

**Monthly Plan Rates for South Carolina - Area 1  
Female Non-Tobacco and Tobacco  
AARP® Medicare Supplement Insurance Plans  
insured by UnitedHealthcare Insurance Company of America**

**Additional Discounts\* (not reflected in the rates below) for which you may qualify:**

- **Multi-Insured** – 15% off the rate below if two AARP members are insured under an eligible AARP-branded supplemental insurance policy under the same AARP membership number and share a household address.
  - **Household** – 10% off the rate below if you live with another (no more than three) AARP member.
- Note:** The Multi-Insured Discount and the Household Discount cannot be combined.
- **Electronic Funds Transfer (EFT)** – \$4 per month off the rate below when you pay with EFT.

**\*Also, see the “Rules and Disclosures about this insurance”**

**Group 1**

Applies to individuals whose plan effective date will be within fifteen years following their 65th birthday or Medicare Part B effective date, if later.

**Standard Rates with Enrollment Discount<sup>3</sup> for individuals ages 65-85 whose acceptance is guaranteed or who do not have any of the medical conditions on the application<sup>2</sup>.**

Age <sup>1</sup>	Non-Tobacco Rate				Tobacco Rate			
	Plan A	Plan G	Plan N	Plan F <sup>4</sup>	Plan A	Plan G	Plan N	Plan F <sup>4</sup>
65	\$128.54	\$156.01	\$107.00	\$200.39	\$147.82	\$179.41	\$123.05	\$230.45
66	\$128.54	\$156.01	\$107.00	\$200.39	\$147.82	\$179.41	\$123.05	\$230.45
67	\$128.54	\$156.01	\$107.00	\$200.39	\$147.82	\$179.41	\$123.05	\$230.45
68	\$133.22	\$161.68	\$110.89	\$207.68	\$153.19	\$185.93	\$127.52	\$238.83
69	\$137.89	\$167.35	\$114.78	\$214.97	\$158.57	\$192.45	\$132.00	\$247.21
70	\$142.56	\$173.03	\$118.67	\$222.25	\$163.94	\$198.98	\$136.47	\$255.59
71	\$147.24	\$178.70	\$122.56	\$229.54	\$169.32	\$205.50	\$140.94	\$263.97
72	\$151.91	\$184.37	\$126.45	\$236.83	\$174.70	\$212.03	\$145.42	\$272.35
73	\$156.59	\$190.05	\$130.34	\$244.12	\$180.07	\$218.55	\$149.89	\$280.73
74	\$161.26	\$195.72	\$134.23	\$251.40	\$185.45	\$225.07	\$154.37	\$289.11
75	\$165.94	\$201.39	\$138.13	\$258.69	\$190.82	\$231.60	\$158.84	\$297.49
76	\$170.61	\$207.07	\$142.02	\$265.98	\$196.20	\$238.12	\$163.32	\$305.87
77	\$175.29	\$212.74	\$145.91	\$273.27	\$201.57	\$244.65	\$167.79	\$314.25
78	\$179.96	\$218.41	\$149.80	\$280.55	\$206.95	\$251.17	\$172.27	\$322.63
79	\$184.63	\$224.09	\$153.69	\$287.84	\$212.32	\$257.69	\$176.74	\$331.01
80	\$191.65	\$232.60	\$159.53	\$298.77	\$220.39	\$267.48	\$183.45	\$343.58
81	\$198.66	\$241.11	\$165.36	\$309.70	\$228.45	\$277.27	\$190.17	\$356.15
82	\$205.67	\$249.62	\$171.20	\$320.63	\$236.51	\$287.05	\$196.88	\$368.72
83	\$212.68	\$258.13	\$177.04	\$331.56	\$244.58	\$296.84	\$203.59	\$381.29
84	\$219.69	\$266.64	\$182.87	\$342.49	\$252.64	\$306.62	\$210.30	\$393.86
85	\$226.70	\$275.15	\$188.71	\$353.42	\$260.70	\$316.41	\$217.01	\$406.43

**The rates above are for plan effective dates from June 2025 - May 2026 and may change.**

**Monthly Plan Rates for South Carolina - Area 1  
Female Non-Tobacco and Tobacco  
AARP® Medicare Supplement Insurance Plans  
insured by UnitedHealthcare Insurance Company of America**

