

Full Low-Income Subsidy (LIS)/Extra Help (2021) - 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	<i>Copay: \$1.30 generic /\$4.00 brand 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	<i>Copay: \$3.70 generic/\$9.20 brand Catastrophic Copay: \$0</i>
Non-duals: income ≤ 135% FPL <u>AND</u> lower asset levels	Single: \$17,388/\$17,628* Couple: \$23,517/\$23,757*	Single: \$1,449/\$1,469* Couple: \$1,960/\$1,980*	Single: \$7,970 /\$9,470** Couple: \$11,960/\$14,960**	No, if receiving SSI; otherwise, yes	No	No	<i>Copay: \$3.70 generic/\$9.20 brand Catastrophic Copay: \$0</i>

Partial Low-Income Subsidy (LIS)/Extra Help (2021) - 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: \$17,388/\$17,628* Couple: \$23,517/\$23,757*	Single: \$1,449/\$1,469* Couple: \$1,960/\$1,980*	Single: between \$7,970/\$9,470 - \$13,290/\$14,790** Couple: between \$11,960/\$14,960 - \$26,520/\$29,520**	Yes	No	\$92	<i>Coinsurance: 15% Catastrophic Copay: \$3.70 generic/\$9.20 brand</i>
Non duals with income between 135-150% FPL	Single: \$19,320/\$19,560* Couple: \$26,130/\$26,370*	Single: \$1,610/\$1,630* Couple: \$2,178/\$2,198*	Single: \$13,290/\$14,790** Couple: \$26,520/\$29,520**	Yes	Yes, Sliding scale	\$92	<i>Coinsurance: 15% Catastrophic Copay: \$3.70 generic/\$9.20 brand</i>

* 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/2021-lis-resource-limits-memo.pdf>

Part D Cost-Sharing Source: <https://www.cms.gov/files/document/2021-announcement.pdf>

Full Low-Income Subsidy (LIS)/Extra Help (2021) - 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	<i>Copay: \$1.30 generic /\$4.00 brand 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	<i>Copay: \$3.70 generic/\$9.20 brand Catastrophic Copay: \$0</i>
Non-duals: income ≤ 135% FPL <u>AND</u> lower asset levels	Single: \$21,722/\$21,962* Couple: \$29,390/\$29,630*	Single: \$1,810/\$1,830* Couple: \$2,449/\$2,469*	Single: \$7,970 /\$9,470** Couple: \$11,960/\$14,960**	No, if receiving SSI; otherwise, yes	No	No	<i>Copay: \$3.70 generic/\$9.20 brand Catastrophic Copay: \$0</i>

Partial Low-Income Subsidy (LIS)/Extra Help (2021) - 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: \$21,722/\$21,962* Couple: \$29,390/\$29,630*	Single: \$1,810/\$1,830* Couple: \$2,449/\$2,469*	Single: between \$7,970/\$9,470 - \$13,290/\$14,790** Couple: between \$11,960/\$14,960 - \$26,520/\$29,520**	Yes	No	\$92	<i>Coinsurance: 15% Catastrophic Copay: \$3.70 generic/\$9.20 brand</i>
Non duals with income between 135-150% PL	Single: \$24,135/\$24,375* Couple: \$32,655/\$32,895*	Single: \$2,011/\$2,031* Couple: \$2,721/\$2,741*	Single: \$13,290/\$14,790** Couple: \$26,520/\$29,520**	Yes	Yes, Sliding scale	\$92	<i>Coinsurance: 15% Catastrophic Copay: \$3.70 generic/\$9.20 brand</i>

* 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/2021-lis-resource-limits-memo.pdf>

Part D Cost-Sharing Source: <https://www.cms.gov/files/document/2021-announcement.pdf>

Full Low-Income Subsidy (LIS)/Extra Help (2021) - 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: \$1.30 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: \$3.70 generic/\$9.20 brand Catastrophic Copay: \$0
Non-duals: income ≤ 135% FPL <u>AND</u> lower asset levels	Single: \$20,007/\$20,247* Couple: \$27,054/\$27,294*	Single: \$1,667/\$1,687* Couple: \$2,255/\$2,275*	Single: \$7,970 /\$9,470** Couple: \$11,960/\$14,960**	No, if receiving SSI; otherwise, yes	No	No	Copay: \$3.70 generic/\$9.20 brand Catastrophic Copay: \$0

Partial Low-Income Subsidy (LIS)/Extra Help (2021) - 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 <u>AND</u> assets between lower and higher limits	Single: \$20,007/\$20,247* Couple: \$27,054/\$27,294*	Single: \$1,667/\$1,687* Couple: \$2,255/\$2,275*	Single: between \$7,970/\$9,470 - \$13,290/\$14,790** Couple: between \$11,960/\$14,960 - \$26,520/\$29,520**	Yes	No	\$92	Coinsurance: 15% Catastrophic Copay: \$3.70 generic/\$9.20 brand
Non duals with income between 135-150% FPL	Single: \$22,230/\$22,470* Couple: \$30,060/\$30,300*	Single: \$1,853/\$1,873* Couple: \$2,505/\$2,525*	Single: \$13,290/\$14,790** Couple: \$26,520/\$29,520**	Yes	Yes, Sliding scale	\$92	Coinsurance: 15% Catastrophic Copay: \$3.70 generic/\$9.20 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/2021-lis-resource-limits-memo.pdf>

Part D Cost-Sharing Source: <https://www.cms.gov/files/document/2021-announcement.pdf>