

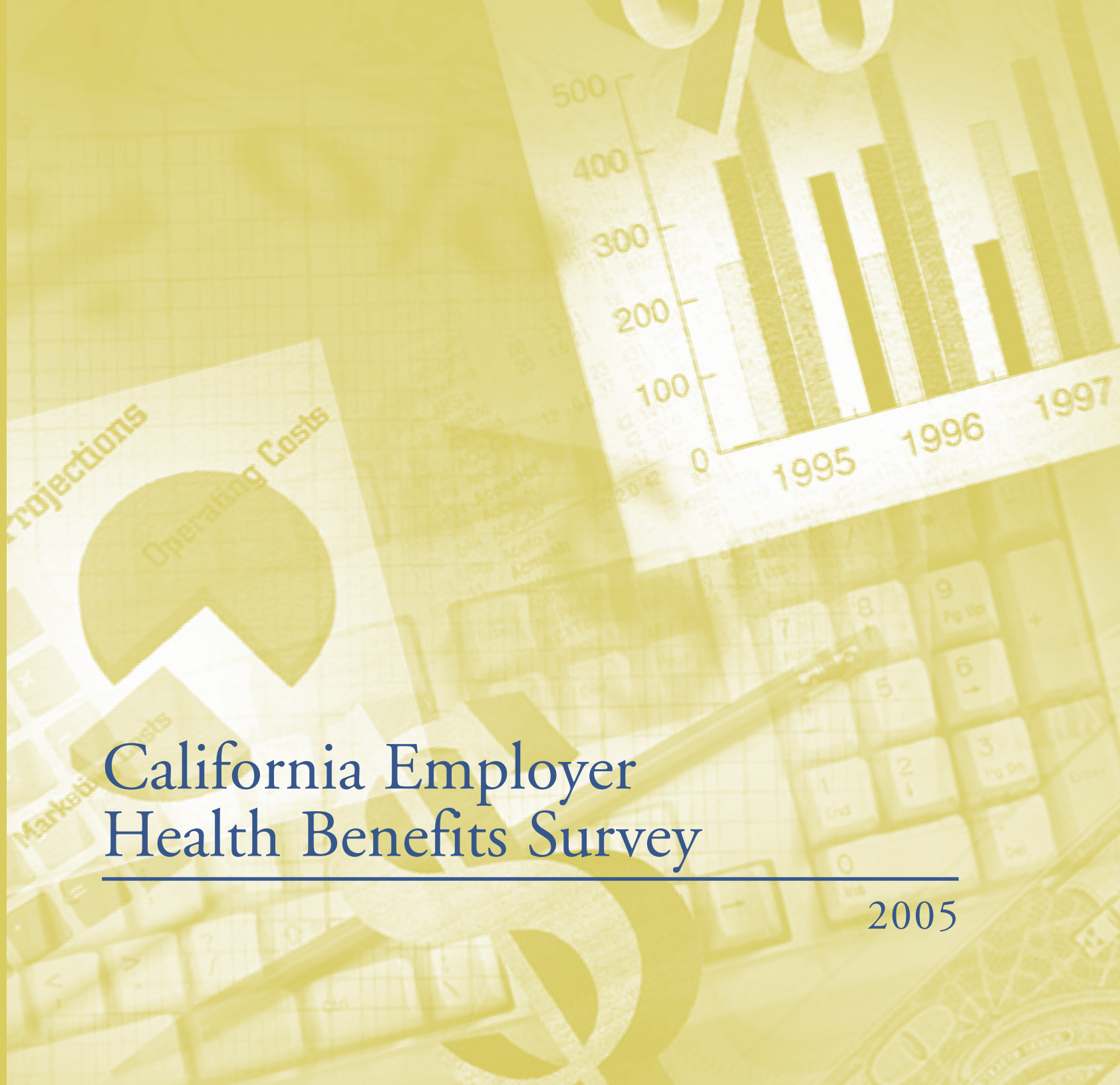


CALIFORNIA
HEALTHCARE
FOUNDATION



California Employer Health Benefits Survey

2005



Introduction

Employer-based coverage is the primary source of health insurance in California and the nation. The percentage of employers offering health benefits, the way those benefits are designed, how much they cost, and the amounts paid for benefits by employees all have major implications for the level access to and quality of health insurance for millions of Californians.

The California Employer Health Benefits survey, conducted annually since 2000 in concert with the National Employer Health Benefits Survey, shows how health insurance premiums and other aspects of employer-based coverage in the state have changed over time. Key findings of the 2005 study include:

- While 67 percent of California employers offered health benefits in 2005, this rate varied considerably by the size of the firm, the share of part-time workers, and the share of lower-wage workers.
- Health insurance premiums for a family of four rose 8.2 percent in 2005, compared with an increase in the California inflation rate of 3.9 percent.
- California workers paid an average of \$41 per month for single coverage in 2005, and \$240 for family coverage. Workers in lower wage firms, by contrast, paid an average of \$54 per month for single coverage and \$302 for family coverage.

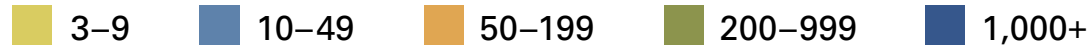
- Copayments for office visits increased in HMO plans in 2005. The percentage of California workers with a \$20 copayment increased from 14 percent in 2004 to 22 percent in 2005.
- Twenty percent of California employers offered a high-deductible health plan in 2005.
- Thirty-eight percent of California's large employers (those with 200 or more workers) reported that they are very likely to increase the amount employees pay for health insurance premiums in 2006, and another 32 percent said they are somewhat likely to do so.

Changes in benefit design and increases in cost sharing borne by employees could have implications for how Californians use health care services and therefore bear close monitoring. This is particularly true for residents with lower incomes.

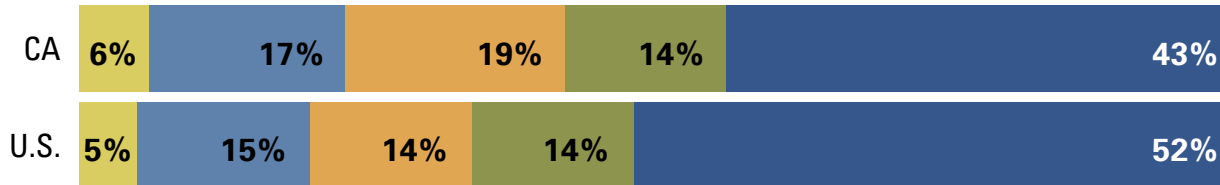
Additional information on the project methodology is available at the end of the presentation on page 39.

Covered Workers, Workers, and Employers by Firm Size, 2005

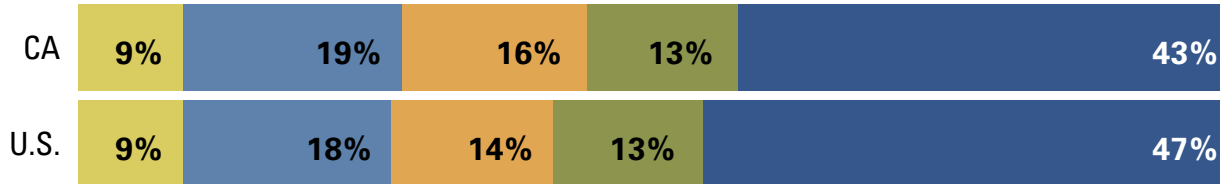
Number of Workers



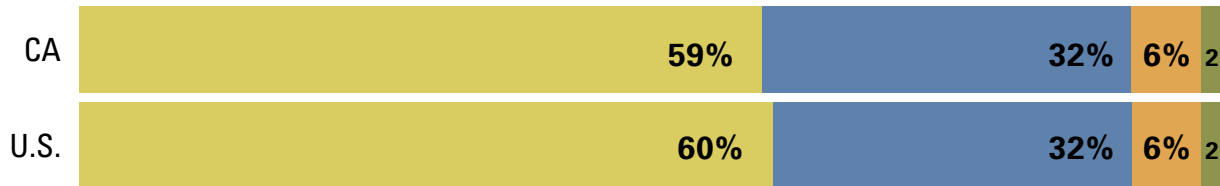
Covered Workers



Workers



Employers

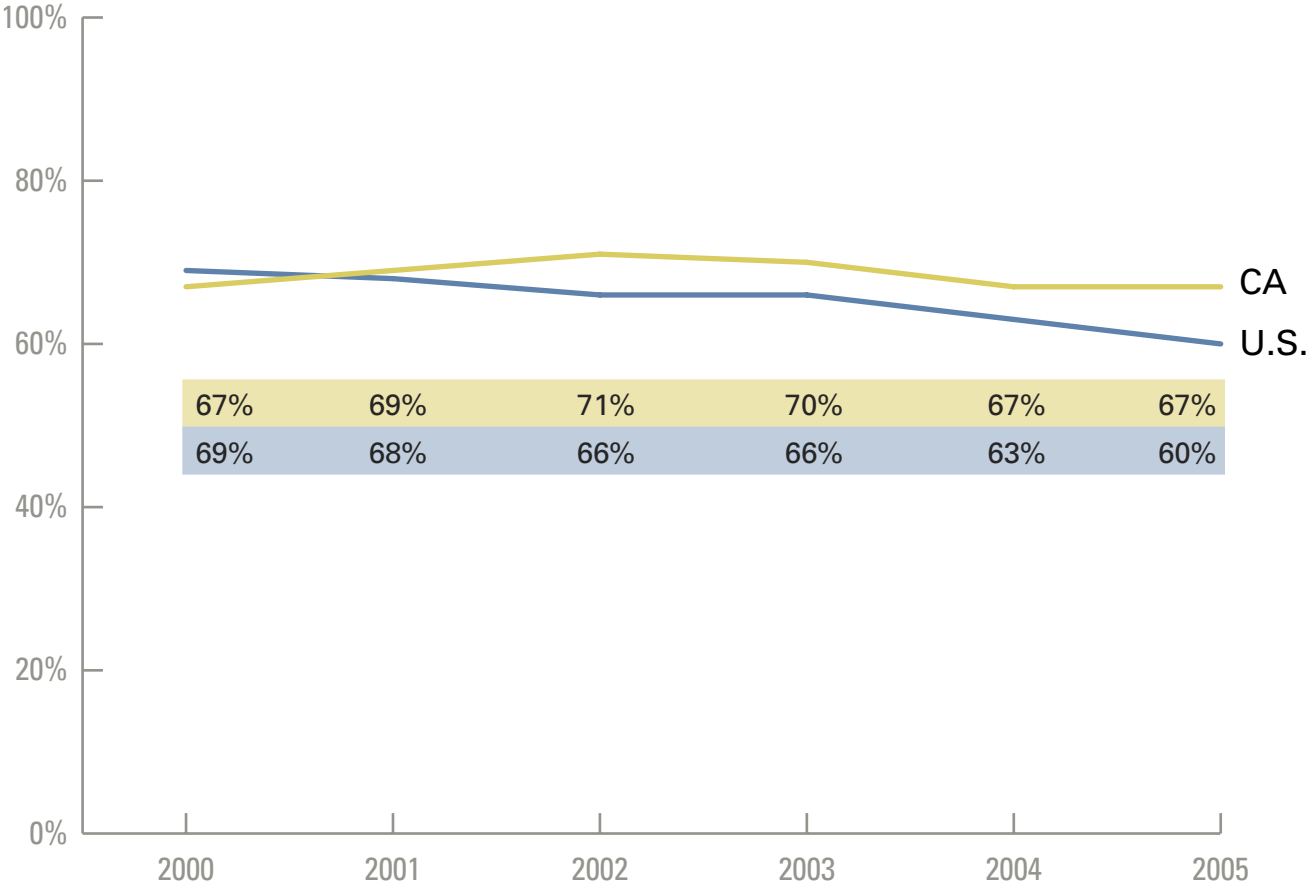


California Employer Health Benefits Survey

Small employers with three to 49 employees represent 91 percent of employers in California; however, employees in small firms represent 28 percent of workers and 23 percent of covered workers.

Note: Firms that employ more than 1,000 workers comprise less than 2 percent of the total number of firms.
Sources: CHCF/HSC California Employer Health Benefits Survey: 2005; Kaiser/HRET Survey of Employer-Sponsored Health Benefits: 2005.

Employers Offering Coverage, 2000 to 2005



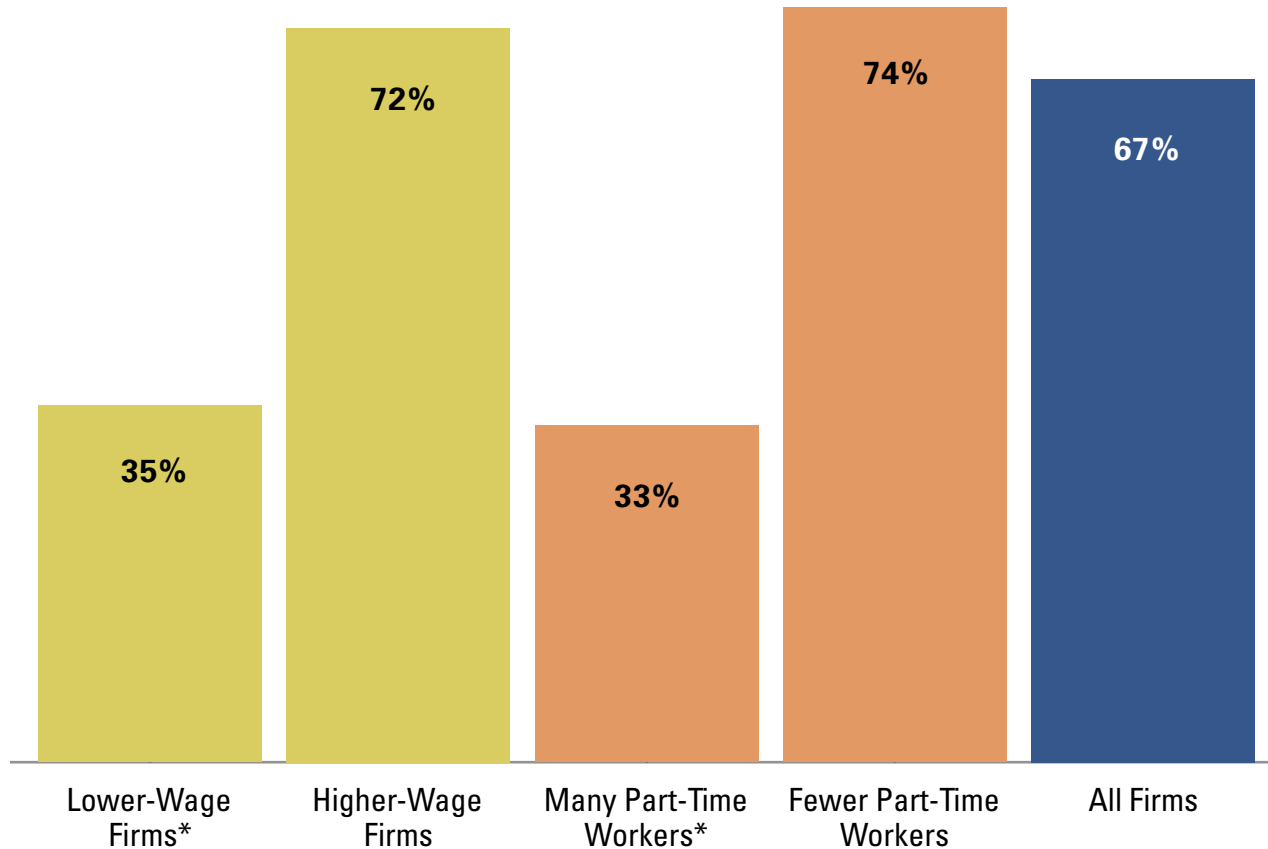
California Employer Health Benefits Survey

Although offering rates have remained fairly constant in California, they have steadily declined in the nation.

Note: Tests found no statistically different estimates from the previous year.

Sources: CHCF/HSC California Employer Health Benefits Survey: 2005; CHCF/HRET California Employer Health Benefits Survey: 2004; Kaiser/HRET California Employer Health Benefits Survey: 2000 to 2003; Kaiser/HRET Survey of Employer-Sponsored Health Benefits: 2000 to 2005.

Employers Offering Coverage by Wage Level and Part-time Status, 2005



*Estimate is statistically different from All Firms.

