

Blue Shield Medicare Supplement plan rates

Blue Shield of California rates effective:
July 1, 2024

Blue Shield of California Medicare Supplement plans

Please take a few minutes to review the information in this booklet.

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Locate your rate

Several factors determine your rate including where you live, the Medicare Supplemental plan you chose, and your age.

To see the rate you will pay, locate your region, age range, and plan selected in the following rate schedule.

Information about prepaid or periodic charges

Your dues will automatically increase annually and the amount due will be based on your attained age on that date.

If you're applying more than 60 days before your effective date, the rates listed are subject to change.

Enrolling in our plans

Plan F Extra is only available to applicants who attained age 65 before January 1, 2020, or first became eligible for Medicare benefits due to disability before January 1, 2020.

The Notice of New or Innovative Benefits Form contains information about benefits, costs, and premiums of the new or innovative benefits (our Extra benefits) included with your plan. Please visit blueshieldca.com/innovativebenefits to access the form. On the plan documents page, select your plan and click the drop-down menu to view the notice. Please keep this notice with your plan documents for your records. You can also request a copy of the form by contacting us at **(800) 248-2341 (TTY: 711)**. Representatives are available from 8:00 a.m. to 8:00 p.m., 7 days a week, year round.

Region 1

Los Angeles County (except for ZIP codes 91711, 91759, 91765, 91766, 91767, 93535, 93544, 93563, and 93591)

Monthly plan dues – billed and to be paid in advance

The amounts listed are **before** any applicable program savings are applied.

If you are enrolled in the Household Savings Program, your dues will be 7% less than what is listed.¹

Single-party rates

Age range	A	F Extra ³	G	G Extra	N
65	\$125	\$227	\$171	\$188	\$168
66	\$129	\$237	\$179	\$197	\$179
67	\$133	\$247	\$191	\$207	\$183
68	\$139	\$256	\$202	\$218	\$190
69	\$145	\$266	\$213	\$230	\$198
70	\$156	\$275	\$227	\$242	\$211
71	\$167	\$286	\$239	\$256	\$223
72	\$175	\$305	\$256	\$273	\$240
73	\$182	\$323	\$270	\$286	\$257
74	\$196	\$336	\$283	\$298	\$264
75	\$210	\$349	\$294	\$310	\$273
76	\$218	\$380	\$318	\$335	\$292
77	\$226	\$407	\$341	\$358	\$309
78	\$230	\$429	\$355	\$372	\$310
79	\$233	\$458	\$374	\$390	\$316
80	\$241	\$483	\$394	\$410	\$326
81	\$248	\$509	\$413	\$429	\$337
82	\$254	\$521	\$429	\$448	\$345
83	\$260	\$536	\$449	\$465	\$356
84	\$266	\$554	\$466	\$484	\$370
85 and over	\$272	\$577	\$485	\$501	\$385
Under 65 ²	\$544	\$1,149	\$967	\$999	\$767

Tobacco rates – only applies if you’ve used tobacco products in the past 24 months and you are not eligible for guaranteed acceptance

Single-party rates

Age range	A	F Extra³	G	G Extra	N
65	\$149	\$271	\$204	\$224	\$200
66	\$154	\$283	\$214	\$235	\$214
67	\$159	\$295	\$228	\$247	\$218
68	\$166	\$305	\$241	\$260	\$227
69	\$173	\$317	\$254	\$274	\$236
70	\$186	\$328	\$271	\$289	\$252
71	\$199	\$341	\$285	\$305	\$266
72	\$209	\$364	\$305	\$326	\$286
73	\$217	\$385	\$322	\$341	\$307
74	\$234	\$401	\$338	\$356	\$315
75	\$251	\$416	\$351	\$370	\$326
76	\$260	\$453	\$379	\$400	\$348
77	\$270	\$486	\$407	\$427	\$369
78	\$274	\$512	\$424	\$444	\$370
79	\$278	\$546	\$446	\$465	\$377
80	\$288	\$576	\$470	\$489	\$389
81	\$296	\$607	\$493	\$512	\$402
82	\$303	\$622	\$512	\$534	\$412
83	\$310	\$639	\$536	\$555	\$425
84	\$317	\$661	\$556	\$577	\$441
85 and over	\$324	\$688	\$579	\$598	\$459
Under 65²	\$649	\$1,371	\$1,154	\$1,192	\$915

Region 2

Orange County

Monthly plan dues – billed and to be paid in advance

The amounts listed are **before** any applicable program savings are applied.

