

If you're 60 or over, call your local legal aid office:

Eastern CT	800-413-7796	Western CT	800-413-7797
Hartford Area	860-541-5000	Bridgeport Area	800-809-4434
Stamford Area	800-541-8909	New Haven Area	203-946-4811

If you're under 60, call SLS for help:



Statewide Legal Services
1-800-453-3320
860-344-0380

Search our website for help:



www.ctlawhelp.org

ELDER

LEGAL SERVICES

SELF-HELP SERIES

Medicare Savings Programs Can Help Pay Some of Your Medicare Costs

March 2018



We offer free legal help in many areas, including

- welfare,
- SNAP (food stamps),
- divorce,
- child support,
- domestic violence,
- bankruptcy,
- special education,
- nursing home care,
- health insurance,
- eviction,
- foreclosure,
- and more.

See the reverse side for more about legal services.

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Search our website for help:



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If you're over 60, call your local legal aid office.

Connecticut Legal Services

www.ctlegal.org

Bridgeport

1000 Lafayette Blvd Suite 950 203-336-3851

New Britain

16 Main Street 860-225-8678

New London

125 Eugene O'Neill Dr. Suite 120 860-447-0323

Stamford

20 Summer Street 203-348-9216

Waterbury

85 Central Avenue 203-756-8074

Willimantic

1125 Main Street 860-456-1761

Greater Hartford Legal Aid

www.ghla.org

999 Asylum Avenue
Hartford, CT 06105
860-541-5000

New Haven Legal Assistance Association

www.nhlegal.org

205 Orange Street
New Haven, CT 06510
203-946-4811

Consumer Law Project for Elders

Free legal assistance to people 60 and over throughout Connecticut who have money/debt problems.

1-800-296-1467

Medicare Savings Programs

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This booklet was produced by Connecticut Legal Services, Greater Hartford Legal Aid, New Haven Legal Assistance Association, and Statewide Legal Services of Connecticut. The information in this booklet is based on laws in Connecticut as of 3/2018. We hope that the information is helpful. It is not intended as legal advice. For advice on your situation, call Statewide Legal Services or contact a lawyer.

Funds for this service were provided in part by the Area Agency on Aging with Title III funds under the Older Americans Act.

Enrolling

For more information or assistance:

Elder Law Services in Connecticut www.ctelderlaw.org	
Eastern Connecticut Connecticut Legal Services, Inc. 872 Main Street Willimantic, CT 06226 (860) 456-1761 or 1-800-413-7796	Southwestern Connecticut Connecticut Legal Services, Inc. 211 State Street Bridgeport, CT 06604 (203) 336-3851 or 1-800-809-4434
Western Connecticut Connecticut Legal Services, Inc. 85 Central Avenue Waterbury, CT 06702 (203) 756-8074 or 1-800-413-7797	Connecticut Legal Services, Inc. 20 Summer Street Stamford, CT 06901 (203) 348-9216 or 1-800-541-8909
North Central Connecticut Greater Hartford Legal Aid, Inc. 999 Asylum Avenue, 3rd Floor Hartford, CT 06105 (860) 541-5000	South Central Connecticut New Haven Legal Assistance Association 426 State Street New Haven, CT 06510 (203) 946-4811

Statewide Legal Services: 860-344-0380 (Central CT & Middletown), 1-800-453-3320 (All other regions)

Consumer Law Project for Elders: 1-800-296-1467

What is Medicare?

Medicare is a national health insurance program. You can enroll in Medicare if you are

- 65 or older and eligible for Social Security retirement benefits,
- disabled and eligible for Social Security disability benefits for at least 24 months,
- eligible for Railroad Retirement or disability benefits, or
- suffering from end-stage renal disease.

For more information about Medicare, call 1-800-Medicare or go to www.medicare.gov.

Medicare has several parts:

- **Part A** covers inpatient hospital care, skilled nursing facility care, hospice care, and some home health services.
- **Part B** covers many of the most frequently used health services, such as doctor visits and diagnostic testing.
- **Part D** helps to pay for for prescriptions.

Medicare Out-of-Pocket Expenses

Medicare Part A

1. Premium

Elderly or disabled people who **do not** qualify for Social Security or Railroad Retirement benefits can get Medicare Part A coverage by paying a monthly premium.

2018 Part A Premium	
Quarters of Social Security Coverage	Part A Premium
29 or fewer quarters	\$422 per month
30 to 39 quarters	\$232 per month
<i>These amounts change every year.</i>	

2. Hospital Deductible and Coinsurance Amounts

People who get Medicare must pay a deductible for every hospital stay. There are additional costs (*coinsurance*) for hospital stays longer than 60 days.

2018 Part A Hospital Deductible and Coinsurance	
Deductible	
	\$1,340
Coinsurance	
Days 61 - 90	\$335 per day
Days 91 - 150	\$670 per day
<i>These amounts change every year.</i>	

3. Skilled Nursing Facility Coinsurance

After a hospital stay, Medicare covers the full cost of nursing facility care for the first 20 days. You must pay for some of the cost of your care (coinsurance) for days 21 to 100.

2018 Part A Nursing Facility Coinsurance	
Days 21 - 100	\$167.50 per day
<i>This amount changes every year.</i>	

If my income changes, can the State get reimbursed for benefits I received in the past?

