

MONTHLY PREMIUMS FOR

**MEDICARE SUPPLEMENT
POLICIES**

AS OF JANUARY 1, 2024



Monthly Premiums for Medicare Supplement Insurance Policies As of January 1, 2024

NOTE: This publication is updated twice a year for rates as of January 1 and July 1. For the most current list of participating insurance carriers, refer to <https://insurance.maryland.gov/Consumer/Documents/publicnew/medsupindpolicies.pdf>.

Scope of Guide

This publication provides: (1) names, addresses, telephone numbers and websites of insurance carriers that sell Medicare Supplement insurance in Maryland, (2) Plans A, B, C, D, F, high deductible F, G, high deductible G, K, L, M, and N monthly premiums for ages 65, 70, 75, 80 and 85 individuals, and (3) Plans A, C, and D monthly premiums for individuals under age 65 with a disability who are enrolled in Medicare Part B. Some insurance carriers sell other plans for individuals under age 65 with a disability who are enrolled in Medicare Part B. The plan options listed in this publication are for Standardized policies (and certificates) first offered on or after June 1, 2010 except for Plan G with High Deductible. The plan options listed for Plan G with High Deductible are for policies with an effective date for coverage on or after January 1, 2020. (Please note: Effective January 1, 2020, only applicants who are first eligible for Medicare before year 2020 may purchase Plans C, F, and high deductible F.) The premiums are subject to change, and the information in this Guide is for informational purposes only. For current premiums and more information about policies, contact your insurance producer (Insurance Producer or broker) or insurance carrier.

This publication only provides the rate information filed with the MIA. For general information about Medicare and Medicare Supplement Policies, you can view the MIA's webinar, *Medicare Supplement Insurance in Maryland* at: <https://tinyurl.com/ydcqnthw>. You may also visit the website of the federal Centers for Medicare and Medicaid Services (CMS), which administers the Medicare program and can answer your questions regarding the Medicare Program. The CMS website at www.cms.gov contains valuable information regarding Medicare, including a handbook on Medicare entitled *Medicare & You* that provides detailed information on Medicare program benefits, rights and obligations, and also a guide titled, *Choosing a Medigap Policy: A Guide to Health Insurance for People with Medicare*. You also may contact CMS directly with your questions regarding the Medicare program by calling toll free 1-800-MEDICARE or visiting the Medicare website at www.medicare.gov.

General Information

Medicare Supplement is private insurance and can only be purchased through an insurance carrier. It is not sponsored by either federal or state government.

An insurance carrier writes a policy based on issue age, attained age, or community rating.

Issue Age means that premiums are based on your age at the time you purchase the policy. While premiums may periodically increase due to benefit changes, inflation, or increases in medical costs, they will not increase due to your advancing age.

Attained Age means that premiums are based on your age on the last policy anniversary date. Premiums are scheduled to increase at predetermined intervals (for example, every year or every five years). These increases are in addition to premium increases because of benefit changes, inflation, or increasing medical costs.

Community Rated means that premiums do not depend on your age, either at the time the policy is issued or upon renewal. Premiums depend on other factors and may increase because of benefit changes or overall premium adjustments.

Individual Medicare Supplement Plan Choices – Plans A, B, C, D, F, High Deductible F, G, High Deductible G, K, L, M and N
Benefit Chart of Medicare Supplement Plans Sold on or After January 1, 2020.

This chart shows the benefits included in each of the standard Medicare Supplement plans. Some plans may not be available to all Original (Part A/Part B) Medicare beneficiaries. Only applicants first eligible for Medicare before January 1, 2020 may purchase Plans C, F, and high deductible F.
 Note: A ✓ means 100% of the benefit is paid.

| Benefits | Plans Available to All Applicants | | | | | | | | First eligible for Medicare before | |
|--|--|---|---|----------------|----------------------|----------------------|-----|--------------------------------|------------------------------------|----------------|
| | A | B | D | G ¹ | K | L | M | N | C | F ¹ |
| | Medicare Part A coinsurance and hospital coverage (up to an additional 365 days after Medicare benefits are used up) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Medicare Part B coinsurance or Copayment | ✓ | ✓ | ✓ | ✓ | 50% | 75% | ✓ | ✓ copays apply ³ | ✓ | ✓ |
| Blood (first three pints) | ✓ | ✓ | ✓ | ✓ | 50% | 75% | ✓ | ✓ | ✓ | ✓ |
| Part A hospice care coinsurance or copayment | ✓ | ✓ | ✓ | ✓ | 50% | 75% | ✓ | ✓ | ✓ | ✓ |
| Skilled nursing facility coinsurance | | | ✓ | ✓ | 50% | 75% | ✓ | ✓ | ✓ | ✓ |
| Medicare Part A deductible | | ✓ | ✓ | ✓ | 50% | 75% | 50% | ✓ | ✓ | ✓ |
| Medicare Part B deductible | | | | | | | | | ✓ | ✓ |
| Medicare Part B excess charges | | | | ✓ | | | | | | ✓ |
| Foreign travel emergency (up to plan limits) | | | ✓ | ✓ | | | ✓ | ✓ | ✓ | ✓ |
| Out-of-pocket limit | | | | | \$7,060 ² | \$3,530 ² | | | | |

¹ Plans F and G also have a high deductible option which require first paying a plan deductible before the plan begins to pay. Once the plan deductible is met, the plan pays 100% of covered services for the rest of the calendar year. High deductible Plan G does not cover the Medicare Part B deductible.

² Plans K and L pay 100% of covered services for the rest of the calendar year once you meet the out-of-pocket yearly limit.

³ Plan N pays 100% of the Part B coinsurance, except for a co-payment of up to \$20 for some office visits and up to a \$50 co-payment for emergency room visits that do not result in an inpatient admission.

Medicare Supplement Birthday Rule

Starting on July 1, 2023, Medicare Supplement policyholders in Maryland will be granted a once-yearly Open Enrollment Period during the 30-day period following the policyholder's birthday. The Birthday Rule establishes a guaranteed issue period each year to allow a policyholder to change, without underwriting, to a Medicare Supplement policy of equal or lesser benefits. "Without underwriting" means that a policyholder will be eligible for the lowest class of premiums and may not be asked about tobacco usage or health status; or given a tobacco rate or a less preferred rate based on assumed tobacco/health status by the carrier.

Medicare Supplement policies are considered to have equal or lesser value unless:

- the policy contains one or more significant benefits not included in the Medicare supplement policy being replaced; or
- the policy contains the same significant benefits included in the Medicare supplement policy being replaced but it reduces the cost-sharing responsibilities of the enrollee for the benefits

See equal or lesser value matrix below:

| Currently Sold | Lesser or Equal Plan | Currently Sold | Lesser or Equal Plan |
|--------------------|--|--------------------|---|
| A | Plan A | G | Plan A, B, D, G, K, L, M, N, F with a high deductible or G with a high deductible |
| B | Plan A or B | G, high deductible | Plan G with a high deductible |
| C | Plan A, B, C, D, K, L, M or N | K | Plan K |
| D | Plan A, B, D, K, L, M or N | L | Plan K or L |
| F | Plan A, B, C, D, F, F with a high deductible, G, G with a high deductible, K, L, M, or N | M | Plan M or N |
| F, high deductible | Plan F with a high deductible or G with a high deductible | N | Plan N |

SHIP

Maryland's State Health Insurance Program

The State Health Insurance Program is a program that helps those on Medicare with personalized Medicare counseling, education, and access to financial assistance resources.

SHIP offices help Medicare beneficiaries identify and understand programs and plans such as Medicare prescription drug coverage, Medicare Advantage Plans, and Medicare supplemental insurance policies. SHIP can also help Medicare beneficiaries enroll in these plans. The services you receive through SHIP offices are confidential and free.

Allegany – 301-783-1710

Anne Arundel – 410-222-4257

Baltimore City – 410-396-2273

Baltimore County – 410-887-2059

Calvert – 410-535-4606

Caroline – 410-479-2535

Carroll – 410-386-3800

Cecil – 410-996-8174

Charles – 301-934-9305

Dorchester – 410-376-3662

Frederick – 301-600-1234

Garrett – 301-334-9431

Harford – 410-638-3025

Howard – 410-313-7392

Kent – 410-778-2564

Montgomery – 301-255-4250

Prince George's – 301-265-8471

Queen Anne's – 410-758-0848

Somerset – 410-742-0505

St. Mary's – 301-475-4200 ext. 1064

Talbot – 410-822-2869 ext. 231

Washington – 301-790-0275

Wicomico – 410-742-0505

Worcester – 410-742-0505

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
RATES FOR PLAN A, MEDICARE ELIGIBLE INDIVIDUALS DUE TO A DISABILITY
AS OF JANUARY 1, 2024**

| <u>COMPANY_NAME</u> | <u>Male Non-Tobacco or Male Preferred Plan A <65</u> | <u>Female Non-Tobacco or Female Preferred Plan A <65</u> | <u>Male Tobacco or Male Standard Plan A <65</u> | <u>Female Tobacco or Female Standard Plan A <65</u> |
|---|---|---|--|--|
| ACE Property and Casualty Insurance Company | \$160 | \$142 | \$184 | \$163 |
| Aetna Health Insurance Company | \$524 | \$456 | N/A | N/A |
| American Benefit Life Insurance Company | \$218 | \$190 | \$251 | \$218 |
| American Financial Security Life Insurance Company | \$228 | \$198 | \$262 | \$228 |
| American Home Life Insurance Company (The) | \$229 | \$199 | \$263 | \$229 |
| Bankers Fidelity Assurance Company | \$174 | \$151 | N/A | N/A |
| Bankers Reserve Life Insurance Company of Wisconsin | \$474 | \$412 | \$545 | \$474 |
| Capitol Life Insurance Company (The) | \$282 | \$245 | \$324 | \$282 |
| Cigna Health and Life Insurance Company | \$236 | \$236 | \$236 | \$236 |
| Cigna National Health Insurance Company | \$340 | \$306 | \$374 | \$337 |
| EPIC Life Insurance Company (The) | \$274 | \$251 | \$274 | \$251 |
| Erie Family Life Insurance Company | \$193 | \$168 | \$222 | \$193 |
| Everence Association, Inc. | \$366 | \$333 | \$421 | \$383 |
| Federal Life Insurance Company | \$258 | \$258 | \$297 | \$297 |
| First Care, Inc. (dba CareFirst MedPlus) | \$948 | \$917 | N/A | N/A |
| First Health Life and Health Insurance Company | \$198 | \$182 | \$218 | \$200 |
| Globe Life and Accident Insurance Company | \$238 | \$238 | \$238 | \$238 |
| GPM Health and Life Insurance Company | \$385 | \$385 | \$442 | \$442 |
| Guarantee Trust Life Insurance Company | \$261 | \$232 | \$326 | \$289 |
| Heartland National Life Insurance Company | \$217 | \$189 | \$250 | \$217 |
| Humana Benefit Plan of Illinois, Inc. | \$366 | \$324 | \$421 | \$373 |
| LifeShield National Insurance Company | \$214 | \$186 | \$246 | \$214 |
| Monitor Life Insurance Company of New York | \$218 | \$189 | \$250 | \$218 |
| Mutual of Omaha Insurance Company | \$177 | \$154 | \$204 | \$177 |
| Nassau Life Insurance Company of Kansas | \$246 | \$214 | \$282 | \$246 |
| National Health Insurance Company | \$209 | \$185 | \$251 | \$222 |
| Physicians Life Insurance Company | \$199 | \$180 | \$221 | \$200 |
| SBLI USA Life Insurance Company, Inc. | \$240 | \$209 | \$267 | \$232 |

| | | | | |
|--|-------|-------|-------|-------|
| State Farm Mutual Automobile Insurance Company | \$254 | \$254 | \$254 | \$254 |
| Supreme Council of the Royal Arcanum | \$189 | \$165 | \$218 | \$189 |
| Tier One Insurance Company | \$250 | \$217 | \$287 | \$250 |
| Transamerica Life Insurance Company | \$201 | \$180 | \$221 | \$199 |
| Unified Life Insurance Company | \$258 | \$225 | \$297 | \$258 |
| United American Insurance Company | \$185 | \$161 | N/A | N/A |
| United Healthcare Insurance Company | \$414 | \$367 | \$455 | \$404 |
| USAA Life Insurance Company | \$260 | \$260 | \$286 | \$286 |
| Washington National Insurance Company | \$253 | \$253 | \$253 | \$253 |
| | | | | |

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
RATES FOR PLANS C AND D, MEDICARE ELIGIBLE INDIVIDUALS DUE TO A DISABILITY
AS OF JANUARY 1, 2024**

| <u>COMPANY_NAME</u> | <u>Male Non-Tobacco or Male Preferred Plan C < 65</u> | <u>Female Non-Tobacco or Female Preferred Plan C < 65</u> | <u>Male Tobacco or Male Standard Plan C < 65</u> | <u>Female Tobacco or Female Standard Plan C < 65</u> |
|---------------------|--|--|---|---|
|---------------------|--|--|---|---|

| | | | | |
|--|---------|-------|---------|---------|
| Heartland National Life Insurance Company | \$1,137 | \$989 | \$1,308 | \$1,137 |
| State Farm Mutual Automobile Insurance Company | \$614 | \$614 | \$614 | \$614 |
| United Healthcare Insurance Company | \$988 | \$876 | \$1,087 | \$964 |
| | | | | |

| <u>COMPANY_NAME</u> | <u>Male Non-Tobacco or Male Preferred Plan D < 65</u> | <u>Female Non-Tobacco or Female Preferred Plan D < 65</u> | <u>Male Tobacco or Male Standard Plan D < 65</u> | <u>Female Tobacco or Female Standard Plan D < 65</u> |
|---------------------|--|--|---|---|
|---------------------|--|--|---|---|

| | | | | |
|--|-------|-------|-------|-------|
| State Farm Mutual Automobile Insurance Company | \$598 | \$588 | \$598 | \$588 |
| United American Insurance Company | \$694 | \$602 | N/A | N/A |