If you are enrolled in the Household Savings Program, your dues will be 7% less than what is listed.¹

Single-party rates

Age range	A	F Extra ³	G	G Extra	N
65	\$125	\$235	\$175	\$192	\$172
66	\$129	\$243	\$185	\$202	\$179
67	\$133	\$254	\$195	\$213	\$183
68	\$139	\$263	\$206	\$223	\$190
69	\$145	\$272	\$218	\$235	\$198
70	\$156	\$283	\$233	\$249	\$211
71	\$167	\$293	\$245	\$262	\$223
72	\$175	\$313	\$264	\$280	\$240
73	\$182	\$330	\$277	\$294	\$257
74	\$199	\$345	\$289	\$305	\$271
75	\$216	\$360	\$301	\$317	\$283
76	\$224	\$390	\$328	\$343	\$301
77	\$232	\$416	\$351	\$367	\$317
78	\$236	\$440	\$364	\$380	\$318
79	\$240	\$471	\$383	\$400	\$325
80	\$247	\$496	\$402	\$420	\$337
81	\$254	\$519	\$423	\$440	\$349
82	\$260	\$535	\$441	\$458	\$357
83	\$266	\$548	\$460	\$477	\$365
84	\$273	\$569	\$478	\$494	\$380
85 and over	\$279	\$593	\$497	\$514	\$394
Under 65 ²	\$558	\$1,182	\$989	\$1,025	\$786

Tobacco rates – only applies if you’ve used tobacco products in the past 24 months and you are not eligible for guaranteed acceptance

Single-party rates

Age range	A	F Extra³	G	G Extra	N
65	\$149	\$280	\$209	\$229	\$205
66	\$154	\$290	\$221	\$241	\$214
67	\$159	\$303	\$233	\$254	\$218
68	\$166	\$314	\$246	\$266	\$227
69	\$173	\$324	\$260	\$280	\$236
70	\$186	\$338	\$278	\$297	\$252
71	\$199	\$350	\$292	\$313	\$266
72	\$209	\$373	\$315	\$334	\$286
73	\$217	\$394	\$330	\$351	\$307
74	\$237	\$412	\$345	\$364	\$323
75	\$258	\$429	\$359	\$378	\$338
76	\$267	\$465	\$391	\$409	\$359
77	\$277	\$496	\$419	\$438	\$378
78	\$282	\$525	\$434	\$453	\$379
79	\$286	\$562	\$457	\$477	\$388
80	\$295	\$592	\$480	\$501	\$402
81	\$303	\$619	\$505	\$525	\$416
82	\$310	\$638	\$526	\$546	\$426
83	\$317	\$654	\$549	\$569	\$435
84	\$326	\$679	\$570	\$589	\$453
85 and over	\$333	\$707	\$593	\$613	\$470
Under 65²	\$666	\$1,410	\$1,180	\$1,223	\$938

Region 3

San Diego, Sonoma, San Bernardino and Kern counties, and Los Angeles
ZIP codes 91711, 91759, 91765, 91766, 91767, 93535, 93544, 93563, and 93591

Monthly plan dues – billed and to be paid in advance

The amounts listed are **before** any applicable program savings are applied.

If you are enrolled in the Household Savings Program, your dues will be 7% less than what is listed.¹

Single-party rates

Age range	A	F Extra ³	G	G Extra	N
65	\$119	\$213	\$158	\$176	\$155
66	\$123	\$222	\$168	\$185	\$167
67	\$127	\$230	\$178	\$195	\$177
68	\$135	\$238	\$188	\$205	\$186
69	\$142	\$246	\$199	\$215	\$192
70	\$153	\$257	\$212	\$229	\$204
71	\$163	\$267	\$224	\$240	\$216
72	\$171	\$285	\$239	\$256	\$235
73	\$178	\$300	\$251	\$269	\$250
74	\$193	\$312	\$262	\$278	\$259
75	\$207	\$325	\$273	\$289	\$269
76	\$214	\$353	\$297	\$313	\$286
77	\$221	\$378	\$318	\$334	\$299
78	\$225	\$400	\$331	\$346	\$301
79	\$229	\$427	\$347	\$364	\$307
80	\$236	\$450	\$365	\$383	\$319
81	\$243	\$474	\$384	\$400	\$329
82	\$250	\$485	\$400	\$417	\$337
83	\$256	\$497	\$417	\$434	\$347
84	\$262	\$517	\$434	\$451	\$360
85 and over	\$267	\$537	\$450	\$468	\$373
Under 65 ²	\$534	\$1,069	\$898	\$933	\$744

