Cover Page - Rates Female Non-Tobacco Monthly Plan Rates for New Jersey

AARP® Medicare Supplement Insurance Plans insured by UnitedHealthcare Insurance Company

		P	lans Availab	le to All App	licants			Medicare first eligible before 2020 only⁴			
Gr	oup 1	Applies	s to individua	ls whose plar birthday or N	n effective da Medicare Par	te will be wit	hin ten years date, if later.	following the	eir 65th		
Age ¹	Plan A	Plan B	Plan D	Plan G	Plan K	Plan L	Plan N	Plan C ⁴	Plan F ⁴		
	Standard Rates with Enrollment Discount ² for individuals ages 65-76 whose acceptance is guaranteed or who do not have any of the medical conditions on the application ³ .										
65	\$118.72	\$164.00	\$160.96	\$153.44	\$63.52	\$92.64	\$131.36	\$204.96	\$185.92		
66	\$124.28	\$171.68	\$168.50	\$160.63	\$66.49	\$96.98	\$137.51	\$214.56	\$194.63		
67	\$129.85	\$179.37	\$176.05	\$167.82	\$69.47	\$101.32	\$143.67	\$224.17	\$203.35		
68	\$135.41	\$187.06	\$183.59	\$175.01	\$72.45	\$105.66	\$149.83	\$233.78	\$212.06		
69	\$140.98	\$194.75	\$191.14	\$182.21	\$75.43	\$110.01	\$155.99	\$243.39	\$220.78		
70	\$146.54	\$202.43	\$198.68	\$189.40	\$78.40	\$114.35	\$162.14	\$252.99	\$229.49		
71	\$152.11	\$210.12	\$206.23	\$196.59	\$81.38	\$118.69	\$168.30	\$262.60	\$238.21		
72	\$157.67	\$217.81	\$213.77	\$203.78	\$84.36	\$123.03	\$174.46	\$272.21	\$246.92		
73	\$163.24	\$225.50	\$221.32	\$210.98	\$87.34	\$127.38	\$180.62	\$281.82	\$255.64		
74	\$168.80	\$233.18	\$228.86	\$218.17	\$90.31	\$131.72	\$186.77	\$291.42	\$264.35		
75	\$174.37	\$240.87	\$236.41	\$225.36	\$93.29	\$136.06	\$192.93	\$301.03	\$273.07		
76	\$179.93	\$248.56	\$243.95	\$232.55	\$96.27	\$140.40	\$199.09	\$310.64	\$281.78		
	Standa	rd Rates for	individuals have any	ages 77 and of the medic	d older whose cal condition	se acceptants on the ap	ce is guaran plication ³ .	iteed <u>or</u> who	do not		
77+	\$185.50	\$256.25	\$251.50	\$239.75	\$99.25	\$144.75	\$205.25	\$320.25	\$290.50		
	Leve	I 2 Rates for ha	individuals ave one or m	ages 65 and nore of the m	l older whos nedical cond	se acceptand litions on th	ce is not gua e applicatio	aranteed <u>and</u> n ³ .	<u>l</u> who		
65÷	\$278.25	\$384.37	\$377.25	\$424.35	\$148.87	\$217.12	\$348.92	\$480.37	\$435.75		

Gr	roup 2	Applies to individuals whose plan effective date will be ten or more years following their 65th birthday or Medicare Part B effective date, if later.								
Age ¹	e ¹ Plan A Plan B Plan D Plan G Plan K Plan L Plan N Plan C								Plan F ⁴	
	Level 1 Rates for individuals ages 75 and older whose acceptance is guaranteed <u>or</u> who do not have any of the medical conditions on the application ³ .									
75+	\$204.05	\$281.87	\$276.65	\$263.72	\$109.17	\$159.22	\$225.77	\$352.27	\$319.55	
	Level 2 Rates for individuals ages 75 and older whose acceptance is not guaranteed and who have one or more of the medical conditions on the application ³ .									
75+	\$278.25	\$384.37	\$377.25	\$424.35	\$148.87	\$217.12	\$348.92	\$480.37	\$435.75	

The rates above are for plan effective dates from August 2023 - July 2024 and may change.

