



2026 Rate Information

for AARP Medicare Supplement Insurance Plans

2026 Missouri premium rate information is now available for AARP® Medicare Supplement Insurance Plans insured by UnitedHealthcare® Insurance Company (UHIC).

Effective June 1, 2026, the premium rates in Missouri will change. Please see pages below to view rates for new enrollees with initial plan effective dates of June 1, 2026, to May 1, 2027, or rate change percentages.

In addition to the *What's Up with Med Supp?* page on Jarvis, state-specific rate information can also be found in Medicare Supplement JarvisEnroll or in Enrollment Kits available in [Jarvis](#) under Sales Tools > Sales Materials > Sales Materials Portal.

Find helpful resources

- ✓ Use Medicare Supplement JarvisEnroll for an easy enrollment experience or continue to use your state's current Enrollment Kit until new ones become available, remembering to quote the applicable rate based on the requested plan effective date.
- ✓ Find state-specific Producer Handbooks on the Sales Materials Portal, accessible via [Jarvis](#) and check out *Learning Lab* within [Jarvis](#) to discover helpful guides, job aids, on-demand learnings, and more.
- ✓ Find AARP Medicare Supplement Plans state-specific trainings on [Jarvis](#) under Knowledge Center > Agent Training > National Webinar Schedule, click on Local Trainings.

Questions?

Our dedicated Producer Help Desk (PHD) is here for you every step of the way. [Live chat via Jarvis](#) or call 1-888-381-8581. Español Presione la opción 2.

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Cover Page - Rates

Female Non-Tobacco Monthly Plan Rates for Missouri - Area 1

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|---|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Standard Rates² for individuals whose acceptance is guaranteed or who do not have any of the medical conditions on the application³. | | | | | | | |
| 65 | \$182.50 | \$258.75 | \$244.00 | \$105.50 | \$176.75 | \$212.75 | \$322.25 | \$326.50 |
| 66 | \$189.50 | \$268.50 | \$253.25 | \$109.50 | \$183.50 | \$220.75 | \$334.50 | \$338.75 |
| 67 | \$199.75 | \$283.00 | \$267.25 | \$115.50 | \$193.50 | \$232.75 | \$352.75 | \$357.25 |
| 68 | \$210.00 | \$297.75 | \$281.00 | \$121.50 | \$203.50 | \$244.75 | \$371.00 | \$375.75 |
| 69 | \$219.25 | \$310.75 | \$293.25 | \$126.75 | \$212.25 | \$255.50 | \$387.25 | \$392.25 |
| 70 | \$228.50 | \$323.75 | \$305.50 | \$132.00 | \$221.25 | \$266.25 | \$403.50 | \$408.75 |
| 71 | \$236.50 | \$335.00 | \$316.25 | \$136.75 | \$229.00 | \$275.75 | \$417.75 | \$423.00 |
| 72 | \$244.50 | \$346.50 | \$327.00 | \$141.25 | \$236.75 | \$285.00 | \$431.75 | \$437.50 |
| 73 | \$249.25 | \$353.00 | \$333.25 | \$144.00 | \$241.25 | \$290.25 | \$440.00 | \$445.75 |
| 74 | \$249.25 | \$353.00 | \$333.25 | \$144.00 | \$241.25 | \$290.25 | \$440.00 | \$445.75 |
| 75 | \$261.75 | \$370.75 | \$350.00 | \$151.25 | \$253.50 | \$305.00 | \$462.25 | \$468.25 |
| 76 | \$266.25 | \$377.25 | \$356.25 | \$154.00 | \$258.00 | \$310.50 | \$470.50 | \$476.50 |
| 77 | \$271.00 | \$383.75 | \$362.25 | \$156.50 | \$262.25 | \$315.75 | \$478.50 | \$484.75 |
| 78 | \$274.50 | \$388.75 | \$367.00 | \$158.50 | \$265.75 | \$319.75 | \$484.50 | \$490.75 |
| 79 | \$274.50 | \$388.75 | \$367.00 | \$158.50 | \$265.75 | \$319.75 | \$484.50 | \$490.75 |
| 80-84 | \$290.50 | \$411.50 | \$388.50 | \$167.75 | \$281.25 | \$338.50 | \$513.00 | \$519.50 |
| 85+ | \$299.75 | \$424.50 | \$400.75 | \$173.25 | \$290.00 | \$349.25 | \$529.25 | \$536.00 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Female Non-Tobacco Monthly Plan Rates for Missouri - Area 1

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|--|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Level 2 Rates² for individuals whose acceptance is not guaranteed and who have one or more of the medical conditions on the application³. | | | | | | | |
| 65 | \$273.75 | \$388.12 | \$466.04 | \$158.25 | \$265.12 | \$397.84 | \$483.37 | \$489.75 |
| 66 | \$284.25 | \$402.75 | \$483.70 | \$164.25 | \$275.25 | \$412.80 | \$501.75 | \$508.12 |
| 67 | \$299.62 | \$424.50 | \$510.44 | \$173.25 | \$290.25 | \$435.24 | \$529.12 | \$535.87 |
| 68 | \$315.00 | \$446.62 | \$536.71 | \$182.25 | \$305.25 | \$457.68 | \$556.50 | \$563.62 |
| 69 | \$328.87 | \$466.12 | \$560.10 | \$190.12 | \$318.37 | \$477.78 | \$580.87 | \$588.37 |
| 70 | \$342.75 | \$485.62 | \$583.50 | \$198.00 | \$331.87 | \$497.88 | \$605.25 | \$613.12 |
| 71 | \$354.75 | \$502.50 | \$604.03 | \$205.12 | \$343.50 | \$515.65 | \$626.62 | \$634.50 |
| 72 | \$366.75 | \$519.75 | \$624.57 | \$211.87 | \$355.12 | \$532.95 | \$647.62 | \$656.25 |
| 73 | \$373.87 | \$529.50 | \$636.50 | \$216.00 | \$361.87 | \$542.76 | \$660.00 | \$668.62 |
| 74 | \$373.87 | \$529.50 | \$636.50 | \$216.00 | \$361.87 | \$542.76 | \$660.00 | \$668.62 |
| 75 | \$392.62 | \$556.12 | \$668.50 | \$226.87 | \$380.25 | \$570.35 | \$693.37 | \$702.37 |
| 76 | \$399.37 | \$565.87 | \$680.43 | \$231.00 | \$387.00 | \$580.63 | \$705.75 | \$714.75 |
| 77 | \$406.50 | \$575.62 | \$691.89 | \$234.75 | \$393.37 | \$590.45 | \$717.75 | \$727.12 |
| 78 | \$411.75 | \$583.12 | \$700.97 | \$237.75 | \$398.62 | \$597.93 | \$726.75 | \$736.12 |
| 79 | \$411.75 | \$583.12 | \$700.97 | \$237.75 | \$398.62 | \$597.93 | \$726.75 | \$736.12 |
| 80-84 | \$435.75 | \$617.25 | \$742.03 | \$251.62 | \$421.87 | \$632.99 | \$769.50 | \$779.25 |
| 85+ | \$449.62 | \$636.75 | \$765.43 | \$259.87 | \$435.00 | \$653.09 | \$793.87 | \$804.00 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Female Tobacco Monthly Plan Rates for Missouri - Area 1

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|---|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Standard Rates² for individuals whose acceptance is guaranteed or who do not have any of the medical conditions on the application³. | | | | | | | |
| 65 | \$200.75 | \$284.62 | \$268.40 | \$116.05 | \$194.42 | \$234.02 | \$354.47 | \$359.15 |
| 66 | \$208.45 | \$295.35 | \$278.57 | \$120.45 | \$201.85 | \$242.82 | \$367.95 | \$372.62 |
| 67 | \$219.72 | \$311.30 | \$293.97 | \$127.05 | \$212.85 | \$256.02 | \$388.02 | \$392.97 |
| 68 | \$231.00 | \$327.52 | \$309.10 | \$133.65 | \$223.85 | \$269.22 | \$408.10 | \$413.32 |
| 69 | \$241.17 | \$341.82 | \$322.57 | \$139.42 | \$233.47 | \$281.05 | \$425.97 | \$431.47 |
| 70 | \$251.35 | \$356.12 | \$336.05 | \$145.20 | \$243.37 | \$292.87 | \$443.85 | \$449.62 |
| 71 | \$260.15 | \$368.50 | \$347.87 | \$150.42 | \$251.90 | \$303.32 | \$459.52 | \$465.30 |
| 72 | \$268.95 | \$381.15 | \$359.70 | \$155.37 | \$260.42 | \$313.50 | \$474.92 | \$481.25 |
| 73 | \$274.17 | \$388.30 | \$366.57 | \$158.40 | \$265.37 | \$319.27 | \$484.00 | \$490.32 |
| 74 | \$274.17 | \$388.30 | \$366.57 | \$158.40 | \$265.37 | \$319.27 | \$484.00 | \$490.32 |
| 75 | \$287.92 | \$407.82 | \$385.00 | \$166.37 | \$278.85 | \$335.50 | \$508.47 | \$515.07 |
| 76 | \$292.87 | \$414.97 | \$391.87 | \$169.40 | \$283.80 | \$341.55 | \$517.55 | \$524.15 |
| 77 | \$298.10 | \$422.12 | \$398.47 | \$172.15 | \$288.47 | \$347.32 | \$526.35 | \$533.22 |
| 78 | \$301.95 | \$427.62 | \$403.70 | \$174.35 | \$292.32 | \$351.72 | \$532.95 | \$539.82 |
| 79 | \$301.95 | \$427.62 | \$403.70 | \$174.35 | \$292.32 | \$351.72 | \$532.95 | \$539.82 |
| 80-84 | \$319.55 | \$452.65 | \$427.35 | \$184.52 | \$309.37 | \$372.35 | \$564.30 | \$571.45 |
| 85+ | \$329.72 | \$466.95 | \$440.82 | \$190.57 | \$319.00 | \$384.17 | \$582.17 | \$589.60 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Female Tobacco Monthly Plan Rates for Missouri - Area 1

