blue 🗑 of california

Monthly Plan Premium for People who get Extra Help from Medicare to Help Pay for their Prescription Drug Costs

If you get extra help from Medicare to help pay for your Medicare prescription drug plan costs, your monthly plan premium will be lower than what it would be if you did not get extra help from Medicare. The amount of extra help you get will determine your total monthly plan premium as a member of our Plan.

This table shows you what your monthly plan premium will be if you get extra help.

Your level of extra help	Monthly Premium for Blue Shield 65 Plus, Blue Shield 65 Plus Choice Plan, Blue Shield 65 Plus Plan 2, Blue Shield Inspire, Blue Shield Balance ¹	Monthly Premium for Blue Shield 65 Plus (San Luis Obispo, Santa Barbara) , Blue Shield Enhanced (HMO) (LA/Orange Counties)	Monthly Premium for Blue Shield Select (PPO) (Alameda County/San Diego & Orange Counties)	Monthly Premium for Blue Shield Inspire (HMO) (Sacramento County)
100%	\$0	\$39.00	\$18.10/28.10	\$53
75%	\$0	\$39.00	\$27.90/37.90	\$53
50%	\$0	\$39.00	37.60/47.60	\$53
25%	\$0	\$39.00	47.30/57.30	\$53

Your level of extra help	Monthly Premium for Blue Shield Advantage Optimum Plan, Blue Shield Advantage Optimum Plan 1, (HMO) ^{2*}	Monthly Premium for Blue Shield TotalDual Plan (HMO D- SNP) ^{3*}	Monthly Premium for Blue Shield Inspire (HMO D-SNP) (Fresno, San Joaquin, Stanislaus and Merced Counties)*
100%	\$0	\$0	\$0
75%	\$0	\$9.80	\$9.80
50%	\$0	\$19.50	\$19.50
25%	\$0	\$29.20	\$29.20

¹Los Angeles, Orange, San Diego, Kern, Riverside, San Bernardino, Madera, Santa Clara, San Joaquin, Stanislaus, Merced, Fresno, San Mateo, Alameda, and Ventura counties

² Los Angeles, Orange, San Diego, Fresno, Merced, Stanislaus, Santa Clara, and San Joaquin counties

³ Los Angeles, Orange, San Diego, and San Bernardino counties

* This does not include any Medicare Part B premium you may have to pay.

Blue Shield of California premium includes coverage for both medical services and prescription drug coverage.

If you aren't getting extra help, you can see if you qualify by calling:

- 1-800-Medicare or TTY users call 1-877-486-2048 (24 hours a day/7 days a week),
- YourStateMedicaidOffice, or
- The Social Security Administration at 1-800-772-1213. TTY users should call 1-800-325-0778 between 7 a.m. and 7 p.m., Monday through Friday.

If you have any questions, please call Customer Care at **(800) 776-4466** [TTY: **711**], 8 a.m. to 8 p.m., seven days a week. For Blue Shield Balance (HMO), please call Customer Care at **(888) 802-4423** [TTY: **711**], 8 a.m. to 8 p.m., seven days a week. For Blue Shield D-SNP, please call Customer Care at **(800) 452-4413** [TTY:**711**], 8 a.m. to 8 p.m., seven days a week.

Out-of-network/non-contracted providers are under no obligation to treat Blue Shield Medicare (PPO) members, except in emergency situations. Please call our Customer Care number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

The company complies with applicable state laws and federal civil rights laws and does not discriminate, exclude people, or treat them differently on the basis of race, color, national origin, ethnic group identification, medical condition, genetic information, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age, mental disability, or physical disability. La compañía cumple con las leyes de derechos civiles federales y estatales aplicables, y no discrimina, ni excluye ni trata de manera diferente a las personas por su raza, color, país de origen, identificación con determinado grupo étnico, condición médica, información genética, ascendencia, religión, sexo, estado civil, género, identidad de género, orientación sexual, edad, ni discapacidad física ni mental. 本公司遵守適用的州法律和聯邦民權法律,並且不會以種族、膚色、原 國籍、族群認同、醫療狀況、遺傳資訊、血統、宗教、性別、婚姻狀況、性別認同、性取向、年齡、精神殘 疾或身體殘疾而進行歧視、排斥或區別對待他人。