
State: District of Columbia **Filing Company:** UnitedHealthcare Insurance Company
TOI/Sub-TOI: MS08G Group Medicare Supplement - Standard Plans 2010/MS08G.001 Plan A 2010
Product Name: GROUP MEDICARE SUPPLEMENT
Project Name/Number: ADVERTISING/FM16-1047

Filing at a Glance

Company: UnitedHealthcare Insurance Company
Product Name: GROUP MEDICARE SUPPLEMENT
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TOI: MS08G Group Medicare Supplement - Standard Plans 2010
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General Information

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Filing Description:

Submitted for your review is advertising for use in connection with the AARP group health insurance plans. The enclosed advertising is new and does not replace any previously submitted advertisement. The material included within this filing is an Invitation to Contract.

The enclosed materials will be utilized with the following which were approved by the Department on 9/29/09 under UHLC-126263873.

Standardized Medicare Supplement Certificates: MDA0326 – MDN0332 (Non-Agent Sales)
Plan Benefit Tables: BT25 – BT31, BT002 ST AB, BT002 ST CF, BT002 ST KLN
Plan Overviews: POV3
Rules & Disclosures: RD4
Premium Rate Pages: MRP0001 (All non-agent sales marketing channels)
MRP0003 (All marketing channels including agent sales)

The following enrollment application(s) will be used with the enclosed advertising material(s) approved by the Department on 9/29/09 under SERFF Tracking Number UHLC-126263873: M74640MNMDC01 01B, M75146IMMDC01 01B.

The definitions, disclosures, eligibility requirements, exclusions, limitations, Group Policy Form No. GRP 79171 GPS-1, as well as, the statement, "...not connected with, or endorsed by, the U.S. Government or the federal Medicare program," can be found in BA25014ST (07-12) which was approved by the Department on 6/29/2012, under SERFF Tracking Number UHLC-128514562.

Company and Contact

Filing Contact Information

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State: District of Columbia**Filing Company:** UnitedHealthcare Insurance Company**TOI/Sub-TOI:** MS08G Group Medicare Supplement - Standard Plans 2010/MS08G.001 Plan A 2010**Product Name:** GROUP MEDICARE SUPPLEMENT**Project Name/Number:** ADVERTISING/FM16-1047**Filing Company Information**

UnitedHealthcare Insurance

CoCode: 79413

State of Domicile: Connecticut

Company

Group Code: 707

Company Type: Life and

185 Asylum Street

Group Name:

Health

Hartford, CT 06103

FEIN Number: 36-2739571

State ID Number: 79413

(860) 702-5000 ext. [Phone]

Filing Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

State:	District of Columbia	Filing Company:	UnitedHealthcare Insurance Company
TOI/Sub-TOI:	MS08G Group Medicare Supplement - Standard Plans 2010/MS08G.001 Plan A 2010		
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Form Schedule

Lead Form Number: BA25417ST								
Item No.	Schedule Item Status	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments
1		Brochure	BA25417ST	ADV	Initial		45.000	BA25417ST_Filing.pdf
2		Brochure	BA25418ST	ADV	Initial		45.000	BA25418ST_Filling.pdf

Form Type Legend:

ADV	Advertising	AEF	Application/Enrollment Form
CER	Certificate	CERA	Certificate Amendment, Insert Page, Endorsement or Rider
DDP	Data/Declaration Pages	FND	Funding Agreement (Annuity, Individual and Group)
MTX	Matrix	NOC	Notice of Coverage
OTH	Other	OUT	Outline of Coverage
PJK	Policy Jacket	POL	Policy/Contract/Fraternal Certificate
POLA	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	SCH	Schedule Pages

Contents



AARP® Medicare Supplement Insurance Plans
Insured by UnitedHealthcare Insurance Company

The sections listed below are color coded for easy reference.

1 Understand the Basics

Learn how Medicare supplement insurance works with Medicare, what it provides, who is eligible, and how timing is important.

2 Compare Your Options

See how Medicare supplement plans compare with other options and why AARP Medicare Supplement Insurance may be right for you.

3 Take the Next Step

See the plans and rates chart to compare all AARP Medicare Supplement Plans and their prices. Find out who to call with questions and how to enroll.

4 Reference Materials

Commonly Asked Questions

Read common questions and answers about Medicare supplement insurance.

Glossary

Find the meaning of insurance terms underlined in this booklet.

Your Guide to Important Information

Find important legal information you should review.

Outline of Coverage

Review detailed information about your plan choices, benefits, and rules that apply. All insurance companies must give you these documents by law.

Ready to enroll?

Simply complete the enclosed AARP Medicare Supplement Insurance enrollment form. (AARP membership is required for enrollment in an AARP Medicare Supplement Plan. If you're not already a member, we've included an application to make it easy for you to join.) You can return the form(s) in the envelope provided.

BA25417ST

Insured by UnitedHealthcare Insurance Company, Horsham, PA (UnitedHealthcare Insurance Company of New York, Islandia, NY for New York residents). Policy Form No. GRP 79171 GPS-1 (G-36000-4).

In some states, plans may be available to persons under age 65 who are eligible for Medicare by reason of disability or End-Stage Renal Disease.

Not connected with or endorsed by the U.S. Government or the federal Medicare program.

This is a solicitation of insurance. A licensed insurance agent/producer may contact you.

See the enclosed for complete information, including benefits, costs, eligibility requirements, exclusions, and limitations.

1 Understand the Basics

This section shows how Medicare supplement insurance pays some of the costs Medicare doesn't pay. If you want to learn how Medicare supplement insurance works, who is eligible, and when to enroll, this is the section for you.

What is Medicare supplement insurance?

Medicare is a government plan that helps millions of Americans pay for the health care they need. But it doesn't pay for everything. In fact, Medicare only covers about 80% of your Medicare Part B medical expenses.

That's why there's Medicare supplement insurance—sometimes also called Medigap insurance. It helps cover some of the out-of-pocket medical expenses Medicare leaves behind, so you may not have to. Depending on the plan, Medicare supplement insurance helps pay some of the costs that aren't paid by Medicare Part A and Part B, like deductibles and co-insurance.