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|--|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Level 2 Rates² for individuals whose acceptance is not guaranteed and who have one or more of the medical conditions on the application³. | | | | | | | |
| 65 | \$301.12 | \$426.93 | \$512.64 | \$174.07 | \$291.63 | \$437.61 | \$531.70 | \$538.72 |
| 66 | \$312.67 | \$443.02 | \$532.06 | \$180.67 | \$302.77 | \$454.07 | \$551.92 | \$558.93 |
| 67 | \$329.58 | \$466.95 | \$561.48 | \$190.57 | \$319.27 | \$478.75 | \$582.03 | \$589.45 |
| 68 | \$346.50 | \$491.28 | \$590.38 | \$200.47 | \$335.77 | \$503.44 | \$612.15 | \$619.98 |
| 69 | \$361.75 | \$512.73 | \$616.10 | \$209.13 | \$350.20 | \$525.56 | \$638.95 | \$647.20 |
| 70 | \$377.02 | \$534.18 | \$641.85 | \$217.80 | \$365.05 | \$547.66 | \$665.77 | \$674.43 |
| 71 | \$390.22 | \$552.75 | \$664.43 | \$225.63 | \$377.85 | \$567.20 | \$689.28 | \$697.95 |
| 72 | \$403.42 | \$571.72 | \$687.02 | \$233.05 | \$390.63 | \$586.24 | \$712.38 | \$721.87 |
| 73 | \$411.25 | \$582.45 | \$700.14 | \$237.60 | \$398.05 | \$597.03 | \$726.00 | \$735.48 |
| 74 | \$411.25 | \$582.45 | \$700.14 | \$237.60 | \$398.05 | \$597.03 | \$726.00 | \$735.48 |
| 75 | \$431.88 | \$611.73 | \$735.35 | \$249.55 | \$418.27 | \$627.38 | \$762.70 | \$772.60 |
| 76 | \$439.30 | \$622.45 | \$748.47 | \$254.10 | \$425.70 | \$638.69 | \$776.32 | \$786.22 |
| 77 | \$447.15 | \$633.18 | \$761.07 | \$258.22 | \$432.70 | \$649.48 | \$789.52 | \$799.83 |
| 78 | \$452.92 | \$641.43 | \$771.06 | \$261.52 | \$438.48 | \$657.71 | \$799.42 | \$809.73 |
| 79 | \$452.92 | \$641.43 | \$771.06 | \$261.52 | \$438.48 | \$657.71 | \$799.42 | \$809.73 |
| 80-84 | \$479.32 | \$678.97 | \$816.23 | \$276.78 | \$464.05 | \$696.29 | \$846.45 | \$857.17 |
| 85+ | \$494.58 | \$700.42 | \$841.96 | \$285.85 | \$478.50 | \$718.39 | \$873.25 | \$884.40 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Male Non-Tobacco Monthly Plan Rates for Missouri - Area 1

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|---|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Standard Rates² for individuals whose acceptance is guaranteed or who do not have any of the medical conditions on the application³. | | | | | | | |
| 65 | \$202.75 | \$287.25 | \$271.25 | \$117.25 | \$196.25 | \$236.25 | \$358.25 | \$363.00 |
| 66 | \$210.50 | \$298.00 | \$281.50 | \$121.75 | \$203.75 | \$245.25 | \$371.75 | \$376.50 |
| 67 | \$222.00 | \$314.50 | \$296.75 | \$128.50 | \$214.75 | \$258.75 | \$392.00 | \$397.25 |
| 68 | \$233.50 | \$330.75 | \$312.25 | \$135.00 | \$226.00 | \$272.00 | \$412.25 | \$417.75 |
| 69 | \$243.75 | \$345.00 | \$325.75 | \$141.00 | \$235.75 | \$284.00 | \$430.25 | \$436.00 |
| 70 | \$254.00 | \$359.50 | \$339.50 | \$146.75 | \$245.75 | \$295.75 | \$448.25 | \$454.25 |
| 71 | \$262.75 | \$372.25 | \$351.50 | \$152.00 | \$254.25 | \$306.25 | \$464.00 | \$470.25 |
| 72 | \$271.75 | \$384.75 | \$363.25 | \$157.25 | \$263.00 | \$316.75 | \$479.75 | \$486.25 |
| 73 | \$277.00 | \$392.00 | \$370.25 | \$160.00 | \$268.00 | \$322.50 | \$488.75 | \$495.25 |
| 74 | \$277.00 | \$392.00 | \$370.25 | \$160.00 | \$268.00 | \$322.50 | \$488.75 | \$495.25 |
| 75 | \$291.00 | \$412.00 | \$389.00 | \$168.25 | \$281.50 | \$339.00 | \$513.50 | \$520.50 |
| 76 | \$296.00 | \$419.25 | \$395.75 | \$171.25 | \$286.50 | \$345.00 | \$522.50 | \$529.50 |
| 77 | \$301.00 | \$426.50 | \$402.50 | \$174.00 | \$291.25 | \$350.75 | \$531.50 | \$538.75 |
| 78 | \$305.00 | \$431.75 | \$407.75 | \$176.25 | \$295.00 | \$355.25 | \$538.25 | \$545.50 |
| 79 | \$305.00 | \$431.75 | \$407.75 | \$176.25 | \$295.00 | \$355.25 | \$538.25 | \$545.50 |
| 80-84 | \$322.75 | \$457.00 | \$431.50 | \$186.75 | \$312.25 | \$376.00 | \$570.00 | \$577.50 |
| 85+ | \$333.00 | \$471.50 | \$445.25 | \$192.50 | \$322.25 | \$388.00 | \$588.00 | \$595.75 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Male Non-Tobacco Monthly Plan Rates for Missouri - Area 1

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|--|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Level 2 Rates² for individuals whose acceptance is not guaranteed and who have one or more of the medical conditions on the application³. | | | | | | | |
| 65 | \$304.12 | \$430.87 | \$518.08 | \$175.87 | \$294.37 | \$441.78 | \$537.37 | \$544.50 |
| 66 | \$315.75 | \$447.00 | \$537.66 | \$182.62 | \$305.62 | \$458.61 | \$557.62 | \$564.75 |
| 67 | \$333.00 | \$471.75 | \$566.79 | \$192.75 | \$322.12 | \$483.86 | \$588.00 | \$595.87 |
| 68 | \$350.25 | \$496.12 | \$596.39 | \$202.50 | \$339.00 | \$508.64 | \$618.37 | \$626.62 |
| 69 | \$365.62 | \$517.50 | \$622.18 | \$211.50 | \$353.62 | \$531.08 | \$645.37 | \$654.00 |
| 70 | \$381.00 | \$539.25 | \$648.44 | \$220.12 | \$368.62 | \$553.05 | \$672.37 | \$681.37 |
| 71 | \$394.12 | \$558.37 | \$671.36 | \$228.00 | \$381.37 | \$572.68 | \$696.00 | \$705.37 |
| 72 | \$407.62 | \$577.12 | \$693.80 | \$235.87 | \$394.50 | \$592.32 | \$719.62 | \$729.37 |
| 73 | \$415.50 | \$588.00 | \$707.17 | \$240.00 | \$402.00 | \$603.07 | \$733.12 | \$742.87 |
| 74 | \$415.50 | \$588.00 | \$707.17 | \$240.00 | \$402.00 | \$603.07 | \$733.12 | \$742.87 |
| 75 | \$436.50 | \$618.00 | \$742.99 | \$252.37 | \$422.25 | \$633.93 | \$770.25 | \$780.75 |
| 76 | \$444.00 | \$628.87 | \$755.88 | \$256.87 | \$429.75 | \$645.15 | \$783.75 | \$794.25 |
| 77 | \$451.50 | \$639.75 | \$768.77 | \$261.00 | \$436.87 | \$655.90 | \$797.25 | \$808.12 |
| 78 | \$457.50 | \$647.62 | \$778.80 | \$264.37 | \$442.50 | \$664.31 | \$807.37 | \$818.25 |
| 79 | \$457.50 | \$647.62 | \$778.80 | \$264.37 | \$442.50 | \$664.31 | \$807.37 | \$818.25 |
| 80-84 | \$484.12 | \$685.50 | \$824.16 | \$280.12 | \$468.37 | \$703.12 | \$855.00 | \$866.25 |
| 85+ | \$499.50 | \$707.25 | \$850.42 | \$288.75 | \$483.37 | \$725.56 | \$882.00 | \$893.62 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Male Tobacco Monthly Plan Rates for Missouri - Area 1

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|---|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Standard Rates² for individuals whose acceptance is guaranteed or who do not have any of the medical conditions on the application³. | | | | | | | |
| 65 | \$223.02 | \$315.97 | \$298.37 | \$128.97 | \$215.87 | \$259.87 | \$394.07 | \$399.30 |
| 66 | \$231.55 | \$327.80 | \$309.65 | \$133.92 | \$224.12 | \$269.77 | \$408.92 | \$414.15 |
| 67 | \$244.20 | \$345.95 | \$326.42 | \$141.35 | \$236.22 | \$284.62 | \$431.20 | \$436.97 |
| 68 | \$256.85 | \$363.82 | \$343.47 | \$148.50 | \$248.60 | \$299.20 | \$453.47 | \$459.52 |
| 69 | \$268.12 | \$379.50 | \$358.32 | \$155.10 | \$259.32 | \$312.40 | \$473.27 | \$479.60 |
| 70 | \$279.40 | \$395.45 | \$373.45 | \$161.42 | \$270.32 | \$325.32 | \$493.07 | \$499.67 |
| 71 | \$289.02 | \$409.47 | \$386.65 | \$167.20 | \$279.67 | \$336.87 | \$510.40 | \$517.27 |
| 72 | \$298.92 | \$423.22 | \$399.57 | \$172.97 | \$289.30 | \$348.42 | \$527.72 | \$534.87 |
| 73 | \$304.70 | \$431.20 | \$407.27 | \$176.00 | \$294.80 | \$354.75 | \$537.62 | \$544.77 |
| 74 | \$304.70 | \$431.20 | \$407.27 | \$176.00 | \$294.80 | \$354.75 | \$537.62 | \$544.77 |
| 75 | \$320.10 | \$453.20 | \$427.90 | \$185.07 | \$309.65 | \$372.90 | \$564.85 | \$572.55 |
| 76 | \$325.60 | \$461.17 | \$435.32 | \$188.37 | \$315.15 | \$379.50 | \$574.75 | \$582.45 |
| 77 | \$331.10 | \$469.15 | \$442.75 | \$191.40 | \$320.37 | \$385.82 | \$584.65 | \$592.62 |
| 78 | \$335.50 | \$474.92 | \$448.52 | \$193.87 | \$324.50 | \$390.77 | \$592.07 | \$600.05 |
| 79 | \$335.50 | \$474.92 | \$448.52 | \$193.87 | \$324.50 | \$390.77 | \$592.07 | \$600.05 |
| 80-84 | \$355.02 | \$502.70 | \$474.65 | \$205.42 | \$343.47 | \$413.60 | \$627.00 | \$635.25 |
| 85+ | \$366.30 | \$518.65 | \$489.77 | \$211.75 | \$354.47 | \$426.80 | \$646.80 | \$655.32 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Male Tobacco Monthly Plan Rates for Missouri - Area 1

