State of Illinois

Department of Insurance
Andrew Boron, Director

2011 – 2012 Medicare Supplement Premium Comparison Guide

Chicago Area Rates

Cook, Kane, McHenry, DuPage, Lake and Will Counties

SENIOR HEALTH INSURANCE PROGRAM

ship state health insurance assistance programs
NATIONAL NETWORK

LOCAL HELP FOR PEOPLE WITH MEDICARE

Important Numbers to Remember

Senior Health Insurance Program (SHIP) IL Dept of Insurance	800-548-9034 TDD Number for hearing-impaired individuals 217-524-4872	Free Medicare counseling
Social Security Administration	800-772-1213	Medicare eligibility and enrollment
Medicare	(1-800-MEDICARE) 800-633-4227	Medicare claims, appeals, drug plan information
Illinois Department on Aging, Senior Helpline	800-252-8966	Illinois Cares Rx and information and referral services
Comprehensive Health Insurance Plan (CHIP)	866-851-2751	Insurance coverage for people who can't get insurance
Office of Consumer Health Insurance (OCHI)	877-527-9431	Information and referral services for the uninsured
Healthcare & Family Services/Health Benefits Hotline	800-226-0768	IL Cares Rx and Medicaid questions

The rates in this Guide cover the following Illinois Counties:

Cook, Kane, McHenry, DuPage, Lake and Will

This Guide is updated annually. There may be companies offering Medicare supplement plans not included on this list because their plan was approved after the Guide was printed. Companies may also be listed that have ceased offering Medicare supplement plans after the Guide was printed. The premiums listed in this Guide were approved and are on file with the Illinois Department of Insurance. These premiums were effective as of August 2011, but may change during the year. This Guide can also be viewed in its most current form and printed from the Illinois Department of Insurance website **www.insurance.illinois.gov**. The website may have more current premiums than those listed in this printed version of the Guide.

How to Use this Guide

This Guide has been prepared to assist you in making an informed decision about purchasing a Medicare supplement insurance policy, sometimes referred to as "medigap". **By law, all Medicare supplement plans currently available must be identical from company to company**, so comparison for price is important! Companies cannot include any additional benefits other than those outlined on page 5. Not all insurance companies sell all plans. Each rate chart lists the insurance companies licensed to sell those specific insurance plans in Illinois, the **approximate amount they charge by age when you purchase the policy. Rates are quoted based on a regional zip code**.

Medigap law changed on June 1, 2010. Therefore, if you purchased a medigap plan prior to June 1, 2010, your plan benefits may look different than the current benefits offered for sale today. **You do NOT have to replace an older medigap policy**. You may keep your current medigap policy and it will continue to pay benefits according to its policy guidelines. The chart on page 5 lists the plans available for sale now and the benefits offered under each plan. In addition to the regular Medicare supplement plans A through N, plan F is also available as a High-Deductible plan **labeled FHD**. See **page 12** for more information on FHD plans. Additionally, you may have the option of choosing a Medicare Select plan, which is explained on **page 11**.

Medigap policies currently sold may not contain prescription drug benefits because of Medicare's prescription drug coverage, Medicare Part D, which began in 2006. However, if you had a medigap policy with prescription drug coverage prior to 2006, you may keep that policy. Medicare Part D coverage is provided through private insurance companies and/or Medicare Advantage plans offering prescription drugs.

Please take time to read the valuable information printed in this shopping guide. If you have any questions about this Guide, Medicare supplement insurance in general or Medicare prescription drug plans, you may contact the Illinois Department of Insurance, Senior Health Insurance Program (SHIP) at: 1-800-548-9034; TDD number (217) 524-4872; or email SHIP at **DOI.SHIP@illinois.gov**

Definition of Terms and Special Provisions

Open Enrollment Period: Anyone going onto Medicare **Part B** for the first time has six months from the date their Part B coverage takes effect to shop for a Medicare supplement policy. **During this open enrollment period, you cannot be refused coverage** for any reason. Unless you have prior creditable insurance coverage (see definition above), the company **may** impose a waiting period for coverage of pre-existing conditions for up to six months, but it **cannot refuse** to sell you a policy if you apply within your open enrollment period.

Information for Disabled Individuals on Medicare:
In Illinois, people under the age of 65 on Medicare due to a disability have the same Open Enrollment rights as people 65 and older. Additionally, when you turn 65 you will be eligible for *another* six month Medicare supplement open enrollment period due to age. This will give you the opportunity to purchase a medigap policy based on the age of 65, which may reduce your monthly premium. **PLEASE NOTE:** *If you are under 65 and receive notification of your Medicare Part B eligibility retroactively, your six month Open Enrollment Period starts on the date you receive that notification.*

30-Day Free Look: You have 30 days after you ***receive*** a Medicare supplement policy to review the policy, cancel if you choose and get a full refund of premium (less any Policy Fee charged at the time of sale). If you wish to cancel, it is recommended you return the policy directly to the company (not the insurance agent) by certified mail, return receipt requested.

Guaranteed Renewability: All standardized Medicare supplement plans are guaranteed renewable for life. This means that the company cannot individually cancel your policy unless you do not pay the premiums or you falsify information on your application.

Creditable Coverage: There are certain types of previous health insurance coverage that can be used to shorten or eliminate a pre-existing condition waiting period under a medigap policy. However, you cannot have more than a 63 day break in coverage between the previous health insurance coverage and your Medicare coverage.

Standardized Coverage: Medigap policies sold in Illinois after 1992 are identical in coverage from company to company. For example, a Plan F sold by ABC Insurance Company has the same benefits as a Plan F that is sold by XYZ Insurance Company.

Pre-Existing Waiting Period: Unless you have creditable coverage, a medigap company may impose a waiting period of up to six months for a pre-existing health condition you may have. This information appears next to each company's phone number on the rate charts.

Policy Application Fee: Companies may charge a one-time fee when you first apply for a policy. If you cancel your policy within the 30-day free look period, the company does not have to refund this fee.

Crossover: Crossover is a formal agreement between Medicare Part B and the insurance company that allows your Medicare claim to be sent to your medigap company electronically. This eliminates the need to file paper claims with your medigap carrier. This information appears by the company information on the rate charts.

Premium Calculation Methods

The rates quoted in this Guide are for *male non-smokers in specific regions of the state by zip code. If you apply for a Medicare supplement policy after the open enrollment period has expired, some companies may charge a higher rate for smokers.* Rates may vary depending on gender and the city in which you live. Rates listed are those in effect with the Department of Insurance in August 2011.

For persons under 65 who become eligible to purchase a medigap policy, companies may not charge a rate higher than the highest rate on the company's current rate schedule filed with the Illinois Department of Insurance. The rates contained in this guide are provided for general guidance. The actual rates for individuals under age 65 may vary from the highest rate in this guide. Please contact the company directly to get the actual rates.

Premium Calculation Methods: Insurance companies use three different methods of pricing policies based on age.

- **Attained Age:** Your premium will increase as you grow older. Additional increases due to higher medical costs or higher than expected claim costs are also possible. For example, if you buy a policy at age 65, when you turn 70, you will pay whatever the company is charging for a person 70 years old. However, any rate increase that occurs must apply to the entire class of policyholders in which you are categorized, not just to you as an individual.

➢ **Most companies listed in this guide use the Attained Age Rating Method with the exception of Bankers Fidelity Life Insurance Company (uses Issue Age Rating) United Healthcare Insurance Company through AARP (uses No Age Rating).**

- **Issue Age:** Your premium will always be based on your age at the time you purchased the plan. Any increases will be due to higher medical costs or higher than expected claim costs for the entire class of policyholders you are in. Even though you will have increases in your policy premium, the premium will not increase just because you are growing older.

