

Blue Shield Medicare Supplement plan rates

Blue Shield of California rates effective:
July 1, 2025

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 a.m. to 8 p.m., seven 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	\$134	\$251	\$192	\$211	\$181
66	\$138	\$260	\$200	\$220	\$191
67	\$142	\$270	\$213	\$230	\$195
68	\$149	\$281	\$226	\$244	\$203
69	\$155	\$292	\$238	\$257	\$212
70	\$165	\$298	\$251	\$267	\$223
71	\$177	\$312	\$266	\$284	\$237
72	\$183	\$328	\$280	\$299	\$251
73	\$193	\$351	\$299	\$317	\$272
74	\$206	\$362	\$310	\$327	\$277
75	\$220	\$376	\$322	\$340	\$286
76	\$227	\$406	\$346	\$364	\$303
77	\$237	\$438	\$373	\$392	\$323
78	\$246	\$471	\$397	\$416	\$332
79	\$244	\$493	\$410	\$428	\$331
80	\$256	\$527	\$438	\$456	\$346
81	\$266	\$560	\$463	\$481	\$361
82	\$272	\$574	\$481	\$502	\$370
83	\$279	\$590	\$503	\$521	\$382
84	\$284	\$607	\$520	\$540	\$395
85 and over	\$292	\$637	\$545	\$563	\$414
Under 65 ²	\$576	\$1,250	\$1,071	\$1,107	\$812

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	\$160	\$299	\$229	\$252	\$216
66	\$165	\$310	\$239	\$262	\$228
67	\$169	\$322	\$254	\$274	\$233
68	\$178	\$335	\$270	\$291	\$242
69	\$185	\$348	\$284	\$307	\$253
70	\$197	\$356	\$299	\$319	\$266
71	\$211	\$372	\$317	\$339	\$283
72	\$218	\$391	\$334	\$357	\$299
73	\$230	\$419	\$357	\$378	\$324
74	\$246	\$432	\$370	\$390	\$330
75	\$262	\$449	\$384	\$406	\$341
76	\$271	\$484	\$413	\$434	\$361
77	\$283	\$523	\$445	\$468	\$385
78	\$293	\$562	\$474	\$496	\$396
79	\$291	\$588	\$489	\$511	\$395
80	\$305	\$629	\$523	\$544	\$413
81	\$317	\$668	\$552	\$574	\$431
82	\$324	\$685	\$574	\$599	\$441
83	\$333	\$704	\$600	\$622	\$456
84	\$339	\$724	\$620	\$644	\$471
85 and over	\$348	\$760	\$650	\$672	\$494
Under 65²	\$687	\$1,491	\$1,278	\$1,321	\$969

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	\$135	\$262	\$198	\$218	\$186
66	\$139	\$268	\$208	\$227	\$193
67	\$143	\$280	\$219	\$239	\$196
68	\$150	\$291	\$232	\$251	\$205
69	\$156	\$301	\$246	\$265	\$213
70	\$166	\$310	\$259	\$277	\$225
71	\$179	\$322	\$274	\$293	\$239
72	\$185	\$339	\$291	\$309	\$253
73	\$194	\$361	\$309	\$328	\$274
74	\$210	\$375	\$319	\$337	\$286
75	\$228	\$391	\$333	\$350	\$299
76	\$235	\$420	\$359	\$376	\$315
77	\$245	\$451	\$387	\$405	\$334
78	\$254	\$487	\$410	\$428	\$343
79	\$254	\$511	\$423	\$442	\$343
80	\$264	\$545	\$450	\$470	\$361
81	\$274	\$576	\$478	\$497	\$377
82	\$281	\$594	\$498	\$517	\$386
83	\$287	\$608	\$520	\$539	\$394
84	\$293	\$628	\$537	\$555	\$409
85 and over	\$302	\$660	\$563	\$582	\$427
Under 65 ²	\$596	\$1,296	\$1,104	\$1,144	\$839