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|--|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Level 2 Rates² for individuals whose acceptance is not guaranteed and who have one or more of the medical conditions on the application³. | | | | | | | |
| 65 | \$334.53 | \$473.95 | \$569.88 | \$193.45 | \$323.80 | \$485.95 | \$591.10 | \$598.95 |
| 66 | \$347.32 | \$491.70 | \$591.43 | \$200.88 | \$336.18 | \$504.46 | \$613.38 | \$621.22 |
| 67 | \$366.30 | \$518.92 | \$623.46 | \$212.02 | \$354.33 | \$532.23 | \$646.80 | \$655.45 |
| 68 | \$385.27 | \$545.73 | \$656.02 | \$222.75 | \$372.90 | \$559.50 | \$680.20 | \$689.28 |
| 69 | \$402.18 | \$569.25 | \$684.39 | \$232.65 | \$388.98 | \$584.18 | \$709.90 | \$719.40 |
| 70 | \$419.10 | \$593.17 | \$713.28 | \$242.13 | \$405.48 | \$608.34 | \$739.60 | \$749.50 |
| 71 | \$433.53 | \$614.20 | \$738.50 | \$250.80 | \$419.50 | \$629.94 | \$765.60 | \$775.90 |
| 72 | \$448.38 | \$634.83 | \$763.17 | \$259.45 | \$433.95 | \$651.54 | \$791.58 | \$802.30 |
| 73 | \$457.05 | \$646.80 | \$777.88 | \$264.00 | \$442.20 | \$663.38 | \$806.43 | \$817.15 |
| 74 | \$457.05 | \$646.80 | \$777.88 | \$264.00 | \$442.20 | \$663.38 | \$806.43 | \$817.15 |
| 75 | \$480.15 | \$679.80 | \$817.28 | \$277.60 | \$464.47 | \$697.32 | \$847.27 | \$858.82 |
| 76 | \$488.40 | \$691.75 | \$831.46 | \$282.55 | \$472.72 | \$709.66 | \$862.12 | \$873.67 |
| 77 | \$496.65 | \$703.72 | \$845.65 | \$287.10 | \$480.55 | \$721.48 | \$876.97 | \$888.93 |
| 78 | \$503.25 | \$712.38 | \$856.67 | \$290.80 | \$486.75 | \$730.73 | \$888.10 | \$900.07 |
| 79 | \$503.25 | \$712.38 | \$856.67 | \$290.80 | \$486.75 | \$730.73 | \$888.10 | \$900.07 |
| 80-84 | \$532.53 | \$754.05 | \$906.58 | \$308.13 | \$515.20 | \$773.43 | \$940.50 | \$952.87 |
| 85+ | \$549.45 | \$777.97 | \$935.46 | \$317.62 | \$531.70 | \$798.11 | \$970.20 | \$982.98 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Under 65 Monthly Plan Rates for Missouri - Area 1

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|----------|--|----------|----------|----------|----------|---|---------------------|
| Group 3 | | Applies to individuals under age 65 who are eligible for Medicare. | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| Female Non-Tobacco Rates | | | | | | | | |
| Under 65 | \$202.25 | \$282.00 | \$262.25 | \$122.50 | \$207.50 | \$246.75 | \$366.00 | \$369.50 |
| Male Non-Tobacco Rates | | | | | | | | |
| Under 65 | \$224.75 | \$313.25 | \$291.50 | \$136.25 | \$230.50 | \$274.25 | \$406.75 | \$410.75 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

1 Your age as of your plan effective date.

2 Your rate will always be based on your age on your effective date.

3 Refer to the application.

4 **IMPORTANT:** Plans C and F are only available to eligible Applicants (a) with a 65th birthday prior to 1/1/2020 or (b) with a Medicare Part A effective date prior to 1/1/2020.

MISSOURI Area 1 ZIP Codes

The ZIP Codes Below Apply to Rates Included on the Page Headed "Cover Page – Rates"

| | | | | | | |
|-------|-------|-------|-------|-------|-------|-------|
| 63010 | 63104 | 63342 | 64028 | 64084 | 64138 | 64701 |
| 63012 | 63106 | 63343 | 64029 | 64085 | 64139 | 64725 |
| 63013 | 63107 | 63346 | 64030 | 64086 | 64141 | 64733 |
| 63014 | 63108 | 63347 | 64034 | 64088 | 64144 | 64734 |
| 63015 | 63109 | 63348 | 64035 | 64089 | 64145 | 64743 |
| 63016 | 63110 | 63349 | 64036 | 64090 | 64146 | 64746 |
| 63019 | 63111 | 63357 | 64037 | 64092 | 64147 | 64747 |
| 63020 | 63112 | 63362 | 64040 | 64093 | 64148 | 64761 |
| 63023 | 63113 | 63365 | 64048 | 64096 | 64149 | 64999 |
| 63028 | 63115 | 63366 | 64050 | 64097 | 64150 | 65305 |
| 63030 | 63116 | 63367 | 64051 | 64098 | 64151 | 65327 |
| 63037 | 63118 | 63368 | 64052 | 64101 | 64152 | 65336 |
| 63039 | 63120 | 63369 | 64053 | 64102 | 64153 | |
| 63041 | 63139 | 63370 | 64054 | 64105 | 64154 | |
| 63047 | 63147 | 63373 | 64055 | 64106 | 64155 | |
| 63048 | 63150 | 63376 | 64056 | 64108 | 64156 | |
| 63049 | 63155 | 63377 | 64057 | 64109 | 64157 | |
| 63050 | 63156 | 63378 | 64058 | 64110 | 64158 | |
| 63051 | 63157 | 63379 | 64060 | 64111 | 64161 | |
| 63052 | 63158 | 63380 | 64061 | 64112 | 64162 | |
| 63053 | 63160 | 63381 | 64062 | 64113 | 64163 | |
| 63055 | 63163 | 63383 | 64063 | 64114 | 64164 | |
| 63056 | 63164 | 63385 | 64064 | 64116 | 64165 | |
| 63057 | 63166 | 63386 | 64065 | 64117 | 64166 | |
| 63060 | 63169 | 63387 | 64066 | 64118 | 64167 | |
| 63061 | 63171 | 63389 | 64067 | 64119 | 64168 | |
| 63065 | 63177 | 63390 | 64068 | 64120 | 64170 | |
| 63066 | 63178 | 64001 | 64069 | 64121 | 64171 | |
| 63068 | 63179 | 64002 | 64070 | 64123 | 64179 | |
| 63069 | 63180 | 64011 | 64071 | 64124 | 64180 | |
| 63070 | 63182 | 64012 | 64072 | 64125 | 64184 | |
| 63072 | 63188 | 64013 | 64073 | 64126 | 64187 | |
| 63073 | 63195 | 64014 | 64074 | 64127 | 64188 | |
| 63077 | 63197 | 64015 | 64075 | 64128 | 64190 | |
| 63079 | 63199 | 64016 | 64076 | 64129 | 64191 | |
| 63080 | 63301 | 64017 | 64077 | 64130 | 64195 | |
| 63084 | 63302 | 64018 | 64078 | 64131 | 64196 | |
| 63089 | 63303 | 64019 | 64079 | 64132 | 64197 | |
| 63090 | 63304 | 64020 | 64080 | 64133 | 64198 | |
| 63101 | 63332 | 64021 | 64081 | 64134 | 64199 | |
| 63102 | 63338 | 64022 | 64082 | 64136 | 64439 | |
| 63103 | 63341 | 64024 | 64083 | 64137 | 64444 | |

Cover Page - Rates

Female Non-Tobacco Monthly Plan Rates for Missouri - Area 2

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|---|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Standard Rates² for individuals whose acceptance is guaranteed or who do not have any of the medical conditions on the application³. | | | | | | | |
| 65 | \$167.75 | \$237.75 | \$224.25 | \$97.00 | \$162.50 | \$195.50 | \$322.25 | \$326.50 |
| 66 | \$174.00 | \$246.50 | \$232.75 | \$100.50 | \$168.50 | \$202.75 | \$334.50 | \$338.75 |
| 67 | \$183.50 | \$260.00 | \$245.50 | \$106.00 | \$177.75 | \$214.00 | \$352.75 | \$357.25 |
| 68 | \$193.00 | \$273.50 | \$258.25 | \$111.50 | \$187.00 | \$225.00 | \$371.00 | \$375.75 |
| 69 | \$201.50 | \$285.50 | \$269.50 | \$116.50 | \$195.00 | \$234.75 | \$387.25 | \$392.25 |
| 70 | \$210.00 | \$297.50 | \$280.75 | \$121.25 | \$203.25 | \$244.75 | \$403.50 | \$408.75 |
| 71 | \$217.25 | \$308.00 | \$290.50 | \$125.50 | \$210.50 | \$253.25 | \$417.75 | \$423.00 |
| 72 | \$224.75 | \$318.25 | \$300.50 | \$129.75 | \$217.50 | \$262.00 | \$431.75 | \$437.50 |
| 73 | \$229.00 | \$324.25 | \$306.25 | \$132.25 | \$221.75 | \$266.75 | \$440.00 | \$445.75 |
| 74 | \$229.00 | \$324.25 | \$306.25 | \$132.25 | \$221.75 | \$266.75 | \$440.00 | \$445.75 |
| 75 | \$240.50 | \$340.75 | \$321.75 | \$139.00 | \$233.00 | \$280.25 | \$462.25 | \$468.25 |
| 76 | \$244.75 | \$346.75 | \$327.25 | \$141.50 | \$237.00 | \$285.25 | \$470.50 | \$476.50 |
| 77 | \$249.00 | \$352.75 | \$333.00 | \$144.00 | \$241.00 | \$290.25 | \$478.50 | \$484.75 |
| 78 | \$252.25 | \$357.25 | \$337.25 | \$145.75 | \$244.00 | \$293.75 | \$484.50 | \$490.75 |
| 79 | \$252.25 | \$357.25 | \$337.25 | \$145.75 | \$244.00 | \$293.75 | \$484.50 | \$490.75 |
| 80-84 | \$267.00 | \$378.25 | \$357.00 | \$154.25 | \$258.50 | \$311.00 | \$513.00 | \$519.50 |
| 85+ | \$275.25 | \$390.00 | \$368.25 | \$159.25 | \$266.50 | \$321.00 | \$529.25 | \$536.00 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Female Non-Tobacco Monthly Plan Rates for Missouri - Area 2

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|--|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Level 2 Rates² for individuals whose acceptance is not guaranteed and who have one or more of the medical conditions on the application³. | | | | | | | |
| 65 | \$251.62 | \$356.62 | \$428.31 | \$145.50 | \$243.75 | \$365.58 | \$483.37 | \$489.75 |
| 66 | \$261.00 | \$369.75 | \$444.55 | \$150.75 | \$252.75 | \$379.14 | \$501.75 | \$508.12 |
| 67 | \$275.25 | \$390.00 | \$468.90 | \$159.00 | \$266.62 | \$400.18 | \$529.12 | \$535.87 |
| 68 | \$289.50 | \$410.25 | \$493.25 | \$167.25 | \$280.50 | \$420.75 | \$556.50 | \$563.62 |
| 69 | \$302.25 | \$428.25 | \$514.74 | \$174.75 | \$292.50 | \$438.98 | \$580.87 | \$588.37 |
| 70 | \$315.00 | \$446.25 | \$536.23 | \$181.87 | \$304.87 | \$457.68 | \$605.25 | \$613.12 |
| 71 | \$325.87 | \$462.00 | \$554.85 | \$188.25 | \$315.75 | \$473.57 | \$626.62 | \$634.50 |
| 72 | \$337.12 | \$477.37 | \$573.95 | \$194.62 | \$326.25 | \$489.94 | \$647.62 | \$656.25 |
| 73 | \$343.50 | \$486.37 | \$584.93 | \$198.37 | \$332.62 | \$498.82 | \$660.00 | \$668.62 |
| 74 | \$343.50 | \$486.37 | \$584.93 | \$198.37 | \$332.62 | \$498.82 | \$660.00 | \$668.62 |
| 75 | \$360.75 | \$511.12 | \$614.54 | \$208.50 | \$349.50 | \$524.06 | \$693.37 | \$702.37 |
| 76 | \$367.12 | \$520.12 | \$625.04 | \$212.25 | \$355.50 | \$533.41 | \$705.75 | \$714.75 |
| 77 | \$373.50 | \$529.12 | \$636.03 | \$216.00 | \$361.50 | \$542.76 | \$717.75 | \$727.12 |
| 78 | \$378.37 | \$535.87 | \$644.14 | \$218.62 | \$366.00 | \$549.31 | \$726.75 | \$736.12 |
| 79 | \$378.37 | \$535.87 | \$644.14 | \$218.62 | \$366.00 | \$549.31 | \$726.75 | \$736.12 |
| 80-84 | \$400.50 | \$567.37 | \$681.87 | \$231.37 | \$387.75 | \$581.57 | \$769.50 | \$779.25 |
| 85+ | \$412.87 | \$585.00 | \$703.35 | \$238.87 | \$399.75 | \$600.27 | \$793.87 | \$804.00 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Female Tobacco Monthly Plan Rates for Missouri - Area 2