Tobacco rates – only applies if you’ve used tobacco products in the past 24 months and you are not eligible for guaranteed acceptance

Single-party rates

Age range	A	F Extra³	G	G Extra	N
65	\$142	\$254	\$188	\$210	\$185
66	\$147	\$265	\$200	\$221	\$199
67	\$152	\$274	\$212	\$233	\$211
68	\$161	\$284	\$224	\$245	\$222
69	\$169	\$293	\$237	\$256	\$229
70	\$183	\$307	\$253	\$273	\$243
71	\$194	\$319	\$267	\$286	\$258
72	\$204	\$340	\$285	\$305	\$280
73	\$212	\$358	\$299	\$321	\$298
74	\$230	\$372	\$313	\$332	\$309
75	\$247	\$388	\$326	\$345	\$321
76	\$255	\$421	\$354	\$373	\$341
77	\$264	\$451	\$379	\$398	\$357
78	\$268	\$477	\$395	\$413	\$359
79	\$273	\$509	\$414	\$434	\$366
80	\$282	\$537	\$435	\$457	\$381
81	\$290	\$565	\$458	\$477	\$392
82	\$298	\$579	\$477	\$497	\$402
83	\$305	\$593	\$497	\$518	\$414
84	\$313	\$617	\$518	\$538	\$429
85 and over	\$319	\$641	\$537	\$558	\$445
Under 65²	\$637	\$1,275	\$1,071	\$1,113	\$888

Region 4

Riverside and Ventura counties

Monthly plan dues – billed and to be paid in advance

The amounts listed are **before** any applicable program savings are applied.

If you are enrolled in the Household Savings Program, your dues will be 7% less than what is listed.¹

Single-party rates

Age range	A	F Extra ³	G	G Extra	N
65	\$130	\$241	\$179	\$197	\$177
66	\$135	\$250	\$190	\$206	\$189
67	\$140	\$260	\$200	\$218	\$198
68	\$150	\$269	\$213	\$230	\$204
69	\$159	\$281	\$226	\$242	\$211
70	\$171	\$290	\$238	\$256	\$227
71	\$182	\$299	\$253	\$269	\$241
72	\$190	\$321	\$270	\$288	\$261
73	\$197	\$340	\$284	\$301	\$277
74	\$214	\$352	\$296	\$312	\$287
75	\$230	\$367	\$309	\$325	\$297
76	\$238	\$400	\$335	\$352	\$315
77	\$245	\$429	\$359	\$376	\$331
78	\$250	\$452	\$373	\$388	\$333
79	\$254	\$483	\$392	\$410	\$340
80	\$262	\$509	\$414	\$429	\$351
81	\$269	\$535	\$434	\$451	\$363
82	\$275	\$548	\$453	\$471	\$372
83	\$281	\$563	\$473	\$489	\$383
84	\$288	\$584	\$490	\$507	\$398
85 and over	\$295	\$607	\$510	\$527	\$415
Under 65 ²	\$590	\$1,210	\$1,015	\$1,051	\$828

Tobacco rates – only applies if you’ve used tobacco products in the past 24 months and you are not eligible for guaranteed acceptance

Single-party rates

Age range	A	F Extra³	G	G Extra	N
65	\$155	\$288	\$214	\$235	\$211
66	\$161	\$298	\$227	\$246	\$225
67	\$167	\$310	\$239	\$260	\$236
68	\$179	\$321	\$254	\$274	\$243
69	\$190	\$335	\$270	\$289	\$252
70	\$204	\$346	\$284	\$305	\$271
71	\$217	\$357	\$302	\$321	\$288
72	\$227	\$383	\$322	\$344	\$311
73	\$235	\$406	\$339	\$359	\$330
74	\$255	\$420	\$353	\$372	\$342
75	\$274	\$438	\$369	\$388	\$354
76	\$284	\$477	\$400	\$420	\$376
77	\$292	\$512	\$428	\$449	\$395
78	\$298	\$539	\$445	\$463	\$397
79	\$303	\$576	\$468	\$489	\$406
80	\$313	\$607	\$494	\$512	\$419
81	\$321	\$638	\$518	\$538	\$433
82	\$328	\$654	\$540	\$562	\$444
83	\$335	\$672	\$564	\$583	\$457
84	\$344	\$697	\$585	\$605	\$475
85 and over	\$352	\$724	\$608	\$629	\$495
Under 65²	\$704	\$1,444	\$1,211	\$1,254	\$988