No, as long as the payments were made *after January 1, 2010*.

What should I do if my application is denied or if my benefits are cut off?

If you are 60 or over, call your local legal aid office (see inside back cover). If you are under 60, call Statewide Legal Services at 1-800-453-3320 or 860-344-0380.

Is there help for prescription drug costs?

YES. If you are enrolled in one of the Medicare Savings programs, you are automatically enrolled in the Part D Low Income Subsidy, also known as *Extra Help*. This program cuts Medicare Part D costs dramatically. In 2018, it

- pays Part D premiums up to \$35.58/month,
- provides coverage during the Deductible and Donut Hole periods, and
- limits your Part D co-pays to a maximum of \$3.35 for generic drugs and \$8.35 for brand name drugs.

How to Apply for Medicare Savings Program

All three programs are administered by the Connecticut Department of Social Services (DSS). To apply, complete a short application form. Call CHOICES at 1-800-994-9422, visit your local DSS office, or go to <http://portal.ct.gov/dss> for an application.

QMB, SLMB and ALMB benefits usually start the month after you apply. In certain cases, SLMB and ALMB benefits are granted up to 3 months **before** you apply. This means you could get back up to 3 months' worth of all or some of the premiums that you paid out before you applied.

If I'm eligible for the QMB program, do I need Medigap insurance?

If you get Medicare and you are enrolled in an Original Medicare Program (fee for service), you can purchase a Medicare Supplemental Insurance (Medigap) policy to help pay some of the health care costs that Medicare does not cover.

The QMB program offers most of the benefits of Medigap policies **if you visit medical providers who accept both Medicare and Medicaid**. Before you cancel your Medigap insurance, make sure your medical providers accept both Medicare and Medicaid. If your QMB coverage ends, you may be able to reinstate your former Medigap policy.

Important Note: SLMB and ALMB programs do not offer the benefits of Medigap insurance. If you are enrolled in the Original Medicare Program, you should not cancel your Medigap policy when you enroll in the SLMB or ALMB programs.

Medicare Part B

1. Premium

Usually, the monthly Part B premium is taken out of your Social Security check.

2018 Part B Premium

\$134.00 per month

*Note: If your income is more than \$85,000 (single) or \$170,000 (married), your Part B premium may be higher.

**If a beneficiary is covered by hold harmless, on average they will pay \$109.00.

This amount changes every year.

2. Deductible

The Part B deductible is the amount you must pay before Medicare will begin to cover your health care expenses.

2018 Part B Deductible

\$183.00 per year

This amount changes every year.

3. Coinsurance

Medicare Part B pays for only some of the cost of doctors' services, outpatient care, ambulance transportation, and some medical supplies and equipment. You must pay a *coinsurance* (a portion of the cost of your care) of 20% of the cost of these services.

2018 Part B Coinsurance

20% of the cost of services.

Medicare Part D

Prescription costs:

Medicare Part D helps pay for prescription drugs. Fees may include monthly premiums, deductibles, and copays.

Programs that Help Pay for Out-of-Pocket Costs

Three programs can provide payment help to low-income Medicare recipients who are elderly or disabled:

- Qualified Medicare Beneficiary (QMB) program
- Specified Low Income Medicare Beneficiary (SLMB) program
- Additional Low Income Medicare Beneficiary (ALMB) program

The Qualified Medicare Beneficiary (QMB) Program

The Qualified Medicare Beneficiary (QMB) program fills the gaps in Medicare coverage for low income people by eliminating out-of-pocket expenses for services covered by Medicare. If you use providers who accept Medicaid, the following expenses are covered:

- the Medicare Part A monthly premium (unless the person qualifies for free Part A);
- Hospital deductible and coinsurance amounts;
- Medicare Part A Skilled Nursing Facility coinsurance;
- Medicare Part B premium;
- Medicare Part B deductible; and
- Medicare Part B coinsurance.

The numbers in this booklet are in effect only until 6/30/2018. There could be significant changes after that. Please check with your local Area Agency on Aging for more information.

The Specified Low Income Medicare Beneficiary (SLMB) Program and Additional Low Income Medicare Beneficiary (ALMB) Program

The SLMB and ALMB programs pay the monthly Medicare Part B premium. Usually, the monthly Part B premium is taken out of your Social Security check. If you are enrolled in the SLMB or ALMB program, this deduction will stop and your Social Security check will be larger.

Important Note about ALMB: You should apply each year for the ALMB program – as soon after January 1 as possible. ALMB benefits are granted each year on a first-come, first-served basis. Funding for the ALMB program is limited. Once the funding runs out, applications to the program are not accepted.

Who is eligible for these programs?

If you get Medicare, you are eligible for these programs if **all** of the following criteria are met:

- 1. You are a citizen or legal resident of the United States and of Connecticut.**
- 2. You are enrolled (or eligible to enroll) in Medicare Part A.**

To be eligible to enroll, you must be a citizen of the U.S. or a permanent legal resident for at least 5 years, **and** you must be at least 65 years old or disabled.
- 3. You must have limited income.**

Here are the income limits for each program:

Monthly Income Limits for 2018		
Program	Single	Couple
QMB	\$2,135.32	\$2,894.92
SLMB	\$2,337.72	\$3,169.32
ALMB	\$2,489.52	\$3,375.12

Note: The Part B premium taken from your Social Security check counts as income.