defined population in facilities owned or leased by KFH or KFHP. The income that
 Permanente Medical Groups and their physicians receive is solely in consideration of their
 professional medical and related services. The amounts paid to the Permanente Medical
 Groups are negotiated annually. By altering the direct relationship between service
 performed and income received, KFHP removes incentives to perform unneeded services,
 and encourages use of the most appropriate medical care. Group practice enhances quality
 and appropriateness of care for members and for the community by facilitating development
 and sharing of "best clinical practices" throughout the community and across the nation

- <u>Prepayment</u> KFHP pays the Permanente Medical Groups a per capita payment that does not vary with the amount of service provided Permanente Medical Group physicians are not compensated on a fee-for-service basis
- Comprehensive Benefits KFHP provides coverage for unlimited hospital days, physician visits, preventive services, immunizations, well-baby care and prenatal care for most plans Enrollees pay limited copayments at amounts that protect members from substantial out-of-pocket costs. Comprehensive prepaid coverage removes or minimizes financial barriers to care promoting early consultation, detection and treatment of disease. KFHP actively encourages members to maintain their health through regular preventive self-care. In addition to improving quality of life of the individuals and their families, this reduces uncompensated care and prevents medical indigence by encouraging and financing preventive medical care at the most effective and appropriate level.
- No Pre-existing Condition Exclusions Pre-existing condition exclusions allow carriers to exclude from coverage care for a condition that existed before enrollment with the carrier KFHP imposes no pre-existing condition exclusions and thereby provides substantial protection for new members who are ill at time of enrollment. KFHP offered health benefits coverage in all its markets without any pre-existing condition exclusions for many years prior to recently enacted federal and state statutes prohibiting pre-existing condition exclusions in certain markets. By ensuring that all our enrollees are covered for all their medical needs, we reduce the amount of uncompensated care, promote the health of our members, and prevent medical indigence.
- Participation in Medicare KFHP has participated in Medicare since it was first
 implemented in 1965 KFHP and its subsidiaries enrolled approximately 850,000 Medicare
 beneficiaries, providing Medicare Part A and Part B services, plus additional drug, optical,
 and inpatient coverage
- Participation in Medicaid KFHP began enrolling Medicaid beneficiaries in the mid 1960's Currently, KFHP and it subsidiaries provide care to over 145,000 Medicaid managed care members, and serve a large number of Medicare and Medicaid patients on a fee for service basis

COMMUNITY BENEFIT PROVIDED BY KAISER FOUNDATION HOSPITALS

KFH's principal purpose is to provide inpatient medical and surgical care, extended care and home health care to members of the public without regard to age, sex, race, religion, or national origin. KFH's general community benefits are

Emergency departments – KFH operates full-time emergency departments in each of its 27 licensed hospitals (including three licensed hospitals with multiple campuses) in California, Hawaii and Oregon Emergency medical services are available to all individuals regardless of their ability to pay

- <u>Care provided to all insured patients</u> Hospital care is provided to individuals with health care coverage from any private or government-sponsored health plan
- <u>Open Medical Staff Privileges</u> Staff privileges in the hospitals are available to community practitioners who are not affiliated with a Permanente Medical Group
- <u>Board of Directors</u> KFH and KFHP have identical 14 members Boards of Directors The Board is comprised of individuals from the academic world and private industry who are representative of the community at large George C Halvorson serves as the Chairman and Chief Executive Officer for the KFHP and KFH Boards of Directors
- <u>No private inurement</u> KFHP pays KFH for hospital services, and all surplus revenues are reinvested for capital replacement or expansion of facilities and equipment, debt amortization, improvement in patient care and services, and medical education and research

THE COMMUNITY BENEFIT PROGRAM IN THE OHIO REGION

In 2002, KFHP and KFH spent approximately \$485 million or approximately 2 2% of revenue, to support the Community Benefit Program in the communities. In the Ohio Region, Kaiser Permanente Health Plan spent approximately \$1.8 million to support the community benefit program.

