

Save Money On Medicare Costs and Medicine



If you are 65 and older
OR
Under 65 and have been
receiving Social Security
Disability Income for 24 months,
You may qualify for assistance
with your Medicare Part B
premium cost & Part D
medication cost.

Call Senior Health Insurance
Information Program (SHIIP)

1-800-224-6330

EXTRA HELP PAYS 75%

OR MORE

- Prescription Medicine
- Monthly Drug Insurance Premium
- Medicine in the Coverage Gap or Donut Hole

MEDICARE SAVINGS

PROGRAM PAYS

- Part B Premium
- 20% Coinsurance for Part B
- Part A Deductible
- Part B Deductible



LOCAL HELP FOR PEOPLE WITH MEDICARE



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VISIT:

Medicare Savings Program

www.access.arkansas.gov

Extra Help

www.ssa.gov/medicare/prescriptionhelp



Call Senior Health Insurance
Information Program (SHIIP)

1-800-224-6330

ARKANSAS

Medicare Savings Programs for Medicare Premiums, Deductibles & Coinsurance

*Administered through the Dept. of Human Services

QI-1

QUALIFIED INDIVIDUAL (QI-1)

MONTHLY INCOME:	Individual= not more than	\$ 1,435.50
	Couple= not more than	\$ 1,939.50
ASSET LIMIT:	Individual= not more than	\$ 7,860.00
	Couple= not more than	\$11,800.00

SMB

SPECIFIED LOW INCOME MEDICARE BENEFICIARY (SLMB)

MONTHLY INCOME:	Individual= not more than	\$ 1,276.00
	Couple= not more than	\$ 1,724.00
ASSET LIMIT:	Individual= not more than	\$ 7,860.00
	Couple= not more than	\$11,800.00

QMB

QUALIFIED MEDICARE BENEFICIARY

MONTHLY INCOME:	Individual= not more than	\$ 1,063.33
	Couple= not more than	\$ 1,436.67
ASSET LIMIT:	Individual= not more than	\$ 7,860.00
	Couple= not more than	\$ 11,800.00

AR Seniors

AR SENIORS must be 65 & older

MONTHLY INCOME:	Individual= not more than	\$ 850.67
	Couple= not more than	\$ 1,149.33
ASSET LIMIT:	Individual= not more than	\$ 7,860.00
	Couple= not more than	\$11,800.00

Primary Home and Primary Vehicle do not count as assets.

	Full Medicaid Benefits	Part B Late Enrollment Penalty	Part B Premium	Part B Coinsurance	Part A & B Deductible	Part A Copayments
QI-1 & SMB		X	X			
QMB		X	X	X	X	X
AR Seniors	X	X	X	X	X	X

Federal Program

Extra Help

with Prescription Medication & Part D Costs

Dual Eligible

DUAL ELIGIBLE = RECEIVING MEDICARE AND QMB

MONTHLY INCOME:	Individual= not more than	\$ 1,063.33
	Couple= not more than	\$ 1,436.67
ASSET LIMIT:	Individual= not more than	\$ 9,360.00
	Couple= not more than	\$14,800.00

Full Extra

FULL EXTRA HELP

MONTHLY INCOME:	Individual= not more than	\$ 1,435.50
	Couple= not more than	\$ 1,939.50
ASSET LIMIT:	Individual= not more than	\$ 9,360.00
	Couple= not more than	\$14,800.00

Partial Extra Help

PARTIAL EXTRA HELP

MONTHLY INCOME:	Individual= not more than	\$ 1,595.00
	Couple= not more than	\$ 2,155.00
ASSET LIMIT:	Individual= not more than	\$14,610.00
	Couple= not more than	\$29,160.00

Primary Home and Primary Vehicle do not count as assets.

	Part D Late Enrollment Penalty	Part D Monthly Premium	Part D Deductible	Part D Copayment
Dual Eligible	X	X	X	Patient pays \$1.30 up to \$3.90
Full Extra Help	X	X	X	Patient pays \$3.60 up to \$8.95
PARTIAL Extra Help	X	15%	\$89	Coinsurance based on subsidy level