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	\$161	\$313	\$236	\$260	\$222
66	\$166	\$320	\$248	\$271	\$230
67	\$171	\$334	\$261	\$285	\$234
68	\$179	\$347	\$277	\$299	\$245
69	\$186	\$359	\$293	\$316	\$254
70	\$198	\$370	\$309	\$330	\$268
71	\$214	\$384	\$327	\$350	\$285
72	\$221	\$404	\$347	\$369	\$302
73	\$231	\$431	\$369	\$391	\$327
74	\$251	\$447	\$381	\$402	\$341
75	\$272	\$466	\$397	\$418	\$357
76	\$280	\$501	\$428	\$449	\$376
77	\$292	\$538	\$462	\$483	\$398
78	\$303	\$581	\$489	\$511	\$409
79	\$303	\$610	\$505	\$527	\$409
80	\$315	\$650	\$537	\$561	\$431
81	\$327	\$687	\$570	\$593	\$450
82	\$335	\$709	\$594	\$617	\$460
83	\$342	\$725	\$620	\$643	\$470
84	\$350	\$749	\$641	\$662	\$488
85 and over	\$360	\$787	\$672	\$694	\$509
Under 65²	\$711	\$1,546	\$1,317	\$1,365	\$1,001

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	\$131	\$242	\$183	\$203	\$171
66	\$135	\$250	\$193	\$212	\$183
67	\$139	\$258	\$204	\$223	\$194
68	\$148	\$268	\$216	\$235	\$204
69	\$156	\$277	\$229	\$247	\$211
70	\$166	\$287	\$241	\$260	\$221
71	\$178	\$299	\$256	\$274	\$236
72	\$184	\$315	\$269	\$288	\$253
73	\$194	\$335	\$285	\$306	\$272
74	\$208	\$345	\$295	\$313	\$279
75	\$223	\$360	\$308	\$326	\$290
76	\$228	\$387	\$332	\$349	\$305
77	\$238	\$417	\$358	\$376	\$321
78	\$247	\$452	\$380	\$398	\$331
79	\$247	\$472	\$391	\$410	\$331
80	\$258	\$504	\$417	\$437	\$348
81	\$268	\$536	\$442	\$461	\$362
82	\$275	\$549	\$461	\$480	\$371
83	\$282	\$562	\$480	\$500	\$382
84	\$287	\$582	\$497	\$517	\$394
85 and over	\$295	\$609	\$520	\$541	\$412
Under 65 ²	\$581	\$1,195	\$1,022	\$1,062	\$810

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	\$156	\$289	\$218	\$242	\$204
66	\$161	\$298	\$230	\$253	\$218
67	\$166	\$308	\$243	\$266	\$231
68	\$177	\$320	\$258	\$280	\$243
69	\$186	\$330	\$273	\$295	\$252
70	\$198	\$342	\$288	\$310	\$264
71	\$212	\$357	\$305	\$327	\$282
72	\$220	\$376	\$321	\$344	\$302
73	\$231	\$400	\$340	\$365	\$324
74	\$248	\$412	\$352	\$373	\$333
75	\$266	\$429	\$367	\$389	\$346
76	\$272	\$462	\$396	\$416	\$364
77	\$284	\$497	\$427	\$449	\$383
78	\$295	\$539	\$453	\$475	\$395
79	\$295	\$563	\$466	\$489	\$395
80	\$308	\$601	\$497	\$521	\$415
81	\$320	\$639	\$527	\$550	\$432
82	\$328	\$655	\$550	\$573	\$443
83	\$336	\$670	\$573	\$597	\$456
84	\$342	\$694	\$593	\$617	\$470
85 and over	\$352	\$727	\$620	\$645	\$492
Under 65²	\$693	\$1,426	\$1,219	\$1,267	\$966