The following showcases many of signature community benefit programs and services according to the new focus areas

EDUCATION

The Ohio Health Plan spent approximately \$336 thousand to educate consumers and health care professionals during 2002

CONSUMERS

Health Education Activities

Community members received health education services through community health fairs, health screenings, community and worksite wellness programs

Educational Theatre Program

The Ohio Health Plan spent approximately \$300 thousand in 2002 to produce the Educational Theatre Program ("ETP") ETP has been performing award-winning health education plays for youth for more than 15 years in Ohio All productions are free of charge or offered at a nominal fee to students in kindergarten through twelfth grade, their parents and teachers, and the broader community Educational Theatre presented five different age-appropriate productions, including "Professor Bodywise's Traveling Menagerie", an award-winning production presented in

elementary schools, "The Kaiser Klown Family", performing in day care centers during the summer months, "RAVES" ("Real Alternatives to Violence for Every Student"), promoting an understanding of conflict anger management to students, "Secrets," an HIV/AIDS awareness play for middle school and high school students, and "Ready or Not," aimed at addressing the fears and prejudice about growing older. With funding provided by the Ohio Department of Health, the Ohio Region has produced a work titled *Unfinished Business*. The play promotes organ donation and tours university campuses and local businesses throughout the state. Additionally, in the Ohio Region, Educational Theatre works closely with the Ohio Permanente Medical Group to improve communications and interpersonal skills so that interaction with members is enhanced.

In September of 2002, the Ohio Region discontinued its Educational Theatre Program

Other Consumer Education Programs

The Ohio Health Plan supports the American Heart Association (AHA) community education programs in Northeast Ohio The AHA supported programs include

The Choose to Move[™] program which targets women and the African American Women's Wellness Walk[™], which targets African American families, were two Cleveland area non-fundraising educational programs underwritten by the Region

In Summit County and Lake County respectively, Kaiser Permanente and the American Heart Association developed the Red Cap initiative to educate survivors of heart disease and stroke, as well as, provide free health screenings to the public

HEALTH CARE PROFESSIONALS

Other Support given to the education of Health Care Professional

In 2002, the Ohio Region sponsored a community-wide provider conference on the topic of immunizations. In addition to supporting the costs of hosting the event, Dr. Steve Black, Co-Director the Kaiser Permanente National Vaccine Center was the keynote presenter.

EVIDENCE-BASED HEALTH CARE

The Ohio Health Plan spent approximately \$71 thousand to support clinical and health research activities. From the beginning, research has been a core value at Kaiser Permanente. Kaiser Permanente conducts more research than any other non-academic institution in the United States Kaiser Permanente partners with more 40 eminent academic research institutions including UCLA, University of Southern California, University of California San Francisco, Stanford University and Harvard and also partners with the National Institutes of Health and the Centers for Disease Control and Prevention

Medical Libraries

The Ohio Health Plan supported the medical library at the Parma location This medical library is available to OPMG physicians, as well as, to the greater professional community to access health-related research conducted within and outside of Kaiser Permanente

PUBLIC POLICY

Introduced in 2002, the Ohio Region developed and published a newsletter entitled *Healthy Views*, to be sent to community leaders, government officials, HR professionals, consumers and others, and is designed to inform their thinking around health care delivery and policy issues. The first issue was distributed in October of 2002.

VULNERABLE POPULATIONS

MEDICAL CARE SERVICES

Dues Subsidy Programs

The Ohio Health Plan spent approximately \$668 thousand to provide subsidized coverage to over 100 low-income adults and children who are not eligible for other public or privately funded coverage -In Ohio, the *Transition Plan* is the specific product for the Dues Subsidy Program.

The *Transition Plan* provides members the opportunity to continue their health care coverage at reduced costs when they are experiencing financial difficulties due to job loss, involuntary reduction in work hours, death, divorce, or legal separation from a spouse. Typically, these individuals are not eligible for any other public or private group health care coverage. Based on income, the plan subsidizes nearly all health care coverage costs.

Members pay a premium of \$15 per month for individuals and \$30 per month for families and receive comprehensive benefits, including prescription drug coverage and hospitalization

Dual-Eligible Medicare Medicaid Subsidy Program

Known in the Ohio Region as the "Medi/Medi" program, it started in 2001 in response to our need to serve low-income members who were in danger of losing coverage once KP Ohio discontinued its zero-premium Medicare Risk product. Kaiser Permanente wholly subsidizes the premiums of these approximately 650 members.

