



**Aetna Health
Insurance Company**

An Aetna Company

Medicare Supplement Rates

New Jersey

Effective January 2019

Household discount now available

Policy form: AHIMSP17A NJ, AHIMSP17B NJ, AHIMSP17C NJ, AHIMSP17F NJ, AHIMSP17G NJ, AHIMSP17HF NJ, AHIMSP17N NJ

Application form: AHCMS03755NJ

- All Plans: A one time only \$20 policy fee required at time of application
- Rates are Attained Age, male/female, preferred and standard
- Use age last birthday on effective date of coverage
- Tobacco users use standard rates
- Non-tobacco users use preferred rates
- Open Enrollment and Guaranteed Issue use preferred rates
- For rates under age 65 and over age 90, refer to Outline of Coverage
- 12-month rate guarantee

Refer to the Producer Guide and Drug List for important underwriting information.

Need help?

Contact the Agent Services team at **800-264-4000**, or go to **aetnaseniorproducts.com** (agent side).

Modal premium options

Semi-Annual	Annual x .52
Quarterly	Annual x .265
Monthly Electronic Funds Transfer (EFT) ..	Annual x .0833

Effective date

The effective date must be on or after the date of the application. If an existing Medicare Supplement policy is being replaced, the date must coordinate with the expiration date of the existing policy.

An application must be received in the Home Office within 30 calendar days from the date of signature.

Applications submitted by E-application result in faster service. E-applications must have first premium deducted by monthly EFT. Changes to payment mode can be made after the first premium has been drafted by contacting Policyholder Services.

Applications with a live check must be mailed and not faxed.



To use the Mobile Rate Quote Tool, scan the QR code with your smartphone (iPhone or Android).

Calculating rates

Follow these steps for each applicant.

STEP 1: Calculate modal premium

Annual premium (found on agent rate card)
x Modal factor
= Modal premium (round to nearest whole cent)

Example: $\$1889 \times .0833 = \157.3537 (**\$157.35**)

STEP 2: Calculate modal premium with 7% household discount

Modal premium
x Discount (.93)
= Modal premium with discount (round to nearest whole cent)

Example: $\$157.35 \times .93 = \146.3355 (**\$146.34**)

Add application fee to determine total initial premium collected/draft

Modal premium (with discount if discount applies)
+ Application fee
= Total initial premium (amount of check with application or initial bank draft)

Example: $\$146.34 + \$20 = \$166.34$

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Reminder:

- Tobacco users use standard rates
- Non-tobacco users use preferred rates
- Open Enrollment and Guaranteed Issue use preferred rates
- For rates under age 65 and over age 90, refer to Outline of Coverage

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ATTAINED AGE	PLAN F		ALL ZIP CODES							
	PREFERRED				STANDARD					
	FEMALE		MALE		FEMALE		MALE			
	ANN.	EFT	ANN.	EFT	ANN.	EFT	ANN.	EFT		
65	793	66.06	912	75.97	881	73.39	1,013	84.38		
66	798	66.47	918	76.47	887	73.89	1,020	84.97		
67	798	66.47	918	76.47	887	73.89	1,020	84.97		
68	808	67.31	929	77.39	898	74.80	1,033	86.05		
69	825	68.72	949	79.05	917	76.39	1,055	87.88		
70	847	70.56	974	81.13	941	78.39	1,082	90.13		
71	873	72.72	1,004	83.63	970	80.80	1,116	92.96		
72	901	75.05	1,036	86.30	1,001	83.38	1,151	95.88		
73	933	77.72	1,073	89.38	1,037	86.38	1,193	99.38		
74	969	80.72	1,114	92.80	1,077	89.71	1,239	103.21		
75	1,009	84.05	1,160	96.63	1,121	93.38	1,289	107.37		
76	1,050	87.47	1,208	100.63	1,167	97.21	1,342	111.79		
77	1,089	90.71	1,252	104.29	1,210	100.79	1,392	115.95		
78	1,127	93.88	1,296	107.96	1,252	104.29	1,440	119.95		
79	1,165	97.04	1,340	111.62	1,294	107.79	1,488	123.95		
80	1,202	100.13	1,382	115.12	1,336	111.29	1,536	127.95		
81	1,240	103.29	1,426	118.79	1,378	114.79	1,585	132.03		
82	1,278	106.46	1,470	122.45	1,420	118.29	1,633	136.03		
83	1,318	109.79	1,516	126.28	1,464	121.95	1,684	140.28		
84	1,358	113.12	1,562	130.11	1,509	125.70	1,735	144.53		
85	1,406	117.12	1,617	134.70	1,562	130.11	1,796	149.61		
86	1,446	120.45	1,663	138.53	1,607	133.86	1,848	153.94		
87	1,487	123.87	1,710	142.44	1,652	137.61	1,900	158.27		
88	1,529	127.37	1,758	146.44	1,699	141.53	1,954	162.77		
89	1,571	130.86	1,807	150.52	1,746	145.44	2,008	167.27		
90	1,614	134.45	1,856	154.60	1,793	149.36	2,062	171.76		

