

SERFF Tracking Number: UHLC-125776616 State: Arkansas  
Filing Company: United HealthCare Insurance Company State Tracking Number: 39929  
Company Tracking Number: LA19740 (11/08)  
TOI: MS05G Group Medicare Supplement - Standard Sub-TOI: MS05G.001 Plan A  
Plans  
Product Name: MEDICARE SUPPLEMENT  
Project Name/Number: CO-MARKETING /LA19740 (11/08)

## Filing at a Glance

Company: United HealthCare Insurance Company

Product Name: MEDICARE SUPPLEMENT SERFF Tr Num: UHLC-125776616 State: ArkansasLH

TOI: MS05G Group Medicare Supplement - Standard Plans SERFF Status: Closed State Tr Num: 39929

Sub-TOI: MS05G.001 Plan A Co Tr Num: LA19740 (11/08) State Status: Filed-Closed

Filing Type: Advertisement Co Status: Reviewer(s): Stephanie Fowler

Author: Bobbie Walton Disposition Date: 09/12/2008

Date Submitted: 08/14/2008 Disposition Status: Filed

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

## General Information

Project Name: CO-MARKETING

Project Number: LA19740 (11/08)

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 09/12/2008

State Status Changed: 09/12/2008

Corresponding Filing Tracking Number:

Filing Description:

August 14, 2008

Status of Filing in Domicile: Not Filed

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Group

Group Market Size: Large

Group Market Type: Association

Deemer Date:

Ms. Marie Bennett

Rate and Forms Analyst

Life and Health Division

Arkansas Insurance Department

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1200 West Third Street  
Little Rock, Arkansas 72201

RE: UNITED HEALTHCARE INSURANCE COMPANY

AARP Medicare Supplement Advertising Material

Co-Marketing

NAIC No: 0707-79413

Our File No: LA19740 (11/08) (PLEASE USE THIS NUMBER IN ALL CORRESPONDENCE)

Dear Ms. Bennett:

We enclose for your information and review, proof copies of advertising materials for use in connection with the AARP group health insurance program. This advertising is new and does not replace any material previously submitted to the Department.

The definitions, disclosures, eligibility requirements, exclusions, limitations, Group Policy Form No. GRP 79171 GPS-1, as well as, the statement, "...not connected with, or endorsed by, the U.S. Government or the federal Medicare program," can be found in BA8982 DIS AR (02/06) which was approved by your Department on March 20, 2006.

Members who enroll in the AARP Medicare Supplement Plans will be issued certificates with Certificate Form Nos. MSA 1959, et al which were approved by your Department on September 1, 2005.

We wish to confirm that the materials included for review have been filed and approved by CMS for content related to the AARP Medicare Part D plan.

The landing page, LP1 (11/08) includes links for the respective products. When an individual clicks those links, they will be connected to previously approved websites specific to those products.

The attached list of enclosures indicates the contents of each package including the form number, and title of each item.

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We trust the enclosed forms are in order and look forward to your prompt acknowledgment of this filing. If you have any further questions you can contact me at 267-470-1519. If you prefer, you may also send a facsimile to me at Fax: 267-470-1908 or send an email to Susan\_J\_Cipollo@uhc.com.

Sincerely,

Susan J. Cipollo  
Director, Marketing Compliance

SJC:blw  
Enclosures

ARKANSAS  
LIST OF ENCLOSURES  
MEDICARE SUPPLEMENT  
CO-MARKETING MATERIAL  
2008

LA19740 (11/08) LETTER  
BA9977 AR (11/08) BROCHURE  
OA4332 (11/08) OUTSIDE ENVELOPE  
LP1 (11/08) LANDING PAGE  
  
BA8982 DIS AR (02/06) WRAP\*  
CV375 COVER PAGE\*\*  
FA528 – FA529, FA572 – FA581 OUTLINE OF COVERAGE\*\*  
A12505UIDUAR01 02A, et al ENROLLMENT APPLICATION\*\*\*

\*THIS COMPONENT WAS APPROVED BY THE DEPARTMENT ON 3/20/06 UNDER FILE NUMBER BA8982 DIS AR (02/06) AND YOUR DEPARTMENT FILE NUMBER 30566.

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\*\*THESE COMPONENTS WERE APPROVED BY THE DEPARTMENT ON 9/1/05 UNDER FILE NUMBER MSA 1959.

\*\*\* THESE COMPONENTS WERE APPROVED BY THE DEPARTMENT ON 9/22/2005 UNDER OUR FILE NUMBER A10103UIMMST01 01A.

## Company and Contact

### Filing Contact Information

Susan Cipollo, Director Susan\_J\_Cipollo@uhc.com  
 601 Office Center Dr. (267) 470-1519 [Phone]  
 Fort Washington, PA 19034 (267) 470-1906[FAX]

### Filing Company Information

United HealthCare Insurance Company CoCode: 79413 State of Domicile: Connecticut  
 450 Columbus Boulevard Group Code: 707 Company Type: Health  
 PO Box 150450  
 Hartford, CT 06115-0450 Group Name: State ID Number:  
 (215) 653-8046 ext. [Phone] FEIN Number: 36-2739571  
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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$25.00  
 Retaliatory? No  
 Fee Explanation: \$25 PER COMPONENT - 4 COMPONENTS = \$100  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
United HealthCare Insurance Company	\$100.00	08/14/2008	21946869

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Stephanie Fowler	09/12/2008	09/12/2008

### Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Stephanie Fowler	09/09/2008	09/09/2008	Bobbie Walton	09/11/2008	09/11/2008

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## **Disposition**

Disposition Date: 09/12/2008

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

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Item Type	Item Name	Item Status	Public Access
Supporting Document	BA8982 DIS AR (02/06)	Accepted for Informational Purposes	Yes
Form	LETTER	Filed	Yes
Form	BROCHURE	Filed	Yes
Form	ENVELOPE	Filed	Yes
Form	LANDING PAGE	Filed	Yes

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## Objection Letter

Objection Letter Status Pending Industry Response  
Objection Letter Date 09/09/2008  
Submitted Date 09/09/2008  
Respond By Date 10/09/2008

Dear Susan Cipollo,

This will acknowledge receipt of the captioned filing.