COMMUNITY-BASED PROGRAMS

The Ohio Health Plan spent approximately \$74 thousand to provide a variety of programs to non-members who live and work in the communities we serve Examples of the types of programs funded include

• Youth and Other Employment Programs

The Ohio Health Plan spent approximately \$16 thousand to fund youth employment programs aimed at improving the education and job skills of, or providing employment opportunities for, targeted populations. Summer Youth provides economically disadvantaged high school students with supportive and meaningful employment experiences in the health care field. Young people are employed during the summer months throughout the organization. In addition to their work assignments, the youth participate in educational sessions to enhance job skills, work performance and motivational workshops. Many former Summer Youth students are now employed with the organization as nurses, assistant department administrators, lab technicians, opticians and engineers. Inroads is a nationwide career development organization whose mission is to recruit minority college students and begin preparing them for corporate employment. Student Interns typically work 2 to 5 summers with the organization with the goal of permanent placement upon graduation from college. Nearly 20 youth were employed through this program in 2002.

• Grants and Donations for Community Programs to meet the needs of Vulnerable Populations

The Ohio Health Plan gave approximately \$58 thousand to 12 community organizations for a variety of programs and services for vulnerable populations

One such activity is the Hip Fit Kids program. This program educates children in grades K-5 in physical activity and educates them about health and nutrition as part of a one-day fitness clinic. This program was made available to children in low income school districts in Greater Cleveland.

In March of 2002, the Ohio Health Plan sponsored Project Accept's Day of Understanding This one-day program brought together children in grades 5-8 in Portage County and provided experiential workshops and activities to increase their sensitivity towards people with disabilities

A grant made by the Ohio Health Plan to Big Brothers Big Sisters (BBBS) of Greater Cleveland supported mentoring programs for at-risk youth in the community Kaiser Permanente also supported employee participation in BBBS's school-based mentoring program during normal business hours

The Ohio Health Plan was a major supporter of Harvest for Hunger, a community wide food drive that helps regional food banks, pantries and hot meal programs

In 2002, the Health Plan in Ohio provided a grant to El Barrio, which provides job skill training, day care, English-as-a-second-language (ESL) and other services to low income members of Cleveland's Latino community

OTHER COMMUNITY BENEFITS

The Ohio Health Plan devoted approximately \$71 thousand in support of other community benefit programs

United Way

This included an investment of approximately \$9 thousand in 2002 with United Way agencies in Northeast Ohio

Other Grants and Donations

In addition, some other programs included a grant to Business Volunteers Unlimited, which matches non-profit organizations with business to perform community service projects

The Ohio Region also supported the community involvement of Kaiser Permanente employees and physicians by matching financial and volunteer hours donated to non-profit community service organizations in Northeast Ohio

2002 NATIONAL COMMUNITY BENEFIT PROGRAM INVESTMENT

The following charts summarize 2002 community benefit investments, nationally and in the Ohio Region The community benefit investments are unaudited

2002 National Community Benefit Program Investment

| CB PRIORITY AREAS | National Health Plan Total | NATIONAL KFH TOTAL | NATIONAL CB TOTAL |
|-------------------------------|----------------------------------|-----------------------|----------------------|
| EDUCATION | | | |
| Health Professionals | \$1,514,311 | \$47,769,383 | \$49,283,693 |
| Consumers | 2,481,001 | 5,434,653 | 7,915,654 |
| Subtotal | 3,995,312 | 53,204,035 | 57,199,347 |
| EVIDENCE-BASE | | | |
| Research | 605,645 | 13,181,636 | 13,787,282 |
| Medical Libraries | 70,877 | 5,333,781 | 5,404,658 |
| Tumor Board & Cancer Registry | 237,296 | 3,685,402 | 3,922,697 |
| Subtotal | 913,818 | 22,200,819 | 23,114,637 |
| PUBLIC POLICY | | | |
| Public Policy Grants | 123,992 | 834,289 | 958,281 |
| Subtotal | 123,992 | 834,289 | 958,281 |
| Vulnerable Populations | | | |
| Medical Care Services | 244,835,730 | 138,832,625 | 383,668,355 |
| Community-Based Programs | 2,119,260 | 6,644,271 | 8,763,531 |
| Other Vulnerable Populations | 4,745,924 | 975,351 | 5,721,275 |
| Subtotal | 251,700,914 | 146,452,246 | 398,153,161 |
| OTHER COMMUNITY BENEFITS | | | • |
| Other CB Grants/Expense | 3,076,975 | 2,038,871 | 5,115,846 |
| United Way | 89,471 | 201,550 | 291,021 |
| Subtotal | 3,166,446 | 2,240,421 | 5,406,867 |
| TOTAL | \$259,900,482 | \$224,931,811 | \$484,832,293 |