Need help with a word? Terms you see underlined are defined in the *Glossary*.

How does Medicare supplement insurance work with Medicare?

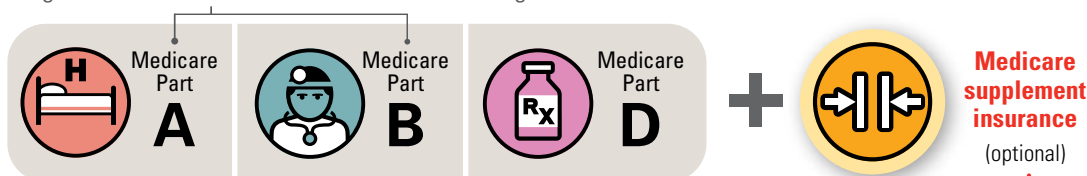
Medicare Part A (hospital insurance)

For most people, Part A comes with no monthly premium. It's designed to help cover inpatient hospital care, including skilled nursing facility stays (following a qualified hospital stay) and hospice care. You are responsible for deductibles and co-insurance.

Medicare Part D (prescription drug coverage)

This separate, optional insurance may help lower your prescription drug costs. Private insurance companies approved by Medicare offer these plans, and premiums may vary. There will be differences between plans, including what drugs are covered and which pharmacies you can use.

Together, Part A and Part B are often called "Original Medicare."



Medicare Part B (medical insurance)

Part B helps cover doctor visits and outpatient care. It also covers some other medical services not covered by Part A, such as some services of physical and occupational therapists. The standard premium is [\$104.90], and can be deducted directly from your Social Security benefits. You're responsible for the co-insurance and yearly deductible.

Medicare supplement insurance

If you're enrolled in Medicare Parts A and B, a Medicare supplement insurance plan can help pay some of the costs that Medicare Parts A and B don't pay—like co-insurance and deductibles. Offered by private insurance companies, premiums vary by plan and company. You can use your coverage anywhere in the U.S. when you travel, and some plans pay a benefit for emergency care abroad. By law, Medicare supplement plans cannot provide benefits for prescription drugs.

What do I need to know about Medicare supplement insurance?

Now that you know how Medicare supplement insurance is designed to work with Medicare Part A and Part B, it's important to also understand these 6 key points:

Want a quick comparison of the plans available in your state?

See the plans and rates chart in Section 3 of this booklet.

1 Medicare supplement insurance comes in 10 different plans.

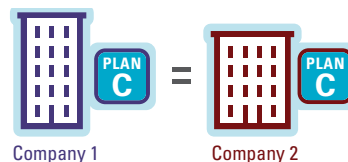
The federal government has defined standard benefits for each of the plans, named with letters of the alphabet.

Insurance companies offering Medicare supplement plans can choose the plans they want to offer, but must include at least Plan A.



2 Each plan's standard benefits are the same from company to company.

For example, one company's Plan C must provide the same standard benefits as another company's Plan C, even though the plan premiums may be different. "Value-added" services, such as discounts on eyewear or gym memberships, are not part of the plan benefits and may vary from insurer to insurer.



3 Each Medicare supplement plan provides at least these basic benefits:



Medicare Part A (Hospital) co-insurance, plus coverage for 365 additional days after Medicare coverage ends.



Medicare Part B (Medical) co-insurance—generally 20% of the Medicare-approved amount—or co-payments for hospital outpatient care.



The first 3 pints of blood each year. (Medicare pays for all blood after the first 3 pints.)

Part A co-insurance for hospice care.

4 Each of the plans is designed to fill different needs.

So, you may choose the plan that's best for you. For example, there are plans to help cover your Part A or B deductibles, emergency care abroad, or Part B excess charges,* to name a few.

5 Plan availability may vary from state to state.

Not all types of Medicare supplement plans may be available in your state. Contact your State Insurance Department or State Health Insurance Assistance Program for more information.

6 Some insurance companies in some states offer Select Plans.



A Select Plan can be any of the standardized Medicare supplement plans mentioned in key point #1, but it often costs less. This is because you must use specific hospitals, and in some cases, specific doctors, to get your full insurance benefits (except in emergencies).

What costs can Medicare supplement insurance help with?




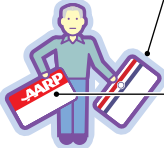


Depending on the plan, Medicare supplement insurance helps you pay for some of the costs that aren't paid by Medicare, including co-insurance, co-payments, and deductibles.

- **Co-insurance** is splitting your health care costs with the plan on a percentage basis. For example, you pay 20% and the plan pays 80%.
- **Co-payment** is a fixed amount you pay, such as \$10 for a service or product. Some people call this a "co-pay."
- **Deductible** is a pre-set amount you have to pay first, before Medicare or other insurance starts to pay.

*Under OH and PA law, a physician may not charge or collect fees from Medicare patients that exceed the Medicare-approved Part B charge. Plans F and G pay benefits for excess charges when services are rendered in a jurisdiction not having a balance billing law.

How do I know if I am eligible for an AARP Medicare Supplement Insurance Plan?

You must meet these 4 requirements:

-  Typically, you are 65 or older. (However, please see eligibility requirements for your state in the guide to important information in Section 4. In some states, plans may be available to persons under age 65 who are eligible for Medicare by reason of disability or End-Stage Renal Disease.)
-  You are enrolled in both Medicare Part A and Part B.
-  You do not duplicate Medicare supplement insurance coverage.
-  You are an AARP member or a spouse or domestic partner of a member. (If you are not a member, you must first become a member.)

Please note that these requirements are for AARP Medicare Supplement Plans. Other Medicare supplement insurance companies may have different requirements.

Not an AARP member? It's easy and inexpensive to sign up—just complete the enclosed form. (Forms are included in non-member packages only.)

Why should I enroll now?