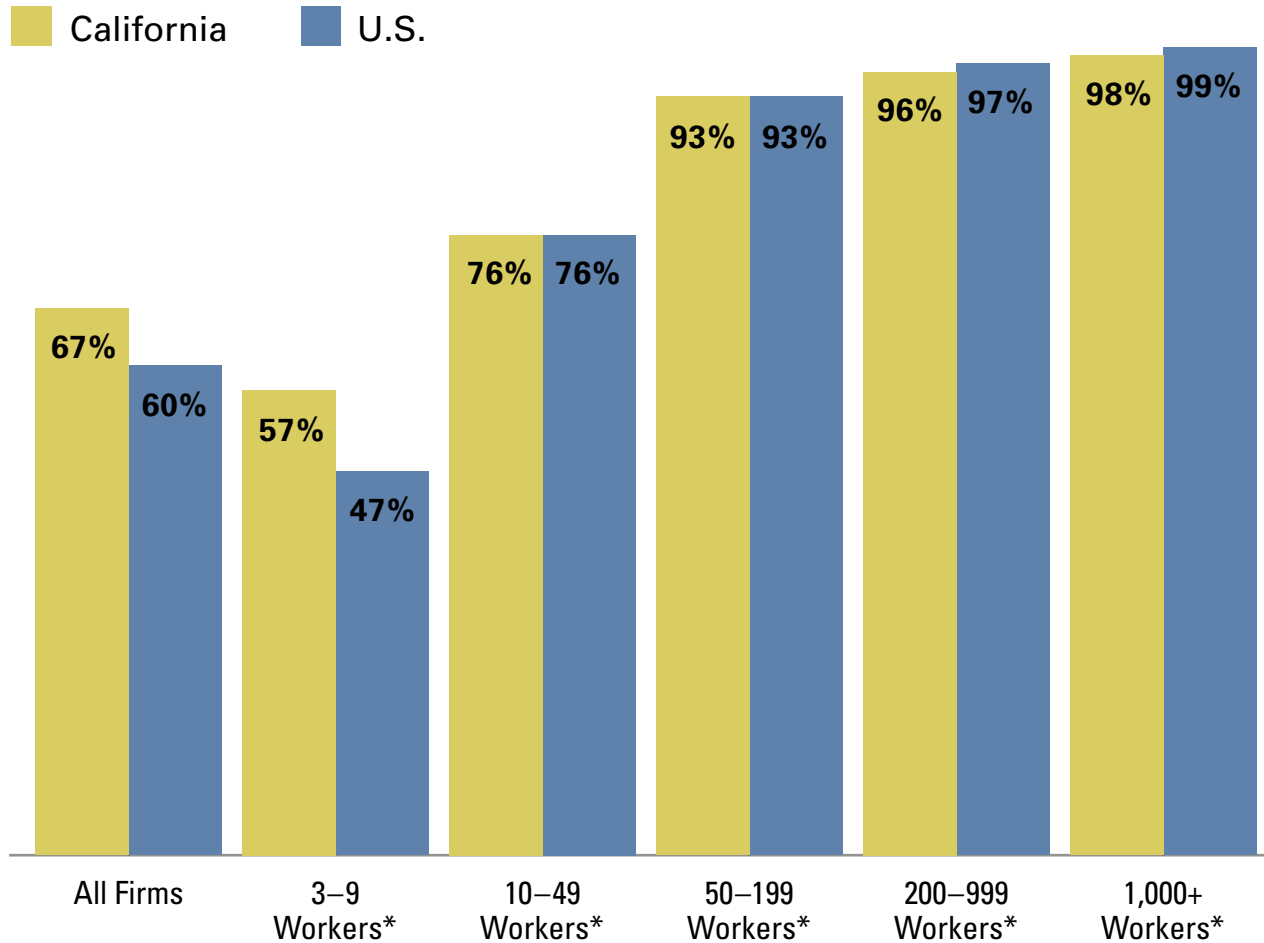
Note: Lower-wage firms are those with 35 percent or more of the workforce earning \$20,000 or less per year; the remainder of firms are classified as higher-wage firms. Many part-time workers are those firms with 35 percent or more of the workforce working part time; the remainder of firms are classified as fewer part-time workers.

Source: CHCF/HSC California Employer Health Benefits Survey: 2005.

California Employer Health Benefits Survey

Only 35 percent of lower-wage California firms offered health benefits in 2005, versus 72 percent of higher-wage firms.

Employers Offering Coverage by Firm Size, 2005



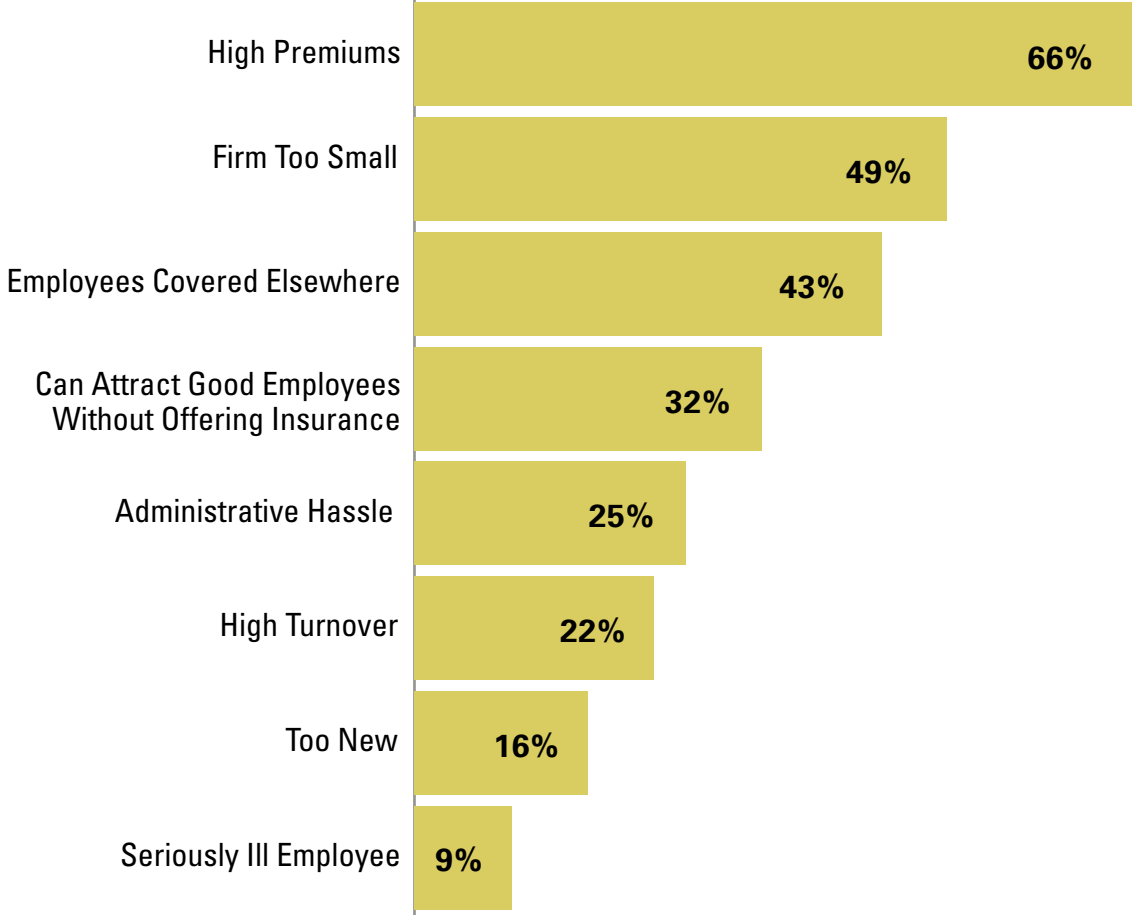
California Employer Health Benefits Survey

The offer rate varies substantially with firm size. Nearly all large California employers—those with 200 or more workers—offered health insurance in 2005.

*Estimates are statistically different from All Firms.

Sources: CHCF/HSC California Employer Health Benefits Survey: 2005; Kaiser/HRET Survey of Employer-Sponsored Health Benefits: 2005

Firms Reporting "Very Important" Reasons to Not Offer Coverage, 2005



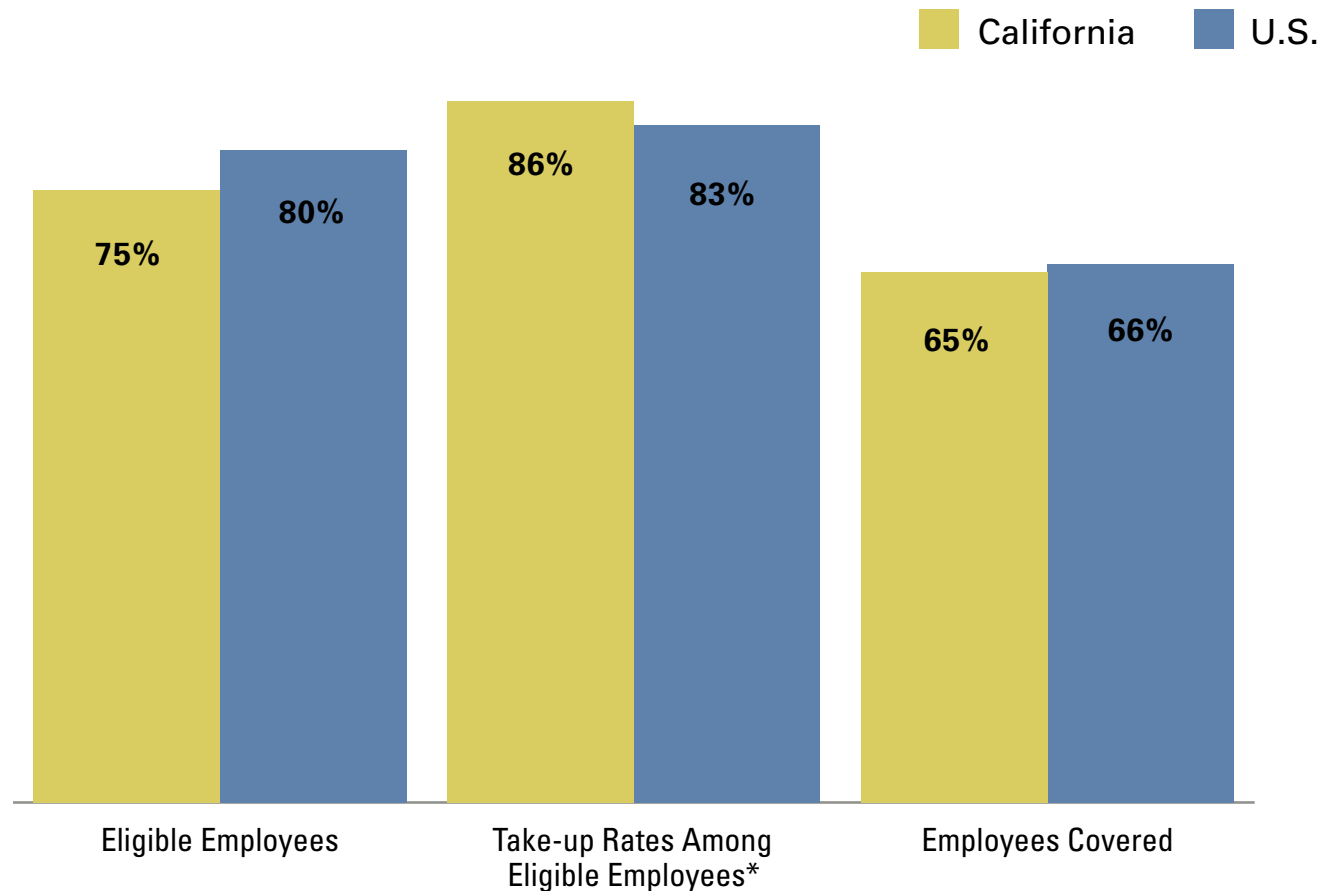
California Employer Health Benefits Survey

Sixty-six percent of California employers not offering coverage cited high premiums as a "very important" reason.

Source: CHCF/HSC California Employer Health Benefits Survey: 2005.

Employee Eligibility, Take-up Rates, and Coverage, 2005

Within Firms Offering Coverage...



*Estimates are statistically different between California and the U.S.

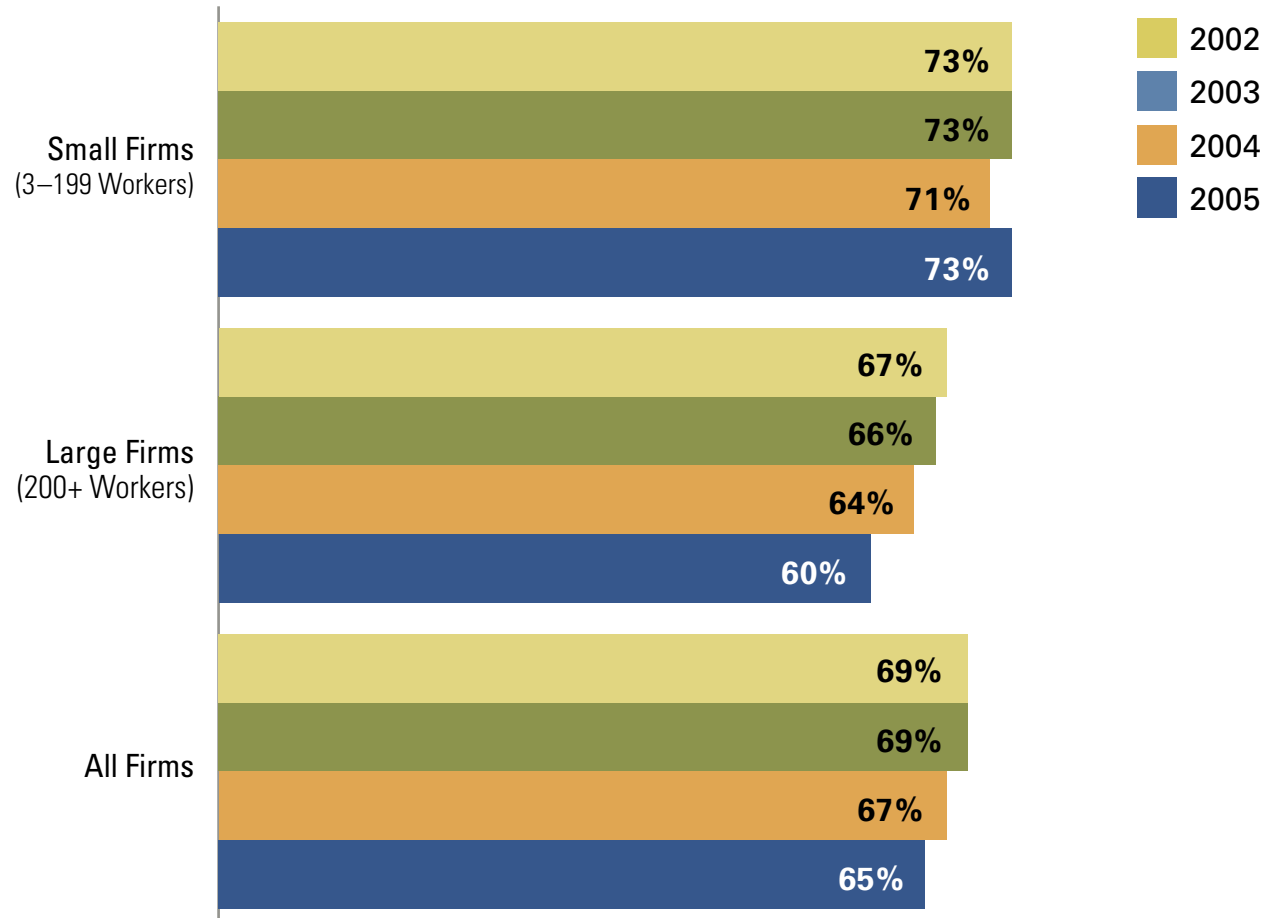
Sources: CHCF/HSC California Employer Health Benefits Survey: 2005; Kaiser/HRET Survey of Employer-Sponsored Health Benefits: 2005.

California Employer Health Benefits Survey

Seventy-five percent of California workers in firms offering coverage were eligible for insurance and 86 percent of those elected to take it. Overall, 65 percent of workers in firms that offered health insurance received coverage from that firm.

Insurance Coverage Rates by Firm Size, 2002 to 2005

Within Firms Offering Coverage...