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

ACE Property and Casualty Insurance Company
 Attn: Medicare Supplement
 436 Walnut Street
 Philadelphia, PA 19106
 1-800-601-3372

Individual Market-Attained Age
 Marketing Method: Insurance Producer Solicited

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$160 | \$157 | \$160 | \$190 | \$231 | \$288 |
| F | | \$184 | \$200 | \$238 | \$289 | \$360 |
| G | | \$158 | \$161 | \$192 | \$233 | \$290 |
| High G | | \$ 63 | \$ 65 | \$ 77 | \$ 93 | \$116 |
| N | | \$121 | \$126 | \$149 | \$181 | \$226 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$142 | \$139 | \$142 | \$169 | \$205 | \$256 |
| F | | \$163 | \$178 | \$211 | \$257 | \$320 |
| G | | \$141 | \$143 | \$170 | \$207 | \$258 |
| High G | | \$ 56 | \$ 57 | \$ 68 | \$ 83 | \$103 |
| N | | \$108 | \$112 | \$133 | \$161 | \$201 |

A 7% household discount is available for applicants who qualify.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$184 | \$180 | \$184 | \$218 | \$265 | \$331 |
| F | | \$211 | \$230 | \$273 | \$332 | \$414 |
| G | | \$182 | \$186 | \$220 | \$268 | \$334 |
| High G | | \$ 73 | \$ 74 | \$ 88 | \$107 | \$134 |
| N | | \$139 | \$145 | \$172 | \$209 | \$260 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$163 | \$160 | \$163 | \$194 | \$236 | \$294 |
| F | | \$188 | \$205 | \$243 | \$296 | \$368 |
| G | | \$162 | \$165 | \$196 | \$238 | \$297 |
| High G | | \$ 65 | \$ 66 | \$ 78 | \$ 95 | \$119 |
| N | | \$124 | \$129 | \$153 | \$186 | \$231 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 7% household discount is available for applicants who qualify.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Aetna Health Insurance Company
800 Crescent Centre Drive
Suite 200
Franklin, TN 37067
1-800-264-4000
www.aetnaseniorproducts.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$524 | \$325 | \$345 | \$405 | \$477 | \$557 |
| B | | \$172 | \$183 | \$215 | \$253 | \$296 |
| F | | \$209 | \$222 | \$261 | \$307 | \$359 |
| G | | \$192 | \$203 | \$239 | \$282 | \$329 |
| High G | | \$ 60 | \$ 63 | \$ 75 | \$ 88 | \$103 |
| N | | \$124 | \$138 | \$163 | \$192 | \$224 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$456 | \$282 | \$300 | \$352 | \$415 | \$485 |
| B | | \$150 | \$159 | \$187 | \$220 | \$257 |
| F | | \$182 | \$193 | \$227 | \$267 | \$312 |
| G | | \$167 | \$177 | \$208 | \$245 | \$286 |
| High G | | \$ 52 | \$ 55 | \$ 65 | \$ 76 | \$ 89 |
| N | | \$108 | \$120 | \$142 | \$167 | \$195 |

A 7% Household Discount is available. In order to be eligible for the 7% Household Discount, an individual must enroll for a Medicare Supplement plan at the same time as another Medicare eligible adult, or the other Medicare eligible adult must currently be covered by an Aetna Medicare Supplement policy issued in Maryland.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | N/A | \$361 | \$383 | \$450 | \$530 | \$619 |
| B | | \$191 | \$203 | \$239 | \$281 | \$329 |
| F | | \$232 | \$246 | \$290 | \$341 | \$399 |
| G | | \$213 | \$226 | \$266 | \$313 | \$365 |
| High G | | \$ 66 | \$ 71 | \$ 83 | \$ 98 | \$114 |
| N | | \$137 | \$154 | \$182 | \$213 | \$249 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | N/A | \$314 | \$333 | \$391 | \$461 | \$539 |
| B | | \$166 | \$177 | \$208 | \$245 | \$286 |
| F | | \$202 | \$214 | \$252 | \$297 | \$347 |
| G | | \$185 | \$197 | \$231 | \$272 | \$318 |
| High G | | \$ 58 | \$ 61 | \$ 72 | \$ 85 | \$ 99 |
| N | | \$119 | \$134 | \$158 | \$186 | \$217 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 7% Household Discount is available. In order to be eligible for the 7% Household Discount, an individual must enroll for a Medicare Supplement plan at the same time as another Medicare eligible adult or the other Medicare eligible adult must currently be covered by an Aetna Medicare Supplement policy issued in Maryland.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

American Benefit Life Insurance Company
 1605 LBJ Freeway, Suite 7700
 Dallas, TX 75234
 1-833-504-0331
www.lbig.com

Individual Market-Attained Age
 Marketing Method: Insurance Producer Solicited

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$218 | \$179 | \$179 | \$203 | \$247 | \$320 |
| F | | \$198 | \$207 | \$248 | \$300 | \$371 |
| G | | \$163 | \$167 | \$204 | \$248 | \$322 |
| N | | \$119 | \$130 | \$162 | \$203 | \$262 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$190 | \$156 | \$156 | \$176 | \$215 | \$279 |
| F | | \$173 | \$180 | \$216 | \$261 | \$323 |
| G | | \$142 | \$146 | \$177 | \$216 | \$280 |
| N | | \$103 | \$113 | \$141 | \$176 | \$228 |

A 10% Household Discount applies for eligible individuals.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$251 | \$206 | \$206 | \$233 | \$284 | \$368 |
| F | | \$228 | \$238 | \$285 | \$345 | \$427 |
| G | | \$187 | \$193 | \$234 | \$285 | \$370 |
| N | | \$137 | \$149 | \$187 | \$233 | \$301 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$218 | \$179 | \$179 | \$203 | \$247 | \$320 |
| F | | \$198 | \$207 | \$248 | \$300 | \$371 |
| G | | \$163 | \$167 | \$204 | \$248 | \$322 |
| N | | \$119 | \$130 | \$162 | \$203 | \$262 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 10% Household Discount applies for eligible individuals.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

American Financial Security Life Insurance Company
 1021 Reams Fleming Boulevard
 Franklin, TN 37064
 1-866-951-0686
www.afslic.com

Individual Market-Attained Age
 Marketing Method: Insurance Producer Solicited

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$228 | \$182 | \$182 | \$204 | \$253 | \$314 |
| F | | \$188 | \$200 | \$234 | \$287 | \$372 |
| G | | \$161 | \$173 | \$206 | \$254 | \$332 |
| N | | \$121 | \$128 | \$158 | \$196 | \$255 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$198 | \$159 | \$159 | \$178 | \$220 | \$273 |
| F | | \$163 | \$174 | \$203 | \$250 | \$324 |
| G | | \$140 | \$150 | \$179 | \$221 | \$289 |
| N | | \$105 | \$111 | \$137 | \$170 | \$222 |

A 10% Household Discount applies for eligible individuals.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$262 | \$210 | \$210 | \$235 | \$291 | \$361 |
| F | | \$216 | \$230 | \$269 | \$330 | \$428 |
| G | | \$185 | \$199 | \$236 | \$293 | \$382 |
| N | | \$139 | \$147 | \$181 | \$225 | \$294 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$228 | \$182 | \$182 | \$204 | \$253 | \$314 |
| F | | \$188 | \$200 | \$234 | \$287 | \$372 |
| G | | \$161 | \$173 | \$206 | \$254 | \$332 |
| N | | \$121 | \$128 | \$158 | \$196 | \$255 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 10% Household Discount applies for eligible individuals.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

American Home Life Insurance Company (The)
 400 S. Kansas Avenue
 Topeka, KS 66601
 1-833-504-0334
www.amhlifeco.com

Individual Market-Attained Age
 Marketing Method: Insurance Producer Solicited

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$229 | \$175 | \$175 | \$202 | \$253 | \$316 |
| F | | \$190 | \$196 | \$243 | \$301 | \$374 |
| G | | \$158 | \$165 | \$203 | \$254 | \$317 |
| N | | \$114 | \$129 | \$161 | \$199 | \$251 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$199 | \$152 | \$152 | \$176 | \$220 | \$275 |
| F | | \$165 | \$171 | \$211 | \$262 | \$325 |
| G | | \$138 | \$143 | \$177 | \$221 | \$276 |
| N | | \$100 | \$112 | \$140 | \$173 | \$218 |

A 7% Household Discount applies for eligible individuals.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$263 | \$202 | \$202 | \$232 | \$291 | \$363 |
| F | | \$219 | \$226 | \$279 | \$347 | \$430 |
| G | | \$182 | \$189 | \$234 | \$292 | \$365 |
| N | | \$132 | \$148 | \$185 | \$229 | \$289 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$229 | \$175 | \$175 | \$202 | \$253 | \$316 |
| F | | \$190 | \$196 | \$243 | \$301 | \$374 |
| G | | \$158 | \$165 | \$203 | \$254 | \$317 |
| N | | \$114 | \$129 | \$161 | \$199 | \$251 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 7% Household Discount applies for eligible individuals.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Bankers Fidelity Assurance Company
4370 Peachtree Road, NE
Atlanta, GA 30348-5185
1-866-458-7500
www.bankersfidelity.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$174 | \$174 | \$180 | \$214 | \$253 | \$293 |
| F | | \$174 | \$180 | \$214 | \$253 | \$293 |
| G | | \$151 | \$157 | \$186 | \$221 | \$255 |
| High G | | \$ 53 | \$ 54 | \$ 65 | \$ 77 | \$ 89 |
| K | | \$ 89 | \$ 92 | \$110 | \$130 | \$150 |
| N | | \$116 | \$120 | \$142 | \$169 | \$195 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$151 | \$151 | \$157 | \$186 | \$221 | \$255 |
| F | | \$151 | \$157 | \$186 | \$221 | \$255 |
| G | | \$132 | \$136 | \$162 | \$192 | \$222 |
| High G | | \$ 46 | \$ 48 | \$ 57 | \$ 67 | \$ 78 |
| K | | \$ 78 | \$ 81 | \$ 96 | \$114 | \$131 |
| N | | \$101 | \$104 | \$124 | \$147 | \$170 |

A household discount of 7% is available.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | N/A | \$216 | \$224 | \$267 | \$316 | \$365 |
| F | | \$217 | \$225 | \$267 | \$316 | \$366 |
| G | | \$189 | \$195 | \$232 | \$275 | \$318 |
| High G | | \$ 65 | \$ 68 | \$ 80 | \$ 95 | \$110 |
| K | | \$111 | \$115 | \$137 | \$162 | \$187 |
| N | | \$144 | \$149 | \$178 | \$210 | \$243 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | N/A | \$189 | \$195 | \$232 | \$275 | \$318 |
| F | | \$189 | \$196 | \$232 | \$275 | \$319 |
| G | | \$164 | \$170 | \$202 | \$240 | \$277 |
| High G | | \$ 57 | \$ 59 | \$ 70 | \$ 83 | \$ 96 |
| K | | \$ 97 | \$100 | \$119 | \$141 | \$163 |
| N | | \$126 | \$130 | \$155 | \$183 | \$212 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A household discount of 7% is available.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

**Bankers Reserve Life Insurance Company
Of Wisconsin**
P.O. Box 16895
Clearwater, FL 33766
1-833-441-1564
www.wellcare.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$474 | \$302 | \$324 | \$375 | \$450 | \$527 |
| F | | \$196 | \$208 | \$243 | \$300 | \$365 |
| G | | \$170 | \$176 | \$210 | \$264 | \$325 |
| N | | \$126 | \$138 | \$167 | \$210 | \$259 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$412 | \$263 | \$281 | \$326 | \$392 | \$458 |
| F | | \$170 | \$181 | \$211 | \$261 | \$318 |
| G | | \$148 | \$153 | \$182 | \$230 | \$283 |
| N | | \$109 | \$120 | \$145 | \$183 | \$225 |

A 10% Household Discount is available if the applicant has a household resident (at least one but no more than three), with whom they have continuously resided with for the past 12 months.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$545 | \$347 | \$372 | \$431 | \$518 | \$606 |
| F | | \$225 | \$239 | \$280 | \$345 | \$420 |
| G | | \$196 | \$203 | \$241 | \$304 | \$374 |
| N | | \$145 | \$158 | \$192 | \$242 | \$297 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$474 | \$302 | \$324 | \$375 | \$450 | \$527 |
| F | | \$196 | \$208 | \$243 | \$300 | \$365 |
| G | | \$170 | \$176 | \$210 | \$264 | \$325 |
| N | | \$126 | \$138 | \$167 | \$210 | \$259 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 10% Household Discount is available if the applicant has a household resident (at least one but no more than three), with whom they have continuously resided with for the past 12 months.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Capitol Life Insurance Company (The)
 Medicare Supplement Administrative Office
 1021 Reams Fleming Boulevard
 Franklin, TN 37067
 1-866-237-3010

Individual Market-Attained Age
 Marketing Method: Insurance Producer Solicited

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$282 | \$196 | \$206 | \$251 | \$306 | \$388 |
| F | | \$231 | \$241 | \$289 | \$349 | \$434 |
| G | | \$193 | \$203 | \$247 | \$301 | \$392 |
| N | | \$137 | \$156 | \$196 | \$247 | \$320 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$245 | \$171 | \$179 | \$219 | \$266 | \$338 |
| F | | \$201 | \$209 | \$251 | \$304 | \$377 |
| G | | \$168 | \$176 | \$215 | \$262 | \$341 |
| N | | \$119 | \$135 | \$170 | \$215 | \$278 |