By enrolling during “open enrollment,” which lasts 6 months after you enroll in Medicare Part B at age 65 or older, your acceptance is guaranteed. This means you cannot be turned down—even if you have a prior health condition. Please note that you can send in your Enrollment Form up to 3 months before turning 65 and enrolling in Medicare Part B. This way, you'll be sure that your AARP Medicare Supplement Plan will be effective when your Medicare coverage begins.

Also, if you enroll during the “open enrollment” period, you'll receive a waiver of the “pre-existing condition exclusion.” This means you're eligible to receive benefits for any covered hospital stays or medical services starting on or after the date your plan goes into effect—despite any prior health conditions you may have.

Please read this if you are currently enrolled in an AARP Medicare Supplement Plan and decide to switch plans: The pre-existing conditions waiting period may be reduced or eliminated and you'll have no gap in your insurance coverage. When changing from one AARP Medicare Supplement Plan to another, keep in mind that your benefits will change and you may not be able to return to your original plan.

Save [XX%] with the Enrollment Discount! With an AARP Medicare Supplement Plan, you'll save [XX%] on your first-year premium with an enrollment discount when you apply by age 65. And you will continue to receive discounts for the next [XX] years! The discount percentage reduces 3% each year on the anniversary date of your plan until the discount runs out.

Want Prescription Drug Coverage?

By law, Medicare supplement insurance policies can no longer offer coverage for prescription drugs. Prescription drug coverage, also known as Part D, is available separately through private insurance companies approved by Medicare.

If you want coverage for prescription drug costs, call [1.888.663.4099] and ask for information on prescription drug coverage. Enrolling in a Medicare supplement plan and a Part D plan will give you more complete health coverage. It's important to note that if you don't enroll in a Medicare Part D plan when you first become eligible, you might be subject to the Medicare-imposed late-enrollment penalty.**

For more information, call [1.888.663.4099].

** If you qualify for extra help, you will not have a late-enrollment penalty (LEP). Also, if you have other prescription coverage at least as good as Medicare (also known as creditable coverage), you may not be assessed an LEP.

2 Compare Your Options

This section shows what Medicare supplement insurance offers in comparison to other options. It also tells you more about why an AARP Medicare Supplement Plan might be right for you.

Medicare Advantage plans are also called Medicare Part C plans. Look in the *Glossary*.

How do Medicare supplement insurance plans compare with Medicare Advantage plans?

A Medicare Advantage plan is a Medicare-approved plan run by a private company that combines coverage for hospital costs, doctor visits, and other medical services. This type of plan provides all of your Medicare Part A (hospital) and Medicare Part B (medical) coverage. Generally, you can only use doctors and hospitals in the plan network. If you choose a Medicare Advantage plan, you do not need a Medicare supplement plan.

The chart below explains how Medicare supplement insurance compares to Medicare Advantage plans, so you may make a choice that fits your life.

Read this if you're switching plans.

If you currently have an insurance plan, it is best to wait until your new policy is effective before dropping your old policy.

Medicare supplement insurance plans help provide the flexibility you need...

	Medicare Supplement Plans	Medicare Advantage Plans
Choice	Select your own doctors and hospitals, as long as they accept Medicare patients.	You may be required to use network doctors and hospitals.
Access	See specialists without referrals.	You may need referrals and may be required to use network specialists.
Freedom	No <u>network</u> restrictions. Use your coverage anywhere in the U.S. when you travel.	You may have network restrictions. Emergency care only for travel within the U.S.
Flexibility	You may switch to another Medicare supplement plan at any time.♦	Generally, there are specific periods during the year when you can switch to another Medicare Advantage plan.
Cost	Monthly premiums in addition to Part B, with limited out-of-pocket costs.	Low or no monthly <u>premiums</u> , in addition to Part B, with <u>deductibles</u> , <u>co-insurance</u> , and co-pays when you use services.
Prescription Drug Coverage	None. Consider purchasing a Medicare Part D plan.	This coverage may or may not be included, depending on the plan you choose.

♦ You may be underwritten and not accepted into the plan if you are outside of Open Enrollment or Guaranteed Issue periods, or if accepted, your rates may change.

When you compare AARP Medicare Supplement Insurance to what other companies are offering, what else should you keep in mind?

✔ **Largest individual Medicare supplement insurer.** UnitedHealthcare Insurance Company (UnitedHealthcare) covers more people with Medicare supplement plans nationwide than any other individual insurance carrier.* They are the only plans that carry the AARP name.

*From a report prepared for UnitedHealthcare Insurance Company by Mark Farrah & Associates, "[December 2014] Medigap Enrollment & Market Share," [May 2015]. For a copy of the full report, visit [www.uhcmcdsupstats.com] or call [1-888-663-4099].

✔ **Low annual base rate increases.** AARP Medicare Supplement Plans have a history of low annual base rate increases, which may help you better budget and plan for your healthcare expenses.**

**AARP Medicare Supplement Plan annual rate increases have been [2.9% on average between 2011 and 2015], while varying by specific plan and year. From a report prepared for UnitedHealthcare Insurance Company by ORC International, "Substantiation of Advertising Claims Concerning AARP Medicare Supplement Insurance Plans," [August, 2015]. For a copy of the full report, visit [www.uhcmcdsupstats.com] or call [1-888-663-4099].

✔ **Choice of plans.** There are a variety of AARP Medicare Supplement Insurance Plans available in your state, so it's easy to find one that fits your needs and budget.

✔ **[XX] years of savings.** You'll save [XX%] off your first-year premium if you are age 65 and enrolled in Medicare Part B. Then, you'll save [XX%] off your second-year premium, decreasing 3% each year for the length of the [XX]-year discount period.

✔ **Electronic funds transfer discount.** Save \$2 off of your total monthly household premium (up to \$24 a year) if you have your monthly payment deducted automatically from your bank account.

✔ **5% multi-insured discount.** You can take 5% off your monthly premiums if two members are on the same account and each is insured under an AARP-branded supplemental insurance policy with UnitedHealthcare.

✔ **Special AARP member services.** As an AARP member enrolled in an AARP Medicare Supplement Insurance Plan, you'll receive the special services outlined in the enclosed member services stuffer. These are additional insured member services apart from the AARP Medicare Supplement Plan benefits, are not insurance programs, are subject to geographic availability and may be discontinued at any time. Please note, if you're not already an AARP member, we've included an AARP Membership Application in this kit for you to sign up.

