Blue Shield Medicare Supplement plan rates

Blue Shield of California rates effective: October 1, 2018



Blue Shield of California Medicare Supplement plans

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

Opportunities for additional savings	3
Welcome to Medicare Rate Savings	3
New member dental or dental + vision plan savings	3
Easy\$Pay	3
Household Savings Program	. 3
Locate your rate	4
Rate schedule – Regions 1 to 9	5
Rates for Blue Shield dental PPO plan or dental + vision plan package	14

OPPORTUNITIES FOR ADDITIONAL SAVINGS

Welcome to Medicare Rate Savings

New to Medicare? Then we want to welcome you! You can save \$25 each month for the first 12 months on your Medicare Supplement plan rates if you're new to Medicare Part B.¹

To qualify, you must be age 65 or older, and Blue Shield must receive your application within six months of the date you first enrolled for benefits under Medicare Part B.

The savings will be in effect for the first 12 months of your plan dues.

The Welcome to Medicare Rate Savings is available only for Plans A, C, D, F, F Extra, and G. They are not available for Plans High Deductible Plan F, Plan K, and Plan N.

New member dental or dental + vision plan savings

You can save \$3 each month for the first 6 months on your dental or dental + vision plan rates if you enroll in a dental or dental + vision plan **at the same time** you enroll in any Blue Shield Medicare Supplement plan.¹

Easy\$Pay

Easy\$PaySM is a simple, convenient way to pay your dues. Simply authorize Blue Shield to withdraw the monthly dues from your personal checking or savings account. By choosing this method, you will save \$3 per month on your plan dues.¹

Household Savings Program

Effective January 1, 2018, if you and another member of your household are age 65 or older, share the same mailing address and are accepted in the same benefit plan type, you are eligible for a 7% monthly savings on your combined dues if coverage is issued under one agreement.¹ For more information, please ask your Blue Shield representative for eligibility and details about our Household Savings Program.

Please note: If you are currently enrolled in a Medicare Supplement plan, you may transfer to a plan of equal or lesser value during your annual open enrollment period, which begins every year on your birthday and lasts for 30 days. However, if you have the Household Savings Program and change to a benefit plan that is different from the one the other member of your household has, you will no longer be eligible for the 7% savings.

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 and age range and plan selected in the following rate schedule.

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.

Age range	Α	С	D	F	F Extra	Hi F	G	K	N
65 to 66	\$125	\$171	\$146	\$184	\$163	\$61	\$168	\$78	\$120
67 to 68	\$133	\$180	\$153	\$193	\$177	\$64	\$176	\$81	\$126
69 to 70	\$145	\$197	\$168	\$213	\$197	\$71	\$194	\$89	\$140
71 to 72	\$167	\$227	\$192	\$244	\$214	\$81	\$222	\$102	\$160
73 to 74	\$182	\$248	\$210	\$270	\$232	\$90	\$246	\$117	\$176
75 to 76	\$210	\$281	\$240	\$308	\$268	\$102	\$281	\$129	\$201
77 to 78	\$226	\$299	\$255	\$334	\$302	\$111	\$305	\$140	\$219
79 to 80	\$233	\$320	\$274	\$342	\$341	\$114	\$312	\$150	\$224
81 to 82	\$248	\$336	\$286	\$363	\$373	\$120	\$331	\$159	\$237
83 to 84	\$260	\$354	\$300	\$380	\$390	\$126	\$347	\$167	\$248
85 plus	\$272	\$370	\$316	\$400	\$410	\$133	\$365	\$175	\$261
64 or younger ²	\$647	\$881	\$739	\$951	\$972	\$314	\$862	\$393	\$618