➢ **The only company listed in this guide that uses the issue age method is *Bankers Fidelity Life Insurance Company*.**

- **No Age Rating:** The premium for a specific policy is the same for everyone over the age of 65, regardless of their age.

➢ **The only company using this rating methodology in Illinois is *United Healthcare through AARP.***

Additional Options for People on Medicare

Individuals on Medicare **can apply for coverage under a Medicare Advantage plan, also known as Part C of Medicare, as an alternative to traditional Medicare**. These types of Medicare health plans **must** accept anyone who applies for coverage, with the exception of most people who have End Stage Renal Disease (kidney failure). Four types of Medicare Advantage plans are available to some or all Illinois residents who have Medicare, depending on where they live. Medicare Advantage Plans cover Parts A & B of Medicare and may offer Part D prescription drug coverage as well. Persons who have their Medicare contracted through a Medicare Advantage plan do **not** need a Medicare Supplement Policy. The four types of Medicare Advantage Plans are as follows:

- **Health Maintenance Organizations (HMOs)** are only available in certain zip code areas and counties. HMOs utilize a network of providers, doctors and hospitals, who have contracted with the HMO to provide services to their members. In order to utilize specialists, a referral must be arranged through a primary care physician. If you use an out-of-network provider, no payment will be made by the HMO or Medicare. Exception: HMOs with a Cost Contract may cover services of non-network providers at a higher cost to you. Most HMOs are NOT Cost Contracts.

- **Preferred Provider Organizations (PPOs)** are also only available in certain counties in Illinois. PPOs may allow members to seek services outside of the PPO network and may charge higher co-payments for these benefits.

- **Private Fee-For-Service (PFFS)** plans are available in all areas of the state and differ from HMOs and PPOs in that they do not utilize a network of contracted providers. People in a PFFS may obtain services from any provider that accepts the plan's terms and conditions. Contact your providers before purchasing a PFFS plan to see if they will accept this type of insurance. If the provider does not agree to accept the plan, the beneficiary is responsible for all charges associated with the service.

- **Special Needs Plans (SNPs)** are plans which focus on individuals with special needs. Special Needs Plans may target enrollment to one or more special needs identified as: 1) institutionalized; 2) dual eligible; and/or 3) individuals with severe or disabling chronic condition(s).

To inquire whether Medicare Advantage plans are available in your area or to obtain additional information about these plans, call the Illinois Department of Insurance at 1-800-548-9034. A list of the plans available in Illinois can be found in the back of your current ***Medicare & You Handbook***.

Medicare Supplement Benefits

2010's Standardized Plans available after June 1, 2010

This chart indicates the benefits included in each of the standardized Medicare Supplement plans. Plans K & L will have a different set of core benefits.

Core Benefits for Plans A, B, C, D, F, G, M, N include:

- All Part A coinsurance expenses for :
  - $283 per day for 61st through 90th day;
  - $566 per day for 91st through 150th day;
- Part A Hospice coinsurance
- Upon exhaustion of Part A hospitalization benefits, full coverage of an additional 365 days per lifetime;
- Part B coinsurance or copayment;
  – including Part B Preventive Services
- First three pints of blood each calendar year

Benefits Included	Plan A	Plan B	Plan C	Plan D	Plan F	Plan G	Plan K	Plan L	Plan M	Plan N
Core Benefits	√	√	√	√	√	√	√*	√*	√	√*
Skilled Nursing Facility			√	√	√	√	√* (50%)	√* (75%)	√	√
Part A Deductible		√	√	√	√	√	√* (50%)	√* (75%)	√* (50%)	√
Part B Deductible			√		√					
Part B Excess (100%)					√	√				
Foreign Travel			√	√	√	√			√	√
			Out-of-pocket annual limit				**$4,640**	**$2,320**		

* Core Benefits for Plan K, L, M, and N are the same as listed above with some exceptions. Please refer to the following pages.

Core Benefits for Plans K & L

2010's Standardized Plans
effective June 1, 2010

Medigap Plan K	Medigap Plan L
Medicare Part A Coinsurance and Hospital Benefits: Days 61 – 150 (100%)	Medicare Part A Coinsurance and Hospital Benefits: Days 61 – 150 (100%)
Medicare Part A Deductible (50%)	Medicare Part A Deductible (75%)
Medicare Part B Coinsurance or Copayment (50%)	Medicare Part B Coinsurance or Copayment (75%)
Blood Deductible (50%)	Blood Deductible (75%)
Hospice Care Coinsurance or Copayment (50%)	Hospice Care Coinsurance or Copayment (75%)
Skilled Nursing Facility Coinsurance (50%)	Skilled Nursing Facility Coinsurance (75%)

Medigap Plans K and L provide different cost-sharing amounts for items and services than Medigap Plans A, B, C, D, F, G, M and N. You will have to pay some out-of-pocket costs for some covered services until you meet the yearly out-of-pocket limit (Plan K is $4,640 and Plan L is $2,320 in 2011). After the out-of-pocket limit is reached, the Medigap policy will cover 100% of Medicare Part A and B coinsurance amounts for the remainder of the calendar year. Charges from your doctor that exceed Medicare-approved amounts, called "excess charges", are not covered and do not count towards the out-of-pocket limit. You will have to pay these excess charges without reimbursement from your Medigap policy.

Core Benefits for Plans M & N

2010's Standardized Plans
effective June 1, 2010

Medigap Plan M	Medigap Plan N
Medicare Part A Coinsurance and Hospital Benefits: Days 61 – 150 (100%)	Medicare Part A Coinsurance and Hospital Benefits: Days 61 – 150 (100%)
Medicare Part A Deductible (50%)	Medicare Part A Deductible (100%)
Medicare Part B Coinsurance or Copayment (100%)	Medicare Part B Coinsurance or Copayment: For Part B services except "Office Visits", the Plan N will pay (100%) You pay 20% or $20 (whichever is less) for each service defined as an "Office Visit"
Blood Deductible (100%)	Blood Deductible (100%)
Hospice Care Coinsurance or Copayment (100%)	Hospice Care Coinsurance or Copayment (100%)
Skilled Nursing Facility Coinsurance (100%)	Skilled Nursing Facility Coinsurance (100%)
Foreign Travel Emergency (80% after $250 deductible within first 60days of travel)	Foreign Travel Emergency (80% after $250 deductible within first 60days of travel)

Medigap Plan M and N will be the same as Plan D with the following exceptions:

- Plan M will cover 50% of the Medicare Part A deductible; and
- Plan N will cover 100% of the Medicare Part B Coinsurance and Copayment benefits except for a $20 per physician visit and $50 per Emergency Room visit. Emergency Room visit copay will be waived if admitted into the hospital.

Explanation of Medicare Supplement Benefits

Part A Deductible (Found in Plans B through N)
- Pays the $1132 Medicare Part A inpatient hospital deductible in each benefit period.

Skilled Nursing Coinsurance (Found in Plans C through N)
- Pays the $141.50/day coinsurance amount for days 21–100 in each benefit period.
- Must be in a Medicare–certified Skilled Nursing Facility.

Part B Deductible (Found in Plans C and F)
- Pays the $162 Medicare Part B deductible each calendar year.
- The Part B deductible only applies to Medicare–approved charges.

Foreign Travel Emergency (Found in Plans C, D, F, G, M and N)
- Pays 80% of actual charges for medically necessary emergency care received in a foreign country. The following restrictions apply:
  Expenses must be incurred during the first 60 days of the trip;
  $250 calendar year deductible;
- Lifetime maximum of $50,000.

Part B Excess (Found in Plans F and G)
- Pays for the difference between the Medicare–approved amount and the doctor's actual charge up to 15% over the Medicare–approved amount.