Standard Rates for individuals ages 86 and older whose acceptance is guaranteed <u>or</u> who do not have any of the medical conditions on the application <sup>2</sup> .								
<b>86+</b>	\$233.72	\$283.66	\$194.55	\$364.36	\$268.77	\$326.20	\$223.73	\$419.01
Level 2 Rates <sup>6</sup> for individuals ages 65 and older whose acceptance is not guaranteed <u>and</u> who have one or more of the medical conditions on the application <sup>2</sup> .								
<b>65+</b>	\$455.75	\$550.30	\$472.75	\$597.55	\$524.10	\$632.82	\$543.66	\$687.17

<b>Group 2</b>		Applies to individuals whose plan effective date will be fifteen years or more following their 65th birthday or Medicare Part B effective date, if later.							
		Non-Tobacco Rate				Tobacco Rate			
Age <sup>1</sup>	Plan A	Plan G	Plan N	Plan F <sup>4</sup>	Plan A	Plan G	Plan N	Plan F <sup>4</sup>	
Level 1 Rates <sup>5</sup> for individuals ages 80 and older whose acceptance is guaranteed <u>or</u> who do not have any of the medical conditions on the application <sup>2</sup> .									
<b>80+</b>	\$257.09	\$312.02	\$214.00	\$400.79	\$295.64	\$358.82	\$246.10	\$460.91	
Level 2 Rates <sup>6</sup> for individuals ages 80 and older whose acceptance is not guaranteed <u>and</u> who have one or more of the medical conditions on the application <sup>2</sup> .									
<b>80+</b>	\$455.75	\$550.30	\$472.75	\$597.55	\$524.10	\$632.82	\$543.66	\$687.17	

*The rates above are for plan effective dates from June 2025 - May 2026 and may change.*

**Monthly Plan Rates for South Carolina - Area 1  
Male Non-Tobacco and Tobacco  
AARP® Medicare Supplement Insurance Plans  
insured by UnitedHealthcare Insurance Company of America**

**Additional Discounts\* (not reflected in the rates below) for which you may qualify:**

- **Multi-Insured** – 15% off the rate below if two AARP members are insured under an eligible AARP-branded supplemental insurance policy under the same AARP membership number and share a household address.
  - **Household** – 10% off the rate below if you live with another (no more than three) AARP member.
- Note:** The Multi-Insured Discount and the Household Discount cannot be combined.
- **Electronic Funds Transfer (EFT)** – \$4 per month off the rate below when you pay with EFT.

**\*Also, see the “Rules and Disclosures about this insurance”**

**Group 1**

Applies to individuals whose plan effective date will be within fifteen years following their 65th birthday or Medicare Part B effective date, if later.

**Standard Rates with Enrollment Discount<sup>3</sup> for individuals ages 65-85 whose acceptance is guaranteed or who do not have any of the medical conditions on the application<sup>2</sup>.**

Age <sup>1</sup>	Non-Tobacco Rate				Tobacco Rate			
	Plan A	Plan G	Plan N	Plan F <sup>4</sup>	Plan A	Plan G	Plan N	Plan F <sup>4</sup>
65	\$144.95	\$175.92	\$120.66	\$225.97	\$166.69	\$202.31	\$138.75	\$259.87
66	\$144.95	\$175.92	\$120.66	\$225.97	\$166.69	\$202.31	\$138.75	\$259.87
67	\$144.95	\$175.92	\$120.66	\$225.97	\$166.69	\$202.31	\$138.75	\$259.87
68	\$150.22	\$182.32	\$125.05	\$234.19	\$172.76	\$209.67	\$143.80	\$269.32
69	\$155.50	\$188.72	\$129.44	\$242.41	\$178.82	\$217.03	\$148.85	\$278.77
70	\$160.77	\$195.12	\$133.82	\$250.63	\$184.88	\$224.38	\$153.89	\$288.22
71	\$166.04	\$201.51	\$138.21	\$258.84	\$190.94	\$231.74	\$158.94	\$297.67
72	\$171.31	\$207.91	\$142.60	\$267.06	\$197.00	\$239.10	\$163.98	\$307.12
73	\$176.58	\$214.31	\$146.99	\$275.28	\$203.07	\$246.45	\$169.03	\$316.57
74	\$181.85	\$220.71	\$151.37	\$283.50	\$209.13	\$253.81	\$174.08	\$326.02
75	\$187.12	\$227.10	\$155.76	\$291.71	\$215.19	\$261.17	\$179.12	\$335.47
76	\$192.39	\$233.50	\$160.15	\$299.93	\$221.25	\$268.53	\$184.17	\$344.92
77	\$197.67	\$239.90	\$164.54	\$308.15	\$227.31	\$275.88	\$189.21	\$354.37
78	\$202.94	\$246.29	\$168.93	\$316.36	\$233.37	\$283.24	\$194.26	\$363.82
79	\$208.21	\$252.69	\$173.31	\$324.58	\$239.44	\$290.60	\$199.30	\$373.27
80	\$216.11	\$262.29	\$179.89	\$336.91	\$248.53	\$301.63	\$206.87	\$387.45
81	\$224.02	\$271.88	\$186.48	\$349.23	\$257.62	\$312.67	\$214.44	\$401.62
82	\$231.93	\$281.48	\$193.06	\$361.56	\$266.71	\$323.70	\$222.01	\$415.80
83	\$239.83	\$291.08	\$199.64	\$373.89	\$275.81	\$334.74	\$229.58	\$429.97
84	\$247.74	\$300.67	\$206.22	\$386.21	\$284.90	\$345.77	\$237.15	\$444.15
85	\$255.65	\$310.27	\$212.80	\$398.54	\$293.99	\$356.81	\$244.72	\$458.32