A 7% Household Discount is available if multiple policyholders in a household have a Capitol Life Insurance Co. policy.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$324 | \$226 | \$237 | \$289 | \$352 | \$447 |
| F | | \$266 | \$277 | \$332 | \$402 | \$499 |
| G | | \$222 | \$233 | \$284 | \$347 | \$450 |
| N | | \$157 | \$179 | \$225 | \$284 | \$368 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$282 | \$196 | \$206 | \$251 | \$306 | \$388 |
| F | | \$231 | \$241 | \$289 | \$349 | \$434 |
| G | | \$193 | \$203 | \$247 | \$301 | \$392 |
| N | | \$137 | \$156 | \$196 | \$247 | \$320 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 7% Household Discount is available if multiple policyholders in a household have a Capitol Life Insurance Co. policy.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Cigna Health and Life Insurance Company
 Cigna Supplemental Benefits
 11501 Alterra Parkway, Suite 500
 Austin, TX 78758
 1-855-891-9368
www.cigna.com/medicare/supplemental/

Individual Market-Attained Age
 Marketing Method: Insurance Producer Solicited/Direct Response

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$236 | \$251 | \$271 | \$316 | \$362 | \$391 |
| F | | \$310 | \$335 | \$391 | \$458 | \$509 |
| High F | | \$ 68 | \$ 74 | \$ 86 | \$101 | \$112 |
| G | | \$253 | \$276 | \$322 | \$372 | \$408 |
| N | | \$151 | \$162 | \$189 | \$225 | \$249 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$236 | \$221 | \$239 | \$279 | \$319 | \$345 |
| F | | \$274 | \$296 | \$345 | \$404 | \$449 |
| High F | | \$ 60 | \$ 65 | \$ 76 | \$ 89 | \$ 99 |
| G | | \$223 | \$243 | \$284 | \$329 | \$360 |
| N | | \$133 | \$143 | \$166 | \$199 | \$220 |

There is a 7% Household Discount is available when more than one member of the applicant's household enrolls or is enrolled in a Medicare Supplement policy provided by or through an Affiliate of Cigna Health and Life Insurance Company.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$236 | \$276 | \$298 | \$347 | \$398 | \$430 |
| F | | \$341 | \$369 | \$430 | \$503 | \$560 |
| High F | | \$ 75 | \$ 81 | \$ 94 | \$111 | \$123 |
| G | | \$278 | \$303 | \$354 | \$410 | \$449 |
| N | | \$166 | \$178 | \$207 | \$247 | \$274 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$236 | \$243 | \$263 | \$307 | \$351 | \$379 |
| F | | \$301 | \$326 | \$379 | \$444 | \$494 |
| High F | | \$ 66 | \$ 72 | \$ 83 | \$ 98 | \$109 |
| G | | \$245 | \$268 | \$313 | \$361 | \$396 |
| N | | \$146 | \$157 | \$183 | \$218 | \$242 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

There is a 7% Household Discount is available when more than one member of the applicant's household enrolls or is enrolled in a Medicare Supplement policy provided by or through an Affiliate of Cigna Health and Life Insurance Company.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Cigna National Health Insurance Company
P.O. Box 5725
Scranton, PA 18505-5725
1-866-459-4272
www.Cigna.com/Medicare

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited/Direct Response

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$340 | \$312 | \$340 | \$409 | \$498 | \$606 |
| F | | \$192 | \$216 | \$260 | \$316 | \$385 |
| G | | \$174 | \$190 | \$229 | \$278 | \$338 |
| N | | \$123 | \$139 | \$167 | \$204 | \$248 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$306 | \$281 | \$306 | \$369 | \$449 | \$546 |
| F | | \$173 | \$194 | \$234 | \$285 | \$347 |
| G | | \$157 | \$171 | \$206 | \$251 | \$305 |
| N | | \$111 | \$125 | \$151 | \$183 | \$223 |

There is a 6% discount which will be applied to eligible new business on all underwriting classes when a policyholder resides in a Household with another adult who is age 18 or older, which includes a legal spouse, civil union partner, or domestic partner. We may request additional documentation to determine eligibility.

There is an additional 9% discount applied to eligible new business on all underwriting classes when more than one member of the Household enrolls or is enrolled in a Medicare Supplement policy provided by or through an Affiliate of Cigna National Health Insurance Company.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$374 | \$344 | \$374 | \$450 | \$548 | \$666 |
| F | | \$211 | \$237 | \$286 | \$348 | \$423 |
| G | | \$192 | \$209 | \$252 | \$306 | \$372 |
| N | | \$136 | \$153 | \$184 | \$224 | \$273 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$337 | \$310 | \$337 | \$406 | \$493 | \$600 |
| F | | \$190 | \$214 | \$258 | \$314 | \$382 |
| G | | \$173 | \$188 | \$227 | \$276 | \$335 |
| N | | \$122 | \$138 | \$166 | \$202 | \$246 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

There is a 6% discount which will be applied to eligible new business on all underwriting classes when a policyholder resides in a Household with another adult who is age 18 or older, which includes a legal spouse, civil union partner, or domestic partner. We may request additional documentation to determine eligibility.

There is an additional 9% discount applied to eligible new business on all underwriting classes when more than one member of the Household enrolls or is enrolled in a Medicare Supplement policy provided by or through an Affiliate of Cigna National Health Insurance Company.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

EPIC Life Insurance Company (The)
1717 W. Broadway
Madison, WI 53713
1-800-236-8809
www.mywpsmedicare.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$274 | \$237 | \$283 | \$332 | \$379 | \$449 |
| F | | \$238 | \$284 | \$333 | \$380 | \$451 |
| G | | \$196 | \$234 | \$274 | \$313 | \$370 |
| N | | \$176 | \$210 | \$246 | \$280 | \$332 |

Female

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$251 | \$216 | \$257 | \$302 | \$344 | \$408 |
| F | | \$217 | \$259 | \$303 | \$346 | \$410 |
| G | | \$178 | \$213 | \$249 | \$284 | \$337 |
| N | | \$160 | \$191 | \$223 | \$255 | \$302 |

Two individuals living in the same household who each purchase a Medicare supplement policy from EPIC will receive a 7% discount.

Members enrolled in ACH payments will receive a 2% discount from the displayed rates.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Erie Family Life Insurance Company
100 Erie Insurance Place
Erie, PA 16530
1-800-458-0811
www.erieinsurance.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$193 | \$171 | \$187 | \$219 | \$251 | \$283 |
| F | | \$212 | \$236 | \$272 | \$319 | \$372 |
| G | | \$175 | \$196 | \$230 | \$268 | \$311 |
| N | | \$148 | \$164 | \$195 | \$228 | \$262 |

Female Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$168 | \$149 | \$163 | \$191 | \$218 | \$246 |
| F | | \$184 | \$205 | \$237 | \$277 | \$323 |
| G | | \$152 | \$171 | \$200 | \$233 | \$271 |
| N | | \$128 | \$143 | \$170 | \$198 | \$227 |

A 5% household discount will be offered to applicants who (a) live in an eligible household and (b) the applicant lives in the same household with another person who is over the age of 18 and is either the applicant's spouse, someone with whom the applicant is in a civil union partnership, or is a permanent resident in the applicant's home and has resided there for a minimum of 12 months.

Male Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$222 | \$197 | \$215 | \$252 | \$288 | \$326 |
| F | | \$244 | \$271 | \$313 | \$367 | \$427 |
| G | | \$201 | \$226 | \$265 | \$308 | \$358 |
| N | | \$170 | \$188 | \$225 | \$262 | \$301 |

Female Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$193 | \$171 | \$187 | \$219 | \$251 | \$283 |
| F | | \$212 | \$236 | \$272 | \$319 | \$372 |
| G | | \$175 | \$196 | \$230 | \$268 | \$311 |
| N | | \$148 | \$164 | \$195 | \$228 | \$262 |

***Premiums listed above for Male Tobacco and Female Tobacco cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 5% household discount will be offered to applicants who (a) live in an eligible household and (b) the applicant lives in the same household with another person who is over the age of 18 and is either the applicant's spouse, someone with whom the applicant is in a civil union partnership, or is a permanent resident in the applicant's home and has resided there for a minimum of 12 months.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Everence Association, Inc.
1110 N. Main Street
P.O. Box 483
Goshen, IN 46527
1-800-348-7468
www.everence.com

Individual Market-Issue Age/Attained Age
Marketing Method: Members Only
Insurance Producer Solicited/Direct Response

Male Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|-------|--------|--------|--------|--------|--------|
| A | \$366 | \$346 | \$374 | \$392 | \$416 | \$435 |
| F | | \$287 | \$311 | \$330 | \$357 | \$385 |
| G | | \$210 | \$227 | \$242 | \$259 | \$270 |
| L | | \$124 | \$136 | \$145 | \$157 | \$169 |
| N | | \$137* | \$164* | \$186* | \$203* | \$217* |

Female Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|-------|--------|--------|--------|--------|--------|
| A | \$333 | \$314 | \$340 | \$357 | \$378 | \$395 |
| F | | \$261 | \$283 | \$300 | \$324 | \$350 |
| G | | \$191 | \$206 | \$220 | \$235 | \$245 |
| L | | \$113 | \$124 | \$132 | \$143 | \$154 |
| N | | \$124* | \$149* | \$169* | \$184* | \$198* |

*Plan N premiums are Attained Age.

Male Tobacco**

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|-------|--------|--------|--------|--------|--------|
| A | \$421 | \$398 | \$430 | \$451 | \$479 | \$500 |
| F | | \$330 | \$358 | \$379 | \$410 | \$443 |
| G | | \$241 | \$261 | \$278 | \$297 | \$310 |
| L | | \$143 | \$156 | \$167 | \$181 | \$195 |
| N | | \$157* | \$188* | \$213* | \$233* | \$250* |

Female Tobacco**

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|-------|--------|--------|--------|--------|--------|
| A | \$383 | \$362 | \$391 | \$410 | \$435 | \$454 |
| F | | \$300 | \$325 | \$345 | \$373 | \$402 |
| G | | \$219 | \$237 | \$253 | \$270 | \$282 |
| L | | \$130 | \$142 | \$152 | \$164 | \$177 |
| N | | \$143* | \$171* | \$194* | \$212* | \$227* |

*Plan N premiums are Attained Age.

**Premiums listed above for Male Tobacco and Female Tobacco cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Federal Life Insurance Company
3750 W. Deerfield Road
Riverwoods, IL 60015
1-888-747-3760
www.federallife.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$258 | \$171 | \$189 | \$226 | \$261 | \$291 |
| F | | \$198 | \$211 | \$257 | \$297 | \$331 |
| G | | \$166 | \$183 | \$219 | \$252 | \$281 |
| N | | \$119 | \$130 | \$157 | \$181 | \$202 |

Female Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$258 | \$153 | \$169 | \$202 | \$233 | \$259 |
| F | | \$177 | \$189 | \$230 | \$265 | \$295 |
| G | | \$148 | \$163 | \$195 | \$225 | \$251 |
| N | | \$107 | \$116 | \$140 | \$162 | \$180 |

A discount of 7% will be applied if for the past twelve months the certificate holder has resided with at least one, but no more than three, other adults aged 60 or older, or if the certificate holder lives with another adult who is his or her legal spouse or civil union partner.

Male Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$297 | \$197 | \$217 | \$260 | \$300 | \$334 |
| F | | \$228 | \$243 | \$296 | \$341 | \$380 |
| G | | \$190 | \$210 | \$251 | \$290 | \$323 |
| N | | \$137 | \$150 | \$180 | \$208 | \$232 |

Female Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$297 | \$176 | \$194 | \$232 | \$268 | \$298 |
| F | | \$203 | \$217 | \$264 | \$305 | \$339 |
| G | | \$170 | \$188 | \$224 | \$259 | \$288 |
| N | | \$123 | \$134 | \$161 | \$186 | \$207 |

***Premiums listed above for Male Tobacco and Female Tobacco cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A discount of 7% will be applied if for the past twelve months the certificate holder has resided with at least one, but no more than three, other adults aged 60 or older, or if the certificate holder lives with another adult who is his or her legal spouse or civil union partner.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

FirstCare, Inc. (d.b.a. CareFirst MedPlus)
 10455 Mill Run Circle
 Owings Mills, MD 21117-5559
 1-800-275-3802
 410-356-8123 (Local)
www.carefirst.com

Individual Market-Attained Age
 Marketing Method: Direct Response

Male Level 1 without Household Discount Baltimore Metro, D.C. Metro & Western MD*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$948 | \$837 | \$1,058 | \$1,284 | \$1,522 | \$1,722 |
| B | | \$220 | \$ 279 | \$ 338 | \$ 401 | \$ 453 |
| F | | \$247 | \$ 313 | \$ 379 | \$ 449 | \$ 509 |
| High F | | \$ 56 | \$ 71 | \$ 87 | \$ 103 | \$ 116 |
| G | | \$202 | \$ 255 | \$ 310 | \$ 367 | \$ 415 |
| High G | | \$ 56 | \$ 70 | \$ 85 | \$ 101 | \$ 114 |
| L | | \$159 | \$ 201 | \$ 244 | \$ 290 | \$ 328 |
| M | | \$242 | \$ 306 | \$ 371 | \$ 439 | \$ 497 |
| N | | \$177 | \$ 224 | \$ 271 | \$ 322 | \$ 364 |

Female Level 1 without Household Discount Baltimore Metro, D.C. Metro & Western MD*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$917 | \$786 | \$994 | \$1,205 | \$1,418 | \$1,545 |
| B | | \$207 | \$262 | \$ 317 | \$ 373 | \$ 407 |
| F | | \$232 | \$293 | \$ 356 | \$ 419 | \$ 456 |
| High F | | \$ 53 | \$ 67 | \$ 81 | \$ 96 | \$ 104 |
| G | | \$190 | \$240 | \$ 291 | \$ 342 | \$ 373 |
| High G | | \$ 52 | \$ 66 | \$ 80 | \$ 94 | \$ 103 |
| L | | \$150 | \$189 | \$ 229 | \$ 270 | \$ 294 |
| M | | \$227 | \$287 | \$ 348 | \$ 409 | \$ 446 |
| N | | \$166 | \$210 | \$ 255 | \$ 300 | \$ 326 |

*Level 1 rates apply if application is made during the 6-month open enrollment period, or during the guaranteed issue period.

