

MONTHLY PREMIUMS FOR

**MEDICARE SUPPLEMENT
POLICIES**

AS OF JULY 1, 2018



Monthly Premiums for Medicare Supplement Insurance Policies Updated (July 1, 2018)

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, F*, G, K, L, M and N monthly premiums for ages 65, 70, 75, 80 and 85 individuals, and (3) plans A and C monthly premiums for under age 65 Medicare disabled individuals. Some insurance carriers sell other plans for under age 65 Medicare disabled individuals. The plan options listed in this publication are for policies (and certificates) with effective dates on or after June 1, 2010. The premiums are subject to change. For the most current premium for your age, consult directly with your insurance agent or insurance carrier representative.

This publication does not provide specific information on Medicare, or what Medicare covers. It is intended for use as a reference with and in addition to *A Guide to Health Insurance for People with Medicare* jointly developed by the National Association of Insurance Commissioners and the Centers for Medicare and Medicaid Services (CMS) in the U.S. Department of Health and Human Services. The *Guide* provides valuable information about Medicare supplement insurance.

CMS is a federal agency within the U.S. Department of Health and Human Services. CMS 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. You also may contact CMS directly with your questions regarding the Medicare program by calling toll free 1-800-MEDICARE or visit the Medicare website at www.medicare.gov.

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 and community rated.

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.

Note: This publication is updated twice a year. For the most current list of participating insurance carriers, refer to www.insurance.maryland.gov. Click on Consumer, then Consumer Information, then Medicare-related, then List-Carriers Offering Individual Medicare Supplement Policies.

*Plan F also has an option called a high deductible Plan F. The high deductible plan pays the same benefits as Plan F after one has paid a calendar year deductible. Benefits from high deductible Plan F will not begin until out-of-pocket expenses exceed this deductible. Out-of-pocket expenses for this deductible are expenses that would ordinarily be paid by the policy. These expenses include the Medicare deductibles for Part A and Part B, but do not include the plan's separate Foreign Travel Emergency deductible.

Individual Medicare Supplement Plan Choices – Plans A, B, C, D, F, F*, G, K, L, M and N

(These charts show the benefits included in each of the standard Medicare supplement plans. Every participating insurance carrier must make available Plan “A.” If an insurance carrier offers any other Medicare supplement plan, it must also offer either Plan C or Plan F.)

Basic Benefits: For Plans A, B, C, D, F, F*, G, K, L, M and N

Hospitalization: Part A coinsurance plus coverage for 365 additional days after Medicare benefits end.

Medical Expenses: Part B coinsurance (generally 20% of Medicare-approved expenses) or copayments for hospital outpatient services. Plans K, L and N require insureds to pay a portion of the Part B coinsurance or copayments.

Blood: First three pints of blood each year.

Hospice: Part A coinsurance.

A	B	C	D	F	F*	G
Basic Benefits, including 100% Part B Coinsurance	Basic Benefits, including 100% Part B Coinsurance	Basic Benefits, including 100% Part B Coinsurance	Basic Benefits, including 100% Part B Coinsurance	Basic Benefits, including 100% Part B Coinsurance		Basic Benefits, including 100% Part B Coinsurance
		Skilled Nursing Facility Coinsurance	Skilled Nursing Facility Coinsurance	Skilled Nursing Facility Coinsurance		Skilled Nursing Facility Coinsurance
	Part A Deductible	Part A Deductible	Part A Deductible	Part A Deductible		Part A Deductible
		Part B Deductible		Part B Deductible		
				Part B Excess (100%)		Part B Excess (100%)
		Foreign Travel Emergency	Foreign Travel Emergency	Foreign Travel Emergency		Foreign Travel Emergency

*Plan F also has an option called a high deductible Plan F. The high deductible plan pays the same benefits as Plan F after one has paid a calendar year deductible. Benefits from high deductible Plan F will not begin until out-of-pocket expenses exceed this deductible. Out-of-pocket expenses for this deductible are expenses that would ordinarily be paid by the policy. These expenses include the Medicare deductibles for Part A and Part B, but do not include the plan’s separate Foreign Travel Emergency deductible.

Calendar year deductibles, beneficiary coinsurances and out-of-pocket annual limits for Medicare are subject to change. You may contact the **Centers For Medicare and Medicaid Services (CMS)** for all this information at 1-800-MEDICARE (1-800-633-4227) or visit the Medicare website at www.medicare.gov.

Individual Medicare Supplement Plan Choices – Plans A, B, C, D, F, F*, G, K, L, M and N (continued)

Basic Benefits for Plans K, L and N include similar services as Plans A, B, C, D, F, F*, G and M but cost-sharing for the basic benefits is at different levels.

K**	L**	M	N
100% of Part A Hospitalization and preventive care paid at 100%; other basic benefits paid at 50%	100% of Part A Hospitalization and preventive care paid at 100%; other basic benefits paid at 75%	Basic Benefit, including 100% of Part B Coinsurance	Basic Benefit, including 100% of Part B Coinsurance except up to the copayment for office visit, and up to the payment for emergency room visits
50% Skilled Nursing Facility Coinsurance	75% Skilled Nursing Facility Coinsurance	Skilled Nursing Facility Coinsurance	Skilled Nursing Facility Coinsurance
50% Part A Deductible	75% Part A Deductible	50% Part A Deductible	Part A Deductible
		Foreign Travel Emergency	Foreign Travel Emergency
Out of Pocket Annual Limit ***	Out of Pocket Annual Limit ***		

**Plans K and L provide for different cost-sharing for items and services than plans A, B, C, D, F, F*, G, M and N. Once you reach the annual limit, the plan pays 100% of the Medicare copayments, coinsurance, and deductibles for the rest of the calendar year. The out-of-pocket annual limit does NOT include charges from your provider that exceed Medicare-approved amounts, called “Excess Charges.” You will be responsible for paying excess charges.

***The out-of-pocket annual limit will increase each year for inflation.

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 – 301-855-1170 & 410-535-4606
Caroline – 410-479-2535
Carroll – 410-386-3806
Cecil – 410-996-8174
Charles – 301-870-3388 ext. 5118
Dorchester – 410-376-3662 ext. 106
Frederick – 301-600-1604
Garrett – 301-334-9431 ext. 140

Harford – 410-638-3577
Howard – 410-313-7392
Kent – 410-778-2564
Montgomery – 301-255-4250
Prince George's – 301-265-8471
Queen Anne's – 410-758-0848 ext. 2712
Somerset – 410-742-0505 ext. 106
St. Mary's – 301-475-4200 ext. *1064
Talbot – 410-822-2869
Washington – 301-790-0275 ext. 221
Wicomico – 410-742-0505 ext. 106
Worcester – 410-742-0505 ext. 106

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

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

Individual Market-Attained Age
 Marketing Method: Agent Solicited

Male Preferred

	<65	65	70	75	80	85
A	\$284	\$176	\$187	\$219	\$258	\$302
B		\$149	\$158	\$186	\$219	\$256
F		\$189	\$200	\$235	\$277	\$324
High F		\$ 75	\$ 80	\$ 94	\$111	\$130
G		\$155	\$165	\$194	\$228	\$267
N		\$126	\$133	\$157	\$185	\$216

Female Preferred

	<65	65	70	75	80	85
A	\$247	\$153	\$162	\$191	\$224	\$263
B		\$130	\$138	\$162	\$190	\$223
F		\$164	\$174	\$205	\$241	\$282
High F		\$ 66	\$ 70	\$ 82	\$ 96	\$113
G		\$135	\$143	\$169	\$199	\$232
N		\$109	\$116	\$136	\$161	\$188

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 2010 Medicare Supplement policy issued in Maryland.

Male Standard

	<65	65	70	75	80	85
A		\$195	\$207	\$244	\$287	\$335
B		\$166	\$176	\$207	\$243	\$285
F		\$210	\$222	\$262	\$308	\$360
High F		\$ 84	\$ 89	\$105	\$123	\$144
G		\$173	\$183	\$216	\$254	\$297
N		\$140	\$148	\$174	\$205	\$240

Female Standard

	<65	65	70	75	80	85
A		\$170	\$180	\$212	\$249	\$292
B		\$144	\$153	\$180	\$212	\$247
F		\$182	\$193	\$227	\$268	\$313
High F		\$ 73	\$ 77	\$ 91	\$107	\$125
G		\$150	\$159	\$188	\$221	\$258
N		\$121	\$129	\$152	\$178	\$209

***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.**

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 2010 Medicare Supplement policy issued in Maryland.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

American Retirement Life Insurance Company
 11200 Lakeline Blvd., Suite 100
 Austin, TX 78717
 1-855-849-2711
<http://www.cigna.com/medicare/supplemental/>

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

Male Preferred

	<65	65	70	75	80	85
A	\$185	\$198	\$233	\$268	\$301	\$342
F		\$236	\$276	\$321	\$372	\$442
G		\$192	\$228	\$269	\$314	\$376
N		\$146	\$173	\$204	\$240	\$291

Female Preferred

	<65	65	70	75	80	85
A	\$185	\$172	\$202	\$233	\$262	\$298
F		\$205	\$240	\$279	\$324	\$384
G		\$167	\$198	\$234	\$273	\$327
N		\$127	\$150	\$178	\$209	\$253

A Household Discount of 7% 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 American Retirement Life Insurance Company.

Male Standard*

	<65	65	70	75	80	85
A	\$185	\$218	\$256	\$295	\$331	\$376
F		\$260	\$303	\$353	\$409	\$486
G		\$211	\$251	\$296	\$346	\$413
N		\$161	\$190	\$225	\$264	\$320

Female Standard*

	<65	65	70	75	80	85
A	\$185	\$189	\$223	\$256	\$288	\$327
F		\$226	\$264	\$307	\$356	\$423
G		\$184	\$218	\$258	\$301	\$359
N		\$140	\$165	\$195	\$230	\$278

*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.

A Household Discount of 7% 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 American Retirement Life Insurance Company.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

**Americo Financial Life and
Annuity Insurance Company**
300 W.11th Street
Kansas City, MO 64105
1-800-231-0801
www.americo.com

Individual Market-Attained Age
Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$187	\$215	\$232	\$267	\$293	\$315
F		\$212	\$228	\$265	\$300	\$337
G		\$170	\$184	\$217	\$247	\$280
N		\$134	\$145	\$171	\$197	\$225

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$162	\$187	\$202	\$232	\$254	\$274
F		\$184	\$198	\$231	\$261	\$293
G		\$147	\$160	\$189	\$215	\$243
N		\$116	\$126	\$149	\$171	\$196

A 10% Household Discount is available if there are between 2 and 4 adults residing at the same residential address.

Male Tobacco*

	<65	65	70	75	80	85
A	\$214	\$248	\$267	\$307	\$337	\$362
F		\$244	\$262	\$305	\$345	\$387
G		\$195	\$211	\$250	\$284	\$322
N		\$154	\$166	\$197	\$226	\$259

Female Tobacco*

	<65	65	70	75	80	85
A	\$187	\$215	\$232	\$267	\$293	\$315
F		\$212	\$228	\$265	\$300	\$337
G		\$170	\$184	\$217	\$247	\$280
N		\$134	\$145	\$171	\$197	\$225

*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.

