

Full Low-Income Subsidy (LIS)/Extra Help (2022) - 48 STATES + DC

Beneficiary Group	Annual Income Eligibility Requirement	Monthly Income Eligibility Requirement	Asset Eligibility Requirement	Need to apply for LIS?	Monthly Premium	Annual Deductible	Copay/Coinsurance Plan's Formulary Drugs
Full-Benefits Duals: Institutionalized or receiving Home and Community-based Services	Meet State Medicaid financial eligibility	Meet State Medicaid financial eligibility	Meet State Medicaid financial eligibility	No, receive it automatically	No	No	None
Full-Benefit Duals: income ≤ 100% FPL	Meet State Medicaid/MSP financial eligibility	Meet State Medicaid/MSP financial eligibility	Meet State Medicaid/MSP financial eligibility	No, receive it automatically	No	No	Copay: \$1.35 generic /\$4.00 brand <i>Catastrophic Copay: \$0</i>
Full-Benefit Duals: income > 100% FPL	Meet State Medicaid/MSP financial eligibility	Meet State Medicaid/MSP financial eligibility	Meet State Medicaid/MSP financial eligibility	No, receive it automatically	No	No	Copay: \$3.95 generic/\$9.85 brand <i>Catastrophic Copay: \$0</i>
Non-duals: income ≤ 135% FPL <u>AND</u> lower asset levels	Single: \$18,347/\$18,587* Couple: \$24,719/\$24,959*	Single: \$1,529/\$1,549* Couple: \$2,060/\$2,080*	Single: \$8,400 /\$9,900** Couple: \$12,600/\$15,600**	No, if receiving SSI, otherwise, yes	No	No	Copay: \$3.95 generic/\$9.85 brand <i>Catastrophic Copay: \$0</i>

Partial Low-Income Subsidy (LIS)/Extra Help (2022) - 48 STATES + DC

Beneficiary Group	Income Eligibility Requirement	Monthly Income Eligibility Requirement	Asset Eligibility Requirement	Need to apply for LIS?	Monthly Premium	Annual Deductible	Copay/Coinsurance Plan's Formulary Drugs
Non duals with income ≤ 135% FPL <u>AND</u> assets between lower and higher limits	Single: \$18,347/\$18,587* Couple: \$24,719/\$24,959*	Single: \$1,529/\$1,549* Couple: \$2,060/\$2,080*	Single: between \$8,400/\$9,900 - \$14,010/\$15,510** Couple: between \$12,600/\$15,600-\$27,950/\$30,950**	Yes	No	\$99	Coinsurance: 15% <i>Catastrophic Copay: \$3.95 generic/\$9.85 brand</i>
Non duals with income between 135-150% FPL	Single: \$20,385/\$20,625* Couple: \$27,465/\$27,705*	Single: \$1,699/\$1,719* Couple: \$2,269/\$2,309*	Single: \$14,010/\$15,510** Couple: \$27,950/\$30,950**	Yes	Yes, Sliding scale	\$99	Coinsurance: 15% <i>Catastrophic Copay: \$3.95 generic/\$9.85 brand</i>

* Income amounts reflect threshold without/with the \$20 monthly disregard (annually = \$240); income is rounded to the nearest whole dollar.

** Asset limits include amount without/with \$1,500/person burial allowance

Income Levels Source: <http://aspe.hhs.gov/poverty-guidelines>

Asset/Resource Levels: <https://www.cms.gov/files/document/iis-memo.pdf>

Part D Cost-Sharing Source: <https://www.cms.gov/files/document/2022-announcement.pdf>

Full Low-Income Subsidy (LIS)/Extra Help (2022) - ALASKA

Full Low-Income Subsidy (LIS)/Extra Help (2022) - ALASKA							
Beneficiary Group	Income Eligibility Requirement*	Monthly Income Eligibility Requirement*	Asset Eligibility Requirement**	Need to apply for LIS?	Monthly Premium	Annual Deductible	Copay/Coinsurance Plan's Formulary Drugs
Full-Benefits Duals: Institutionalized or receiving Home and Community-based Services	Meet State Medicaid financial eligibility	Meet State Medicaid financial eligibility	Meet State Medicaid financial eligibility	No, receive it automatically	No	No	None
Full-Benefit Duals: income ≤ 100% FPL	Meet State Medicaid/MSP financial eligibility	Meet State Medicaid/MSP financial eligibility	Meet State Medicaid/MSP financial eligibility	No, receive it automatically	No	No	Copay: \$1.35 generic /\$4.00 brand Catastrophic Copay: \$0
Full-Benefit Duals: income > 100% FPL	Meet State Medicaid/MSP financial eligibility	Meet State Medicaid/MSP financial eligibility	Meet State Medicaid/MSP financial eligibility	No, receive it automatically	No	No	Copay: \$3.95 generic/\$9.85 brand Catastrophic Copay: \$0
Non-duals: income ≤ 135% FPL <u>AND</u> lower asset levels	Single: \$22,937/\$23,177* Couple: \$30,902/\$31,142*	Single: \$1,911/\$1,931* Couple: \$2,575/\$2,595*	Single: \$8,400 /\$9,900** Couple: \$12,600/\$15,600**	No, if receiving SSI; otherwise, yes	No	No	Copay: \$3.95 generic/\$9.85 brand Catastrophic Copay: \$0