Single-party rates

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

Age range	Α	С	D	F	F Extra	Hi F	G	K	Ν
65 to 66	\$149	\$204	\$174	\$220	\$194	\$73	\$200	\$93	\$143
67 to 68	\$159	\$215	\$183	\$230	\$211	\$76	\$210	\$97	\$150
69 to 70	\$173	\$235	\$200	\$254	\$235	\$85	\$231	\$106	\$167
71 to 72	\$199	\$271	\$229	\$291	\$255	\$97	\$265	\$122	\$191
73 to 74	\$217	\$296	\$251	\$322	\$277	\$107	\$293	\$140	\$210
75 to 76	\$251	\$335	\$286	\$367	\$320	\$122	\$335	\$154	\$240
77 to 78	\$270	\$357	\$304	\$398	\$360	\$132	\$364	\$167	\$261
79 to 80	\$278	\$382	\$327	\$408	\$407	\$136	\$372	\$179	\$267
81 to 82	\$296	\$401	\$341	\$433	\$445	\$143	\$395	\$190	\$283
83 to 84	\$310	\$422	\$358	\$453	\$465	\$150	\$414	\$199	\$296
85 plus	\$324	\$441	\$377	\$477	\$489	\$159	\$435	\$209	\$311
64 or younger ²	\$772	\$1,051	\$882	\$1,135	\$1,160	\$375	\$1,028	\$469	\$737

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.

Age range	Α	С	D	F	F Extra	Hi F	G	K	N
65 to 66	\$125	\$171	\$146	\$190	\$167	\$61	\$173	\$78	\$120
67 to 68	\$133	\$180	\$153	\$198	\$182	\$64	\$181	\$81	\$126
69 to 70	\$145	\$203	\$168	\$218	\$202	\$71	\$199	\$89	\$140
71 to 72	\$167	\$233	\$197	\$251	\$220	\$81	\$229	\$102	\$160
73 to 74	\$182	\$254	\$216	\$277	\$238	\$90	\$253	\$117	\$176
75 to 76	\$216	\$288	\$247	\$317	\$275	\$102	\$289	\$129	\$207
77 to 78	\$232	\$307	\$262	\$343	\$309	\$111	\$313	\$140	\$224
79 to 80	\$240	\$329	\$282	\$351	\$350	\$114	\$320	\$150	\$230
81 to 82	\$254	\$345	\$294	\$373	\$382	\$120	\$340	\$159	\$244
83 to 84	\$266	\$364	\$308	\$390	\$400	\$126	\$356	\$167	\$256
85 plus	\$279	\$380	\$324	\$411	\$421	\$133	\$375	\$175	\$268
64 or younger ²	\$665	\$904	\$760	\$976	\$997	\$322	\$884	\$393	\$634

Single-party rates

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

Age range	Α	С	D	F	F Extra	Hi F	G	K	Ν
65 to 66	\$149	\$204	\$174	\$227	\$199	\$73	\$206	\$93	\$143
67 to 68	\$159	\$215	\$183	\$236	\$217	\$76	\$216	\$97	\$150
69 to 70	\$173	\$242	\$200	\$260	\$241	\$85	\$237	\$106	\$167
71 to 72	\$199	\$278	\$235	\$299	\$262	\$97	\$273	\$122	\$191
73 to 74	\$217	\$303	\$258	\$330	\$284	\$107	\$302	\$140	\$210
75 to 76	\$258	\$344	\$295	\$378	\$328	\$122	\$345	\$154	\$247
77 to 78	\$277	\$366	\$313	\$409	\$369	\$132	\$373	\$167	\$267
79 to 80	\$286	\$392	\$336	\$419	\$418	\$136	\$382	\$179	\$274
81 to 82	\$303	\$412	\$351	\$445	\$456	\$143	\$406	\$190	\$291
83 to 84	\$317	\$434	\$367	\$465	\$477	\$150	\$425	\$199	\$305
85 plus	\$333	\$453	\$387	\$490	\$502	\$159	\$447	\$209	\$320
64 or younger ²	\$793	\$1,078	\$907	\$1,164	\$1,189	\$384	\$1,055	\$469	\$756

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.

