



Benefits Quick Guide effective March 2015

CHOICES 1 (800) 994-9422

Medicare Part A 2015 Premium, Deductibles & Co-pays			2015 Medicare Part B Premiums & Deductibles	
Part A Premium	(30-39 quarters) (< 30 quarters)	\$224 per month \$407 per month	PART B Standard Premium	\$104.90 per month
Hospital Deductible	(per benefit period deductible)	\$1,260	For those with annual incomes:	
Hospital Co-Pays	Days 61-90 Days 91-150	\$315 per day \$630 per day	\$85,001-\$107,000 (single) or \$170,001-\$214,000 (married)	\$146.90 per month
			\$107,001-\$160,000 (single) or \$214,001 - \$320,000 (married)	\$209.80 per month
			For those over these amounts...	Visit www.ssa.gov
Skilled Nursing facility Co-Pay	Days 21-100	\$ 157.50 per day	Part B Deductible	\$147 per year

Medicare Savings Program (MSP) (rev. 3/15)					
Program	Status	Income Limit	Status	Income Limit	
QMB (Q01)	Single	\$2,069.91 / mo	Couple	\$2,802.08 / mo	NO ASSET LIMITS FOR MSP
SLMB (Q03)	Single	\$2,266.11 / mo	Couple	\$3067.68 / mo	No Estate Recovery after 1/1/10
ALMB (Q04)	Single	\$2,413.26/mo	Couple	\$3,266.88 / mo	DSS Benefits Line: 1-855-626-6632
Medicaid (Husky C) (includes standard disregard; \$337/single & \$404.90/couple)	Single	\$970.49 (region A) \$860.38 (reg. B & C)	Couple	\$1209.99 (reg. A) \$1101.31(reg. B & C)	Husky C disregard effective 1/15

If you qualify for MSP, you will automatically qualify for Extra Help and the lower co-pays for Part D

Medicare Part D Low Income Subsidy (LIS) for 2015			Medicaid Expanded Benefits (3/15)		Contingency Heating Assistance Program (CHAP) 2015
LIS CO-PAYS FOR MEDICATIONS: \$2.65 - FORMULARY GENERIC DRUGS \$6.60 - FORMULARY BRAND NAME DRUGS			Household size	MAGI Monthly Income	Household size
Medicaid recipients: \$1.20/\$3.60 - Max \$15 per month Medicaid Waiver – no co-pays LIS Benchmark Premium – \$29.65			1 person	\$1353.78	Household's Annual Income
Max Income/Assets for Partial Subsidy			Couple	\$1832.64	1 person
LIS Single	\$1,471.25 per month	Assets under \$13,640	No asset restrictions Age 18-64 without Medicare No spend down Apply at www.accesshealthct.com		2 people
LIS Couples	\$1,991.25 per month	Assets under \$27,250	Supplemental Nutrition Assistance Program (SNAP) (eff. Oct 2014) Single person 185% FPL gross income - \$1800/ mo (max benefit \$194) Couple 185% FPL income - \$2,425 / mo (max benefit \$357)		3 people
CT residents should consider applying for LIS through MSP which has no asset restrictions and higher income limits.			There is no asset limit EXCEPT for members who are 60 years old or a person with a disability whose gross income is more than 185% of the Federal Poverty Level. (asset limit over 185%: \$3,250)		4 people
					5 people
					Liquid Asset Limit: Homeowners \$10,000; Renters \$7000
					CT Health Insurance Exchange Access Health CT Benefits Center- 1-855-805-4325 www.accesshealthct.com
					Next Open enrollment Nov 1 2015 – Jan 31 2016