A 10% Household Discount is available if the policyholder resides with another person who is eligible and has enrolled in a MedPlus Medicare Supplement plan with CareFirst.

Male Level 1 without Household Discount Eastern & Southern MD*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$920 | \$812 | \$1,027 | \$1,246 | \$1,476 | \$1,670 |
| B | | \$214 | \$ 270 | \$ 328 | \$ 389 | \$ 440 |
| F | | \$240 | \$ 303 | \$ 368 | \$ 436 | \$ 493 |
| High F | | \$ 55 | \$ 69 | \$ 84 | \$ 100 | \$ 113 |
| G | | \$196 | \$ 248 | \$ 300 | \$ 356 | \$ 403 |
| High G | | \$ 54 | \$ 68 | \$ 83 | \$ 98 | \$ 111 |
| L | | \$155 | \$ 195 | \$ 237 | \$ 281 | \$ 318 |
| M | | \$234 | \$ 296 | \$ 360 | \$ 426 | \$ 482 |
| N | | \$172 | \$ 217 | \$ 263 | \$ 312 | \$ 353 |

Female Level 1 without Household Discount Eastern & Southern MD*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$889 | \$762 | \$964 | \$1,169 | \$1,376 | \$1,499 |
| B | | \$201 | \$254 | \$ 308 | \$ 362 | \$ 395 |
| F | | \$225 | \$285 | \$ 345 | \$ 406 | \$ 443 |
| High F | | \$ 51 | \$ 65 | \$ 79 | \$ 93 | \$ 101 |
| G | | \$184 | \$232 | \$ 282 | \$ 332 | \$ 361 |
| High G | | \$ 51 | \$ 64 | \$ 78 | \$ 91 | \$ 99 |
| L | | \$145 | \$183 | \$ 222 | \$ 262 | \$ 285 |
| M | | \$220 | \$278 | \$ 338 | \$ 397 | \$ 433 |
| N | | \$161 | \$204 | \$ 247 | \$ 291 | \$ 317 |

*Level 1 rates apply if application is made during the 6-month open enrollment period, or during the guaranteed issue period.

A 10% Household Discount is available if the policyholder resides with another person who is eligible and has enrolled in a MedPlus Medicare Supplement plan with CareFirst.

Male Level 2 Non-Smoker without Household Discount Baltimore Metro, D.C. Metro & Western MD*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$1,043 | \$1,046 | \$1,228 | \$1,412 | \$1,674 | \$1,894 |
| B | | \$ 276 | \$ 323 | \$ 372 | \$ 441 | \$ 499 |
| F | | \$ 309 | \$ 363 | \$ 417 | \$ 494 | \$ 559 |
| High F | | \$ 71 | \$ 83 | \$ 95 | \$ 113 | \$ 128 |
| G | | \$ 252 | \$ 296 | \$ 341 | \$ 404 | \$ 457 |
| High G | | \$ 69 | \$ 81 | \$ 94 | \$ 111 | \$ 126 |
| L | | \$ 199 | \$ 234 | \$ 269 | \$ 319 | \$ 360 |
| M | | \$ 302 | \$ 354 | \$ 408 | \$ 483 | \$ 547 |
| N | | \$ 221 | \$ 259 | \$ 298 | \$ 354 | \$ 400 |

Female Level 2 Non-Smoker without Household Discount Baltimore Metro, D.C. Metro & Western MD*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$1,008 | \$982 | \$1,152 | \$1,326 | \$1,560 | \$1,699 |
| B | | \$259 | \$ 303 | \$ 349 | \$ 411 | \$ 447 |
| F | | \$290 | \$ 340 | \$ 392 | \$ 461 | \$ 502 |
| High F | | \$ 66 | \$ 78 | \$ 89 | \$ 105 | \$ 115 |
| G | | \$237 | \$ 278 | \$ 320 | \$ 376 | \$ 410 |
| High G | | \$ 65 | \$ 76 | \$ 88 | \$ 104 | \$ 113 |
| L | | \$187 | \$ 219 | \$ 252 | \$ 297 | \$ 323 |
| M | | \$284 | \$ 333 | \$ 383 | \$ 450 | \$ 491 |
| N | | \$208 | \$ 244 | \$ 280 | \$ 330 | \$ 359 |

*Premiums listed above for Male Level 2 Non-Smoker and Female Level 2 Non-Smoker cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday. Premiums are for individuals who are required to go through medical underwriting for coverage.

A 10% Household Discount is available if the policyholder resides with another person who is eligible and has enrolled in a MedPlus Medicare Supplement plan with CareFirst.

Male Level 2 Smoker without Household Discount Baltimore Metro, D.C. Metro & Western MD*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$1,303 | \$1,308 | \$1,534 | \$1,765 | \$2,092 | \$2,367 |
| B | | \$ 344 | \$ 404 | \$ 465 | \$ 551 | \$ 623 |
| F | | \$ 386 | \$ 453 | \$ 521 | \$ 618 | \$ 699 |
| High F | | \$ 88 | \$ 104 | \$ 119 | \$ 141 | \$ 160 |
| G | | \$ 315 | \$ 370 | \$ 426 | \$ 504 | \$ 571 |
| High G | | \$ 87 | \$ 102 | \$ 117 | \$ 139 | \$ 157 |
| L | | \$ 249 | \$ 292 | \$ 336 | \$ 398 | \$ 450 |
| M | | \$ 378 | \$ 443 | \$ 510 | \$ 604 | \$ 683 |
| N | | \$ 276 | \$ 324 | \$ 373 | \$ 442 | \$ 500 |

Female Level 2 Smoker without Household Discount Baltimore Metro, D.C. Metro & Western MD*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$1,260 | \$1,228 | \$1,440 | \$1,657 | \$1,949 | \$2,124 |
| B | | \$ 323 | \$ 379 | \$ 436 | \$ 513 | \$ 559 |
| F | | \$ 363 | \$ 425 | \$ 489 | \$ 576 | \$ 627 |
| High F | | \$ 83 | \$ 97 | \$ 112 | \$ 132 | \$ 143 |
| G | | \$ 296 | \$ 347 | \$ 400 | \$ 470 | \$ 512 |
| High G | | \$ 81 | \$ 96 | \$ 110 | \$ 129 | \$ 141 |
| L | | \$ 234 | \$ 274 | \$ 315 | \$ 371 | \$ 404 |
| M | | \$ 354 | \$ 416 | \$ 478 | \$ 563 | \$ 613 |
| N | | \$ 259 | \$ 304 | \$ 350 | \$ 412 | \$ 449 |

*Premiums listed above for Male Level 2 Smoker and Female Level 2 Smoker cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday. Premiums are for individuals who are required to go through medical underwriting for coverage.

A 10% Household Discount is available if the policyholder resides with another person who is eligible and has enrolled in a MedPlus Medicare Supplement plan with CareFirst.

Male Level 2 Non-Smoker without Household Discount Eastern & Southern MD*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$1,012 | \$1,015 | \$1,191 | \$1,370 | \$1,624 | \$1,837 |
| B | | \$ 267 | \$ 314 | \$ 361 | \$ 428 | \$ 484 |
| F | | \$ 300 | \$ 352 | \$ 405 | \$ 480 | \$ 543 |
| High F | | \$ 69 | \$ 80 | \$ 92 | \$ 110 | \$ 124 |
| G | | \$ 245 | \$ 287 | \$ 330 | \$ 392 | \$ 443 |
| High G | | \$ 67 | \$ 79 | \$ 91 | \$ 108 | \$ 122 |
| L | | \$ 193 | \$ 227 | \$ 261 | \$ 309 | \$ 350 |
| M | | \$ 293 | \$ 344 | \$ 396 | \$ 469 | \$ 531 |
| N | | \$ 215 | \$ 252 | \$ 289 | \$ 343 | \$ 388 |

Female Level 2 Non-Smoker without Household Discount Eastern & Southern MD*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$978 | \$953 | \$1,118 | \$1,286 | \$1,513 | \$1,649 |
| B | | \$251 | \$ 294 | \$ 339 | \$ 398 | \$ 434 |
| F | | \$281 | \$ 330 | \$ 380 | \$ 447 | \$ 487 |
| High F | | \$ 64 | \$ 75 | \$ 87 | \$ 102 | \$ 111 |
| G | | \$230 | \$ 270 | \$ 310 | \$ 365 | \$ 398 |
| High G | | \$ 63 | \$ 74 | \$ 85 | \$ 100 | \$ 109 |
| L | | \$181 | \$ 213 | \$ 245 | \$ 288 | \$ 314 |
| M | | \$275 | \$ 323 | \$ 371 | \$ 437 | \$ 476 |
| N | | \$201 | \$ 236 | \$ 272 | \$ 320 | \$ 348 |

*Premiums listed above for Male Level 2 Non-Smoker and Female Level 2 Non-Smoker cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday. Premiums are for individuals who are required to go through medical underwriting for coverage.

A 10% Household Discount is available if the policyholder resides with another person who is eligible and has enrolled in a MedPlus Medicare Supplement plan with CareFirst.

Male Level 2 Smoker without Household Discount Eastern & Southern MD*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$1,264 | \$1,269 | \$1,488 | \$1,712 | \$2,030 | \$2,296 |
| B | | \$ 334 | \$ 392 | \$ 451 | \$ 534 | \$ 605 |
| F | | \$ 375 | \$ 440 | \$ 506 | \$ 599 | \$ 678 |
| High F | | \$ 86 | \$ 100 | \$ 116 | \$ 137 | \$ 155 |
| G | | \$ 306 | \$ 359 | \$ 413 | \$ 489 | \$ 554 |
| High G | | \$ 84 | \$ 99 | \$ 114 | \$ 135 | \$ 152 |
| L | | \$ 241 | \$ 283 | \$ 326 | \$ 386 | \$ 437 |
| M | | \$ 366 | \$ 430 | \$ 494 | \$ 586 | \$ 663 |
| N | | \$ 268 | \$ 314 | \$ 362 | \$ 429 | \$ 485 |

Female Level 2 Smoker without Household Discount Eastern & Southern MD*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$1,222 | \$1,191 | \$1,397 | \$1,607 | \$1,891 | \$2,060 |
| B | | \$ 314 | \$ 368 | \$ 423 | \$ 498 | \$ 542 |
| F | | \$ 352 | \$ 413 | \$ 475 | \$ 559 | \$ 608 |
| High F | | \$ 80 | \$ 94 | \$ 108 | \$ 128 | \$ 139 |
| G | | \$ 287 | \$ 337 | \$ 388 | \$ 456 | \$ 497 |
| High G | | \$ 79 | \$ 93 | \$ 107 | \$ 126 | \$ 137 |
| L | | \$ 227 | \$ 266 | \$ 306 | \$ 360 | \$ 392 |
| M | | \$ 344 | \$ 403 | \$ 464 | \$ 546 | \$ 595 |
| N | | \$ 252 | \$ 295 | \$ 340 | \$ 400 | \$ 435 |

*Premiums listed above for Male Level 2 Smoker and Female Level 2 Smoker cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday. Premiums are for individuals who are required to go through medical underwriting for coverage.

A 10% Household Discount is available if the policyholder resides with another person who is eligible and has enrolled in a MedPlus Medicare Supplement plan with CareFirst.

Male Level 3 Non-Smoker without Household Discount Baltimore Metro, D.C. Metro & Western MD*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$1,517 | \$1,674 | \$1,905 | \$2,054 | \$2,435 | \$2,755 |
| B | | \$ 441 | \$ 502 | \$ 541 | \$ 641 | \$ 725 |
| F | | \$ 495 | \$ 563 | \$ 607 | \$ 719 | \$ 814 |
| High F | | \$ 113 | \$ 129 | \$ 139 | \$ 164 | \$ 186 |
| G | | \$ 404 | \$ 459 | \$ 495 | \$ 587 | \$ 664 |
| High G | | \$ 111 | \$ 126 | \$ 136 | \$ 162 | \$ 183 |
| L | | \$ 319 | \$ 362 | \$ 391 | \$ 463 | \$ 524 |
| M | | \$ 483 | \$ 550 | \$ 593 | \$ 703 | \$ 795 |
| N | | \$ 354 | \$ 402 | \$ 434 | \$ 514 | \$ 582 |

Female Level 3 Non-Smoker without Household Discount Baltimore Metro, D.C. Metro & Western MD*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$1,466 | \$1,572 | \$1,788 | \$1,928 | \$2,269 | \$2,472 |
| B | | \$ 414 | \$ 471 | \$ 508 | \$ 597 | \$ 651 |
| F | | \$ 464 | \$ 528 | \$ 570 | \$ 670 | \$ 730 |
| High F | | \$ 106 | \$ 121 | \$ 130 | \$ 153 | \$ 167 |
| G | | \$ 379 | \$ 431 | \$ 465 | \$ 547 | \$ 596 |
| High G | | \$ 104 | \$ 119 | \$ 128 | \$ 151 | \$ 164 |
| L | | \$ 299 | \$ 340 | \$ 367 | \$ 432 | \$ 470 |
| M | | \$ 454 | \$ 516 | \$ 557 | \$ 655 | \$ 714 |
| N | | \$ 332 | \$ 378 | \$ 407 | \$ 479 | \$ 522 |

***Premiums listed above for Male Level 3 Non-Smoker and Female Level 3 Non-Smoker cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday. Premiums are for individuals who are required to go through medical underwriting for coverage.**

A 10% Household Discount is available if the policyholder resides with another person who is eligible and has enrolled in a MedPlus Medicare Supplement plan with CareFirst.