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|---|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Standard Rates² for individuals whose acceptance is guaranteed or who do not have any of the medical conditions on the application³. | | | | | | | |
| 65 | \$184.52 | \$261.52 | \$246.67 | \$106.70 | \$178.75 | \$215.05 | \$354.47 | \$359.15 |
| 66 | \$191.40 | \$271.15 | \$256.02 | \$110.55 | \$185.35 | \$223.02 | \$367.95 | \$372.62 |
| 67 | \$201.85 | \$286.00 | \$270.05 | \$116.60 | \$195.52 | \$235.40 | \$388.02 | \$392.97 |
| 68 | \$212.30 | \$300.85 | \$284.07 | \$122.65 | \$205.70 | \$247.50 | \$408.10 | \$413.32 |
| 69 | \$221.65 | \$314.05 | \$296.45 | \$128.15 | \$214.50 | \$258.22 | \$425.97 | \$431.47 |
| 70 | \$231.00 | \$327.25 | \$308.82 | \$133.37 | \$223.57 | \$269.22 | \$443.85 | \$449.62 |
| 71 | \$238.97 | \$338.80 | \$319.55 | \$138.05 | \$231.55 | \$278.57 | \$459.52 | \$465.30 |
| 72 | \$247.22 | \$350.07 | \$330.55 | \$142.72 | \$239.25 | \$288.20 | \$474.92 | \$481.25 |
| 73 | \$251.90 | \$356.67 | \$336.87 | \$145.47 | \$243.92 | \$293.42 | \$484.00 | \$490.32 |
| 74 | \$251.90 | \$356.67 | \$336.87 | \$145.47 | \$243.92 | \$293.42 | \$484.00 | \$490.32 |
| 75 | \$264.55 | \$374.82 | \$353.92 | \$152.90 | \$256.30 | \$308.27 | \$508.47 | \$515.07 |
| 76 | \$269.22 | \$381.42 | \$359.97 | \$155.65 | \$260.70 | \$313.77 | \$517.55 | \$524.15 |
| 77 | \$273.90 | \$388.02 | \$366.30 | \$158.40 | \$265.10 | \$319.27 | \$526.35 | \$533.22 |
| 78 | \$277.47 | \$392.97 | \$370.97 | \$160.32 | \$268.40 | \$323.12 | \$532.95 | \$539.82 |
| 79 | \$277.47 | \$392.97 | \$370.97 | \$160.32 | \$268.40 | \$323.12 | \$532.95 | \$539.82 |
| 80-84 | \$293.70 | \$416.07 | \$392.70 | \$169.67 | \$284.35 | \$342.10 | \$564.30 | \$571.45 |
| 85+ | \$302.77 | \$429.00 | \$405.07 | \$175.17 | \$293.15 | \$353.10 | \$582.17 | \$589.60 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Female Tobacco Monthly Plan Rates for Missouri - Area 2

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|--|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Level 2 Rates² for individuals whose acceptance is not guaranteed and who have one or more of the medical conditions on the application³. | | | | | | | |
| 65 | \$276.78 | \$392.28 | \$471.13 | \$160.05 | \$268.12 | \$402.14 | \$531.70 | \$538.72 |
| 66 | \$287.10 | \$406.72 | \$488.99 | \$165.82 | \$278.02 | \$417.04 | \$551.92 | \$558.93 |
| 67 | \$302.77 | \$429.00 | \$515.79 | \$174.90 | \$293.28 | \$440.19 | \$582.03 | \$589.45 |
| 68 | \$318.45 | \$451.27 | \$542.57 | \$183.97 | \$308.55 | \$462.82 | \$612.15 | \$619.98 |
| 69 | \$332.47 | \$471.07 | \$566.21 | \$192.22 | \$321.75 | \$482.87 | \$638.95 | \$647.20 |
| 70 | \$346.50 | \$490.87 | \$589.84 | \$200.05 | \$335.35 | \$503.44 | \$665.77 | \$674.43 |
| 71 | \$358.45 | \$508.20 | \$610.34 | \$207.07 | \$347.32 | \$520.92 | \$689.28 | \$697.95 |
| 72 | \$370.83 | \$525.10 | \$631.35 | \$214.08 | \$358.87 | \$538.93 | \$712.38 | \$721.87 |
| 73 | \$377.85 | \$535.00 | \$643.42 | \$218.20 | \$365.88 | \$548.69 | \$726.00 | \$735.48 |
| 74 | \$377.85 | \$535.00 | \$643.42 | \$218.20 | \$365.88 | \$548.69 | \$726.00 | \$735.48 |
| 75 | \$396.82 | \$562.23 | \$675.98 | \$229.35 | \$384.45 | \$576.46 | \$762.70 | \$772.60 |
| 76 | \$403.83 | \$572.13 | \$687.54 | \$233.47 | \$391.05 | \$586.74 | \$776.32 | \$786.22 |
| 77 | \$410.85 | \$582.03 | \$699.63 | \$237.60 | \$397.65 | \$597.03 | \$789.52 | \$799.83 |
| 78 | \$416.20 | \$589.45 | \$708.55 | \$240.48 | \$402.60 | \$604.23 | \$799.42 | \$809.73 |
| 79 | \$416.20 | \$589.45 | \$708.55 | \$240.48 | \$402.60 | \$604.23 | \$799.42 | \$809.73 |
| 80-84 | \$440.55 | \$624.10 | \$750.05 | \$254.50 | \$426.52 | \$639.72 | \$846.45 | \$857.17 |
| 85+ | \$454.15 | \$643.50 | \$773.68 | \$262.75 | \$439.72 | \$660.29 | \$873.25 | \$884.40 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Male Non-Tobacco Monthly Plan Rates for Missouri - Area 2

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|---|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Standard Rates² for individuals whose acceptance is guaranteed or who do not have any of the medical conditions on the application³. | | | | | | | |
| 65 | \$186.50 | \$264.00 | \$249.25 | \$107.75 | \$180.25 | \$217.25 | \$358.25 | \$363.00 |
| 66 | \$193.50 | \$274.00 | \$258.50 | \$111.75 | \$187.25 | \$225.50 | \$371.75 | \$376.50 |
| 67 | \$204.00 | \$289.00 | \$272.75 | \$118.00 | \$197.50 | \$237.75 | \$392.00 | \$397.25 |
| 68 | \$214.50 | \$303.75 | \$286.75 | \$124.00 | \$207.50 | \$250.00 | \$412.25 | \$417.75 |
| 69 | \$224.00 | \$317.00 | \$299.25 | \$129.50 | \$216.75 | \$261.00 | \$430.25 | \$436.00 |
| 70 | \$233.25 | \$330.50 | \$312.00 | \$135.00 | \$225.75 | \$271.75 | \$448.25 | \$454.25 |
| 71 | \$241.50 | \$342.00 | \$323.00 | \$139.75 | \$233.75 | \$281.50 | \$464.00 | \$470.25 |
| 72 | \$249.75 | \$353.75 | \$333.75 | \$144.50 | \$241.75 | \$291.00 | \$479.75 | \$486.25 |
| 73 | \$254.50 | \$360.25 | \$340.00 | \$147.00 | \$246.25 | \$296.50 | \$488.75 | \$495.25 |
| 74 | \$254.50 | \$360.25 | \$340.00 | \$147.00 | \$246.25 | \$296.50 | \$488.75 | \$495.25 |
| 75 | \$267.25 | \$378.50 | \$357.25 | \$154.50 | \$258.75 | \$311.50 | \$513.50 | \$520.50 |
| 76 | \$272.00 | \$385.25 | \$363.75 | \$157.25 | \$263.25 | \$317.00 | \$522.50 | \$529.50 |
| 77 | \$276.75 | \$391.75 | \$370.00 | \$160.00 | \$267.75 | \$322.25 | \$531.50 | \$538.75 |
| 78 | \$280.25 | \$396.75 | \$374.50 | \$162.00 | \$271.00 | \$326.50 | \$538.25 | \$545.50 |
| 79 | \$280.25 | \$396.75 | \$374.50 | \$162.00 | \$271.00 | \$326.50 | \$538.25 | \$545.50 |
| 80-84 | \$296.75 | \$420.00 | \$396.50 | \$171.50 | \$287.00 | \$345.50 | \$570.00 | \$577.50 |
| 85+ | \$306.00 | \$433.25 | \$409.00 | \$177.00 | \$296.00 | \$356.50 | \$588.00 | \$595.75 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Male Non-Tobacco Monthly Plan Rates for Missouri - Area 2

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|---|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Level 2 Rates ² for individuals whose acceptance is not guaranteed <u>and</u> who have one or more of the medical conditions on the application ³ . | | | | | | | |
| 65 | \$279.75 | \$396.00 | \$476.06 | \$161.62 | \$270.37 | \$406.25 | \$537.37 | \$544.50 |
| 66 | \$290.25 | \$411.00 | \$493.73 | \$167.62 | \$280.87 | \$421.68 | \$557.62 | \$564.75 |
| 67 | \$306.00 | \$433.50 | \$520.95 | \$177.00 | \$296.25 | \$444.59 | \$588.00 | \$595.87 |
| 68 | \$321.75 | \$455.62 | \$547.69 | \$186.00 | \$311.25 | \$467.50 | \$618.37 | \$626.62 |
| 69 | \$336.00 | \$475.50 | \$571.56 | \$194.25 | \$325.12 | \$488.07 | \$645.37 | \$654.00 |
| 70 | \$349.87 | \$495.75 | \$595.92 | \$202.50 | \$338.62 | \$508.17 | \$672.37 | \$681.37 |
| 71 | \$362.25 | \$513.00 | \$616.93 | \$209.62 | \$350.62 | \$526.40 | \$696.00 | \$705.37 |
| 72 | \$374.62 | \$530.62 | \$637.46 | \$216.75 | \$362.62 | \$544.17 | \$719.62 | \$729.37 |
| 73 | \$381.75 | \$540.37 | \$649.40 | \$220.50 | \$369.37 | \$554.45 | \$733.12 | \$742.87 |
| 74 | \$381.75 | \$540.37 | \$649.40 | \$220.50 | \$369.37 | \$554.45 | \$733.12 | \$742.87 |
| 75 | \$400.87 | \$567.75 | \$682.34 | \$231.75 | \$388.12 | \$582.50 | \$770.25 | \$780.75 |
| 76 | \$408.00 | \$577.87 | \$694.76 | \$235.87 | \$394.87 | \$592.79 | \$783.75 | \$794.25 |
| 77 | \$415.12 | \$587.62 | \$706.70 | \$240.00 | \$401.62 | \$602.60 | \$797.25 | \$808.12 |
| 78 | \$420.37 | \$595.12 | \$715.29 | \$243.00 | \$406.50 | \$610.55 | \$807.37 | \$818.25 |
| 79 | \$420.37 | \$595.12 | \$715.29 | \$243.00 | \$406.50 | \$610.55 | \$807.37 | \$818.25 |
| 80-84 | \$445.12 | \$630.00 | \$757.31 | \$257.25 | \$430.50 | \$646.08 | \$855.00 | \$866.25 |
| 85+ | \$459.00 | \$649.87 | \$781.19 | \$265.50 | \$444.00 | \$666.65 | \$882.00 | \$893.62 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Male Tobacco Monthly Plan Rates for Missouri - Area 2