A 10% 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
UPDATED (July 1, 2018)

Assured Life Association
P.O Box 2397
Omaha, NE 68103 2397
1-877-223-3666
www.assuredlife.org

Individual Market-Attained Age
Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$206	\$146	\$161	\$193	\$222	\$248
F		\$194	\$215	\$257	\$297	\$330
G		\$143	\$158	\$189	\$218	\$243
N		\$121	\$134	\$160	\$185	\$206

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$206	\$127	\$140	\$168	\$193	\$215
F		\$169	\$187	\$224	\$258	\$287
G		\$125	\$138	\$165	\$190	\$212
N		\$105	\$116	\$139	\$161	\$179

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	\$236	\$168	\$185	\$222	\$256	\$285
F		\$223	\$247	\$296	\$341	\$380
G		\$165	\$182	\$218	\$251	\$280
N		\$139	\$154	\$184	\$212	\$236

Female Tobacco*

	<65	65	70	75	80	85
A	\$236	\$146	\$161	\$193	\$222	\$248
F		\$194	\$215	\$257	\$296	\$330
G		\$143	\$158	\$189	\$218	\$243
N		\$121	\$134	\$160	\$184	\$205

*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.

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
UPDATED (July 1, 2018)

Bankers Fidelity Life Insurance Company
 4370 Peachtree Road, N.E.
 Atlanta, GA 30319
 1-800-241-1439
www.bflic.com

Individual Market-Issue Age/Attained Age
 Marketing Method: Agent Solicited

Unisex Preferred

	<65	65	70	75	80	85
A	\$151	\$151	\$168	\$189	\$204	\$216
High F		\$43	\$48	\$54	\$59	\$62
G		\$146*	\$172*	\$205*	\$232*	\$252*
K		\$79*	\$93*	\$112*	\$126*	\$136*

Unisex Standard**

	<65	65	70	75	80	85
A		\$181	\$202	\$227	\$246	\$259
High F		\$52	\$58	\$66	\$71	\$75
G		\$176*	\$206*	\$247*	\$279*	\$302*
K		\$96*	\$112*	\$135*	\$151*	\$164*

*Plans G and K premiums are Attained Age.

**Premiums listed above for Unisex 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.

A 7% Household Discount may be available if two or more policyholders with an inforce Medicare Supplement policy from Bankers Fidelity Assurance Company or Bankers Fidelity Life Insurance Company are married or have resided together for at least 12 months in the same residence.

Male Preferred

	<65	65	70	75	80	85
F		\$181	\$202	\$235	\$271	\$311

Female Preferred

	<65	65	70	75	80	85
F		\$162	\$181	\$210	\$242	\$278

Male Standard*

	<65	65	70	75	80	85
F		\$217	\$243	\$282	\$325	\$373

Female Standard*

	<65	65	70	75	80	85
F		\$194	\$217	\$252	\$290	\$333

***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.**

A 7% Household Discount may be available if two or more policyholders with an inforce Medicare Supplement policy from Bankers Fidelity Assurance Company or Bankers Fidelity Life Insurance Company are married or have resided together for at least 12 months in the same residence.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Central States Indemnity Co. of Omaha
 1212 N. 96th Street
 Omaha, NE 68134-0999
 1-866-644-3988
www.csimedsupp.com

Individual Market-Attained Age
 Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$223	\$253	\$301	\$357	\$406	\$441
F		\$240	\$282	\$338	\$381	\$413
G		\$204	\$219	\$259	\$293	\$317
N		\$151	\$177	\$212	\$240	\$260

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$223	\$220	\$261	\$311	\$353	\$384
F		\$209	\$245	\$294	\$332	\$359
G		\$178	\$190	\$225	\$254	\$276
N		\$131	\$154	\$184	\$208	\$226

Male Tobacco*

	<65	65	70	75	80	85
A	\$223	\$281	\$334	\$397	\$451	\$491
F		\$267	\$313	\$375	\$424	\$459
G		\$227	\$243	\$288	\$325	\$352
N		\$168	\$197	\$236	\$266	\$288

Female Tobacco*

	<65	65	70	75	80	85
A	\$223	\$244	\$291	\$345	\$392	\$426
F		\$232	\$273	\$326	\$368	\$399
G		\$198	\$212	\$250	\$283	\$306
N		\$146	\$171	\$205	\$231	\$251

*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.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Cigna Health and Life Insurance Company

Cigna Supplement Benefits
 11200 Lakeline Blvd Suite 100
 Austin, TX 78717
 1-855-849-2711

www.cigna.com/medicare/supplemental/

Individual Market-Attained Age

Marketing Method: Agent Solicited/Direct Response

Male Preferred

	<65	65	70	75	80	85
A	\$172	\$149	\$161	\$188	\$215	\$232
F		\$185	\$200	\$233	\$272	\$303
High F		\$ 54	\$ 59	\$ 68	\$ 80	\$ 89
G		\$148	\$162	\$189	\$219	\$240
N		\$126	\$135	\$158	\$188	\$208

Female Preferred

	<65	65	70	75	80	85
A	\$172	\$132	\$142	\$166	\$190	\$205
F		\$163	\$176	\$205	\$240	\$267
High F		\$ 48	\$ 52	\$ 60	\$ 70	\$ 78
G		\$131	\$143	\$167	\$193	\$212
N		\$111	\$119	\$139	\$166	\$184

There is a 7% Household Discount 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	\$172	\$164	\$177	\$207	\$237	\$256
F		\$203	\$220	\$256	\$300	\$333
High F		\$ 59	\$ 64	\$ 75	\$ 88	\$ 98
G		\$163	\$178	\$208	\$241	\$264
N		\$139	\$149	\$173	\$207	\$229

Female Standard*

	<65	65	70	75	80	85
A	\$172	\$145	\$157	\$183	\$209	\$226
F		\$179	\$194	\$226	\$265	\$294
High F		\$ 53	\$ 57	\$ 66	\$ 78	\$ 86
G		\$144	\$157	\$184	\$212	\$233
N		\$122	\$131	\$153	\$182	\$202

*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.

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
UPDATED (July 1, 2018)

Colonial Penn Life Insurance Company

11825 North Pennsylvania Street
 Carmel, IN 46032
 1-800-800-2254

www.bankerslife.com/products/medicare-supplement-insurance/

Individual Market-Attained Age

Marketing Method: Agent Solicited

Male Preferred

	<65	65	70	75	80	85
A	\$307	\$285	\$348	\$423	\$495	\$563
B		\$206	\$251	\$303	\$354	\$405
F		\$252	\$305	\$370	\$441	\$518
High F		\$ 46	\$ 56	\$ 67	\$ 80	\$ 94
G		\$197	\$243	\$299	\$360	\$428
K		\$ 75	\$ 91	\$114	\$141	\$169
L		\$161	\$193	\$236	\$284	\$333
M		\$189	\$234	\$289	\$345	\$403
N		\$123	\$158	\$203	\$251	\$306

Female Preferred

	<65	65	70	75	80	85
A	\$307	\$256	\$313	\$381	\$446	\$507
B		\$186	\$226	\$273	\$319	\$365
F		\$227	\$274	\$333	\$397	\$466
High F		\$ 42	\$ 50	\$ 61	\$ 72	\$ 85
G		\$178	\$219	\$269	\$324	\$385
K		\$ 67	\$ 82	\$103	\$127	\$152
L		\$145	\$174	\$212	\$255	\$300
M		\$170	\$210	\$260	\$311	\$362
N		\$111	\$143	\$182	\$226	\$275

Male Standard*

	<65	65	70	75	80	85
A	\$307	\$316	\$386	\$470	\$550	\$625
B		\$229	\$278	\$337	\$394	\$450
F		\$279	\$338	\$411	\$490	\$576
High F		\$ 51	\$ 62	\$ 75	\$ 89	\$104
G		\$219	\$270	\$332	\$400	\$475
K		\$ 83	\$101	\$127	\$156	\$188
L		\$179	\$214	\$262	\$315	\$370
M		\$210	\$260	\$321	\$383	\$447
N		\$137	\$176	\$225	\$279	\$339

Female Standard*

	<65	65	70	75	80	85
A	\$307	\$285	\$348	\$423	\$495	\$563
B		\$206	\$251	\$303	\$354	\$405
F		\$252	\$305	\$370	\$441	\$518
High F		\$ 46	\$ 56	\$ 67	\$ 80	\$ 94
G		\$197	\$243	\$299	\$360	\$428
K		\$ 75	\$ 91	\$114	\$141	\$169
L		\$161	\$193	\$236	\$284	\$333
M		\$189	\$234	\$289	\$345	\$403
N		\$123	\$158	\$203	\$251	\$306

*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.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)**

Equitable National Life Insurance Company
P.O. Box 2850
Salt Lake City, UT 84110-2850
1-888-352-5170

Individual Market-Attained Age
Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$202	\$159	\$170	\$199	\$232	\$265
F		\$181	\$191	\$227	\$272	\$325
G		\$141	\$152	\$183	\$222	\$266
N		\$106	\$128	\$155	\$189	\$230

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$178	\$140	\$149	\$175	\$204	\$233
F		\$159	\$168	\$199	\$240	\$286
G		\$124	\$134	\$161	\$195	\$234
N		\$ 93	\$113	\$136	\$166	\$202

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

Male Tobacco*

	<65	65	70	75	80	85
A	\$232	\$183	\$195	\$229	\$267	\$304
F		\$208	\$220	\$261	\$313	\$373
G		\$163	\$175	\$210	\$255	\$306
N		\$122	\$147	\$178	\$218	\$264

Female Tobacco*

	<65	65	70	75	80	85
A	\$205	\$161	\$172	\$201	\$235	\$268
F		\$183	\$194	\$229	\$276	\$329
G		\$143	\$154	\$185	\$225	\$270
N		\$107	\$130	\$157	\$191	\$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.

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
UPDATED (July 1, 2018)

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
 Agent Solicited/Direct Response

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$172	\$160	\$173	\$181	\$192	\$201
F		\$236	\$256	\$271	\$294	\$317
G		\$189	\$204	\$218	\$233	\$243
L		\$115	\$126	\$135	\$146	\$157
N		\$108*	\$129*	\$147*	\$160*	\$172*

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$156	\$145	\$157	\$165	\$175	\$182
F		\$215	\$233	\$247	\$267	\$288
G		\$172	\$186	\$198	\$212	\$221
L		\$105	\$115	\$122	\$133	\$143
N		\$98*	\$118*	\$133*	\$146*	\$156*

*Plan N premiums are Attained Age.