CT Energy Assistance Program (CEAP) 9/14				
Household Size	Household Income	* Household Income w/60+	* Higher Income limits for:	
1 person	\$17,505	\$23,340	Households with a member age 60+ or a household member with a disability.	
2 people	\$23,595	\$31,460	Asset Limits apply :	
3 people	\$29,685	\$39,580	Homeowners - \$10,000	
4 people	\$35,775	\$47,700	Renters – \$7,000	
5 people	\$41,865	\$55,820	www.ct.gov/staywarm	
6 people	\$47,955	\$63,940	First date of delivery: 11/12/14	
			Households with liquid assets that exceed these amounts may qualify if gross income, when added to excess liquid assets, is within guidelines	

CT Home Care Program for Elders (CHCPE)	Functional Criteria	Income Guidelines	Asset Guidelines
State Funded - Level 1	One critical need	No income ceiling	Individual:\$35,766 Couple:\$47,688
State Funded - Level 2	3 or more critical needs	No income ceiling	Individual:\$35,766 Couple:\$47,688
Medicaid Waiver – Level 3 (updated 1/1/15)	3 or more critical needs	\$2,199/month Only the individual's income is counted toward eligibility	Individual -\$1600 Couple - \$3200 (both receiving services) \$25,444.00 (one receiving services) A higher asset amount may be allowed when a spousal assessment is done
Medicaid – Level 5 (3/15)	1 or 2 critical needs	\$1460 month (150% FPL)	Individual: \$1,600
Critical Needs are defined as requiring help or supervision in the following areas: Meal Preparation, Medication Administration, Bathing, Dressing, Toileting, Transferring, Eating or significant cognitive impairments. Call 1-800-445-5394 to make referrals or refer online https://www.ascendami.com/CTHomeCareForElders/default/			

APPLICATION FILING and ENROLLMENT PERIODS:

MEDICARE Parts A & B ENROLLMENT: 3 Types of Enrollment Periods

INITIAL ENROLLMENT- Initial Enrollment Period is 7 months long. Begins three months before the month you turn 65, the month you turn 65 and three months after.

SPECIAL ENROLLMENT PERIOD- Special enrollment periods apply for those who are still working at age 65 and covered by employer coverage or through their spouse's **active** employment. A SEP begins the month after the employee coverage ends or employment ends (whichever comes first) and lasts for eight months.

GENERAL ENROLLMENT PERIOD - First 3 months of every year (January 1 to March 31st) You must enroll during these three months but your Part B coverage **won't begin till July 1st of that year**. There will be a penalty for late enrollment. Individuals on MSP obtain Medicare Part B on the date the State starts paying for the Part B premium. You can request a retroactive buy in of Medicare B as far back as 6 months from the date of application for all 3 levels.

MEDICARE PART D & MEDICARE ADVANTAGE ANNUAL ELECTION PERIOD - October 15th through Dec 7th of every year. Coverage begins Jan. 1st of the following year. Late enrollment penalty applies if you did not enroll during your initial enrollment period and don't qualify for a SEP (MSP recipients are not subject to late enrollment fees).

MEDICARE ADVANTAGE PLAN DISENROLLMENT - January 1 and ends February 14, lasting for 45 days. The Annual Disenrollment period is designed to allow you to do one thing: **Cancel your Medicare Advantage Plan membership and return to original Medicare**. Once you cancel your Medicare Advantage Plan you have a couple of choices.

- Return to original Medicare and purchase a stand-alone Part D Plan.
- Purchase a Medigap policy and a stand-alone Part D Plan.

MEDICARE SAVINGS PROGRAMS - HAVE AN OPEN ENROLLMENT ALL YEAR LONG

MEDIGAP PLANS – CT is a continuous enrollment state. You can enroll in Medigap anytime during the year.

SNAP - Open enrollment all year long **CT Energy Assistance Program (CEAP)** - October 15th - April 15th

RENTER'S REBATE PROGRAM - Apply April 1 – October 1. For renters aged 65+, 50+ of a surviving eligible spouse or 18+ yrs with a permanent disability. 1 year residency. No asset test. Hotline for questions: 860-418-6493

HEALTHCARE MARKETPLACE – Open Enrollment Nov. 15, 2014– February 15, 2015. Must make a decision before Dec 15 for a January 1 effective date.