**The rates above are for plan effective dates from June 2025 - May 2026 and may change.**

# Monthly Plan Rates for South Carolina - Area 1

## Male Non-Tobacco and Tobacco

AARP® Medicare Supplement Insurance Plans  
insured by UnitedHealthcare Insurance Company of America

Standard Rates for individuals ages 86 and older whose acceptance is guaranteed <u>or</u> who do not have any of the medical conditions on the application <sup>2</sup> .								
<b>86+</b>	\$263.56	\$319.87	\$219.39	\$410.87	\$303.09	\$367.85	\$252.29	\$472.50
Level 2 Rates <sup>6</sup> for individuals ages 65 and older whose acceptance is not guaranteed <u>and</u> who have one or more of the medical conditions on the application <sup>2</sup> .								
<b>65+</b>	\$513.94	\$620.54	\$533.11	\$673.82	\$591.02	\$713.62	\$613.06	\$774.90

<b>Group 2</b>								
Applies to individuals whose plan effective date will be fifteen years or more following their 65th birthday or Medicare Part B effective date, if later.								
Non-Tobacco Rate				Tobacco Rate				
Age <sup>1</sup>	Plan A	Plan G	Plan N	Plan F <sup>4</sup>	Plan A	Plan G	Plan N	Plan F <sup>4</sup>
Level 1 Rates <sup>5</sup> for individuals ages 80 and older whose acceptance is guaranteed <u>or</u> who do not have any of the medical conditions on the application <sup>2</sup> .								
<b>80+</b>	\$289.91	\$351.85	\$241.32	\$451.95	\$333.39	\$404.63	\$277.51	\$519.75
Level 2 Rates <sup>6</sup> for individuals ages 80 and older whose acceptance is not guaranteed <u>and</u> who have one or more of the medical conditions on the application <sup>2</sup> .								
<b>80+</b>	\$513.94	\$620.54	\$533.11	\$673.82	\$591.02	\$713.62	\$613.06	\$774.90

***The rates above are for plan effective dates from June 2025 - May 2026 and may change.***

1 Your age as of your plan effective date.

2 Refer to the application.

3 The **Enrollment Discount** applies if you are between the ages of 65 and 85 and your plan effective date is within fifteen years following your 65th birthday (or your Medicare Part B effective date, if later), and you do not have any medical conditions on the application that would qualify you for the Level 2 rate.

Rates usually change each year. The discount you receive in your first year of coverage depends on your age on your plan effective date. The discount is 45% at ages 65 through 67. The discount percentage reduces by 2% each year on the anniversary date of your plan from age 68 to age 79 and then by 3% from age 80 until it reaches 0% on the anniversary date of your plan on or after age 86.

4 Plan F is available only to applicants eligible for Medicare prior to 1/1/2020.

5 Level 1 Rates apply to individuals whose plan effective date will be fifteen or more years following their 65th birthday (or Medicare Part B effective date, if later). Level 1 Rates are for individuals whose acceptance is guaranteed or who do not have any of the medical conditions on the application.

6 Level 2 Rates apply to individuals whose acceptance is not guaranteed and who have one or more of the medical conditions on the application.