Cover Page - Rates Female Tobacco Monthly Plan Rates for New Jersey

for New Jersey

AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company

		P	lans Availab	le to All App	licants				irst eligible 020 only⁴		
Gr	oup 1	Applies	to individua	ls whose plar birthday or N	n effective da Medicare Part	te will be with B effective o	nin ten years date, if later.	following the	ir 65th		
Age ¹	Plan A	Plan B	Plan D	Plan G	Plan K	Plan L	Plan N	Plan C ⁴	Plan F⁴		
	Standard Rates with Enrollment Discount ² for individuals ages 65-76 whose acceptance is guaranteed or who do not have any of the medical conditions on the application ³ .										
65	\$130.59	\$180.39	\$177.05	\$168.78	\$69.86	\$101.90	\$144.49	\$225.45	\$204.51		
66	\$136.71	\$188.85	\$185.35	\$176.69	\$73.14	\$106.67	\$151.26	\$236.02	\$214.09		
67	\$142.83	\$197.30	\$193.65	\$184.60	\$76.41	\$111.45	\$158.03	\$246.58	\$223.68		
68	\$148.95	\$205.76	\$201.95	\$192.51	\$79.69	\$116.23	\$164.81	\$257.15	\$233.27		
69	\$155.07	\$214.22	\$210.25	\$200.42	\$82.96	\$121.00	\$171.58	\$267.72	\$242.85		
70	\$161.19	\$222.67	\$218.55	\$208.33	\$86.24	\$125.78	\$178.35	\$278.29	\$252.44		
71	\$167.32	\$231.13	\$226.85	\$216.25	\$89.51	\$130.56	\$185.13	\$288.86	\$262.03		
72	\$173.44	\$239.58	\$235.15	\$224.16	\$92.79	\$135.33	\$191.90	\$299.42	\$271.61		
73	\$179.56	\$248.04	\$243.45	\$232.07	\$96.06	\$140.11	\$198.67	\$309.99	\$281.20		
74	\$185.68	\$256.50	\$251.75	\$239.98	\$99.34	\$144.89	\$205.45	\$320.56	\$290.79		
75	\$191.80	\$264.95	\$260.05	\$247.89	\$102.61	\$149.66	\$212.22	\$331.13	\$300.37		
76	\$197.92	\$273.41	\$268.35	\$255.80	\$105.89	\$154.44	\$218.99	\$341.70	\$309.96		
	Standa	ard Rates for	individuals have any	ages 77 and of the medic	d older whos al condition	se acceptants on the ap	ce is guaran plication³.	teed <u>or</u> who	do not		
77÷	\$204.05	\$281.87	\$276.65	\$263.72	\$109.17	\$159.22	\$225.77	\$352.27	\$319.55		
	Leve	l 2 Rates for ha	individuals ave one or m	ages 65 and nore of the m	l older whos nedical cond	e acceptand litions on th	ce is not gua e application	ranteed <u>and</u>	<u>l</u> who		
65+	\$306.07	\$422.80	\$414.97	\$466.78	\$163.75	\$238.83	\$383.80	\$528.40	\$479.32		

Gr	oup 2	Applies	Applies to individuals whose plan effective date will be ten or more years following their 65th birthday or Medicare Part B effective date, if later.							
Age ¹	Plan A	Plan B	Plan D	Plan G	Plan K	Plan L	Plan N	Plan C ⁴	Plan F ⁴	
	Level 1 Rates for individuals ages 75 and older whose acceptance is guaranteed <u>or</u> who do not have any of the medical conditions on the application ³ .									
75+	\$224.45	\$310.05	\$304.31	\$290.09	\$120.08	\$175.14	\$248.34	\$387.49	\$351.50	
	Level 2 Rates for individuals ages 75 and older whose acceptance is not guaranteed <u>and</u> who have one or more of the medical conditions on the application ³ .									
75+	\$306.07	\$422.80	\$414.97	\$466.78	\$163.75	\$238.83	\$383.80	\$528.40	\$479.32	