Need help with a word? Terms you see underlined are defined in the *Glossary*.

Questions? Call for answers today.

If you have questions while reviewing this kit, just call [1.888.663.4099]. Your questions will be answered in easy-to-understand language and you'll get help exploring your options.

Call Monday to Friday, 7 a.m. to 11 p.m., and Saturday, 9 a.m. to 5 p.m., Eastern Time. TTY users should call [711].



Check out this example of a Medicare supplement insurance plan in action.

John has an AARP Medicare Supplement Plan C and had a 5-day inpatient hospital stay.¹ Here's how his coverage worked out.



¹This example is for illustrative purposes only. Individual customer experiences may vary.

Medicare Part A Costs

5-day Hospital Stay	[\$22,040.00]
Medicare Part A Pays	– [\$20,752.00]
Part A Deductible John Owes	[\$ 1,288.00]

Medicare Part B Costs

Additional Outpatient Charges	[\$ 5,500.00]
Medicare Part B Deductible John Owes	[\$ 166.00]
Medicare Part B Pays 80% after Deductible	– [\$ 4,267.20]
Remaining 20% John Owes	[\$ 1,066.80]

An AARP Medicare Supplement Plan C paid these costs for John.

Plan C paid for Part A Deductible	– [\$ 1,288.00] ²
Plan C paid for Part B Deductible	– [\$ 166.00] ²
Plan C paid for 20% Medicare Co-insurance	– [\$ 1,066.80]
AARP Medicare Supplement Plan C Total Payment	[\$ 2,520.80]
Total Out-of-Pocket Expenses for John³	[\$ 0.00]

²These are [2016] Medicare Part A & B deductibles.

³The amount of out-of-pocket expenses does not reflect the monthly premium payment.

Look in the back.

Check out Section 4 of this booklet for *Commonly Asked Questions*, a *Glossary*, and *Your Guide to Important Information*.

Who is this insurance offer from?

AARP endorses the AARP Medicare Supplement Insurance Plans, insured by UnitedHealthcare Insurance Company. UnitedHealthcare Insurance Company pays royalty fees to AARP for the use of its intellectual property. These fees are used for the general purposes of AARP. AARP and its affiliates are not insurers.

These are the only Medicare supplement plans that carry the AARP name. One of the ways AARP serves its members is by endorsing products that help to meet their needs, such as AARP Medicare Supplement Insurance Plans.

More than [4 million] AARP Members nationwide are currently enrolled in an AARP Medicare Supplement Insurance Plan.[†]

[†]From a report prepared for UnitedHealthcare Insurance Company by ORC International, “Substantiation of Advertising Claims Concerning AARP Medicare Supplement Insurance Plans,” [August, 2015]. For a copy of the full report, visit [www.uhcmedsupstats.com] or call [1-888-663-4099].

3 Take the Next Step

Now that you've read all about Medicare supplement insurance, it's time to take the next step. Follow these 3 steps to help you choose a plan and enroll.

1 Choose Your Plan.

Review the plans and rates chart beginning on the next page. Personalized for you, [Sample A. Sample,] this section will help you compare all of the AARP Medicare Supplement Plans available to you. [Highlighted are popular plans in [state].] [Highlighted are the plans you recently requested when you spoke to a phone representative.] Benefits marked with a check ✓ are included under the specific plan.

For more detailed plan information, please review the *Outline of Coverage* in Section 4.

2 Find Your Rate.

Plan rates are listed at the bottom of the plans and rates chart.*

When you apply by age 65, you'll save [XX%] on your first-year premium with the Enrollment Discount. And you will continue to receive discounts for the next [XX] years! The discount percentage reduces 3% each year on the anniversary date of your plan until the discount runs out.

Choose the rate for tobacco users if you've used tobacco products within the past 12 months.

3 Enroll.

Once you've decided on a plan, just fill out the enrollment form in the back of this booklet and return it in the envelope provided. [Or enroll online at [AARPMedicareSupplement.com].] In about 2 weeks, you should receive confirmation of your enrollment along with a *Welcome Kit*.

If you have questions or if you'd like help exploring your options, please call Monday to Friday, 7 a.m. to 11 p.m., and Saturday, 9 a.m. to 5 p.m., Eastern Time. So call now. [1.888.663.4099]. TTY users should call [711].

For the earliest plan effective date, enroll by [XX/XX/XXXX].

*The dollar amounts are monthly payments per person. These are current rates and may change.

4 Reference Materials

If you have questions, these materials should help. They give extra details about the available plans, answer common questions, and define special insurance terms often used when talking about Medicare supplement insurance.

Commonly Asked Questions

Get simple, no-nonsense answers to questions commonly asked about Medicare supplement insurance.

Glossary

Find the meaning of special insurance terms used in this booklet.

Your Guide to Important Information

Here, you'll find important legal information you should review.

Outline of Coverage

All insurance companies must give you these documents by law. They offer detailed information about the plan choices available to you.

For a quick summary of AARP Medicare Supplement Plans and rates, see the plans and rates chart in Section 3 of this booklet.

Commonly Asked Questions

Below is a list of commonly asked questions, with straight answers.

What is the difference between “Medigap” and “Medicare supplement insurance”?

There is no difference—both terms have the same meaning. Throughout these materials, the term “Medicare supplement insurance” is used. It’s named that way because it is designed to help cover some of the costs for Medicare Part A and Part B that you would otherwise be responsible to take care of yourself.

What are “Basic Benefits”?

Basic Benefits are standard benefits that each Medicare supplement plan provides. Plan A provides only Basic Benefits. Other plans provide Basic Benefits plus other benefits. Basic Benefits are:

- 1. Hospitalization.** Part A co-insurance plus coverage for 365 additional days after Medicare benefits end.
- 2. Medical Expenses.** Part B co-insurance—generally 20% of Medicare-approved expenses—or co-insurance for hospital outpatient care.
- 3. Blood.** The first 3 pints of blood each year. (Medicare pays for all blood after the first 3 pints.)
- 4. Hospice Care.** Co-insurance or co-payment.

