

## Full Low-Income Subsidy (LIS)/Extra Help (2023) - 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: \$1.45 generic /\$4.30 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: \$4.15 generic/\$10.35 brand <i>Catastrophic Copay: \$0</i>
Non-duals: income ≤ 135% FPL <u>AND</u> lower asset levels	Single: \$19,683/\$19,923* Couple: \$26,622/\$26,862*	Single: \$1,640/\$1660* Couple: \$2,219/\$2,239*	Single: \$9,090 /\$10,590** Couple: \$13,630/\$16,630**	No, if receiving SSI; otherwise, yes	No	No	Copay: \$4.15 generic/\$10.35 brand <i>Catastrophic Copay: \$0</i>

## Partial Low-Income Subsidy (LIS)/Extra Help (2023) - 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: \$19,683/\$19,923* Couple: \$26,622/\$26,862*	Single: \$1,640/\$1660* Couple: \$2,219/\$2,239*	Single: between \$9,090 /\$10,590-\$15,160/\$16,660** Couple: between \$13,630/\$16,630-\$30,240/\$33,240**	Yes	No	\$104	Coinsurance: 15% <i>Catastrophic Copay: \$4.15 generic/\$10.35 brand</i>
Non duals with income between 135-150% FPL	Single: \$21,870/\$22,110* Couple: \$29,580/\$29,820*	Single: \$1,823/\$1,843* Couple: \$2,465/\$2,485*	Single: \$15,160/\$16,660** Couple: \$30,240/\$33,240**	Yes	Yes, <a href="#">Sliding scale</a>	\$104	Coinsurance: 15% <i>Catastrophic Copay: \$4.15 generic/\$10.35 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/lis-memo.pdf>

**Part D Cost-Sharing Source:** <https://www.cms.gov/files/document/2023-announcement.pdf>

### Full Low-Income Subsidy (LIS)/Extra Help (2023) - 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: \$1.45 generic /\$4.30 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: \$4.15 generic/\$10.35 brand Catastrophic Copay: \$0</i>
Non-duals: income ≤ 135% FPL <u>AND</u> lower asset levels	Single: \$24,584/\$24,824* Couple: \$33,264/\$33,504*	Single: \$2,049/\$2,069* Couple: \$2,772/\$2,792*	Single: \$9,090 /\$10,590** Couple: \$13,630/\$16,630**	No, if receiving SSI; otherwise, yes	No	No	<i>Copay: \$4.15 generic/\$10.35 brand Catastrophic Copay: \$0</i>

### Partial Low-Income Subsidy (LIS)/Extra Help (2023) - 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: \$24,584/\$24,824* Couple: \$33,264/\$33,504*	Single: \$2,049/\$2,069* Couple: \$2,772/\$2,792*	Single: between \$9,090 /\$10,590- \$15,160/\$16,660** Couple: between \$13,630/\$16,630- \$30,240/\$33,240**	Yes	No	\$104	<i>Coinsurance: 15% Catastrophic Copay: \$4.15 generic/\$10.35 brand</i>
Non duals with income between 135-150% PL	Single: \$27,315/\$27,555* Couple: \$36,960/\$37,200*	Single: \$2,276/\$2,296* Couple: \$3,080/\$3,100*	Single: \$15,160/\$16,660** Couple: \$30,240/\$33,240**	Yes	Yes, <a href="#">Sliding scale</a>	\$104	<i>Coinsurance: 15% Catastrophic Copay: \$4.15 generic/\$10.35 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/lis-memo.pdf>

**Part D Cost-Sharing Source:** <https://www.cms.gov/files/document/2023-announcement.pdf>

## Full Low-Income Subsidy (LIS)/Extra Help (2023) - 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: \$1.45 generic /\$4.30 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: \$4.15 generic/\$10.35 brand Catastrophic Copay: \$0
Non-duals: income ≤ 135% FPL AND lower asset levels	Single: \$22,640/\$22,880* Couple: \$30,618/\$30,858*	Single: \$1,887/\$1,907* Couple: \$2,552/\$2,572*	Single: \$9,090 /\$10,590** Couple: \$13,630/\$16,630**	No, if receiving SSI; otherwise, yes	No	No	Copay: \$4.15 generic/\$10.35 brand Catastrophic Copay: \$0

## Partial Low-Income Subsidy (LIS)/Extra Help (2023) - 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: \$22,640/\$22,880* Couple: \$30,618/\$30,858*	Single: \$1,887/\$1,907* Couple: \$2,552/\$2,572*	Single: between \$9,090 /\$10,590-\$15,160/\$16,660** Couple: between \$13,630/\$16,630-\$30,240/\$33,240**	Yes	No	\$104	Coinsurance: 15% Catastrophic Copay: \$4.15 generic/\$10.35 brand
Non duals with income between 135-150% FPL	Single: \$25,155/\$25,395* Couple: \$34,020/\$34,260*	Single: \$2,096/\$2,116* Couple: \$2,835/\$2,855*	Single: \$15,160/\$16,660** Couple: \$30,240/\$33,240**	Yes	Yes, <a href="#">Sliding scale</a>	\$104	Coinsurance: 15% Catastrophic Copay: \$4.15 generic/\$10.35 brand

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\* 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/2023-announcement.pdf>