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	\$141	\$268	\$203	\$223	\$192
66	\$145	\$276	\$214	\$232	\$203
67	\$150	\$287	\$224	\$245	\$212
68	\$162	\$298	\$240	\$259	\$220
69	\$171	\$311	\$255	\$273	\$227
70	\$182	\$317	\$265	\$285	\$242
71	\$195	\$329	\$283	\$301	\$258
72	\$201	\$348	\$298	\$318	\$276
73	\$210	\$372	\$317	\$336	\$295
74	\$226	\$382	\$327	\$345	\$303
75	\$243	\$398	\$342	\$359	\$314
76	\$249	\$430	\$367	\$386	\$330
77	\$258	\$465	\$396	\$415	\$349
78	\$270	\$501	\$421	\$438	\$359
79	\$268	\$524	\$433	\$453	\$359
80	\$281	\$560	\$464	\$480	\$376
81	\$291	\$594	\$490	\$510	\$392
82	\$297	\$608	\$512	\$532	\$402
83	\$304	\$625	\$534	\$552	\$414
84	\$310	\$645	\$551	\$570	\$428
85 and over	\$320	\$676	\$578	\$597	\$450
Under 65 ²	\$630	\$1,327	\$1,133	\$1,173	\$884

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	\$168	\$320	\$242	\$266	\$229
66	\$173	\$329	\$255	\$277	\$242
67	\$179	\$342	\$267	\$292	\$253
68	\$193	\$356	\$286	\$309	\$262
69	\$204	\$371	\$304	\$326	\$271
70	\$217	\$378	\$316	\$340	\$289
71	\$233	\$392	\$338	\$359	\$308
72	\$240	\$415	\$356	\$379	\$329
73	\$251	\$444	\$378	\$401	\$352
74	\$270	\$456	\$390	\$412	\$361
75	\$290	\$475	\$408	\$428	\$375
76	\$297	\$513	\$438	\$460	\$394
77	\$308	\$555	\$472	\$495	\$416
78	\$322	\$598	\$502	\$523	\$428
79	\$320	\$625	\$517	\$540	\$428
80	\$335	\$668	\$554	\$573	\$449
81	\$347	\$709	\$585	\$608	\$468
82	\$354	\$725	\$611	\$635	\$480
83	\$363	\$746	\$637	\$659	\$494
84	\$370	\$769	\$657	\$680	\$511
85 and over	\$382	\$806	\$690	\$712	\$537
Under 65²	\$752	\$1,583	\$1,352	\$1,399	\$1,055

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	\$121	\$221	\$168	\$186	\$157
66	\$124	\$227	\$174	\$195	\$163
67	\$128	\$236	\$184	\$203	\$171
68	\$133	\$244	\$195	\$214	\$182
69	\$138	\$254	\$207	\$227	\$188
70	\$147	\$260	\$220	\$238	\$197
71	\$158	\$271	\$232	\$251	\$211
72	\$165	\$288	\$244	\$263	\$224
73	\$174	\$305	\$262	\$279	\$241
74	\$185	\$315	\$269	\$287	\$248
75	\$197	\$328	\$280	\$299	\$256
76	\$202	\$354	\$302	\$321	\$271
77	\$211	\$380	\$325	\$344	\$288
78	\$220	\$410	\$345	\$363	\$295
79	\$220	\$430	\$357	\$376	\$295
80	\$230	\$458	\$380	\$400	\$309
81	\$238	\$485	\$404	\$422	\$323
82	\$244	\$498	\$420	\$439	\$332
83	\$249	\$511	\$438	\$456	\$339
84	\$253	\$529	\$451	\$471	\$352
85 and over	\$261	\$553	\$473	\$493	\$366
Under 65 ²	\$514	\$1,087	\$930	\$967	\$720