What is the Part B Deductible?

You are responsible to pay a portion of the Medicare-approved Part B amounts for covered services each calendar year. In [2016], the Part B amount that you are responsible for is [\$166.00]. Once you have met this deductible, Medicare will cover about 80% of Medicare-approved charges. Your deductible may be covered, depending on the Medicare supplement plan you choose.

Can my spouse or domestic partner and I be on the same account?

You and your spouse or domestic partner may share an account, but you must enroll with separate enrollment forms. Once enrolled, you will each receive an individual certificate of insurance.

Does Medicare supplement insurance offer prescription drug coverage?

By law, Medicare supplement insurance policies can no longer offer coverage for prescription drugs. Prescription drug coverage, also known as Part D, is available separately through private insurance companies approved by Medicare.

Enrolling in a Medicare supplement plan and a prescription drug plan (Part D) could provide you with more complete coverage than Medicare alone.

For more information, call the toll-free number at the top of the reverse side of the page.

Will I be accepted if I have a health condition?

During open enrollment, you can’t be turned down for coverage. By law, you can’t be charged more than the base rate for your policy, despite any prior health condition.

Please see the guide to important information for other situations in which you may be guaranteed acceptance.

If you change plans outside of the open enrollment or guaranteed issue periods, you may be underwritten and may not be accepted into the plan, or if accepted, your rates may change.

Commonly Asked Questions *continued*

Where can I find more information?

Call [1.888.663.4099] to speak to a licensed insurance agent/producer for help exploring your options or for answers to any questions you may have about AARP Medicare Supplement Insurance.

TTY users should call [711]. Available Monday to Friday, 7 a.m. to 11 p.m., and Saturday, 9 a.m. to 5 p.m., Eastern Time.

For information about Medicare supplement insurance:

Read *A Guide to Health Insurance for People with Medicare*.

This is the official government guide with important information about what a Medicare supplement insurance policy is, what these policies cover, your rights to buy them, and more. Download a free copy online, at [www.medsupeducation.com] or call [1.800.MEDICARE (1.800.633.4227)]. TTY users should call [1.877.486.2048].

For information about Medicare supplement insurance in your state:

Call your state's Health Insurance Assistance Program or State Insurance Department. You can also call the Medicare Helpline and ask the operator for the telephone number for your state's Medical Assistance or Medicaid office, at [1.800.MEDICARE (1.800.633.4227)]. TTY users should call [1.877.486.2048].

Glossary

Here you'll find common Medicare supplement insurance terms and definitions.

benefit period A benefit period begins the first day you enter a hospital or skilled nursing facility for inpatient care and ends after you have been out of the hospital (and have not received skilled care in any other facility) for 60 days in a row.

co-insurance A kind of cost sharing where costs are split on a percentage basis. For example, Medicare Part B pays about 80% and you pick up the rest.

co-payment A kind of cost sharing where you pay a pre-set fixed amount for each service. Sometimes called “co-pay.”

creditable coverage Certain types of previous health insurance that can be used to shorten or eliminate the waiting period for a pre-existing condition.

deductible A kind of cost sharing where you are responsible for a pre-set, fixed amount that Medicare doesn't cover. Some Medicare supplement plans pay a benefit for the Part A and Part B deductibles.

durable medical equipment Equipment for use at home such as oxygen, wheelchairs, and walkers.

excess charge The difference between the actual Medicare Part B charge as billed and the Medicare-approved Part B charge.

guaranteed issue rights In general, these are rights you have in certain circumstances, when insurance providers are required by law to offer you a plan. If you have guaranteed issue rights, you are guaranteed acceptance into selected plans available in your state, and you can't be charged more for a past or present health problem. The policy must cover any pre-existing conditions, without a waiting period. Some states may have additional guaranteed issue rights under state law.

hospice care Care for those who are terminally ill. Hospice care typically focuses on comfort (controlling symptoms and managing pain) rather than seeking a cure. In Medicare Part A, hospice care also includes support services for both patient and caregivers. Medicare Part A covers both hospice care received at home and care received in a hospice outside the home.

hospital An institution that provides care for which Medicare pays hospital benefits.

GL1SS (03-16)

Glossary *continued*

inpatient care Care you receive when you are admitted to a hospital for bed occupancy for the purpose of receiving inpatient services.

lifetime reserve days These are additional days that Medicare will pay for when you are in a hospital for more than 90 days. You have a total of 60 reserve days that can be used during your lifetime. For each lifetime reserve day, Medicare pays all covered costs except for a daily co-insurance.

Medicare Advantage See Part C.

Medicare eligible expenses The health care expenses of the kinds covered under Medicare Parts A and B that Medicare recognizes as reasonable and medically necessary.

Medicare supplement insurance Sometimes called a Medigap policy. Insurance that is sold by private insurance companies that can help pay your share of the costs of Medicare-covered services. Medicare supplement insurance is available in up to 10 standard types, or “plans.” Each plan is named with a letter of the alphabet. Don’t confuse Medicare supplement Plans A, B, C, and D with Parts A, B, C, and D of Medicare.

Medigap See Medicare supplement insurance.

network The group of doctors, hospitals, pharmacies, and other health care facilities that have contracted with an insurance plan to provide care to plan members.

open enrollment period The 6-month period that starts the first day of the month in which you are enrolled in Medicare Part B at age 65 or older. During this time, you have the right to buy any Medicare supplement insurance plan that is sold in your state. You can’t be denied coverage or charged more because of your past or present health problems. Some states may have additional open enrollment rights under state law.

outpatient care Care you receive as a hospital patient if you are not admitted for an inpatient stay, or care you receive in a freestanding surgery center as an outpatient.

Part A The part of Medicare that provides help with the cost of inpatient hospital stays, skilled nursing services following a hospital stay, and some other kinds of skilled care.

Part B The part of Medicare that provides help with the cost of medically necessary services like doctor services, outpatient care, and other medical services Part A doesn’t cover.