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|---|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Standard Rates² for individuals whose acceptance is guaranteed or who do not have any of the medical conditions on the application³. | | | | | | | |
| 65 | \$205.15 | \$290.40 | \$274.17 | \$118.52 | \$198.27 | \$238.97 | \$394.07 | \$399.30 |
| 66 | \$212.85 | \$301.40 | \$284.35 | \$122.92 | \$205.97 | \$248.05 | \$408.92 | \$414.15 |
| 67 | \$224.40 | \$317.90 | \$300.02 | \$129.80 | \$217.25 | \$261.52 | \$431.20 | \$436.97 |
| 68 | \$235.95 | \$334.12 | \$315.42 | \$136.40 | \$228.25 | \$275.00 | \$453.47 | \$459.52 |
| 69 | \$246.40 | \$348.70 | \$329.17 | \$142.45 | \$238.42 | \$287.10 | \$473.27 | \$479.60 |
| 70 | \$256.57 | \$363.55 | \$343.20 | \$148.50 | \$248.32 | \$298.92 | \$493.07 | \$499.67 |
| 71 | \$265.65 | \$376.20 | \$355.30 | \$153.72 | \$257.12 | \$309.65 | \$510.40 | \$517.27 |
| 72 | \$274.72 | \$389.12 | \$367.12 | \$158.95 | \$265.92 | \$320.10 | \$527.72 | \$534.87 |
| 73 | \$279.95 | \$396.27 | \$374.00 | \$161.70 | \$270.87 | \$326.15 | \$537.62 | \$544.77 |
| 74 | \$279.95 | \$396.27 | \$374.00 | \$161.70 | \$270.87 | \$326.15 | \$537.62 | \$544.77 |
| 75 | \$293.97 | \$416.35 | \$392.97 | \$169.95 | \$284.62 | \$342.65 | \$564.85 | \$572.55 |
| 76 | \$299.20 | \$423.77 | \$400.12 | \$172.97 | \$289.57 | \$348.70 | \$574.75 | \$582.45 |
| 77 | \$304.42 | \$430.92 | \$407.00 | \$176.00 | \$294.52 | \$354.47 | \$584.65 | \$592.62 |
| 78 | \$308.27 | \$436.42 | \$411.95 | \$178.20 | \$298.10 | \$359.15 | \$592.07 | \$600.05 |
| 79 | \$308.27 | \$436.42 | \$411.95 | \$178.20 | \$298.10 | \$359.15 | \$592.07 | \$600.05 |
| 80-84 | \$326.42 | \$462.00 | \$436.15 | \$188.65 | \$315.70 | \$380.05 | \$627.00 | \$635.25 |
| 85+ | \$336.60 | \$476.57 | \$449.90 | \$194.70 | \$325.60 | \$392.15 | \$646.80 | \$655.32 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Male Tobacco Monthly Plan Rates for Missouri - Area 2

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|--|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Level 2 Rates² for individuals whose acceptance is not guaranteed and who have one or more of the medical conditions on the application³. | | | | | | | |
| 65 | \$307.72 | \$435.60 | \$523.66 | \$177.78 | \$297.40 | \$446.87 | \$591.10 | \$598.95 |
| 66 | \$319.27 | \$452.10 | \$543.10 | \$184.38 | \$308.95 | \$463.85 | \$613.38 | \$621.22 |
| 67 | \$336.60 | \$476.85 | \$573.03 | \$194.70 | \$325.87 | \$489.04 | \$646.80 | \$655.45 |
| 68 | \$353.92 | \$501.18 | \$602.45 | \$204.60 | \$342.37 | \$514.25 | \$680.20 | \$689.28 |
| 69 | \$369.60 | \$523.05 | \$628.71 | \$213.67 | \$357.63 | \$536.87 | \$709.90 | \$719.40 |
| 70 | \$384.85 | \$545.32 | \$655.51 | \$222.75 | \$372.48 | \$558.98 | \$739.60 | \$749.50 |
| 71 | \$398.47 | \$564.30 | \$678.62 | \$230.58 | \$385.68 | \$579.04 | \$765.60 | \$775.90 |
| 72 | \$412.08 | \$583.68 | \$701.19 | \$238.42 | \$398.88 | \$598.58 | \$791.58 | \$802.30 |
| 73 | \$419.92 | \$594.40 | \$714.34 | \$242.55 | \$406.30 | \$609.90 | \$806.43 | \$817.15 |
| 74 | \$419.92 | \$594.40 | \$714.34 | \$242.55 | \$406.30 | \$609.90 | \$806.43 | \$817.15 |
| 75 | \$440.95 | \$624.52 | \$750.57 | \$254.92 | \$426.93 | \$640.75 | \$847.27 | \$858.82 |
| 76 | \$448.80 | \$635.65 | \$764.22 | \$259.45 | \$434.35 | \$652.06 | \$862.12 | \$873.67 |
| 77 | \$456.63 | \$646.38 | \$777.37 | \$264.00 | \$441.78 | \$662.85 | \$876.97 | \$888.93 |
| 78 | \$462.40 | \$654.63 | \$786.82 | \$267.30 | \$447.15 | \$671.61 | \$888.10 | \$900.07 |
| 79 | \$462.40 | \$654.63 | \$786.82 | \$267.30 | \$447.15 | \$671.61 | \$888.10 | \$900.07 |
| 80-84 | \$489.63 | \$693.00 | \$833.04 | \$282.97 | \$473.55 | \$710.69 | \$940.50 | \$952.87 |
| 85+ | \$504.90 | \$714.85 | \$859.30 | \$292.05 | \$488.40 | \$733.32 | \$970.20 | \$982.98 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Under 65 Monthly Plan Rates for Missouri - Area 2

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|----------|--|----------|----------|----------|----------|---|---------------------|
| Group 3 | | Applies to individuals under age 65 who are eligible for Medicare. | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| Female Non-Tobacco Rates | | | | | | | | |
| Under 65 | \$185.75 | \$259.25 | \$241.00 | \$112.50 | \$190.75 | \$226.75 | \$366.00 | \$369.50 |
| Male Non-Tobacco Rates | | | | | | | | |
| Under 65 | \$206.50 | \$287.75 | \$267.75 | \$125.25 | \$211.75 | \$252.00 | \$406.75 | \$410.75 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

1 Your age as of your plan effective date.

2 Your rate will always be based on your age on your effective date.

3 Refer to the application.

4 **IMPORTANT:** Plans C and F are only available to eligible Applicants (a) with a 65th birthday prior to 1/1/2020 or (b) with a Medicare Part A effective date prior to 1/1/2020.

MISSOURI Area 2 ZIP Codes

The ZIP Codes Below Apply to Rates Included on the Page Headed "Cover Page – Rates"

| | | | | | | | | | | | |
|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| 63036 | 63452 | 63552 | 63664 | 63780 | 63869 | 63966 | 64468 | 64628 | 64680 | 64783 | 65001 |
| 63071 | 63453 | 63555 | 63665 | 63781 | 63870 | 63967 | 64469 | 64630 | 64681 | 64784 | 65010 |
| 63087 | 63454 | 63556 | 63666 | 63782 | 63873 | 64401 | 64470 | 64631 | 64682 | 64788 | 65011 |
| 63091 | 63456 | 63557 | 63670 | 63783 | 63874 | 64402 | 64471 | 64632 | 64683 | 64790 | 65013 |
| 63330 | 63457 | 63558 | 63673 | 63784 | 63875 | 64420 | 64473 | 64633 | 64686 | 64801 | 65014 |
| 63333 | 63458 | 63559 | 63674 | 63785 | 63876 | 64421 | 64474 | 64635 | 64688 | 64802 | 65016 |
| 63334 | 63459 | 63560 | 63675 | 63787 | 63877 | 64422 | 64475 | 64636 | 64689 | 64803 | 65017 |
| 63336 | 63460 | 63561 | 63701 | 63801 | 63878 | 64423 | 64476 | 64637 | 64720 | 64804 | 65018 |
| 63339 | 63461 | 63563 | 63702 | 63820 | 63879 | 64424 | 64477 | 64638 | 64722 | 64830 | 65020 |
| 63344 | 63462 | 63565 | 63703 | 63821 | 63880 | 64426 | 64479 | 64639 | 64723 | 64831 | 65023 |
| 63345 | 63463 | 63566 | 63730 | 63822 | 63881 | 64427 | 64480 | 64640 | 64724 | 64832 | 65024 |
| 63350 | 63464 | 63567 | 63732 | 63823 | 63882 | 64428 | 64481 | 64641 | 64726 | 64833 | 65025 |
| 63351 | 63465 | 63601 | 63735 | 63824 | 63901 | 64429 | 64482 | 64642 | 64728 | 64834 | 65026 |
| 63352 | 63466 | 63620 | 63736 | 63825 | 63902 | 64430 | 64483 | 64643 | 64730 | 64835 | 65032 |
| 63353 | 63467 | 63621 | 63737 | 63826 | 63931 | 64431 | 64484 | 64644 | 64735 | 64836 | 65034 |
| 63359 | 63468 | 63622 | 63738 | 63827 | 63932 | 64432 | 64485 | 64645 | 64738 | 64840 | 65035 |
| 63361 | 63469 | 63623 | 63739 | 63828 | 63933 | 64433 | 64486 | 64646 | 64739 | 64841 | 65036 |
| 63363 | 63471 | 63624 | 63740 | 63829 | 63934 | 64434 | 64487 | 64647 | 64740 | 64842 | 65037 |
| 63382 | 63472 | 63625 | 63742 | 63830 | 63935 | 64436 | 64489 | 64648 | 64741 | 64843 | 65038 |
| 63384 | 63473 | 63626 | 63743 | 63833 | 63936 | 64437 | 64490 | 64649 | 64742 | 64844 | 65039 |
| 63388 | 63474 | 63627 | 63744 | 63834 | 63937 | 64438 | 64491 | 64650 | 64744 | 64847 | 65040 |
| 63401 | 63501 | 63628 | 63745 | 63837 | 63938 | 64440 | 64492 | 64651 | 64745 | 64848 | 65041 |
| 63430 | 63530 | 63629 | 63746 | 63839 | 63939 | 64441 | 64493 | 64652 | 64748 | 64849 | 65042 |
| 63431 | 63531 | 63630 | 63747 | 63840 | 63940 | 64442 | 64494 | 64653 | 64750 | 64850 | 65043 |
| 63432 | 63532 | 63631 | 63748 | 63841 | 63941 | 64443 | 64496 | 64654 | 64752 | 64853 | 65046 |
| 63433 | 63533 | 63632 | 63750 | 63845 | 63942 | 64445 | 64497 | 64655 | 64755 | 64854 | 65047 |
| 63434 | 63534 | 63633 | 63751 | 63846 | 63943 | 64446 | 64498 | 64656 | 64756 | 64855 | 65048 |
| 63435 | 63535 | 63636 | 63752 | 63847 | 63944 | 64448 | 64499 | 64657 | 64759 | 64856 | 65049 |
| 63436 | 63536 | 63637 | 63755 | 63848 | 63945 | 64449 | 64501 | 64658 | 64762 | 64857 | 65050 |
| 63437 | 63537 | 63638 | 63758 | 63849 | 63950 | 64451 | 64502 | 64659 | 64763 | 64858 | 65051 |
| 63438 | 63538 | 63640 | 63760 | 63850 | 63951 | 64453 | 64503 | 64660 | 64765 | 64859 | 65052 |
| 63439 | 63539 | 63645 | 63763 | 63851 | 63952 | 64454 | 64504 | 64661 | 64766 | 64861 | 65053 |
| 63440 | 63540 | 63648 | 63764 | 63852 | 63953 | 64455 | 64505 | 64664 | 64767 | 64862 | 65054 |
| 63441 | 63541 | 63650 | 63766 | 63853 | 63954 | 64456 | 64506 | 64667 | 64769 | 64863 | 65055 |
| 63442 | 63543 | 63651 | 63767 | 63855 | 63955 | 64457 | 64507 | 64668 | 64770 | 64864 | 65058 |
| 63443 | 63544 | 63653 | 63769 | 63857 | 63956 | 64458 | 64508 | 64670 | 64771 | 64865 | 65059 |
| 63445 | 63545 | 63654 | 63770 | 63860 | 63957 | 64459 | 64601 | 64671 | 64772 | 64866 | 65061 |
| 63446 | 63546 | 63655 | 63771 | 63862 | 63960 | 64461 | 64620 | 64672 | 64776 | 64867 | 65062 |
| 63447 | 63547 | 63656 | 63774 | 63863 | 63961 | 64463 | 64622 | 64673 | 64778 | 64868 | 65063 |
| 63448 | 63548 | 63660 | 63775 | 63866 | 63962 | 64465 | 64623 | 64674 | 64779 | 64870 | 65064 |
| 63450 | 63549 | 63662 | 63776 | 63867 | 63964 | 64466 | 64624 | 64676 | 64780 | 64873 | 65065 |
| 63451 | 63551 | 63663 | 63779 | 63868 | 63965 | 64467 | 64625 | 64679 | 64781 | 64874 | 65066 |

