

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: income \leq 135% FPL | Single: \$20,331/\$20,571* Couple: \$27,594/\$27,834* | Single: \$1,695/\$1,714* Couple: \$2,300/\$2,320* | Single: \$16,100/\$17,600** Couple: \$32,130/\$35,130** | No, if receiving SSI; otherwise, yes | No | No | Copay: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0 |
| Non duals with income between 135-150% FPL | Single: \$22,590/\$22,830* Couple: \$30,660/\$30,900* | Single: \$1,883/\$1,903* Couple: \$2,555/\$2,575* | Single: \$16,100/\$17,600** Couple: \$32,130/\$35,130** | Yes | No | No | Coinsurance: 0% Copay: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0 |

* Income amounts reflect threshold without/with the \$20 monthly income disregard (annually = \$240); income is rounded to the nearest whole dollar.

** Asset limits include amount without/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>

Updated March 2025 | ncoa.org

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 \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: income \leq 135% FPL <u>AND</u> lower asset levels | Single: \$24,584/\$24,824* Couple: \$33,264/\$33,504* | Single: \$2,049/\$2,069* Couple: \$2,772/\$2,792* | Single: \$16,100/\$17,600** Couple: \$32,130/\$35,130** | No, if receiving SSI; otherwise, yes | No | No | Copay: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0 |
| Non duals with income between 135-150% PL | Single: \$28,215/\$28,455* Couple: \$38,310/\$38,550* | Single: \$2,351/\$2,371* Couple: \$3,192/\$3,212* | Single: \$16,100/\$17,600** Couple: \$32,130/\$35,130** | Yes | No | No | Coinsurance: 0% Copay: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0 |

* Income amounts reflect threshold without/with the \$20 monthly income disregard (annually = \$240); income is rounded to the nearest whole dollar.

** Asset limits include amount without/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) - 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 \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: income \leq 135% FPL AND lower asset levels | Single: \$22,640/\$22,880* Couple: \$30,618/\$30,858* | Single: \$1,875/\$1,895* Couple: \$2,552/\$2,572* | Single: \$16,100/\$17,600** Couple: \$32,130/\$35,130** | No, if receiving SSI; otherwise, yes | No | No | Copay: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0 |
| Non duals with income between 135-150% FPL | Single: \$25,965/\$26,205* Couple: \$35,250/\$35,490* | Single: \$2,164/\$2,184* Couple: \$2,937/\$2,957* | Single: \$16,100/\$17,600** Couple: \$32,130/\$35,130** | Yes | No | No | Coinsurance: 0% Copay: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0 |

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** Asset limits include amount without/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>