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	\$144	\$264	\$200	\$222	\$187
66	\$148	\$271	\$208	\$233	\$194
67	\$153	\$282	\$220	\$242	\$204
68	\$159	\$291	\$233	\$255	\$217
69	\$165	\$303	\$247	\$271	\$224
70	\$175	\$310	\$262	\$284	\$235
71	\$188	\$323	\$277	\$299	\$252
72	\$197	\$344	\$291	\$314	\$267
73	\$208	\$364	\$313	\$333	\$288
74	\$221	\$376	\$321	\$342	\$296
75	\$235	\$391	\$334	\$357	\$305
76	\$241	\$422	\$360	\$383	\$323
77	\$252	\$453	\$388	\$410	\$344
78	\$262	\$489	\$412	\$433	\$352
79	\$262	\$513	\$426	\$449	\$352
80	\$274	\$546	\$453	\$477	\$369
81	\$284	\$579	\$482	\$503	\$385
82	\$291	\$594	\$501	\$524	\$396
83	\$297	\$610	\$523	\$544	\$404
84	\$302	\$631	\$538	\$562	\$420
85 and over	\$311	\$660	\$564	\$588	\$437
Under 65²	\$613	\$1,297	\$1,109	\$1,154	\$859

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	\$117	\$223	\$170	\$190	\$161
66	\$119	\$230	\$178	\$197	\$166
67	\$122	\$240	\$187	\$205	\$170
68	\$129	\$248	\$199	\$217	\$176
69	\$135	\$258	\$211	\$230	\$182
70	\$143	\$265	\$222	\$239	\$192
71	\$153	\$276	\$236	\$255	\$203
72	\$158	\$291	\$247	\$266	\$217
73	\$167	\$309	\$264	\$282	\$228
74	\$179	\$319	\$272	\$291	\$239
75	\$191	\$332	\$284	\$301	\$250
76	\$197	\$357	\$305	\$324	\$264
77	\$205	\$386	\$329	\$349	\$280
78	\$213	\$416	\$350	\$369	\$286
79	\$212	\$436	\$361	\$380	\$286
80	\$222	\$465	\$386	\$404	\$300
81	\$230	\$494	\$408	\$427	\$313
82	\$237	\$505	\$426	\$445	\$322
83	\$242	\$518	\$445	\$464	\$331
84	\$247	\$537	\$459	\$478	\$342
85 and over	\$255	\$561	\$480	\$500	\$359
Under 65 ²	\$502	\$1,104	\$942	\$981	\$705

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	\$140	\$266	\$203	\$227	\$192
66	\$142	\$274	\$212	\$235	\$198
67	\$146	\$286	\$223	\$245	\$203
68	\$154	\$296	\$237	\$259	\$210
69	\$161	\$308	\$252	\$274	\$217
70	\$171	\$316	\$265	\$285	\$229
71	\$183	\$329	\$282	\$304	\$242
72	\$188	\$347	\$295	\$317	\$259
73	\$199	\$369	\$315	\$336	\$272
74	\$214	\$381	\$324	\$347	\$285
75	\$228	\$396	\$339	\$359	\$298
76	\$235	\$426	\$364	\$387	\$315
77	\$245	\$460	\$392	\$416	\$334
78	\$254	\$496	\$418	\$440	\$341
79	\$253	\$520	\$431	\$453	\$341
80	\$265	\$555	\$460	\$482	\$358
81	\$274	\$589	\$487	\$509	\$373
82	\$283	\$602	\$508	\$531	\$384
83	\$289	\$618	\$531	\$554	\$395
84	\$295	\$641	\$548	\$570	\$408
85 and over	\$304	\$669	\$573	\$597	\$428
Under 65²	\$599	\$1,317	\$1,124	\$1,170	\$841