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Cover Page - Rates Male Non-Tobacco Monthly Plan Rates for New Jersey

AARP® Medicare Supplement Insurance Plans insured by UnitedHealthcare Insurance Company

			Medicare first eligible before 2020 only ⁴								
Gr	oup 1	Applies	to individual	s whose plan birthday or M	effective dat ledicare Part	te will be with B effective o	in ten years late, if later.	following the	ir 65th		
Age ¹	Plan A	Plan B	Plan D	Plan G	Plan K	Plan L	Plan N	Plan C ⁴	Plan F ⁴		
	Standard Rates with Enrollment Discount ² for individuals ages 65-76 whose acceptance is guaranteed or who do not have any of the medical conditions on the application ³ .										
65	\$136.32	\$188.32	\$184.96	\$176.32	\$72.96	\$106.40	\$150.88	\$235.52	\$213.60		
66	\$142.71	\$197.14	\$193.63	\$184.58	\$76.38	\$111.38	\$157.95	\$246.56	\$223.61		
67	\$149.10	\$205.97	\$202.30	\$192.85	\$79.80	\$116.37	\$165.02	\$257.60	\$233.62		
68	\$155.49	\$214.80	\$210.97	\$201.11	\$83.22	\$121.36	\$172.09	\$268.64	\$243.63		
69	\$161.88	\$223.63	\$219.64	\$209.38	\$86.64	\$126.35	\$179.17	\$279.68	\$253.65		
70	\$168.27	\$232.45	\$228.31	\$217.64	\$90.06	\$131.33	\$186.24	\$290.72	\$263.66		
71	\$174.66	\$241.28	\$236.98	\$225.91	\$93.48	\$136.32	\$193.31	\$301.76	\$273.67		
72	\$181.05	\$250.11	\$245.65	\$234.17	\$96.90	\$141.31	\$200.38	\$312.80	\$283.68		
73	\$187.44	\$258.94	\$254.32	\$242.44	\$100.32	\$146.30	\$207.46	\$323.84	\$293.70		
74	\$193.83	\$267.76	\$262.99	\$250.70	\$103.74	\$151.28	\$214.53	\$334.88	\$303.71		
75	\$200.22	\$276.59	\$271.66	\$258.97	\$107.16	\$156.27	\$221.60	\$345.92	\$313.72		
76	\$206.61	\$285.42	\$280.33	\$267.23	\$110.58	\$161.26	\$228.67	\$356.96	\$323.73		
	Standa	rd Rates for	individuals have any	ages 77 and of the medic	older whos	e acceptance s on the app	e is guarant plication ³ .	teed <u>or</u> who	do not		
77÷	\$213.00	\$294.25	\$289.00	\$275.50	\$114.00	\$166.25	\$235.75	\$368.00	\$333.75		
	Level	2 Rates for ha	individuals ve one or m	ages 65 and ore of the m	older whos edical cond	e acceptanc itions on the	e is not gua application	ranteed <u>and</u> 1 ³ .	<u>l</u> who		
65+	\$319.50	\$441.37	\$433.50	\$487.63	\$171.00	\$249.37	\$400.77	\$552.00	\$500.62		

Gr	oup 2	Applies	Applies to individuals whose plan effective date will be ten or more years following their 65th birthday or Medicare Part B effective date, if later.							
Age ¹	Plan A	Plan B	Plan D	Plan G	Plan K	Plan L	Plan N	Plan C ⁴	Plan F ⁴	
	Level 1 Rates for individuals ages 75 and older whose acceptance is guaranteed or who do not have any of the medical conditions on the application ³ .									
75+	\$234.30	\$323.67	\$317.90	\$303.05	\$125.40	\$182.87	\$259.32	\$404.80	\$367.12	
	Level 2 Rates for individuals ages 75 and older whose acceptance is not guaranteed <u>and</u> who have one or more of the medical conditions on the application ³ .									
75+	\$319.50	\$441.37	\$433.50	\$487.63	\$171.00	\$249.37	\$400.77	\$552.00	\$500.62	