Male Tobacco**

	<65	65	70	75	80	85
A	\$198	\$184	\$199	\$209	\$221	\$231
F		\$272	\$294	\$312	\$338	\$364
G		\$217	\$235	\$250	\$268	\$279
L		\$133	\$145	\$155	\$168	\$181
N		\$124*	\$149*	\$169*	\$184*	\$198*

Female Tobacco**

	<65	65	70	75	80	85
A	\$180	\$167	\$181	\$189	\$201	\$210
F		\$247	\$268	\$284	\$307	\$331
G		\$197	\$213	\$228	\$243	\$254
L		\$120	\$132	\$141	\$153	\$164
N		\$113*	\$135*	\$153*	\$167*	\$180*

*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.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

FirstCare, Inc.
 (dba CareFirst MedPlus)
 10455 and 10453 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	\$613	\$541	\$684	\$829	\$983	\$1,112
B		\$150	\$190	\$230	\$273	\$ 309
F		\$172	\$218	\$264	\$313	\$ 354
High F		\$ 40	\$ 50	\$ 61	\$ 72	\$ 82
G		\$157	\$198	\$240	\$284	\$ 322
L		\$107	\$136	\$165	\$195	\$ 221
M		\$164	\$207	\$251	\$298	\$ 337
N		\$119	\$151	\$183	\$217	\$ 246

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

	<65	65	70	75	80	85
A	\$592	\$508	\$642	\$779	\$916	\$998
B		\$141	\$178	\$216	\$254	\$277
F		\$162	\$204	\$248	\$292	\$318
High F		\$ 37	\$ 47	\$ 57	\$ 67	\$ 73
G		\$147	\$186	\$225	\$265	\$289
L		\$101	\$127	\$155	\$182	\$198
M		\$154	\$195	\$236	\$278	\$302
N		\$112	\$142	\$172	\$202	\$220

*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	\$594	\$525	\$663	\$805	\$954	\$1,079
B		\$146	\$184	\$223	\$265	\$ 299
F		\$167	\$211	\$256	\$304	\$ 344
High F		\$ 39	\$ 49	\$ 59	\$ 70	\$ 79
G		\$152	\$192	\$233	\$276	\$ 312
L		\$104	\$132	\$160	\$189	\$ 214
M		\$159	\$201	\$244	\$289	\$ 327
N		\$116	\$147	\$178	\$211	\$ 238

Female Level 1 without Household Discount Eastern & Southern MD*

	<65	65	70	75	80	85
A	\$574	\$493	\$623	\$755	\$889	\$968
B		\$137	\$173	\$210	\$247	\$269
F		\$157	\$198	\$241	\$283	\$308
High F		\$ 36	\$ 46	\$ 56	\$ 65	\$ 71
G		\$143	\$180	\$219	\$257	\$280
L		\$ 98	\$124	\$150	\$177	\$192
M		\$149	\$189	\$229	\$269	\$293
N		\$109	\$138	\$167	\$196	\$214

*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	\$674	\$676	\$793	\$912	\$1,081	\$1,224
B		\$188	\$220	\$253	\$ 300	\$ 339
F		\$215	\$253	\$291	\$ 344	\$ 390
High F		\$ 50	\$ 58	\$ 67	\$ 80	\$ 90
G		\$196	\$229	\$264	\$ 313	\$ 354
L		\$134	\$158	\$181	\$ 215	\$ 243
M		\$205	\$240	\$277	\$ 328	\$ 371
N		\$149	\$175	\$202	\$ 239	\$ 270

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

	<65	65	70	75	80	85
A	\$651	\$635	\$745	\$856	\$1,008	\$1,098
B		\$176	\$207	\$238	\$ 280	\$ 305
F		\$202	\$237	\$273	\$ 321	\$ 350
High F		\$ 47	\$ 55	\$ 63	\$ 74	\$ 81
G		\$184	\$215	\$248	\$ 292	\$ 318
L		\$126	\$148	\$170	\$ 200	\$ 218
M		\$192	\$226	\$260	\$ 305	\$ 333
N		\$140	\$164	\$189	\$ 223	\$ 242

*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. 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	\$842	\$845	\$991	\$1,140	\$1,351	\$1,529
B		\$234	\$275	\$ 316	\$ 375	\$ 424
F		\$269	\$316	\$ 363	\$ 430	\$ 487
High F		\$ 62	\$ 73	\$ 84	\$ 100	\$ 113
G		\$244	\$287	\$ 330	\$ 391	\$ 442
L		\$168	\$197	\$ 226	\$ 268	\$ 304
M		\$256	\$300	\$ 346	\$ 410	\$ 463
N		\$187	\$219	\$ 252	\$ 299	\$ 338

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

	<65	65	70	75	80	85
A	\$814	\$793	\$930	\$1,070	\$1,259	\$1,372
B		\$220	\$258	\$ 297	\$ 349	\$ 381
F		\$253	\$296	\$ 341	\$ 401	\$ 437
High F		\$ 58	\$ 69	\$ 79	\$ 93	\$ 101
G		\$230	\$269	\$ 310	\$ 364	\$ 397
L		\$158	\$185	\$ 213	\$ 250	\$ 273
M		\$240	\$282	\$ 324	\$ 382	\$ 416
N		\$175	\$206	\$ 236	\$ 278	\$ 303

***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. 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	\$654	\$656	\$769	\$885	\$1,049	\$1,187
B		\$182	\$213	\$246	\$ 291	\$ 329
F		\$209	\$245	\$282	\$ 334	\$ 378
High F		\$ 48	\$ 57	\$ 65	\$ 77	\$ 87
G		\$190	\$223	\$256	\$ 304	\$ 344
L		\$130	\$153	\$176	\$ 208	\$ 236
M		\$199	\$233	\$268	\$ 318	\$ 360
N		\$145	\$170	\$196	\$ 232	\$ 262

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

	<65	65	70	75	80	85
A	\$632	\$616	\$722	\$831	\$978	\$1,065
B		\$171	\$200	\$231	\$271	\$ 295
F		\$196	\$230	\$265	\$311	\$ 339
High F		\$ 45	\$ 53	\$ 61	\$ 72	\$ 78
G		\$178	\$209	\$240	\$283	\$ 308
L		\$122	\$143	\$165	\$194	\$ 212
M		\$187	\$219	\$252	\$296	\$ 323
N		\$136	\$160	\$184	\$216	\$ 235

*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. 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	\$817	\$820	\$961	\$1,106	\$1,311	\$1,483
B		\$227	\$267	\$ 307	\$ 364	\$ 411
F		\$261	\$306	\$ 352	\$ 418	\$ 472
High F		\$ 60	\$ 71	\$ 81	\$ 97	\$ 109
G		\$237	\$278	\$ 320	\$ 379	\$ 429
L		\$163	\$191	\$ 220	\$ 260	\$ 295
M		\$248	\$291	\$ 335	\$ 397	\$ 450
N		\$181	\$212	\$ 244	\$ 290	\$ 328

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

	<65	65	70	75	80	85
A	\$790	\$769	\$903	\$1,038	\$1,222	\$1,331
B		\$213	\$250	\$ 288	\$ 339	\$ 369
F		\$245	\$288	\$ 331	\$ 389	\$ 424
High F		\$ 57	\$ 66	\$ 76	\$ 90	\$ 98
G		\$223	\$261	\$ 301	\$ 354	\$ 385
L		\$153	\$179	\$ 206	\$ 243	\$ 264
M		\$233	\$274	\$ 315	\$ 370	\$ 403
N		\$170	\$199	\$ 229	\$ 270	\$ 294

***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. 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	\$980	\$1,082	\$1,231	\$1,327	\$1,573	\$1,780
B		\$ 300	\$ 341	\$ 368	\$ 436	\$ 494
F		\$ 344	\$ 392	\$ 423	\$ 501	\$ 567
High F		\$ 80	\$ 91	\$ 98	\$ 116	\$ 131
G		\$ 313	\$ 356	\$ 384	\$ 455	\$ 515
L		\$ 215	\$ 244	\$ 264	\$ 312	\$ 353
M		\$ 328	\$ 373	\$ 402	\$ 477	\$ 539
N		\$ 239	\$ 272	\$ 293	\$ 347	\$ 393

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

	<65	65	70	75	80	85
A	\$947	\$1,015	\$1,155	\$1,246	\$1,466	\$1,597
B		\$ 282	\$ 320	\$ 346	\$ 407	\$ 443
F		\$ 323	\$ 368	\$ 397	\$ 467	\$ 509
High F		\$ 75	\$ 85	\$ 92	\$ 108	\$ 118
G		\$ 294	\$ 334	\$ 361	\$ 424	\$ 462
L		\$ 202	\$ 229	\$ 247	\$ 291	\$ 317
M		\$ 308	\$ 350	\$ 378	\$ 444	\$ 484
N		\$ 224	\$ 255	\$ 275	\$ 324	\$ 353

*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. 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	\$1,225	\$1,352	\$1,538	\$1,658	\$1,966	\$2,224
B		\$ 375	\$ 427	\$ 460	\$ 545	\$ 617
F		\$ 431	\$ 490	\$ 528	\$ 626	\$ 708
High F		\$ 100	\$ 113	\$ 122	\$ 145	\$ 164
G		\$ 391	\$ 445	\$ 480	\$ 569	\$ 644
L		\$ 269	\$ 305	\$ 329	\$ 390	\$ 442
M		\$ 410	\$ 466	\$ 503	\$ 596	\$ 674
N		\$ 299	\$ 340	\$ 366	\$ 434	\$ 491

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

	<65	65	70	75	80	85
A	\$1,184	\$1,269	\$1,444	\$1,557	\$1,832	\$1,995
B		\$ 352	\$ 400	\$ 432	\$ 508	\$ 554
F		\$ 404	\$ 460	\$ 496	\$ 583	\$ 636
High F		\$ 93	\$ 106	\$ 115	\$ 135	\$ 147
G		\$ 367	\$ 418	\$ 451	\$ 530	\$ 577
L		\$ 252	\$ 287	\$ 309	\$ 364	\$ 396
M		\$ 385	\$ 438	\$ 472	\$ 555	\$ 605
N		\$ 280	\$ 319	\$ 344	\$ 405	\$ 441

*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. 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	\$951	\$1,049	\$1,194	\$1,287	\$1,526	\$1,727
B		\$ 291	\$ 331	\$ 357	\$ 423	\$ 479
F		\$ 334	\$ 380	\$ 410	\$ 486	\$ 550
High F		\$ 77	\$ 88	\$ 95	\$ 112	\$ 127
G		\$ 304	\$ 345	\$ 373	\$ 442	\$ 500
L		\$ 208	\$ 237	\$ 256	\$ 303	\$ 343
M		\$ 318	\$ 362	\$ 390	\$ 463	\$ 523
N		\$ 232	\$ 264	\$ 284	\$ 337	\$ 381

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

	<65	65	70	75	80	85
A	\$919	\$985	\$1,121	\$1,209	\$1,422	\$1,549
B		\$273	\$ 311	\$ 335	\$ 394	\$ 430
F		\$314	\$ 357	\$ 385	\$ 453	\$ 493
High F		\$ 73	\$ 83	\$ 89	\$ 105	\$ 114
G		\$285	\$ 324	\$ 350	\$ 411	\$ 448
L		\$196	\$ 223	\$ 240	\$ 282	\$ 308
M		\$299	\$ 340	\$ 366	\$ 431	\$ 469
N		\$218	\$ 248	\$ 267	\$ 314	\$ 342