Age range	Α	С	D	F	F Extra	Hi F	G	K	Ν
65 to 66	\$119	\$160	\$136	\$173	\$152	\$48	\$146	\$66	\$112
67 to 68	\$127	\$174	\$148	\$187	\$165	\$57	\$158	\$72	\$122
69 to 70	\$142	\$193	\$164	\$209	\$183	\$61	\$177	\$84	\$136
71 to 72	\$163	\$221	\$188	\$239	\$200	\$70	\$202	\$96	\$155
73 to 74	\$178	\$244	\$208	\$263	\$216	\$77	\$222	\$110	\$172
75 to 76	\$207	\$274	\$235	\$304	\$249	\$94	\$257	\$121	\$197
77 to 78	\$221	\$293	\$250	\$329	\$281	\$101	\$278	\$132	\$213
79 to 80	\$229	\$315	\$269	\$335	\$317	\$103	\$284	\$140	\$218
81 to 82	\$243	\$331	\$281	\$356	\$347	\$109	\$301	\$149	\$230
83 to 84	\$256	\$347	\$294	\$372	\$363	\$115	\$315	\$156	\$242
85 plus	\$267	\$364	\$309	\$391	\$382	\$121	\$331	\$163	\$254
64 or younger ²	\$630	\$859	\$721	\$926	\$904	\$286	\$783	\$368	\$602

Single-party rates

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

Age range	Α	С	D	F	F Extra	Hi F	G	K	N
65 to 66	\$142	\$191	\$162	\$206	\$181	\$57	\$174	\$79	\$134
67 to 68	\$152	\$208	\$177	\$223	\$197	\$68	\$188	\$86	\$146
69 to 70	\$169	\$230	\$196	\$249	\$218	\$73	\$211	\$100	\$162
71 to 72	\$194	\$264	\$224	\$285	\$239	\$84	\$241	\$115	\$185
73 to 74	\$212	\$291	\$248	\$314	\$258	\$92	\$265	\$131	\$205
75 to 76	\$247	\$327	\$280	\$363	\$297	\$112	\$307	\$144	\$235
77 to 78	\$264	\$350	\$298	\$392	\$335	\$120	\$332	\$157	\$254
79 to 80	\$273	\$376	\$321	\$400	\$378	\$123	\$339	\$167	\$260
81 to 82	\$290	\$395	\$335	\$425	\$414	\$130	\$359	\$178	\$274
83 to 84	\$305	\$414	\$351	\$444	\$433	\$137	\$376	\$186	\$289
85 plus	\$319	\$434	\$369	\$466	\$456	\$144	\$395	\$194	\$303
64 or younger ²	\$752	\$1,025	\$860	\$1,105	\$1,078	\$341	\$934	\$439	\$718

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.

Age range 65 to 66	A \$130	C	D	F	F Extra	Hi F	G	K	N
65 to 66	\$130	¢170					9	ĸ	N
		\$178	\$152	\$192	\$172	\$59	\$162	\$73	\$124
67 to 68	\$140	\$192	\$163	\$207	\$186	\$63	\$175	\$79	\$135
69 to 70	\$159	\$214	\$183	\$232	\$208	\$68	\$196	\$92	\$150
71 to 72	\$182	\$245	\$208	\$265	\$226	\$78	\$224	\$106	\$173
73 to 74	\$197	\$269	\$230	\$292	\$244	\$86	\$247	\$122	\$190
75 to 76	\$230	\$305	\$259	\$334	\$282	\$103	\$283	\$134	\$217
77 to 78	\$245	\$325	\$279	\$361	\$318	\$112	\$305	\$146	\$235
79 to 80	\$254	\$347	\$297	\$372	\$359	\$115	\$315	\$155	\$241
81 to 82	\$269	\$366	\$311	\$395	\$392	\$121	\$334	\$164	\$256
83 to 84	\$281	\$384	\$326	\$413	\$411	\$127	\$349	\$173	\$267
85 plus	\$295	\$403	\$342	\$434	\$432	\$134	\$367	\$181	\$282
64 or younger ²	\$699	\$950	\$797	\$1,024	\$1,023	\$316	\$866	\$405	\$665