Office Visit and Emergency Room Co-payments (Found in Plan N)
- You pay 20% or $20 (whichever is less) for each office visit you incur;
- You pay $50 for each Emergency Room visit you incur;
- The Emergency Room visit copay is waived if you are admitted in to the hospital pursuant to your ER visit;
- The Medigap plan will not reimburse you for these copayment amounts. They are your responsibility to pay.

Prescription Drugs are no longer available under medigap plans unless you retained an H, I or J policy issued prior to January 1, 2006. Medicare Part D provides prescription drug coverage through private insurance companies via stand-alone prescription drug plans (PDPs) or through Medicare Advantage plans offering a prescription drug benefit (MAPDs).

The "At Home Recovery" and the "Preventive Care" benefits are no longer offered in any medigap plan sold after June 1, 2010.

Medicare Supplement Rights and Guarantees

In addition to the six month open enrollment period described earlier, federal law requires that Medicare supplement and Medicare Select standardized plans A, B, C, F, K and L be guaranteed issue, without pre-existing condition exclusions, in the following situations:

- you have Medicare and an employer group health plan (either primary or secondary to Medicare) that terminates or ceases to provide **all** such supplemental health benefits. *If your employer plan is secondary to Medicare and you elect to disenroll, you have no guaranteed issue rights; or*

- you are enrolled in a Medicare Advantage plan, which includes a Health Maintenance Organization (HMO), a Preferred Provider Organization (PPO), a Private Fee For-Service (PFFS) or Medicare Select plan and move out of the plan's service area, or the insurer goes out of business, withdraws from the market, has its Medicare contract terminated, or the plan reduces its service area, violates its contract provisions or is misrepresented in its marketing; or

- you are insured by a Medicare supplement plan and the insurer goes out of business, withdraws from the market, or the insurance company or agents misrepresent the plan.

If you are covered under a Medicare supplement plan and discontinue that plan to enroll in a Medicare Advantage or Medicare Select plan, you have some specific guarantees. If you decide to return to the traditional Medicare program before the end of the first twelve months of your **first** enrollment in the Medicare Advantage or Medicare Select plan, you have the right to return to your original Medicare supplement plan, **if it is still available** from that insurer. If it is not available, you may select a Medicare supplement plan A, B, C, F, K or L from any company you choose. In either case, you would have no pre-existing condition waiting period.

Some special guarantees are extended to you if you enroll in a Medicare Advantage plan when you first become eligible for Medicare Part A and enroll in Part B at or after age 65. If you disenroll or are terminated from the HMO, PPO, or PFFS within the first 12 months of your enrollment, you are guaranteed to get **any Medicare supplement policy from any company selling Medicare supplement plans**. Again, no pre-existing condition waiting period would apply.

Note: With all of the guarantees mentioned, application for a Medicare supplement policy must be made within 63 days of disenrollment for the guarantees to be valid. Additionally, the company cannot charge more for these guaranteed issue policies, or exclude benefits due to health reasons.

If you are enrolled in a Medicare Advantage or Medicare Select plan, are moving out of the plan's service area and returning to the traditional Medicare program, you can notify the plan up to 60 days prior to the termination date you will disenroll from the plan. You can then apply for a Medicare supplement plan A, B, C, F, K or L during those 60 days prior to the termination date to have your Medicare supplement policy effective the first day you are returned to traditional Medicare. As long as you apply for your Medicare supplement policy within the period of 60 days prior to and 63 days after your termination date from the Plan, it will be guaranteed issue. You will have no pre-existing condition waiting period.

If you become entitled to benefits under Medicaid, you have the right to suspend your Medicare supplement policy for up to 24 months; meaning that the policy cannot be cancelled and you cannot be charged a premium during the suspension period. If you become ineligible for Medicaid benefits during this 24 month period and therefore need your Medicare supplement policy again, as long as you notify your insurer within 90 days of the date of your Medicaid ineligibility, your Medicare supplement policy must be reinstated without penalty and you will not have a pre-existing waiting period.

You can also suspend your Medicare supplement policy if you have insurance coverage with an employer-sponsored group health plan due to your employment or that of your spouse (or parents in the case of a disabled person). There is no limit to the amount of time your Medicare supplement policy can be suspended.

Medicare Select

Medicare Select is another type of Medicare supplement policy.
Medicare Select companies have the right to require you to use **specific** hospitals and doctors. This requirement does **not** apply in the case of an emergency. It is important to call the company to find out if they have a Medicare Select plan available in your area and that your preferred hospital is included before you decide to purchase this type of Medicare Select policy.

Medicare Select plans must be one of the standardized plans. If you do not follow the Medicare Select provisions, Medicare will pay its portion, but the Medicare Select company is not required to pay your inpatient hospital deductible or copayments. Please review your plan for specific guidelines. Medicare Select premiums will be lower than that same company's standardized Medicare supplement premiums. If you have had a Medicare Select policy for at least 6 months and then cancel it, you will have the right to buy a standardized Medicare supplement policy from the same company with comparable or lesser benefits regardless of your health status. Also, depending on your health status and the company's underwriting standards, you may be able to purchase a Medicare supplement plan with greater benefits.

Rates for Medicare Select plans are shown on separate rate tables. They are located directly behind those of the regular Medicare supplement rate charts.

Medicare Supplement High-Deductible Option

Another variation of a Medicare supplement policy available to you is a "high-deductible option" on plan F (FHD). Generally, the premium for a high-deductible plan F will be lower than that company's same Medicare supplement plan without the higher deductible. The benefits for a high-deductible plan F are identical to any other plan F. The only difference is that the plan will not pay benefits until you have met the deductible (the amount you must pay out of your pocket) for that calendar year. **The deductible for 2011 is $2,000**. This deductible is adjusted each year to reflect the change in the Consumer Price Index.

In addition to the $2,000 deductible for plan F, there is also a separate $250 per year deductible for the foreign travel emergency benefit.

Rates for Medicare supplement high-deductible plans being sold in Illinois are included with the rate tables marked FHD.

Further Information Available

Although the Illinois Department of Insurance does not rate the financial condition of insurance companies, SHIP can give you additional information from other rating organizations on insurance companies that may help you decide where to buy insurance. Once you have narrowed your choices to two or three companies, you may **call SHIP at 1-800-548-9034** to obtain each company's rating. Ratings provide information on a company's stability in the marketplace, as well as their financial standing. Independent rating services conduct this research. The Illinois Insurance Facts entitled Finding a Reputable Insurance Company-Using Financial Rating Agencies posted on the Department of Insurance website lists five of the independent rating services, their phone numbers and website addresses. The IDOI website is: **www.insurance.illinois.gov**