# SOUTH CAROLINA Area 1 ZIP Codes

The Three-Digit ZIP Code Prefixes Below Apply to Rates Included  
on the Page Headed "Cover Page – Rates"

294

295

298

299

**Monthly Plan Rates for South Carolina - Area 2  
Female Non-Tobacco and Tobacco  
AARP® Medicare Supplement Insurance Plans  
insured by UnitedHealthcare Insurance Company of America**

**Additional Discounts\* (not reflected in the rates below) for which you may qualify:**

- **Multi-Insured** – 15% off the rate below if two AARP members are insured under an eligible AARP-branded supplemental insurance policy under the same AARP membership number and share a household address.
  - **Household** – 10% off the rate below if you live with another (no more than three) AARP member.
- Note:** The Multi-Insured Discount and the Household Discount cannot be combined.
- **Electronic Funds Transfer (EFT)** – \$4 per month off the rate below when you pay with EFT.

**\*Also, see the “Rules and Disclosures about this insurance”**

**Group 1**

Applies to individuals whose plan effective date will be within fifteen years following their 65th birthday or Medicare Part B effective date, if later.

**Standard Rates with Enrollment Discount<sup>3</sup> for individuals ages 65-85 whose acceptance is guaranteed or who do not have any of the medical conditions on the application<sup>2</sup>.**

Age <sup>1</sup>	Non-Tobacco Rate				Tobacco Rate			
	Plan A	Plan G	Plan N	Plan F <sup>4</sup>	Plan A	Plan G	Plan N	Plan F <sup>4</sup>
65	\$120.47	\$146.21	\$100.28	\$187.81	\$138.53	\$168.14	\$115.31	\$215.98
66	\$120.47	\$146.21	\$100.28	\$187.81	\$138.53	\$168.14	\$115.31	\$215.98
67	\$120.47	\$146.21	\$100.28	\$187.81	\$138.53	\$168.14	\$115.31	\$215.98
68	\$124.85	\$151.52	\$103.92	\$194.64	\$143.57	\$174.25	\$119.51	\$223.83
69	\$129.23	\$156.84	\$107.57	\$201.47	\$148.61	\$180.36	\$123.70	\$231.69
70	\$133.61	\$162.16	\$111.22	\$208.30	\$153.65	\$186.48	\$127.89	\$239.54
71	\$137.99	\$167.47	\$114.86	\$215.13	\$158.69	\$192.59	\$132.09	\$247.40
72	\$142.37	\$172.79	\$118.51	\$221.96	\$163.72	\$198.71	\$136.28	\$255.25
73	\$146.75	\$178.11	\$122.16	\$228.79	\$168.76	\$204.82	\$140.47	\$263.10
74	\$151.13	\$183.42	\$125.80	\$235.62	\$173.80	\$210.93	\$144.67	\$270.96
75	\$155.51	\$188.74	\$129.45	\$242.45	\$178.84	\$217.05	\$148.86	\$278.81
76	\$159.89	\$194.06	\$133.10	\$249.28	\$183.87	\$223.16	\$153.05	\$286.67
77	\$164.28	\$199.38	\$136.74	\$256.11	\$188.91	\$229.28	\$157.25	\$294.52
78	\$168.66	\$204.69	\$140.39	\$262.93	\$193.95	\$235.39	\$161.44	\$302.37
79	\$173.04	\$210.01	\$144.04	\$269.76	\$198.99	\$241.51	\$165.63	\$310.23
80	\$179.61	\$217.98	\$149.51	\$280.01	\$206.54	\$250.68	\$171.92	\$322.01
81	\$186.18	\$225.96	\$154.98	\$290.25	\$214.10	\$259.85	\$178.21	\$333.79
82	\$192.75	\$233.93	\$160.45	\$300.50	\$221.66	\$269.02	\$184.50	\$345.57
83	\$199.32	\$241.91	\$165.92	\$310.74	\$229.21	\$278.19	\$190.79	\$357.35
84	\$205.89	\$249.88	\$171.39	\$320.99	\$236.77	\$287.36	\$197.08	\$369.13
85	\$212.46	\$257.86	\$176.86	\$331.23	\$244.33	\$296.53	\$203.37	\$380.91

**The rates above are for plan effective dates from June 2025 - May 2026 and may change.**

**Monthly Plan Rates for South Carolina - Area 2  
Female Non-Tobacco and Tobacco  
AARP® Medicare Supplement Insurance Plans  
insured by UnitedHealthcare Insurance Company of America**

