

2027 California Medicare Prescription Drug Plans

The following Medicare prescription drug plans are available to Medicare beneficiaries who live in California. This information was obtained from the Centers for Medicare & Medicare Services (CMS) website www.medicare.gov.

- 2 Benchmark Plans
- National Base Premium Rate \$41.33

Sponsor/Organization Name	Website	Phone Number	TTY/TDD	Rating
Plan Name & ID Number	Drug Plan Monthly Premium	Annual Drug Deductible	Deductible Applies to:	Out of 5 stars
Blue Shield of California	www.blueshieldca.com/medicare	888-292-7591	711	
Rx Enhanced (S2468-004)	\$252.60	\$200	Tiers 3-5	2.5
Rx Plus (S2468-003)	\$210	\$700	All Tiers	2.5
Blue Cross and Blue Shield of IL, NM, OK, TX	healthspringmedicare.com	877-665-1842	711	
HealthSpring Assurance Rx(S5715-049) BENCHMARK	\$9.30	\$700	All Tiers	2.5
Humana Insurance Co.	www.humana.com/medicare	877-529-9871	711	
Basic Rx Plan (S5884-114)	\$118.30	\$700	All Tiers	4.5
Premier Rx Plan (S5884-178)	\$191.20	\$350	Tiers 4-5	4.5
Value RX Plan (S5884-211)	\$130.30	\$687	Tiers 3-5	4.5
United Health Care (AARP)	www.aarpmedicareplans.com	888-867-5564	711	
Medicare Rx Preferred (S5921-413)	\$242.60	\$300	Tiers 3-5	3.0
Medicare Rx Saver (S5921-376)	\$170.80	\$700	All Tiers	3.0

Sponsor/Organization Name	Website	Phone Number	TTY/TDD	Rating
Plan Name & ID Number	Drug Plan Monthly Premium	Annual Drug Deductible	Deductible Applies to:	Out of 5 stars
Wellcare	www.wellcare.com/pdp	844-480-0700	711	
Classic (S4802-094) BENCHMARK	\$7.30	\$700	All Tiers	3.0
Value Script (S4802-163)	\$5.30	\$700	Tiers 2-5	3.0

Tier Descriptions

Tier 1: Preferred Generic- Many common lower cost generic drugs

Tier 2: Generic- Higher cost generic drugs

Tier 3: Preferred Brand- Many common brand name drugs and some higher cost generic drugs

Tier 4: Non-Preferred Drug- Higher cost brand name and generic drugs for which a lower cost alternative is often available

Tier 5: Specialty- High-cost brand and generic drugs meeting Medicare's definition of specialty drug



Effective 1/1/27 The new annual **Medicare maximum out-of-pocket cap** for prescription copays is **\$2,400**. *Note: Plan premiums, and copays for prescriptions that are not covered by your plan's formulary will not apply to the out-of-pocket cap.

The Medicare Prescription Payment Plan (MPPP) works with your current Part D plan to help you manage your out-of-pocket drug costs for medications covered by your plan. The MPPP allows you to spread out your prescription copays in the form of monthly payments that you make directly to your plan instead of at once to the pharmacy. To set up MPPP you will need to contact your plan.

Benchmark Plans: Beneficiaries on the Extra Help/Low Income Subsidy (LIS) pay \$0 premium, \$0 deductible, and up to \$5.80 generics and \$14.40 brand/specialty prescription copays when enrolled in a Benchmark plan.

Contact us for information on plan options, help comparing Part D and Medicare advantage prescription drug plans, or to find out if you qualify for Extra Help/LIS.

Health Insurance Counseling and Advocacy Program (HICAP)

Kern County Aging and Adult Services
5357 Truxtun Ave. Bakersfield, CA 93309
661-868-1000 or Toll Free 1-800-434-0222.
Call us or in-person by appointment only
Open Monday - Friday 8:00 a.m. to 5:00 p.m.

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