Single-party rates

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

Age range	Α	С	D	F	F Extra	Hi F	G	K	N
65 to 66	\$155	\$212	\$181	\$229	\$205	\$70	\$193	\$87	\$148
67 to 68	\$167	\$229	\$194	\$247	\$222	\$75	\$209	\$94	\$161
69 to 70	\$190	\$255	\$218	\$277	\$248	\$81	\$234	\$110	\$179
71 to 72	\$217	\$292	\$248	\$316	\$270	\$93	\$267	\$126	\$206
73 to 74	\$235	\$321	\$274	\$348	\$291	\$103	\$295	\$146	\$227
75 to 76	\$274	\$364	\$309	\$398	\$336	\$123	\$338	\$160	\$259
77 to 78	\$292	\$388	\$333	\$431	\$379	\$134	\$364	\$174	\$280
79 to 80	\$303	\$414	\$354	\$444	\$428	\$137	\$376	\$185	\$288
81 to 82	\$321	\$437	\$371	\$471	\$468	\$144	\$398	\$196	\$305
83 to 84	\$335	\$458	\$389	\$493	\$490	\$152	\$416	\$206	\$319
85 plus	\$352	\$481	\$408	\$518	\$515	\$160	\$438	\$216	\$336
64 or younger ²	\$834	\$1,133	\$951	\$1,222	\$1,220	\$377	\$1,033	\$483	\$793

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.

Age range	Α	С	D	F	F Extra	Hi F	G	K	N
65 to 66	\$111	\$149	\$128	\$162	\$140	\$50	\$137	\$65	\$104
67 to 68	\$119	\$156	\$136	\$169	\$152	\$52	\$143	\$69	\$115
69 to 70	\$127	\$174	\$149	\$188	\$169	\$55	\$159	\$75	\$122
71 to 72	\$147	\$198	\$170	\$215	\$184	\$63	\$181	\$86	\$140
73 to 74	\$162	\$219	\$187	\$237	\$199	\$70	\$201	\$99	\$154
75 to 76	\$185	\$248	\$211	\$272	\$229	\$80	\$230	\$109	\$176
77 to 78	\$199	\$263	\$224	\$294	\$258	\$86	\$249	\$119	\$191
79 to 80	\$207	\$283	\$242	\$303	\$292	\$93	\$256	\$126	\$197
81 to 82	\$219	\$297	\$251	\$319	\$319	\$99	\$270	\$134	\$208
83 to 84	\$229	\$312	\$265	\$335	\$334	\$103	\$284	\$140	\$218
85 plus	\$239	\$328	\$279	\$354	\$351	\$108	\$299	\$148	\$229
64 or younger ²	\$568	\$773	\$649	\$834	\$832	\$257	\$705	\$330	\$541

Single-party rates

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

Age range	Α	С	D	F	F Extra	Hi F	G	K	Ν
65 to 66	\$132	\$178	\$153	\$193	\$167	\$60	\$163	\$78	\$124
67 to 68	\$142	\$186	\$162	\$202	\$181	\$62	\$171	\$82	\$137
69 to 70	\$152	\$208	\$178	\$224	\$202	\$66	\$190	\$89	\$146
71 to 72	\$175	\$236	\$203	\$256	\$220	\$75	\$216	\$103	\$167
73 to 74	\$193	\$261	\$223	\$283	\$237	\$84	\$240	\$118	\$184
75 to 76	\$221	\$296	\$252	\$324	\$273	\$95	\$274	\$130	\$210
77 to 78	\$237	\$314	\$267	\$351	\$308	\$103	\$297	\$142	\$228
79 to 80	\$247	\$338	\$289	\$361	\$348	\$111	\$305	\$150	\$235
81 to 82	\$261	\$354	\$299	\$381	\$381	\$118	\$322	\$160	\$248
83 to 84	\$273	\$372	\$316	\$400	\$398	\$123	\$339	\$167	\$260
85 plus	\$285	\$391	\$333	\$422	\$419	\$129	\$357	\$177	\$273
64 or younger ²	\$678	\$922	\$774	\$995	\$993	\$307	\$841	\$394	\$645

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.

