

PREMIUMS FOR MEDICARE SUPPLEMENT PLANS–Texas Effective February 1, 2007
Rate is determined by your age, tobacco usage and ZIP code.

Non-Tobacco

Standard Plan A

Attained Age	Monthly Premium		
	Area 1	Area 2	Area 3
65-69	\$ 142	\$ 123	\$ 110
70-74	150	132	119
75-79	170	148	133
80+	184	160	143

Standard Plan F

Attained Age	Monthly Premium		
	Area 1	Area 2	Area 3
65-69	\$ 191	\$ 166	\$ 148
70-74	214	186	166
75-79	244	211	189
80+	290	258	225

PrimeChoiceSM Plan (High Deductible Plan F)

Attained Age	Monthly Premium		
	Area 1	Area 2	Area 3
65-69	\$ 39	\$ 31	\$ 26
70-74	49	39	33
75-79	60	49	42
80+	84	70	61

PrimeChoiceSM Preferred Plan (High Deductible Plan F)

Attained Age	Monthly Premium		
	Area 1	Area 2	Area 3
65-69	\$ 58	\$ 52	\$ 46
70-74	75	67	61
75-79	91	82	74
80+	126	113	103

Area 1 includes areas with ZIP codes beginning with 770-775, 777, 779 and 784.

Area 2 includes areas with ZIP codes beginning with 752-758, 760-762, 782 and 794.

Area 3 includes all other ZIP codes in Texas.

Please Note: A one-time non-refundable \$5 processing fee will be added to your initial premium.

Policies: TXPLANA, TXPLANF, TXPLANPC2 and TX4004HP2.

Tobacco

Standard Plan A

Attained Age	Monthly Premium		
	Area 1	Area 2	Area 3
65-69	\$ 166	\$ 144	\$ 129
70-74	175	154	137
75-79	197	171	156
80+	214	186	167

Standard Plan F

Attained Age	Monthly Premium		
	Area 1	Area 2	Area 3
65-69	\$ 222	\$ 192	\$ 172
70-74	249	216	192
75-79	283	245	218
80+	336	292	258

PrimeChoiceSM Plan (High Deductible Plan F)

Attained Age	Monthly Premium		
	Area 1	Area 2	Area 3
65-69	\$ 49	\$ 39	\$ 33
70-74	62	49	42
75-79	76	61	53
80+	106	88	76

PrimeChoiceSM Preferred Plan (High Deductible Plan F)

Attained Age	Monthly Premium		
	Area 1	Area 2	Area 3
65-69	\$ 67	\$ 60	\$ 54
70-74	87	78	70
75-79	106	94	86
80+	147	132	120

Your initial premium is for one month's payment and will be due upon enrollment. We will bill you bimonthly (every two months) thereafter, unless you return your Monthly Checking Account Deduction Authorization with your application, in which case we will deduct the amount automatically from your account.

Note: These plans are intended only for people age 65 or older who are enrolled in both Parts A and B of Medicare.

Annual premiums are 12 times the monthly premiums stated.

Quarterly premiums are three times the monthly premiums stated.

Bimonthly premiums are two times the monthly premiums stated.

Please refer to the policy for a complete list of coverage, conditions, restrictions, limitations and exclusions.

UniCare Health Insurance Company of Texas is not connected with or endorsed by the U.S. Government or the federal Medicare program. Medical coverage is provided by UniCare Health Insurance Company of Texas, a separately incorporated and capitalized subsidiary of WellPoint Inc.

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