2002 COMMUNITY BENEFIT INVESTMENT IN THE OHIO

| CB Priority Areas | REGION HEALTH PLAN TOTAL | REGION KFH TOTAL | REGION CB TOTAL |
|-------------------------------|--------------------------------|---------------------|-----------------------|
| EDUCATION | | | |
| Health Professionals | \$2,608 | \$0 | \$2,608 |
| Consumers | 335,746 | 0 | 335,746 |
| Subtotal | 338,354 | 0 | <i>338,<u>35</u>4</i> |
| EVIDENCE-BASE | | | |
| Research | 0 | 0 | 0 |
| Medical Libraries | 70,877 | 0 | 70,877 |
| Tumor Board & Cancer Registry | 0 | 0 | 0 |
| Subtotal | 70,877 | 0 | 70,877 |
| PUBLIC POLICY | | | |
| Public Policy Grants | 6,492 | 0 | 6,492 |
| Subtotal | 6,492 | 0 | 6,492 |
| VULNERABLE POPULATIONS | | | |
| Medical Care Services | 1,220,419 | 0 | 1,220,419 |
| Community-Based Programs | 73,719 | 0 | 73,719 |
| Other Vulnerable Populations | 0 | 0 | 0 |
| Subtotal | 1,294,138 | 0 | 1,294,138 |
| OTHER COMMUNITY BENEFITS | | | |
| Other CB Grants/Expense | 62,699 | 0 | 62,699 |
| United Way | 8,500 | 0 | 8,500 |
| Subtotal | 71,199 | 0 | 71,199 |
| TOTAL | \$1,781,060 | \$0 | \$1,781,060 |

(December 2000)

Department of the Treasury

Internal Revenue Service

Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return

OMB No 1545-1709

Form 8868 (12-2000)

| If you are fi | ling for an Automatic 3-Month Extension, complete only Part I and check this box | ▶ [X] |
|---------------------------------|---|--|
| If you are fi | ling for an Additional (not automatic) 3-Month Extension, complete only Part II (on | page 2 of this form) |
| Note. Do no Form 8868 | t complete Part II unless you have already been granted an automatic 3-month exte | ension on a previously filed |
| Part I | Automatic 3-Month Extension of Time — Only submit original (no copies nee | eded) |
| | 990-T corporations requesting an automatic 6-month extension — check this box and c | |
| | orations (including Form 990-C filers) must use Form 7004 to request an extension of ti | |
| | REMICs and trusts must use Form 8736 to request an extension of time to file Form 10 | • |
| Type or | Name of Exempt Organization | Employer identification number |
| print | KAISER FOUNDATION HEALTH PLAN OF OHIO | 34-0922268 |
| File by the | Number, street, and room or suite no. If a PO, box, see instructions | |
| due date for | ONE KAISER PLAZA, SUITE 1550 | |
| filing your return See | City town or post office, state, and ZIP code. For a foreign address, see instructions | · |
| instructions | OAKLAND CA 94612 | |
| Check type | of return to be filed (file a separate application for each return) | |
| [X] Form 990 | | Form 4720 |
| Form 990 | | Form 5227 |
| Form 990 | (1) | 7 Form 6069 |
| Form 990 | · · · · · · · · · · · · · · · · · · · | Form 8870 |
| | ization does not have an office or place of business in the United States, check this box | |
| | a Group Return, enter the organization's four digit Group Exemption Number (GEN) | |
| | group, check this box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attac | |
| EINs of all m | embers the extension will cover | The flot with the flathes and |
| 1 I reques | t an automatic 3-month (6-month, for 990-T corporation) extension of time until | AUGUST 15 .20 03 |
| to file th | e exempt organization return for the organization named above. The extension is for the | |
| | alendar year 20 <u>02</u> or | , organization o retain for |
| _ | ax year beginning, 20, and ending | 22 |
| ▶ □ t | ax year beginning, 20, and ending | , 20 |
| 2 If this ta | Y year in for loss than 12 months, shoot reason. | П о |
| 2 11 this ta | x year is for less than 12 months, check reason | Change in accounting period |
| 22 If this or | Therefore to for Form 000 Bt 000 BF 000 T 4700 0000 | |
| oonrefu | oplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less adable credits. See instructions | |
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| made li | oplication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax p nolude any prior year overpayment allowed as a credit | ayments |
| | Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, | 3 |
| with FT(| Decupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See | , deposit |
| instructi | | \$ 0.00 |
| | Signature and Verification | - 0.00 |
| Under penalties of | f perjury I declare that I have examined this form including accompanying schedules and statements, and to the | best of my knowledge and belief it is true |
| correct and comp | lete and that I am authorized to prepare this form | |
| | | |
| Signature > | Delegation Title VICE PRESIDENT/CONTROLL | ER Date > 05/12 /2003 |
| | Reduction Act Notice, see Instruction | |
| | · · · · · · · · · · · · · · · · · · · | Form 8868 (12-2000 |