Glossary *continued*

Part C The part of Medicare that allows private insurance companies to contract with Medicare to offer plans that help with Medicare Part A and Part B services. Part C plans are also called “Medicare Advantage” plans.

Part D The part of Medicare that offers help with the cost of prescription drugs.

pre-existing condition A health problem you had before the date a new insurance policy starts.

premium A fixed amount you have to pay to participate in a plan or program; in private insurance, the price you pay for a policy, usually as a monthly payment.

provider A person or organization that provides medical services and products, such as a doctor, hospital, pharmacy, laboratory, or outpatient clinic.

Select Plan A type of Medicare supplement policy that may require you to use hospitals and, in some cases, doctors within its network to be eligible for full benefits (exceptions may apply in cases of emergency, or certain situations that make seeing a network provider unreasonable).

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Contents



AARP® Medicare Supplement Insurance Plans
Insured by UnitedHealthcare Insurance Company

Your Plans and Rates

Not sure which plan fits your needs? Review the plans and rates chart to compare all AARP Medicare Supplement Plans and their prices.

Exclusive Member Services

Learn about the exclusive member services available to you—at no additional cost—as an AARP member with AARP Medicare Supplement Insurance.

Reference Materials

Commonly Asked Questions

Read common questions and answers about Medicare supplement insurance.

Glossary

Find the meaning of insurance terms shown in this booklet.

Your Guide to Important Information

Find important legal information you should review.

Outline of Coverage

Review detailed information about your plan choices, benefits, and rules that apply. All insurance companies must give you these documents by law.

Ready to enroll?

Simply complete the enclosed AARP Medicare Supplement Insurance enrollment form. (AARP membership is required for enrollment in an AARP Medicare Supplement Plan. If you're not already a member, we've included an application to make it easy for you to join.) You can return the form(s) in the envelope provided.

Insured by UnitedHealthcare Insurance Company, Horsham, PA (UnitedHealthcare Insurance Company of New York, Islandia, NY for New York residents). Policy Form No. GRP 79171 GPS-1 (G-36000-4).

In some states, plans may be available to persons under age 65 who are eligible for Medicare by reason of disability or End-Stage Renal Disease. Not connected with or endorsed by the U.S. Government or the federal Medicare program.

This is a solicitation of insurance. A licensed insurance agent/producer may contact you.

See the enclosed for complete information, including benefits, costs, eligibility requirements, exclusions, and limitations.

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Commonly Asked Questions

Below is a list of commonly asked questions, with straight answers.

What is the difference between “Medigap” and “Medicare supplement insurance”?

There is no difference—both terms have the same meaning. Throughout these materials, the term “Medicare supplement insurance” is used. It’s named that way because it is designed to help cover some of the costs for Medicare Part A and Part B that you would otherwise be responsible to take care of yourself.

What are “Basic Benefits”?

Basic Benefits are standard benefits that each Medicare supplement plan provides. Plan A provides only Basic Benefits. Other plans provide Basic Benefits plus other benefits. Basic Benefits are:

- 1. Hospitalization.** Part A co-insurance plus coverage for 365 additional days after Medicare benefits end.
- 2. Medical Expenses.** Part B co-insurance—generally 20% of Medicare-approved expenses—or co-insurance for hospital outpatient care.
- 3. Blood.** The first 3 pints of blood each year. (Medicare pays for all blood after the first 3 pints.)
- 4. Hospice Care.** Co-insurance or co-payment.

What is the Part B Deductible?

You are responsible to pay a portion of the Medicare-approved Part B amounts for covered services each calendar year. In [2016], the Part B amount that you are responsible for is [\$166.00]. Once you have met this deductible, Medicare will cover about 80% of Medicare-approved charges. Your deductible may be covered, depending on the Medicare supplement plan you choose.

Can my spouse or domestic partner and I be on the same account?

You and your spouse or domestic partner may share an account, but you must enroll with separate enrollment forms. Once enrolled, you will each receive an individual certificate of insurance.

Does Medicare supplement insurance offer prescription drug coverage?

By law, Medicare supplement insurance policies can no longer offer coverage for prescription drugs. Prescription drug coverage, also known as Part D, is available separately through private insurance companies approved by Medicare.

Enrolling in a Medicare supplement plan and a prescription drug plan (Part D) could provide you with more complete coverage than Medicare alone.

For more information, call the toll-free number at the top of the reverse side of the page.

Will I be accepted if I have a health condition?

During open enrollment, you can’t be turned down for coverage. By law, you can’t be charged more than the base rate for your policy, despite any prior health condition.

Please see the guide to important information for other situations in which you may be guaranteed acceptance.

If you change plans outside of the open enrollment or guaranteed issue periods, you may be underwritten and may not be accepted into the plan, or if accepted, your rates may change.

Commonly Asked Questions *continued*

Where can I find more information?

Call [1.888.663.4099] to speak to a licensed insurance agent/producer for help exploring your options or for answers to any questions you may have about AARP Medicare Supplement Insurance.

TTY users should call [711]. Available Monday to Friday, 7 a.m. to 11 p.m., and Saturday, 9 a.m. to 5 p.m., Eastern Time.

For information about Medicare supplement insurance:

Read *A Guide to Health Insurance for People with Medicare*.

This is the official government guide with important information about what a Medicare supplement insurance policy is, what these policies cover, your rights to buy them, and more. Download a free copy online, at [www.medsupeducation.com] or call [1.800.MEDICARE (1.800.633.4227)]. TTY users should call [1.877.486.2048].

For information about Medicare supplement insurance in your state:

Call your state's Health Insurance Assistance Program or State Insurance Department. You can also call the Medicare Helpline and ask the operator for the telephone number for your state's Medical Assistance or Medicaid office, at [1.800.MEDICARE (1.800.633.4227)]. TTY users should call [1.877.486.2048].