*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. 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	\$1,188	\$1,311	\$1,492	\$1,609	\$1,907	\$2,158
B		\$ 364	\$ 414	\$ 446	\$ 529	\$ 599
F		\$ 418	\$ 475	\$ 512	\$ 607	\$ 687
High F		\$ 97	\$ 110	\$ 118	\$ 140	\$ 159
G		\$ 379	\$ 432	\$ 466	\$ 552	\$ 624
L		\$260	\$ 296	\$ 320	\$ 379	\$ 429
M		\$ 397	\$ 452	\$ 488	\$ 578	\$ 654
N		\$ 290	\$ 330	\$ 355	\$ 421	\$ 477

Female Level 3 Smoker without Household Discount Eastern & Southern MD

	<65	65	70	75	80	85
A	\$1,149	\$1,231	\$1,401	\$1,510	\$1,777	\$1,936
B		\$ 342	\$ 389	\$ 419	\$ 493	\$ 537
F		\$ 392	\$ 446	\$ 481	\$ 566	\$ 617
High F		\$ 91	\$ 103	\$ 111	\$ 131	\$ 143
G		\$ 356	\$ 405	\$ 437	\$ 514	\$ 560
L		\$ 245	\$ 278	\$ 300	\$ 353	\$ 385
M		\$ 373	\$ 425	\$ 458	\$ 539	\$ 587
N		\$ 272	\$ 309	\$ 334	\$ 393	\$ 428

*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. 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
UPDATED (July 1, 2018)

First Health Life and Health Insurance Company

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		\$148	\$175	\$202	\$228	\$253

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		\$137	\$162	\$188	\$212	\$235

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		\$163	\$192	\$223	\$251	\$279

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		\$151	\$178	\$206	\$233	\$258

***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.**

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Gerber Life Insurance Company

Administrative Office
P.O. Box 2271
Omaha, NE 68103-2271
1-800-531-1411

Individual Market-Attained Age
Marketing Method: Agent Solicited

Male Non-Smoker

	<65	65	70	75	80	85
A	\$246	\$224	\$265	\$294	\$313	\$326
F		\$295	\$349	\$394	\$428	\$457
G		\$196	\$232	\$263	\$286	\$307

Female Non-Smoker

	<65	65	70	75	80	85
A	\$214	\$195	\$231	\$256	\$272	\$284
F		\$257	\$304	\$343	\$372	\$398
G		\$170	\$202	\$228	\$249	\$267

Male Smoker*

	<65	65	70	75	80	85
A	\$283	\$258	\$305	\$338	\$359	\$375
F		\$339	\$402	\$453	\$492	\$526
G		\$225	\$267	\$302	\$329	\$352

Female Smoker*

	<65	65	70	75	80	85
A	\$246	\$224	\$265	\$294	\$313	\$326
F		\$295	\$349	\$394	\$428	\$457
G		\$196	\$232	\$263	\$286	\$307

***Premiums listed above for Male Smoker and Female 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.**

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Globe Life and Accident Insurance Company
 3700 S. Stonebridge Drive
 PO 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	\$147	\$104	\$139	\$148	\$149	\$149
B		\$151	\$191	\$217	\$220	\$220
F		\$183	\$225	\$264	\$280	\$280
High F		\$ 32	\$ 45	\$ 53	\$ 63	\$ 63

***Disabled Plan A is offered only during Open Enrollment/Guaranteed Issue periods.**

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Government Personnel Mutual Life Insurance Company
P.O. Box 2679
Omaha, NE 68103-2679
1-800-228-9999
www.gpmlife.com

Individual Market-Attained Age
Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$393	\$352	\$385	\$431	\$472	\$501
F		\$309	\$340	\$386	\$431	\$469
G		\$204	\$225	\$256	\$286	\$312
N		\$149	\$164	\$188	\$211	\$230

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$342	\$306	\$335	\$375	\$410	\$436
F		\$269	\$295	\$336	\$375	\$408
G		\$177	\$195	\$223	\$249	\$272
N		\$130	\$143	\$163	\$183	\$200

Male Tobacco*

	<65	65	70	75	80	85
A	\$452	\$404	\$443	\$496	\$542	\$576
F		\$355	\$390	\$444	\$496	\$539
G		\$234	\$258	\$294	\$329	\$359
N		\$171	\$189	\$216	\$242	\$265

Female Tobacco*

	<65	65	70	75	80	85
A	\$393	\$352	\$385	\$431	\$472	\$501
F		\$309	\$340	\$386	\$431	\$469
G		\$204	\$225	\$256	\$286	\$312
N		\$149	\$164	\$188	\$211	\$230

*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.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

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

Individual Market-Attained Age
Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$201	\$143	\$158	\$189	\$218	\$243
F		\$191	\$211	\$252	\$291	\$324
G		\$146	\$161	\$193	\$223	\$248
N		\$123	\$136	\$163	\$188	\$210

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$201	\$124	\$137	\$164	\$190	\$211
F		\$166	\$183	\$219	\$253	\$282
G		\$127	\$140	\$168	\$194	\$216
N		\$107	\$119	\$142	\$164	\$182

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	\$231	\$164	\$182	\$217	\$251	\$279
F		\$219	\$242	\$290	\$334	\$372
G		\$168	\$186	\$222	\$256	\$285
N		\$142	\$157	\$188	\$216	\$241

Female Tobacco*

	<65	65	70	75	80	85
A	\$231	\$143	\$158	\$189	\$218	\$243
F		\$191	\$211	\$252	\$291	\$324
G		\$146	\$161	\$193	\$223	\$248
N		\$123	\$136	\$163	\$188	\$210

*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.

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
UPDATED (July 1, 2018)**

Greek Catholic Union of the U.S.A
5400 Tuscarawas Road
Beaver, PA 15009
1-800-722-4428
www.gcuusa.com

Individual Market-Attained Age
Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$180	\$152	\$171	\$196	\$219	\$241
F		\$191	\$212	\$247	\$284	\$327
G		\$147	\$166	\$197	\$228	\$264
N		\$120	\$135	\$159	\$186	\$218

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$162	\$137	\$153	\$177	\$197	\$216
F		\$172	\$191	\$222	\$256	\$294
G		\$133	\$150	\$177	\$205	\$237
N		\$108	\$121	\$143	\$168	\$196

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

Male Tobacco*

	<65	65	70	75	80	85
A	\$206	\$175	\$196	\$226	\$251	\$277
F		\$219	\$244	\$284	\$327	\$375
G		\$170	\$191	\$226	\$262	\$303
N		\$138	\$155	\$183	\$214	\$251

Female Tobacco*

	<65	65	70	75	80	85
A	\$186	\$158	\$176	\$203	\$226	\$249
F		\$197	\$220	\$256	\$294	\$338
G		\$153	\$172	\$203	\$236	\$273
N		\$124	\$139	\$165	\$193	\$226

*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.

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
UPDATED (July 1, 2018)

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: Agent Solicited

Male Preferred

	<65	65	70	75	80	85
A	\$165	\$144	\$153	\$174	\$202	\$218
F		\$186	\$198	\$235	\$294	\$331
High F		\$ 44	\$ 47	\$ 56	\$ 70	\$ 79
G		\$148	\$158	\$187	\$234	\$264
N		\$124	\$132	\$157	\$196	\$221

Female Preferred

	<65	65	70	75	80	85
A	\$147	\$129	\$137	\$154	\$178	\$192
F		\$166	\$177	\$210	\$263	\$296
High F		\$ 40	\$ 42	\$ 50	\$ 63	\$ 70
G		\$132	\$141	\$167	\$209	\$235
N		\$111	\$118	\$140	\$175	\$197

A household discount of 7% may be 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	\$207	\$180	\$191	\$217	\$252	\$273
F		\$233	\$247	\$294	\$368	\$414
High F		\$ 55	\$ 59	\$ 70	\$ 88	\$ 99
G		\$185	\$197	\$234	\$293	\$330
N		\$155	\$165	\$196	\$245	\$276

Female Standard*

	<65	65	70	75	80	85
A	\$184	\$161	\$171	\$192	\$222	\$241
F		\$208	\$221	\$263	\$328	\$370
High F		\$ 50	\$ 53	\$ 63	\$ 78	\$ 88
G		\$165	\$176	\$209	\$261	\$294
N		\$139	\$147	\$175	\$219	\$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.

A household discount of 7% may be 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
UPDATED (July 1, 2018)

HumanaDental Insurance Company
 2432 Fortune Drive
 Lexington, KY 40509
 1-800-984-9095

Individual Market-Attained Age
 Marketing Method: Agent Solicited

Male Preferred

	<65	65	70	75	80	85
A	\$176	\$160	\$180	\$206	\$231	\$255
F		\$191	\$213	\$248	\$285	\$329
High F		\$ 70	\$ 82	\$ 96	\$112	\$131
G		\$159	\$179	\$212	\$246	\$285
K		\$ 78	\$ 91	\$111	\$132	\$155
N		\$138	\$155	\$183	\$214	\$252

Female Preferred

	<65	65	70	75	80	85
A	\$154	\$139	\$156	\$180	\$201	\$222
F		\$166	\$185	\$216	\$248	\$286
High F		\$ 61	\$ 71	\$ 84	\$ 98	\$114
G		\$138	\$156	\$184	\$214	\$248
K		\$ 68	\$ 79	\$ 97	\$115	\$135
N		\$120	\$135	\$159	\$187	\$219

A 5% Household Premium Discount will be applied where members share a common address.

Male Standard*

	<65	65	70	75	80	85
A	\$202	\$184	\$206	\$237	\$265	\$292
F		\$219	\$245	\$284	\$328	\$378
High F		\$ 81	\$ 94	\$110	\$129	\$150
G		\$182	\$206	\$243	\$282	\$327
K		\$ 90	\$104	\$127	\$151	\$178
N		\$158	\$178	\$210	\$246	\$289

Female Standard*

	<65	65	70	75	80	85
A	\$176	\$160	\$180	\$206	\$231	\$255
F		\$191	\$213	\$248	\$285	\$329
High F		\$ 70	\$ 82	\$ 96	\$112	\$131
G		\$159	\$179	\$212	\$246	\$285
K		\$ 78	\$ 91	\$111	\$132	\$155
N		\$138	\$155	\$183	\$214	\$252

*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.