Region 5

Santa Barbara, San Joaquin, and Stanislaus counties

Monthly plan dues – billed and to be paid in advance

The amounts listed are **before** any applicable program savings are applied.

If you are enrolled in the Household Savings Program, your dues will be 7% less than what is listed.¹

Single-party rates

Age range	A	F Extra ³	G	G Extra	N
65	\$111	\$197	\$147	\$163	\$144
66	\$115	\$204	\$154	\$172	\$151
67	\$119	\$213	\$163	\$180	\$158
68	\$123	\$219	\$172	\$189	\$168
69	\$127	\$228	\$183	\$200	\$173
70	\$137	\$236	\$196	\$212	\$184
71	\$147	\$245	\$206	\$223	\$196
72	\$155	\$264	\$220	\$237	\$211
73	\$162	\$277	\$233	\$249	\$225
74	\$174	\$288	\$242	\$258	\$233
75	\$185	\$300	\$252	\$269	\$241
76	\$192	\$327	\$274	\$291	\$257
77	\$199	\$349	\$293	\$310	\$271
78	\$203	\$368	\$304	\$320	\$272
79	\$207	\$394	\$321	\$338	\$277
80	\$213	\$414	\$337	\$355	\$287
81	\$219	\$434	\$355	\$371	\$297
82	\$224	\$446	\$369	\$386	\$305
83	\$229	\$458	\$385	\$401	\$312
84	\$234	\$476	\$399	\$416	\$325
85 and over	\$239	\$494	\$415	\$432	\$336
Under 65 ²	\$478	\$985	\$828	\$861	\$670

Tobacco rates – only applies if you’ve used tobacco products in the past 24 months and you are not eligible for guaranteed acceptance

Single-party rates

Age range	A	F Extra³	G	G Extra	N
65	\$132	\$235	\$175	\$194	\$172
66	\$137	\$243	\$184	\$205	\$180
67	\$142	\$254	\$194	\$215	\$188
68	\$147	\$261	\$205	\$225	\$200
69	\$152	\$272	\$218	\$239	\$206
70	\$163	\$282	\$234	\$253	\$220
71	\$175	\$292	\$246	\$266	\$234
72	\$185	\$315	\$262	\$283	\$252
73	\$193	\$330	\$278	\$297	\$268
74	\$208	\$344	\$289	\$308	\$278
75	\$221	\$358	\$301	\$321	\$288
76	\$229	\$390	\$327	\$347	\$307
77	\$237	\$416	\$350	\$370	\$323
78	\$242	\$439	\$363	\$382	\$324
79	\$247	\$470	\$383	\$403	\$330
80	\$254	\$494	\$402	\$424	\$342
81	\$261	\$518	\$424	\$443	\$354
82	\$267	\$532	\$440	\$460	\$364
83	\$273	\$546	\$459	\$478	\$372
84	\$279	\$568	\$476	\$496	\$388
85 and over	\$285	\$589	\$495	\$515	\$401
Under 65²	\$570	\$1,175	\$988	\$1,027	\$799

Region 6

Lake, Lassen, Inyo, and Kings counties

Monthly plan dues – billed and to be paid in advance

The amounts listed are **before** any applicable program savings are applied.