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Cover Page - Rates Male Tobacco Monthly Plan Rates for New Jersey AARP® Medicare Supplement Insurance Plans insured by UnitedHealthcare Insurance Company

		Medicare first eligible before 2020 only ⁴									
Gr	oup 1	Applies	to individual	ls whose plar birthday or M	effective dat ledicare Part	e will be with B effective o	in ten years late, if later.	following the	ir 65th		
Age ¹	Plan A	Plan B	Plan D	Plan G	Plan K	Plan L	Plan N	Plan C⁴	Plan F ⁴		
	Standard Rates with Enrollment Discount ² for individuals ages 65-76 whose acceptance is guaranteed or who do not have any of the medical conditions on the application ³ .										
65	\$149.95	\$207.14	\$203.45	\$193.95	\$80.25	\$117.03	\$165.96	\$259.07	\$234.95		
66	\$156.98	\$216.85	\$212.99	\$203.04	\$84.01	\$122.52	\$173.74	\$271.21	\$245.97		
67	\$164.01	\$226.56	\$222.53	\$212.13	\$87.78	\$128.00	\$181.52	\$283.36	\$256.98		
68	\$171.03	\$236.27	\$232.06	\$221.22	\$91.54	\$133.49	\$189.30	\$295.50	\$267.99		
69	\$178.06	\$245.98	\$241.60	\$230.31	\$95.30	\$138.98	\$197.08	\$307.64	\$279.01		
70	\$185.09	\$255.69	\$251.14	\$239.40	\$99.06	\$144.46	\$204.86	\$319.79	\$290.02		
71	\$192.12	\$265.40	\$260.67	\$248.50	\$102.82	\$149.95	\$212.64	\$331.93	\$301.03		
72	\$199.15	\$275.11	\$270.21	\$257.59	\$106.59	\$155.43	\$220.42	\$344.08	\$312.05		
73	\$206.18	\$284.82	\$279.75	\$266.68	\$110.35	\$160.92	\$228.20	\$356.22	\$323.06		
74	\$213.21	\$294.53	\$289.28	\$275.77	\$114.11	\$166.41	\$235.98	\$368.36	\$334.07		
75	\$220.24	\$304.24	\$298.82	\$284.86	\$117.87	\$171.89	\$243.76	\$380.51	\$345.09		
76	\$227.27	\$313.95	\$308.36	\$293.95	\$121.63	\$177.38	\$251.54	\$392.65	\$356.10		
	Standa	rd Rates for	individuals have any	ages 77 and of the medic	l older whos al condition	e acceptand s on the app	e is guarant plication ³ .	teed <u>or</u> who	do not		
77÷	\$234.30	\$323.67	\$317.90	\$303.05	\$125.40	\$182.87	\$259.32	\$404.80	\$367.12		
	Leve	2 Rates for ha	individuals we one or m	ages 65 and nore of the m	older whos edical cond	e acceptanc itions on the	e is not gua application	ranteed <u>and</u> 1 ³ .	who		
65+	\$351.45	\$485.50	\$476.85	\$536.39	\$188.10	\$274.30	\$440.84	\$607.20	\$550.68		

Group 2 Applies to individuals whose plan effective date will be ten or more years following birthday or Medicare Part B effective date, if later.						following the	ir 65th			
Age ¹	ge ¹ Plan A Plan B Plan D Plan G Plan K Plan L Plan N Plan							Plan C⁴	Plan F⁴	
	Level 1 Rates for individuals ages 75 and older whose acceptance is guaranteed <u>or</u> who do not have any of the medical conditions on the application ³ .									
75 +	\$257.73	\$356.03	\$349.69	\$333.35	\$137.94	\$201.15	\$285.25	\$445.28	\$403.83	
	Level 2 Rates for individuals ages 75 and older whose acceptance is not guaranteed and who have one or more of the medical conditions on the application ³ .									
75+	\$351.45	\$485.50	\$476.85	\$536.39	\$188.10	\$274.30	\$440.84	\$607.20	\$550.68	

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