A 5% Household Premium Discount will be applied where members share a common address.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Humana Insurance Company
 500 West Main Street
 Louisville, KY 40202
 1-800-984-9095
www.Humana-medicare.com

Individual Market-Issue Age/Attained Age
 Marketing Method: Agent Solicited

Male Preferred

	<65	65	70	75	80	85
A	\$227*	\$182	\$221	\$268	\$317	\$367
B		\$167	\$203	\$246	\$290	\$336
C	\$535*	\$215	\$261	\$317	\$375	\$434
F		\$200	\$243	\$295	\$348	\$403
High F		\$ 65	\$ 79	\$ 95	\$112	\$130
K		\$113	\$136	\$166	\$195	\$226
L		\$144	\$174	\$212	\$250	\$289
N		\$122	\$148	\$180	\$212	\$246

Female Preferred

	<65	65	70	75	80	85
A	\$216*	\$181	\$214	\$248	\$281	\$311
B		\$166	\$196	\$227	\$258	\$285
C	\$535*	\$215	\$253	\$293	\$333	\$368
F		\$199	\$235	\$272	\$309	\$341
High F		\$ 65	\$ 76	\$ 88	\$100	\$110
K		\$112	\$132	\$153	\$174	\$192
L		\$143	\$169	\$195	\$222	\$245
N		\$122	\$1442	\$166	\$189	\$208

***Plans A and C under age 65 Medicare disabled premiums are Issue Age.**

A 5% Household Premium Discount will be applied where members share a common address.

Male Standard**

	<65	65	70	75	80	85
A	\$339*	\$271	\$329	\$400	\$472	\$547
B		\$248	\$302	\$367	\$433	\$502
C	\$798*	\$321	\$390	\$474	\$559	\$648
F		\$298	\$361	\$439	\$519	\$601
High F		\$ 96	\$117	\$142	\$167	\$193
K		\$167	\$203	\$247	\$291	\$337
L		\$214	\$259	\$315	\$372	\$431
N		\$182	\$220	\$268	\$316	\$366

Female Standard**

	<65	65	70	75	80	85
A	\$322*	\$270	\$319	\$369	\$420	\$463
B		\$248	\$292	\$339	\$385	\$425
C	\$798*	\$320	\$378	\$437	\$497	\$548
F		\$297	\$350	\$406	\$461	\$509
High F		\$ 96	\$113	\$131	\$148	\$164
K		\$167	\$197	\$228	\$259	\$285
L		\$213	\$251	\$291	\$331	\$365
N		\$181	\$214	\$247	\$281	\$310

*Plans A and C under age 65 Medicare disabled premiums are Issue Age.

**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.

A 5% Household Premium Discount will be applied where members share a common address.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Individual Assurance Company
Life, Health & Accident
P.O. Box 14535
Edmond, Oklahoma 73113
1-888-524-3629
www.iaclife.com

Individual Market-Attained Age
Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$182	\$198	\$223	\$257	\$286	\$315
F		\$222	\$248	\$289	\$332	\$382
G		\$163	\$185	\$218	\$253	\$292
N		\$133	\$150	\$177	\$207	\$242

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$159	\$173	\$194	\$223	\$249	\$274
F		\$193	\$216	\$251	\$289	\$332
G		\$142	\$161	\$190	\$220	\$254
N		\$115	\$130	\$154	\$180	\$211

Male Tobacco*

	<65	65	70	75	80	85
A	\$210	\$228	\$257	\$295	\$329	\$362
F		\$255	\$285	\$332	\$382	\$439
G		\$188	\$212	\$251	\$291	\$336
N		\$152	\$172	\$204	\$238	\$278

Female Tobacco*

	<65	65	70	75	80	85
A	\$182	\$198	\$223	\$257	\$286	\$315
F		\$222	\$248	\$289	\$332	\$382
G		\$163	\$185	\$218	\$253	\$292
N		\$133	\$150	\$177	\$207	\$242

*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.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Liberty Bankers Life Insurance Company
 1605 LBJ Freeway, Suite 710
 Dallas, Texas 75234
 1-844-770-2400
www.libertybankerslife.com

Individual Market-Attained Age
 Marketing Method: Agent Solicited

Male Preferred

	<65	65	70	75	80	85
A	\$205	\$166	\$186	\$214	\$241	\$270
F		\$188	\$210	\$244	\$284	\$332
G		\$151	\$171	\$202	\$236	\$278
N		\$129	\$145	\$172	\$203	\$242

Female Preferred

	<65	65	70	75	80	85
A	\$178	\$144	\$162	\$186	\$210	\$235
F		\$164	\$183	\$213	\$247	\$289
G		\$131	\$148	\$175	\$205	\$242
N		\$112	\$126	\$150	\$177	\$210

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

Male Standard*

	<65	65	70	75	80	85
A	\$235	\$190	\$214	\$246	\$277	\$310
F		\$216	\$242	\$281	\$326	\$382
G		\$173	\$196	\$232	\$271	\$320
N		\$148	\$167	\$198	\$234	\$278

Female Standard*

	<65	65	70	75	80	85
A	\$205	\$166	\$186	\$214	\$241	\$270
F		\$188	\$210	\$244	\$284	\$332
G		\$151	\$171	\$202	\$236	\$278
N		\$129	\$145	\$172	\$203	\$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.

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

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

**Loyal Christian Benefit
Association**

Medicare Supplement Administrative Office
P.O. Box 3090
Salt Lake City, UT 84110-3090
1-877-358-4051

www.lcbalife.org/Pages/Medicare-Supplement.aspx

Individual Market-Attained Age
Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$195	\$152	\$167	\$192	\$208	\$222
F		\$217	\$240	\$287	\$328	\$365
G		\$156	\$172	\$206	\$235	\$262
N		\$130	\$144	\$173	\$197	\$220

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$195	\$132	\$146	\$167	\$181	\$193
F		\$189	\$209	\$250	\$285	\$318
G		\$136	\$150	\$179	\$205	\$228
N		\$113	\$125	\$150	\$171	\$191

A Household Discount of 7% 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 50 or older or if the policy holder lives with another adult who is his or her legal spouse.

Male Tobacco*

	<65	65	70	75	80	85
A	\$224	\$174	\$192	\$221	\$240	\$255
F		\$249	\$276	\$330	\$377	\$420
G		\$180	\$198	\$237	\$271	\$301
N		\$150	\$166	\$198	\$227	\$252

Female Tobacco*

	<65	65	70	75	80	85
A	\$224	\$152	\$167	\$192	\$208	\$222
F		\$217	\$240	\$287	\$328	\$365
G		\$156	\$172	\$206	\$235	\$262
N		\$130	\$144	\$173	\$197	\$220

*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.

A Household Discount of 7% 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 50 or older or if the policy holder lives with another adult who is his or her legal spouse.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Massachusetts Mutual Life Insurance Company
 1295 State Street
 Springfield, MA 01111
 1-888-540-5636
www.massmutual.com

Individual Market-Attained Age
 Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$402	\$316	\$352	\$401	\$454	\$515
F		\$187	\$207	\$238	\$279	\$330
G		\$150	\$168	\$196	\$232	\$276
N		\$129	\$145	\$169	\$201	\$243

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$349	\$275	\$306	\$348	\$395	\$447
F		\$163	\$180	\$207	\$242	\$287
G		\$130	\$146	\$171	\$201	\$240
N		\$112	\$126	\$147	\$175	\$211

A 7% Household Discount is available if the policyholder applies for a Medicare supplement plan at the same time as another Medicare eligible adult or the other Medicare eligible adult must be covered by a Massachusetts Mutual Life Insurance Company Medicare supplement policy.

Male Tobacco*

	<65	65	70	75	80	85
A	\$462	\$364	\$405	\$461	\$522	\$592
F		\$215	\$238	\$274	\$321	\$379
G		\$172	\$193	\$226	\$266	\$318
N		\$149	\$166	\$195	\$231	\$279

Female Tobacco *

	<65	65	70	75	80	85
A	\$402	\$316	\$352	\$401	\$454	\$515
F		\$187	\$207	\$238	\$279	\$330
G		\$150	\$168	\$196	\$232	\$276
N		\$129	\$145	\$169	\$201	\$243

*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.

A 7% Household Discount is available if the policyholder applies for a Medicare supplement plan at the same time as another Medicare eligible adult or the other Medicare eligible adult must be covered by a Massachusetts Mutual Life Insurance Company Medicare supplement policy.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Medico Insurance Company
P.O. Box 10386
Des Moines, IA 50306-0386
1-800-228-6080
www.gomedico.com

Individual Market-Attained Age
Marketing Method: Agent Solicited

Male Preferred

	<65	65	70	75	80	85
A	\$274	\$147	\$155	\$186	\$218	\$253
F		\$216	\$228	\$272	\$320	\$371
N		\$144	\$152	\$184	\$218	\$254

Female Preferred

	<65	65	70	75	80	85
A	\$274	\$136	\$140	\$160	\$187	\$213
F		\$199	\$205	\$235	\$274	\$313
N		\$132	\$136	\$158	\$185	\$213

An individual is eligible for a Household Discount of 7% if he/she lives in the same household with another person over 18 years of age, regardless of whether both sign up for coverage with Medico.

Male Standard*

	<65	65	70	75	80	85
A		\$173	\$182	\$218	\$256	\$297
F		\$254	\$268	\$320	\$376	\$436
N		\$169	\$179	\$217	\$256	\$299

Female Standard*

	<65	65	70	75	80	85
A		\$159	\$164	\$189	\$219	\$251
F		\$234	\$241	\$277	\$322	\$368
N		\$155	\$160	\$186	\$218	\$250

***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.**

An individual is eligible for a Household Discount of 7% if he/she lives in the same household with another person over 18 years of age, regardless of whether both sign up for coverage with Medico.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Omaha Insurance Company

Mutual of Omaha Plaza

Omaha, NE 68175

1-800-667-2937

www.mutualofomaha.com

Individual Market-Attained Age

Marketing Method: Agent Solicited/Direct Response

Unisex Non-Tobacco

	<65	65	70	75	80	85
A	\$243	\$216	\$238	\$274	\$310	\$346
F		\$231	\$254	\$292	\$331	\$369
High F		\$ 57	\$ 62	\$ 72	\$ 81	\$ 91
G		\$159	\$175	\$201	\$228	\$254
N		\$123	\$135	\$155	\$176	\$196

Unisex Tobacco*

	<65	65	70	75	80	85
A	\$263	\$234	\$257	\$296	\$335	\$374
F		\$249	\$274	\$316	\$357	\$398
High F		\$ 61	\$ 68	\$ 78	\$ 88	\$ 98
G		\$172	\$189	\$218	\$246	\$275
N		\$133	\$146	\$168	\$190	\$212

*Premiums listed above for Unisex 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.

