

**MEDICARE SUPPLEMENT** ▾

- **Maine Medicare Supplement Quotes:**
- 04006 (York county in Biddeford Pool, ME)
- Age 65
- Female
- Non-tobacco
- Plan A
- Effective 2018-09-01
- Sorted by Price

**\$103.96 /mo**     **Transamerica Life Insurance Company**

Parent: <b>Aegon Us Holding Grp</b> AM Best Rating: <b>A+ (Outlook Negative)</b>	Plan: <b>A</b> S&P Rating: <b>AA-</b> Rate Type: <b>Community rated</b>	Years in Market: <b>13</b> Effective Date: <b>09/01/2014</b> Rating Class: <b>Direct to Consumer</b>
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**\$135.00 /mo**     **AARP - Unitedhealthcare Insurance Company**

HH Discount <b>5.0%</b>	Parent: <b>Unitedhealth Grp</b> AM Best Rating: <b>A (Outlook Stable)</b>	Plan: <b>A</b> S&P Rating: <b>AA-</b> Rate Type: <b>Community rated</b>	Years in Market: <b>20</b> Effective Date: <b>01/01/2018</b> Rating Class: <b>Standard</b>
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**\$176.00 /mo**     **Equitable Life & Casualty Insurance Company**

Policy Fee <b>\$20.00</b>	Parent: <b>Equitable Family Ins Co Grp</b>	Plan: <b>A</b> AM Best Rating: <b>B (Outlook Positive)</b> Rate Type: <b>n/a</b>	Years in Market: <b>49</b> S&P Rating: <b>B</b> Effective Date: <b>03/01/2012</b>
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**\$178.97 /mo**     **United Of Omaha Life Insurance Company**

HH Discount <b>7.0%</b>	Parent: <b>Mutual Of Omaha Grp</b> AM Best Rating: <b>A+ (Outlook Stable)</b>	Plan: <b>A</b> S&P Rating: <b>A+</b> Rate Type: <b>Community rated</b>	Years in Market: <b>10</b> Effective Date: <b>09/01/2017</b> Rating Class: <b>n/a</b>
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**\$194.38 /mo**     **Loyal American Life Insurance Company (Cigna)**

HH Discount <b>7.0%</b> Policy Fee <b>\$20.00</b>	Parent: <b>Cigna Hlth Grp</b> AM Best Rating: <b>A- (Outlook Negative - Under Review)</b>	Plan: <b>A</b> S&P Rating: <b>n/a</b> Rate Type: <b>Community rated</b>	Years in Market: <b>13</b> Effective Date: <b>06/01/2018</b> Rating Class: <b>n/a</b>
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**Medicare Supplement: Plan A Details**

**Part A**

Services	Medicare Pays	This Plan Pays	You Pay
<b>Hospitalization</b>			
First 60 Days	All But \$1340	\$0	<b>\$1340 (Part A Deductible)</b>
61st Through 90th Day	All But \$335 a Day	\$335 a Day	<b>\$0</b>
91st Day and After (60 Reserve Days)	All But \$670 a Day	\$670 a Day	<b>\$0</b>
After Reserve (Additional 365 Days)	\$0	100% of Additional Expenses	<b>\$0</b>
Beyond the Additional 365 Days	\$0	\$0	<b>All Costs</b>
<b>Skilled Nursing Facility Care</b>			

First 20 Days	All Approved Amounts	\$0	<b>\$0</b>
21st Through 100th Day	All But \$167.50 a Day	\$0	<b>Up to \$167.50 a Day</b>
101st Day and After	\$0	\$0	<b>All Costs</b>
<b>Blood</b>			
First Three Pints	\$0	100%	<b>\$0</b>
Additional Amounts	100%	\$0	<b>\$0</b>
<b>Hospice Care</b>			
You must meet Medicare's requirements, including a doctor's certification of terminal illness	All but very limited copayment / coinsurance for outpatient drugs and inpatient respite care	Medicare copayment / coinsurance	<b>\$0</b>
<b>Part B</b>			
<b>Services</b>	<b>Medicare Pays</b>	<b>This Plan Pays</b>	<b>You Pay</b>
<b>Medical Expenses</b>			
1st \$183 of Approved Amounts	\$0	\$0	<b>\$183 (Part B Deductible)</b>
Remainder of Approved Amounts	Generally 80%	Generally 20%	<b>\$0</b>
Part B Excess Charge	\$0	\$0	<b>All Costs</b>
<b>Blood</b>			
First Three Pints	\$0	100%	<b>\$0</b>
Next \$183 of Approved Amounts	\$0	\$0	<b>\$183 (Plan B Deductible)</b>
Remainder of Approved Amounts	Generally 80%	Generally 20%	<b>\$0</b>
<b>Clinical Laboratory Services</b>			
Tests for Diagnostic Services	100%	\$0	<b>\$0</b>
<b>Foreign Travel</b>			
During 1st 60 Days	\$0	\$0	<b>All Costs</b>

**Disclaimer:** CSG Actuarial, LLC does not guarantee or warrant the accuracy of the above premium rates or underwriting information. For agent use only. Carriers may have made rate or underwriting adjustments that have not yet been reflected in our database. All data obtained from public sources.

Monthly rates may reflect EFT discounts, if applicable.

A few companies in the database offer premium rates based upon special underwriting or administrative rules. In those cases multiple rates are shown for the same company.

Minnesota and Wisconsin: Age increase data is determined using the base policy, not including any riders. Historical increase data is determined using a composite increase on the base policy and the riders.

In Wisconsin, United American rates include the home healthcare rider.

**2017 Market Data Source:** 2017 NAIC Medicare Supplement Experience Exhibits and data filed with the National Association of Insurance Commissioners in annual financial statements. CSG Actuarial, LLC does not guarantee or warrant the accuracy of the above market data.