Please supply a copy of form BA8982 DIS AR (02/06). I would like to have a better understanding of how this previously approved form works with the forms contained in this filing.

Please feel free to contact me if you have questions.

Sincerely,  
Stephanie Fowler

## Response Letter

Response Letter Status Submitted to State  
Response Letter Date 09/11/2008  
Submitted Date 09/11/2008

Dear Stephanie Fowler,

### Comments:

### Response 1

Comments: Ms. Fowler, the following advertisement was approved by your Department on 3/20/06 under our file number and your Department file number 30566. I attached it for your review. Thanks!

### Changed Items:

### Supporting Document Schedule Item Changes

Satisfied -Name: BA8982 DIS AR (02/06)

Comment:

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No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,  
Bobbie Walton

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## Form Schedule

Lead Form Number: LA19740 (11/08)

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed	LA19740 (11/08)	Advertising	LETTER	Initial		45	LA19740 (11-08)_R4.pdf
Filed	BA9977 (11/08)	AR Advertising	BROCHURE	Initial		45	BA9977 AR (11-08)_R6.pdf
Filed	OA4332 (11/08)	Advertising	ENVELOPE	Initial		45	OA4332 (11-08)_R1.pdf
Filed	LP1 (11/08)	Advertising	LANDING PAGE	Initial		45	LP1 (11-08)_R3.pdf

<Sample A. Sample  
1234 Main Street  
Anytown, IN 12345>



**Two important plans to consider.  
One convenient way to get both.**

<Dear Sample A. Sample,>

It's the time of year when you may be thinking about your health and prescription drug insurance and deciding on your options. To help you, this kit shows the advantages of both Medicare prescription drug insurance, also known as Part D, and Medicare supplement insurance. You'll also see how they work together to better clarify your out-of-pocket health care expenses.

**Two plans for more complete coverage.**

Medicare prescription drug insurance helps you with the rising cost of prescriptions, and Medicare supplement coverage helps with some of the out-of-pocket expenses not paid by Medicare. Both plans, insured by United HealthCare Insurance Company (United HealthCare Insurance Company of New York for New York residents), are outlined in the enclosed brochure so you can find out more about:

- AARP® MedicareRx Plans (Part D)
- AARP® Medicare Supplement Insurance Plans
- How both plans work together
- What's covered, what's not
- How to apply

Think about your needs and how each plan, or both plans, would work for you. By applying for an AARP Medicare Supplement and AARP MedicareRx Plan, you'll have the convenience of getting more complete coverage at the same time, from the same insurance provider.

**AARP MedicareRx Plans could start saving you money right away.**

Now is an important time to apply. The annual election period for Medicare Part D coverage is from November 15 to December 31 for 2009 coverage.

**Just follow these steps:**

- 1 Review**  
the enclosed brochure.
- 2 Choose**  
the plans that are right for you.
- 3 Complete**  
and return the enclosed applications.

**Apply today.  
Have questions?  
Get the help you need.**

**<Call a Customer  
Service Representative  
1-XXX- XXX-XXXX>**

TTY/TDD users:  
**<Call 1-XXX-XXX-XXXX>**  
<Weekdays, 7 a.m. to 11 p.m. and Saturday, 9 a.m. to 5 p.m., ET>



Here's what to expect:

- Three plans to choose from with no deductibles on two of the plans
- Every brand-name drug or its generic version covered by Medicare Part D
- Copays as low as \$5
- National coverage goes where you go

**AARP Medicare Supplement Plans help cover some of what Medicare doesn't.**

Having a Medicare supplement plan helps pay for deductibles and copayments not covered by Medicare Parts A and B. An AARP Medicare Supplement Insurance Plan can help you spend less each year on out-of-pocket health care expenses. Apply now to get:

- Help covering some of the 20% of out-of-pocket costs not covered by Medicare Part B.
- No network restrictions — see any doctor that accepts Medicare and go to any hospital.
- The care you need, when you need it, from any doctor who accepts Medicare, wherever you are in the U.S.

**Questions? Call a Customer Service Representative today.**

Speak with a Representative who can answer your questions and help you decide what coverage you need. Call toll-free at **1-XXX-XXX-XXXX**. TTY/TDD users, please call 1-800-232-7773.

Representatives are available weekdays, 7 a.m. to 11 p.m. and Saturday, 9 a.m. to 5 p.m., ET.

Sincerely,



Jay Fleming  
Vice President and Licensed Agent,  
Customer Service



Thomas S. Paul  
Chief Pharmacy Officer,  
United HealthCare, Medicare Programs

P.S. Call now to apply for the only Medicare Part D prescription drug plans and Medicare supplement plans that carry the AARP name.

AARP Health is a collection of health-related products, services, and insurance programs available through AARP. Neither AARP nor its affiliate is the insurer. AARP contracts with insurers to make coverage available to AARP members.

<This/These> Medicare Prescription Drug Plan(s) (PDPs) </are> insured by United HealthCare Insurance Company or United HealthCare Insurance Company of New York, for New York residents (together called "UnitedHealthcare"). AARP MedicareRx Plans carry the AARP name, and UnitedHealthcare pays a fee to AARP and its affiliate for use of the AARP trademark and other services. Amounts paid are used for general purposes of AARP and its members. AARP is not the insurer. UnitedHealthcare receives rebates from drug manufacturers that it passes on to its enrollees through reductions in premiums and to Medicare to reduce Medicare program costs. UnitedHealthcare contracts with the Federal government as a PDP sponsor. All decisions about prescription drugs are between you and your physician or other health care provider.

AARP does not make prescription drug or health plan recommendations for individuals. You are strongly encouraged to evaluate your needs before choosing a prescription drug or health plan.

AARP Medicare Supplement Insurance Plans are Insured by United HealthCare Insurance Company, Fort Washington, PA (United HealthCare Insurance Company of New York, Islandia, NY, for New York residents). **Not connected with or endorsed by the U.S. Government or the Federal Medicare Program.** Policy Form No. GRP 79171 GPS-1 (G-36000-4). In some states, plans may be available to persons eligible for Medicare by reason of disability. All plans may not be available in your state/area. This is a solicitation of insurance. See the enclosed materials for information about benefits, costs, eligibility requirements, exclusions, and limitations.