Rates are 12% lower when the policyholder is living with one to three other Mutual of Omaha (or affiliate company) policyholders.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Oxford Life Insurance Company
 2721 North Central Avenue
 Phoenix, AZ 85004-1172
 1-800-308-2318
www.oxfordlife.com

Individual Market-Attained Age
 Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$242	\$204	\$242	\$287	\$314	\$327
F		\$250	\$295	\$350	\$405	\$464
N		\$154	\$184	\$221	\$260	\$307

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$214	\$180	\$214	\$254	\$278	\$290
F		\$221	\$261	\$310	\$358	\$410
N		\$136	\$162	\$195	\$230	\$271

Male Tobacco*

	<65	65	70	75	80	85
A	\$278	\$234	\$278	\$330	\$361	\$376
F		\$287	\$340	\$402	\$465	\$533
N		\$177	\$211	\$254	\$299	\$353

Female Tobacco*

	<65	65	70	75	80	85
A	\$246	\$207	\$246	\$292	\$319	\$333
F		\$254	\$301	\$356	\$412	\$472
N		\$157	\$187	\$225	\$265	\$312

*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.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Pan-American Life Insurance Company
 601 Poydras Street
 New Orleans, LA 70130
 1-855-777-0400
www.palig.com

Individual Market-Attained Age
 Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$151	\$151	\$171	\$212	\$263	\$324
F		\$192	\$218	\$270	\$335	\$412
G		\$154	\$175	\$217	\$271	\$335
N		\$130	\$147	\$182	\$226	\$278

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$131	\$131	\$149	\$184	\$229	\$282
F		\$167	\$190	\$235	\$291	\$359
G		\$134	\$152	\$189	\$236	\$292
N		\$113	\$128	\$159	\$197	\$242

A 12% Household Discount is available if the insured currently has a household resident (at least one, no more than three) who is age 50 or older:

- **With whom the insureds have continuously resided for the past 12 months, or to whom the insureds are married or**
- **Who has an existing Medicare Supplement policy or is applying for a policy with Pan-American Life Insurance Company.**

Male Tobacco*

	<65	65	70	75	80	85
A	\$173	\$173	\$197	\$244	\$302	\$372
F		\$221	\$251	\$310	\$385	\$474
G		\$177	\$201	\$250	\$311	\$385
N		\$149	\$169	\$210	\$260	\$320

Female Tobacco *

	<65	65	70	75	80	85
A	\$151	\$151	\$171	\$212	\$263	\$324
F		\$192	\$218	\$270	\$335	\$412
G		\$154	\$175	\$217	\$271	\$335
N		\$130	\$147	\$182	\$226	\$278

*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.

A 12% Household Discount is available if the insured currently has a household resident (at least one, no more than three) who is age 50 or older:

- With whom the insureds have continuously resided for the past 12 months, or to whom the insureds are married or
- Who has an existing Medicare Supplement policy or is applying for a policy with Pan-American Life Insurance Company.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Philadelphia American Life Insurance Company
P.O. Box 4884
Houston, TX 77210-4884
1-877-368-4691
www.neweralife.com

Individual Market-Attained Age
Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$162	\$131	\$141	\$149	\$169	\$181
F		\$173	\$191	\$229	\$261	\$291
High F		\$ 49	\$ 54	\$ 62	\$ 75	\$ 79
G		\$136	\$150	\$179	\$204	\$228
N		\$114	\$126	\$150	\$172	\$191

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$162	\$119	\$129	\$135	\$154	\$164
F		\$157	\$174	\$208	\$237	\$264
High F		\$ 44	\$ 49	\$ 56	\$ 68	\$ 72
G		\$123	\$136	\$163	\$186	\$207
N		\$103	\$114	\$137	\$156	\$174

A 6% Spousal Discount will be applied if the policyholder is legally married and both individuals have an in force policy with Philadelphia American Life Insurance Company.

Male Tobacco*

	<65	65	70	75	80	85
A	\$178	\$144	\$155	\$164	\$186	\$199
F		\$190	\$210	\$252	\$287	\$320
High F		\$ 53	\$ 59	\$ 68	\$ 82	\$ 87
G		\$149	\$165	\$197	\$225	\$251
N		\$125	\$138	\$165	\$189	\$210

Female Tobacco*

	<65	65	70	75	80	85
A	\$178	\$131	\$141	\$149	\$169	\$181
F		\$173	\$191	\$229	\$261	\$291
High F		\$ 49	\$ 54	\$ 62	\$ 75	\$ 79
G		\$136	\$150	\$179	\$204	\$228
N		\$114	\$126	\$150	\$172	\$191

*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.

A 6% Spousal Discount will be applied if the policyholder is legally married and both individuals have an in force policy with Philadelphia American Life Insurance Company.

**MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)**

Physicians Mutual Insurance Company

2600 Dodge Street

Omaha, NE 68131

1-800-273-4989

www.physiciansmutual.com/cs/products/medsup/medsup.html

Individual Market-Attained Age

Marketing Method: Direct Response

Unisex Non-Tobacco

	<65	65	70	75	80	85
A	\$167	\$124	\$134	\$151	\$171	\$194
F		\$169	\$189	\$229	\$277	\$336
High F		\$ 39	\$ 49	\$ 63	\$ 80	\$102
G		\$149	\$168	\$203	\$246	\$298

Unisex Tobacco*

	<65	65	70	75	80	85
A	\$185	\$138	\$149	\$168	\$190	\$215
F		\$187	\$210	\$254	\$308	\$373
High F		\$ 43	\$ 55	\$ 70	\$ 89	\$114
G		\$166	\$186	\$226	\$273	\$331

***Premiums listed above for Unisex 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.**

An applicant or policy owner who resides with at least one, but no more than three other Medicare eligible adults, and at least one of them owns, or is issued a Medicare Supplement policy from either Physicians Life or Physicians Mutual Insurance Company, is eligible for a \$5.00 per month discount off the Medicare Supplement premium.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Puritan Life Insurance Company of America
 1720 W. Rio Salado Parkway
 Tempe, AZ 85281
 1-855-323-8914
help@puritanlifeinsurance.com

Individual Market-Attained Age
 Marketing Method: Agent Solicited

Male Preferred

	<65	65	70	75	80	85
A	\$190	\$150	\$165	\$188	\$213	\$244
F		\$186	\$203	\$233	\$273	\$327
G		\$148	\$164	\$191	\$226	\$272
N		\$121	\$133	\$156	\$185	\$227

Female Preferred

	<65	65	70	75	80	85
A	\$171	\$135	\$148	\$169	\$191	\$220
F		\$168	\$183	\$210	\$246	\$294
G		\$133	\$147	\$172	\$203	\$245
N		\$109	\$120	\$140	\$167	\$204

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

Male Standard*

	<65	65	70	75	80	85
A	\$218	\$173	\$190	\$216	\$245	\$281
F		\$214	\$233	\$268	\$314	\$376
G		\$171	\$188	\$220	\$260	\$313
N		\$139	\$153	\$179	\$213	\$261

Female Standard*

	<65	65	70	75	80	85
A	\$196	\$156	\$171	\$194	\$220	\$252
F		\$193	\$210	\$242	\$283	\$339
G		\$153	\$170	\$198	\$234	\$282
N		\$125	\$138	\$161	\$192	\$234

*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.

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
UPDATED (July 1, 2018)

**Renaissance Life & Health Insurance
 Company of America**
 Health Administrative Office
 P.O. Box 27248
 Salt Lake City, UT 84127-0248
 1-844-202-4150

Individual Market-Attained Age
 Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$225	\$225	\$166	\$178	\$199	\$215
F		\$199	\$226	\$274	\$311	\$351
G		\$155	\$176	\$214	\$245	\$278
N		\$131	\$149	\$181	\$206	\$232

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$196	\$196	\$145	\$154	\$173	\$187
F		\$173	\$197	\$238	\$271	\$306
G		\$135	\$153	\$186	\$213	\$241
N		\$114	\$130	\$157	\$179	\$202

A 12% Household Discount may apply if the applicant currently has a household resident (at least one, no more than 3) who is age 50 or older with whom you have resided with for the past 12 months, or to whom you are either married or with whom you are in a civil union partnership and has an existing Medicare Supplement policy or is applying for a policy with Renaissance.

Male Tobacco*

	<65	65	70	75	80	85
A	\$259	\$259	\$191	\$204	\$229	\$247
F		\$229	\$260	\$315	\$358	\$404
G		\$178	\$202	\$246	\$281	\$319
N		\$151	\$172	\$208	\$236	\$267

Female Tobacco*

	<65	65	70	75	80	85
A	\$225	\$225	\$166	\$178	\$199	\$215
F		\$199	\$226	\$274	\$311	\$351
G		\$155	\$176	\$214	\$245	\$278
N		\$131	\$149	\$181	\$206	\$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.**

A 12% Household Discount may apply if the applicant currently has a household resident (at least one, no more than 3) who is age 50 or older with whom you have resided with for the past 12 months, or to whom you are either married or with whom you are in a civil union partnership and has an existing Medicare Supplement policy or is applying for a policy with Renaissance.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Reserve National Insurance Company
 601 East Britton Road
 Oklahoma City, OK 73114
 1-800-654-9106
www.reservenational.com

Individual Market-Attained Age
 Marketing Method: Agent Solicited

Male Preferred Non-Tobacco

	<65	65	70	75	80	85
A	\$139	\$162	\$182	\$210	\$223	\$233
F		\$194	\$217	\$253	\$278	\$303
High F		\$ 69	\$ 80	\$ 95	\$106	\$117
G		\$170	\$192	\$227	\$252	\$276
N		\$140	\$158	\$187	\$209	\$232

Female Preferred Non-Tobacco

	<65	65	70	75	80	85
A	\$121	\$141	\$159	\$182	\$194	\$203
F		\$169	\$189	\$220	\$242	\$264
High F		\$ 60	\$ 70	\$ 82	\$ 92	\$101
G		\$148	\$167	\$198	\$219	\$240
N		\$122	\$138	\$163	\$182	\$202

Male Preferred Tobacco*

	<65	65	70	75	80	85
A	\$160	\$186	\$210	\$241	\$257	\$268
F		\$224	\$250	\$291	\$320	\$349
High F		\$ 79	\$ 92	\$109	\$122	\$134
G		\$196	\$221	\$261	\$290	\$318
N		\$161	\$182	\$215	\$241	\$267

Female Preferred Tobacco*

	<65	65	70	75	80	85
A	\$139	\$162	\$182	\$210	\$223	\$233
F		\$194	\$217	\$253	\$278	\$303
High F		\$ 69	\$ 80	\$ 95	\$106	\$117
G		\$170	\$192	\$227	\$252	\$276
N		\$140	\$158	\$187	\$209	\$232

*Premiums listed above for Male Preferred tobacco and Female Preferred 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.