| | 3888 (12-20 | | 5 4 11 | | Page 2 |
|---------------------|-------------|---|-----------------|--------------------------------|--------------------------|
| • If ye | ou are fil | ling for an Additional (not automatic) 3-Month Extension, complete only | Part II and | check this box | ► 🗵 |
| | | omplete Part II if you have already been granted an automatic 3-month o ling for an Automatic 3-Month Extension, complete only Part I (on page | | on a previously ille | u r-uriii 0000. |
| | | Additional (not automatic) 3-Month Extension of Time — Must F | | al and One Conv | |
| Far | | | ne Origina | Employer identifica | |
| Type o | Of | Name of Exempt Organization KAISER FOUNDATION HEALTH PLAN OF OHIO | 11.2 | 34-0922268 | idon number |
| File by | the | Number, street, and room or suite no If a PO box, see instructions | <u> </u> | For IRS use only | |
| ежело | led | ONE KAISER PLAZA, SUITE 1550 | | ' | |
| due da filing th | | City, town or post office, state, and ZIP code For a foreign address see instructions | - | <u> </u> | |
| return | | OAKLAND CA 94612 | _ | | |
| Chec | | of return to be filed (File a separate application for each return) | | | |
| | orm 990 | | m 1041-A | ☐ Form 5227 | Form 8870 |
| ☐ F | orm 990 | -BL Form 990-PF Form 990-T (trust other than above) Form | m 4720 | Form 6069 | <u> </u> |
| | | t complete Part II if you were not already granted an automatic 3-month | | | d Form 8868. |
| | | ization does not have an office or place of business in the United States, che | | (| ▶ 📙 |
| • If th | his is for | a Group Return, enter the organization's four digit Group Exemption Numb | er (GEN) _ | | f this is |
| | | group, check this box > [If it is for part of the group, check this box > [| _] and attac | th a list with the nan | nes and |
| | | embers the extension is for NOVEMBER 15 | | o 03 | |
| | • | Con deditional of months of action of action | | ·- <u>—</u> | , 20 |
| | | endar year <u>2002</u> , or other tax year beginning, 20 | | | • |
| | | x year is for less than 12 months, check reason | nal return | Change in acc | |
| 7 | | PRISING A NATIONAL MANAGED HEALTH CARE DELI | | | MUST |
| | | R RETURN FILING UNTIL DATA FOR EACH MEMBER | | | |
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| | tax payr | ments made Include any prior year overpayment allowed as a credit and any | amount pa | aid | |
| | | sly with Form 8868 | • | . <u>\$</u> | NONE |
| | | Due. Subtract line 8b from line 8a. Include your payment with this form, or | | | |
| | | D coupon or, if required, by using EFTPS (Electronic Federal Tax Payment S | ystem) Se | _ | 0.00 |
| | ınstructı | | | <u> </u> | 0.00 |
| | | Signature and Verification of perjury I declare that I have examined this form including accompanying schedules and statement plete, and that I am authorized to prepare this form | ents and to the | best of my knowledge ar | id belief, it is true |
| Signat | ture ► - 🦜 | Notice to Applicant — To Be Completed by t | /CONTROL | LER Date ▶ 08/ | 7 /2003 |
| \mathbf{J}^{-} | | Notice to Applicant — To Be Completed by t | he IRS | | |
| = | | approved this application. Please attach this form to the organization's return | | | |
| Ц | organizat | not approved this application. However, we have granted a 10-day grace period from the ion's return (including any prior extensions). This grace period is considered to be a valid e- a timely return. Please attach this form to the organization's return. | | | |
| М | | not approved this application. After considering the reasons stated in item 7, we cannot gra | int vour reque | st for an extension bit in |) ne to file. We are: |
| _ | | ing a 10-day grace period | , | 25/ 1/2/ 1/2012 | |
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| | | illing Address — Enter the address if you want the copy of this application | for go oddi | مريد المحادث المحادث | |
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Number and street (include suite, room, or apt. no) Or a PO. box number

City or town, province or state, and country (including postal or ZIP code)

Type or print