If you would like additional information about the available AARP Medicare Supplement Plans, please call 1-XXX-XXX-XXXX.

Call <X-XXX-XXX-XXXX> today.

TTY/TDD users: **1-800-232-7773**

Weekdays, 7 a.m. to 11 p.m.,  
Saturday, 9 a.m. to 5 p.m., ET

Visit us at  
[www.XXXXXXXXXXX.com](http://www.XXXXXXXXXXX.com)

*AARP Medicare Supplement Insurance*



*AARP Medicare Part D Insurance*



*More-complete health coverage.*



**Use this guide to get started.**

## Why do I need two plans?

Medicare Parts A and B don't cover all of your medical expenses or the cost of most prescription drugs. In fact, Medicare Part B pays about 80% of medical expenses, so the remaining 20% is what you owe. To help keep your out-of-pocket costs down, consider the following two insurance plans to help protect your health and your budget.

### **Medicare supplement insurance.**

AARP® Medicare Supplement Insurance Plans, insured by United HealthCare Insurance Company, help offset some of the out-of-pocket expenses not covered by Medicare.

### **Prescription drug coverage.**

The AARP MedicareRx Plans, insured by United HealthCare Insurance Company, are Medicare Part D prescription drug plans that offer coverage for thousands of drugs, a benefit not available from any Medicare supplement plan or traditional Medicare.

### **Two valuable insurance options from one provider.**

You'll want to find the plans that meet both your coverage and budget needs. And for your convenience, this package provides you the opportunity to apply for both Medicare supplement and Medicare prescription drug (Part D) coverage at the same time.

The choice is yours — decide if you need the benefits of just one of the plans or the more complete coverage of both. Remember, when you choose both plan types, you get help paying for your medical and prescription drug expenses.

See page 12 for an example of how having both plans can save you money.

## Why get a plan that carries the AARP name?

For almost 50 years, AARP has been putting its members' interests first. For example, members are offered a wide range of Medicare supplement plans and prescription drug plan options. So there's likely to be one plan from each that meets your needs — and your budget. And as always, you can expect answers to all of your questions.

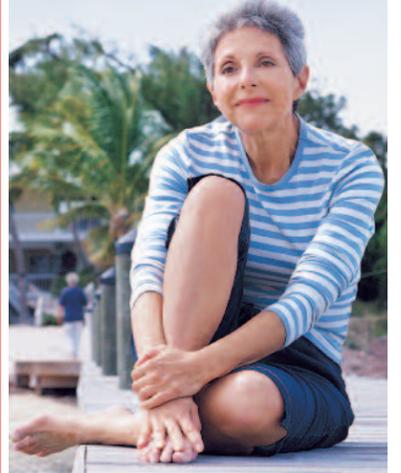
### **Customer Service Representatives are here for you.**

They'll discuss your needs and explain your options. When you're ready, they can also guide you through the enrollment process, so you're confident with your decision.

And remember, should you reevaluate your needs, you can change to another Medicare supplement plan without penalty anytime. You can also change your Medicare Part D plan during the Annual Election Period set up by Medicare.

United HealthCare Insurance Company pays a fee to AARP and its affiliate for use of the AARP trademark and other services. Amounts paid are used for the general purposes of AARP and its members.

<sup>1</sup>Source: United HealthCare Insurance Company [2007] internal company membership data.



Over five million Americans count on an AARP Medicare Supplement Plan or AARP MedicareRx Plan.<sup>1</sup>

 [Apply now.](#)

## Why do I need an AARP Medicare Supplement Plan?

Medicare only covers about 80% of your Part B medical expenses. The remaining 20% could add up to thousands of dollars.<sup>2</sup> That's why millions of AARP members like you have chosen an AARP Medicare Supplement Insurance Plan to help with that 20%.<sup>2</sup>

### Choose the plan that's right for you.

There are a number of Medicare supplement plans to meet your needs — with basic to more comprehensive benefits. Most plans cover up to the remaining 20% of Medicare Part B expenses. With any plan you choose, you:

- Keep your own doctor, hospital, and health care facility.
- See specialists without referrals.
- Have almost no claim forms.
- Enjoy insurance that goes with you anywhere you travel in the United States.

To see what each plan has to offer, review the chart on the enclosed “Outlines of Medicare Supplement Coverage” — cover page, which shows all the plans available in your state.

### Count on excellent service.

Rest assured, if you have any concerns, you'll always get the personal attention you need, whenever you need it.

- 99.7% of issues are resolved during the first phone call.<sup>3</sup>
- 94.4% customer satisfaction rating.<sup>4</sup>
- 99.4% of claims are processed within 10 business days.<sup>3</sup>
- Plus, a Customer Service Representative to answer your questions about these plans and explain your options.

### Competitive, stable rates.<sup>5</sup>

Each plan is competitively priced. And you'll never be singled out for a rate increase. Any rate change will apply to everyone enrolled in your plan in your state or area.

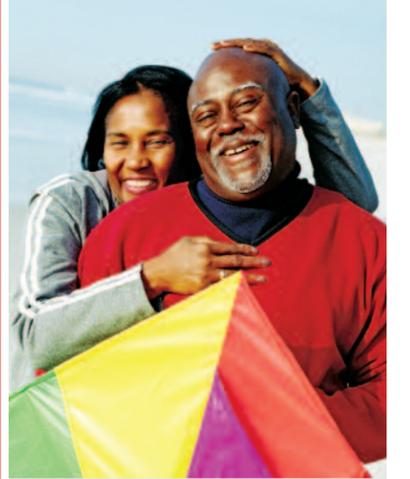
## What plans are most popular with AARP members?

While every one of the traditional AARP Medicare Supplement Plans lets you keep your own doctor, specialist, and hospital, there are a variety of plans available to meet your needs.

**Plan A** is the lowest cost plan and covers the basic benefits — your Medicare Part A hospital and Part B medical coinsurance plus your first three pints of blood each year.

**Plan C** is a more attractive option among AARP members. In addition to Plan A's benefits, it covers Medicare Part A and Part B deductibles, skilled nursing facility coinsurance, and foreign travel emergencies.