Chicago Area

Standardized Medicare Supplement Plans Available - Annual Premium Estimates

Age	A	B	C	D	F	FHD	G	K	L	M	N
AARP / UNITED HEALTHCARE INSURANCE COMPANY				**www.aarphealthcare.com**		**800/523-5800**		Pre-Ex **3**	Application Fee **0**	Crossover **yes**	
64 & Under	$1,886.49	$2,859.57	$3,639.87		$3,658.23			$1,464.21	$2,097.63		$2,510.73
65	$880.36	$1,334.47	$1,698.61		$1,707.17			$683.30	$978.89		$1,171.67
70	$1,257.66	$1,906.38	$2,426.58		$2,438.82			$976.14	$1,398.42		$1,673.82
75	$1,383.43	$2,097.02	$2,669.24		$2,682.70			$1,073.75	$1,538.26		$1,841.20
80	$1,383.43	$2,097.02	$2,669.24		$2,682.70			$1,073.75	$1,538.26		$1,841.20
85	$1,383.43	$2,097.02	$2,669.24		$2,682.70			$1,073.75	$1,538.26		$1,841.20
AETNA LIFE INSURANCE COMPANY				**www.aetnamedicare.com**		**800/529-5586**		Pre-Ex **0**	Application Fee **0**	Crossover **yes**	
64 & Under	$2,860.92	$3,727.56			$4,365.60		$4,092.00				$3,384.00
65	$1,766.28	$1,966.08			$2,219.88		$1,654.92				$1,290.36
70	$2,128.08	$2,405.52			$2,723.40		$2,050.44				$1,606.08
75	$2,434.08	$2,840.40			$3,233.04		$2,467.68				$1,943.16
80	$2,644.68	$3,162.36			$3,626.40		$2,856.48				$2,267.04
85	$2,771.52	$3,460.08			$4,032.48		$3,407.76				$2,751.24
AMERICAN CONTINENTAL INSURANCE COMPANY				**www.cont-life.com**		**800/264-4000**		Pre-Ex **0**	Application Fee **20**	Crossover **yes**	
64 & Under	$2,708.40	$3,412.80			$3,738.00	$1,470.00	$3,470.40				$2,757.60
65	$1,564.80	$1,970.40			$2,289.60	$901.00	$2,004.00				$1,591.20
70	$1,770.00	$2,230.80			$2,569.20	$1,010.40	$2,269.20				$1,802.40
75	$2,070.00	$2,606.40			$2,953.20	$1,161.60	$2,652.00				$2,106.00
80	$2,280.00	$2,870.40			$3,193.20	$1,256.40	$2,919.60				$2,319.60
85	$2,430.00	$3,061.20			$3,390.00	$1,333.20	$3,114.00				$2,474.40

Chicago Area

Standardized Medicare Supplement Plans Available - Annual Premium Estimates

AMERICAN REPUBLIC CORP INSURANCE COMPANY www.americanenterprise.com **888/755-3065** Pre-Ex **0** Application Fee **0** Crossover **yes**

Age	A	B	C	D	F	FHD	G	K	L	M	N
64 & Under	$3,573.92				$4,861.91	$2,042.00		$2,511.55	$3,458.95		
65	$1,876.90				$2,553.30	$1,072.33		$1,318.98	$1,816.46		
70	$2,104.04				$2,862.19	$1,202.05		$1,478.52	$2,036.38		
75	$2,549.42				$3,468.08	$1,456.64		$1,791.51	$2,467.38		
80	$2,936.98				$3,995.50	$1,678.08		$2,063.95	$2,842.56		
85	$3,311.41				$4,521.10	$1,898.89		$2,335.46	$3,216.53		

ASSURED LIFE ASSOCIATION www.denverwoodmen.com **800/777-9777** Pre-Ex **0** Application Fee **25** Crossover **yes**

64 & Under	$1,671.43	$2,117.48	$2,700.03	$2,308.24	$2,761.25		$2,315.79				$2,231.09
65	$1,043.58	$1,207.21	$1,465.57	$1,231.27	$1,499.66		$1,236.11				$1,165.68
70	$1,234.34	$1,425.93	$1,736.90	$1,459.55	$1,777.37		$1,465.21				$1,381.92
75	$1,369.18	$1,601.00	$1,960.22	$1,650.19	$2,005.64		$1,656.44				$1,566.79
80	$1,454.83	$1,727.70	$2,129.16	$1,796.60	$2,178.35		$1,803.32				$1,711.77
85	$1,517.47	$1,831.63	$2,274.97	$1,924.36	$2,327.23		$1,931.20				$1,840.13

BANKERS FIDELITY LIFE INSURANCE COMPANY www.bflic.com **866/458-7500** Pre-Ex **0** Application Fee **0** Crossover **yes**

64 & Under	$1,968.00				$2,724.00	$960.00	$2,316.00	$1,368.00			
65	$1,308.00				$1,824.00	$636.00	$1,272.00	$744.00			
70	$1,464.00				$2,028.00	$708.00	$1,500.00	$876.00			
75	$1,644.00				$2,292.00	$804.00	$1,788.00	$1,056.00			
80	$1,776.00				$2,472.00	$864.00	$2,016.00	$1,188.00			
85	$1,872.00				$2,604.00	$912.00	$2,184.00	$1,284.00			

Chicago Area

Standardized Medicare Supplement Plans Available - Annual Premium Estimates

Age	A	B	C	D	F	FHD	G	K	L	M	N
BLUE CROSS/BLUE SHIELD OF ILLINOIS				**www.bcbsil.com**		**800/646-3000**	Pre-Ex **0**	Application Fee **0**	Crossover **yes**		
64 & U	$1,800.00	$3,048.00	$3,432.00		$3,552.00	$1,152.00	$3,192.00				$2,484.00
65	$876.00	$1,428.00	$1,788.00		$1,800.00	$588.00	$1,620.00				$1,260.00
70	$1,224.00	$2,016.00	$2,484.00		$2,640.00	$840.00	$2,376.00				$1,848.00
75	$1,476.00	$2,484.00	$2,940.00		$3,132.00	$996.00	$2,820.00				$2,196.00
80	$1,704.00	$2,904.00	$3,252.00		$3,372.00	$1,080.00	$3,036.00				$2,364.00
85	$1,800.00	$3,048.00	$3,432.00		$3,552.00	$1,152.00	$3,192.00				$2,484.00
COLUMBIAN MUTUAL LIFE				**www.cfglife.com**		**866/703-7223**	Pre-Ex **0**	Application Fee **25**	Crossover **yes**		
64 & Under	$2,275.56				$3,820.76		$3,099.24				
65	$1,369.54				$2,006.35		$1,598.64				
70	$1,573.16				$2,309.18		$1,840.13				
75	$1,762.03				$2,630.07		$2,100.02				
80	$1,917.75				$2,924.53		$2,340.80				
85	$2,028.88				$3,166.84		$2,541.35				
COMBINED INSURANCE COMPANY OF AMERICA				**www.combinedinsurance.com**		**800/544-5531**	Pre-Ex **0**	Application Fee **0**	Crossover **yes**		
64 & Under	$3,475.40				$4,030.92						$4,657.65
65	$1,382.26				$1,603.20						$1,852.46
70	$1,806.56				$2,095.32						$2,421.10
75	$2,197.96				$2,549.28						$2,945.64
80	$2,486.78				$2,884.28						$3,332.72
85	$2,611.12				$3,028.49						$3,499.36

Chicago Area

Standardized Medicare Supplement Plans Available - Annual Premium Estimates

Age	A	B	C	D	F	FHD	G	K	L	M	N
CONSECO INSURANCE COMPANY				**www.conseco.com**		**800/888-4918**		Pre-Ex **0**	Application Fee **15**	Crossover **yes**	
64 & Under	$3,044.70				$4,008.70						
65	$1,695.00				$2,433.90						
70	$1,848.20				$2,606.10						
75	$2,266.50				$3,070.60						
80	$2,663.80				$3,509.60						
85	$3,044.70				$4,008.70						
CONSTITUTION LIFE INSURANCE				**www.constitutionlife.com**		**800/789-6364**		Pre-Ex **6**	Application Fee **15**	Crossover **yes**	
64 & Under	$1,888.00	$2,358.00	$3,052.00	$2,747.00	$3,061.00						
65	$1,345.00	$1,569.00	$1,770.00	$1,512.00	$1,775.00						
70	$1,689.00	$1,987.00	$2,211.00	$1,937.00	$2,217.00						
75	$1,862.00	$2,240.00	$2,568.00	$2,281.00	$2,574.00						
80	$1,888.00	$2,346.00	$2,856.00	$2,558.00	$2,865.00						
85	$1,888.00	$2,358.00	$3,052.00	$2,747.00	$3,061.00						
CONTINENTAL GENERAL INSURANCE COMPANY				**www.continentalgeneral.com**		**877/291-5434**		Pre-Ex **0**	Application Fee **25**	Crossover **yes**	
64 & Under	$1,929.40				$3,176.80		$2,875.40				$2,687.30
65	$1,475.10				$1,816.10		$1,575.20				$1,469.60
70	$1,518.00				$1,942.60		$1,712.70				$1,568.60
75	$1,747.90				$2,293.50		$2,044.90				$1,864.50
80	$1,929.40				$2,682.90		$2,416.70				$2,214.30
85	$1,929.40				$2,890.80		$2,614.70				$2,444.20