If you are enrolled in the Household Savings Program, your dues will be 7% less than what is listed.¹

Single-party rates

Age range	A	F Extra ³	G	G Extra	N
65	\$108	\$200	\$150	\$168	\$149
66	\$111	\$208	\$158	\$175	\$154
67	\$114	\$218	\$167	\$183	\$158
68	\$120	\$224	\$177	\$193	\$163
69	\$125	\$233	\$187	\$204	\$169
70	\$134	\$242	\$199	\$215	\$180
71	\$143	\$251	\$211	\$228	\$190
72	\$150	\$268	\$224	\$241	\$206
73	\$157	\$282	\$237	\$253	\$214
74	\$169	\$294	\$246	\$263	\$226
75	\$181	\$306	\$257	\$272	\$237
76	\$188	\$332	\$278	\$296	\$252
77	\$194	\$356	\$298	\$316	\$265
78	\$198	\$376	\$310	\$327	\$265
79	\$201	\$402	\$327	\$344	\$271
80	\$207	\$423	\$345	\$361	\$280
81	\$213	\$445	\$361	\$378	\$290
82	\$219	\$455	\$377	\$394	\$298
83	\$224	\$467	\$394	\$411	\$306
84	\$230	\$486	\$408	\$425	\$318
85 and over	\$235	\$504	\$424	\$441	\$331
Under 65 ²	\$470	\$1,007	\$844	\$879	\$660

Tobacco rates – only applies if you’ve used tobacco products in the past 24 months and you are not eligible for guaranteed acceptance

Single-party rates

Age range	A	F Extra³	G	G Extra	N
65	\$129	\$239	\$179	\$200	\$178
66	\$132	\$248	\$188	\$209	\$184
67	\$136	\$260	\$199	\$218	\$188
68	\$143	\$267	\$211	\$230	\$194
69	\$149	\$278	\$223	\$243	\$202
70	\$160	\$289	\$237	\$256	\$215
71	\$171	\$299	\$252	\$272	\$227
72	\$179	\$320	\$267	\$288	\$246
73	\$187	\$336	\$283	\$302	\$255
74	\$202	\$351	\$293	\$314	\$270
75	\$216	\$365	\$307	\$324	\$283
76	\$224	\$396	\$332	\$353	\$301
77	\$231	\$425	\$356	\$377	\$316
78	\$236	\$449	\$370	\$390	\$316
79	\$240	\$480	\$390	\$410	\$323
80	\$247	\$505	\$412	\$431	\$334
81	\$254	\$531	\$431	\$451	\$346
82	\$261	\$543	\$450	\$470	\$356
83	\$267	\$557	\$470	\$490	\$365
84	\$274	\$580	\$487	\$507	\$379
85 and over	\$280	\$601	\$506	\$526	\$395
Under 65²	\$561	\$1,201	\$1,007	\$1,049	\$787

Region 7

Napa, Alameda, Contra Costa, Siskiyou, and Yolo counties

Monthly plan dues – billed and to be paid in advance

The amounts listed are **before** any applicable program savings are applied.

If you are enrolled in the Household Savings Program, your dues will be 7% less than what is listed.¹

Single-party rates

Age range	A	F Extra ³	G	G Extra	N
65	\$114	\$209	\$155	\$171	\$154
66	\$118	\$216	\$164	\$181	\$160
67	\$121	\$226	\$173	\$190	\$164
68	\$135	\$232	\$184	\$199	\$177
69	\$149	\$242	\$195	\$210	\$191
70	\$160	\$251	\$206	\$223	\$204
71	\$171	\$259	\$219	\$233	\$218
72	\$179	\$278	\$233	\$249	\$232
73	\$187	\$293	\$246	\$262	\$245
74	\$202	\$305	\$256	\$272	\$253
75	\$217	\$317	\$267	\$282	\$266
76	\$225	\$345	\$290	\$305	\$287
77	\$232	\$370	\$311	\$325	\$301
78	\$236	\$391	\$323	\$338	\$302
79	\$239	\$418	\$340	\$356	\$306
80	\$247	\$439	\$358	\$373	\$318
81	\$254	\$462	\$376	\$393	\$329
82	\$260	\$473	\$392	\$407	\$339
83	\$266	\$487	\$408	\$425	\$347
84	\$273	\$504	\$423	\$440	\$359
85 and over	\$279	\$526	\$440	\$456	\$374
Under 65 ²	\$558	\$1,048	\$878	\$910	\$746

Tobacco rates – only applies if you’ve used tobacco products in the past 24 months and you are not eligible for guaranteed acceptance

