

Programs to Help Save Medicare Beneficiaries Money

Medicare Cost Sharing Presentation



PRESENTED BY DELAWARE COUNTY PA MEDI MEDICARE PROGRAM



pennsylvania

Medicare Education and Decision Insight



County of Delaware Services for the Aging



SCS PA MEDI Program is funded in part through the Administration for Community Living under contract with Delaware County Office of Services for the Aging

Extra Help Program/Low Income Subsidy (LIS)



- Helps Medicare Beneficiaries dramatically lower their prescription drug costs.
- You may be eligible for assistance if:
 - Have a Limited Income and Resources
 - Receive Medicare Savings Program (MSP) Assistance for Medicare Part B Premium
 - Have a Community Health Choices HMO Medicaid Insurance Plan (Formerly known as Medicaid or the ACCESS Card)

Income Guidelines for Extra Help Program



Full Benefits

Single

Income - (\$1,699/monthly) or less in Income \$20,388/yearly

Resources - \$9,900 or less in Resources

Couple

Income - (\$2,289/monthly) or less in Income \$27,468/yearly

Resources - \$15,600 or less in Resources

How Does Full Extra Help Assist with Part D Costs



Persons with Full Low Income Subsidy:

- Have No Monthly Premium
- Have No Annual Deductible and No Doughnut Hole
- Pay low co-pays (**\$1.35/\$4.00 or \$3.95/\$9.85**) on prescriptions; depending on income and on whether drug is generic or brand name
- Have No Co-pays for the rest of the year once you reach **\$7,050** in total out of pocket costs

Income Guidelines for Extra Help Program



Partial Benefits

Single

Income - (\$1,529/monthly) or less in Income \$18,348/yearly

Resources - \$15,510 or less in Resources

Couple

Income - (\$2,060/monthly) or less in Income \$24,720/yearly

Resources - \$30,950 or less in Resources

How Does Partial Extra Help Assist with Part D Costs



If you are awarded a Partial Subsidy:

- Get help paying **Part D** Plan Premiums (On a Sliding Scale depending on your income)
- Have your Annual Deductible reduced from **\$480 to \$99**
- Have **No** Doughnut Hole
- Pay **15% co-pays** for all drugs until out-of-pocket costs reach **\$7,050** and then you pay small co-pay **\$3.95** for **Generics/\$9.85** for **Brand Name** for the rest of the year

Income Counted



- Wages
- Interest
- Dividends
- Social Security
- Veteran's Benefits
- Pensions
- Spouse's income if living with him/her

Income Not Counted



- Supplemental Nutrition Assistance Program (SNAP)
- Temporary Assistance for Needy Families (TANF)
- Low Income Home Energy Assistance Program (LIHEAP)
- Certain housing and utility subsidies
- Foster Care Payments
- Weatherization Payments

Resources Counted



- Bank Accounts, including Checking, Savings and Certificates of Deposit
- Stocks and Bonds
- Some trust funds
- Life Insurance
- Vehicles
- Revocable Burial Funds
- Non-Resident Property
- Cash at home or anywhere else

Resources Not Counted



- Primary Residence
- One Vehicle
- Burial Reserves subject to specified limits

Additional Special Benefits



- A Continuous **Quarterly Special Enrollment Period** to join or switch a Medicare Part D drug plan any time of year. People who get Extra Help do not need to wait for the Annual Medicare **Open Enrollment Period (Oct. 15 – Dec. 7)** to change plans. Any plan changes will become valid for the following month.
- No Part D late enrollment **penalty**, even if the beneficiary enrolls late (that is, after they were first eligible to join a Part D plan and if they did not have other drug coverage).

How to Apply for Extra Help



- To apply get assistance from the DELCO PA MEDI Medicare Program
- Apply online at www.ssa.gov
- Apply by calling the Extra Help Application Call Center at 1-800-866-1807
- Complete a paper application

Medicare Savings/Medicare Buy In Programs



- Medicare Savings Program with payment of the Medicare Part B Premium
- The State pays the Part B Premium each month at **\$170.10** for the year 2022.
- You can apply if you are eligible for Medicare A & B or have a Community Health Choice HMO Insurance Plan (Medicaid).
- Have Income and Assets as indicated below:

PROGRAM	MONTHLY INCOME	ASSETS	
Medicare Saving Program			
QMB	\$1,133 - Single \$1,526 - Couple	\$8,400 - Single \$12,600 - Couple	Pays Part A & B, Copays, and Deductibles
SLMB	\$1,359 - Single \$1,831 - Couple	\$8,400 - Single \$12,600 - Couple	Pays Part B only
QI-1	\$1,529 - Single \$2,060 - Couple	\$8,400 - Single \$12,600 - Couple	Pays Part B only

Applying for Medicare Savings Programs



- To apply get assistance from the DELCO PA MEDI Medicare Program Office
- Complete a paper application
- Apply Online through PA Department of Human Services or the COMPASS Website
 - www.compass.state.pa.us (Medicare Saving Program only)
- Apply Online through PA Social Security Department
 - www.ssa.gov (Extra Help & Medicare Savings Programs)

PACE/PACENET



To be eligible for PACE/PACENET

- **65** years of age or older
- Resident of Pennsylvania for at least **90** days
- **Not** receiving prescription benefits under Medical Assistance
- Meet the **Prior Year** Income Guidelines

PACE



Single Person

Previous years income below **\$1,208** (\$14,500/yr.)

Married Couple

Previous years income below **\$1,475** (\$17,700/yr.)

Cost of Prescriptions

- ✦ **\$6** co-pay for Generic Medications - (30-Day Supply)
- ✦ **\$9** co-pay for name Brand Medications- (30-Day Supply)
- ✦ Can get a 90- day supply with PACE & Part D Medicare Plan
- ✦ * **90-day supply contingent upon PDP offering 90-day Supply Benefit**
- ✦ **Assets are not counted**

PACENET



Single Person

Previous years income below **\$2,791** (\$33,500/yr.)

Married Couple

Previous years income below **\$3,458** (\$41,500/yr.)

Cost of Prescriptions

- ✦ **\$40.74** Monthly Deductible
- ✦ **\$8** co-pay for Generic Medications- (30-Day Supply)
- ✦ **\$15** co-pay for Brand Name Medications- (30-Day Supply)
- ✦ Can get a 90- day supply with PACE & Part D Medicare Plan
- ✦ * 90-day supply contingent upon PDP offering 90-day Supply Benefit
- ✦ **Assets are not counted**

How To Apply for PACE/PACE NET



- The **DELCO PA MEDI Medicare** Program Office can help
- **Phone:** 1 800 225-7223
- Complete **Paper Copy** Application
- **Email:** papace@magellanhealth.com
- **Apply Online:**
<https://pacecares.magellanhealth.com/>
- **Mail to:** PACE/PACE NET
PO Box 8806 Harrisburg, PA. 17105-8806
- **Fax:** 1 888 656-0372

Contact



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