

# Monthly plan premium for people who get extra help from Medicare to help pay for their prescription drug costs

Northeast Region: Chase, Coffey, Douglas, Franklin, Geary, Jackson, Jefferson, Linn, Lyon, Miami, Morris, Osage, Pottawatomie, Riley, Shawnee, Wabaunsee counties

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 Medicare Advantage Choice (PPO)	Monthly premium for Blue Medicare Advantage (PPO)	Monthly premium for Blue Medicare Advantage Comprehensive (PPO)
100%	\$0.00	\$0.00	\$50.00
75%	\$0.00	\$0.00	\$50.00
50%	\$0.00	\$0.00	\$50.00
25%	\$0.00	\$0.00	\$50.00

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

Blue Cross and Blue Shield of Kansas's premium includes coverage for both medical services and prescription drug coverage.

Please contact our Customer Service number at 1-800-222-7645 for additional information. (TTY users should call 711). Hours are 8 a.m. to 8 p.m., seven days a week. You may reach a messaging service on Thanksgiving, Christmas, and holidays and weekends from April 1 through September 30. Please leave a message and your call will be returned the next business day.

**ATTENTION:** If you speak Spanish, language assistance services, free of charge, are available to you. Call 800-752-6650 (TTY:711). BCBSKS complies with applicable state laws and federal civil rights laws, and does not discriminate on the basis of race, color, national origin, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age, or disability.

Blue Cross and Blue Shield of Kansas cumple con las leyes estatales y las leyes federales de derechos civiles vigentes, y no discrimina por motivos de raza, color, país de origen, ascendencia, religión, sexo, estado civil, género, identidad de género, orientación sexual, edad ni discapacidad.

**ATENCIÓN:** Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-432-3990 (TTY: 1-800-766-3777).

**CHÚ Ý:** Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-432-3990 (TTY: 1-800-766-3777).

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),
- Your State Medicaid Office, 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.

[bcbsks.com/medicare](https://bcbsks.com/medicare)



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