Male Level 3 Smoker without Household Discount Baltimore Metro, D.C. Metro & Western MD*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------|---------|---------|---------|---------|---------|
| A | \$1,896 | \$2,092 | \$2,381 | \$2,567 | \$3,043 | \$3,443 |
| B | | \$ 551 | \$ 627 | \$ 676 | \$ 801 | \$ 906 |
| F | | \$ 618 | \$ 703 | \$ 758 | \$ 899 | \$1,017 |
| High F | | \$ 141 | \$ 161 | \$ 173 | \$ 205 | \$ 232 |
| G | | \$ 505 | \$ 574 | \$ 619 | \$ 734 | \$ 830 |
| High G | | \$ 139 | \$ 158 | \$ 170 | \$ 202 | \$ 229 |
| L | | \$ 398 | \$ 453 | \$ 488 | \$ 579 | \$ 655 |
| M | | \$ 604 | \$ 687 | \$ 741 | \$ 879 | \$ 994 |
| N | | \$ 442 | \$ 503 | \$ 542 | \$ 643 | \$ 727 |

Female Level 3 Smoker without Household Discount Baltimore Metro, D.C. Metro & Western MD*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------|---------|---------|---------|---------|---------|
| A | \$1,833 | \$1,964 | \$2,235 | \$2,410 | \$2,835 | \$3,089 |
| B | | \$ 517 | \$ 588 | \$ 634 | \$ 746 | \$ 813 |
| F | | \$ 580 | \$ 660 | \$ 712 | \$ 837 | \$ 912 |
| High F | | \$ 133 | \$ 151 | \$ 163 | \$ 191 | \$ 208 |
| G | | \$ 474 | \$ 539 | \$ 581 | \$ 684 | \$ 745 |
| High G | | \$ 130 | \$ 148 | \$ 160 | \$ 188 | \$ 205 |
| L | | \$ 374 | \$ 425 | \$ 459 | \$ 539 | \$ 588 |
| M | | \$ 567 | \$ 645 | \$ 696 | \$ 819 | \$ 892 |
| N | | \$ 415 | \$ 472 | \$ 509 | \$ 599 | \$ 653 |

*Premiums listed above for Male Level 3 Smoker and Female Level 3 Smoker cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday. Premiums are for individuals who are required to go through medical underwriting for coverage.

A 10% Household Discount is available if the policyholder resides with another person who is eligible and has enrolled in a MedPlus Medicare Supplement plan with CareFirst.

Male Level 3 Non-Smoker without Household Discount Eastern & Southern MD

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$1,472 | \$1,624 | \$1,848 | \$1,993 | \$2,362 | \$2,673 |
| B | | \$ 428 | \$ 487 | \$ 525 | \$ 622 | \$ 704 |
| F | | \$ 480 | \$ 546 | \$ 589 | \$ 698 | \$ 789 |
| High F | | \$ 110 | \$ 125 | \$ 134 | \$ 159 | \$ 180 |
| G | | \$ 392 | \$ 446 | \$ 481 | \$ 570 | \$ 644 |
| High G | | \$ 108 | \$ 123 | \$ 132 | \$ 157 | \$ 177 |
| L | | \$ 309 | \$ 352 | \$ 379 | \$ 449 | \$ 509 |
| M | | \$ 469 | \$ 534 | \$ 575 | \$ 682 | \$ 772 |
| N | | \$ 343 | \$ 390 | \$ 421 | \$ 499 | \$ 565 |

Female Level 3 Non-Smoker without Household Discount Eastern & Southern MD

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$1,423 | \$1,525 | \$1,735 | \$1,871 | \$2,201 | \$2,398 |
| B | | \$ 401 | \$ 457 | \$ 493 | \$ 579 | \$ 631 |
| F | | \$ 450 | \$ 512 | \$ 553 | \$ 650 | \$ 708 |
| High F | | \$ 103 | \$ 117 | \$ 126 | \$ 149 | \$ 162 |
| G | | \$ 368 | \$ 418 | \$ 451 | \$ 531 | \$ 578 |
| High G | | \$ 101 | \$ 115 | \$ 124 | \$ 146 | \$ 159 |
| L | | \$ 290 | \$ 330 | \$ 356 | \$ 419 | \$ 456 |
| M | | \$ 440 | \$ 501 | \$ 540 | \$ 636 | \$ 692 |
| N | | \$ 322 | \$ 367 | \$ 395 | \$ 465 | \$ 507 |

***Premiums listed above for Male Level 3 Non-Smoker and Female Level 3 Non-Smoker cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday. Premiums are for individuals who are required to go through medical underwriting for coverage.**

A 10% Household Discount is available if the policyholder resides with another person who is eligible and has enrolled in a MedPlus Medicare Supplement plan with CareFirst.

Male Level 3 Smoker without Household Discount Eastern & Southern MD

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$1,839 | \$2,030 | \$2,309 | \$2,490 | \$2,952 | \$3,340 |
| B | | \$ 534 | \$ 608 | \$ 656 | \$ 777 | \$ 879 |
| F | | \$ 600 | \$ 682 | \$ 736 | \$ 872 | \$ 987 |
| High F | | \$ 137 | \$ 156 | \$ 168 | \$ 199 | \$ 225 |
| G | | \$ 490 | \$ 557 | \$ 601 | \$ 712 | \$ 805 |
| High G | | \$ 135 | \$ 153 | \$ 165 | \$ 196 | \$ 222 |
| L | | \$ 386 | \$ 439 | \$ 474 | \$ 562 | \$ 635 |
| M | | \$ 586 | \$ 667 | \$ 719 | \$ 852 | \$ 964 |
| N | | \$ 429 | \$ 488 | \$ 526 | \$ 624 | \$ 706 |

Female Level 3 Smoker without Household Discount Eastern & Southern MD

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$1,778 | \$1,906 | \$2,168 | \$2,338 | \$2,751 | \$2,997 |
| B | | \$ 502 | \$ 571 | \$ 616 | \$ 724 | \$ 789 |
| F | | \$ 563 | \$ 640 | \$ 691 | \$ 812 | \$ 885 |
| High F | | \$ 129 | \$ 146 | \$ 158 | \$ 186 | \$ 202 |
| G | | \$ 460 | \$ 523 | \$ 564 | \$ 663 | \$ 723 |
| High G | | \$ 126 | \$ 144 | \$ 155 | \$ 183 | \$ 199 |
| L | | \$ 363 | \$ 413 | \$ 445 | \$ 523 | \$ 570 |
| M | | \$ 550 | \$ 626 | \$ 675 | \$ 794 | \$ 865 |
| N | | \$ 403 | \$ 458 | \$ 494 | \$ 581 | \$ 633 |

***Premiums listed above for Male Level 3 Smoker and Female Level 3 Smoker cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday. Premiums are for individuals who are required to go through medical underwriting for coverage.**

A 10% Household Discount is available if the policyholder resides with another person who is eligible and has enrolled in a MedPlus Medicare Supplement plan with CareFirst.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

First Health Life and Health Insurance Company
 MEDICARE SUPPLEMENT ADMINISTRATIVE OFFICE
 3200 Highland Avenue
 Downers Grove, IL 60515
 1-866-465-1023
www.aetnaseniorproducts.com

Individual Market-Attained Age
 Marketing Method: Direct Response

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$198 | \$160 | \$183 | \$204 | \$216 | \$224 |
| B | | \$180 | \$210 | \$239 | \$263 | \$283 |
| F | | \$211 | \$247 | \$284 | \$316 | \$345 |
| G | | \$193 | \$227 | \$261 | \$292 | \$322 |
| N | | \$113 | \$134 | \$155 | \$175 | \$194 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$182 | \$147 | \$168 | \$187 | \$198 | \$206 |
| B | | \$165 | \$192 | \$219 | \$241 | \$259 |
| F | | \$194 | \$227 | \$261 | \$290 | \$317 |
| G | | \$178 | \$209 | \$241 | \$270 | \$297 |
| N | | \$105 | \$124 | \$143 | \$162 | \$180 |

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$218 | \$176 | \$202 | \$224 | \$238 | \$247 |
| B | | \$198 | \$231 | \$263 | \$289 | \$311 |
| F | | \$232 | \$272 | \$312 | \$347 | \$379 |
| G | | \$212 | \$249 | \$287 | \$321 | \$354 |
| N | | \$124 | \$147 | \$170 | \$192 | \$213 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$200 | \$162 | \$185 | \$205 | \$218 | \$226 |
| B | | \$181 | \$211 | \$241 | \$265 | \$285 |
| F | | \$213 | \$250 | \$287 | \$319 | \$349 |
| G | | \$196 | \$230 | \$265 | \$297 | \$327 |
| N | | \$115 | \$136 | \$158 | \$178 | \$198 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Globe Life and Accident Insurance Company
3700 S. Stonebridge Drive
P.O. Box 8080
McKinney, TX 75070
1-800-801-6831
www.globecaremedsupp.com

Individual Market-Attained Age
Marketing Method: Direct Response

Unisex

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$238* | \$169 | \$226 | \$241 | \$243 | \$243 |
| B | | \$202 | \$255 | \$290 | \$294 | \$294 |
| F | | \$235 | \$289 | \$340 | \$360 | \$360 |
| High F | | \$ 34 | \$ 47 | \$ 56 | \$ 67 | \$ 67 |
| G | | \$204 | \$255 | \$303 | \$322 | \$322 |
| High G | | \$ 34 | \$ 47 | \$ 56 | \$ 67 | \$ 67 |
| N | | \$151 | \$189 | \$229 | \$249 | \$249 |

* Plan A for Individuals with a Disability is offered only during Open Enrollment/Guaranteed Issue periods.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

GPM Health and Life Insurance Company
P.O. Box 2679
Omaha, NE 68103
1-866-242-7573
www.gpmhealthandlife.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|-------|-------|-------|-------|-------|-------|
| A | \$385 | \$274 | \$303 | \$362 | \$418 | \$466 |
| F | | \$328 | \$362 | \$434 | \$500 | \$557 |
| G | | \$274 | \$303 | \$362 | \$418 | \$465 |
| N | | \$207 | \$229 | \$274 | \$316 | \$352 |

Female Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|-------|-------|-------|-------|-------|-------|
| A | \$385 | \$238 | \$263 | \$315 | \$364 | \$405 |
| F | | \$285 | \$315 | \$377 | \$435 | \$485 |
| G | | \$239 | \$263 | \$315 | \$363 | \$405 |
| N | | \$180 | \$199 | \$238 | \$275 | \$306 |

A 7% Household Discount will be applied if for the past twelve months the policy holder has resided with at least one, but no more than three, other adults aged 60 or older, or if the policyholder lives with another adult who is his or her legal spouse or civil union partner.

Male Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$442 | \$315 | \$348 | \$417 | \$481 | \$535 |
| F | | \$377 | \$416 | \$498 | \$575 | \$640 |
| G | | \$315 | \$348 | \$416 | \$480 | \$535 |
| N | | \$238 | \$263 | \$315 | \$363 | \$404 |

Female Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$442 | \$274 | \$303 | \$362 | \$418 | \$466 |
| F | | \$328 | \$362 | \$433 | \$500 | \$557 |
| G | | \$274 | \$303 | \$362 | \$418 | \$465 |
| N | | \$207 | \$229 | \$274 | \$316 | \$351 |

***Premiums listed above for Male Tobacco and Female Tobacco cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 7% Household Discount will be applied if for the past twelve months the policy holder has resided with at least one, but no more than three, other adults aged 60 or older, or if the policyholder lives with another adult who is his or her legal spouse or civil union partner.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Guarantee Trust Life Insurance Company
1275 Milwaukee Avenue
Glenview, IL 60025
1-800-338-7452
1-847-699-0600
www.gtlic.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$261 | \$227 | \$242 | \$274 | \$318 | \$344 |
| F | | \$294 | \$312 | \$371 | \$464 | \$522 |
| High F | | \$ 66 | \$ 70 | \$ 83 | \$104 | \$117 |
| G | | \$227 | \$242 | \$287 | \$359 | \$405 |
| N | | \$190 | \$202 | \$240 | \$301 | \$338 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$232 | \$203 | \$215 | \$243 | \$280 | \$304 |
| F | | \$262 | \$279 | \$331 | \$414 | \$466 |
| High F | | \$ 59 | \$ 63 | \$ 74 | \$ 93 | \$105 |
| G | | \$203 | \$216 | \$257 | \$321 | \$361 |
| N | | \$170 | \$181 | \$215 | \$268 | \$302 |

A household discount of 7% is available if two or more policyholders with an inforce Medicare Supplement policy from the Company are currently residing together.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$326 | \$284 | \$302 | \$343 | \$398 | \$430 |
| F | | \$367 | \$390 | \$464 | \$580 | \$653 |
| High F | | \$ 83 | \$ 88 | \$104 | \$130 | \$147 |
| G | | \$284 | \$302 | \$359 | \$449 | \$506 |
| N | | \$238 | \$253 | \$300 | \$376 | \$423 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$289 | \$254 | \$269 | \$303 | \$351 | \$379 |
| F | | \$328 | \$348 | \$414 | \$518 | \$583 |
| High F | | \$ 74 | \$ 78 | \$ 93 | \$116 | \$131 |
| G | | \$254 | \$270 | \$321 | \$401 | \$452 |
| N | | \$212 | \$226 | \$268 | \$336 | \$378 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A household discount of 7% is available if two or more policyholders with an inforce Medicare Supplement policy from the Company are currently residing together.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Heartland National Life Insurance Company
P.O. Box 2878
Salt Lake City, UT 84110-2878
1-866-916-7971
www.heartlandnational.net

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$ 217 | \$183 | \$183 | \$222 | \$255 | \$286 |
| C | \$1,137 | \$236 | \$236 | \$282 | \$331 | \$381 |
| G | | \$184 | \$184 | \$224 | \$268 | \$315 |
| N | | \$148 | \$155 | \$189 | \$224 | \$263 |

Female Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$189 | \$160 | \$160 | \$193 | \$222 | \$248 |
| C | \$989 | \$205 | \$205 | \$246 | \$287 | \$331 |
| G | | \$160 | \$160 | \$195 | \$233 | \$274 |
| N | | \$129 | \$135 | \$164 | \$195 | \$229 |

A 7% Household Discount is available to those that qualify.

