

2019 Low-Income Assistance:	Benefits to Individuals	Gross Monthly Income Limit	Asset Limit	Where to Apply?
1) Medicare Saving Programs (MSPs):	# includes \$65 disregard for earned income * Gross Income includes \$20 disregard			Department of Human Care Services San Francisco Medi-Cal Office 1440 Harrison Street San Francisco, CA 94102 415-863-9892
a. Qualified Medicare Beneficiary (QMB)	<ul style="list-style-type: none"> ▪ Pays Parts A premium, if applicable ▪ Pays Part B premium ▪ Pays Parts A & B deductibles, co-insurance and co-pays if using Medi-Cal providers ▪ Full LIS benefits for Part D ▪ Can change Part D Plans monthly 	\$1,061 single * \$1,430 couple *	\$7,730 single \$11,600 couple	
b. Specified Low-Income Medicare Beneficiary (SLMB)	<ul style="list-style-type: none"> ▪ Pays Part B premium ▪ Full LIS benefits for Part D ▪ Can change Part D Plans monthly 	\$1,269 single * \$1,711 couple *		
c. Qualified Individual (QI)	<ul style="list-style-type: none"> ▪ Pays Parts B premium ▪ Full LIS benefits for Part D ▪ Can change Part D Plans monthly 	\$1,426 single * \$1,923 couple *		
d. Qualified Disabled Working Individual (QDWI)	<ul style="list-style-type: none"> ▪ Pays Part A premium 	\$4,249 single #* \$5,722 couple #*	\$4,000 single \$6,000 couple	
2) California 250% Working Disabled (CWD) Program	<ul style="list-style-type: none"> ▪ Medi-Cal coverage while you are working (a monthly premium for Medi-Cal between \$20 to \$375) 	\$2,603 single \$3,523 couple (income excludes disability benefits)	\$2,000 single \$3,000 couple	
3) Medi-Cal (Medicaid)	<ul style="list-style-type: none"> ▪ Pays Part B premium ▪ Pays Parts A & B deductibles, co-insurance and co-pays if using Medi-Cal providers ▪ Full LIS benefits for Part D ▪ Can change Part D Plans monthly ▪ Covers certain drugs not covered by Part D 	SSI: \$931.72 single \$1,564.14 couple A&D: \$1,291 single \$1,740 couple	\$2,000 single \$3,000 couple	
4) Extra Help of Part D Low-Income Subsidy (LIS)	<ul style="list-style-type: none"> ▪ Pays fully/partially the monthly premium ▪ Pays fully/partially the deductibles/co-insurance ▪ No coverage gap ▪ Co-payments between \$1.25 - \$8.5 	\$1,561 single \$2,114 couple	\$14,390 single \$28,720 couple	Social Security Administration (SSA) Nationwide Phone #: 1-800-772-1213 www.SocialSecurity.gov Eligibility for Extra Help Guidelines: www.ssa.gov/i1020/start



Compliments of **HICAP San Francisco**
 (Health Insurance Counseling & Advocacy Program)

1-800-434-0222 or local (415) 677-7520



LOCAL HELP FOR PEOPLE WITH MEDICARE



www.selfhelpelderly.org

2019 Medicare and Your Options: An overview of Medicare

Original Medicare Plan: Part A & B

Part A (Hospital Insurance: usually free)

Benefits & Your Costs:

- Inpatient Hospital:**
Days 1-60: \$1,364 deductible;
Days 61-90: \$341/ day;
60 reserve days: \$682 /day;
Beyond 150 days: All cost
* Reserve days may be used only
once in an individual's lifetime.
- Psychiatric Hospital:**
All costs after 190 days.
- Skilled Nursing Facility:**
Day 1-20: No charge;
Day 21-100: \$170.5/ day
Beyond 100 days: All cost
- Home Health Care:**
Skilled care only;
No charge
- Hospice Care**
- Blood:** Pay first 3 pints/year.

Part B (Medical Insurance: By Income Base, usually \$135.5/ month)

Benefits & Your Costs:

- Deductible:** \$185/year
- You pay:** 20% of
Medicare-approved
amount + excess charge.
- Covered Services:**
 - Ambulance
 - Chiropractic Care
 - Clinical Lab Services
 - Doctor services
 - Durable Medical
Equipment (DME)
 - Mental Health Services
 - Outpatient Hospital Care
 - Physical Therapy
 - Preventive Services

Medicare Advantage Plans: Part C

A + B = Part C

- You assign your
Medicare Parts A
& B over to the
Part C plan.
- HMOs, PPOs, &
SNPs have
providers that you
are restricted to
using. PFFS plans
do not.

+

Part D (Medicare Rx Prescription Drug)

* **Important Note:**
Medicare does not cover
Long Term Custodial Care.

Medicare & Government Plans

Part A & B

- Federal Employee
Employee Health
Benefits Program
(FEHBP)**
1-888-767-6738
- Military
(TRICARE):**
1-866-773-0404
- Veterans:**
1-800-827-1000
(Your Military Service
may make you eligible
for coverage & drugs.)
- Medi-Cal:**
(Income/assets limits
on back page)
415-863-9892

Medicare & Employer Group Health Plans (EGHP)

- EGHP while Working:**
Medicare usually pays
second; you may or may
not need Part B or D
• When EGHP coverage ends, you
have 8 months to sign up for Part B
and 2 months for Part D.
- Retiree Plans:**
Medicare usually pays
first.
- COBRA Plans:**
If you have Medicare
before COBRA, you
can have both, and
Medicare is primary.
Parts A & B are required.
- CalCOBRA Plan:**
You cannot have
CalCOBRA when
entitled to Medicare.

Medigap (Medicare Supplement) Plans

10 Standardized Plans labeled
A, B, C, D, F, G, K, L, M and N

+

Part D (Medicare Rx Prescription Drug Plan)

30 plans in California

Compliments of **HICAP San Francisco**

(Health Insurance Counseling & Advocacy Program)

1-800-434-0222

or local 415-677-7520

