



## Blue Shield 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.

| Plan name                                                                                                                                     | PBP                                                           | Your level of Extra Help |         |
|-----------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|--------------------------|---------|
|                                                                                                                                               |                                                               | 100%                     | 0%      |
| Monthly premium for<br><b>Blue Shield 65 Plus (HMO)</b><br>(Kern, Los Angeles, Orange, Riverside,<br>San Bernardino, and San Diego counties)* | H0504-038<br>H0504-015<br>H0504-026<br>H0504-017<br>H0504-028 | \$0                      | \$0     |
| Monthly premium for<br><b>Blue Shield 65 Plus Choice Plan (HMO)</b><br>(Riverside and San Bernardino counties)*                               | H0504-040                                                     | \$0                      | \$0     |
| Monthly premium for<br><b>Blue Shield 65 Plus Plan 2 (HMO)</b><br>(Los Angeles and Orange counties)*                                          | H0504-021                                                     | \$0                      | \$0     |
| Monthly premium for<br><b>Blue Shield AdvantageOptimum Plan (HMO)</b><br>(Los Angeles and Orange counties)*                                   | H5928-004                                                     | \$0                      | \$0     |
| Monthly premium for<br><b>Blue Shield AdvantageOptimum Plan 1 (HMO)</b><br>(San Diego County)*                                                | H5928-010                                                     | \$0                      | \$0     |
| Monthly premium for<br><b>Blue Shield 65 Plus (HMO)</b><br>(San Luis Obispo and Santa Barbara counties)*                                      | H0504-039                                                     | \$70.00                  | \$70.00 |
| Monthly premium for<br><b>Blue Shield Inspire (HMO)</b><br>(Los Angeles and Orange counties)*                                                 | H0504-043                                                     | \$0                      | \$0     |
| Monthly premium for<br><b>Blue Shield Inspire (HMO)</b><br>(Alameda and San Mateo counties)*                                                  | H0504-041                                                     | \$60.00                  | \$60.00 |

| Plan name                                                                                                                  | PBP       | Your level of Extra Help |         |
|----------------------------------------------------------------------------------------------------------------------------|-----------|--------------------------|---------|
|                                                                                                                            |           | 100%                     | 0%      |
| Monthly premium for<br><b>Blue Shield Inspire (HMO)</b><br>(Merced, San Joaquin, Santa Clara,<br>and Stanislaus counties)* | H0504-047 | \$61.00                  | \$61.00 |
| Monthly premium for<br><b>Blue Shield Advantage (HMO)</b><br>(San Joaquin County)                                          | H0504-050 | \$20.00                  | \$20.00 |
| Monthly premium for<br><b>Blue Shield Advantage (HMO)</b><br>(Sacramento and Placer counties)                              | H0504-053 | \$19.00                  | \$19.00 |
| Monthly premium for<br><b>Blue Shield Advantage (HMO)</b><br>(Los Angeles and Orange counties)                             | H0504-054 | \$0.00                   | \$0.00  |
| Monthly premium for<br><b>Blue Shield Advantage (HMO)</b><br>(San Diego County)                                            | H0504-055 | \$0.00                   | \$0.00  |
| Monthly premium for<br><b>Blue Shield Value Advantage Plan (HMO)</b><br>(Los Angeles County)                               | H0504-056 | \$0.00                   | \$0.00  |
| Monthly premium for<br><b>Blue Shield Value Advantage Plan (HMO)</b><br>(San Diego County)                                 | H0504-057 | \$0.00                   | \$0.00  |

\* 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:

- **800-Medicare** or TTY users call **877-486-2048** (24 hours a day/seven days a week),
- Your State Medicaid Office, or
- The Social Security Administration at **800-772-1213**. TTY users should call **800-325-0778** between 8 a.m. and 7 p.m., Monday through Friday.



If you have any questions, please call Customer Service at **(800) 776-4466 (TTY: 711)**, 8 a.m. to 8 p.m. PT, seven days a week.