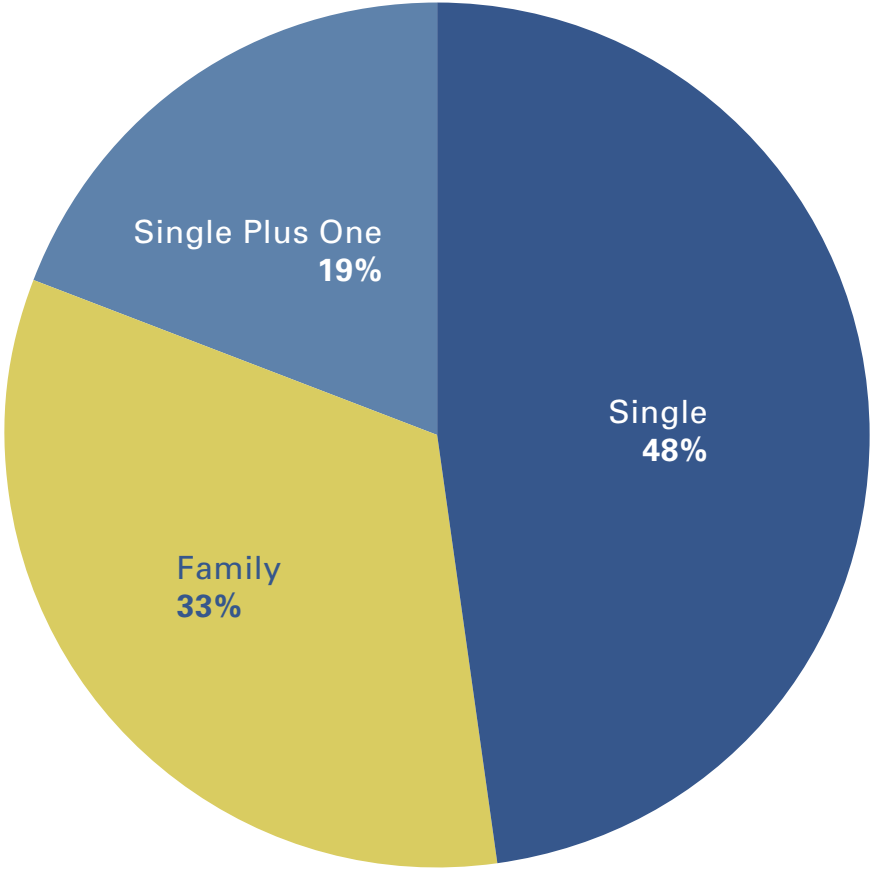
Note: Tests found no statistically different estimates from previous year shown within firm size.

Sources: CHCF/HSC Survey of Employer-Sponsored Health Benefits: 2005; CHCF/HRET Survey of Employer-Sponsored Health Benefits: 2004; Kaiser/HRET Surveys of Employer-Sponsored Health Benefits: 2002 to 2003.

California Employer Health Benefits Survey

Declining coverage rates in California firms that offer health benefits are the result of fewer workers being eligible, fewer workers taking up coverage, or both.

Employee Distribution by Coverage Type, 2005

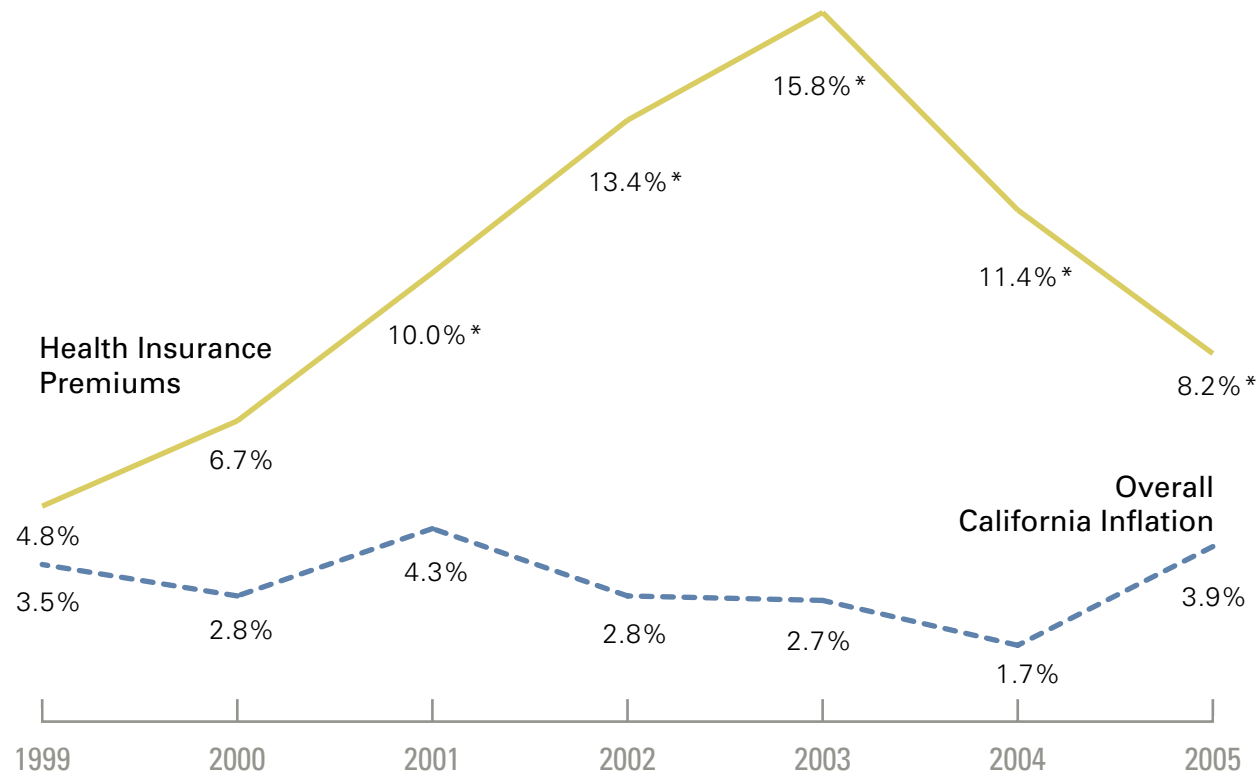


California Employer Health Benefits Survey

California workers were most likely to enroll in single coverage in 2005.

Source: CHCF/HSC Survey of Employer-Sponsored Health Benefits: 2005.

Increases in Premiums Compared to Inflation, 1999 to 2005



*Estimates are statistically different from the previous year.

Note: Data on premium increases reflect the cost of health insurance premiums for a family of four.

Sources: CHCF/HSC California Employer Health Benefits Survey: 2005; CHCF/HRET California Employer Health Benefits Survey: 2004; Kaiser/HRET California Employer Health Benefits Survey: 1999 to 2003; California Division of Labor Statistics and Research, Consumer Price Index, California Average of Annual Inflation (April to April) 1999 to 2005.

California Employer Health Benefits Survey

Premium increases in California in 2005 were more than twice the California inflation rate of 3.9 percent.

Increase in Premiums by Firm Size, 2005



*Tests found no statistical difference from All Firms.

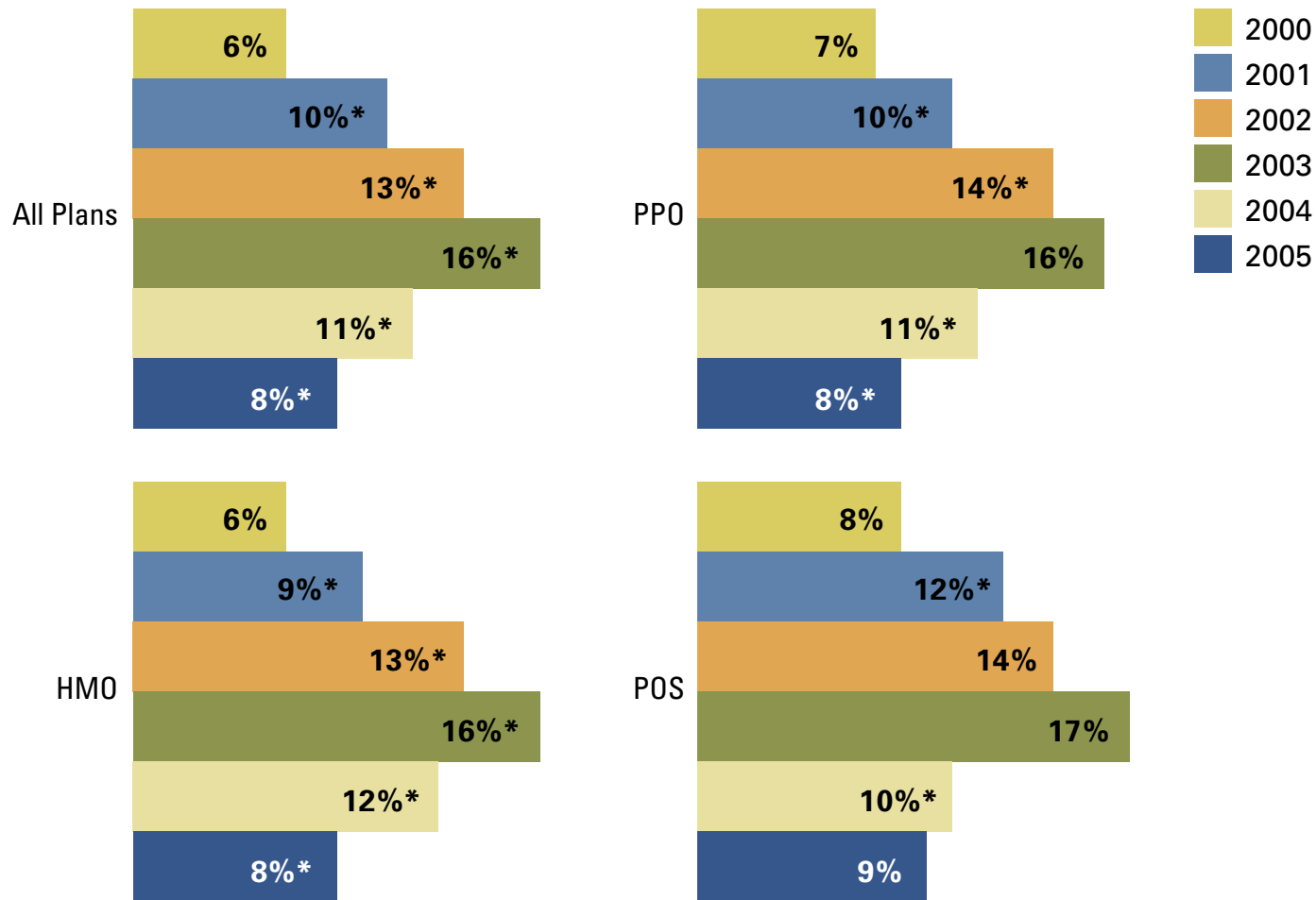
Note: Data on premium increases reflect the cost of health insurance premiums for a family of four.

Source: CHCF/HSC California Employer Health Benefits Survey: 2005.

California Employer Health Benefits Survey

California firms of all sizes experienced premium growth of at least 7.9 percent in 2005.

Increase in Premiums from Previous Year, by Plan Type, 2000 to 2005



*Estimates are statistically different from the previous year.

Note: Data on premium increases reflect the cost of health insurance premiums for a family of four.

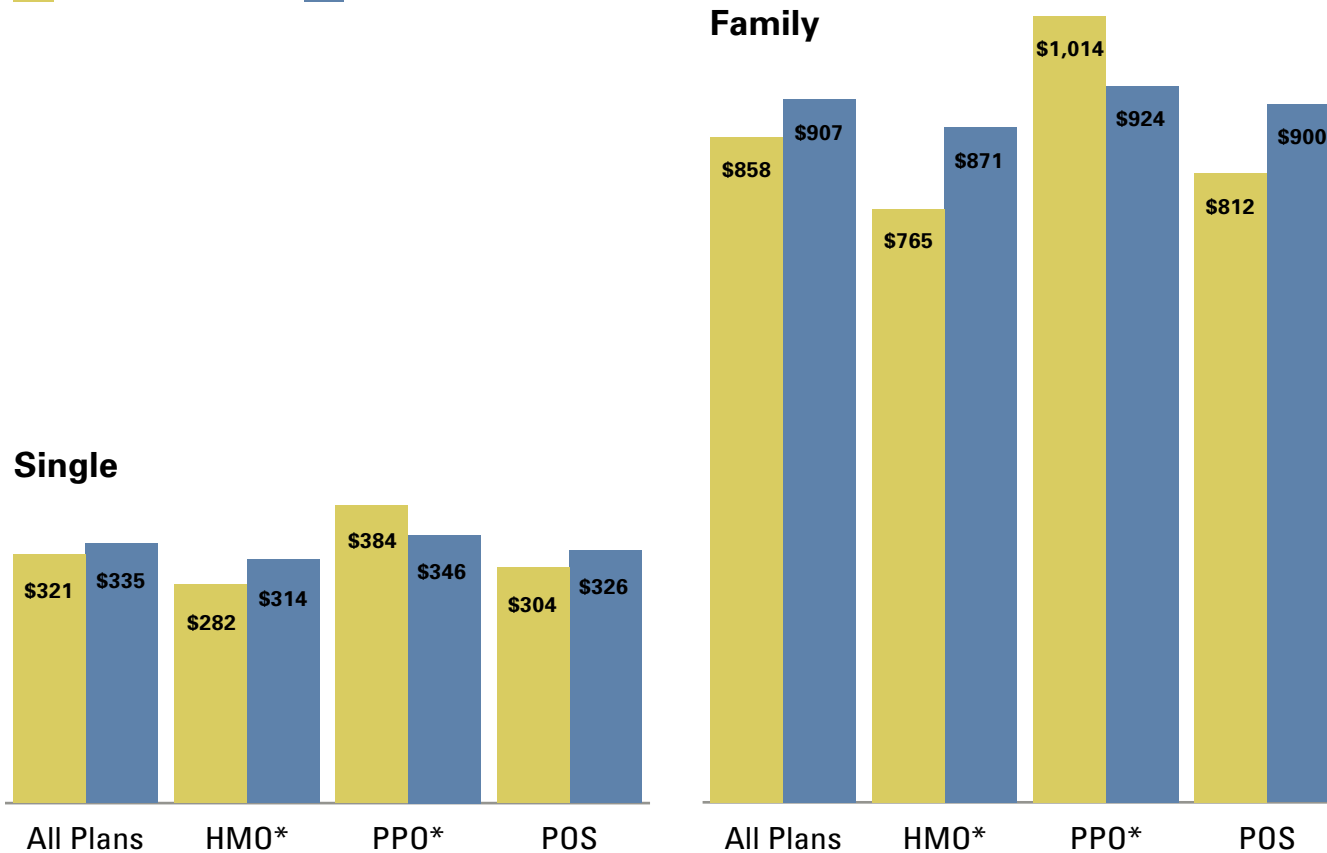
Sources: CHCF/HSC California Employer Health Benefits Survey: 2005; CHCF/HRET California Employer Health Benefits Survey: 2004; Kaiser/HRET California Employer Health Benefits Survey: 2000 to 2003.

California Employer Health Benefits Survey

Health insurance premiums for all plan types in California continued to increase from 2000 to 2005; however, the rate of increase declined in 2005.

Average Monthly Premiums by Plan Type, 2005

California U.S.



California Employer Health Benefits Survey

The average cost for a family HMO plan in California is about 13 percent lower than the nation, while the average cost for a family PPO plan in California exceeds that in the United States by 10 percent.

*Estimates are statistically different from All Plans.

Source: CHCF/HSC California Employer Health Benefits Survey: 2005; Kaiser/HRET Survey of Employer-Sponsored Health Benefits: 2005.