**Plan F** is the most popular plan and has everything Plan C offers, plus benefits for the difference between what the doctor charges and what Medicare approves. This is important if your doctor charges more than what Medicare approves.



Medicare only covers about 80% of Part B medical costs.

An AARP Medicare Supplement Insurance Plan can help you cover some of the rest.

 [Apply now.](#)

<sup>2</sup>Juliet Cubanski, et al, *Medicare Chart Book*, Third Edition, Summer 2005, <http://www.kff.org/medicare/7284.cfm> (December 6, 2006) p. 32.

<sup>3</sup>Based on internal <2007> company data.

<sup>4</sup>Based on <2007> Member Satisfaction Survey.

<sup>5</sup>AARP Medicare Supplement Plan rates have increased on average less than <6%> nationally in the past <four> years. Based on <2007> internal company data.

## Why do I need prescription drug coverage?

If you want protection from unexpected changes in prescription drug costs now and in the future, a Medicare Part D plan might be for you. These plans were designed to offer affordable prescription drug coverage for people on Medicare. The AARP MedicareRx Plan, insured by United HealthCare, features include:

- **No annual deductible on two of three plans.**<sup>6</sup> Your coverage and savings may begin with the first prescription you fill.
- **Coverage for thousands of prescription drugs.** Each plan's formulary includes every brand-name prescription drug or its generic version covered by Medicare Part D. And you can rest easy knowing that no drugs will be removed from the formulary during all of 2009 unless the Centers for Medicare and Medicaid Services require removal of a drug or if a market withdrawal of a drug is announced.
- **Predictable copays as low as \$<X>.** With copays as low as \$<X>, you pay a pre-set amount for each prescription filled.
- **Predictable monthly premiums.** Your premium depends on the plan you choose and the state you live in. And you can have your premium deducted from your checking or savings account or your Social Security check.
- **Save more with convenient home delivery service.** \$0 copay for a 90-day supply of Tier 1 drugs by using Preferred Mail service.<sup>†</sup> And save up to \$15 on a 90-day supply of Tier 2 and Tier 3 drugs.
- **Nationwide pharmacy network.** With more than 60,000 network pharmacies, you are covered at home or anywhere you travel in the United States.

<sup>6</sup>No annual deductible on the AARP MedicareRx Preferred Plan and the AARP MedicareRx Enhanced Plan.

## How do I know if and when I'm eligible?

The AARP MedicareRx Plans are open to anyone who:

- Is entitled to Medicare benefits under Part A or enrolled in Medicare Part B.
- Resides in the service area of the Medicare prescription drug plan.
- Will be enrolled in only one Medicare prescription drug plan (Part D) at a time.

A Part D plan is a great partner to a Medicare supplement plan. If you are in a Medicare Advantage Private Fee-for-Service plan (MA PFFS) that does not provide Medicare prescription drug coverage, or an MA Medical Savings Account plan (MSA), you may enroll in a prescription drug plan (PDP). Also, people who enroll in an 1876 Cost Plan may enroll in a PDP.

If you are enrolled in an MA plan, coordinated care (HMO or PPO) plan, or an MA PFFS plan that includes prescription drugs, and then you enroll in a PDP, you will be automatically disenrolled from the HMO, PPO, or MA PFFS plan.

**Initial Enrollment Period.** The first opportunity to enroll is the Initial Enrollment Period — three months before and three months after the month you turn 65. If you enroll later, the government may require you to pay a penalty — 1% of the national average premium — for each month you delay.

**You may be eligible for a Special Enrollment Period.** Contact us to learn more about Special Enrollment Periods or visit us online at [www.XXXXXXXXXX.com](http://www.XXXXXXXXXX.com).

### Annual Election Period:

- November 15–December 31 of each year.
- You can enroll for the first time, or switch from your current plan.
- New coverage begins January 1 of the following year.

## What are my prescription plan choices?

You can choose from three plans that offer different levels of coverage and different costs.

**The AARP MedicareRx Preferred Plan** provides affordable, predictable coverage — with no annual deductible — and a drug list that includes 100% of the drugs covered by Medicare Part D.

**The AARP MedicareRx Enhanced Plan** provides everything available in the AARP MedicareRx Preferred Plan, plus additional coverage for over 3,000 Tier 1 generic drugs during the coverage gap, plus discounts on certain drugs that aren't covered by Medicare.

**The AARP MedicareRx Saver Plan** combines the security of a prescription drug insurance plan with lower premiums and copays. It also has a \$<XXX> annual deductible and a formulary that includes every brand-name prescription drug, or its generic version, covered by Medicare Part D.

To find out how much you can save, visit [www.XXXXXXXXXX.com](http://www.XXXXXXXXXX.com) and just enter the drugs you take and get an estimate of your annual savings, based on the plan you choose.

 **Apply now.**

Call <X-XXX-XXX-XXXX> today

TTY/TDD users: 1-800-232-7773,

Weekdays, 7 a.m. to 11 p.m.

Saturday, 9 a.m. to 5 p.m., ET

	AARP MedicareRx Saver	AARP MedicareRx Preferred	AARP MedicareRx Enhanced
<b>Monthly Premium<sup>7</sup></b>	\$<XX.XX>–\$<XX.XX>	\$<XX.XX>–\$<XX.XX>	\$<XX.XX>–\$<XX.XX>
<b>Tier 1 copay</b>	\$<XX.XX>	\$<X.XX>	\$<X.XX>
<b>Tier 2 copay</b>	\$<XX.XX>	\$<XX.XX>	\$<XX.XX>
<b>Tier 3 copay<sup>7</sup></b>	\$<XX.XX>–\$<XX.XX>	\$<XX.XX>–\$<XX.XX>	\$<XX.XX>–\$<XX.XX>
<b>Specialty tier coinsurance</b>	<XX>%	<XX>%	<XX>%
<b>Drug list</b>	Includes every brand-name prescription drug or its generic version, covered under Medicare Part D.	100% of the drugs covered under Medicare Part D.	100% of the drugs covered under Medicare Part D, plus discounts on additional drugs not covered by Medicare Part D.
<b>Annual deductible</b>	\$<XXX.XX>	No deductible	No deductible
<b>Initial coverage</b>	You pay the regular copays and coinsurance — until you and the plan together spend \$<X,XXX> in drug costs.	You pay the regular copays and coinsurance — until you and the plan together spend \$<X,XXX> in drug costs.	You pay the regular copays and coinsurance — until you and the plan together spend \$<X,XXX> in drug costs.
<b>Coverage gap</b>	No coverage in the gap.	No coverage in the gap.	Coverage for Tier 1 generic drugs in the gap.
	You pay 100% of your discounted drug cost until True-Out-Of-Pocket (TrOOP) costs, not including premiums, equal \$<X,XXX>.	You pay 100% of your discounted drug cost until True-Out-Of-Pocket (TrOOP) costs, not including premiums, equal \$<X,XXX>.	Drugs not in Tier 1 — you pay 100% of your discounted drug cost until True-Out-Of-Pocket (TrOOP) costs, not including premiums, equal \$<X,XXX>.
<b>Catastrophic coverage</b>	After you reach \$<X,XXX> in out-of-pocket costs, the plan pays the majority of the expenses until the end of the year.	After you reach \$<X,XXX> in out-of-pocket costs, the plan pays the majority of the expenses until the end of the year.	After you reach \$<X,XXX> in out-of-pocket costs, the plan pays the majority of the expenses until the end of the year.