Standard Rates for individuals ages 86 and older whose acceptance is guaranteed <u>or</u> who do not have any of the medical conditions on the application <sup>2</sup> .								
<b>86+</b>	\$219.04	\$265.84	\$182.33	\$341.48	\$251.89	\$305.71	\$209.67	\$392.70
Level 2 Rates <sup>6</sup> for individuals ages 65 and older whose acceptance is not guaranteed <u>and</u> who have one or more of the medical conditions on the application <sup>2</sup> .								
<b>65+</b>	\$427.12	\$515.72	\$443.06	\$560.02	\$491.18	\$593.07	\$509.49	\$644.02

<b>Group 2</b>		Applies to individuals whose plan effective date will be fifteen years or more following their 65th birthday or Medicare Part B effective date, if later.							
		Non-Tobacco Rate				Tobacco Rate			
Age <sup>1</sup>	Plan A	Plan G	Plan N	Plan F <sup>4</sup>	Plan A	Plan G	Plan N	Plan F <sup>4</sup>	
Level 1 Rates <sup>5</sup> for individuals ages 80 and older whose acceptance is guaranteed <u>or</u> who do not have any of the medical conditions on the application <sup>2</sup> .									
<b>80+</b>	\$240.94	\$292.42	\$200.56	\$375.62	\$277.07	\$336.28	\$230.63	\$431.97	
Level 2 Rates <sup>6</sup> for individuals ages 80 and older whose acceptance is not guaranteed <u>and</u> who have one or more of the medical conditions on the application <sup>2</sup> .									
<b>80+</b>	\$427.12	\$515.72	\$443.06	\$560.02	\$491.18	\$593.07	\$509.49	\$644.02	

*The rates above are for plan effective dates from June 2025 - May 2026 and may change.*

**Monthly Plan Rates for South Carolina - Area 2  
Male Non-Tobacco and Tobacco  
AARP® Medicare Supplement Insurance Plans  
insured by UnitedHealthcare Insurance Company of America**

**Additional Discounts\* (not reflected in the rates below) for which you may qualify:**

- **Multi-Insured** – 15% off the rate below if two AARP members are insured under an eligible AARP-branded supplemental insurance policy under the same AARP membership number and share a household address.
  - **Household** – 10% off the rate below if you live with another (no more than three) AARP member.
- Note:** The Multi-Insured Discount and the Household Discount cannot be combined.
- **Electronic Funds Transfer (EFT)** – \$4 per month off the rate below when you pay with EFT.

**\*Also, see the “Rules and Disclosures about this insurance”**

**Group 1**

Applies to individuals whose plan effective date will be within fifteen years following their 65th birthday or Medicare Part B effective date, if later.

**Standard Rates with Enrollment Discount<sup>3</sup> for individuals ages 65-85 whose acceptance is guaranteed or who do not have any of the medical conditions on the application<sup>2</sup>.**

Age <sup>1</sup>	Non-Tobacco Rate				Tobacco Rate			
	Plan A	Plan G	Plan N	Plan F <sup>4</sup>	Plan A	Plan G	Plan N	Plan F <sup>4</sup>
65	\$135.85	\$164.87	\$113.08	\$211.78	\$156.22	\$189.60	\$130.04	\$243.55
66	\$135.85	\$164.87	\$113.08	\$211.78	\$156.22	\$189.60	\$130.04	\$243.55
67	\$135.85	\$164.87	\$113.08	\$211.78	\$156.22	\$189.60	\$130.04	\$243.55
68	\$140.79	\$170.87	\$117.19	\$219.48	\$161.90	\$196.50	\$134.77	\$252.41
69	\$145.73	\$176.87	\$121.30	\$227.19	\$167.58	\$203.39	\$139.50	\$261.26
70	\$150.67	\$182.86	\$125.42	\$234.89	\$173.27	\$210.29	\$144.23	\$270.12
71	\$155.61	\$188.86	\$129.53	\$242.59	\$178.95	\$217.18	\$148.96	\$278.98
72	\$160.55	\$194.85	\$133.64	\$250.29	\$184.63	\$224.08	\$153.69	\$287.83
73	\$165.49	\$200.85	\$137.75	\$257.99	\$190.31	\$230.97	\$158.42	\$296.69
74	\$170.43	\$206.84	\$141.87	\$265.69	\$195.99	\$237.87	\$163.15	\$305.55
75	\$175.37	\$212.84	\$145.98	\$273.39	\$201.67	\$244.76	\$167.87	\$314.40
76	\$180.31	\$218.83	\$150.09	\$281.10	\$207.35	\$251.66	\$172.60	\$323.26
77	\$185.25	\$224.83	\$154.20	\$288.80	\$213.03	\$258.55	\$177.33	\$332.12
78	\$190.19	\$230.83	\$158.31	\$296.50	\$218.71	\$265.44	\$182.06	\$340.97
79	\$195.13	\$236.82	\$162.43	\$304.20	\$224.39	\$272.34	\$186.79	\$349.83
80	\$202.54	\$245.81	\$168.60	\$315.75	\$232.92	\$282.68	\$193.88	\$363.12
81	\$209.95	\$254.81	\$174.76	\$327.30	\$241.44	\$293.02	\$200.98	\$376.40
82	\$217.36	\$263.80	\$180.93	\$338.86	\$249.96	\$303.37	\$208.07	\$389.69
83	\$224.77	\$272.79	\$187.10	\$350.41	\$258.48	\$313.71	\$215.16	\$402.97
84	\$232.18	\$281.79	\$193.27	\$361.96	\$267.00	\$324.05	\$222.26	\$416.26
85	\$239.59	\$290.78	\$199.44	\$373.51	\$275.52	\$334.39	\$229.35	\$429.54

