

Low-Income Subsidy (LIS)/Extra Help (2025) - 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 \leq 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: \$1.60 generic/\$4.80 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: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0
Non duals with income between \leq 150% FPL	Single: \$23,715* Couple: \$31,965*	Single: \$1,976* Couple: \$2,664*	Single: /\$17,600** Couple: /\$35,130**	Yes	No	No	Coinsurance: 0% Copay: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0

* Income amounts reflect threshold with the \$20 monthly income disregard (annually = \$240); income is rounded to the nearest whole dollar.

** Asset limits include amount 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/2024-announcement-pdf.pdf>

Low-Income Subsidy (LIS)/Extra Help (2025) - 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	Copay: \$1.60 generic/\$4.80 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: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0
Non duals with income between ≤ 150% PL	Single: \$29,565* Couple: \$39,885*	Single: \$2,464* Couple: \$3,324*	Single: \$17,600** Couple: \$35,130**	Yes	No	No	Coinsurance: 0% Copay: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0

May * Income amounts reflect threshold /with the \$20 monthly income disregard (annually = \$240); income is rounded to the nearest whole dollar.

** Asset limits include amount /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/2025-announcement.pdf>

Low-Income Subsidy (LIS)/Extra Help (2025) - 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: \$1.60 generic/\$4.80 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: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0
Non duals with income between ≤ 150% FPL	Single: \$27,225* Couple: \$36,720*	Single: \$2,269* Couple: \$3,060*	Single: \$17,600** Couple: \$35,130**	Yes	No	No	Coinsurance: 0% Copay: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0

This resource was supported in part by grant 90MINC0002-03-00 from the U.S. Administration for Community Living, Department of Health and Human Services. Points of view or opinions do not necessarily represent official ACL policy.

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** Asset limits include amount /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/2025-announcement.pdf>