<sup>7</sup>See the enclosed “Summary of Benefits” for costs in your area.

## How do I know what drugs are covered?

The AARP MedicareRx Plans' drug list covers every brand-name drug, or its generic version, covered by Medicare Part D.

How much you'll pay each time you fill a prescription will depend on whether the drug you need is a Tier 1, Tier 2, Tier 3, or Specialty Tier drug. Tier 1 drugs will usually be the most affordable.

- **Tier 1** — Lowest copay: includes mostly generic prescription drugs.
- **Tier 2** — Medium copay: includes mostly brand-name prescription drugs.
- **Tier 3** — Highest copay: includes non-preferred brand-name drugs.
- **Specialty Tier** — Includes unique, typically very high cost drugs.

To see if your drugs are covered,

 **Call now:** <X-XXX-XXX-XXXX>

TTY/TDD users: **1-800-232-7773**,  
Weekdays, 7 a.m. to 11 p.m.  
Saturday, 9 a.m. to 5 p.m., ET

### Common Drugs Covered

Here's a sample of some of the most popular covered drugs. This is not a complete list covered by the AARP MedicareRx Plans. For a complete listing, call <X-XXX-XXX-XXXX>

- |                                 |              |
|---------------------------------|--------------|
| • Lipitor                       | • Norvasc    |
| • Lisinopril                    | • Vytorin    |
| • Furosemide                    | • Diovan     |
| • Metoprolol                    | • Nexium     |
| • Simvastatin                   | • Amlodipine |
| • Atenolol                      | • Lovastatin |
| • Hydrochlorothiazide           | • Omeprazole |
| • Hydrocodone/<br>Acetaminophen | • Flomax     |
| • Toprol XL                     | • Zetia      |
| • Warfarin                      | • Prednisone |
| • Metformin                     | • Sertraline |
| • Plavix                        | • Lexapro    |
| • Fosamax                       | • Coreg      |
| • Potassium Chloride            | • Aricept    |

## Where can I get my prescriptions filled?

Have your prescriptions filled at one of over 60,000 network pharmacies nationwide, including retail, mail order, long-term care, home infusion, and Indian Health Service, Tribes, or Urban Indian pharmacy services.

Your favorite pharmacy is most likely in our network, and prescriptions are easy to fill anywhere in the country. For added convenience, many retail pharmacies will fill a 90-day prescription. Some pharmacies in the network include:

Walgreens	CVS
Wal-Mart	Sam's Club
Brooks Pharmacy	Rite Aid
Safeway	Target
	And many more

### Save more – order your prescriptions by mail.

You could enjoy additional savings on what you pay for your prescriptions. For example, pay \$0 copay for a 90-day supply of Tier 1 drugs.<sup>†</sup> Plus, you don't have to pay for shipping.

### Do I have to use network pharmacies?

To keep your costs as low as possible, you must fill your prescriptions at a network pharmacy.

Emergencies do happen. If you need to have your prescription filled at a pharmacy that is out-of-network, there are some exceptions allowed. In that case, you will need to fill out a claim form and you may not get the same level of discounts as you would through a network pharmacy.

For more information on network pharmacies or to access a claim form, visit us online at <www.XXXXXXXXXX.com>, or contact us at AARP MedicareRx Plans, P.O. Box 29300, Hot Springs, AR 71903-9300.

## How do the two plans work together to save me money?

A man with AARP Medicare Supplement Plan C and AARP MedicareRx Preferred Plan was admitted to the hospital as an inpatient for five days. The total charge was \$22,040.<sup>8</sup> Even with Medicare Part A, he would have owed \$1,024 in hospital costs for the Part A deductible (since this was his first inpatient hospital stay in the benefit period). His AARP Medicare Supplement

Plan C paid the \$1,024. Before leaving the hospital, he was prescribed Lipitor to treat his heart condition, which cost \$79.37. Since he had an AARP MedicareRx Preferred Plan, he only paid a \$30 copay for his outpatient prescription. Both plans saved him a total of \$1,073.37.<sup>9</sup>

Medicare Supplement Plan C	Medicare Pays	Plan Pays	Your Out-of-Pocket Costs	Your Savings
<b>Hospital Stay: \$22,040</b>	\$21,016	\$1,024	\$0	\$1,024
AARP MedicareRx Preferred Plan		Plan Pays	Your Out-of-Pocket Costs	Your Savings
<b>Cost of Lipitor 10/20 tablet: \$79.37</b>		\$49.37	\$30.00	\$49.37

<sup>8</sup>AHA Hospital Statistics ©2007 Health Forum, LLC, an affiliate of the American Hospital Association, page 169–195, Table 8.

<sup>9</sup>For illustrative purposes only. Trademarks for the drugs listed above are owned by third parties with whom AARP MedicareRx Plans have no affiliation. Approximate annual costs were derived from retail pharmacy Usual & Customary (U&C) prices submitted by network pharmacies during <February 2008>. U&C prices most closely represent the prices that pharmacies charge to cash-paying customers (without discounts). Readers are cautioned that actual prices may be higher or lower based on drug strength, dosing frequency, and other factors. The AARP MedicareRx Preferred Plan premium is not included.