Age range	Α	С	D	F	F Extra	Hi F	G	K	Ν
65 to 66	\$108	\$147	\$125	\$158	\$143	\$77	\$212	\$67	\$103
67 to 68	\$114	\$155	\$132	\$166	\$155	\$81	\$222	\$70	\$108
69 to 70	\$125	\$170	\$145	\$183	\$173	\$89	\$245	\$77	\$119
71 to 72	\$143	\$195	\$165	\$210	\$188	\$102	\$281	\$88	\$136
73 to 74	\$157	\$213	\$181	\$232	\$203	\$113	\$310	\$101	\$150
75 to 76	\$181	\$241	\$205	\$266	\$234	\$130	\$356	\$111	\$173
77 to 78	\$194	\$257	\$220	\$288	\$264	\$140	\$385	\$121	\$187
79 to 80	\$201	\$275	\$236	\$295	\$299	\$144	\$395	\$130	\$192
81 to 82	\$213	\$290	\$247	\$312	\$326	\$152	\$418	\$137	\$203
83 to 84	\$224	\$305	\$259	\$328	\$342	\$160	\$439	\$143	\$214
85 plus	\$235	\$320	\$272	\$344	\$359	\$168	\$460	\$151	\$224
64 or younger ²	\$554	\$755	\$633	\$815	\$851	\$397	\$1,091	\$340	\$530

Single-party rates

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

Age range	Α	С	D	F	F Extra	Hi F	G	K	Ν
65 to 66	\$129	\$175	\$149	\$188	\$171	\$92	\$253	\$80	\$123
67 to 68	\$136	\$185	\$157	\$198	\$185	\$97	\$265	\$84	\$129
69 to 70	\$149	\$203	\$173	\$218	\$206	\$106	\$292	\$92	\$142
71 to 72	\$171	\$233	\$197	\$251	\$224	\$122	\$335	\$105	\$162
73 to 74	\$187	\$254	\$216	\$277	\$242	\$135	\$370	\$120	\$179
75 to 76	\$216	\$288	\$245	\$317	\$279	\$155	\$425	\$132	\$206
77 to 78	\$231	\$307	\$262	\$344	\$315	\$167	\$459	\$144	\$223
79 to 80	\$240	\$328	\$282	\$352	\$357	\$172	\$471	\$155	\$229
81 to 82	\$254	\$346	\$295	\$372	\$389	\$181	\$499	\$163	\$242
83 to 84	\$267	\$364	\$309	\$391	\$408	\$191	\$524	\$171	\$255
85 plus	\$280	\$382	\$324	\$410	\$428	\$200	\$549	\$180	\$267
64 or younger ²	\$661	\$901	\$755	\$972	\$1,015	\$474	\$1,302	\$406	\$632

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.

Age range	Α	С	D	F	F Extra	Hi F	G	K	Ν
65 to 66	\$114	\$157	\$133	\$169	\$155	\$48	\$143	\$71	\$110
67 to 68	\$121	\$164	\$139	\$178	\$169	\$52	\$150	\$73	\$117
69 to 70	\$149	\$202	\$173	\$219	\$188	\$67	\$185	\$92	\$142
71 to 72	\$171	\$232	\$196	\$250	\$204	\$77	\$212	\$106	\$163
73 to 74	\$187	\$254	\$217	\$276	\$221	\$85	\$233	\$121	\$179
75 to 76	\$217	\$288	\$245	\$317	\$255	\$98	\$268	\$133	\$206
77 to 78	\$232	\$307	\$262	\$343	\$287	\$106	\$290	\$145	\$223
79 to 80	\$239	\$329	\$281	\$352	\$325	\$108	\$297	\$153	\$228
81 to 82	\$254	\$345	\$294	\$372	\$355	\$115	\$315	\$163	\$242
83 to 84	\$266	\$364	\$308	\$391	\$372	\$120	\$331	\$171	\$254
85 plus	\$279	\$381	\$324	\$410	\$391	\$126	\$347	\$180	\$266
64 or younger ²	\$661	\$899	\$754	\$969	\$926	\$298	\$820	\$404	\$629