Chicago Area

Standardized Medicare Supplement Plans Available - Annual Premium Estimates

Age	A	B	C	D	F	FHD	G	K	L	M	N
COUNTRY LIFE INSURANCE COMPANY				**www.countryfinancial.com**		**866/856-4760**		Pre-Ex **0**	Application Fee **0**	Crossover **yes**	
64 & Under	$2,268.00		$4,313.00	$3,723.00	$4,399.00	$1,192.00					
65	$1,043.00		$1,825.00	$1,565.00	$1,838.00	$488.00					
70	$1,188.00		$2,355.00	$2,044.00	$2,402.00	$572.00					
75	$1,393.00		$2,873.00	$2,473.00	$2,929.00	$698.00					
80	$1,657.00		$3,296.00	$2,828.00	$3,361.00	$858.00					
85	$1,961.00		$3,706.00	$3,190.00	$3,780.00	$1,025.00					
CSA FRATERNAL LIFE INSURANCE COMPANY				**www.csafraternallife.com**		**877/237-9130**		Pre-Ex **0**	Application Fee **25**	Crossover **yes**	
64 & Under	$2,380.34		$4,590.70		$4,598.96		$4,290.22				$3,442.94
65	$1,423.46		$1,859.09		$1,863.73		$1,682.58				$1,307.34
70	$1,636.26		$2,172.70		$2,178.12		$1,967.60				$1,530.18
75	$1,984.46		$3,018.26		$2,749.71		$2,491.06				$1,943.52
80	$2,209.55		$3,276.72		$3,284.36		$2,993.40				$2,349.97
85	$2,267.92		$3,800.51		$3,808.47		$3,508.42				$2,783.17
EQUITABLE LIFE AND CASUALTY				**www.equiLife.com**		**800/352-5170**		Pre-Ex **0**	Application Fee **20**	Crossover **yes**	
64 & Under	$3,957.33				$5,950.59						$4,188.07
65	$2,880.08				$4,079.65						$2,870.35
70	$3,089.97				$4,395.18						$3,099.70
75	$3,376.31				$4,833.03						$3,402.72
80	$3,577.86				$5,148.56						$3,629.29
85	$3,737.71				$5,364.01						$3,780.80

Chicago Area

Standardized Medicare Supplement Plans Available - Annual Premium Estimates

Age	A	B	C	D	F	FHD	G	K	L	M	N
FAMILY LIFE INSURANCE				**www.familylifeins.com**		**800/877-7703**	Pre-Ex **0**	Application Fee **25**	Crossover **yes**		
64 & Under	$2,026.58	$2,465.28	$2,821.59	$2,584.05	$2,837.64		$2,599.03			$2,511.29	$2,164.61
65	$1,049.67	$1,276.51	$1,450.92	$1,338.57	$1,511.91		$1,344.99			$1,301.12	$1,153.46
70	$1,248.69	$1,518.33	$1,730.19	$1,592.16	$1,775.13		$1,600.72			$1,547.22	$1,354.62
75	$1,481.95	$1,802.95	$2,082.22	$1,890.69	$2,125.02		$1,900.32			$1,838.26	$1,621.05
80	$1,684.18	$2,049.05	$2,366.84	$2,148.56	$2,398.94		$2,160.33			$2,088.64	$1,830.77
85	$1,830.77	$2,227.74	$2,578.70	$2,334.74	$2,599.03		$2,347.58			$2,269.47	$1,982.71
FORETHOUGHT LIFE INSURANCE COMPANY				**www.forethought.com**		**877/492-5870**	Pre-Ex **0**	Application Fee **25**	Crossover **yes**		
64 & Under	$2,097.07		$3,165.31		$3,239.98		$2,670.18				$2,411.11
65	$1,215.47		$1,607.96		$1,646.77		$1,333.79				$1,178.89
70	$1,437.72		$1,905.60		$1,951.61		$1,580.82				$1,397.61
75	$1,610.32		$2,169.03		$2,221.18		$1,802.61				$1,598.17
80	$1,761.09		$2,421.61		$2,479.65		$2,017.09				$1,794.71
85	$1,871.39		$2,632.07		$2,694.95		$2,197.70				$1,962.58
GERBER LIFE INSURANCE				**www.gerber.com**		**914/272-4000**	Pre-Ex **0**	Application Fee **25**	Crossover **yes**		
64 & Under	$2,109.25				$3,078.35		$2,998.43				
65	$1,320.42				$1,891.83		$1,594.76				
70	$1,562.02				$2,242.08		$1,890.09				
75	$1,732.00				$2,529.79		$2,138.11				
80	$1,839.71				$2,746.94		$2,329.21				
85	$1,917.89				$2,934.02		$2,496.11				

Chicago Area

Standardized Medicare Supplement Plans Available - Annual Premium Estimates

Age	A	B	C	D	F	FHD	G	K	L	M	N
GOVERNMENT PERSONNEL MUTUAL LIFE				**www.gpmlife.com**		**866/242-7573**	Pre-Ex **0**	Application Fee **25**	Crossover **yes**		
64 & Under	$2,367.70		$3,689.93		$3,776.76		$2,943.40				$2,635.61
65	$1,479.96		$2,005.76		$2,054.01		$1,571.98				$1,372.96
70	$1,620.46		$2,206.67		$2,259.87		$1,730.30				$1,512.76
75	$1,815.35		$2,513.75		$2,574.27		$1,974.85				$1,732.18
80	$1,986.06		$2,809.74		$2,876.87		$2,212.45				$1,948.19
85	$2,110.99		$3,057.36		$3,130.27		$2,413.47				$2,134.35
HEALTH ALLIANCE MEDICAL PLANS				**www.HealthAllianceMedicare.org**		**800/965-4022**	Pre-Ex **0**	Application Fee **0**	Crossover **yes**		
64 & Under	$2,581.92		$4,471.20		$4,569.84						$8,568.00
65	$1,400.16		$2,006.28		$2,050.44						$3,844.20
70	$1,787.04		$2,560.56		$2,616.96						$4,906.32
75	$2,280.72		$3,268.08		$3,339.96						$6,262.08
80	$2,533.68		$4,024.44		$4,113.12						$7,711.56
85	$2,581.92		$4,471.20		$4,569.84						$8,568.00
HEARTLAND NATIONAL LIFE INSURANCE COMPANY				**www.heartlandnational.net**		**877/431-7371**	Pre-Ex **0**	Application Fee **25**	Crossover **yes**		
64 & Under	$2,008.00			$2,946.00	$3,207.00		$2,992.00			$2,726.00	$2,430.00
65	$1,196.00			$1,504.00	$1,742.00		$1,529.00			$1,407.00	$1,212.00
70	$1,458.00			$1,870.00	$2,109.00		$1,900.00			$1,747.00	$1,499.00
75	$1,665.00			$2,193.00	$2,435.00		$2,230.00			$2,046.00	$1,763.00
80	$1,793.00			$2,460.00	$2,708.00		$2,501.00			$2,283.00	$1,996.00
85	$1,870.00			$2,688.00	$2,934.00		$2,727.00			$2,488.00	$2,203.00