## How do I apply for an AARP MedicareRx Plan and an AARP Medicare Supplement Plan?

- **Fill out the enclosed applications.**
- **Mail them back to us in the envelope provided.** Remember, you may enroll in a Medicare prescription drug plan only during specific times of the year (see page 7).
- **If you have questions** or need personal assistance, call a Customer Service Representative at: <X-XXX-XXX-XXXX>, TTY/TDD users: **1-800-232-7773**, weekdays, 7 a.m. to 11 p.m., Saturday, 9 a.m. to 5 p.m., ET.

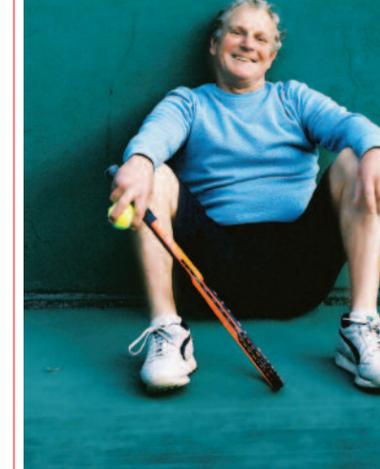
For more information on Medicare benefits and services, including general information regarding the health or Medicare Part D benefit, call Medicare toll-free: 1-800-MEDICARE (1-800-633-4227), TTY/TDD: 1-877-486-2048, (24 hours a day, 7 days a week). Or visit [www.medicare.gov](http://www.medicare.gov).

### What if I have limited income?

There is extra help available for people who have limited income and resources. You may be able to get extra help to pay for your prescription drug premiums and costs.

To see if you qualify for extra help, call:

- 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY/TDD users should call 1-877-486-2048
- The Social Security Administration at 1-800-772-1213, Monday to Friday, 7 a.m. to 7 p.m. TTY/TDD users should call 1-800-325-0778
- Your State Medicaid Office



Get an AARP Medicare Supplement Plan and an AARP MedicareRx Plan.

 **Apply today.**

### Additional information about the AARP MedicareRx Plans.

What if I have a complaint? There may be times when you want to contact us with a complaint that is considered an appeal. Examples:

- If you are unable to get a prescription that you think you should get under the plan
- If the plan did not pay for your prescription, if you think that your portion of the cost was incorrect, or if you wanted a different version of a drug on the formulary (brand-name instead of generic)

Any other kind of complaint is called a grievance. Examples:

- Long waiting times getting your prescriptions filled
- Poor hygiene conditions in a contracted pharmacy
- If you think your doctor is giving you the wrong medicine

You can ask to make an exception to the plan's coverage rules. Examples:

- Your prescription drug coverage is on a formulary, but you want to get something different, like a brand-name drug instead of a generic
- If your prescription drug is not covered by the formulary, you can ask to have it covered

These types of requests are part of the organization determination process.

Details regarding the Exceptions, Appeal, and Grievance process, including time frames, can be found in the Evidence of Coverage, which you will receive once you become a member.

Visit [www.XXXXXXXX.com](http://www.XXXXXXXX.com) to learn more and access forms.

### Important Details

AARP Health is a collection of health-related products, services, and insurance programs available through AARP. Neither AARP nor its affiliate is the insurer. AARP contracts with insurers to make coverage available to AARP members.

[<This/These>] Medicare Prescription Drug Plan(s) (PDPs) [<is/are>] insured by United HealthCare Insurance Company or United HealthCare Insurance Company of New York, for New York residents (together called "United HealthCare"). AARP MedicareRx Plans carry the AARP name, and United HealthCare pays a fee to AARP and its affiliate for use of the AARP trademark and other services. Amounts paid are used for general purposes of AARP and its members. AARP is not the insurer. United HealthCare receives rebates from drug manufacturers that it passes on to its enrollees through reductions in premiums and to Medicare to reduce Medicare program costs. United HealthCare contracts with the Federal government as a PDP sponsor. All decisions about prescription drugs are between you and your physician or other health care provider.

AARP does not make prescription drug plan recommendations for individuals. You are strongly encouraged to evaluate your needs before choosing a prescription drug plan. Medicare beneficiaries may enroll in one of the AARP MedicareRx Plans through the Centers for Medicare & Medicaid Services Online Enrollment Center, located at [www.medicare.gov](http://www.medicare.gov). For more information, contact the AARP MedicareRx Plans at <X-XXX-XXX-XXXX> 7 days a week, 8 a.m. to 11 p.m., ET. TTY/TDD users should call <1-800-232-7773>. All Medicare prescription drug plans agree to stay in the program for a full year at a time. Each year, the plans decide whether to continue for another year. Even if a Medicare prescription drug plan leaves the program, you will not lose Medicare coverage. If a plan decides not to continue, it must send you a letter at least 90 days before your coverage will end. The letter will explain your options for Medicare prescription drug coverage in your area. You must continue to pay your Medicare Part B premium if not otherwise paid for under Medicaid or by another third party. This document is available in alternative formats. For more information, or for information on Medicare benefits and services, including general information regarding the Part D benefit, call Medicare toll-free: 1-800-MEDICARE (1-800-633-4227), TTY/TDD: 1-877-486-2048 (24 hours a day, 7 days a week); or visit the [www.medicare.gov](http://www.medicare.gov) web site. You cannot enroll in the AARP MedicareRx Enhanced plan if your current or former employer helps pay for your drugs.

You are not required to use the plan's Preferred Mail Service Pharmacy to obtain a supply of your maintenance medications. You have the option of using the Preferred Mail Service Pharmacy, a retail extended-day-supply pharmacy or non-preferred mail service pharmacy in the network to obtain a supply of maintenance medications.

\*The benefit described here applies until the total cost of your drugs (paid by UnitedHealthcare, you and others) reaches <\$2,700>. However, for members in AARP MedicareRx Saver, the benefit applies when the total cost of your drugs is between <\$295> and <\$2,700>. For members in AARP MedicareRx Enhanced, you pay a \$14 copay for a 90-day supply of Tier 1 medications when the amount paid by you and others on your behalf is between \$2,701 and \$4,350.