Single-party rates

Age range	A	F Extra³	G	G Extra	N
65	\$136	\$249	\$185	\$204	\$184
66	\$141	\$258	\$196	\$216	\$191
67	\$144	\$270	\$206	\$227	\$196
68	\$161	\$277	\$220	\$237	\$211
69	\$178	\$289	\$233	\$251	\$228
70	\$191	\$299	\$246	\$266	\$243
71	\$204	\$309	\$261	\$278	\$260
72	\$214	\$332	\$278	\$297	\$277
73	\$223	\$350	\$293	\$313	\$292
74	\$241	\$364	\$305	\$324	\$302
75	\$259	\$378	\$319	\$336	\$317
76	\$268	\$412	\$346	\$364	\$342
77	\$277	\$441	\$371	\$388	\$359
78	\$282	\$466	\$385	\$403	\$360
79	\$285	\$499	\$406	\$425	\$365
80	\$295	\$524	\$427	\$445	\$379
81	\$303	\$551	\$449	\$469	\$392
82	\$310	\$564	\$468	\$486	\$404
83	\$317	\$581	\$487	\$507	\$414
84	\$326	\$601	\$505	\$525	\$428
85 and over	\$333	\$628	\$525	\$544	\$446
Under 65²	\$666	\$1,250	\$1,047	\$1,086	\$890

Region 8

All remaining California counties not listed in Regions 1-7 and 9
(includes San Francisco, San Mateo, Fresno, and Santa Clara counties, etc.)

Monthly plan dues – billed and to be paid in advance

The amounts listed are **before** any applicable program savings are applied.

If you are enrolled in the Household Savings Program, your dues will be 7% less than what is listed.¹

Single-party rates

Age range	A	F Extra ³	G	G Extra	N
65	\$110	\$197	\$147	\$163	\$144
66	\$115	\$204	\$154	\$172	\$153
67	\$120	\$213	\$163	\$180	\$163
68	\$123	\$219	\$172	\$189	\$167
69	\$126	\$228	\$183	\$200	\$173
70	\$139	\$236	\$196	\$212	\$186
71	\$151	\$245	\$206	\$223	\$201
72	\$159	\$264	\$220	\$237	\$217
73	\$167	\$277	\$233	\$249	\$229
74	\$179	\$289	\$242	\$258	\$239
75	\$190	\$301	\$252	\$269	\$246
76	\$198	\$328	\$274	\$291	\$263
77	\$206	\$351	\$293	\$310	\$278
78	\$209	\$369	\$304	\$320	\$278
79	\$211	\$396	\$321	\$338	\$283
80	\$218	\$416	\$337	\$355	\$294
81	\$225	\$438	\$355	\$371	\$305
82	\$231	\$448	\$369	\$386	\$313
83	\$236	\$459	\$385	\$401	\$322
84	\$242	\$477	\$399	\$416	\$334
85 and over	\$247	\$496	\$415	\$432	\$347
Under 65 ²	\$494	\$987	\$828	\$861	\$692

Tobacco rates – only applies if you’ve used tobacco products in the past 24 months and you are not eligible for guaranteed acceptance

Single-party rates

Age range	A	F Extra³	G	G Extra	N
65	\$131	\$235	\$175	\$194	\$172
66	\$137	\$243	\$184	\$205	\$183
67	\$143	\$254	\$194	\$215	\$194
68	\$147	\$261	\$205	\$225	\$199
69	\$150	\$272	\$218	\$239	\$206
70	\$166	\$282	\$234	\$253	\$222
71	\$180	\$292	\$246	\$266	\$240
72	\$190	\$315	\$262	\$283	\$259
73	\$199	\$330	\$278	\$297	\$273
74	\$214	\$345	\$289	\$308	\$285
75	\$227	\$359	\$301	\$321	\$293
76	\$236	\$391	\$327	\$347	\$314
77	\$246	\$419	\$350	\$370	\$332
78	\$249	\$440	\$363	\$382	\$332
79	\$252	\$472	\$383	\$403	\$338
80	\$260	\$496	\$402	\$424	\$351
81	\$268	\$523	\$424	\$443	\$364
82	\$276	\$534	\$440	\$460	\$373
83	\$282	\$548	\$459	\$478	\$384
84	\$289	\$569	\$476	\$496	\$398
85 and over	\$295	\$592	\$495	\$515	\$414
Under 65²	\$589	\$1,177	\$988	\$1,027	\$826

Region 9

Sacramento, Amador, Calaveras, Colusa, El Dorado, Tehama, and Marin counties

Monthly plan dues – billed and to be paid in advance

The amounts listed are **before** any applicable program savings are applied.