**The rates above are for plan effective dates from June 2025 - May 2026 and may change.**

# Monthly Plan Rates for South Carolina - Area 2

## Male Non-Tobacco and Tobacco

AARP® Medicare Supplement Insurance Plans  
insured by UnitedHealthcare Insurance Company of America

Standard Rates for individuals ages 86 and older whose acceptance is guaranteed <u>or</u> who do not have any of the medical conditions on the application <sup>2</sup> .								
<b>86+</b>	\$247.00	\$299.78	\$205.61	\$385.07	\$284.05	\$344.74	\$236.45	\$442.83
Level 2 Rates <sup>6</sup> for individuals ages 65 and older whose acceptance is not guaranteed <u>and</u> who have one or more of the medical conditions on the application <sup>2</sup> .								
<b>65+</b>	\$481.65	\$581.57	\$499.63	\$631.51	\$553.89	\$668.79	\$574.57	\$726.24

<b>Group 2</b>								
Applies to individuals whose plan effective date will be fifteen years or more following their 65th birthday or Medicare Part B effective date, if later.								
Non-Tobacco Rate				Tobacco Rate				
Age <sup>1</sup>	Plan A	Plan G	Plan N	Plan F <sup>4</sup>	Plan A	Plan G	Plan N	Plan F <sup>4</sup>
Level 1 Rates <sup>5</sup> for individuals ages 80 and older whose acceptance is guaranteed <u>or</u> who do not have any of the medical conditions on the application <sup>2</sup> .								
<b>80+</b>	\$271.70	\$329.75	\$226.17	\$423.57	\$312.45	\$379.21	\$260.09	\$487.11
Level 2 Rates <sup>6</sup> for individuals ages 80 and older whose acceptance is not guaranteed <u>and</u> who have one or more of the medical conditions on the application <sup>2</sup> .								
<b>80+</b>	\$481.65	\$581.57	\$499.63	\$631.51	\$553.89	\$668.79	\$574.57	\$726.24

***The rates above are for plan effective dates from June 2025 - May 2026 and may change.***

1 Your age as of your plan effective date.

2 Refer to the application.

3 The **Enrollment Discount** applies if you are between the ages of 65 and 85 and your plan effective date is within fifteen years following your 65th birthday (or your Medicare Part B effective date, if later), and you do not have any medical conditions on the application that would qualify you for the Level 2 rate.

Rates usually change each year. The discount you receive in your first year of coverage depends on your age on your plan effective date. The discount is 45% at ages 65 through 67. The discount percentage reduces by 2% each year on the anniversary date of your plan from age 68 to age 79 and then by 3% from age 80 until it reaches 0% on the anniversary date of your plan on or after age 86.

4 Plan F is available only to applicants eligible for Medicare prior to 1/1/2020.

5 Level 1 Rates apply to individuals whose plan effective date will be fifteen or more years following their 65th birthday (or Medicare Part B effective date, if later). Level 1 Rates are for individuals whose acceptance is guaranteed or who do not have any of the medical conditions on the application.

6 Level 2 Rates apply to individuals whose acceptance is not guaranteed and who have one or more of the medical conditions on the application.

## SOUTH CAROLINA Area 2 ZIP Codes

The Three-Digit ZIP Code Prefixes Below Apply to Rates Included  
on the Page Headed "Cover Page – Rates"

290

291

292

293

296

297