Average Annual Worker and Employer Contributions, 2005

■ Worker Contribution ■ Employer Contribution

Single



Family



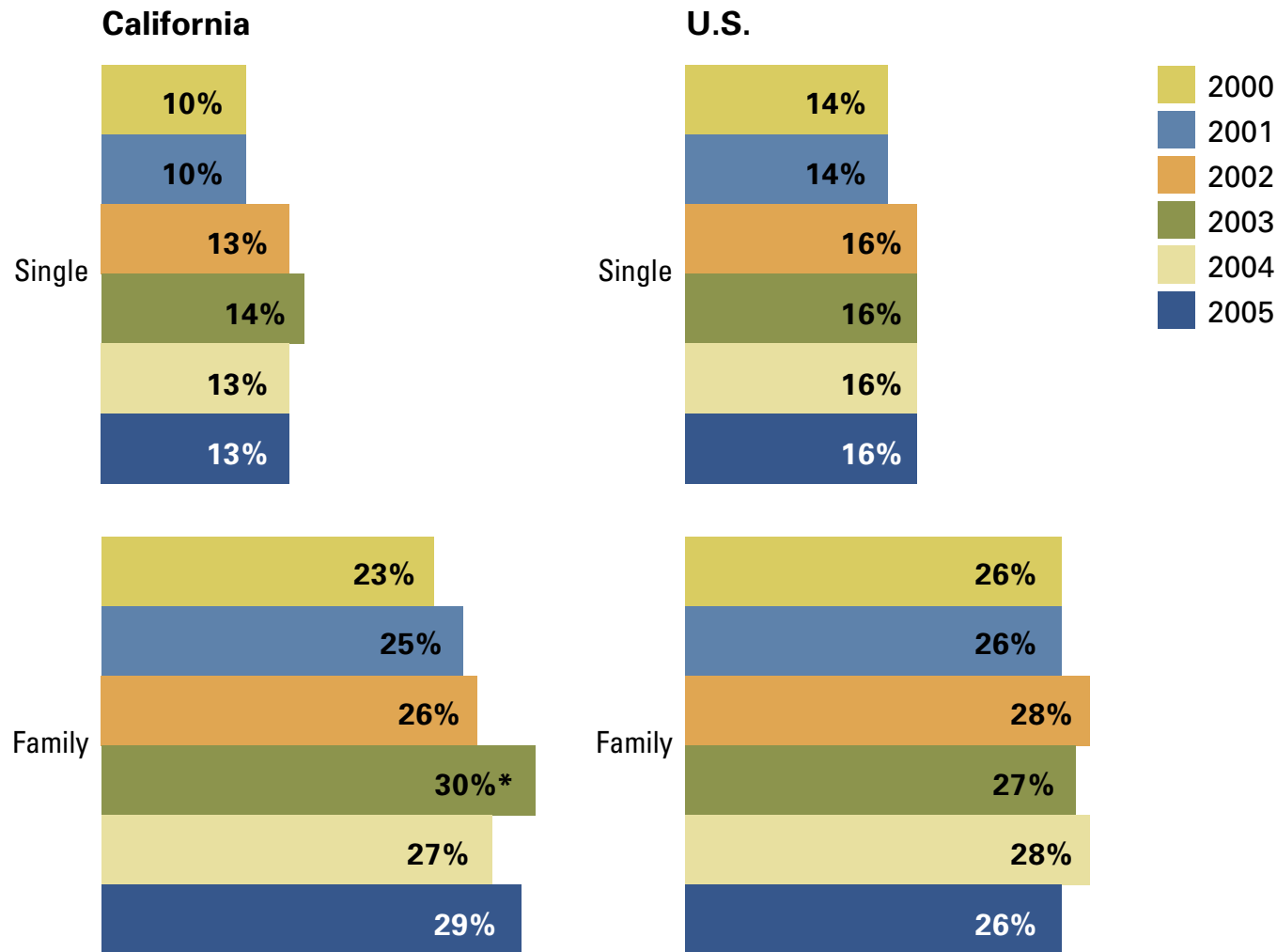
California Employer Health Benefits Survey

On average, workers in California contributed \$492 annually for single coverage and \$2,883 for family coverage in 2005.

Note: Total annual premium estimates are statistically different between California and the U.S. within coverage type.

Sources: CHCF/HSC California Employer Health Benefits Survey: 2005; CHCF/HRET California Employer Health Benefits Survey: 2004; Kaiser/HRET California Employer Health Benefits Survey: 2003; Kaiser/HRET Employer Health Benefits Survey: 2003 to 2005.

Share of Premiums Paid by Workers, 2000 to 2005



*Estimate is statistically different from previous year shown.

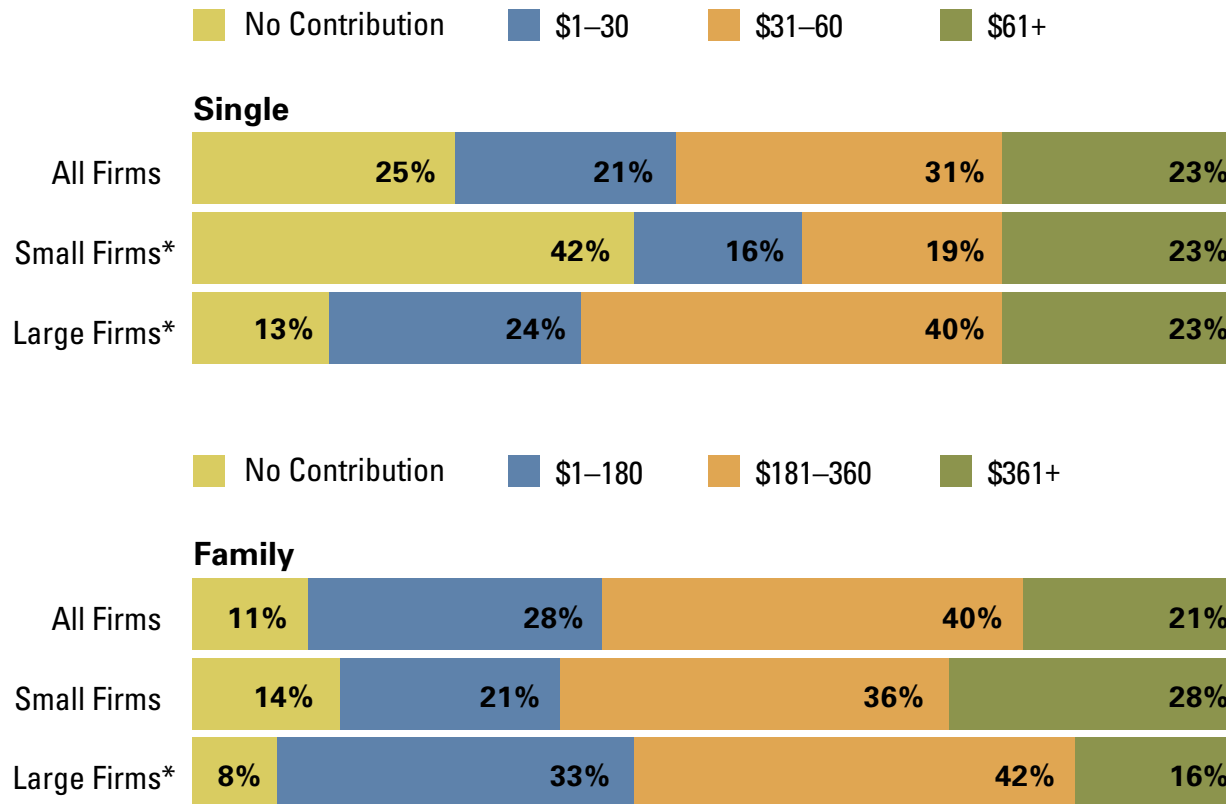
Sources: CHCF/HSC California Employer Health Benefits Survey: 2005; CHCF/HRET California Employer Health Benefits Survey: 2004; Kaiser/HRET California Employer Health Benefits Survey: 2000 to 2003; Kaiser/HRET Employer Health Benefits Survey: 2000 to 2005.

California Employer Health Benefits Survey

In California, as in the nation, the share of premiums paid by workers continues to rise. While workers in California pay a smaller share of the premium for single coverage than workers in the United States, the reverse is true for those paying for family coverage.

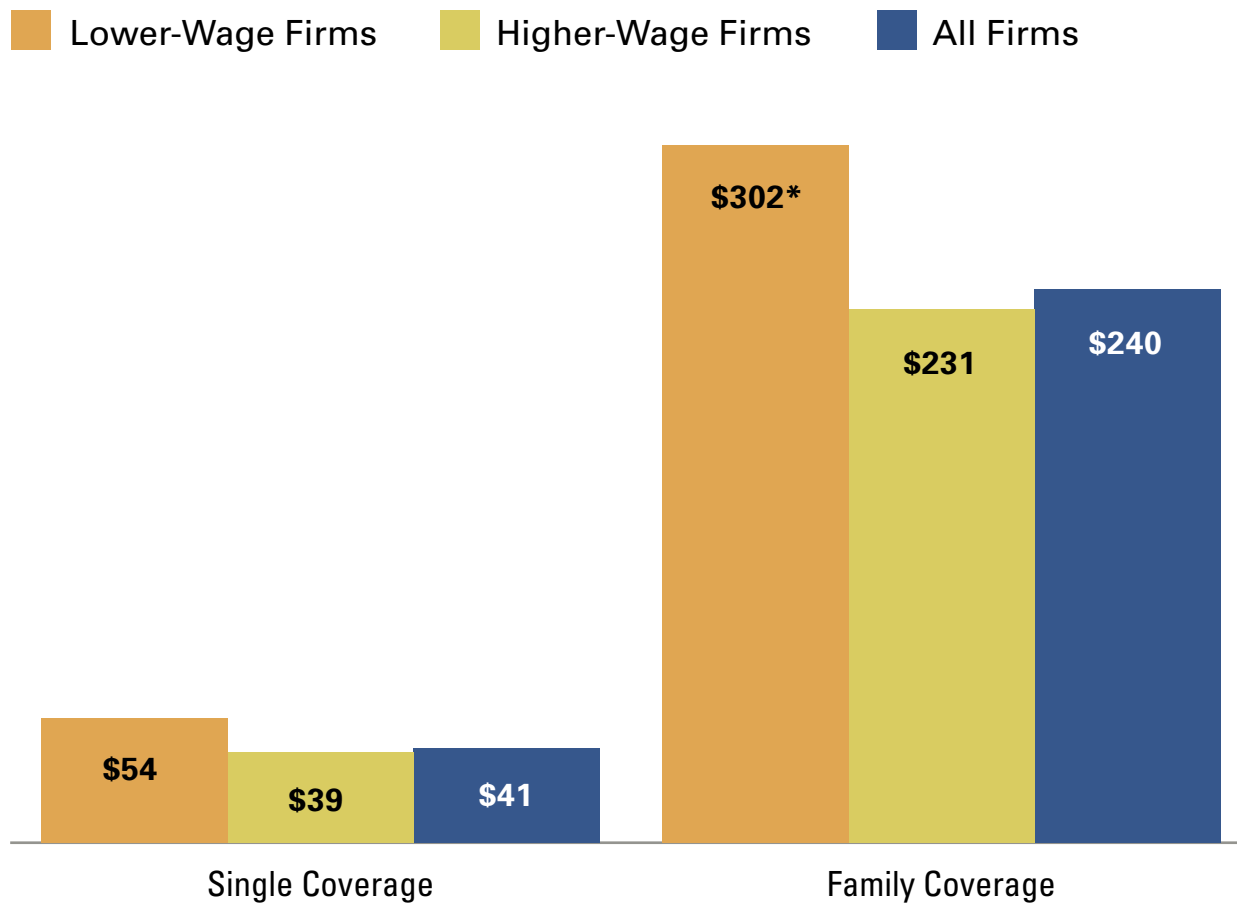
Worker Contribution to Monthly Premium, by Firm Size, 2005

Forty-two percent of workers in small California firms do not need to pay a monthly premium for individual coverage; however, 28 percent of workers in small firms must pay more than \$360 a month for family coverage.



*Distribution is statistically different from All Firms.
 Note: Small firms are those with 3 to 199 workers; large firms are those with 200 or more employees.
 Source: CHCF/HSC California Employer Health Benefits Survey: 2005.

Worker Contributions to Monthly Premium, by Wage Level, 2005



California Employer Health Benefits Survey

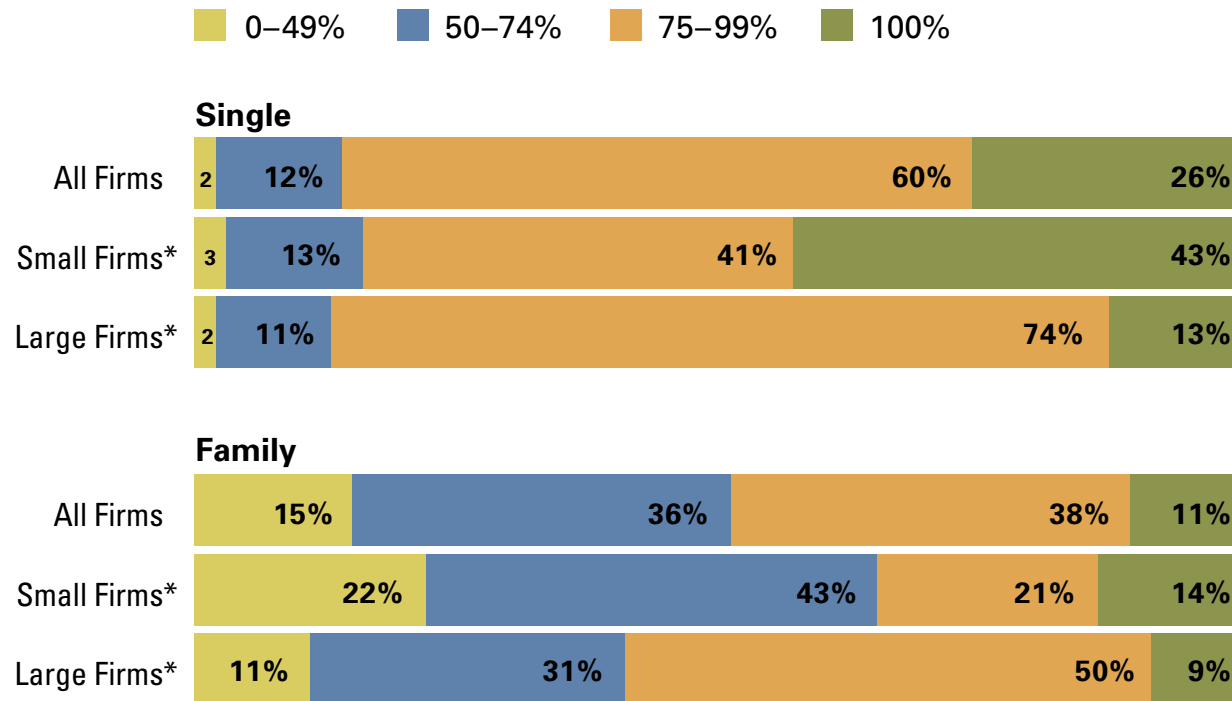
California workers in lower wage firms contributed \$54 toward monthly premiums for single coverage, compared with \$39 per month for workers in higher-wage firms.

*Estimate is statistically different from All Firms.

Note: Lower-wage firms are those with 35 percent or more of the workforce earning \$20,000 or less per year; the remainder are classified as higher-wage firms.

Source: CHCF/HSC California Employer Health Benefits Survey; 2005.

Employer Share of Premium by Firm Size, 2005



California Employer Health Benefits Survey

Thirty-eight percent of California workers were in firms that paid between 75 and 99 percent of the family premium in 2005, although nearly as many firms (36 percent) paid between 50 and 74 percent of the family premium. Employers were far less likely to pay the full cost of the premium for family coverage than for single coverage (11 percent versus 26 percent).

*Distribution is statistically different from All Firms.

Source: CHCF/HSC California Employer Health Benefits Survey: 2005.

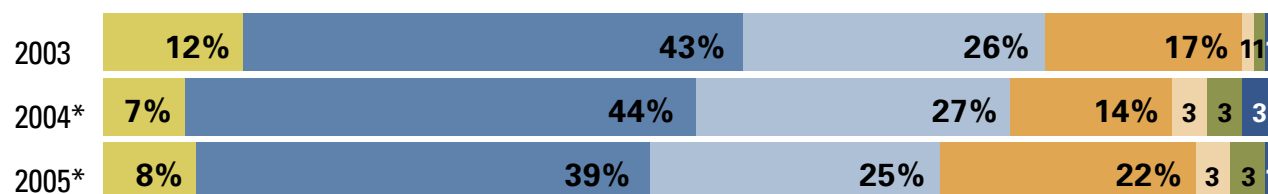
Workers with Specified Copayments for Office Visits, 2003 to 2005

Copayments for office visits in HMO plans increased in 2005. The share of workers with a \$20 copayment increased from 14 percent in 2004 to 22 percent in 2005.