ATTAINED AGE	PLAN G		ALL ZIP CODES							
	PREFERRED				STANDARD					
	FEMALE		MALE		FEMALE		MALE			
	ANN.	EFT	ANN.	EFT	ANN.	EFT	ANN.	EFT		
65	1,616	134.61	1,858	154.77	1,796	149.61	2,065	172.01		
66	1,635	136.20	1,880	156.60	1,816	151.27	2,089	174.01		
67	1,653	137.69	1,901	158.35	1,837	153.02	2,113	176.01		
68	1,690	140.78	1,943	161.85	1,878	156.44	2,159	179.84		
69	1,747	145.53	2,009	167.35	1,940	161.60	2,231	185.84		
70	1,812	150.94	2,084	173.60	2,013	167.68	2,315	192.84		
71	1,867	155.52	2,147	178.85	2,074	172.76	2,385	198.67		
72	1,927	160.52	2,216	184.59	2,141	178.35	2,462	205.08		
73	1,995	166.18	2,294	191.09	2,217	184.68	2,550	212.42		
74	2,072	172.60	2,383	198.50	2,302	191.76	2,647	220.50		
75	2,158	179.76	2,482	206.75	2,398	199.75	2,758	229.74		
76	2,245	187.01	2,582	215.08	2,494	207.75	2,868	238.90		
77	2,329	194.01	2,678	223.08	2,588	215.58	2,976	247.90		
78	2,410	200.75	2,772	230.91	2,678	223.08	3,080	256.56		
79	2,492	207.58	2,866	238.74	2,769	230.66	3,184	265.23		
80	2,571	214.16	2,957	246.32	2,857	237.99	3,286	273.72		
81	2,652	220.91	3,050	254.07	2,947	245.49	3,389	282.30		
82	2,734	227.74	3,144	261.90	3,038	253.07	3,494	291.05		
83	2,819	234.82	3,242	270.06	3,132	260.90	3,602	300.05		
84	2,905	241.99	3,341	278.31	3,228	268.89	3,712	309.21		
85	3,006	250.40	3,457	287.97	3,340	278.22	3,841	319.96		
86	3,092	257.56	3,556	296.21	3,436	286.22	3,951	329.12		
87	3,180	264.89	3,657	304.63	3,533	294.30	4,063	338.45		
88	3,269	272.31	3,759	313.12	3,632	302.55	4,177	347.94		
89	3,360	279.89	3,864	321.87	3,733	310.96	4,293	357.61		
90	3,452	287.55	3,970	330.70	3,836	319.54	4,411	367.44		

ATTAINED AGE	PLAN N		ALL ZIP CODES							
	PREFERRED				STANDARD					
	FEMALE		MALE		FEMALE		MALE			
	ANN.	EFT	ANN.	EFT	ANN.	EFT	ANN.	EFT		
65	1,158	96.46	1,332	110.96	1,286	107.12	1,479	123.20		
66	1,199	99.88	1,379	114.87	1,332	110.96	1,532	127.62		
67	1,242	103.46	1,428	118.95	1,380	114.95	1,586	132.11		
68	1,300	108.29	1,495	124.53	1,444	120.29	1,660	138.28		
69	1,372	114.29	1,577	131.36	1,524	126.95	1,752	145.94		
70	1,451	120.87	1,669	139.03	1,612	134.28	1,854	154.44		
71	1,495	124.53	1,720	143.28	1,662	138.44	1,911	159.19		
72	1,544	128.62	1,775	147.86	1,715	142.86	1,972	164.27		
73	1,598	133.11	1,838	153.11	1,775	147.86	2,042	170.10		
74	1,661	138.36	1,910	159.10	1,845	153.69	2,122	176.76		
75	1,729	144.03	1,989	165.68	1,921	160.02	2,209	184.01		
76	1,798	149.77	2,067	172.18	1,998	166.43	2,297	191.34		
77	1,866	155.44	2,145	178.68	2,073	172.68	2,383	198.50		
78	1,931	160.85	2,221	185.01	2,145	178.68	2,467	205.50		
79	1,997	166.35	2,296	191.26	2,218	184.76	2,551	212.50		
80	2,059	171.51	2,368	197.25	2,288	190.59	2,631	219.16		
81	2,124	176.93	2,443	203.50	2,360	196.59	2,713	225.99		
82	2,190	182.43	2,519	209.83	2,433	202.67	2,798	233.07		
83	2,258	188.09	2,596	216.25	2,509	209.00	2,885	240.32		
84	2,327	193.84	2,676	222.91	2,585	215.33	2,973	247.65		
85	2,408	200.59	2,769	230.66	2,675	222.83	3,077	256.31		
86	2,477	206.33	2,850	237.41	2,753	229.32	3,166	263.73		
87	2,547	212.17	2,929	243.99	2,830	235.74	3,254	271.06		
88	2,619	218.16	3,011	250.82	2,910	242.40	3,347	278.81		
89	2,692	224.24	3,096	257.90	2,991	249.15	3,440	286.55		
90	2,765	230.32	3,181	264.98	3,073	255.98	3,534	294.38		