MISSOURI Area 2 ZIP Codes CONTINUED

The ZIP Codes Below Apply to Rates Included on the Page Headed "Cover Page – Rates"

| | | | | | | | |
|-------|-------|-------|-------|-------|-------|-------|-------|
| 65067 | 65237 | 65323 | 65462 | 65590 | 65647 | 65711 | 65764 |
| 65068 | 65239 | 65324 | 65463 | 65591 | 65648 | 65712 | 65765 |
| 65069 | 65240 | 65325 | 65464 | 65601 | 65649 | 65713 | 65766 |
| 65072 | 65243 | 65326 | 65466 | 65603 | 65650 | 65714 | 65767 |
| 65074 | 65244 | 65329 | 65468 | 65604 | 65652 | 65715 | 65768 |
| 65075 | 65246 | 65330 | 65470 | 65605 | 65653 | 65717 | 65769 |
| 65076 | 65247 | 65332 | 65473 | 65606 | 65654 | 65720 | 65770 |
| 65077 | 65248 | 65333 | 65479 | 65607 | 65655 | 65721 | 65771 |
| 65078 | 65250 | 65334 | 65483 | 65608 | 65656 | 65722 | 65772 |
| 65079 | 65251 | 65335 | 65484 | 65609 | 65657 | 65723 | 65773 |
| 65080 | 65254 | 65337 | 65486 | 65610 | 65658 | 65724 | 65774 |
| 65081 | 65255 | 65338 | 65501 | 65611 | 65660 | 65725 | 65775 |
| 65082 | 65256 | 65339 | 65529 | 65612 | 65661 | 65726 | 65777 |
| 65083 | 65257 | 65340 | 65532 | 65613 | 65662 | 65727 | 65778 |
| 65084 | 65258 | 65344 | 65534 | 65614 | 65663 | 65728 | 65779 |
| 65085 | 65259 | 65345 | 65535 | 65615 | 65664 | 65729 | 65781 |
| 65101 | 65260 | 65347 | 65536 | 65616 | 65666 | 65730 | 65783 |
| 65102 | 65261 | 65348 | 65541 | 65617 | 65667 | 65731 | 65784 |
| 65103 | 65262 | 65349 | 65542 | 65618 | 65668 | 65732 | 65785 |
| 65104 | 65263 | 65350 | 65543 | 65619 | 65669 | 65733 | 65786 |
| 65105 | 65264 | 65351 | 65546 | 65620 | 65672 | 65734 | 65787 |
| 65106 | 65265 | 65354 | 65548 | 65622 | 65673 | 65735 | 65788 |
| 65107 | 65270 | 65355 | 65550 | 65623 | 65674 | 65737 | 65789 |
| 65108 | 65274 | 65360 | 65552 | 65624 | 65675 | 65738 | 65790 |
| 65109 | 65275 | 65401 | 65555 | 65625 | 65676 | 65739 | 65791 |
| 65110 | 65276 | 65402 | 65556 | 65626 | 65679 | 65740 | 65793 |
| 65111 | 65278 | 65409 | 65557 | 65627 | 65680 | 65741 | 65801 |
| 65201 | 65279 | 65436 | 65559 | 65629 | 65681 | 65742 | 65802 |
| 65202 | 65280 | 65438 | 65560 | 65630 | 65682 | 65744 | 65803 |
| 65203 | 65281 | 65439 | 65564 | 65631 | 65685 | 65745 | 65804 |
| 65205 | 65282 | 65440 | 65565 | 65632 | 65686 | 65746 | 65805 |
| 65211 | 65283 | 65441 | 65566 | 65633 | 65688 | 65747 | 65806 |
| 65212 | 65284 | 65443 | 65567 | 65634 | 65689 | 65752 | 65807 |
| 65215 | 65285 | 65444 | 65570 | 65635 | 65690 | 65753 | 65808 |
| 65216 | 65286 | 65446 | 65571 | 65636 | 65692 | 65754 | 65809 |
| 65217 | 65287 | 65449 | 65580 | 65637 | 65702 | 65755 | 65810 |
| 65218 | 65299 | 65452 | 65582 | 65638 | 65704 | 65756 | 65814 |
| 65230 | 65301 | 65453 | 65583 | 65640 | 65705 | 65757 | 65817 |
| 65231 | 65302 | 65456 | 65584 | 65641 | 65706 | 65759 | 65890 |
| 65232 | 65320 | 65457 | 65586 | 65644 | 65707 | 65760 | 65897 |
| 65233 | 65321 | 65459 | 65588 | 65645 | 65708 | 65761 | 65898 |
| 65236 | 65322 | 65461 | 65589 | 65646 | 65710 | 65762 | 65899 |

Cover Page - Rates

Female Non-Tobacco Monthly Plan Rates for Missouri - Area 3

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|---|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Standard Rates² for individuals whose acceptance is guaranteed or who do not have any of the medical conditions on the application³. | | | | | | | |
| 65 | \$167.50 | \$237.50 | \$224.00 | \$96.75 | \$162.25 | \$195.25 | \$322.25 | \$326.50 |
| 66 | \$174.00 | \$246.25 | \$232.50 | \$100.50 | \$168.25 | \$202.75 | \$334.50 | \$338.75 |
| 67 | \$183.25 | \$259.75 | \$245.25 | \$106.00 | \$177.50 | \$213.75 | \$352.75 | \$357.25 |
| 68 | \$192.75 | \$273.25 | \$258.00 | \$111.50 | \$186.75 | \$224.75 | \$371.00 | \$375.75 |
| 69 | \$201.25 | \$285.25 | \$269.25 | \$116.25 | \$194.75 | \$234.50 | \$387.25 | \$392.25 |
| 70 | \$209.75 | \$297.00 | \$280.50 | \$121.25 | \$203.00 | \$244.50 | \$403.50 | \$408.75 |
| 71 | \$217.00 | \$307.50 | \$290.25 | \$125.50 | \$210.25 | \$253.00 | \$417.75 | \$423.00 |
| 72 | \$224.50 | \$318.00 | \$300.25 | \$129.75 | \$217.25 | \$261.50 | \$431.75 | \$437.50 |
| 73 | \$228.75 | \$324.00 | \$305.75 | \$132.25 | \$221.50 | \$266.50 | \$440.00 | \$445.75 |
| 74 | \$228.75 | \$324.00 | \$305.75 | \$132.25 | \$221.50 | \$266.50 | \$440.00 | \$445.75 |
| 75 | \$240.25 | \$340.50 | \$321.25 | \$138.75 | \$232.50 | \$280.00 | \$462.25 | \$468.25 |
| 76 | \$244.50 | \$346.25 | \$327.00 | \$141.25 | \$236.75 | \$285.00 | \$470.50 | \$476.50 |
| 77 | \$248.75 | \$352.25 | \$332.50 | \$143.75 | \$240.75 | \$289.75 | \$478.50 | \$484.75 |
| 78 | \$251.75 | \$356.75 | \$336.75 | \$145.50 | \$243.75 | \$293.50 | \$484.50 | \$490.75 |
| 79 | \$251.75 | \$356.75 | \$336.75 | \$145.50 | \$243.75 | \$293.50 | \$484.50 | \$490.75 |
| 80-84 | \$266.50 | \$377.75 | \$356.50 | \$154.00 | \$258.25 | \$310.75 | \$513.00 | \$519.50 |
| 85+ | \$275.00 | \$389.75 | \$367.75 | \$159.00 | \$266.25 | \$320.50 | \$529.25 | \$536.00 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Female Non-Tobacco Monthly Plan Rates for Missouri - Area 3