Partial Low-Income Subsidy (LIS)/Extra Help (2022) - ALASKA

Partial Low-Income Subsidy (LIS)/Extra Help (2022) - ALASKA							
Beneficiary Group	Income Eligibility Requirement	Monthly Income Eligibility Requirement	Asset Eligibility Requirement	Need to apply for LIS?	Monthly Premium	Annual Deductible	Copay/Coinsurance Plan's Formulary Drugs
Non duals with income ≤ 135% FPL <u>AND</u> assets between lower and higher limits	Single: \$22,937/\$23,177* Couple: \$30,902/\$31,142*	Single: \$1,911/\$1,931* Couple: \$2,575/\$2,595*	Single: between \$8,400/\$9,900 - \$14,010/\$15,510** Couple: between \$12,600/\$15,600-\$27,950/\$30,950**	Yes	No	\$99	Coinsurance: 15% Catastrophic Copay: \$3.95 generic/\$9.85 brand
Non duals with income between 135-150% PL	Single: \$25,485/\$25,725* Couple: \$34,335/\$34,575*	Single: \$2,124/\$2,144* Couple: \$2,861/\$2,881*	Single: \$14,010/\$15,510** Couple: \$27,950/\$30,950**	Yes	Yes, Sliding scale	\$99	Coinsurance: 15% Catastrophic Copay: \$3.95 generic/\$9.85 brand

* Income amounts reflect threshold without/with the \$20 monthly income disregard (annually = \$240); income is rounded to the nearest whole dollar.

** Asset limits include amount without/with \$1,500/person burial allowance.

Income Levels Source: <https://aspe.hhs.gov/poverty-guidelines>

Asset/Resource Levels: <https://www.cms.gov/files/document/lis-memo.pdf>

Part D Cost-Sharing Source: <https://www.cms.gov/files/document/2022-announcement.pdf>

Full Low-Income Subsidy (LIS)/Extra Help (2022) - HAWAII

Beneficiary Group	Income Eligibility Requirement	Monthly Income Eligibility Requirement	Asset Eligibility Requirement	Need to apply for LIS?	Monthly Premium	Annual Deductible	Monthly Income Eligibility Requirement*
Full-Benefits Duals: Institutionalized or receiving Home and Community-based Services	Meet State Medicaid financial eligibility	Meet State Medicaid financial eligibility	Meet State Medicaid financial eligibility	No, receive it automatically	No	No	None
Full-Benefit Duals: income ≤ 100% FPL	Meet State Medicaid/MSP financial eligibility	Meet State Medicaid/MSP financial eligibility	Meet State Medicaid/MSP financial eligibility	No, receive it automatically	No	No	Copay: \$1.35 generic /\$4.00 brand Catastrophic Copay: \$0
Full-Benefit Duals: income > 100% FPL	Meet State Medicaid/MSP financial eligibility	Meet State Medicaid/MSP financial eligibility	Meet State Medicaid/MSP financial eligibility	No, receive it automatically	No	No	Copay: \$3.95 generic/\$9.85 brand Catastrophic Copay: \$0
Non-duals: income ≤ 135% FPL AND lower asset levels	Single: \$21,101/\$21,341* Couple: \$28,431/\$28,671*	Single: \$1,758/\$1,778* Couple: \$2,369/\$2,389*	Single: \$8,400 /\$9,900** Couple: \$12,600/\$15,600**	No, if receiving SSI; otherwise, yes	No	No	Copay: \$3.95 generic/\$9.85 brand Catastrophic Copay: \$0

Partial Low-Income Subsidy (LIS)/Extra Help (2022) - HAWAII

Beneficiary Group	Income Eligibility Requirement	Monthly Income Eligibility Requirement	Asset Eligibility Requirement	Need to apply for LIS?	Monthly Premium	Annual Deductible	Monthly Income Eligibility Requirement*
Non duals with income ≤ 135% FPL AND assets between lower and higher limits	Single: \$21,101/\$21,341* Couple: \$28,431/\$28,671*	Single: \$1,758/\$1,778* Couple: \$2,369/\$2,389*	Single: between \$8,400/\$9,900 - \$14,010/\$15,510** Couple: between \$12,600/\$15,600-\$27,950/\$30,950**	Yes	No	\$99	Coinsurance: 15% Catastrophic Copay: \$3.95 generic/\$9.85 brand
Non duals with income between 135-150% FPL	Single: \$23,445/\$23,685* Couple: \$31,590/\$31,830*	Single: \$1,954/\$1,974* Couple: \$2,633/\$2,653*	Single: \$14,010/\$15,510** Couple: \$27,950/\$30,950**	Yes	Yes, Sliding scale	\$99	Coinsurance: 15% Catastrophic Copay: \$3.95 generic/\$9.85 brand

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** Asset limits include amount without/with \$1,500/person burial allowance.

Income Levels Source: <https://aspe.hhs.gov/poverty-guidelines>

Asset/Resource Levels: <https://www.cms.gov/files/document/lis-memo.pdf>

Part D Cost-Sharing Source: <https://www.cms.gov/files/document/2022-announcement.pdf>