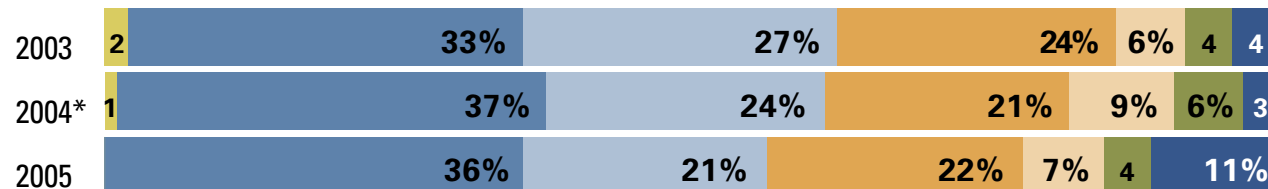
Per Visit Copayment

\$5 \$10 \$15 \$20 \$25 \$30 Other

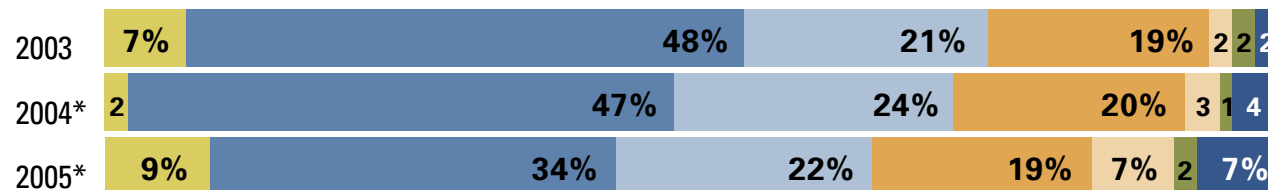
HMO



PPO



POS

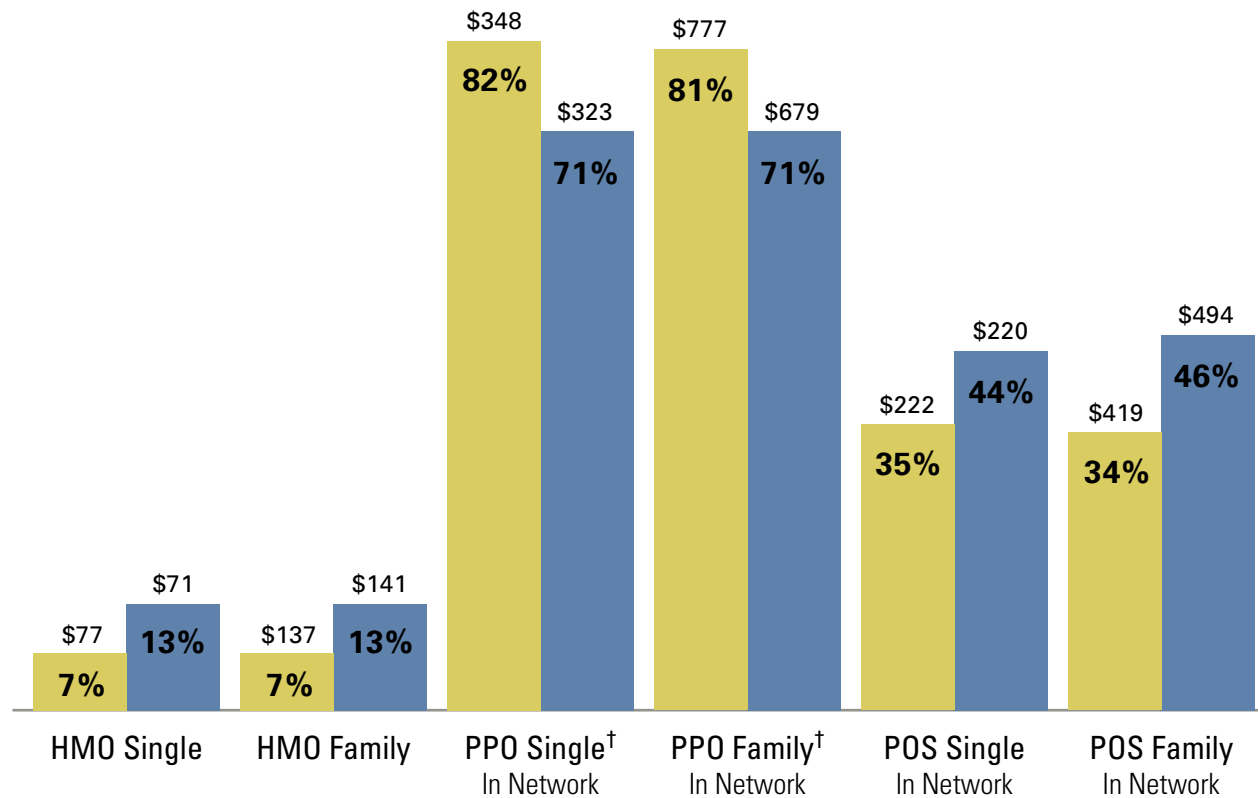


Notes: Seventy-four percent of covered workers in PPOs have co-payments rather than coinsurance for office visits, versus virtually all workers in HMOs and POS plans. *Distribution is statistically different from the previous year.

Sources: CHCF/HSC California Employer Health Benefits Survey: 2005; CHCF/HRET California Employer Health Benefits Survey: 2004; Kaiser/HRET California Employer Health Benefits Survey: 2003.

Covered Workers Facing an Annual Deductible* and the Amount, 2005

■ California ■ U.S.



*Average deductibles include workers who have no deductible.

†Percentages are significantly different between California and the U.S.

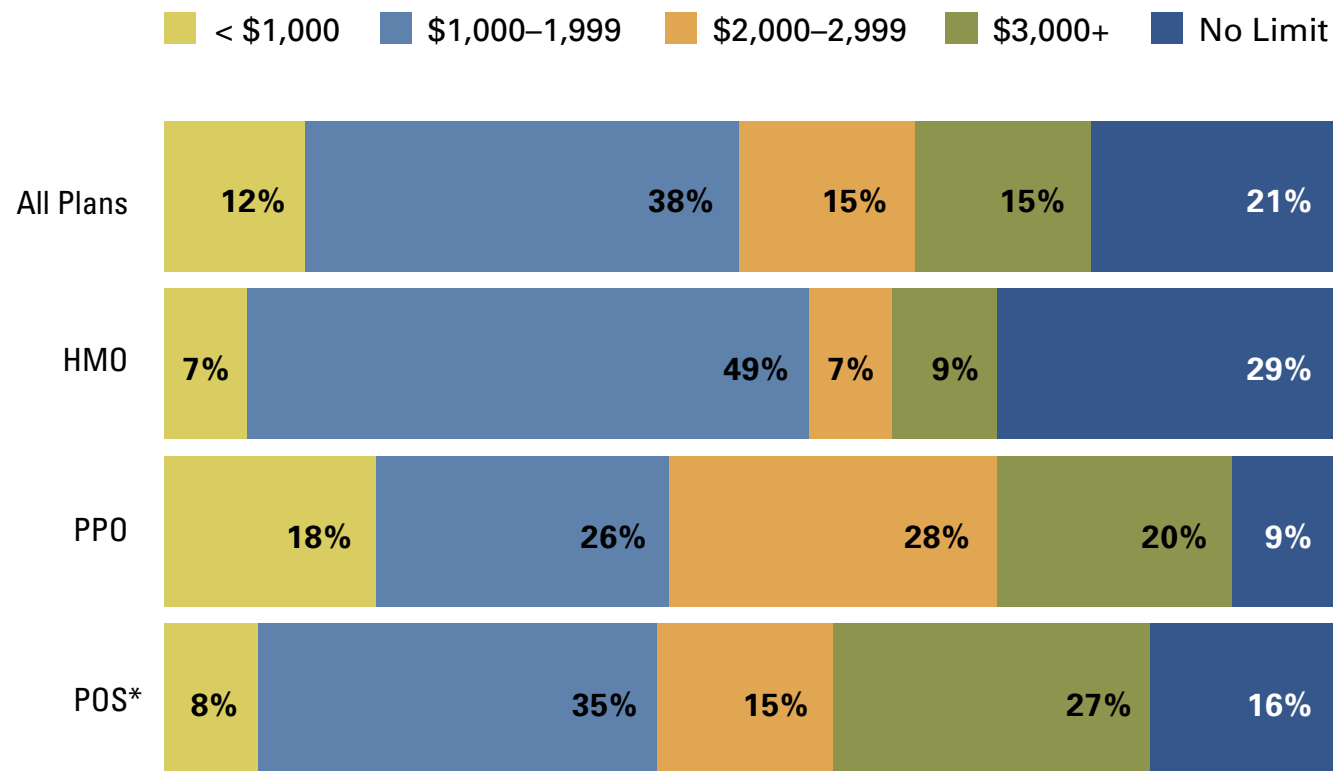
Sources: CHCF/HSC Survey of Employer-Sponsored Health Benefits: 2005; Kaiser/HRET Survey of Employer-Sponsored Health Benefits: 2005.

California Employer Health Benefits Survey

California workers in PPO plans were much more likely to have an annual deductible than workers in HMO and POS plans; 82 percent of California workers with single PPO coverage faced a deductible, which averaged \$348 for in-network providers.

Covered Workers with Various Annual Out-of-Pocket Limits

Single Coverage, 2005



*Distribution is statistically different from All Plans.

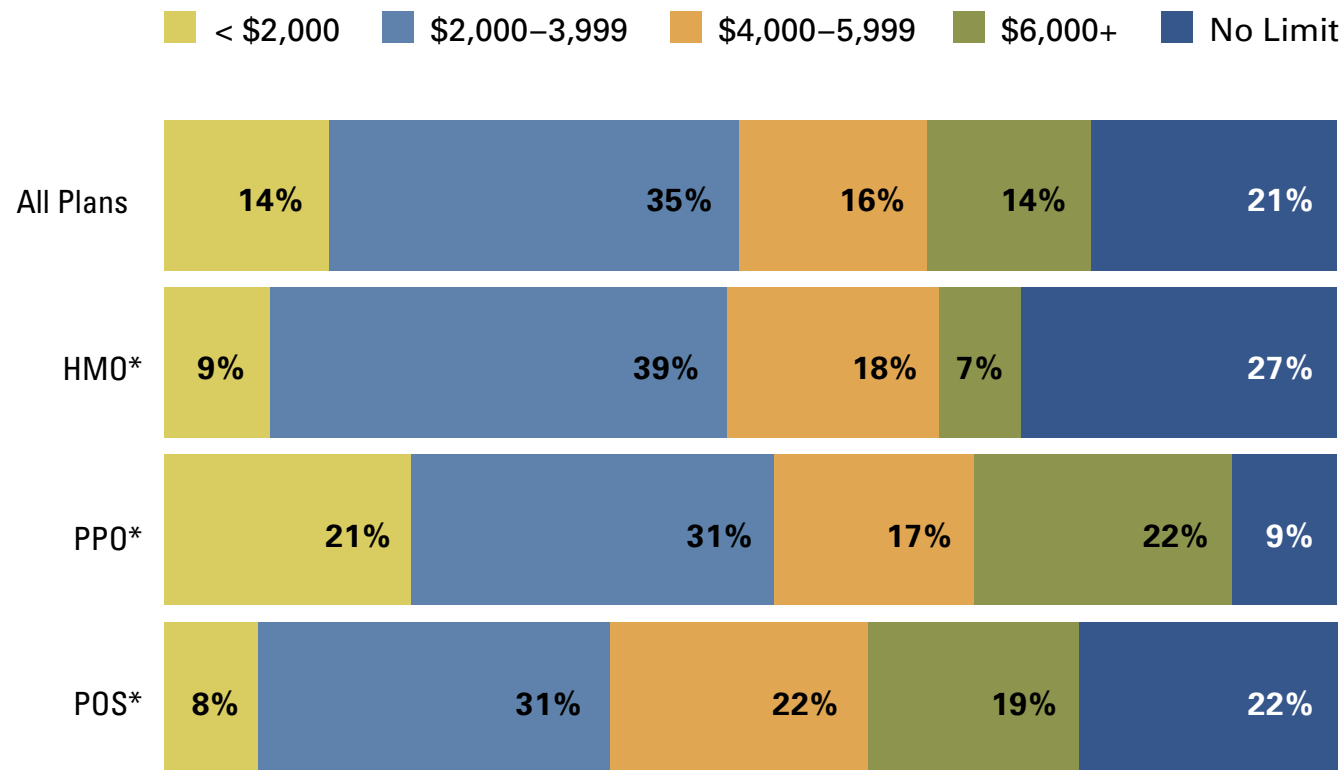
Note: Since HMOs typically provide very comprehensive coverage, not having a limit on out-of-pocket expenditures does not expose enrollees to the same financial risk as it could in other plan types.

Source: CHCF/HSC California Employer Health Benefits Survey: 2005.

California Employer Health Benefits Survey

The vast majority of covered workers (80 percent) with single coverage had an annual out-of-pocket maximum in their health plans. Thirty percent of workers had a maximum of \$2,000 or more.

Covered Workers with Various Annual Out-of-Pocket Limits Family Coverage, 2005



*Distribution is statistically different from All Plans.

Note: Since HMOs typically provide very comprehensive coverage, not having a limit on out-of-pocket expenditures does not expose enrollees to the same financial risk as it could in other plan types.

Source: CHCF/HSC California Employer Health Benefits Survey: 2005.

California Employer Health Benefits Survey

The vast majority of covered workers (79 percent) with family coverage had an annual out-of-pocket maximum in their health plans. Thirty percent of workers had a maximum of \$4,000 or more.

Covered Workers with Select Hospital Cost-sharing Types by Plan Type, 2005

Plan Type	Deductible/Copay Per Admission	Coinsurance Per Admission	Both	Charge Per Day
HMO	47%	0%*	1%	3%
PPO	33%	8%	5%	1%
POS	42%	5%	1%	4%
All Plans	45%	3%	2%	2%

Across All Plans:

Average Deductible/Copay: \$240

Average Coinsurance: 16%

California Employer Health Benefits Survey

Forty-five percent of California's covered workers faced a separate deductible or copayment for a hospital admission.

*Estimate is statistically different from All Plans.

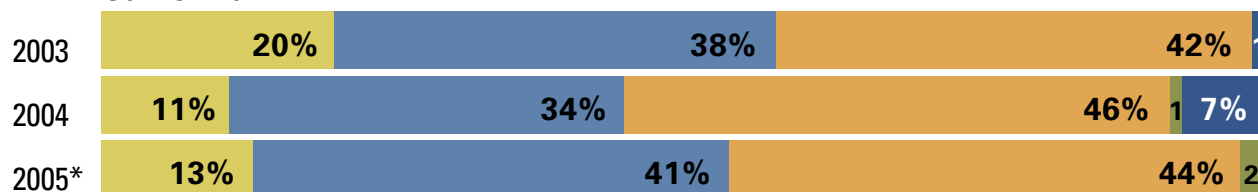
Source: CHCF/HSC California Employer Health Benefits Survey: 2005.

Workers Facing Cost-sharing Formulas for Prescription Drugs

Cost-Sharing Formula

- Cost sharing the same regardless of drug type
- Two Tier: One payment for generic drugs and one for name brand
- Three Tier: One payment for generic drugs, another for preferred drugs, and a third for non-preferred drugs
- Four Tier: Three tier plus a fourth tier for lifestyle or other specified drug
- Other

California



U.S.