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	\$124	\$234	\$177	\$195	\$168
66	\$128	\$240	\$186	\$205	\$173
67	\$131	\$251	\$195	\$215	\$177
68	\$146	\$258	\$209	\$226	\$192
69	\$162	\$269	\$221	\$238	\$207
70	\$171	\$276	\$231	\$250	\$219
71	\$184	\$287	\$247	\$263	\$235
72	\$190	\$303	\$259	\$277	\$246
73	\$201	\$323	\$276	\$294	\$263
74	\$215	\$333	\$285	\$303	\$269
75	\$231	\$346	\$297	\$314	\$283
76	\$237	\$373	\$320	\$336	\$302
77	\$246	\$403	\$345	\$361	\$319
78	\$256	\$436	\$367	\$384	\$328
79	\$254	\$457	\$378	\$396	\$325
80	\$266	\$486	\$403	\$420	\$343
81	\$276	\$516	\$427	\$447	\$358
82	\$283	\$528	\$446	\$463	\$369
83	\$289	\$544	\$464	\$483	\$377
84	\$295	\$560	\$479	\$498	\$388
85 and over	\$304	\$589	\$502	\$520	\$408
Under 65 ²	\$599	\$1,156	\$986	\$1,022	\$801

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	\$148	\$279	\$211	\$233	\$200
66	\$153	\$286	\$222	\$245	\$206
67	\$156	\$299	\$233	\$256	\$211
68	\$174	\$308	\$249	\$270	\$229
69	\$193	\$321	\$264	\$284	\$247
70	\$204	\$329	\$276	\$298	\$261
71	\$220	\$342	\$295	\$314	\$280
72	\$227	\$361	\$309	\$330	\$293
73	\$240	\$385	\$329	\$351	\$314
74	\$256	\$397	\$340	\$361	\$321
75	\$276	\$413	\$354	\$375	\$338
76	\$283	\$445	\$382	\$401	\$360
77	\$293	\$481	\$412	\$431	\$381
78	\$305	\$520	\$438	\$458	\$391
79	\$303	\$545	\$451	\$472	\$388
80	\$317	\$580	\$481	\$501	\$409
81	\$329	\$616	\$509	\$533	\$427
82	\$338	\$630	\$532	\$552	\$440
83	\$345	\$649	\$554	\$576	\$450
84	\$352	\$668	\$571	\$594	\$463
85 and over	\$363	\$703	\$599	\$620	\$487
Under 65²	\$715	\$1,379	\$1,176	\$1,219	\$956

Region 8

Alpine, Butte, Del Norte, Fresno, Glenn, Humboldt, Imperial, Madera, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Nevada, Placer, Plumas, San Benito, San Francisco, San Luis Obispo, San Mateo, Santa Clara, Santa Cruz, Shasta, Sierra, Solano, Sutter, Trinity, Tulare, Tuolumne, and Yuba 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	\$120	\$221	\$168	\$186	\$157
66	\$124	\$227	\$174	\$195	\$166
67	\$130	\$236	\$184	\$203	\$176
68	\$133	\$244	\$195	\$214	\$181
69	\$137	\$254	\$207	\$227	\$188
70	\$149	\$260	\$220	\$238	\$199
71	\$163	\$271	\$232	\$251	\$217
72	\$169	\$288	\$244	\$263	\$231
73	\$179	\$305	\$262	\$279	\$246
74	\$190	\$316	\$269	\$287	\$254
75	\$202	\$329	\$280	\$299	\$262
76	\$209	\$355	\$302	\$321	\$277
77	\$219	\$383	\$325	\$344	\$295
78	\$227	\$411	\$345	\$363	\$302
79	\$224	\$433	\$357	\$376	\$301
80	\$235	\$460	\$380	\$400	\$317
81	\$245	\$489	\$404	\$422	\$332
82	\$251	\$500	\$420	\$439	\$340
83	\$257	\$513	\$438	\$456	\$350
84	\$262	\$530	\$451	\$471	\$361
85 and over	\$269	\$555	\$473	\$493	\$378
Under 65 ²	\$531	\$1,089	\$930	\$967	\$743