Chicago Area

Standardized Medicare Supplement Plans Available - Annual Premium Estimates

Age	A	B	C	D	F	FHD	G	K	L	M	N
HUMANA INSURANCE COMPANY				**www.humana.com**		**800/872-7294**		Pre-Ex **3**	Application Fee **0**	Crossover **yes**	
64 & Under	$3,024.00	$3,612.00	$4,164.00		$4,248.00	$1,596.00		$1,944.00	$2,772.00		
65	$1,488.00	$1,788.00	$2,052.00		$2,100.00	$792.00		$960.00	$1,368.00		
70	$1,812.00	$2,172.00	$2,496.00		$2,556.00	$960.00		$1,164.00	$1,656.00		
75	$2,208.00	$2,640.00	$3,048.00		$3,108.00	$1,164.00		$1,416.00	$2,016.00		
80	$2,604.00	$3,120.00	$3,600.00		$3,672.00	$1,380.00		$1,680.00	$2,388.00		
85	$3,024.00	$3,612.00	$4,164.00		$4,248.00	$1,596.00		$1,944.00	$2,772.00		
KSKJ LIFE INSURANCE COMPANY				**www.KSKJLife.com**		**866/671-5755**		Pre-Ex **0**	Application Fee **25**	Crossover **yes**	
64 & Under	$2,572.44	$3,129.36	$3,581.22	$3,017.16	$3,603.66		$3,032.46			$2,716.26	$2,408.22
65	$1,332.12	$1,619.76	$1,841.10	$1,562.64	$1,918.62		$1,569.78			$1,406.58	$1,282.14
70	$1,585.08	$1,927.80	$2,197.08	$1,858.44	$2,253.18		$1,868.64			$1,672.80	$1,505.52
75	$1,881.90	$2,287.86	$2,642.82	$2,206.26	$2,697.90		$2,217.48			$1,984.92	$1,802.34
80	$2,137.92	$2,599.98	$3,003.90	$2,507.16	$3,046.74		$2,521.44			$2,256.24	$2,035.92
85	$2,324.58	$2,826.42	$3,273.18	$2,726.46	$3,299.70		$2,740.74			$2,453.10	$2,204.22
LIBERTY NATIONAL LIFE				**www.libnat.com**		**205/325-4200**		Pre-Ex **2**	Application Fee **0**	Crossover **yes**	
64 & Under	$2,203.58	$3,318.22			$4,231.63	$1,389.67					$3,540.71
65	$1,690.42	$2,358.98			$2,656.37	$605.96					$2,101.84
70	$2,072.77	$2,953.76			$3,359.59	$807.20					$2,720.09
75	$2,203.58	$3,248.91			$3,821.32	$1,092.29					$3,140.46
80	$2,203.58	$3,318.22			$4,231.63	$1,389.67					$3,540.71
85	$2,203.58	$3,318.22			$4,231.63	$1,389.67					$3,540.71

Chicago Area

Standardized Medicare Supplement Plans Available - Annual Premium Estimates

Age	A	B	C	D	F	FHD	G	K	L	M	N
LOYAL AMERICAN LIFE INSURANCE				**www.gafri.com**		**800/633-6752**		Pre-Ex **6**	Application Fee **25**	Crossover **yes**	
64 & Under	$2,891.82				$4,085.16		$3,628.88				$2,859.23
65	$1,570.64				$2,272.60		$1,970.50				$1,590.69
70	$1,781.22				$2,555.89		$2,234.99				$1,788.74
75	$2,114.65				$3,059.79		$2,653.66				$2,142.23
80	$2,402.96				$3,454.65		$3,015.92				$2,418.00
85	$2,612.29				$3,741.70		$3,277.90				$2,619.82
MEDICO INSURANCE				**www.gomedico.com**		**800/228-6080**		Pre-Ex **0**	Application Fee **0**	Crossover **yes**	
64 & Under	$2,259.30			$3,401.14	$3,574.60						
65	$1,334.48			$1,756.06	$1,919.52						
70	$1,505.73			$2,004.88	$2,171.94						
75	$1,757.00			$2,384.28	$2,553.36						
80	$1,997.05			$2,772.80	$2,940.65						
85	$2,123.18			$3,038.27	$3,208.46						
PEKIN LIFE INSURANCE COMPANY				**www.pekininsurance.com**		**800/322-0160**		Pre-Ex **6**	Application Fee **0**	Crossover **yes**	
64 & Under	$2,916.40				$3,744.40						
65	$1,458.20				$1,639.90						
70	$1,721.55				$2,159.70						
75	$1,906.70				$2,801.40						
80	$2,017.10				$3,207.35						
85	$2,093.00				$3,507.50						

Chicago Area

Standardized Medicare Supplement Plans Available - Annual Premium Estimates

Age	A	B	C	D	F	FHD	G	K	L	M	N
PHILADELPHIA AMERICAN LIFE INSURANCE COMPANY			**www.philadelphiaamericanlife.com**		**877/368-4691**		Pre-Ex **0**		Application Fee **20**		Crossover **yes**
64 & Under	$2,651.88		$3,792.12		$3,845.16		$3,341.40				$2,691.60
65	$1,015.56		$1,524.84		$1,546.20		$1,343.52				$1,030.80
70	$1,147.44		$1,640.88		$1,663.80		$1,445.76				$1,164.60
75	$1,380.24		$1,973.76		$2,001.36		$1,739.16				$1,401.00
80	$1,681.56		$2,404.68		$2,438.28		$2,118.72				$1,706.76
85	$2,153.76		$3,079.80		$3,122.88		$2,713.68				$2,186.04
PHYSICIANS MUTUAL INSURANCE				**www.physiciansmutual.com**		**800/228-9100**		Pre-Ex **0**		Application Fee **0**	Crossover **yes**
64 & Under	$2,892.78				$5,278.28		$4,877.27				$3,905.88
65	$1,637.20				$2,444.38		$2,202.55				$1,658.45
70	$1,938.29				$2,861.36		$2,575.98				$2,107.12
75	$2,162.56				$3,429.76		$3,089.99				$2,650.03
80	$2,360.95				$3,976.90		$3,582.35				$3,209.05
85	$2,535.06				$4,498.96		$4,052.66				$3,665.77
RESERVE NATIONAL INSURANCE COMPANY				**www.reservenational.com**		**800/654-9106**		Pre-Ex **6**		Application Fee **15**	Crossover **yes**
64 & Under	$2,452.54		$3,642.10		$3,347.88	$1,051.01					$2,457.50
65	$1,278.98		$1,932.55		$1,745.98	$548.14					$1,310.45
70	$1,519.10		$2,256.02		$2,073.86	$651.36					$1,556.09
75	$1,786.82		$2,653.46		$2,439.29	$765.62					$1,830.43
80	$2,071.66		$3,076.30		$2,827.90	$887.62					$2,121.89
85	$2,287.49		$3,396.46		$3,122.11	$980.35					$2,343.24