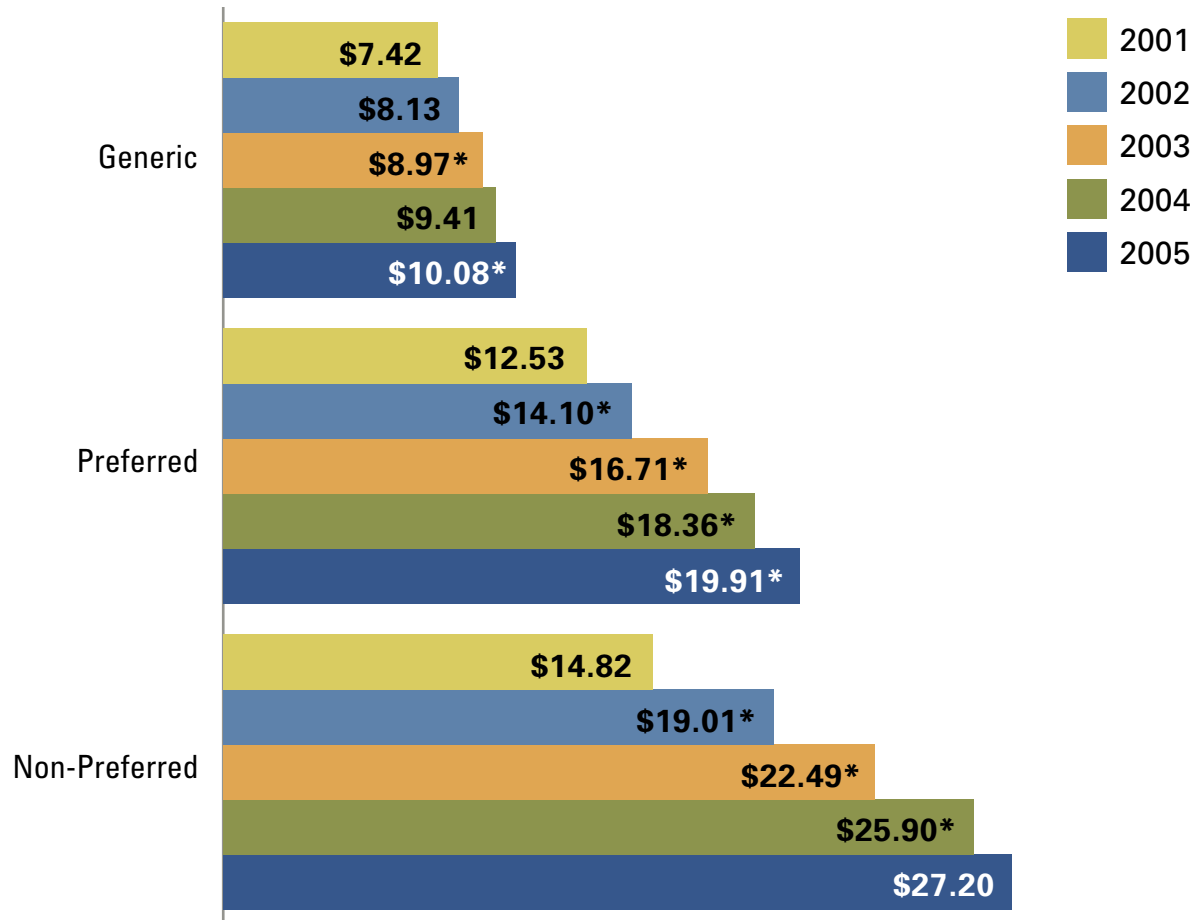
*Distribution is statistically different from previous year shown.

Sources: CHCF/HSC California Employer Health Benefits Survey: 2005; CHCF/HRET California Employer Health Benefits Survey: 2004; Kaiser/HRET California Employer Health Benefits Survey: 2003; Kaiser/HRET Employer Health Benefits Survey: 2003 to 2005.

California Employer Health Benefits Survey

Eighty-seven percent of covered workers in California were enrolled in a health plan that used a two-, three-, or four-tier cost-sharing formula for prescription drugs. Nationally, 89 percent of enrollees in 2005 were enrolled in a plan that used a tiered cost-sharing formula.

Average Prescription Copayments by Drug Type, 2001 to 2005



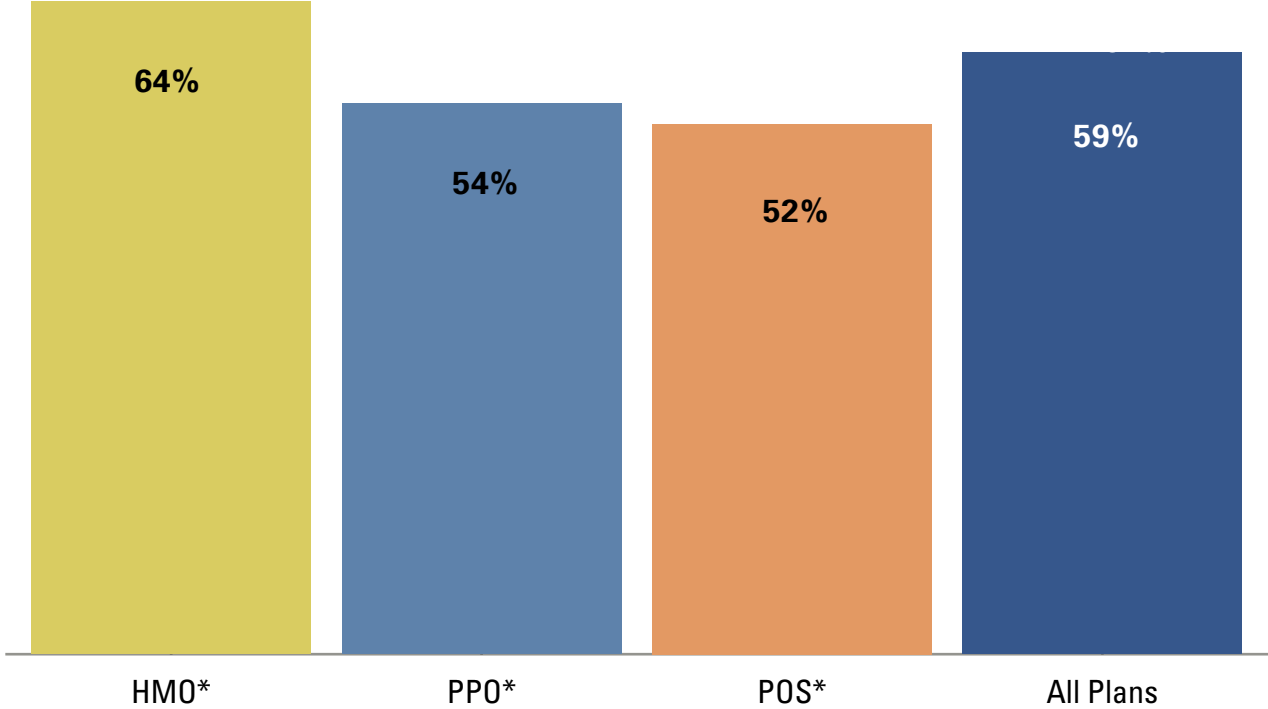
California Employer Health Benefits Survey

While copayments for generic drugs have increased moderately, those for preferred drugs have increased from \$12.53 in 2001 to nearly \$20 in 2005, an increase of 59 percent. Five percent of covered workers have a separate annual deductible for prescription drugs, averaging \$171 per year (not shown).

*Estimate is statistically different from previous year shown.

Sources: CHCF/HSC California Employer Health Benefits Survey: 2005; CHCF/HRET California Employer Health Benefits Survey: 2004; Kaiser/HRET California Employer Health Benefits Survey: 2001 to 2003.

Workers Whose Plan Includes a Disease Management Program, 2005



California Employer Health Benefits Survey

Workers with HMO coverage were more likely than workers with other plan types to have a plan that included a disease management program.

*Tests found no statistical difference from All Firms.
Source: CHCF/HSC Survey of Employer-Sponsored Health Benefits: 2005.

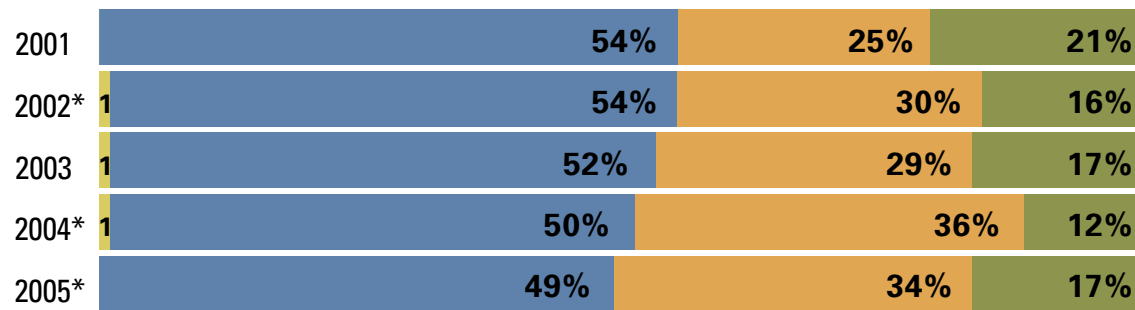
Enrollment for Covered Workers by Plan Type

California Employer Health Benefits Survey

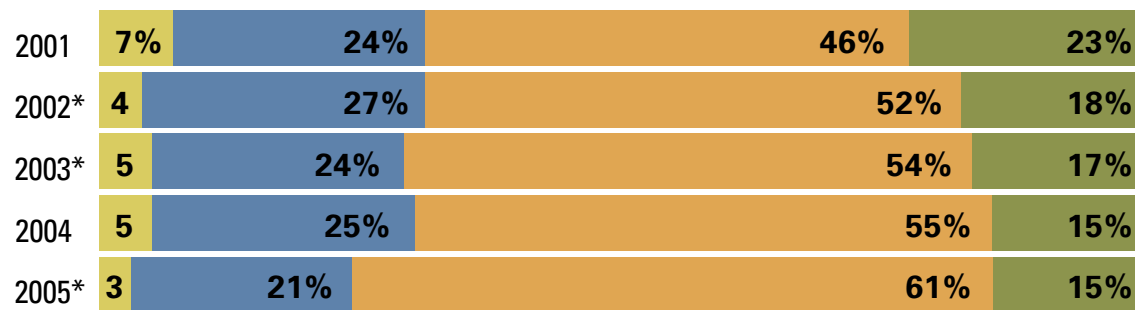
Forty-nine percent of Californians were enrolled in HMOs in 2005, more than double the 21 percent national average, while only 34 percent of California workers were enrolled in PPOs, compared with 61 percent nationally.

■ Conventional
 ■ HMO
 ■ PPO
 ■ POS

California



U.S.

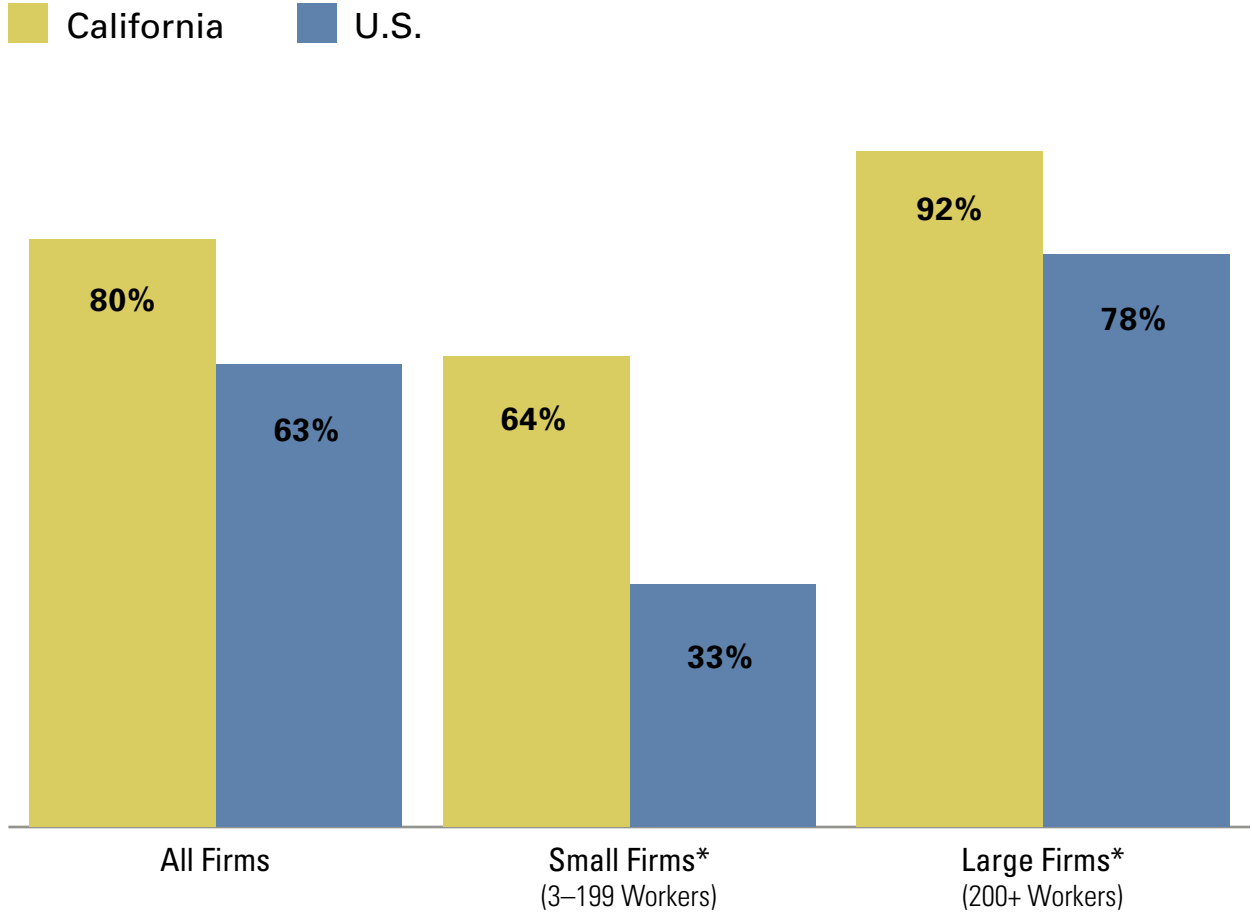


*Distribution is statistically different from previous year.

Note: California conventional plan enrollment in 2001 was less than 1 percent.

Sources: CHCF/HSC California Employer Health Benefits Survey: 2005; CHCF/HRET California Employer Health Benefits Survey: 2004; Kaiser/HRET California Employer Health Benefits Survey: 2001 to 2003.

Covered Workers with a Choice of Health Plans, by Firm Size, 2005



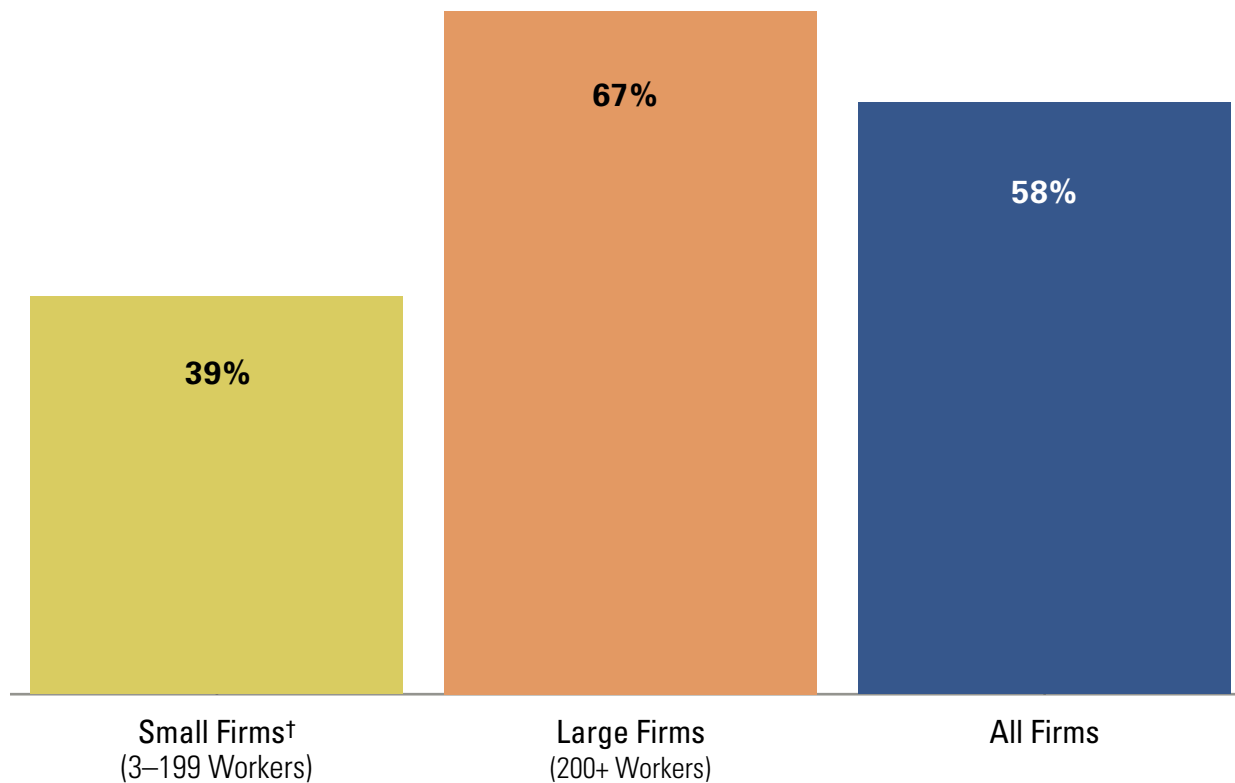
California Employer Health Benefits Survey

Both in California and nationally, workers in smaller businesses (3 to 199 workers) were much less likely than workers in larger firms to have a choice of health plans.