Male Standard Non-Tobacco

	<65	65	70	75	80	85
A	\$160	\$186	\$210	\$241	\$257	\$268
F		\$224	\$250	\$291	\$320	\$349
High F		\$ 79	\$ 92	\$109	\$122	\$134
G		\$196	\$221	\$261	\$290	\$318
N		\$161	\$182	\$215	\$241	\$267

Female Standard Non-Tobacco

	<65	65	70	75	80	85
A	\$139	\$162	\$182	\$210	\$223	\$233
F		\$194	\$217	\$253	\$278	\$303
High F		\$ 69	\$ 80	\$ 95	\$106	\$117
G		\$170	\$192	\$227	\$252	\$276
N		\$140	\$158	\$187	\$209	\$232

***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.**

Male Standard Tobacco*

	<65	65	70	75	80	85
A	\$184	\$214	\$241	\$277	\$296	\$308
F		\$257	\$288	\$335	\$368	\$401
High F		\$ 91	\$106	\$125	\$140	\$154
G		\$225	\$255	\$300	\$333	\$365
N		\$186	\$209	\$248	\$277	\$307

Female Standard Tobacco*

	<65	65	70	75	80	85
A	\$160	\$186	\$210	\$241	\$257	\$268
F		\$224	\$250	\$291	\$320	\$349
High F		\$ 79	\$ 92	\$109	\$122	\$134
G		\$196	\$221	\$261	\$290	\$318
N		\$161	\$182	\$215	\$241	\$267

***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.**

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Sentinel Security Life Insurance Company
P.O. Box 27248
Salt Lake City, UT 84127
1-800-247-1423
www.sslco.com

Individual Market-Attained Age
Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$195	\$149	\$169	\$210	\$260	\$321
F		\$195	\$212	\$260	\$318	\$388
G		\$156	\$170	\$209	\$258	\$316
N		\$128	\$146	\$180	\$224	\$276

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$170	\$130	\$147	\$183	\$226	\$279
F		\$170	\$184	\$226	\$277	\$338
G		\$136	\$148	\$182	\$224	\$275
N		\$112	\$127	\$157	\$195	\$240

- A 12% Household Discount is available if the insured currently has a household resident (at least one, no more than three) who is age 50 or older:**
- **With whom the insureds have continuously resided for the past 12 months, or to whom the insureds are married or**
 - **Who has an existing Medicare Supplement policy or is applying for a policy with Sentinel Security Life Insurance Company.**

Male Tobacco*

	<65	65	70	75	80	85
A	\$224	\$172	\$195	\$241	\$299	\$368
F		\$224	\$243	\$298	\$366	\$446
G		\$180	\$195	\$240	\$296	\$363
N		\$148	\$167	\$207	\$257	\$317

Female Tobacco *

	<65	65	70	75	80	85
A	\$195	\$149	\$169	\$210	\$260	\$321
F		\$195	\$212	\$260	\$318	\$388
G		\$156	\$170	\$209	\$258	\$316
N		\$128	\$146	\$180	\$224	\$276

*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.

A 12% Household Discount is available if the insured currently has a household resident (at least one, no more than three) who is age 50 or older:

- With whom the insureds have continuously resided for the past 12 months, or to whom the insureds are married or
- Who has an existing Medicare Supplement policy or is applying for a policy with Sentinel Security Life Insurance Company.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Shenandoah Life Insurance Company
P.O. Box 14558
Clearwater, FL 33766-4558
1-855-406-9085

Individual Market-Attained Age
Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$198	\$145	\$155	\$182	\$212	\$232
F		\$194	\$207	\$244	\$284	\$311
G		\$147	\$157	\$185	\$215	\$236
N		\$124	\$133	\$156	\$182	\$199

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$198	\$126	\$135	\$159	\$184	\$202
F		\$169	\$180	\$212	\$247	\$270
G		\$128	\$137	\$161	\$187	\$205
N		\$108	\$116	\$136	\$158	\$173

A 7% Household Discount will be applied if for the past twelve months the policyholder has resided with at least one, but no more than three, other adults aged 50 or older or if the policyholder lives with another adult who is his or her legal spouse.

Male Tobacco*

	<65	65	70	75	80	85
A	\$228	\$167	\$178	\$210	\$244	\$267
F		\$223	\$238	\$281	\$326	\$358
G		\$169	\$181	\$213	\$248	\$271
N		\$143	\$153	\$180	\$209	\$229

Female Tobacco *

	<65	65	70	75	80	85
A	\$228	\$145	\$155	\$182	\$212	\$232
F		\$194	\$207	\$244	\$284	\$311
G		\$147	\$157	\$185	\$215	\$236
N		\$124	\$133	\$156	\$182	\$199

*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.

A 7% Household Discount will be applied if for the past twelve months the policyholder has resided with at least one, but no more than three, other adults aged 50 or older or if the policyholder lives with another adult who is his or her legal spouse.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Standard Life and Accident Insurance Company
 2450 South Shore Boulevard, Suite 500
 League City, TX 77573
 1-888-290-1085
www.SLAICO.com

Individual Market-Attained Age
 Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$286	\$246	\$284	\$327	\$392	\$494
B		\$280	\$324	\$372	\$447	\$562
C	\$444	\$260	\$300	\$345	\$414	\$521
D		\$224	\$259	\$298	\$358	\$450
F		\$322	\$372	\$428	\$514	\$646
High F		\$ 37	\$ 43	\$ 49	\$ 59	\$ 74
G		\$236	\$273	\$313	\$376	\$473
N		\$179	\$207	\$238	\$286	\$360

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$286	\$246	\$252	\$270	\$320	\$408
B		\$280	\$287	\$307	\$364	\$465
C	\$444	\$260	\$266	\$285	\$338	\$431
D		\$224	\$230	\$246	\$292	\$372
F		\$322	\$330	\$353	\$419	\$534
High F		\$ 37	\$ 38	\$ 41	\$ 48	\$ 61
G		\$236	\$241	\$259	\$307	\$391
N		\$179	\$184	\$197	\$234	\$298

Male Tobacco*

	<65	65	70	75	80	85
A	\$318	\$273	\$316	\$363	\$436	\$549
B		\$311	\$360	\$413	\$496	\$625
C	\$493	\$288	\$334	\$384	\$461	\$579
D		\$249	\$288	\$331	\$397	\$500
F		\$357	\$414	\$475	\$571	\$718
High F		\$ 41	\$ 47	\$ 55	\$ 65	\$ 82
G		\$262	\$303	\$348	\$418	\$526
N		\$199	\$230	\$265	\$318	\$400

Female Tobacco*

	<65	65	70	75	80	85
A	\$318	\$273	\$280	\$300	\$356	\$453
B		\$311	\$319	\$341	\$405	\$516
C	\$493	\$288	\$296	\$317	\$376	\$479
D		\$249	\$255	\$273	\$324	\$413
F		\$357	\$366	\$393	\$466	\$594
High F		\$ 41	\$ 42	\$ 45	\$ 53	\$ 68
G		\$262	\$268	\$287	\$341	\$435
N		\$199	\$204	\$219	\$259	\$331

*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.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

State Farm Mutual Automobile Insurance Company

One State Farm Plaza

Bloomington, IL 61710

Contact local State Farm Agent

www.statefarm.com

Individual Market-Attained Age

Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$179	\$137	\$172	\$200	\$224	\$234
C	\$461	\$206	\$260	\$301	\$338	\$353
F		\$208	\$263	\$304	\$342	\$356

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$179	\$126	\$159	\$184	\$207	\$216
C	\$461	\$190	\$240	\$278	\$312	\$326
F		\$192	\$242	\$281	\$316	\$329

***Plans A and C under age 65 Medicare disabled premiums are offered during Open Enrollment/Guaranteed Issue periods only.**

Male Tobacco*

	<65	65	70	75	80	85
A	\$179	\$150	\$190	\$220	\$247	\$257
C	\$461	\$227	\$286	\$331	\$372	\$388
F		\$229	\$289	\$335	\$376	\$392

Female Tobacco*

	<65	65	70	75	80	85
A	\$179	\$139	\$175	\$203	\$228	\$237
C	\$461	\$209	\$264	\$306	\$344	\$358
F		\$212	\$267	\$309	\$347	\$362

***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.**

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Thrivent Financial for Lutherans
 4321 North Ballard Road
 Appleton, WI 54919-0001
 1-800-847-4836
www.thrivent.com

Individual Market-Attained Age
 Marketing Method: Members Only
 Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$150	\$139	\$156	\$179	\$203	\$226
F		\$174	\$194	\$226	\$263	\$307
G		\$137	\$155	\$183	\$216	\$253
N		\$116	\$131	\$155	\$183	\$218

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$131	\$121	\$136	\$156	\$176	\$197
F		\$151	\$169	\$196	\$229	\$267
G		\$119	\$135	\$160	\$188	\$220
N		\$101	\$114	\$135	\$159	\$190

Male Tobacco*

	<65	65	70	75	80	85
A	\$173	\$159	\$179	\$206	\$233	\$260
F		\$200	\$223	\$260	\$303	\$353
G		\$158	\$179	\$211	\$248	\$291
N		\$133	\$150	\$178	\$211	\$251

Female Tobacco*

	<65	65	70	75	80	85
A	\$150	\$139	\$156	\$179	\$203	\$226
F		\$174	\$194	\$226	\$263	\$307
G		\$137	\$155	\$183	\$216	\$253
N		\$116	\$131	\$155	\$183	\$218

*Premiums listed above for 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.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Transamerica Life Insurance Company
 100 Light Street
 Baltimore, MD 21202
 1-866-205-9120
www.transamerica.com

Individual Market-Issue Age
 Marketing Method: Direct Response

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$141	\$120	\$154	\$192	\$227	\$255
B		\$159	\$203	\$253	\$300	\$336
D		\$174	\$222	\$277	\$328	\$368
F		\$189	\$242	\$301	\$357	\$400
G		\$174	\$222	\$277	\$328	\$368
K		\$ 87	\$111	\$138	\$163	\$183
L		\$129	\$164	\$205	\$243	\$272
M		\$158	\$202	\$252	\$299	\$335
N		\$149	\$190	\$237	\$281	\$315

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$127	\$110	\$138	\$168	\$198	\$223
B		\$145	\$182	\$222	\$262	\$295
D		\$159	\$199	\$243	\$286	\$322
F		\$173	\$217	\$264	\$311	\$351
G		\$158	\$199	\$243	\$286	\$322
K		\$ 79	\$ 99	\$121	\$143	\$161
L		\$117	\$147	\$179	\$212	\$238
M		\$144	\$182	\$221	\$261	\$294
N		\$136	\$171	\$208	\$245	\$276

Male Tobacco*

	<65	65	70	75	80	85
A	\$155	\$132	\$169	\$211	\$250	\$280
B		\$175	\$224	\$278	\$330	\$370
D		\$191	\$245	\$304	\$361	\$405
F		\$208	\$266	\$331	\$393	\$440
G		\$191	\$244	\$304	\$361	\$404
K		\$ 95	\$122	\$152	\$180	\$202
L		\$141	\$181	\$225	\$267	\$299
M		\$174	\$223	\$277	\$329	\$369
N		\$164	\$209	\$261	\$309	\$347

Female Tobacco*

	<65	65	70	75	80	85
A	\$139	\$121	\$152	\$185	\$218	\$246
B		\$159	\$200	\$244	\$288	\$324
D		\$174	\$219	\$267	\$315	\$355
F		\$190	\$239	\$290	\$342	\$386
G		\$174	\$219	\$267	\$315	\$355
K		\$ 87	\$109	\$133	\$157	\$177
L		\$129	\$162	\$197	\$233	\$262
M		\$159	\$200	\$243	\$287	\$323
N		\$149	\$188	\$229	\$269	\$304