Male Tobacco*

| | <i><65</i> | <i>65</i> | <i>70</i> | <i>75</i> | <i>80</i> | <i>85</i> |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$ 250 | \$211 | \$211 | \$255 | \$293 | \$328 |
| C | \$1,308 | \$271 | \$271 | \$325 | \$380 | \$438 |
| G | | \$212 | \$212 | \$258 | \$308 | \$363 |
| N | | \$171 | \$178 | \$217 | \$258 | \$303 |

Female Tobacco*

| | <i><65</i> | <i>65</i> | <i>70</i> | <i>75</i> | <i>80</i> | <i>85</i> |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$ 217 | \$183 | \$183 | \$222 | \$255 | \$286 |
| C | \$1,137 | \$236 | \$236 | \$282 | \$331 | \$381 |
| G | | \$184 | \$184 | \$224 | \$268 | \$315 |
| N | | \$148 | \$155 | \$189 | \$224 | \$263 |

***Premiums listed above for Male Tobacco and Female Tobacco cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 7% Household Discount is available to those that qualify.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Humana Benefit Plan of Illinois, Inc.
500 West Main Street
Louisville, KY 40202
1-800-984-9095
www.Humana-Medicare.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$366 | \$335 | \$356 | \$420 | \$511 | \$599 |
| F | | \$187 | \$198 | \$234 | \$285 | \$333 |
| G | | \$160 | \$169 | \$200 | \$243 | \$285 |
| High G | | \$ 58 | \$ 61 | \$ 72 | \$ 88 | \$103 |
| N | | \$115 | \$130 | \$160 | \$192 | \$223 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$324 | \$297 | \$315 | \$372 | \$453 | \$530 |
| F | | \$165 | \$175 | \$207 | \$252 | \$295 |
| G | | \$141 | \$150 | \$177 | \$215 | \$252 |
| High G | | \$ 51 | \$ 54 | \$ 64 | \$ 78 | \$ 91 |
| N | | \$102 | \$115 | \$141 | \$170 | \$197 |

A 12% household discount is available for applicants who qualify.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$421 | \$385 | \$409 | \$483 | \$588 | \$688 |
| F | | \$215 | \$228 | \$269 | \$327 | \$383 |
| G | | \$184 | \$195 | \$230 | \$280 | \$328 |
| High G | | \$ 66 | \$ 71 | \$ 83 | \$101 | \$119 |
| N | | \$133 | \$149 | \$183 | \$221 | \$256 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$373 | \$341 | \$362 | \$428 | \$520 | \$609 |
| F | | \$190 | \$201 | \$238 | \$290 | \$339 |
| G | | \$162 | \$172 | \$204 | \$248 | \$290 |
| High G | | \$ 59 | \$ 62 | \$ 74 | \$ 90 | \$105 |
| N | | \$117 | \$132 | \$162 | \$196 | \$227 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 12% household discount is available for applicants who qualify.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

LifeShield National Insurance Company
5500 N. Western Avenue
Suite 200
Oklahoma City, OK 73118
1-833-989-0033
www.lifeshieldnational.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$214 | \$204 | \$204 | \$228 | \$265 | \$288 |
| F | | \$188 | \$196 | \$235 | \$285 | \$350 |
| G | | \$153 | \$159 | \$195 | \$240 | \$298 |
| N | | \$114 | \$126 | \$158 | \$192 | \$231 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$186 | \$177 | \$177 | \$198 | \$231 | \$250 |
| F | | \$163 | \$170 | \$204 | \$248 | \$305 |
| G | | \$133 | \$138 | \$170 | \$209 | \$259 |
| N | | \$100 | \$109 | \$137 | \$167 | \$201 |

A 7% household discount is available for those who qualify.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$246 | \$234 | \$234 | \$262 | \$305 | \$331 |
| F | | \$216 | \$225 | \$270 | \$328 | \$403 |
| G | | \$176 | \$182 | \$224 | \$276 | \$343 |
| N | | \$132 | \$144 | \$181 | \$221 | \$266 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$214 | \$204 | \$204 | \$228 | \$265 | \$288 |
| F | | \$188 | \$196 | \$235 | \$285 | \$350 |
| G | | \$153 | \$159 | \$195 | \$240 | \$298 |
| N | | \$114 | \$126 | \$158 | \$192 | \$231 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 7% household discount is available for those who qualify.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Monitor Life Insurance Company of New York
305 Madison Avenue
Morristown, NJ 07962
1-866-322-2824

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$218 | \$164 | \$164 | \$198 | \$248 | \$298 |
| F | | \$201 | \$201 | \$238 | \$294 | \$360 |
| G | | \$165 | \$165 | \$199 | \$250 | \$310 |
| High G | | \$ 60 | \$ 60 | \$ 72 | \$ 89 | \$109 |
| N | | \$127 | \$127 | \$157 | \$187 | \$219 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$189 | \$142 | \$142 | \$172 | \$216 | \$259 |
| F | | \$174 | \$174 | \$207 | \$256 | \$313 |
| G | | \$143 | \$143 | \$173 | \$217 | \$269 |
| High G | | \$ 52 | \$ 52 | \$ 63 | \$ 78 | \$ 95 |
| N | | \$110 | \$110 | \$137 | \$163 | \$190 |

A 7% household discount is available for applicants who qualify.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$250 | \$188 | \$188 | \$227 | \$286 | \$343 |
| F | | \$231 | \$231 | \$274 | \$338 | \$414 |
| G | | \$189 | \$189 | \$229 | \$287 | \$356 |
| High G | | \$ 69 | \$ 69 | \$ 83 | \$103 | \$125 |
| N | | \$146 | \$146 | \$181 | \$215 | \$252 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$218 | \$164 | \$164 | \$198 | \$248 | \$298 |
| F | | \$201 | \$201 | \$238 | \$294 | \$360 |
| G | | \$165 | \$165 | \$199 | \$250 | \$310 |
| High G | | \$ 60 | \$ 60 | \$ 72 | \$ 89 | \$109 |
| N | | \$127 | \$127 | \$157 | \$187 | \$219 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 7% household discount is available for applicants who qualify.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Mutual of Omaha Insurance Company
 3300 Mutual of Omaha Plaza
 Omaha, NE 68175
 1-800-667-2937
www.mutualofomaha.com/states

Individual Market-Attained Age
 Marketing Method: Insurance Producer Solicited

Male Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$177 | \$177 | \$197 | \$236 | \$285 | \$341 |
| F | | \$199 | \$214 | \$253 | \$306 | \$370 |
| G | | \$173 | \$191 | \$229 | \$278 | \$332 |
| High G | | \$ 50 | \$ 56 | \$ 67 | \$ 81 | \$ 97 |
| N | | \$122 | \$135 | \$161 | \$195 | \$233 |

Female Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$154 | \$154 | \$171 | \$205 | \$248 | \$297 |
| F | | \$173 | \$186 | \$220 | \$266 | \$322 |
| G | | \$150 | \$166 | \$199 | \$241 | \$289 |
| High G | | \$ 44 | \$ 49 | \$ 58 | \$ 71 | \$ 84 |
| N | | \$106 | \$117 | \$140 | \$169 | \$203 |

A 12% household discount is available for applicants who qualify.

Male Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$204 | \$204 | \$226 | \$271 | \$328 | \$392 |
| F | | \$229 | \$246 | \$291 | \$352 | \$426 |
| G | | \$198 | \$220 | \$264 | \$319 | \$382 |
| High G | | \$ 58 | \$ 64 | \$ 77 | \$ 93 | \$112 |
| N | | \$141 | \$155 | \$185 | \$224 | \$268 |

Female Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$177 | \$177 | \$196 | \$236 | \$285 | \$341 |
| F | | \$199 | \$214 | \$253 | \$306 | \$370 |
| G | | \$173 | \$191 | \$229 | \$277 | \$332 |
| High G | | \$ 50 | \$ 56 | \$ 67 | \$ 81 | \$ 97 |
| N | | \$122 | \$135 | \$161 | \$195 | \$233 |

***Premiums listed above for Male Tobacco and Female Tobacco cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 12% household discount is available for applicants who qualify.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Nassau Life Insurance Company of Kansas

1 American Row
Hartford, CT 06102
1-860-403-5000
www.nfg.com

Individual Market-Attained Age

Marketing Method: Insurance Producer Solicited

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$246 | \$183 | \$196 | \$239 | \$278 | \$321 |
| F | | \$194 | \$210 | \$252 | \$297 | \$379 |
| G | | \$163 | \$174 | \$212 | \$252 | \$325 |
| N | | \$124 | \$133 | \$163 | \$195 | \$251 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$214 | \$159 | \$170 | \$208 | \$242 | \$279 |
| F | | \$168 | \$182 | \$219 | \$258 | \$330 |
| G | | \$141 | \$151 | \$185 | \$219 | \$282 |
| N | | \$108 | \$115 | \$141 | \$169 | \$219 |

A 7% Household Discount is available if there are between 2 and 4 adults residing at the same residential address.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$282 | \$210 | \$225 | \$275 | \$320 | \$369 |
| F | | \$223 | \$241 | \$289 | \$341 | \$436 |
| G | | \$187 | \$200 | \$244 | \$290 | \$373 |
| N | | \$143 | \$153 | \$187 | \$224 | \$289 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$246 | \$183 | \$196 | \$239 | \$279 | \$321 |
| F | | \$194 | \$210 | \$252 | \$297 | \$379 |
| G | | \$163 | \$174 | \$212 | \$252 | \$325 |
| N | | \$124 | \$133 | \$163 | \$195 | \$251 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 7% Household Discount is available if there are between 2 and 4 adults residing at the same residential address.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

National Health Insurance Company
P.O. Box 3450
Salt Lake City, UT 84110-3450
1-866-916-8816
www.ngah-ngic.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Preferred II

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$209 | \$171 | \$176 | \$206 | \$250 | \$296 |
| F | | \$224 | \$231 | \$270 | \$328 | \$388 |
| High F | | \$ 67 | \$ 69 | \$ 81 | \$ 98 | \$116 |
| G | | \$185 | \$191 | \$223 | \$271 | \$320 |
| N | | \$134 | \$138 | \$161 | \$196 | \$232 |

Female Preferred II

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$185 | \$151 | \$156 | \$182 | \$222 | \$262 |
| F | | \$198 | \$204 | \$239 | \$290 | \$343 |
| High F | | \$ 60 | \$ 61 | \$ 72 | \$ 87 | \$103 |
| G | | \$164 | \$169 | \$197 | \$240 | \$284 |
| N | | \$119 | \$122 | \$143 | \$174 | \$205 |

A household discount of 7% is available.

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$209 | \$171 | \$199 | \$231 | \$268 | \$309 |
| F | | \$224 | \$261 | \$302 | \$350 | \$404 |
| High F | | \$ 67 | \$ 78 | \$ 91 | \$105 | \$121 |
| G | | \$185 | \$216 | \$250 | \$290 | \$334 |
| N | | \$134 | \$156 | \$181 | \$210 | \$242 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$185 | \$151 | \$176 | \$204 | \$237 | \$273 |
| F | | \$198 | \$231 | \$268 | \$310 | \$358 |
| High F | | \$ 60 | \$ 69 | \$ 80 | \$ 93 | \$107 |
| G | | \$164 | \$191 | \$221 | \$256 | \$296 |
| N | | \$119 | \$138 | \$160 | \$186 | \$214 |

A household discount of 7% is available.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$251 | \$205 | \$239 | \$277 | \$321 | \$370 |
| F | | \$268 | \$313 | \$362 | \$420 | \$484 |
| High F | | \$ 81 | \$ 94 | \$109 | \$126 | \$145 |
| G | | \$222 | \$259 | \$300 | \$347 | \$400 |
| N | | \$161 | \$187 | \$217 | \$252 | \$290 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$222 | \$181 | \$211 | \$245 | \$284 | \$327 |
| F | | \$237 | \$277 | \$321 | \$372 | \$429 |
| High F | | \$ 71 | \$ 83 | \$ 96 | \$112 | \$129 |
| G | | \$196 | \$229 | \$265 | \$307 | \$354 |
| N | | \$142 | \$166 | \$192 | \$223 | \$257 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A household discount of 7% is available.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Physicians Life Insurance Company

2600 Dodge Street

Omaha, NE 68131

1-800-325-6300

www.physiciansmutual.com/web/medsupp

Individual Market-Attained Age/Issue Age

Marketing Method: Insurance Producer Solicited/Direct Response

Issue Age rates are available for all plans

Male Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|--------|--------|--------|--------|--------|--------|
| A* | \$199* | \$199* | \$199* | \$199* | \$199* | \$199* |
| F | | \$216 | \$233 | \$270 | \$294 | \$303 |
| High F | | \$ 68 | \$ 74 | \$ 93 | \$115 | \$144 |
| G | | \$184 | \$198 | \$230 | \$251 | \$257 |
| High G | | \$ 66 | \$ 72 | \$ 89 | \$111 | \$139 |

Female Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|--------|--------|--------|--------|--------|--------|
| A* | \$180* | \$180* | \$180* | \$180* | \$180* | \$180* |
| F | | \$195 | \$211 | \$244 | \$266 | \$274 |
| High F | | \$ 62 | \$ 67 | \$ 84 | \$104 | \$130 |
| G | | \$166 | \$179 | \$208 | \$227 | \$233 |
| High G | | \$ 59 | \$ 65 | \$ 81 | \$101 | \$126 |

***Plan A is Issue Age. Other Plans are Attained Age.**

An applicant who resides in a household either with a spouse, or with another person (but no more than three) that is age 60 or older and has continuously resided with the applicant for the last 12 months, is eligible for a 10% household discount.