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|--|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Level 2 Rates² for individuals whose acceptance is not guaranteed and who have one or more of the medical conditions on the application³. | | | | | | | |
| 65 | \$251.25 | \$356.25 | \$427.84 | \$145.12 | \$243.37 | \$365.11 | \$483.37 | \$489.75 |
| 66 | \$261.00 | \$369.37 | \$444.07 | \$150.75 | \$252.37 | \$379.14 | \$501.75 | \$508.12 |
| 67 | \$274.87 | \$389.62 | \$468.42 | \$159.00 | \$266.25 | \$399.71 | \$529.12 | \$535.87 |
| 68 | \$289.12 | \$409.87 | \$492.78 | \$167.25 | \$280.12 | \$420.28 | \$556.50 | \$563.62 |
| 69 | \$301.87 | \$427.87 | \$514.26 | \$174.37 | \$292.12 | \$438.51 | \$580.87 | \$588.37 |
| 70 | \$314.62 | \$445.50 | \$535.75 | \$181.87 | \$304.50 | \$457.21 | \$605.25 | \$613.12 |
| 71 | \$325.50 | \$461.25 | \$554.37 | \$188.25 | \$315.37 | \$473.11 | \$626.62 | \$634.50 |
| 72 | \$336.75 | \$477.00 | \$573.47 | \$194.62 | \$325.87 | \$489.00 | \$647.62 | \$656.25 |
| 73 | \$343.12 | \$486.00 | \$583.98 | \$198.37 | \$332.25 | \$498.35 | \$660.00 | \$668.62 |
| 74 | \$343.12 | \$486.00 | \$583.98 | \$198.37 | \$332.25 | \$498.35 | \$660.00 | \$668.62 |
| 75 | \$360.37 | \$510.75 | \$613.58 | \$208.12 | \$348.75 | \$523.60 | \$693.37 | \$702.37 |
| 76 | \$366.75 | \$519.37 | \$624.57 | \$211.87 | \$355.12 | \$532.95 | \$705.75 | \$714.75 |
| 77 | \$373.12 | \$528.37 | \$635.07 | \$215.62 | \$361.12 | \$541.83 | \$717.75 | \$727.12 |
| 78 | \$377.62 | \$535.12 | \$643.19 | \$218.25 | \$365.62 | \$548.84 | \$726.75 | \$736.12 |
| 79 | \$377.62 | \$535.12 | \$643.19 | \$218.25 | \$365.62 | \$548.84 | \$726.75 | \$736.12 |
| 80-84 | \$399.75 | \$566.62 | \$680.91 | \$231.00 | \$387.37 | \$581.10 | \$769.50 | \$779.25 |
| 85+ | \$412.50 | \$584.62 | \$702.40 | \$238.50 | \$399.37 | \$599.33 | \$793.87 | \$804.00 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Female Tobacco Monthly Plan Rates for Missouri - Area 3

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|---|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Standard Rates² for individuals whose acceptance is guaranteed or who do not have any of the medical conditions on the application³. | | | | | | | |
| 65 | \$184.25 | \$261.25 | \$246.40 | \$106.42 | \$178.47 | \$214.77 | \$354.47 | \$359.15 |
| 66 | \$191.40 | \$270.87 | \$255.75 | \$110.55 | \$185.07 | \$223.02 | \$367.95 | \$372.62 |
| 67 | \$201.57 | \$285.72 | \$269.77 | \$116.60 | \$195.25 | \$235.12 | \$388.02 | \$392.97 |
| 68 | \$212.02 | \$300.57 | \$283.80 | \$122.65 | \$205.42 | \$247.22 | \$408.10 | \$413.32 |
| 69 | \$221.37 | \$313.77 | \$296.17 | \$127.87 | \$214.22 | \$257.95 | \$425.97 | \$431.47 |
| 70 | \$230.72 | \$326.70 | \$308.55 | \$133.37 | \$223.30 | \$268.95 | \$443.85 | \$449.62 |
| 71 | \$238.70 | \$338.25 | \$319.27 | \$138.05 | \$231.27 | \$278.30 | \$459.52 | \$465.30 |
| 72 | \$246.95 | \$349.80 | \$330.27 | \$142.72 | \$238.97 | \$287.65 | \$474.92 | \$481.25 |
| 73 | \$251.62 | \$356.40 | \$336.32 | \$145.47 | \$243.65 | \$293.15 | \$484.00 | \$490.32 |
| 74 | \$251.62 | \$356.40 | \$336.32 | \$145.47 | \$243.65 | \$293.15 | \$484.00 | \$490.32 |
| 75 | \$264.27 | \$374.55 | \$353.37 | \$152.62 | \$255.75 | \$308.00 | \$508.47 | \$515.07 |
| 76 | \$268.95 | \$380.87 | \$359.70 | \$155.37 | \$260.42 | \$313.50 | \$517.55 | \$524.15 |
| 77 | \$273.62 | \$387.47 | \$365.75 | \$158.12 | \$264.82 | \$318.72 | \$526.35 | \$533.22 |
| 78 | \$276.92 | \$392.42 | \$370.42 | \$160.05 | \$268.12 | \$322.85 | \$532.95 | \$539.82 |
| 79 | \$276.92 | \$392.42 | \$370.42 | \$160.05 | \$268.12 | \$322.85 | \$532.95 | \$539.82 |
| 80-84 | \$293.15 | \$415.52 | \$392.15 | \$169.40 | \$284.07 | \$341.82 | \$564.30 | \$571.45 |
| 85+ | \$302.50 | \$428.72 | \$404.52 | \$174.90 | \$292.87 | \$352.55 | \$582.17 | \$589.60 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Female Tobacco Monthly Plan Rates for Missouri - Area 3

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|--|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Level 2 Rates² for individuals whose acceptance is not guaranteed and who have one or more of the medical conditions on the application³. | | | | | | | |
| 65 | \$276.37 | \$391.87 | \$470.62 | \$159.63 | \$267.70 | \$401.61 | \$531.70 | \$538.72 |
| 66 | \$287.10 | \$406.30 | \$488.48 | \$165.82 | \$277.60 | \$417.04 | \$551.92 | \$558.93 |
| 67 | \$302.35 | \$428.58 | \$515.26 | \$174.90 | \$292.87 | \$439.67 | \$582.03 | \$589.45 |
| 68 | \$318.03 | \$450.85 | \$542.05 | \$183.97 | \$308.13 | \$462.30 | \$612.15 | \$619.98 |
| 69 | \$332.05 | \$470.65 | \$565.68 | \$191.80 | \$321.33 | \$482.36 | \$638.95 | \$647.20 |
| 70 | \$346.08 | \$490.05 | \$589.33 | \$200.05 | \$334.95 | \$502.93 | \$665.77 | \$674.43 |
| 71 | \$358.05 | \$507.37 | \$609.80 | \$207.07 | \$346.90 | \$520.42 | \$689.28 | \$697.95 |
| 72 | \$370.42 | \$524.70 | \$630.81 | \$214.08 | \$358.45 | \$537.90 | \$712.38 | \$721.87 |
| 73 | \$377.43 | \$534.60 | \$642.37 | \$218.20 | \$365.47 | \$548.19 | \$726.00 | \$735.48 |
| 74 | \$377.43 | \$534.60 | \$642.37 | \$218.20 | \$365.47 | \$548.19 | \$726.00 | \$735.48 |
| 75 | \$396.40 | \$561.82 | \$674.93 | \$228.93 | \$383.62 | \$575.96 | \$762.70 | \$772.60 |
| 76 | \$403.42 | \$571.30 | \$687.02 | \$233.05 | \$390.63 | \$586.24 | \$776.32 | \$786.22 |
| 77 | \$410.43 | \$581.20 | \$698.58 | \$237.18 | \$397.23 | \$596.00 | \$789.52 | \$799.83 |
| 78 | \$415.38 | \$588.63 | \$707.50 | \$240.07 | \$402.18 | \$603.72 | \$799.42 | \$809.73 |
| 79 | \$415.38 | \$588.63 | \$707.50 | \$240.07 | \$402.18 | \$603.72 | \$799.42 | \$809.73 |
| 80-84 | \$439.72 | \$623.28 | \$749.00 | \$254.10 | \$426.10 | \$639.20 | \$846.45 | \$857.17 |
| 85+ | \$453.75 | \$643.08 | \$772.63 | \$262.35 | \$439.30 | \$659.26 | \$873.25 | \$884.40 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Male Non-Tobacco Monthly Plan Rates for Missouri - Area 3

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|---|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Standard Rates² for individuals whose acceptance is guaranteed or who do not have any of the medical conditions on the application³. | | | | | | | |
| 65 | \$186.25 | \$263.75 | \$249.00 | \$107.75 | \$180.25 | \$217.00 | \$358.25 | \$363.00 |
| 66 | \$193.25 | \$273.75 | \$258.25 | \$111.75 | \$187.00 | \$225.25 | \$371.75 | \$376.50 |
| 67 | \$203.75 | \$288.50 | \$272.50 | \$117.75 | \$197.25 | \$237.50 | \$392.00 | \$397.25 |
| 68 | \$214.25 | \$303.50 | \$286.50 | \$124.00 | \$207.25 | \$249.75 | \$412.25 | \$417.75 |
| 69 | \$223.75 | \$316.75 | \$299.00 | \$129.25 | \$216.50 | \$260.50 | \$430.25 | \$436.00 |
| 70 | \$233.00 | \$330.00 | \$311.50 | \$134.75 | \$225.50 | \$271.50 | \$448.25 | \$454.25 |
| 71 | \$241.25 | \$341.50 | \$322.50 | \$139.50 | \$233.50 | \$281.00 | \$464.00 | \$470.25 |
| 72 | \$249.50 | \$353.25 | \$333.50 | \$144.25 | \$241.25 | \$290.75 | \$479.75 | \$486.25 |
| 73 | \$254.25 | \$359.75 | \$339.75 | \$147.00 | \$246.00 | \$296.00 | \$488.75 | \$495.25 |
| 74 | \$254.25 | \$359.75 | \$339.75 | \$147.00 | \$246.00 | \$296.00 | \$488.75 | \$495.25 |
| 75 | \$267.00 | \$378.00 | \$357.00 | \$154.50 | \$258.25 | \$311.00 | \$513.50 | \$520.50 |
| 76 | \$271.75 | \$384.75 | \$363.25 | \$157.00 | \$263.00 | \$316.50 | \$522.50 | \$529.50 |
| 77 | \$276.50 | \$391.50 | \$369.50 | \$159.75 | \$267.50 | \$322.00 | \$531.50 | \$538.75 |
| 78 | \$280.00 | \$396.25 | \$374.25 | \$161.75 | \$270.75 | \$326.00 | \$538.25 | \$545.50 |
| 79 | \$280.00 | \$396.25 | \$374.25 | \$161.75 | \$270.75 | \$326.00 | \$538.25 | \$545.50 |
| 80-84 | \$296.25 | \$419.50 | \$396.00 | \$171.25 | \$286.75 | \$345.25 | \$570.00 | \$577.50 |
| 85+ | \$305.75 | \$432.75 | \$408.75 | \$176.75 | \$295.75 | \$356.25 | \$588.00 | \$595.75 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Male Non-Tobacco Monthly Plan Rates for Missouri - Area 3