*Estimates are statistically different from All Firms.

Sources: CHCF/HSC 2005 California Employer Health Benefits Survey; Kaiser/HRET Survey of Employer-Sponsored Health Benefits: 2005

Among Workers with a Choice of Plan Type,* Those That Have a Choice of Insurance Carrier, 2005



*Plan type refers to HMO, PPO, and POS.

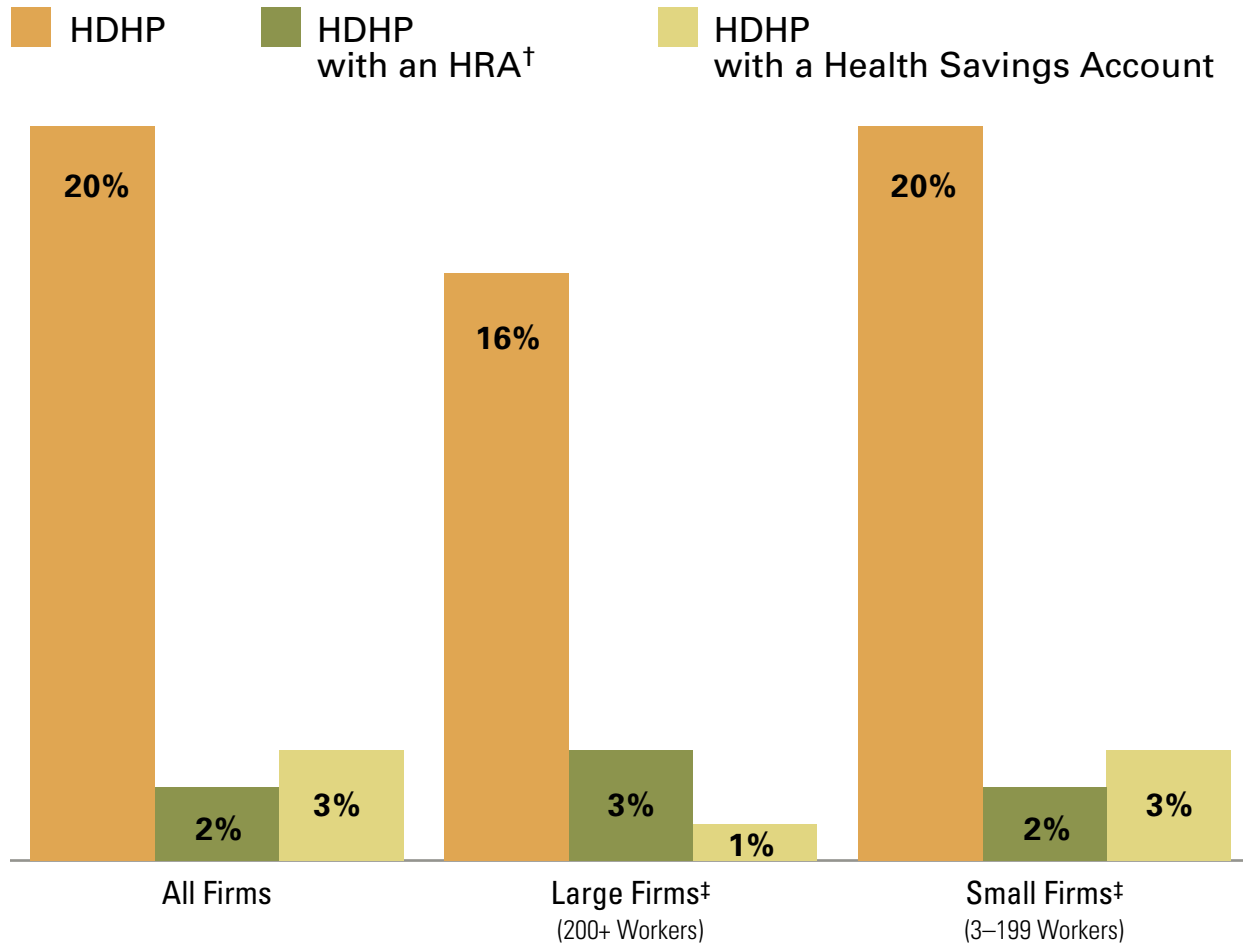
†Estimate is statistically different from All Firms.

Source: CHCF/HSC Survey of Employer-Sponsored Health Benefits: 2005.

California Employer Health Benefits Survey

Of covered workers whose employers offered more than one type of plan (e.g., HMO, PPO), those working in large firms were much more likely (67 percent) than those in small firms (39 percent) to have a choice of insurance carriers in 2005.

Firms Offering Employees a High-deductible Plan,* 2005



California Employer Health Benefits Survey

Approximately 20 percent of small firms offered a high-deductible health plan in 2005, compared with 16 percent of large firms.

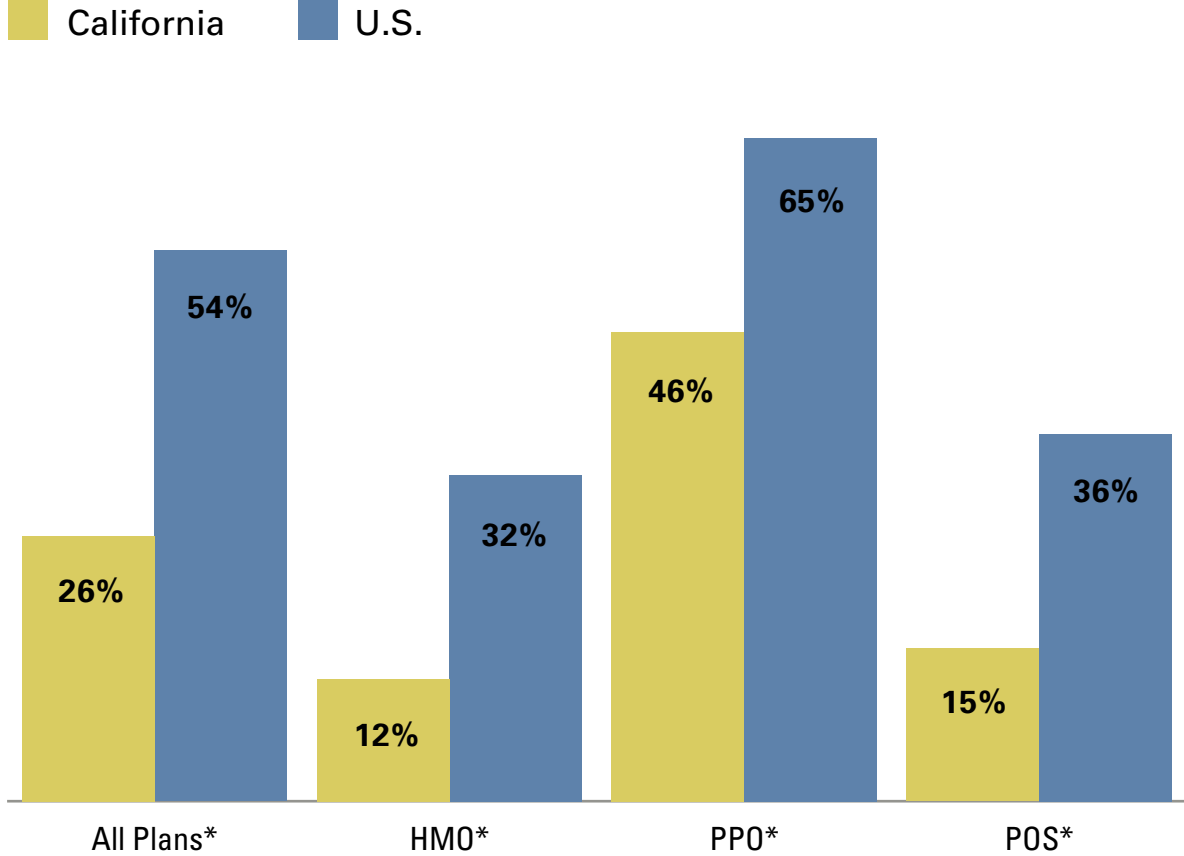
*Defined as having a deductible of \$1,000 or greater for single coverage, and \$2,000 or greater for family coverage.

[†]Health Reimbursement Arrangement

[‡]Tests found no statistical difference from All Firms.

Source: CHCF/HSC California Employer Health Benefits Survey: 2005.

Employees in Partly or Entirely Self-insured Plans, 2005



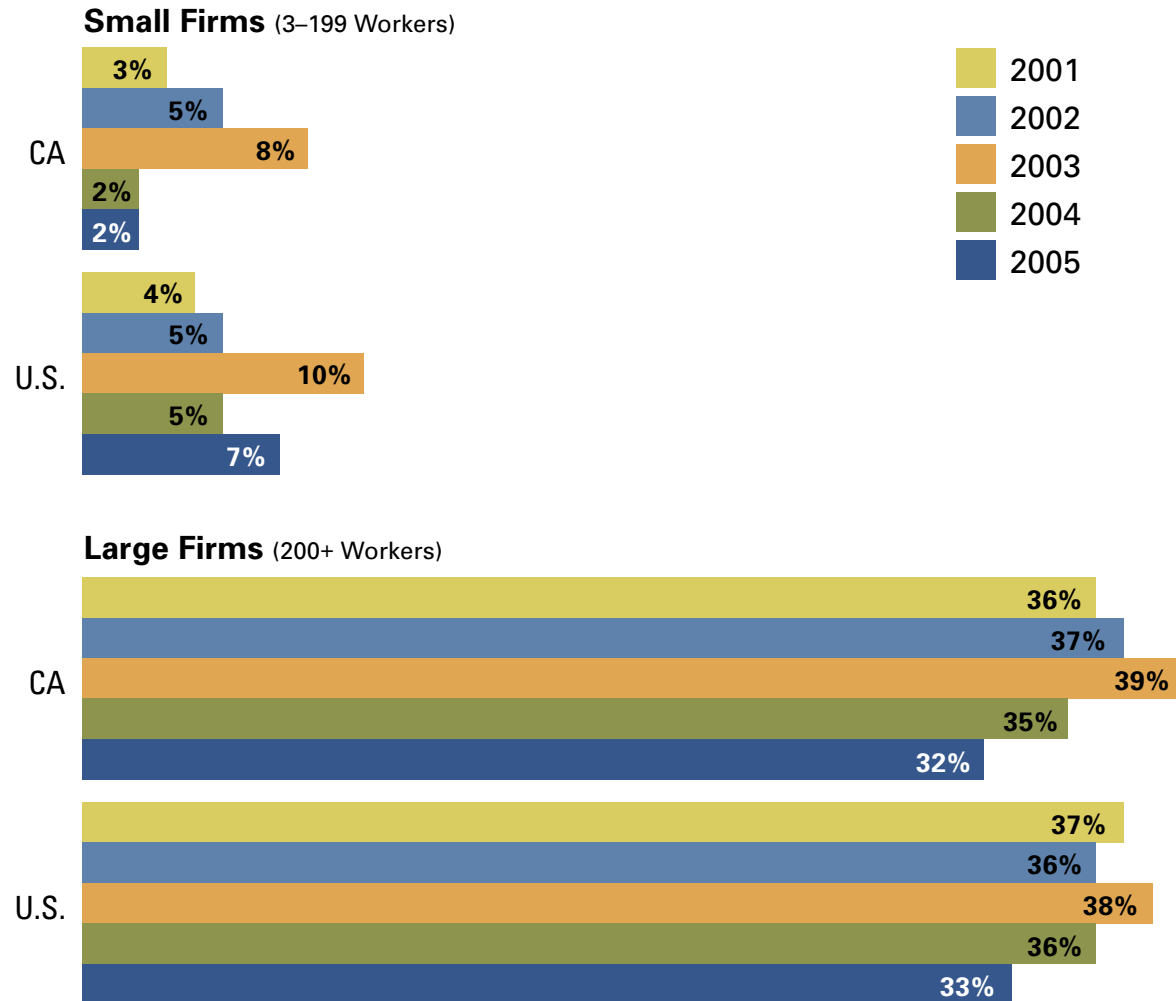
*Estimates are statistically different in all categories between California and the U.S.
 Note: Self-insured plans are plans where an employer assumes responsibility for paying health care claims rather than buying coverage from an insurer.
 Sources: CHCF/HSC California Employer Health Benefits Survey: 2005; Kaiser/HRET Survey of Employer-Sponsored Health Benefits: 2005.

California Employer Health Benefits Survey

Twenty-six percent of Californians with employer-sponsored coverage were in a self-insured plan in 2005, compared with 54 percent nationally. This difference results from the fact that more Californians are enrolled in HMOs than employees nationally. HMOs are less likely than other types of plans to be self-insured.

Note: Since federal law prohibits states from regulating the practices of self-insured health plans, the number of workers enrolled in such plans determines the reach of state legislation governing patients' rights and benefit requirements.

Firms That Offer Retiree Benefits,* 2001 to 2005



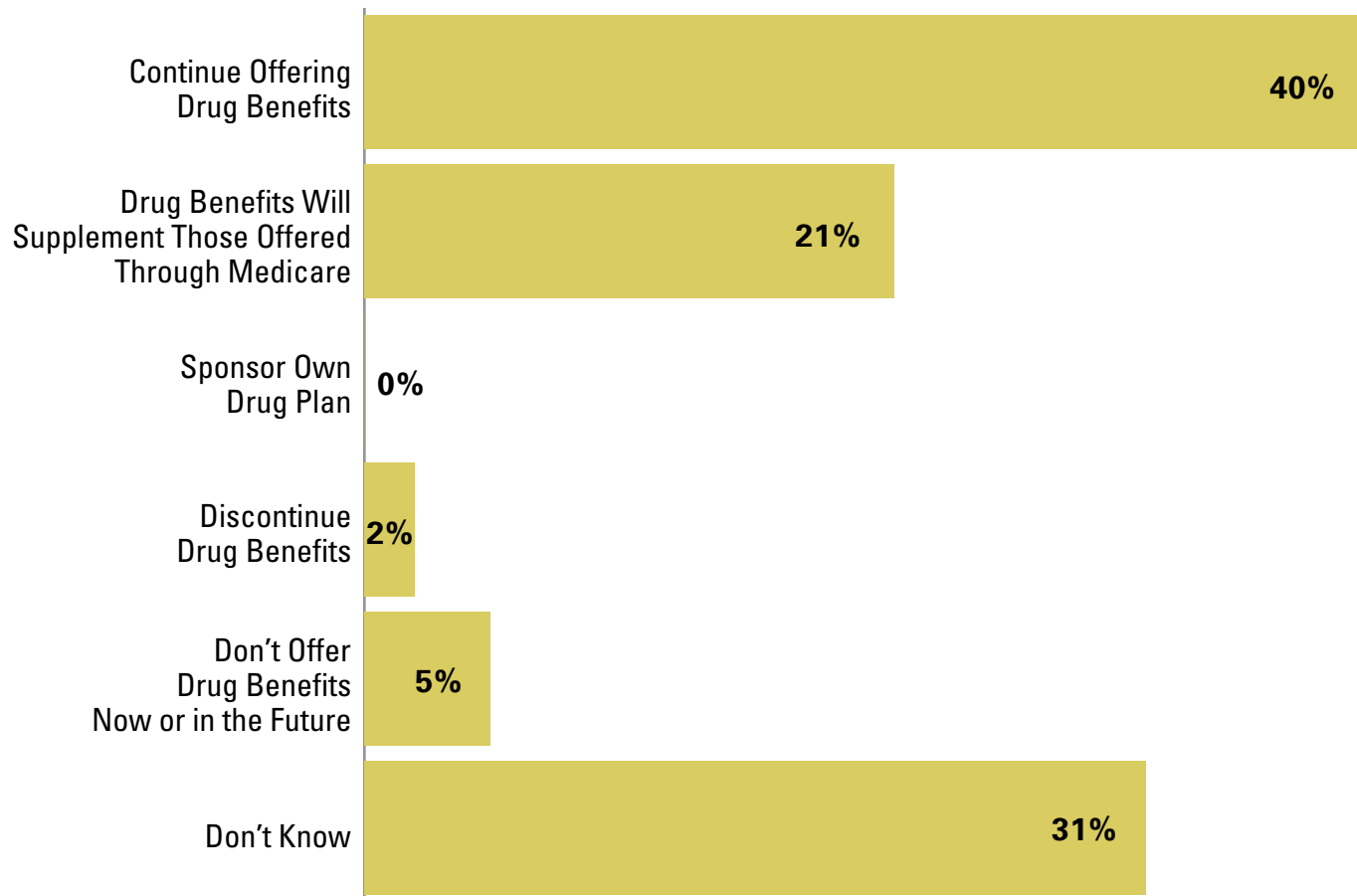
California Employer Health Benefits Survey

Thirty-two percent of California firms with 200 or more workers offered retiree coverage in 2005, nearly identical to the percentage of firms nationally (33 percent).