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	\$143	\$264	\$200	\$222	\$187
66	\$148	\$271	\$208	\$233	\$198
67	\$155	\$282	\$220	\$242	\$210
68	\$159	\$291	\$233	\$255	\$216
69	\$163	\$303	\$247	\$271	\$224
70	\$178	\$310	\$262	\$284	\$237
71	\$194	\$323	\$277	\$299	\$259
72	\$202	\$344	\$291	\$314	\$276
73	\$214	\$364	\$313	\$333	\$293
74	\$227	\$377	\$321	\$342	\$303
75	\$241	\$392	\$334	\$357	\$313
76	\$249	\$424	\$360	\$383	\$330
77	\$261	\$457	\$388	\$410	\$352
78	\$271	\$490	\$412	\$433	\$360
79	\$267	\$517	\$426	\$449	\$359
80	\$280	\$549	\$453	\$477	\$378
81	\$292	\$583	\$482	\$503	\$396
82	\$299	\$597	\$501	\$524	\$406
83	\$307	\$612	\$523	\$544	\$418
84	\$313	\$632	\$538	\$562	\$431
85 and over	\$321	\$662	\$564	\$588	\$451
Under 65²	\$633	\$1,299	\$1,109	\$1,154	\$886

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	\$117	\$219	\$167	\$186	\$157
66	\$118	\$226	\$173	\$192	\$165
67	\$120	\$236	\$184	\$201	\$168
68	\$127	\$246	\$196	\$213	\$172
69	\$134	\$253	\$208	\$226	\$173
70	\$142	\$260	\$219	\$236	\$184
71	\$152	\$272	\$232	\$250	\$196
72	\$157	\$285	\$245	\$262	\$209
73	\$165	\$303	\$262	\$280	\$220
74	\$178	\$314	\$269	\$286	\$231
75	\$190	\$327	\$281	\$297	\$240
76	\$196	\$352	\$301	\$319	\$250
77	\$204	\$380	\$326	\$343	\$264
78	\$211	\$411	\$344	\$364	\$272
79	\$210	\$431	\$357	\$374	\$275
80	\$220	\$458	\$380	\$398	\$286
81	\$228	\$487	\$402	\$421	\$296
82	\$233	\$498	\$420	\$438	\$307
83	\$239	\$513	\$438	\$459	\$315
84	\$244	\$529	\$453	\$471	\$327
85 and over	\$252	\$554	\$473	\$493	\$343
Under 65 ²	\$497	\$1,089	\$929	\$967	\$674

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	\$140	\$261	\$199	\$222	\$187
66	\$141	\$270	\$206	\$229	\$197
67	\$143	\$282	\$220	\$240	\$200
68	\$152	\$293	\$234	\$254	\$205
69	\$160	\$302	\$248	\$270	\$206
70	\$169	\$310	\$261	\$282	\$220
71	\$181	\$324	\$277	\$298	\$234
72	\$187	\$340	\$292	\$313	\$249
73	\$197	\$361	\$313	\$334	\$262
74	\$212	\$375	\$321	\$341	\$276
75	\$227	\$390	\$335	\$354	\$286
76	\$234	\$420	\$359	\$381	\$298
77	\$243	\$453	\$389	\$409	\$315
78	\$252	\$490	\$410	\$434	\$324
79	\$251	\$514	\$426	\$446	\$328
80	\$262	\$546	\$453	\$475	\$341
81	\$272	\$581	\$480	\$502	\$353
82	\$278	\$594	\$501	\$523	\$366
83	\$285	\$612	\$523	\$548	\$376
84	\$291	\$631	\$540	\$562	\$390
85 and over	\$301	\$661	\$564	\$588	\$409
Under 65²	\$593	\$1,299	\$1,108	\$1,154	\$804

Rates for Blue Shield Dental PPO plans

Blue Shield dental rates no dental savings

	Dental PPO 1000	Dental PPO 1500
Individual	\$39.20	\$58.80

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**