Single-party rates

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

Age range	Α	С	D	F	F Extra	Hi F	G	K	Ν
65 to 66	\$136	\$187	\$159	\$202	\$185	\$57	\$171	\$85	\$131
67 to 68	\$144	\$196	\$166	\$212	\$202	\$62	\$179	\$87	\$140
69 to 70	\$178	\$241	\$206	\$261	\$224	\$80	\$221	\$110	\$169
71 to 72	\$204	\$277	\$234	\$298	\$243	\$92	\$253	\$126	\$194
73 to 74	\$223	\$303	\$259	\$329	\$264	\$101	\$278	\$144	\$214
75 to 76	\$259	\$344	\$292	\$378	\$304	\$117	\$320	\$159	\$246
77 to 78	\$277	\$366	\$313	\$409	\$342	\$126	\$346	\$173	\$266
79 to 80	\$285	\$392	\$335	\$420	\$388	\$129	\$354	\$183	\$272
81 to 82	\$303	\$412	\$351	\$444	\$424	\$137	\$376	\$194	\$289
83 to 84	\$317	\$434	\$367	\$466	\$444	\$143	\$395	\$204	\$303
85 plus	\$333	\$455	\$387	\$489	\$466	\$150	\$414	\$215	\$317
64 or younger ²	\$789	\$1,073	\$900	\$1,156	\$1,105	\$356	\$978	\$482	\$750

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.

Age range	Α	С	D	F	F Extra	Hi F	G	K	N
65 to 66	\$110	\$150	\$127	\$162	\$140	\$45	\$137	\$63	\$104
67 to 68	\$120	\$162	\$137	\$174	\$152	\$49	\$147	\$67	\$112
69 to 70	\$126	\$180	\$152	\$195	\$169	\$58	\$165	\$78	\$122
71 to 72	\$151	\$206	\$175	\$223	\$184	\$66	\$189	\$90	\$145
73 to 74	\$167	\$225	\$192	\$244	\$199	\$72	\$206	\$102	\$158
75 to 76	\$190	\$256	\$217	\$280	\$230	\$83	\$237	\$113	\$181
77 to 78	\$206	\$271	\$234	\$303	\$259	\$90	\$256	\$123	\$198
79 to 80	\$211	\$292	\$249	\$312	\$293	\$92	\$264	\$132	\$202
81 to 82	\$225	\$306	\$261	\$330	\$320	\$98	\$279	\$139	\$214
83 to 84	\$236	\$321	\$273	\$346	\$335	\$102	\$293	\$147	\$224
85 plus	\$247	\$336	\$287	\$362	\$352	\$107	\$306	\$153	\$236
64 or younger ²	\$586	\$797	\$669	\$858	\$835	\$265	\$726	\$344	\$557

Single-party rates

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

Age range	Α	С	D	F	F Extra	Hi F	G	K	Ν
65 to 66	\$131	\$179	\$152	\$193	\$167	\$54	\$163	\$75	\$124
67 to 68	\$143	\$193	\$163	\$208	\$181	\$58	\$175	\$80	\$134
69 to 70	\$150	\$215	\$181	\$233	\$202	\$69	\$197	\$93	\$146
71 to 72	\$180	\$246	\$209	\$266	\$220	\$79	\$225	\$107	\$173
73 to 74	\$199	\$268	\$229	\$291	\$237	\$86	\$246	\$122	\$188
75 to 76	\$227	\$305	\$259	\$334	\$274	\$99	\$283	\$135	\$216
77 to 78	\$246	\$323	\$279	\$361	\$309	\$107	\$305	\$147	\$236
79 to 80	\$252	\$348	\$297	\$372	\$350	\$110	\$315	\$157	\$241
81 to 82	\$268	\$365	\$311	\$394	\$382	\$117	\$333	\$166	\$255
83 to 84	\$282	\$383	\$326	\$413	\$400	\$122	\$350	\$175	\$267
85 plus	\$295	\$401	\$342	\$432	\$420	\$128	\$365	\$183	\$282
64 or younger ²	\$699	\$951	\$798	\$1,024	\$996	\$316	\$866	\$410	\$665