All Medicare Supplement plans from Physicians Life Insurance Company except Plan A provide additional innovative benefits for preventive care and hearing loss testing. We also offer a Deductible Discount Rider on Plans F and G that applies the high deductible for only 2-3 years, with a premium discount off of the base plan that applies for the life of the policy.

Male Tobacco**

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A* | \$221* | \$221* | \$221* | \$221* | \$221* | \$221* |
| F | | \$240 | \$259 | \$300 | \$327 | \$336 |
| High F | | \$ 76 | \$ 83 | \$103 | \$128 | \$160 |
| G | | \$204 | \$220 | \$255 | \$278 | \$286 |
| High G | | \$ 73 | \$ 80 | \$ 99 | \$124 | \$154 |

Female Tobacco**

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A* | \$200* | \$200* | \$200* | \$200* | \$200* | \$200* |
| F | | \$217 | \$234 | \$271 | \$296 | \$304 |
| High F | | \$ 68 | \$ 75 | \$ 93 | \$116 | \$145 |
| G | | \$185 | \$199 | \$231 | \$252 | \$259 |
| High G | | \$ 66 | \$ 72 | \$ 90 | \$112 | \$140 |

***Plan A is Issue Age. Other Plans are Attained Age.**

****Premiums listed above for Male Tobacco and Female Tobacco cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

An applicant who resides in a household either with a spouse, or with another person (but no more than three) that is age 60 or older and has continuously resided with the applicant for the last 12 months, is eligible for a 10% household discount.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

SBLI USA Life Insurance Company, Inc.
100 West 33rd Street, Suite 1007
New York, NY 10001
Marketing: 1-877-990-7225
www.prosperitylife.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Preferred Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$240 | \$192 | \$192 | \$206 | \$264 | \$325 |
| F | | \$203 | \$212 | \$244 | \$312 | \$373 |
| G | | \$178 | \$178 | \$207 | \$266 | \$327 |
| N | | \$130 | \$140 | \$164 | \$209 | \$264 |

Female Preferred Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$209 | \$167 | \$167 | \$179 | \$230 | \$283 |
| F | | \$176 | \$184 | \$212 | \$271 | \$325 |
| G | | \$155 | \$155 | \$180 | \$231 | \$284 |
| N | | \$113 | \$122 | \$143 | \$182 | \$230 |

A 7% household discount is available if there are between 2 and 4 adults residing at the same residential address.

Male Standard Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$243 | \$194 | \$194 | \$217 | \$267 | \$328 |
| F | | \$205 | \$214 | \$257 | \$315 | \$377 |
| G | | \$180 | \$180 | \$218 | \$268 | \$330 |
| N | | \$131 | \$141 | \$173 | \$211 | \$267 |

Female Standard Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$211 | \$168 | \$168 | \$189 | \$232 | \$285 |
| F | | \$178 | \$186 | \$224 | \$274 | \$328 |
| G | | \$156 | \$157 | \$189 | \$233 | \$287 |
| N | | \$114 | \$123 | \$150 | \$184 | \$232 |

A 7% household discount is available if there are between 2 and 4 adults residing at the same residential address.

Male Standard Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$267 | \$213 | \$213 | \$238 | \$294 | \$361 |
| F | | \$225 | \$236 | \$283 | \$346 | \$415 |
| G | | \$198 | \$198 | \$240 | \$295 | \$363 |
| N | | \$145 | \$156 | \$190 | \$233 | \$293 |

Female Standard Tobacco *

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$232 | \$185 | \$185 | \$207 | \$255 | \$314 |
| F | | \$196 | \$205 | \$246 | \$301 | \$361 |
| G | | \$172 | \$172 | \$208 | \$257 | \$316 |
| N | | \$126 | \$135 | \$165 | \$202 | \$255 |

***Premiums listed above for Male Standard Tobacco and Female Standard Tobacco cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 7% household discount is available if there are between 2 and 4 adults residing at the same residential address.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

State Farm Mutual Automobile Insurance Company
One State Farm Plaza
Bloomington, IL 61710-0001
Contact local State Farm Agent
www.statefarm.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|-------|-------|-------|-------|-------|-------|
| A | \$254 | \$195 | \$245 | \$284 | \$320 | \$333 |
| C | \$614 | \$275 | \$346 | \$401 | \$450 | \$469 |
| D | \$598 | \$159 | \$211 | \$254 | \$294 | \$329 |
| F | | \$229 | \$288 | \$334 | \$375 | \$391 |
| G | | \$160 | \$211 | \$255 | \$294 | \$330 |
| N | | \$124 | \$162 | \$196 | \$229 | \$260 |

Female Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|-------|-------|-------|-------|-------|-------|
| A | \$254 | \$180 | \$226 | \$263 | \$295 | \$307 |
| C | \$614 | \$253 | \$319 | \$370 | \$415 | \$433 |
| D | \$588 | \$156 | \$191 | \$225 | \$256 | \$284 |
| F | | \$211 | \$266 | \$308 | \$346 | \$361 |
| G | | \$156 | \$192 | \$225 | \$256 | \$284 |
| N | | \$118 | \$145 | \$172 | \$198 | \$224 |

***Plans A and D for individuals with a disability under age 65 with a disability premiums are offered during Open Enrollment/Guaranteed Issue periods only.**

Male Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$254 | \$214 | \$270 | \$313 | \$352 | \$366 |
| C | \$614 | \$302 | \$380 | \$441 | \$495 | \$516 |
| D | \$598 | \$175 | \$232 | \$280 | \$323 | \$362 |
| F | | \$252 | \$317 | \$368 | \$413 | \$430 |
| G | | \$176 | \$232 | \$280 | \$324 | \$363 |
| N | | \$136 | \$178 | \$216 | \$252 | \$286 |

Female Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$254 | \$197 | \$249 | \$289 | \$325 | \$338 |
| C | \$614 | \$279 | \$351 | \$407 | \$457 | \$477 |
| D | \$588 | \$171 | \$210 | \$247 | \$281 | \$312 |
| F | | \$232 | \$293 | \$339 | \$381 | \$397 |
| G | | \$172 | \$211 | \$248 | \$282 | \$312 |
| N | | \$130 | \$159 | \$189 | \$218 | \$247 |

***Premiums listed above for Male Tobacco and Female Tobacco cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Supreme Council of the Royal Arcanum
61 Batterymarch Street
Boston, MA 02110-3208
1-888-272-2686
royalarcanum.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$189 | \$166 | \$166 | \$192 | \$229 | \$253 |
| F | | \$173 | \$181 | \$215 | \$269 | \$295 |
| G | | \$154 | \$158 | \$191 | \$235 | \$259 |
| N | | \$120 | \$125 | \$149 | \$204 | \$232 |

Female Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$165 | \$145 | \$145 | \$167 | \$199 | \$220 |
| F | | \$151 | \$157 | \$187 | \$234 | \$257 |
| G | | \$134 | \$138 | \$166 | \$204 | \$225 |
| N | | \$105 | \$109 | \$130 | \$178 | \$202 |

A 7% Household Discount is available to those that qualify.

Male Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$218 | \$191 | \$191 | \$221 | \$263 | \$290 |
| F | | \$199 | \$208 | \$248 | \$310 | \$339 |
| G | | \$176 | \$182 | \$219 | \$270 | \$298 |
| N | | \$138 | \$143 | \$171 | \$235 | \$267 |

Female Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$189 | \$166 | \$166 | \$192 | \$229 | \$253 |
| F | | \$173 | \$181 | \$215 | \$269 | \$295 |
| G | | \$154 | \$158 | \$191 | \$235 | \$259 |
| N | | \$120 | \$125 | \$149 | \$204 | \$232 |

***Premiums listed above for Male Tobacco and Female Tobacco cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 7% Household Discount is available to those that qualify.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Tier One Insurance Company
1021 Reams Blvd.
Franklin, TN 37064
1-833-504-0336
www.Aflac.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$250 | \$199 | \$218 | \$256 | \$294 | \$3330 |
| F | | \$195 | \$211 | \$260 | \$322 | \$415 |
| G | | \$169 | \$179 | \$217 | \$284 | \$393 |
| N | | \$122 | \$134 | \$167 | \$218 | \$295 |

Female Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$217 | \$173 | \$190 | \$224 | \$257 | \$288 |
| F | | \$170 | \$184 | \$227 | \$281 | \$362 |
| G | | \$148 | \$156 | \$190 | \$248 | \$343 |
| N | | \$107 | \$117 | \$146 | \$190 | \$258 |

A 10% household discount is available for those who qualify.

Male Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$287 | \$228 | \$250 | \$295 | \$338 | \$380 |
| F | | \$224 | \$243 | \$299 | \$370 | \$477 |
| G | | \$195 | \$206 | \$250 | \$326 | \$452 |
| N | | \$140 | \$154 | \$192 | \$251 | \$339 |

Female Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$250 | \$199 | \$218 | \$257 | \$295 | \$331 |
| F | | \$196 | \$212 | \$261 | \$3232 | \$416 |
| G | | \$170 | \$180 | \$218 | \$285 | \$395 |
| N | | \$123 | \$134 | \$168 | \$219 | \$296 |

***Premiums listed above for Male Tobacco and Female Tobacco cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 10% household discount is available for those who qualify.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Transamerica Life Insurance Company
6400 C Street, SW
Cedar Rapids, IA 52499
1-800-752-9797
www.transamerica.com

Individual Market-Issue Age
Marketing Method: Direct Response

Male Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$201 | \$172 | \$220 | \$273 | \$324 | \$363 |
| B | | \$222 | \$284 | \$354 | \$419 | \$470 |
| F | | \$270 | \$345 | \$429 | \$509 | \$571 |
| G | | \$178 | \$228 | \$284 | \$336 | \$377 |
| K | | \$ 84 | \$108 | \$134 | \$159 | \$178 |
| L | | \$125 | \$160 | \$199 | \$236 | \$265 |
| M | | \$154 | \$197 | \$245 | \$291 | \$326 |
| N | | \$145 | \$185 | \$231 | \$274 | \$307 |

Female Non-Tobacco

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$180 | \$157 | \$197 | \$240 | \$282 | \$318 |
| B | | \$202 | \$255 | \$310 | \$365 | \$412 |
| F | | \$246 | \$309 | \$376 | \$444 | \$500 |
| G | | \$162 | \$204 | \$249 | \$293 | \$330 |
| K | | \$ 77 | \$ 97 | \$118 | \$139 | \$156 |
| L | | \$114 | \$144 | \$175 | \$206 | \$232 |
| M | | \$141 | \$177 | \$215 | \$254 | \$286 |
| N | | \$132 | \$166 | \$202 | \$239 | \$269 |

Male Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|-------|-------|-------|-------|-------|-------|
| A | \$221 | \$189 | \$241 | \$301 | \$356 | \$400 |
| B | | \$244 | \$312 | \$389 | \$461 | \$517 |
| F | | \$297 | \$379 | \$472 | \$560 | \$628 |
| G | | \$196 | \$251 | \$312 | \$370 | \$415 |
| K | | \$ 93 | \$119 | \$148 | \$175 | \$196 |
| L | | \$138 | \$176 | \$219 | \$260 | \$291 |
| M | | \$170 | \$217 | \$270 | \$320 | \$359 |
| N | | \$159 | \$204 | \$254 | \$301 | \$337 |

Female Tobacco*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|-------|-------|-------|-------|-------|-------|
| A | \$199 | \$172 | \$216 | \$264 | \$311 | \$350 |
| B | | \$223 | \$280 | \$341 | \$402 | \$453 |
| F | | \$271 | \$340 | \$414 | \$488 | \$550 |
| G | | \$179 | \$225 | \$273 | \$322 | \$363 |
| K | | \$ 85 | \$106 | \$130 | \$153 | \$172 |
| L | | \$126 | \$158 | \$192 | \$227 | \$255 |
| M | | \$155 | \$194 | \$237 | \$279 | \$315 |
| N | | \$145 | \$183 | \$223 | \$262 | \$296 |

*Premiums listed above for Male Tobacco and Female Tobacco cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Unified Life Insurance Company
7201 W. 129th Street, Suite 300
Overland Park, KS 66213
1-800-237-4463
www.unifiedlife.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$258 | \$222 | \$250 | \$288 | \$321 | \$353 |
| F | | \$279 | \$312 | \$363 | \$418 | \$481 |
| High F | | \$ 75 | \$ 88 | \$103 | \$121 | \$141 |
| G | | \$220 | \$249 | \$295 | \$342 | \$395 |
| N | | \$177 | \$199 | \$236 | \$276 | \$323 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$225 | \$193 | \$217 | \$250 | \$279 | \$307 |
| F | | \$242 | \$271 | \$316 | \$364 | \$441 |
| High F | | \$ 65 | \$ 76 | \$ 90 | \$105 | \$122 |
| G | | \$191 | \$217 | \$256 | \$297 | \$344 |
| N | | \$154 | \$173 | \$205 | \$240 | \$281 |

A 7% Household Discount is available if there are between 2 and 3 adults residing at the same residential address.