*Tests found no statistically different estimates from previous year shown.

Sources: CHCF/HSC California Employer Health Benefits Survey: 2005; CHCF/HRET California Employer Health Benefits Survey: 2004; Kaiser/HRET California Employer Health Benefits Survey: 2001 to 2003; Kaiser/HRET Survey of Employer-Sponsored Health Benefits: 2001 to 2005.

Planned Response to the Medicare Modernization Act in 2006



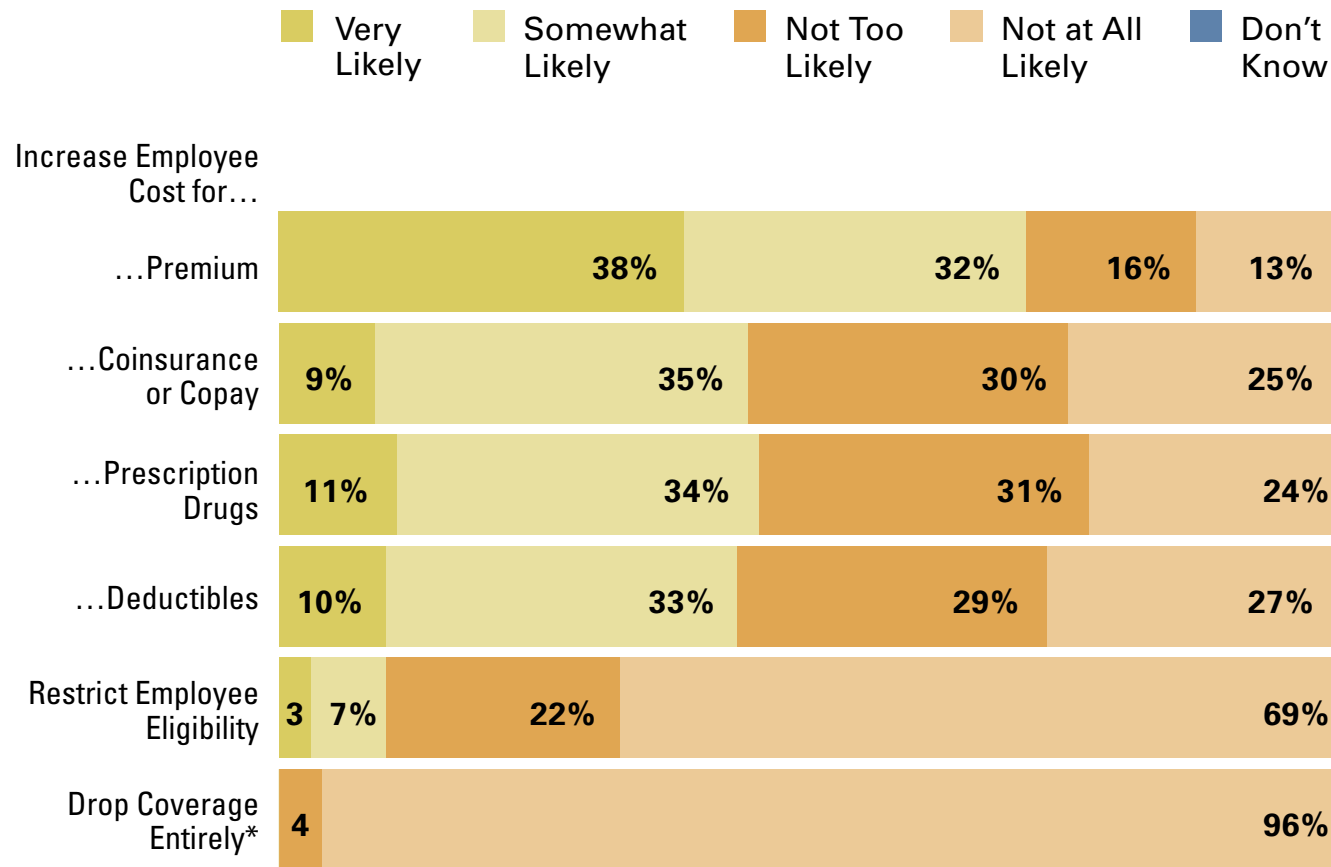
California Employer Health Benefits Survey

Forty percent of employers currently offering retiree health benefits to Medicare-age retirees said that they will continue to offer prescription drug benefits in 2006 and accept the tax-free government subsidy.

Notes: The Medicare Modernization Act goes into effect in January of 2006. Responses are among employers offering benefits to Medicare-age retirees.

Source: CHCF/HSC Survey of Employer-Sponsored Health Benefits: 2005.

Likelihood of Large Employers Making Select Changes in 2006



California Employer Health Benefits Survey

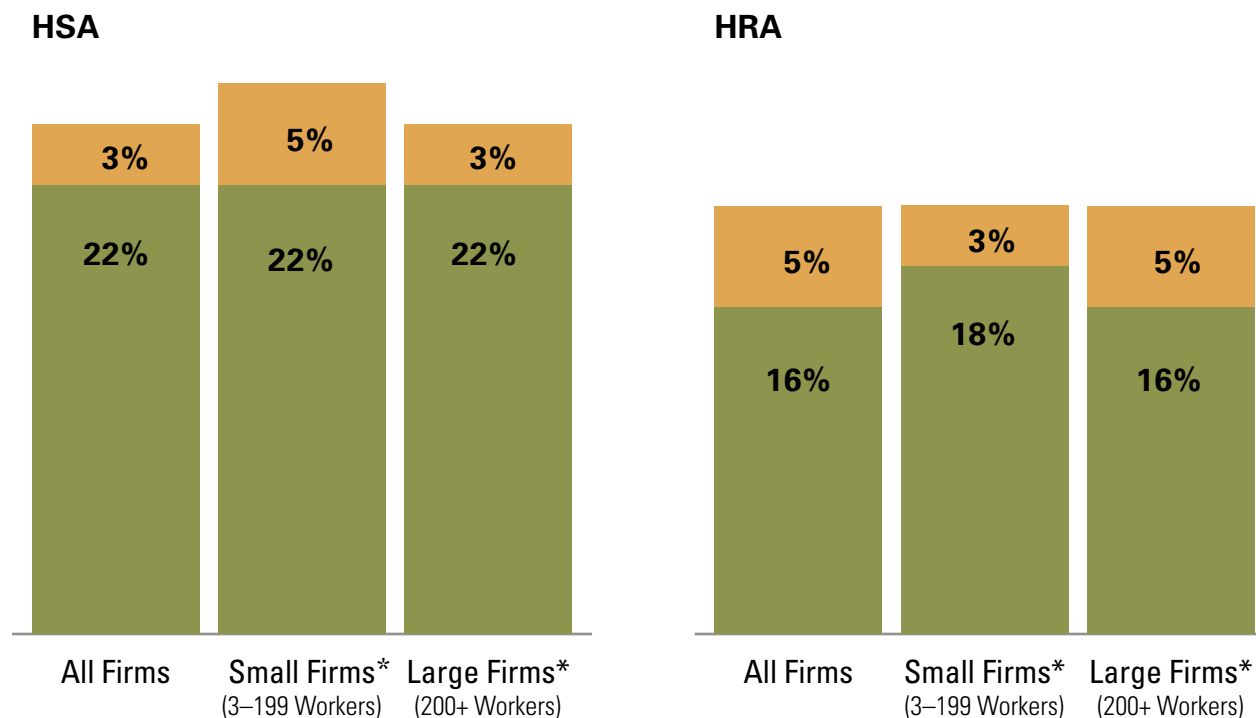
Thirty-eight percent of large employers (200 or more workers) in California reported that they were “very likely” to increase the amount employees pay for health insurance premiums in 2006, with another 32 percent being “somewhat likely” to do so.

*Less than 1 percent of large firms reported that they were “very likely” to drop coverage entirely.

Source: CHCF/HSC Survey of Employer-Sponsored Health Benefits: 2005.

Firms Likely to Offer High-deductible Plan with an HRA or HSA in 2006

Very Likely
Somewhat Likely



*Tests found no statistical difference from All Firms.

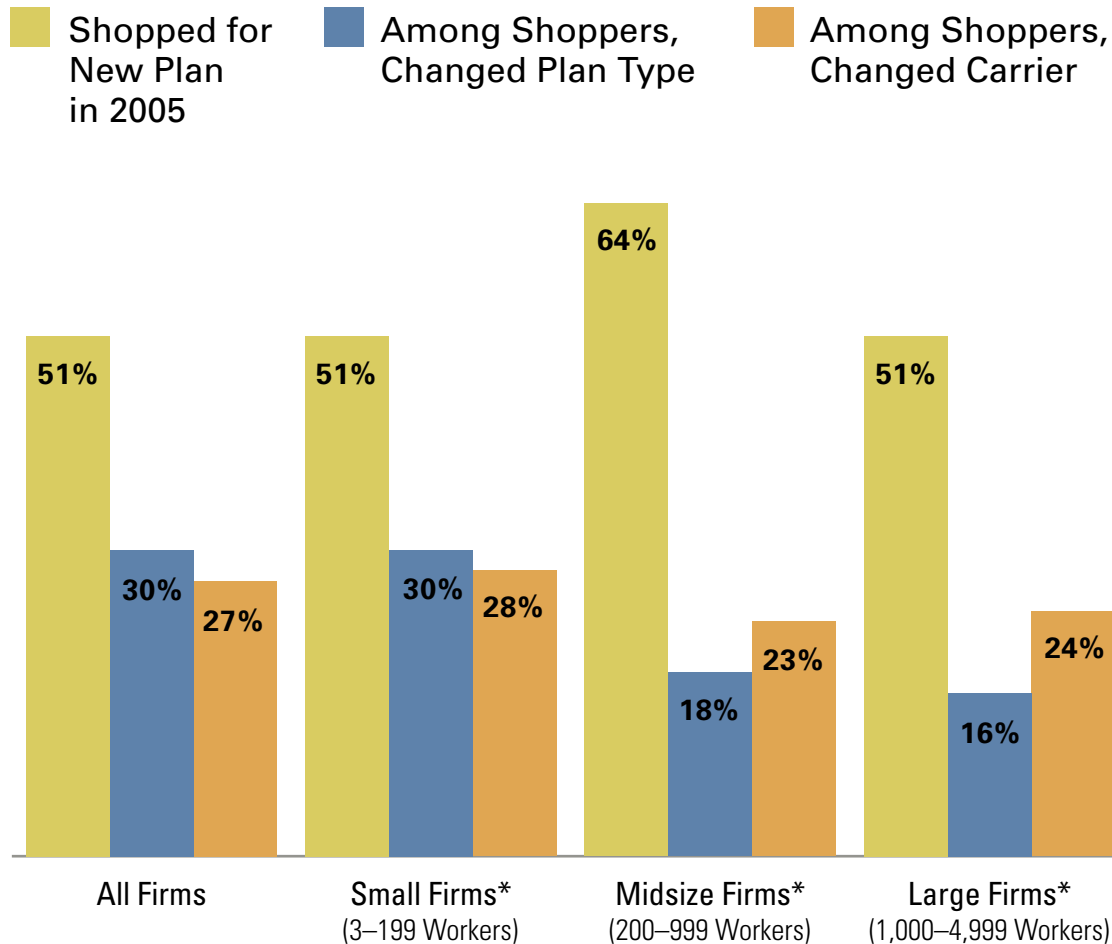
Notes: A high-deductible plan is defined as having a deductible of \$1,000 or more for single coverage, and \$2,000 or more for family coverage. HRA is a health reimbursement arrangement; HSA is a health savings account.

Source: CHCF/HSC Survey of Employer-Sponsored Health Benefits: 2005.

California Employer Health Benefits Survey

Twenty-five percent of employers reported that they were “very likely” or “somewhat likely” to offer an HDHP with a health savings account in the next year; 21 percent reported that they were “very likely” or “somewhat likely” to offer an HDHP with a health reimbursement arrangement.

Firms that Shopped for a New Plan, Changed Plan Type, or Carrier, 2005



*Tests found no statistically different estimates from All Firms.

Source: CHCF/HSC Survey of Employer-Sponsored Health Benefits: 2005.

California Employer Health Benefits Survey

In 2005, 51 percent of firms in California shopped for a new plan. Of these employers that shopped, 30 percent changed plan types and 27 percent changed insurance carriers.

Opinions on Effectiveness of Cost Containment Strategies, 2005

Effectiveness

Very Somewhat Not Too Not at All Don't Know

Disease Management



Higher Employee Cost Sharing



Consumer Driven Health Plans*



Tighter Managed Care Networks



Few firms viewed current cost containment strategies as being very effective at reducing premium increases.

*For example, a high-deductible plan with an HRA.

Source: CHCF/HSC Survey of Employer-Sponsored Health Benefits: 2005.

Methods

The California Employer Health Benefits Survey, a joint product of the California HealthCare Foundation (CHCF) and The Center for Studying Health System Change (HSC), was designed and analyzed by researchers at HSC, and administered by National Research LLC (NR). The findings are based on a random sample of 846 interviews with employee benefit managers in private firms in California. NR conducted interviews from April to July 2005. As with prior years, the sample of firms was drawn from the Dun & Bradstreet list of private employers with three or more workers. The margin of error for responses among all employers is ± 3.4 percent; for responses among employers with 3 to 199 workers is ± 4.7 percent; and among employers with 200 or more workers is ± 4.9 percent. Some exhibits do not sum to 100 percent due to rounding effects.

The Kaiser Family Foundation sponsored this survey of California employers from 2000 to 2003. A similar employer survey was also conducted in 1999, in conjunction with the Center for Health and Public Policy Studies at the University of California, Berkeley. The Health Research and Educational Trust (HRET) collaborated on these surveys from 1999 to 2004.

This survey instrument is based on a national employer survey conducted annually by the Kaiser Family Foundation (KFF) and HRET. The national results are drawn from that survey, and are available at www.kff.org. This survey asked questions about the following types of health plans: health maintenance organizations (HMOs), preferred provider organizations (PPOs), and point-of-service (POS) plans. Conventional (fee-for-service) plans are generally excluded from the plan type analyses because they comprise such a small share of the California market.

Many variables with missing information were identified as needing complete information within the database. To control for item non-response bias, missing values within these variables were imputed using either a distributional approach (continuous variables) or a hot-deck approach (categorical variables). Calculation of the weights follows a common approach. First, the basic weight is determined, followed by a survey non-response adjustment. Next, the weights are trimmed in order to reduce the influence of weight outliers. Finally, a post-stratification adjustment is applied.

Important notes about the methodology: Rates of change for worker or employer contributions to premiums and other variables should not be calculated by comparing dollar values in this report to data reported in past CHCF or KFF publications, due to both the survey's sampling design and the way in which plan information is collected. Rates of change in premiums are collected directly as a question in the survey. Because the survey does not collect information on the rate of change in other variables, this information is not reported and should not be calculated by comparing results to data from previous surveys.

In prior years, the sample of employers was post-stratified using frequency distributions from Dun & Bradstreet. Concerns about the volatility of counts in recent years led Kaiser/HRET to use the Statistics of U.S. Businesses conducted by the U.S. Census as the basis for the post-stratification adjustment in 2003. Due to this change, Kaiser/HRET recalculated the weights for survey years 1999 to 2002 and modified estimates published in the survey where appropriate. The majority of these new estimates are not statistically different from the old estimates. However, please note that the survey data published in this chart pack may vary slightly from reports published in 2003 and earlier.

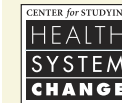
California Employer Health Benefits Survey

FOR MORE INFORMATION



CALIFORNIA
HEALTHCARE
FOUNDATION

California HealthCare
Foundation
476 9th Street
Oakland, CA 94607
510.238.1040
www.chcf.org



Center for Studying Health
System Change
600 Maryland Ave. SW
Washington DC 20024
202.484.5261
www.hschange.org