Please call [UnitedHealthcare] Customer Care, 24 hours a day, 7 days a week for up-to-date information on which pharmacies are in the network. If you choose a retail extended-day-supply pharmacy or non-preferred mail service pharmacy, you may see out-of-pocket payment differences when compared to using the Preferred Mail Service Pharmacy. You should experience no out-of-pocket payment differences if choosing between a retail extended-day-supply pharmacy and a non-preferred mail service pharmacy. Your prescriptions should arrive in about seven days from the date the completed order is received by Prescription Solutions. If Prescription Solutions needs to contact you or your prescribing physician to clarify information on your order or to request prescriptions from your physician, delivery may take longer. If you prefer rush delivery, medications can be shipped overnight for an additional charge. You should fill your prescriptions locally if you are out of your medications and cannot wait for your mail order prescriptions to arrive. Standard delivery is no charge to U.S. addresses, including U.S. territories. For copay amounts, drug coverage information, or general plan questions, please call Customer Care at <1-888-867-5575>, <24 hours a day, 7 days a week>, TTY/TDD <1-877-730-4192>.

Prescription Solutions is an affiliate of United HealthCare Insurance Company and United HealthCare Insurance Company of New York.

AARP Medicare Supplement Insurance plans are insured by United HealthCare Insurance Company, Fort Washington, PA. Not connected with or endorsed by the U.S. Government or the Federal Medicare Program. Policy Form No. GRP 79171 GPS-1 (G-36000-4). In some states, plans may be available to persons eligible for Medicare by reason of disability. All plans may not be available in your state/area. This is a solicitation of insurance. See the enclosed materials for information about benefits, costs, eligibility requirements, exclusions, and limitations.

Important notice: You are entitled to receive "Guide to Health Insurance for People with Medicare." This guide is free — please call 1-800-272-2146, toll-free, or visit us online at [www.aarphealthcare.com/guidetohealth](http://www.aarphealthcare.com/guidetohealth).



AARP Medicare Supplement Insurance  
AARP MedicareRx Plans  
Insured by United HealthCare Insurance Company

PRSR STD  
US POSTAGE PAID  
UNITED HEALTHCARE  
INSURANCE  
COMPANY



Now is the time to give your Medicare coverage a checkup.

See what a Medicare supplement insurance plan and a Part D prescription drug plan can do for you.



**United HealthCare Insurance Company**  
(United HealthCare Insurance Company of New York for New York Residents)  
c/o AARP Health  
P.O. Box 1017, Montgomeryville, PA 18936-1017

Apply for both inside.



## Time to give your coverage a checkup.

**AARP® Medicare Supplement Insurance Plans and  
AARP® MedicareRx Plans insured through United HealthCare  
Insurance Company – two plans for more complete coverage.**



### Why do I need two plans?

Enroll in both plans and get help with some of the high cost of medical care and prescription drugs. Plus, you'll enjoy the convenience of having both plans insured by United HealthCare Insurance Company (United HealthCare Insurance Company of New York for New York residents).

To take advantage of the insurance plans offered, you must enroll in each separately.

### Learn more and enroll today!

Simply click on each of the buttons below.

**AARP Medicare  
Supplement Plans**

**AARP MedicareRx Plans**

Revisit this page to complete both online enrollment forms.

Call **1-866-565-3031** TTY/TDD users **1-800-232-7773**  
Weekdays, 7 a.m. to 11 p.m. and Saturday, 9 a.m. to 5 p.m., ET.

AARP Health is a collection of health-related products, services, and insurance programs available through AARP. Neither AARP nor its affiliate is the insurer. AARP contracts with insurers to make coverage available to AARP members.

<This/These> Medicare Prescription Drug Plan(s) (PDPs) <is/are> insured by United HealthCare Insurance Company or United HealthCare Insurance Company of New York for New York residents (together called "United Healthcare"). AARP MedicareRx Plans carry the AARP name, and UnitedHealthcare pays a fee to AARP and its affiliate for use of the AARP trademark and other services. Amounts paid are used for general purposes of AARP and its members. AARP is not the insurer. UnitedHealthcare contracts with the Federal government as a PDP sponsor. All decisions about prescription drugs are between you and your physician or other health care provider.

AARP does not make prescription drug plan recommendations for individuals. You are strongly encouraged to evaluate your needs before choosing a prescription drug plan.

AARP Medicare Supplement Insurance Plans are insured by United HealthCare Insurance Company, Fort Washington, PA (United HealthCare Insurance Company of New York, Islandia, NY, for New York residents). **Not connected with or endorsed by the U.S. Government or the Federal Medicare Program.** Policy Form No. GRP 79171 (G-36000-4). In some states, plans may be available to persons eligible for Medicare by reason of disability. All plans may not be available in your state/area. This is a solicitation of insurance. Click on the AARP Medicare Supplement Plans link for information about benefits, costs, eligibility requirements, exclusions, and limitations.

LPI (11/08)

S5820S5805S5921\_PDP3070932\_000 CMS 07/2008

*SERFF Tracking Number:* UHLC-125776616 *State:* Arkansas  
*Filing Company:* United HealthCare Insurance Company *State Tracking Number:* 39929  
*Company Tracking Number:* LA19740 (11/08)  
*TOI:* MS05G Group Medicare Supplement - Standard Sub-TOI: MS05G.001 Plan A  
*Plans*  
*Product Name:* MEDICARE SUPPLEMENT  
*Project Name/Number:* CO-MARKETING /LA19740 (11/08)

## **Rate Information**

Rate data does NOT apply to filing.

SERFF Tracking Number: UHLC-125776616 State: Arkansas  
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## Supporting Document Schedules

**Satisfied -Name:** BA8982 DIS AR (02/06)

### Review Status:

Accepted for Informational 09/12/2008  
Purposes

### Comments:

### Attachment:

BA8982 DIS AR (02-06).2R.pdf

# **Your Guide to AARP's Medicare Supplement Insurance Portfolio of Plans**

## ***Outline(s) of Coverage Included Please Use with the Enclosed Cover Page***

### **How to Use Your Guide**

This Guide contains detailed information about the benefits of the Medicare supplement insurance plans available to you through the AARP Health Care Options program.