Chicago Area

Standardized Medicare Supplement Plans Available - Annual Premium Estimates

Age	A	B	C	D	F	FHD	G	K	L	M	N
ROYAL NEIGHBORS OF AMERICA				**www.royalneighbors.org**		**866/845-6665**	Pre-Ex **0**	Application Fee **20**	Crossover **yes**		
64 & Under	$4,173.61				$6,132.34		$4,915.90				
65	$1,679.69				$2,467.76		$1,977.26				
70	$1,920.58				$2,819.83		$2,260.66				
75	$2,195.26				$3,224.22		$2,585.48				
80	$2,510.27				$3,686.38		$2,956.08				
85	$3,958.88				$4,215.03		$3,379.00				
STANDARD LIFE AND ACCIDENT INSURANCE COMPANY				**www.slaico.com**		**888/350-1488**	Pre-Ex **0**	Application Fee **0**	Crossover **yes**		
64 & Under	$5,804.02	$6,608.35	$7,513.19	$4,527.17	$6,178.43	$909.91	$4,561.73				$2,979.82
65	$2,889.11	$3,289.49	$3,739.89	$2,253.53	$3,075.49	$447.21	$2,270.72				$1,483.29
70	$3,342.43	$3,805.63	$4,326.70	$2,607.12	$3,558.04	$517.37	$2,627.01				$1,716.02
75	$3,841.68	$4,374.06	$4,972.97	$2,996.53	$4,089.49	$594.65	$3,019.41				$1,972.34
80	$4,613.43	$5,252.76	$5,972.00	$3,598.51	$4,911.04	$714.13	$3,625.96				$2,368.56
85	$5,804.02	$6,608.35	$7,513.19	$4,527.17	$6,178.43	$898.41	$4,561.73				$2,979.82
STATE FARM MUTUAL AUTOMOBILE				**www.statefarm.com**		**866/855-1212**	Pre-Ex **0**	Application Fee **0**	Crossover **yes**		
64 & Under	$2,033.00		$3,066.00		$3,096.00						
65	$1,189.00		$1,793.00		$1,811.00						
70	$1,498.00		$2,259.00		$2,282.00						
75	$1,735.00		$2,617.00		$2,644.00						
80	$1,949.00		$2,940.00		$2,970.00						
85	$2,033.00		$3,066.00		$3,096.00						

Chicago Area

Standardized Medicare Supplement Plans Available - Annual Premium Estimates

Age	A	B	C	D	F	FHD	G	K	L	M	N
STATE MUTUAL INSURANCE				**www.statemutualinsurance.com**		**888/764-1936**	Pre-Ex **0**	Application Fee **0**	Crossover **yes**		
64 & Under	$2,334.74	$2,724.22	$3,278.48	$2,856.90	$3,298.81	$1,297.91	$2,871.88			$2,572.28	$2,310.13
65	$1,209.10	$1,411.33	$1,690.60	$1,479.81	$1,758.01	$691.22	$1,487.30			$1,332.15	$1,230.50
70	$1,437.01	$1,677.76	$2,010.53	$1,759.08	$2,062.96	$812.13	$1,768.71			$1,582.53	$1,443.43
75	$1,706.65	$1,992.34	$2,419.27	$2,088.64	$2,469.56	$971.56	$2,100.41			$1,879.99	$1,729.12
80	$1,939.91	$2,264.12	$2,747.76	$2,374.33	$2,789.49	$1,096.75	$2,387.17			$2,137.86	$1,952.75
85	$2,110.04	$2,462.07	$2,994.93	$2,580.84	$3,020.61	$1,187.70	$2,593.68			$2,321.90	$2,115.39
STERLING LIFE INSURANCE				**www.sterlingplans.com**		**800/688-0010**	Pre-Ex **0**	Application Fee **0**	Crossover **yes**		
64 & Under	$2,286.50	$2,988.74	$3,449.40		$3,298.66		$3,071.48	$1,540.47			$2,612.51
65	$1,716.88	$2,031.32	$2,262.70		$2,165.41		$1,989.68	$979.01			$1,673.27
70	$1,967.57	$2,380.81	$2,687.89		$2,571.87		$2,370.64	$1,171.84			$1,999.09
75	$2,152.83	$2,677.97	$3,051.86		$2,919.52		$2,701.21	$1,342.51			$2,285.19
80	$2,286.50	$2,988.74	$3,449.40		$3,298.66		$3,071.48	$1,540.47			$2,612.51
85	$2,286.50	$2,988.74	$3,449.40		$3,298.66		$3,071.48	$1,540.47			$2,612.51
THRIVENT FINANCIAL FOR LUTHERANS				**www.thrivent.com**		**800/595-6589**	Pre-Ex **0**	Application Fee **0**	Crossover **yes**		
64 & Under	$2,300.10	$2,718.10	$3,520.00	$3,026.10	$3,533.20	$1,155.00	$3,113.00		$2,172.50	$2,751.10	
65	$1,365.10	$1,613.70	$2,090.00	$1,796.30	$2,097.70	$686.40	$1,849.10		$1,290.30	$1,633.50	
70	$1,560.90	$1,846.90	$2,391.40	$2,055.90	$2,399.10	$784.30	$2,114.20		$1,475.10	$1,867.80	
75	$1,779.80	$2,105.40	$2,725.80	$2,343.00	$2,734.60	$894.30	$2,409.00		$1,681.90	$2,128.50	
80	$1,974.50	$2,335.30	$3,025.00	$2,600.40	$3,033.80	$992.20	$2,674.10		$1,864.50	$2,363.90	
85	$2,136.20	$2,526.70	$3,273.60	$2,813.80	$3,284.60	$1,074.70	$2,894.10		$2,019.60	$2,557.50	

Chicago Area

Standardized Medicare Supplement Plans Available - Annual Premium Estimates

Age	A	B	C	D	F	FHD	G	K	L	M	N
UNITED AMERICAN INSURANCE COMPANY				**www.unitedamerican.com**		**800/331-2512**	Pre-Ex **2**	Application Fee **0**	Crossover **yes**		
64 & Under	$1,992.73	$5,452.25	$3,163.47	$3,979.85	$3,810.52	$3,993.31	$3,821.73	$1,957.96	$2,750.79		$3,336.17
65	$1,532.95	$2,260.74	$2,515.30	$2,339.24	$2,528.76	$576.40	$2,350.45	$1,238.03	$1,739.29		$1,991.61
70	$1,877.22	$2,828.17	$3,179.17	$3,006.47	$3,192.63	$767.04	$3,017.69	$1,651.82	$2,321.30		$2,576.98
75	$1,992.73	$3,104.04	$3,607.54	$3,437.09	$3,621.00	$958.80	$3,448.31	$1,839.10	$2,587.07		$2,967.22
80	$1,992.73	$3,163.47	$3,979.85	$3,810.52	$3,993.31	$1,212.23	$3,821.73	$1,957.96	$2,750.79		$3,336.17
85	$1,992.73	$3,163.47	$3,979.85	$3,810.52	$3,993.31	$1,212.23	$3,821.73	$1,957.96	$2,750.79		$3,336.17
UNITED NATIONAL LIFE				**www.unlinsurance.com**		**800/207-8050**	Pre-Ex **0**	Application Fee **20**	Crossover **yes**		
64 & Under	$2,044.10			$2,982.84	$3,134.21		$3,051.53				
65	$917.11			$1,196.70	$1,299.09		$1,222.52				
70	$1,460.68			$1,930.90	$2,074.63		$1,971.60				
75	$1,851.14			$2,510.16	$2,666.88		$2,563.33				
80	$1,985.46			$2,792.80	$2,946.72		$2,850.17				
85	$2,073.61			$3,032.07	$3,183.18		$3,092.23				
UNITED OF OMAHA LIFE INSURANCE COMPANY				**www.mutualofomaha.com**		**877/778-0829**	Pre-Ex **0**	Application Fee **0**	Crossover **yes**		
64 & Under	$2,104.64				$3,049.90		$2,501.51			$2,382.12	
65	$1,183.94				$1,715.86		$1,407.17			$1,340.20	
70	$1,438.08				$2,084.04		$1,709.39			$1,627.78	
75	$1,789.80				$2,594.04		$2,127.57			$2,026.06	
80	$1,987.88				$2,880.91		$2,362.83			$2,250.10	
85	$2,070.20				$3,000.30		$2,460.81			$2,343.33	

