

Monthly Medicare Supplement rates for Standardized Plans

NOTE: The rates shown may vary by mode of payment. Check with the company for more information.

COMPANIES	PLANS AVAILABLE TO ALL APPLICANTS (See Footnote 1 if Eligible Due to Disability)									ONLY AVAILABLE TO THOSE ELIGIBLE FOR MEDICARE PRIOR TO 2020			KEY DATES	
Company/Individual Plans	A (1)	B (1)	D (1)	G	G (2) High Deductible	K (6)	L (6)	M	N	C (1)	F	F (2) High Deductible	Date Approved (3)	Effective On or After
Anthem Blue Cross & Blue Shield	\$1,209.93			\$263.25					\$199.91		\$343.15	\$92.68	06/27/2023	01/01/2024
Cigna Health & Life Insurance Co.	\$421.60			\$213.64	\$82.33				\$166.20		\$293.16		04/10/2023	04/10/2023
Colonial Penn Life Insurance Co.	\$1,671.16	\$1075.13		\$661.44	\$66.65	\$136.00	\$491.85	\$640.42	\$449.80		\$887.01	\$60.68	11/16/2023	01/01/2024
ConnectiCare	\$303.00	\$267.53		\$247.71	\$60.00				\$160.00		\$260.00	\$75.00	10/24/2019	08/01/2020
First Health Life & Health Ins Co.	\$204.17	\$250.98		\$275.06					\$155.86		\$295.72		12/13/2023	04/01/2024
Globe Life & Accident Insurance Co.	\$271.00	\$327.00		\$358.00	\$49.50				\$198.50	\$377.00	\$380.50	\$49.50	03/03/2023	04/01/2023
Humana Benefit Plan of Illinois, Inc.	\$453.84			\$240.54	\$67.35				\$169.56		\$293.55		02/01/2024	06/01/2024
Loyal American Life Insurance Co.	\$364.62			\$328.36					\$191.70		\$322.82		03/10/2023	08/01/2023
Omaha Insurance Company	\$816.35			\$428.72	\$55.00				\$277.64		\$466.51	\$88.68	05/23/2023	07/01/2023
Transamerica Life Insurance Co.	\$299.10	\$448.76	\$263.47	\$263.34		\$124.69	\$185.11	\$227.93	\$214.33	\$529.37	\$371.50		12/15/2023	03/15/2024
United American Insurance Co.	\$222.00	\$346.00	\$440.00	\$411.00	\$50.00	\$135.00	\$200.00		\$207.00	\$442.00	\$392.00	\$56.00	11/16/2023	01/01/2024
USAA Life Insurance Company	\$601.97			\$316.20					\$196.18		\$307.02		02/06/2024	09/01/2024
Washington National Insurance Co.	\$466.80			\$430.19	\$66.53				\$311.53		\$376.76		07/24/2023	01/01/2024
Group Plans (4)	A (1)	B (1)	D	G	G (2) High Deductible	K	L	M	N	C (1)	F	F (2) High Deductible	Date Approved (3)	Effective On or After
United HealthCare Ins. Co./AARP	\$245.50	\$416.00		\$263.25		\$83.50	\$153.25		\$204.00	\$494.50	\$353.50		02/06/2024	06/01/2024

- (1) Plans for Disabled - All companies must offer Plans A. If a company also offers Plan(s) B, C and/or D, then it must also offer the plan(s) to disabled Medicare beneficiaries. However, Plan C is only available to disabled individuals who become eligible for Medicare prior to 1/1/20.
- (2) Plans F and G also have a high deductible option which first requires paying a deductible of **\$2,800 for 2024** before the plan begins to pay. Once the plan deductible is met, the plan pays 100% of covered services for the rest of the calendar year. High deductible plan G does not cover the Medicare Part B deductible. However, these plans credit your payment of the Medicare Part B deductible (but not the foreign travel deductible) towards meeting the plan high deductible.
- (3) Highlighted rates are the most recently approved rate and not necessarily the current rate. The date a company's rate was approved is not necessarily the date the rate change will take effect. Check with the company to confirm current rate and effective date for change.
- (4) These are group plans that are available to group members enrolled in Medicare. Payment of a group membership fee is required.
- (5) Plans K and L pay 100% of covered services for the rest of the calendar year once you meet the out-of-pocket yearly limit. The Out-of-Pocket Limits for 2024 are \$7,060 for Plan K and \$3,530 for Plan L.

* The rates on this chart are monthly electronic funds transfer (EFT) rates in most cases.