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|--|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Level 2 Rates² for individuals whose acceptance is not guaranteed and who have one or more of the medical conditions on the application³. | | | | | | | |
| 65 | \$279.37 | \$395.62 | \$475.59 | \$161.62 | \$270.37 | \$405.79 | \$537.37 | \$544.50 |
| 66 | \$289.87 | \$410.62 | \$493.25 | \$167.62 | \$280.50 | \$421.21 | \$557.62 | \$564.75 |
| 67 | \$305.62 | \$432.75 | \$520.47 | \$176.62 | \$295.87 | \$444.12 | \$588.00 | \$595.87 |
| 68 | \$321.37 | \$455.25 | \$547.21 | \$186.00 | \$310.87 | \$467.03 | \$618.37 | \$626.62 |
| 69 | \$335.62 | \$475.12 | \$571.09 | \$193.87 | \$324.75 | \$487.13 | \$645.37 | \$654.00 |
| 70 | \$349.50 | \$495.00 | \$594.96 | \$202.12 | \$338.25 | \$507.70 | \$672.37 | \$681.37 |
| 71 | \$361.87 | \$512.25 | \$615.97 | \$209.25 | \$350.25 | \$525.47 | \$696.00 | \$705.37 |
| 72 | \$374.25 | \$529.87 | \$636.98 | \$216.37 | \$361.87 | \$543.70 | \$719.62 | \$729.37 |
| 73 | \$381.37 | \$539.62 | \$648.92 | \$220.50 | \$369.00 | \$553.52 | \$733.12 | \$742.87 |
| 74 | \$381.37 | \$539.62 | \$648.92 | \$220.50 | \$369.00 | \$553.52 | \$733.12 | \$742.87 |
| 75 | \$400.50 | \$567.00 | \$681.87 | \$231.75 | \$387.37 | \$581.57 | \$770.25 | \$780.75 |
| 76 | \$407.62 | \$577.12 | \$693.80 | \$235.50 | \$394.50 | \$591.85 | \$783.75 | \$794.25 |
| 77 | \$414.75 | \$587.25 | \$705.74 | \$239.62 | \$401.25 | \$602.14 | \$797.25 | \$808.12 |
| 78 | \$420.00 | \$594.37 | \$714.81 | \$242.62 | \$406.12 | \$609.62 | \$807.37 | \$818.25 |
| 79 | \$420.00 | \$594.37 | \$714.81 | \$242.62 | \$406.12 | \$609.62 | \$807.37 | \$818.25 |
| 80-84 | \$444.37 | \$629.25 | \$756.36 | \$256.87 | \$430.12 | \$645.61 | \$855.00 | \$866.25 |
| 85+ | \$458.62 | \$649.12 | \$780.71 | \$265.12 | \$443.62 | \$666.18 | \$882.00 | \$893.62 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Male Tobacco Monthly Plan Rates for Missouri - Area 3

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|---|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Standard Rates² for individuals whose acceptance is guaranteed or who do not have any of the medical conditions on the application³. | | | | | | | |
| 65 | \$204.87 | \$290.12 | \$273.90 | \$118.52 | \$198.27 | \$238.70 | \$394.07 | \$399.30 |
| 66 | \$212.57 | \$301.12 | \$284.07 | \$122.92 | \$205.70 | \$247.77 | \$408.92 | \$414.15 |
| 67 | \$224.12 | \$317.35 | \$299.75 | \$129.52 | \$216.97 | \$261.25 | \$431.20 | \$436.97 |
| 68 | \$235.67 | \$333.85 | \$315.15 | \$136.40 | \$227.97 | \$274.72 | \$453.47 | \$459.52 |
| 69 | \$246.12 | \$348.42 | \$328.90 | \$142.17 | \$238.15 | \$286.55 | \$473.27 | \$479.60 |
| 70 | \$256.30 | \$363.00 | \$342.65 | \$148.22 | \$248.05 | \$298.65 | \$493.07 | \$499.67 |
| 71 | \$265.37 | \$375.65 | \$354.75 | \$153.45 | \$256.85 | \$309.10 | \$510.40 | \$517.27 |
| 72 | \$274.45 | \$388.57 | \$366.85 | \$158.67 | \$265.37 | \$319.82 | \$527.72 | \$534.87 |
| 73 | \$279.67 | \$395.72 | \$373.72 | \$161.70 | \$270.60 | \$325.60 | \$537.62 | \$544.77 |
| 74 | \$279.67 | \$395.72 | \$373.72 | \$161.70 | \$270.60 | \$325.60 | \$537.62 | \$544.77 |
| 75 | \$293.70 | \$415.80 | \$392.70 | \$169.95 | \$284.07 | \$342.10 | \$564.85 | \$572.55 |
| 76 | \$298.92 | \$423.22 | \$399.57 | \$172.70 | \$289.30 | \$348.15 | \$574.75 | \$582.45 |
| 77 | \$304.15 | \$430.65 | \$406.45 | \$175.72 | \$294.25 | \$354.20 | \$584.65 | \$592.62 |
| 78 | \$308.00 | \$435.87 | \$411.67 | \$177.92 | \$297.82 | \$358.60 | \$592.07 | \$600.05 |
| 79 | \$308.00 | \$435.87 | \$411.67 | \$177.92 | \$297.82 | \$358.60 | \$592.07 | \$600.05 |
| 80-84 | \$325.87 | \$461.45 | \$435.60 | \$188.37 | \$315.42 | \$379.77 | \$627.00 | \$635.25 |
| 85+ | \$336.32 | \$476.02 | \$449.62 | \$194.42 | \$325.32 | \$391.87 | \$646.80 | \$655.32 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Male Tobacco Monthly Plan Rates for Missouri - Area 3

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|--|--|----------|----------|----------|----------|---|---------------------|
| Group 1 | | Applies to individuals whose plan effective date follows their 65th birthday | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| | Level 2 Rates² for individuals whose acceptance is not guaranteed and who have one or more of the medical conditions on the application³. | | | | | | | |
| 65 | \$307.30 | \$435.18 | \$523.14 | \$177.78 | \$297.40 | \$446.36 | \$591.10 | \$598.95 |
| 66 | \$318.85 | \$451.68 | \$542.57 | \$184.38 | \$308.55 | \$463.32 | \$613.38 | \$621.22 |
| 67 | \$336.18 | \$476.02 | \$572.52 | \$194.28 | \$325.45 | \$488.53 | \$646.80 | \$655.45 |
| 68 | \$353.50 | \$500.77 | \$601.93 | \$204.60 | \$341.95 | \$513.72 | \$680.20 | \$689.28 |
| 69 | \$369.18 | \$522.63 | \$628.19 | \$213.25 | \$357.22 | \$535.84 | \$709.90 | \$719.40 |
| 70 | \$384.45 | \$544.50 | \$654.46 | \$222.33 | \$372.07 | \$558.47 | \$739.60 | \$749.50 |
| 71 | \$398.05 | \$563.47 | \$677.57 | \$230.17 | \$385.27 | \$578.01 | \$765.60 | \$775.90 |
| 72 | \$411.67 | \$582.85 | \$700.68 | \$238.00 | \$398.05 | \$598.06 | \$791.58 | \$802.30 |
| 73 | \$419.50 | \$593.58 | \$713.80 | \$242.55 | \$405.90 | \$608.87 | \$806.43 | \$817.15 |
| 74 | \$419.50 | \$593.58 | \$713.80 | \$242.55 | \$405.90 | \$608.87 | \$806.43 | \$817.15 |
| 75 | \$440.55 | \$623.70 | \$750.05 | \$254.92 | \$426.10 | \$639.72 | \$847.27 | \$858.82 |
| 76 | \$448.38 | \$634.83 | \$763.17 | \$259.05 | \$433.95 | \$651.04 | \$862.12 | \$873.67 |
| 77 | \$456.22 | \$645.97 | \$776.31 | \$263.58 | \$441.37 | \$662.35 | \$876.97 | \$888.93 |
| 78 | \$462.00 | \$653.80 | \$786.28 | \$266.88 | \$446.73 | \$670.58 | \$888.10 | \$900.07 |
| 79 | \$462.00 | \$653.80 | \$786.28 | \$266.88 | \$446.73 | \$670.58 | \$888.10 | \$900.07 |
| 80-84 | \$488.80 | \$692.17 | \$831.99 | \$282.55 | \$473.13 | \$710.16 | \$940.50 | \$952.87 |
| 85+ | \$504.48 | \$714.03 | \$858.77 | \$291.63 | \$487.98 | \$732.79 | \$970.20 | \$982.98 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

Cover Page - Rates

Under 65 Monthly Plan Rates for Missouri - Area 3

**AARP® Medicare Supplement Insurance Plans
insured by UnitedHealthcare Insurance Company**

| Plans Available to All Applicants | | | | | | | Medicare first eligible before 2020 only ⁴ | |
|-----------------------------------|----------|--|----------|----------|----------|----------|---|---------------------|
| Group 3 | | Applies to individuals under age 65 who are eligible for Medicare. | | | | | | |
| Age ¹ | Plan A | Plan B | Plan G | Plan K | Plan L | Plan N | Plan C ⁴ | Plan F ⁴ |
| Female Non-Tobacco Rates | | | | | | | | |
| Under 65 | \$185.50 | \$258.75 | \$240.75 | \$112.50 | \$190.50 | \$226.50 | \$366.00 | \$369.50 |
| Male Non-Tobacco Rates | | | | | | | | |
| Under 65 | \$206.25 | \$287.50 | \$267.50 | \$125.00 | \$211.50 | \$251.75 | \$406.75 | \$410.75 |

The rates above are for plan effective dates from June 2026 - May 2027 and may change.

1 Your age as of your plan effective date.

2 Your rate will always be based on your age on your effective date.

3 Refer to the application.

4 **IMPORTANT:** Plans C and F are only available to eligible Applicants (a) with a 65th birthday prior to 1/1/2020 or (b) with a Medicare Part A effective date prior to 1/1/2020.

MISSOURI Area 3 ZIP Codes

The ZIP Codes Below Apply to Rates Included on the Page Headed "Cover Page – Rates"

63005 63137
63006 63138
63011 63140
63017 63141
63021 63143
63022 63144
63024 63145
63025 63146
63026 63151
63031 63167
63032
63033
63034
63038
63040
63042
63043
63044
63045
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2026 Missouri Rate Information for AARP® Medicare Supplement Insurance Plans: Effective June 1, 2026

Updates have been made to the Missouri rates for 2026 for AARP® Medicare Supplement Insurance Plans, insured by UnitedHealthcare® Insurance Company (UHIC), effective **June 1, 2026**.

If you are enrolling a consumer in an AARP Medicare Supplement Plan, please make sure you are using the most up-to-date rate. You'll find each plan's standard rate percentage change for individuals ages 65+ listed below.

| | A | B | C | F | G | K | L | N |
|---------------|-------|-------|-------|-------|-------|-------|-------|-------|
| Area 1 | 10.6% | 10.6% | 14.0% | 14.0% | 10.6% | 10.6% | 10.7% | 10.6% |
| Area 2 | 19.6% | 19.6% | 14.0% | 14.0% | 19.6% | 19.7% | 19.7% | 19.6% |
| Area 3 | 10.5% | 10.5% | 14.0% | 14.0% | 10.5% | 10.6% | 10.6% | 10.6% |

Individual rate increases may vary by plan, rate level, tobacco use and gender.

Any newly enrolled members will have a 12-month rate guarantee.

Questions?

Our dedicated Producer Help Desk (PHD) is here for you every step of the way. [Live chat via Jarvis](#) or call 1-888-381-8581. Español Presione la opcion 2.

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