AARP's Medicare Supplement Insurance Portfolio of Plans, underwritten by United HealthCare Insurance Company, provides a wide choice of benefits to AARP members, so you can choose the plan that best fits your individual health insurance needs.

To find the plan that is best for you:

- Look at the Cover Page enclosed in these materials. This page shows the benefits of the Medicare supplement plans and the rates of the plans available in your state. Benefits and cost vary depending upon the plan selected and the information you provide. It also indicates any specific provisions that may apply in your state.
- For more information on a specific plan, look at the attached chart(s) which outline(s) the benefits of that plan. The chart(s) show(s) the expenses Medicare pays, the benefits the plan pays and the costs you would have to pay yourself.

If you have any questions, call AARP Health Care Options toll free, 1-800-523-5800, any weekday from 7 a.m. to 11 p.m. or Saturday from 9 a.m. to 5 p.m., Eastern Time. For members with speech or hearing impairments who have access to TTY, call 1-800-232-7773 weekdays from 9 a.m. to 5 p.m., Eastern Time. Hablamos español—llame al 1 800-822-0246, de lunes a viernes, de las 8 a.m. a las 5 p.m. y sábado de las 9 a.m. a las 5 p.m., hora del este.

### **Eligibility to Apply**

To be eligible to apply, you must be an AARP member or spouse of a member, age 50 or older, covered by both Part A and Part B of original Medicare and not duplicating any Medicare supplement coverage.

(Note: If you are not yet age 65, you may only apply for one of the AARP Medicare Supplement Plans A through J.)

### **Important Acceptance Information**

- Your acceptance is guaranteed if, within the last 6 months, you have either enrolled in Medicare Part B or turned age 65.
- If you lose health coverage and are an eligible AARP member, you may be considered an "Eligible Person" entitled to guaranteed acceptance and you may have a guaranteed right to enroll in certain AARP Medicare Supplement Plans under specific circumstances. You are required to:
  1. Apply within the required time period following the termination of your prior health plan.
  2. Provide a copy of the termination notice you received from your prior insurer with your application. This notice must verify the circumstances of your prior plan's termination and describe your right to guaranteed issue of Medicare supplement insurance.

If you have any questions on your guaranteed right to coverage, you may wish to contact the administrator of your prior health plan or your local state department on aging.

## Glossary of Terms

**Lifetime Reserve Days** are limited by Medicare to 60 days during your lifetime. Once these are used, Medicare provides no hospital coverage after 90 days of a benefit period.

**Medicare Eligible Expenses** are the health care expenses of the kinds covered under Medicare Parts A and B that Medicare recognizes as reasonable and medically necessary. Physicians under Medicare can agree to accept Medicare's eligible expense as their fee amount. Your physician or surgeon may charge you more.

**Hospital or Skilled Nursing Facility** – A hospital is an institution that provides care for which Medicare pays hospital benefits. A skilled nursing facility is a facility that provides skilled nursing care and is approved for payment by Medicare. The skilled nursing facility stay must begin within 30 days after a hospital stay of 3 or more days in a row or a prior covered skilled nursing facility stay. Both the hospital stay and the skilled nursing facility stay must start while you are covered under this plan. Custodial care does not qualify as an eligible expense.

**Excess Charge** is the difference between the actual Medicare Part B charge as billed, not to exceed any charge limitation established by the Medicare program or state law and the Medicare approved Part B charge.

## General Information

This material describes the plans available through the AARP Health Care Options program but is not considered a health insurance contract or insurance certificate. AARP Medicare Supplement Insurance Plans have been developed in line with federal standards. However, these plans are not connected with, or endorsed by, the U.S. Government or the federal Medicare program. The Policy Form No. GRP79171 GPS-1 is issued in the District of Columbia to the Trustees of the AARP Insurance Plan. **By enrolling, you are agreeing to the release of Medicare claim information to United HealthCare Insurance Company so your Medicare supplement benefits can be processed automatically.**

## Exclusions

- Benefits provided under Medicare.
- Care not meeting Medicare's standards.
- Stays beginning, or care or supplies received, before your plan's effective date.
- Injury or sickness payable by Workers' Compensation or similar laws.
- Stays or treatment provided by a government-owned or -operated hospital or facility unless payment of charges is required by law.
- Stays, care or visits for which no charge would be made to you in the absence of insurance.
- Any stay which begins or medical expenses you incur during the first 3 months after your effective date will not be considered if due to a pre-existing condition. A pre-existing condition is a condition for which medical advice was given or treatment was recommended by or received from a physician within 3 months prior to your plan's effective date.

The following individuals are entitled to a waiver of this pre-existing condition exclusion:

1. Individuals who are replacing prior creditable coverage within 63 days after termination, or
2. Individuals who are turning age 65 and whose application form is received before the last day of the month in which they turn 65, or
3. Individuals who are "Eligible Persons" entitled to Guaranteed Acceptance, or
4. Individuals who have been covered under other health insurance coverage within the last 63 days and have enrolled in Medicare Part B within the last 6 months.

Other exclusions may apply; however, in no event will your plan contain coverage limitations or exclusions for the Medicare Eligible Expenses that are more restrictive than those of Medicare. Benefits and exclusions paid by your plan will automatically change when Medicare's requirements change.

## **Important Information About Cancellation**

Your coverage can never be canceled because of your age, your health or the number of claims you make. Coverage may be canceled due to nonpayment of premium or material misrepresentation. If your group policy terminates and is not replaced by another group policy providing the same type of coverage, you may convert your coverage to an individual Medicare supplement policy issued by United HealthCare Insurance Company. Of course, you may cancel your protection any time you wish. All transactions are effective on the first of the month following receipt of the request.

## **The AARP Insurance Trust**

The AARP Insurance Trust retains income from the investment of monies on deposit in trust accounts. United HealthCare Insurance Company pays a fee to AARP and its affiliate for use of the AARP trademark and other services. Amounts paid are used for the general purposes of AARP and its members.



INSURED BY  
United HealthCare  
Insurance Company

**AARP Medicare Supplement Plans insured by:  
United HealthCare Insurance Company  
1-800-523-5800**

**For information about our family of health products and services  
[www.aarphealthcare.com](http://www.aarphealthcare.com)**