Glossary

Here you'll find common Medicare supplement insurance terms and definitions.

benefit period A benefit period begins the first day you enter a hospital or skilled nursing facility for inpatient care and ends after you have been out of the hospital (and have not received skilled care in any other facility) for 60 days in a row.

co-insurance A kind of cost sharing where costs are split on a percentage basis. For example, Medicare Part B pays about 80% and you pick up the rest.

co-payment A kind of cost sharing where you pay a pre-set fixed amount for each service. Sometimes called “co-pay.”

creditable coverage Certain types of previous health insurance that can be used to shorten or eliminate the waiting period for a pre-existing condition.

deductible A kind of cost sharing where you are responsible for a pre-set, fixed amount that Medicare doesn't cover. Some Medicare supplement plans pay a benefit for the Part A and Part B deductibles.

durable medical equipment Equipment for use at home such as oxygen, wheelchairs, and walkers.

excess charge The difference between the actual Medicare Part B charge as billed and the Medicare-approved Part B charge.

guaranteed issue rights In general, these are rights you have in certain circumstances, when insurance providers are required by law to offer you a plan. If you have guaranteed issue rights, you are guaranteed acceptance into selected plans available in your state, and you can't be charged more for a past or present health problem. The policy must cover any pre-existing conditions, without a waiting period. Some states may have additional guaranteed issue rights under state law.

hospice care Care for those who are terminally ill. Hospice care typically focuses on comfort (controlling symptoms and managing pain) rather than seeking a cure. In Medicare Part A, hospice care also includes support services for both patient and caregivers. Medicare Part A covers both hospice care received at home and care received in a hospice outside the home.

hospital An institution that provides care for which Medicare pays hospital benefits.

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Glossary *continued*

inpatient care Care you receive when you are admitted to a hospital for bed occupancy for the purpose of receiving inpatient services.

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Glossary *continued*

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State:	District of Columbia	Filing Company:	UnitedHealthcare Insurance Company
TOI/Sub-TOI:	MS08G Group Medicare Supplement - Standard Plans 2010/MS08G.001 Plan A 2010		
Product Name:	GROUP MEDICARE SUPPLEMENT		
Project Name/Number:	ADVERTISING/FM16-1047		

Supporting Document Schedules

Satisfied - Item:	SOV
Comments:	
Attachment(s):	SOV ST_AZ DC NV OK.pdf
Item Status:	
Status Date:	

STATEMENT OF VARIABILITY

Submitted forms: BA25417ST BA25418ST	
For form BA25417ST:	
Variable copy for: Contents section:	
VARIABLE COPY:	DESCRIPTION:
[Page X]	Page number will fill in.
Variable copy for: Understanding the Basics section:	
[\$104.90]	Current Medicare Part B standard monthly premium. Amount will be updated annually to reflect yearly changes in the Medicare Part B standard monthly premium.
[Page X]	Page number will fill in.
[1.888.663.4099] [1.888.663.4099]	[1.888.663.4099] is the customer service phone number used for this campaign. Phone number may change in the future, as different phone numbers are used internally to track consumer response rates.
Save [XX%] with the Enrollment Discount! With an AARP Medicare Supplement Plan, you'll save [XX%] on your first-year premium with an enrollment discount when you apply by age 65. And you will continue to receive discounts for the next [XX] years! The discount percentage reduces 3% each year on the anniversary date of your plan until the discount runs out.	[XX%] will fill in with either 36% or 30%. [XX%] will fill in with either 36% or 30%. [XX] years will fill in with either 11 or 9 years.
Variable copy for: Compare Your Options section:	
[Page X]	Page number will fill in.
From a report prepared for UnitedHealthcare Insurance Company by Mark Farrah Associates, "[December 2014] Medigap Enrollment & Market Share," [May 2015]. For a	[December 2014] is the date the study was conducted. The date will change after the next study is completed and new data is available. [May 2015] is the date the report was

copy of the full report, visit [www.uhcmedsupstats.com] or call [1-888-663-4099].	<p>published. The date will change after the next study is completed and new data is available.</p> <p>[www.uhcmedsupstats.com] is the current website prospects can visit for a copy of the report. URL name may change in the future to see what resonates best with prospects, but will always bring a person to the same website</p> <p>[1-800-663-4099] is the current phone number customers can call to request a copy of the report. Phone number may change in the future, as different phone numbers are used internally to track consumer response rates.</p>
<p>**AARP Medicare Supplement Plan annual rate increases have been [2.9% on average between 2011 and 2015], while varying by specific plan and year. From a report prepared for UnitedHealthcare Insurance Company by ORC International, "Substantiation of Advertising Claims Concerning AARP Medicare Supplement Insurance Plans," [August, 2015]. For a copy of the full report, visit [www.uhcmedsupstats.com] or call [1-888-663-4099].</p>	<p>[2.9% on average between 2011 and 2015] is the current average rate increase percentage and range of years calculated. Percentage/date ranges may change in the future when a new study is published.</p> <p>[August 2015] is the date the report was published. The date will change after the next study is completed and new data is available.</p> <p>[www.uhcmedsupstats.com] is the current website prospects can visit for a copy of the report. URL name may change in the future to see what resonates best with prospects, but will always bring a person to the same website.</p> <p>[1-800-663-4099] is the current phone number customers can call to request a copy of the report. Phone number may change in the future, as different phone numbers are used internally to track consumer response rates.</p>
<p>[XX] years of savings. You'll save [XX%] off your first-year premium if you are age 65 and enrolled in Medicare Part B. Then, you'll save [XX%] off your second-year premium, decreasing 3% each year for the length of the [XX]-year discount period.</p>	<p>[XX] years will fill in with either 12 or 10.</p> <p>[XX%] will fill in with either 36% or 30%.</p> <p>[XX%] will fill in with either 33% or 27%.</p> <p>[XX]-year will fill in with either 12-year or 10-year.</p>
[1.888.663.4099]	[1.888.663.4099] is the customer service phone number used for this campaign. Phone number may change in the future, as different phone numbers are used internally to track consumer response rates.
[711]	TTY phone number (for hearing impaired) used for this particular campaign. Bracketed in case it would ever change.
[\$22,040.00]	Indicates the cost of a 5-day hospital stay in this example. Example amount may change in