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
Age range	Α	С	D	F	F Extra	Hi F	G	K	Ν
65 to 66	\$108	\$152	\$125	\$164	\$146	\$46	\$139	\$60	\$108
67 to 68	\$112	\$160	\$130	\$174	\$158	\$49	\$147	\$64	\$112
69 to 70	\$124	\$168	\$143	\$182	\$177	\$56	\$154	\$70	\$118
71 to 72	\$142	\$193	\$163	\$208	\$192	\$64	\$176	\$81	\$136
73 to 74	\$155	\$212	\$180	\$230	\$208	\$70	\$194	\$92	\$150
75 to 76	\$180	\$239	\$205	\$265	\$240	\$81	\$224	\$100	\$172
77 to 78	\$193	\$256	\$219	\$285	\$270	\$87	\$241	\$110	\$185
79 to 80	\$199	\$273	\$233	\$293	\$305	\$90	\$248	\$118	\$190
81 to 82	\$211	\$287	\$245	\$309	\$334	\$95	\$262	\$124	\$201
83 to 84	\$221	\$303	\$257	\$325	\$350	\$100	\$274	\$130	\$211
85 plus	\$233	\$317	\$270	\$342	\$367	\$105	\$289	\$137	\$222
64 or younger ²	\$550	\$751	\$630	\$809	\$871	\$249	\$684	\$306	\$526

Single-party rates

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

Age range	Α	С	D	F	F Extra	Hi F	G	K	N
65 to 66	\$129	\$181	\$149	\$196	\$174	\$55	\$166	\$72	\$129
67 to 68	\$134	\$191	\$155	\$208	\$188	\$58	\$175	\$76	\$134
69 to 70	\$148	\$200	\$171	\$217	\$211	\$67	\$184	\$84	\$141
71 to 72	\$169	\$230	\$194	\$248	\$229	\$76	\$210	\$97	\$162
73 to 74	\$185	\$253	\$215	\$274	\$248	\$84	\$231	\$110	\$179
75 to 76	\$215	\$285	\$245	\$316	\$286	\$97	\$267	\$119	\$205
77 to 78	\$230	\$305	\$261	\$340	\$322	\$104	\$288	\$131	\$221
79 to 80	\$237	\$326	\$278	\$350	\$364	\$107	\$296	\$141	\$227
81 to 82	\$252	\$342	\$292	\$369	\$398	\$113	\$313	\$148	\$240
83 to 84	\$264	\$361	\$307	\$388	\$418	\$119	\$327	\$155	\$252
85 plus	\$278	\$378	\$322	\$408	\$438	\$125	\$345	\$163	\$265
64 or younger ²	\$656	\$896	\$752	\$965	\$1,039	\$297	\$816	\$365	\$628

Rates for Blue Shield dental PPO plan or dental + vision plan package

Blue Shield dental rates

	Dental PPO 1000		Specialty Duo dental + vision plan package*
Individual	\$40.70	\$49.80	\$61.90

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.

* Specialty Duo plan package includes both Specialty Duo dental plan and Specialty Duo vision plan for Medicare Supplement plan members. Underwritten by Blue Shield of California Life & Health Insurance Company (Blue Shield Life).

Endnotes

- 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 High Deductible Plan F and Plan K. Household Savings Program does not apply to tobacco users. Welcome to Medicare Rate Savings do not apply to High Deductible Plan F, Plan K and Plan N.
- 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.

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