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$297 | \$256 | \$288 | \$331 | \$369 | \$406 |
| F | | \$321 | \$359 | \$418 | \$481 | \$553 |
| High F | | \$ 86 | \$101 | \$119 | \$139 | \$162 |
| G | | \$253 | \$287 | \$339 | \$393 | \$454 |
| N | | \$203 | \$229 | \$272 | \$317 | \$372 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$258 | \$222 | \$250 | \$288 | \$321 | \$353 |
| F | | \$279 | \$312 | \$363 | \$418 | \$481 |
| High F | | \$ 75 | \$ 88 | \$103 | \$121 | \$141 |
| G | | \$220 | \$249 | \$295 | \$342 | \$395 |
| N | | \$177 | \$199 | \$236 | \$276 | \$323 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

A 7% Household Discount is available if there are between 2 and 3 adults residing at the same residential address.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

United American Insurance Company
3700 S. Stonebridge Drive, P.O. Box 8080
McKinney, TX 75070
1-800-755-2137
www.unitedamerican.com

Individual Market-Issue Age/Attained Age
Marketing Method: Insurance Producer Solicited

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$185 | \$124 | \$163 | \$183 | \$185 | \$185 |
| B | | \$206 | \$275 | \$317 | \$324 | \$324 |
| C | | \$240 | \$322 | \$380 | \$415 | \$415 |
| D | \$694 | \$205 | \$281 | \$335 | \$367 | \$367 |
| F | | \$255 | \$342 | \$403 | \$439 | \$439 |
| High F | | \$ 43 | \$ 58 | \$ 70 | \$ 83 | \$ 83 |
| G | | \$228 | \$311 | \$370 | \$406 | \$406 |
| High G | | \$ 43 | \$ 58 | \$ 70 | \$ 83 | \$ 83 |
| K | | \$ 95 | \$129 | \$154 | \$168 | \$168 |
| L | | \$136 | \$186 | \$222 | \$244 | \$244 |
| N | | \$143 | \$197 | \$236 | \$262 | \$262 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$161 | \$108 | \$142 | \$159 | \$161 | \$161 |
| B | | \$179 | \$239 | \$276 | \$282 | \$282 |
| C | | \$209 | \$280 | \$331 | \$360 | \$360 |
| D | \$602 | \$179 | \$245 | \$291 | \$319 | \$319 |
| F | | \$222 | \$297 | \$350 | \$382 | \$382 |
| High F | | \$ 37 | \$ 51 | \$ 61 | \$ 73 | \$ 73 |
| G | | \$198 | \$271 | \$322 | \$353 | \$353 |
| High G | | \$ 37 | \$ 51 | \$ 61 | \$ 73 | \$ 73 |
| K | | \$ 82 | \$112 | \$134 | \$146 | \$146 |
| L | | \$119 | \$162 | \$193 | \$212 | \$212 |
| N | | \$124 | \$171 | \$205 | \$228 | \$228 |

***Plan A for individuals under age 65 with a disability premiums are Issue Age. This Plan is offered during Open Enrollment/Guaranteed Issue periods only.**

Male Standard**

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|-----|-------|-------|-------|-------|-------|
| A | N/A | \$142 | \$187 | \$210 | \$212 | \$212 |
| B | | \$237 | \$316 | \$365 | \$373 | \$373 |
| C | | \$276 | \$371 | \$437 | \$477 | \$477 |
| D | N/A | \$236 | \$324 | \$385 | \$422 | \$422 |
| F | | \$294 | \$393 | \$464 | \$506 | \$506 |
| High F | | \$ 49 | \$ 67 | \$ 80 | \$ 96 | \$ 96 |
| G | | \$262 | \$358 | \$426 | \$467 | \$467 |
| High G | | \$ 49 | \$ 67 | \$ 80 | \$ 96 | \$ 96 |
| K | | \$109 | \$149 | \$177 | \$193 | \$193 |
| L | | \$157 | \$215 | \$256 | \$280 | \$280 |
| N | | \$164 | \$226 | \$271 | \$301 | \$301 |

Female Standard**

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|-----|-------|-------|-------|-------|-------|
| A | N/A | \$124 | \$163 | \$183 | \$185 | \$185 |
| B | | \$206 | \$275 | \$317 | \$324 | \$324 |
| C | | \$240 | \$322 | \$380 | \$415 | \$415 |
| D | N/A | \$205 | \$281 | \$335 | \$367 | \$367 |
| F | | \$255 | \$342 | \$403 | \$439 | \$439 |
| High F | | \$ 43 | \$ 58 | \$ 70 | \$ 83 | \$ 83 |
| G | | \$228 | \$311 | \$370 | \$406 | \$406 |
| High G | | \$ 43 | \$ 58 | \$ 70 | \$ 83 | \$ 83 |
| K | | \$ 95 | \$129 | \$154 | \$168 | \$168 |
| L | | \$136 | \$186 | \$222 | \$244 | \$244 |
| N | | \$143 | \$197 | \$236 | \$262 | \$262 |

****Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

UnitedHealthcare Insurance Company
(AARP Medicare Supplement Plans)
P.O. Box 30607
Salt Lake City, UT 84130
1-800-523-5800
www.aarpmedicaresupplement.com

Group Market-Community Rated
Marketing Method: AARP Members Only
Insurance Producer Solicited/Direct Response

**Male Non-Tobacco
Age 65 and Older**

| | <i>Base Rate</i> | <i>Tier I Rate</i> | <i>Tier II Rate</i> |
|----------|------------------|--------------------|---------------------|
| A | \$524 | \$577 | \$786 |
| B | \$297 | \$326 | \$445 |
| C | \$526 | \$578 | \$788 |
| F | \$351 | \$386 | \$526 |
| G | \$287 | \$316 | \$511 |
| K | \$132 | \$145 | \$198 |
| L | \$216 | \$238 | \$324 |
| N | \$248 | \$272 | \$488 |

**Female Non-Tobacco
Age 65 and Older**

| | <i>Base Rate</i> | <i>Tier I Rate</i> | <i>Tier II Rate</i> |
|----------|------------------|--------------------|---------------------|
| A | \$465 | \$511 | \$697 |
| B | \$263 | \$290 | \$395 |
| C | \$466 | \$513 | \$699 |
| F | \$311 | \$342 | \$467 |
| G | \$255 | \$280 | \$453 |
| K | \$117 | \$128 | \$175 |
| L | \$192 | \$211 | \$287 |
| N | \$220 | \$241 | \$432 |

Early Enrollment: Individuals who enroll within six months after their Medicare Part B Effective Date, if later, will be eligible for the Early Enrollment Discount Program. The discount will be 39% at age 65 through 68, 36% at age 69, 33% at age 70, etc., decreasing by 3% after each 12-month period, until the discount decreases to 0% at age 81 when they will pay the Base Rate thereafter.

65th birthday or

Individuals who enroll more than six months and less than ten years after their 65th birthday or Medicare Part B Effective Date, if later, will pay the Base Rate reduced by the Early Enrollment Discount or Tier II Rate based on their responses to health status questions when they apply for coverage.

Individuals who enroll more than ten years after their 65th birthday or Medicare Part B Effective Date, if later, will pay the Tier I Rate or Tier II Rate based on their responses to health status questions when they apply for coverage.

10% Multi-Insured Discount when two or more insured on one account have at least one eligible plan of insurance issued under a group master policy between the Trustee of AARP and UnitedHealthCare Insurance Company.

**Male Tobacco*
Age 65 and Older**

| | <i>Base Rate</i> | <i>Tier I Rate</i> | <i>Tier II Rate</i> |
|----------|------------------|--------------------|---------------------|
| A | \$577 | \$634 | \$865 |
| B | \$326 | \$359 | \$490 |
| C | \$578 | \$636 | \$867 |
| F | \$386 | \$424 | \$578 |
| G | \$316 | \$348 | \$562 |
| K | \$145 | \$159 | \$217 |
| L | \$238 | \$261 | \$356 |
| N | \$272 | \$299 | \$536 |

**Female Tobacco*
Age 65 and Older**

| | <i>Base Rate</i> | <i>Tier I Rate</i> | <i>Tier II Rate</i> |
|----------|------------------|--------------------|---------------------|
| A | \$511 | \$562 | \$767 |
| B | \$290 | \$319 | \$434 |
| C | \$513 | \$564 | \$769 |
| F | \$342 | \$376 | \$513 |
| G | \$280 | \$308 | \$499 |
| K | \$128 | \$141 | \$193 |
| L | \$211 | \$232 | \$316 |
| N | \$241 | \$266 | \$476 |

Early Enrollment: Individuals who enroll within six months after their 65th birthday or Medicare Part B Effective Date, if later, will be eligible for the Early Enrollment Discount Program. The discount will be 39% at age 65 through 68, 36% at age 69, 33% at age 70, etc., decreasing by 3% after each 12-month period, until the discount decreases to 0% at age 81 when they will pay the Base Rate thereafter.

Individuals who enroll more than six months and less than ten years after their 65th birthday or Medicare Part B Effective Date, if later, will pay the Base Rate reduced by the Early Enrollment Discount or Tier II Rate based on their responses to health status questions when they apply for coverage.

Individuals who enroll more than ten years after their 65th birthday or Medicare Part B Effective Date, if later, will pay the Tier I Rate or Tier II Rate based on their responses to health status questions when they apply for coverage.

*Premiums listed above for Male Tobacco and Female Tobacco cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.

10% Multi-Insured Discount when two or more insured on one account have at least one eligible plan of insurance issued under a group master policy between the Trustee of AARP and UnitedHealthCare Insurance Company.

**Male Non-Tobacco
Under Age 65**

| <i>Base Rate</i> | |
|------------------|-------|
| A | \$414 |
| C | \$988 |

**Male Tobacco*
Under Age 65**

| <i>Base Rate</i> | |
|------------------|---------|
| A* | \$ 455 |
| C* | \$1,087 |

**Female Non-Tobacco
Under Age 65**

| <i>Base Rate</i> | |
|------------------|-------|
| A | \$367 |
| C | \$876 |

**Female Tobacco*
Under Age 65**

| <i>Base Rate</i> | |
|------------------|-------|
| A* | \$404 |
| C* | \$964 |

*Premiums listed above for Plans A and C Male and Female Tobacco cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.

10% Multi-Insured Discount when two or more insured on one account have at least one eligible plan of insurance issued under a group master policy between the Trustee of AARP and UnitedHealthCare Insurance Company.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

USAA Life Insurance Company
9800 Fredericksburg Road
San Antonio, TX 78288
1-800-531-8722
www.usaa.com

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Unisex Non-Smoker

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$260 | \$260 | \$304 | \$362 | \$420 | \$464 |
| F | | \$210 | \$245 | \$293 | \$341 | \$376 |
| G | | \$174 | \$193 | \$233 | \$289 | \$374 |
| N | | \$150 | \$175 | \$210 | \$243 | \$269 |

Unisex Smoker*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|----------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$286 | \$285 | \$333 | \$398 | \$461 | \$509 |
| F | | \$230 | \$268 | \$320 | \$372 | \$411 |
| G | | \$216 | \$239 | \$290 | \$358 | \$464 |
| N | | \$164 | \$192 | \$229 | \$266 | \$294 |

*Premiums listed above for Unisex Smoker cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.

A 5% household discount is available for those who qualify.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
AS OF JANUARY 1, 2024**

Washington National Insurance Company
11825 N. Pennsylvania Street
Carmel, IN 46032
1-800-852-6285

Individual Market-Attained Age
Marketing Method: Insurance Producer Solicited

Male Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$253 | \$237 | \$306 | \$392 | \$490 | \$598 |
| F | | \$273 | \$330 | \$401 | \$478 | \$562 |
| G | | \$190 | \$245 | \$314 | \$393 | \$479 |
| High G | | \$ 53 | \$ 63 | \$ 77 | \$ 91 | \$107 |
| N | | \$158 | \$204 | \$262 | \$327 | \$399 |

Female Preferred

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$253 | \$213 | \$276 | \$353 | \$442 | \$538 |
| F | | \$246 | \$297 | \$361 | \$430 | \$506 |
| G | | \$171 | \$221 | \$283 | \$354 | \$431 |
| High G | | \$ 47 | \$ 57 | \$ 69 | \$ 82 | \$ 97 |
| N | | \$143 | \$184 | \$236 | \$295 | \$359 |

Male Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$253 | \$263 | \$340 | \$435 | \$545 | \$664 |
| F | | \$303 | \$367 | \$445 | \$531 | \$624 |
| G | | \$211 | \$273 | \$349 | \$437 | \$532 |
| High G | | \$ 58 | \$ 70 | \$ 85 | \$102 | \$119 |
| N | | \$176 | \$227 | \$291 | \$364 | \$443 |

Female Standard*

| | <65 | 65 | 70 | 75 | 80 | 85 |
|---------------|---------------|-----------|-----------|-----------|-----------|-----------|
| A | \$253 | \$237 | \$306 | \$392 | \$490 | \$598 |
| F | | \$273 | \$330 | \$401 | \$478 | \$562 |
| G | | \$190 | \$245 | \$314 | \$393 | \$479 |
| High G | | \$ 53 | \$ 63 | \$ 77 | \$ 91 | \$107 |
| N | | \$158 | \$204 | \$262 | \$327 | \$399 |

***Premiums listed above for Male Standard and Female Standard cannot be used if an application for a Medicare supplement policy or certificate is submitted during the 6-month open enrollment period, or if an application for an available Medicare supplement policy is submitted during the guaranteed issue period, or if the policy or certificate is submitted during the 30-day annual open enrollment period triggered by a policyholder's birthday.**

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