If you are enrolled in the Household Savings Program, your dues will be 7% less than what is listed.¹

Single-party rates

Age range	A	F Extra ³	G	G Extra	N
65	\$108	\$197	\$147	\$164	\$145
66	\$110	\$205	\$154	\$171	\$153
67	\$112	\$214	\$164	\$179	\$157
68	\$118	\$222	\$174	\$189	\$160
69	\$124	\$229	\$185	\$201	\$161
70	\$133	\$238	\$197	\$212	\$173
71	\$142	\$247	\$207	\$223	\$183
72	\$149	\$263	\$222	\$237	\$198
73	\$155	\$277	\$235	\$251	\$206
74	\$168	\$289	\$243	\$259	\$219
75	\$180	\$301	\$254	\$269	\$227
76	\$187	\$327	\$275	\$291	\$239
77	\$193	\$351	\$296	\$311	\$250
78	\$196	\$371	\$305	\$323	\$252
79	\$199	\$397	\$323	\$338	\$260
80	\$205	\$416	\$339	\$355	\$267
81	\$211	\$439	\$356	\$373	\$274
82	\$216	\$449	\$372	\$388	\$284
83	\$221	\$462	\$388	\$406	\$292
84	\$227	\$479	\$403	\$419	\$304
85 and over	\$233	\$498	\$417	\$435	\$317
Under 65 ²	\$466	\$993	\$832	\$866	\$631

Tobacco rates – only applies if you’ve used tobacco products in the past 24 months and you are not eligible for guaranteed acceptance

Single-party rates

Age range	A	F Extra³	G	G Extra	N
65	\$129	\$235	\$175	\$196	\$173
66	\$131	\$245	\$184	\$204	\$183
67	\$134	\$255	\$196	\$214	\$187
68	\$141	\$265	\$208	\$225	\$191
69	\$148	\$273	\$221	\$240	\$192
70	\$159	\$284	\$235	\$253	\$206
71	\$169	\$295	\$247	\$266	\$218
72	\$178	\$314	\$265	\$283	\$236
73	\$185	\$330	\$280	\$299	\$246
74	\$200	\$345	\$290	\$309	\$261
75	\$215	\$359	\$303	\$321	\$271
76	\$223	\$390	\$328	\$347	\$285
77	\$230	\$419	\$353	\$371	\$298
78	\$234	\$443	\$364	\$385	\$301
79	\$237	\$474	\$385	\$403	\$310
80	\$245	\$496	\$404	\$424	\$319
81	\$252	\$524	\$425	\$445	\$327
82	\$258	\$536	\$444	\$463	\$339
83	\$264	\$551	\$463	\$484	\$348
84	\$271	\$571	\$481	\$500	\$363
85 and over	\$278	\$594	\$497	\$519	\$378
Under 65²	\$556	\$1,185	\$993	\$1,033	\$753

Rates for Blue Shield dental PPO plan

Blue Shield dental rates no dental savings

	Dental PPO 1000	Dental PPO 1500
Individual	\$37.40	\$56.10

Please note: Monthly premiums for the dental plans are in addition to the premium for medical benefits covered by the Blue Shield health plan. However, your client will receive one bill that combines their health and dental premiums.

Endnotes

1. Savings due to increased efficiencies from administering Medicare Supplement plans under this program/service are passed on to the subscriber. Household Savings Program does not apply to tobacco users. Welcome to Medicare Rate Savings does not apply to Plan N.
2. If you are age 64 or younger and do not have end-stage renal disease, you may apply for Blue Shield of California Medicare Supplement coverage as described in Blue Shield's *Guaranteed Acceptance Guide*. Blue Shield of California does not offer coverage if you are age 64 or younger unless you qualify for guaranteed acceptance. The Household Savings Program is not available to those 64 or younger.
3. Plan F Extra is only available to applicants who attained age 65 before January 1, 2020, or first became eligible for Medicare benefits due to disability before January 1, 2020.

HICAP

(800) 434-0222

For additional information concerning covered benefits, contact the Health Insurance Counseling and Advocacy Program (HICAP) or your agent. HICAP provides health insurance counseling for California senior citizens.

**Blue Shield of California
Medicare Plans
Regional Sales Office
6300 Canoga Ave.
Woodland Hills, CA 91367-2555**