



Blue Shield of California

Medicare Prescription Drug Plans

Pre-enrollment checklist

Before making an enrollment decision, it is important that you fully understand our benefits and rules. If you have any questions, you can call and speak to a Customer Service representative at **(888) 239-6469 (TTY: 711)**, 8 a.m. to 8 p.m. PT, seven days a week.

Understanding the benefits

- ☐ The *Evidence of Coverage* (EOC) provides a complete list of all coverage and services. It is important to review plan coverage, costs, and benefits before you enroll. Visit **blueshieldca.com/medPDP2027** or call **(888) 239-6469 (TTY: 711)**, 8 a.m. to 8 p.m. PT, seven days a week, to view a copy of the EOC.
- ☐ Review the pharmacy directory to make sure the pharmacy you use for any prescription medicine is in the network. If the pharmacy is not listed, you will likely have to select a new pharmacy for your prescriptions.
- ☐ Review the formulary to make sure your drugs are covered.

Understanding important rules

- ☐ In addition to your monthly plan premium, you must continue to pay your Medicare Part B premium. This premium is normally taken out of your Social Security check each month.
- ☐ Benefits, premiums, and/or copayments/coinsurance may change on January 1, 2028.
- ☐ This is a PDP (Prescription Drug) plan. Your ability to enroll will be based on verification that you are entitled Medicare. Medicare PDP plans require members to receive most prescription services within the plan's network.

Effect on current coverage

- ☐ If you are currently enrolled in a Medicare Prescription Drug plan, your current Medicare Prescription Drug coverage will end once your new Medicare Prescription Drug plan coverage starts.