*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.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Transamerica Premier Life Insurance Company
 4333 Edgewood Road, NE
 Cedar Rapids, IA 52499
 1-800-322-7164
www.transamerica.com

Individual Market-Attained Age
 Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$174	\$148	\$157	\$190	\$219	\$252
F		\$200	\$212	\$257	\$297	\$340
G		\$131	\$139	\$168	\$195	\$223
N		\$117	\$124	\$150	\$174	\$199

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$158	\$138	\$146	\$169	\$188	\$218
F		\$187	\$198	\$229	\$254	\$295
G		\$122	\$130	\$150	\$167	\$193
N		\$109	\$116	\$134	\$149	\$173

Male Tobacco*

	<65	65	70	75	80	85
A	\$191	\$163	\$172	\$209	\$241	\$277
F		\$220	\$233	\$282	\$326	\$374
G		\$144	\$153	\$185	\$214	\$246
N		\$129	\$136	\$165	\$191	\$219

Female Tobacco*

	<65	65	70	75	80	85
A	\$173	\$152	\$161	\$186	\$207	\$240
F		\$205	\$218	\$252	\$280	\$324
G		\$135	\$143	\$165	\$184	\$213
N		\$120	\$128	\$148	\$164	\$190

*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.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

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: Agent Solicited

Male Preferred

	<65	65	70	75	80	85
A	\$174	\$150	\$168	\$194	\$216	\$238
F		\$188	\$210	\$245	\$282	\$324
High F		\$ 58	\$ 68	\$ 80	\$ 93	\$109
G		\$148	\$162	\$198	\$230	\$266
N		\$125	\$141	\$167	\$195	\$228

Female Preferred

	<65	65	70	75	80	85
A	\$151	\$130	\$146	\$169	\$188	\$207
F		\$163	\$183	\$213	\$245	\$282
High F		\$ 51	\$ 59	\$ 70	\$ 81	\$ 95
G		\$129	\$146	\$173	\$200	\$231
N		\$108	\$122	\$145	\$169	\$198

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	\$200	\$172	\$194	\$223	\$248	\$273
F		\$216	\$242	\$281	\$324	\$372
High F		\$ 67	\$ 78	\$ 92	\$107	\$125
G		\$171	\$193	\$228	\$265	\$306
N		\$143	\$162	\$191	\$224	\$262

Female Standard*

	<65	65	70	75	80	85
A	\$174	\$150	\$168	\$194	\$216	\$238
F		\$188	\$210	\$245	\$282	\$324
High F		\$ 58	\$ 68	\$ 80	\$ 93	\$109
G		\$148	\$168	\$198	\$230	\$266
N		\$125	\$141	\$167	\$195	\$228

***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**

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
UPDATED (July 1, 2018)

United American Insurance Company
 3700 S. Stonebridge Drive, PO Box 8080
 McKinney, TX 75070
 1-800-331-2512
www.unitedamerican.com

Individual Market-Issue Age/Attained Age
 Marketing Method: Agent Solicited

Male Preferred

	<65	65	70	75	80	85
A	\$164	\$110	\$145	\$163	\$165	\$165
B		\$179	\$239	\$276	\$282	\$282
C	\$671	\$203	\$273	\$322	\$351	\$351
D		\$188	\$258	\$307	\$336	\$336
F		\$205	\$274	\$323	\$352	\$352
High F		\$ 35	\$ 48	\$ 57	\$ 68	\$ 68
G		\$189	\$259	\$308	\$337	\$337
K		\$ 89	\$122	\$145	\$159	\$159
L		\$121	\$166	\$198	\$217	\$217
N		\$116	\$160	\$192	\$213	\$213

Female Preferred

	<65	65	70	75	80	85
A	\$143	\$ 96	\$126	\$142	\$143	\$143
B		\$156	\$208	\$240	\$245	\$245
C	\$583	\$177	\$237	\$280	\$305	\$305
D		\$164	\$224	\$267	\$292	\$292
F		\$178	\$238	\$281	\$306	\$306
High F		\$ 30	\$ 42	\$ 50	\$ 59	\$ 59
G		\$165	\$225	\$268	\$293	\$293
K		\$ 78	\$106	\$126	\$138	\$138
L		\$106	\$144	\$172	\$189	\$189
N		\$101	\$140	\$167	\$186	\$186

***Plans A and C under age 65 Medicare disabled premiums are Issue Age. Disabled Plans A and C are offered during Open Enrollment/Guaranteed Issue periods only.**

Male Standard*

	<65	65	70	75	80	85
A		\$127	\$167	\$187	\$189	\$189
B		\$206	\$275	\$317	\$324	\$324
C		\$234	\$314	\$370	\$404	\$404
D		\$216	\$296	\$353	\$387	\$387
F		\$236	\$315	\$372	\$405	\$405
High F		\$ 40	\$ 55	\$ 66	\$ 78	\$ 78
G		\$218	\$298	\$354	\$388	\$388
K		\$103	\$140	\$167	\$183	\$183
L		\$140	\$191	\$227	\$249	\$249
N		\$134	\$184	\$221	\$246	\$246

Female Standard*

	<65	65	70	75	80	85
A		\$110	\$145	\$163	\$165	\$165
B		\$179	\$239	\$276	\$282	\$282
C		\$203	\$273	\$322	\$351	\$351
D		\$188	\$258	\$307	\$336	\$336
F		\$205	\$274	\$323	\$352	\$352
High F		\$ 35	\$ 48	\$ 57	\$ 68	\$ 68
G		\$189	\$259	\$308	\$337	\$337
K		\$ 89	\$122	\$145	\$159	\$159
L		\$121	\$166	\$198	\$217	\$217
N		\$116	\$160	\$192	\$213	\$213

*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.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

UnitedHealthCare Insurance Company

(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: Members Only Agent

Solicited/Direct Response

Unisex Non-Tobacco
Age 65 and Older

	<i>Base Rate</i>	<i>Tier I Rate</i>	<i>Tier II Rate</i>
A	\$290	\$318	\$434
B	\$214	\$235	\$320
C	\$269	\$296	\$403
F	\$255	\$281	\$383
G	\$220	\$242	\$374
K	\$ 99	\$109	\$149
L	\$156	\$171	\$234
N	\$180	\$198	\$270

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 36% at age 65, 33% at age 66, etc., reducing by 3% after each 12-month period, until the discount decreases to 0% 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.

5% 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 UnitedHealthCare Insurance Company.

Unisex Tobacco*
Age 65 and Older

	<i>Base Rate</i>	<i>Tier I Rate</i>	<i>Tier II Rate</i>
A	\$318	\$350	\$478
B	\$235	\$258	\$352
C	\$296	\$325	\$443
F	\$281	\$309	\$421
G	\$242	\$266	\$411
K	\$109	\$120	\$163
L	\$171	\$188	\$257
N	\$198	\$218	\$297

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 36% at age 65, 33% at age 66, etc., reducing by 3% after each 12-month period, until the discount decreases to 0% 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 Unisex 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.**

5% 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 UnitedHealthCare Insurance Company.

**Unisex Non-Tobacco
Under Age 65**

<i>Base Rate</i>	
A	\$241
C	\$505

**Unisex Tobacco*
Under Age 65**

<i>Base Rate</i>	
A*	\$265
C*	\$556

*Premiums listed above for Plans A and C Unisex 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.

5% 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 UnitedHealthCare Insurance Company.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

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

Individual Market-Attained Age
 Marketing Method: Agent Solicited

Unisex Non-Smoker

	<65	65	70	75	80	85
A	\$132	\$132	\$154	\$184	\$213	\$235
F		\$165	\$193	\$231	\$268	\$296
N		\$116	\$136	\$162	\$188	\$208

Unisex Smoker*

	<65	65	70	75	80	85
A	\$145	\$144	\$169	\$202	\$234	\$258
F		\$181	\$211	\$252	\$293	\$323
N		\$127	\$148	\$177	\$206	\$227

***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.**

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Western Catholic Union
P.O. Box 14007
Clearwater, FL 33766-4007
1-855-406-9083
www.wculife.org

Individual Market-Attained Age
Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$175	\$143	\$159	\$190	\$214	\$232
F		\$188	\$207	\$248	\$280	\$304
G		\$144	\$159	\$190	\$215	\$232
N		\$121	\$133	\$160	\$180	\$195

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$153	\$125	\$138	\$165	\$186	\$202
F		\$163	\$181	\$216	\$244	\$264
G		\$125	\$138	\$165	\$187	\$202
N		\$105	\$116	\$139	\$157	\$170

A Household Discount of 5% 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 50 or older or if the certificate holder lives with another adult who is his or her legal spouse.

Male Tobacco*

	<65	65	70	75	80	85
A	\$201	\$165	\$182	\$218	\$246	\$267
F		\$216	\$238	\$285	\$322	\$349
G		\$165	\$182	\$218	\$247	\$267
N		\$139	\$153	\$183	\$207	\$224

Female Tobacco*

	<65	65	70	75	80	85
A	\$175	\$143	\$159	\$190	\$214	\$232
F		\$188	\$207	\$248	\$280	\$304
G		\$144	\$159	\$190	\$215	\$232
N		\$121	\$133	\$160	\$180	\$195

*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.

A Household Discount of 5% 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 50 or older or if the certificate holder lives with another adult who is his or her legal spouse.

MONTHLY PREMIUMS FOR MEDICARE SUPPLEMENT INSURANCE POLICIES
UPDATED (July 1, 2018)

Western United Life Assurance Company
P.O. Box 924408
Houston, TX 77292-4408
1-800-877-7703

Individual Market-Attained Age
Marketing Method: Agent Solicited

Male Non-Tobacco

	<65	65	70	75	80	85
A	\$366	\$330	\$364	\$418	\$474	\$538
F		\$195	\$214	\$248	\$291	\$344
G		\$148	\$164	\$194	\$229	\$273
N		\$123	\$136	\$161	\$191	\$231

Female Non-Tobacco

	<65	65	70	75	80	85
A	\$318	\$287	\$317	\$363	\$413	\$468
F		\$170	\$186	\$216	\$253	\$299
G		\$128	\$143	\$168	\$199	\$237
N		\$107	\$118	\$140	\$166	\$201

An applicant may be eligible for a Household Discount of 7% based on their response to the household discount question in the application.

Male Tobacco*

	<65	65	70	75	80	85
A	\$420	\$379	\$419	\$480	\$546	\$619
F		\$225	\$246	\$286	\$334	\$396
G		\$170	\$189	\$223	\$263	\$314
N		\$141	\$156	\$185	\$220	\$266

Female Tobacco*

	<65	65	70	75	80	85
A	\$366	\$330	\$364	\$418	\$474	\$538
F		\$195	\$214	\$248	\$291	\$344
G		\$148	\$164	\$194	\$229	\$273
N		\$123	\$136	\$161	\$191	\$231

*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.

An applicant may be eligible for a Household Discount of 7% based on their response to the household discount question in the application.

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