

**2007 LOW INCOME SUBSIDY GROUPS AND COSTS**

	<b><u>Group 1</u></b>	<b><u>Group 2</u></b>	<b><u>Group 3</u></b>	<b><u>Group 4</u></b>
<b>Group getting help with Prescription Drug Program Costs</b>	<b>Dual-Eligibles</b>	<b>Medicare Savings Program (QMB, SLMB, QI)</b>  <b>SSI Recipients without Medicaid</b>	<b>Income No Greater than 135% of the Federal Poverty Line (FPL*)</b>	<b>Income No Greater than 150% of the Federal Poverty Line (FPL*)</b>
<b>Maximum Monthly Income to Qualify for Full Medicaid</b>	Income ≤ 100% FPL  Single: ≤ \$817 Married: ≤ \$1,100	Income ≤ 135% FPL  Single: < \$1,103 Married: < \$1,485	Income ≤ 135% FPL  Single: < \$1,103 Married: < \$1,485	Income ≤ 150% FPL  Single: < \$1,225 Married: < \$1,650
<b>Maximum Resources to Qualify for Full Medicaid</b>	Single: ≤ \$2,000 Married: ≤ \$4,000	Single: ≤ \$4,000 Married: ≤ \$6,000	Single: < \$6,000 Married: < \$9,000	Single: ≤ \$10,000 Married: ≤ \$20,000
<b>Monthly Premium</b>	\$0	\$0	\$0	Sliding Scale Monthly Premium based on Income
<b>Annual Deductible</b>	\$0	\$0	\$0	\$53
<b>Co-Pays Until Out-of-Pocket Costs (including the Extra Help) Total \$3,850<sup>1</sup></b>	\$1/generic or preferred brand drug  \$3.10/prescription for all other drugs	\$2.15/generic or preferred brand drug  \$5.35/prescription for all other drugs	\$2.15/generic or preferred brand drug  \$5.35/prescription for all other drugs	15% coinsurance for each prescription drug
<b>Catastrophic Benefit – After Out-of-Pocket Costs (including the Extra Help) Total \$3,850<sup>1</sup></b>	\$0	\$0	\$0	\$2.15/generic or preferred multi-brand drug  \$5.35/prescription for all other drugs

**Table Notes**

FPL = Federal Poverty Line. In 2006, 100% of the FPL is \$9,800 for an individual (or \$817 per month) and \$13,200 for a married couple (or \$1,100 per month) in the 48 contiguous states and the District of Columbia.

<sup>1</sup>Total out-of-pocket drug costs include amounts paid by the extra help (or low-income subsidy) and true out-of-pocket (TrOOP) costs paid by the beneficiary. TrOOP costs include amounts paid by beneficiary, friends, relatives, certain charities, qualified State Pharmacy Assistance Programs (SPAPs), and the low-income subsidy toward the annual plan deductible, co-payments or co-insurance amounts. Catastrophic coverage begins once the beneficiary's TrOOP reaches \$3,850 on drugs covered by the Medicare drug plan.