Chicago Area

Standardized Medicare Supplement Plans Available - Annual Premium Estimates

Age	A	B	C	D	F	FHD	G	K	L	M	N
UNITED TEACHER ASSOCIATES INSURANCE COMPANY				**www.utainteractive.com**		**800/880-8824**	Pre-Ex **6**	Application Fee **25**	Crossover **yes**		
64 & Under	$2,387.40	$2,786.45	$3,352.25	$2,922.15	$3,374.10		$2,995.75				$2,362.10
65	$1,296.05	$1,513.40	$1,810.10	$1,587.00	$1,876.80		$1,627.25				$1,313.30
70	$1,470.85	$1,715.80	$2,056.20	$1,799.75	$2,110.25		$1,844.60				$1,477.75
75	$1,745.70	$2,037.80	$2,473.65	$2,135.55	$2,526.55		$2,190.75				$1,768.70
80	$1,983.75	$2,316.10	$2,810.60	$2,428.80	$2,852.00		$2,489.75				$1,996.40
85	$2,157.40	$2,518.50	$3,063.60	$2,639.25	$3,090.05		$2,707.10				$2,163.15
USAA LIFE INSURANCE COMPANY				**www.usaa.com**		**800/531-8000**	Pre-Ex **0**	Application Fee **0**	Crossover **yes**		
64 & Under	$1,709.00				$2,783.00						
65	$956.00				$1,557.00						
70	$1,119.00				$1,820.00						
75	$1,338.00				$2,175.00						
80	$1,550.00				$2,519.00						
85	$1,709.00				$2,783.00						
WORLD CORP INSURANCE COMPANY				**www.americanenterprise.com**		**800/822-9993**	Pre-Ex **0**	Application Fee **0**	Crossover **yes**		
64 & Under	$3,156.62				$4,209.72	$1,667.62					
65	$1,657.68				$2,210.70	$875.79					
70	$1,858.30				$2,478.26	$981.75					
75	$2,251.60				$3,002.83	$1,189.52					
80	$2,594.18				$3,459.47	$1,370.45					
85	$2,935.36				$3,914.59	$1,550.81					

Medicare SELECT Policy Rate Charts

Chicago Area

Standardized Medicare Select Plans Available- Annual Premium Estimates

Age	A	B	C	D	F	G	K	N
AARP / UNITED HEALTHCARE INSURANCE COMPANY			**www.aarphealthcare.com**	**800/523-5800**		**Pre-ex 3**	**Application fee 0**	**Crossover yes**
64 & Under			$2,902.50		$2,920.50			
65			$1,354.50		$1,362.90			
70			$1,935.00		$1,947.00			
75			$2,128.50		$2,141.70			
80			$2,128.50		$2,141.70			
85			$2,128.50		$2,141.70			
BLUE CROSS/BLUE SHIELD OF ILLINOIS			**www.bcbsil.com**	**800/646-3000**		**Pre-ex 0**	**Application fee 0**	**Crossover yes**
64 & Under		$2,280.00	$2,472.00		$2,700.00	$2,424.00		$1,896.00
65		$1,176.00	$1,476.00		$1,560.00	$1,416.00		$1,104.00
70		$1,632.00	$2,004.00		$2,208.00	$1,980.00		$1,536.00
75		$1,896.00	$2,244.00		$2,484.00	$2,232.00		$1,740.00
80		$2,172.00	$2,352.00		$2,568.00	$2,292.00		$1,788.00
85		$2,280.00	$2,472.00		$2,700.00	$2,424.00		$1,896.00
COLUMBIAN MUTUAL LIFE			**www.cfglife.com**	**866/703-7223**		**Pre-ex 0**	**Application fee 25**	**Crossover yes**
64 & Under					$2,815.28	$2,338.56		
65					$1,478.31	$1,206.26		
70					$1,701.51	$1,388.41		
75					$1,937.93	$1,584.60		
80					$2,154.88	$1,766.28		
85					$2,333.37	$1,917.63		

Chicago Area

Standardized Medicare Select Plans Available- Annual Premium Estimates

Age	A	B	C	D	F	G	K	N
CONSTITUTION LIFE INSURANCE		**www.constitutionlife.com**		**800/789-6364**		**Pre-ex 6**	**Application fee 15**	**Crossover yes**
64 & Under		$1,887.84	$2,487.68	$2,220.88	$2,496.88			$2,405.80
65		$1,318.36	$1,503.28	$1,270.52	$1,508.80			$1,016.60
70		$1,660.60	$1,867.60	$1,621.96	$1,872.20			$1,323.88
75		$1,844.60	$2,149.12	$1,893.36	$2,153.72			$1,587.92
80		$1,887.84	$2,362.56	$2,100.36	$2,370.84			$1,821.60
85		$1,887.84	$2,487.68	$2,220.88	$2,496.88			$1,991.80
GERBER LIFE INSURANCE			**www.gerber.com**	**914/272-4000**		**Pre-ex 0**	**Application fee 25**	**Crossover yes**
64 & Under					$2,887.79	$2,488.76		
65					$1,570.18	$1,323.76		
70					$1,860.96	$1,568.71		
75					$2,099.63	$1,774.50		
80					$2,280.03	$1,933.12		
85					$2,435.31	$2,071.70		
PEKIN LIFE INSURANCE COMPANY		**www.pekininsurance.com**		**800/322-0160**		**Pre-ex 6**	**Application fee 0**	**Crossover yes**
64 & Under					$3,168.25			
65					$1,388.05			
70					$1,827.35			
75					$2,370.15			
80					$2,714.00			
85					$2,968.15			

Chicago Area

Standardized Medicare Select Plans Available- Annual Premium Estimates

STERLING LIFE INSURANCE **www.sterlingplans.com** **800/688-0010** **Pre-ex 0** **Application fee 0** **Crossover yes**

Age	A	B	C	D	F	G	K	N
64 & Under	$1,966.43	$2,084.14	$2,550.08		$2,251.26	$2,046.81	$956.05	$1,684.43
65	$1,540.56	$1,609.77	$1,849.83		$1,633.65	$1,475.49	$686.70	$1,207.15
70	$1,749.59	$1,833.67	$2,147.54		$1,896.42	$1,715.32	$798.96	$1,405.19
75	$1,892.38	$1,990.95	$2,370.97		$2,093.52	$1,897.04	$884.48	$1,556.57
80	$1,966.43	$2,084.14	$2,550.08		$2,251.26	$2,046.81	$956.05	$1,684.43
85	$1,966.43	$2,084.14	$2,550.08		$2,251.26	$2,046.81	$956.05	$1,684.43

WHAT IS SHIP?

- The Senior Health Insurance Program (SHIP) is a free insurance counseling service for people with Medicare and their caregivers. SHIP is sponsored by the Illinois Department of Insurance. This service, offered statewide, is available to people of all ages with Medicare.
- SHIP is not affiliated with any insurance company.
- SHIP counselors do not sell or solicit any type of insurance.
- SHIP counselors are trained by the Illinois Department of Insurance to:
  - Organize and assist in filing Medicare and Medicare supplement claims and appeals;
  - Analyze Medicare supplement and long term care insurance policies;
  - Educate and assist consumers with questions about Medicare, Medicare supplement, Medicare Advantage plans, long term care insurance, prescription drug coverage and other health insurance plans.

For Further Information, contact SHIP at:

Illinois Department of Insurance
Senior Health Insurance Program (SHIP)
320 West Washington
Springfield, IL 62767-0001

1-800-548-9034
217-524-4872 (TDD)

website: **www.insurance.illinois.gov**
email: **DOI.SHIP@illinois.gov**

Printed by authority of the State of Illinois, 0221-12, 09/11, 10M