	the future.
– [\$20,752.00]	Indicates the amount that Medicare Part A will pay for a 5-day hospital stay in this example. Amount in chart will be updated on an annual basis, as annual changes to the Medicare Part A deductible amount directly impact this figure.
[\$ 1,288.00]	Indicates the 2016 Medicare Part A deductible amount. Amount will be updated annually to reflect yearly changes in the Medicare Part A deductible amount.
[\$ 5,500.00]	Indicates the cost of additional outpatient chargers in this example. Example amount may change in the future.
[\$ 166.00]	Indicates the 2016 Medicare Part B deductible amount. Amount will be updated annually to reflect yearly changes in the Medicare Part B deductible amount.
– [\$ 4,267.20]	Indicates the amount Medicare Part B will pay for additional outpatient services after the Medicare Part B deductible is paid in this example. Amount in chart will be updated on an annual basis, as annual changes to the Medicare Part B deductible amount directly impact this figure.
[\$ 1,066.80]	Indicates the remaining 20% that the customer is responsible for paying for additional outpatient services in this example. Amount in chart will be updated on an annual basis, as annual changes to the Medicare Part B deductible amount directly impact this figure.
– [\$ 1,288.00]	Indicates the 2016 Medicare Part A deductible amount that Plan C will pay for in this example. Amount will be updated annually to reflect yearly changes in the Medicare Part A deductible amount.
– [\$ 166.00]	Indicates the 2016 Medicare Part B deductible amount that Plan C will pay for in this example. Amount will be updated annually to reflect yearly changes in the Medicare Part B deductible amount.
– [\$ 1,066.80]	Indicates the 20% Medicare coinsurance that Plan C will pay for in this example. Amount in chart will be updated on an annual basis, as annual changes to the Medicare Part B deductible amount directly impact this figure.
[\$ 2,520.80]	Indicates the total amount that AARP Medicare Supplement Plan C pays in this example. Amount in chart will be updated on an annual

	basis, as annual changes to Medicare Parts A and B deductible amounts directly impact this figure.
[\$ 0.00]	Indicates the total out-of-pocket expenses that the customer is responsible for paying in this example. Example may change in the future.
[2016]	Indicates the current year. Year will be updated to coincide with annual changes to Medicare Parts A and B deductible amounts.
[4 million]	[4 million] is the current number of AARP members who are enrolled in an AARP Medicare Supplement Insurance Plan. Figure may change in the future when a new study is published.
†From a report prepared for UnitedHealthcare Insurance Company by ORC International, "Substantiation of Advertising Claims Concerning AARP Medicare Supplement Insurance Plans," [August, 2015]. For a copy of the full report, visit [www.uhcmembersstats.com] or call [1-888-663-4099].	<p>[August 2015] is the date the report was published. The date will change after the next study is completed and new data is available.</p> <p>[www.uhcmembersstats.com] is the current website prospects can visit for a copy of the report. URL name may change in the future to see what resonates best with prospects, but will always bring a person to the same website.</p> <p>[1-800-663-4099] is the current phone number customers can call to request a copy of the report. Phone number may change in the future, as different phone numbers are used internally to track consumer response rates.</p>
Variable copy for: Take the Next Step section:	
[Sample A. Sample,]	Name of prospect will fill in.
[Highlighted are popular plans in [state].]	<p>Prints only for prospects who did not request information on specific plan.</p> <p>[state] will fill in with name of state.</p>
[Highlighted are the plans you recently requested when you spoke to a phone representative.]	Prints only for prospects who requested information on specific plans.
When you apply by age 65, you'll save [XX%] on your first-year <u>premium</u> with the Enrollment Discount. And you will continue to receive discounts for the next [XX] years! The discount percentage reduces 3% each year on the anniversary date of your plan until the discount runs out.	<p>[XX%] will fill in with either 36% or 30%.</p> <p>[XX] years will fill in with either 11 or 9.</p>
[Or enroll online at [AARPMedicareSupplement.com].]	Prints only when online enrollment is available.

	[AARPMedicareSupplement.com] is the website used for this campaign. URL name may change in the future to test whether another resonates better with consumers, but will always take a person to the same website.
[1.888.663.4099]	[1.888.663.4099] is the customer service phone number used for this campaign. Phone number may change in the future, as different phone numbers are used internally to track consumer response rates.
[711]	TTY phone number (for hearing impaired) used for this particular campaign. Bracketed in case it would ever change.
[XX/XX/XX]	[XX/XX/XXXX] will fill with the date that the consumer must apply by in order to get the earliest plan effective date.
[Page X]	Page number will fill in.
Variable copy for: Reference Materials section:	
[Page X]	Page number will fill in.
Variable copy for: Commonly Asked Questions section:	
[2016]	[2016] Indicates the current year. Year will be updated to coincide with annual changes to Medicare Part B deductible amount.
[\$166.00]	[\$166.00] Indicates the 2016 Medicare Part B deductible amount. Amount will be updated annually to reflect yearly changes in the Medicare Part B deductible amount.
[1.888.663.4099]	[1.888.663.4099] is the customer service phone number used for this campaign. Phone number may change in the future, as different phone numbers are used internally to track consumer response rates.
[711]	TTY phone number (for hearing impaired) used for this particular campaign. Bracketed in case it would ever change.
Download a free copy online, at [www.medsupeducation.com] or call [1.800.MEDICARE (1.800.633.4227)]. TTY users should call [1.877.486.2048]	Website and current phone/TTY numbers are bracketed as they may change in the future.
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[Page X]	Page number will fill in.
Variable copy for: Glossary section:	
[Page X]	Page number will fill in.
For form BA25418ST:	
Variable copy for: Contents section:	
[Page X]	Page number will fill in.
Variable copy for: Commonly Asked Questions section:	
[2016]	[2016] Indicates the current year. Year will be updated to coincide with annual changes to Medicare Part B deductible amount.
[\$166.00]	[\$166.00] Indicates the 2016 Medicare Part B deductible amount. Amount will be updated annually to reflect yearly changes in the Medicare Part B deductible amount.
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