FINANCIAL GUIDELINES TO COMMONLY USED PROGRAMS

	ONE PE	RSON	TWO PERSON		ASSET CAP			% OF	WHEN	
PROGRAM	<i>MO</i> .	YR.	<i>MO</i> .	YR.	PER 1	PER 2	AGE	FPL	CHANGES	COMMENTS
PRESCRIPTIONS/MEDICARE										
QUALIFIED MEDICARE BENEFICIARY (QMB)	\$1,492	\$17,904	\$2,021	\$24,252	\$50,000	\$75,000	Medicare Eligible	140% + dis re gards	MAR	Income includes \$75/1/\$100/2 disregard; Special rules for couples - income may be \$367 higher if only one enrolling in MSP; Earned Income disregard of \$65, then deduct one-half on earned income; a federal disregard of
SPECIFIED LOW-INCOME MEDICARE BENEFICIARY (SLMB)	\$1,694	\$20,328	\$2,295	\$27,540	\$50,000	\$75,000	Medicare Eligible	160% + dis regards	MAR	\$20 may apply for those with VA pension; Other impairment related work expenses can be deducted if disabled and 64 years or younger; Estate Recovery does not apply; Maine Care pays Medicare B Premium. NOTE :
QUALIFIED INDIVIDUALS-1 (QI-1)	\$1,846	\$22,152	\$2,501	\$30,012	\$50,000	\$75,000	Medicare Eligible	175% + dis re gards	MAR	MaineCare asset disregard \$8,000/single; \$12,000/couple.
LOW-COST DRUG PROGRAM (DEL)	\$1,771	\$21,252	\$2,401	\$28,812	\$50,000	\$75,000	62+/19+if disabled	175%	MAR	1) Multiply cap by 1.25 if med. costs >= 40% of income; 2) *DEL: 1) Pay 20% + \$2 for Covered Diseases: Heart disease, Diabetes, High blood pressure, Arthritis, Chronic lung disease, High cholestrol, Incontinence, Thyroid disease, Osteoporosis, Parkinson's, Glaucoma, Multiple Sclerosis, ALS; 2) Catastrophic Cap: after \$1000 out-of-pocket on DEL-covered meds, DEL will pay 80% of ALL prescription meds. 3) Prior-authorization required for many meds. NOTE: MaineCare asset disregard \$8,000/single; \$12,000/couple.
MAINE RX PLUS	\$3,542	\$42,504	\$4,801	\$57,612	NA	NA	NA	350%	MAR	1) Same app. & card for LCD(DEL); 2) gives discounts of ~15% brand,~60% generic
Par. Subsidy MEDICARE PRES CRIPTION ASSIST. "EXTRA HELP" Full Subsidy	\$1,518 \$1,366	\$18,216 \$16,392	\$2,058 \$1,852	\$24,696 \$22,224	\$13,820 \$8,890	\$27,600 \$14,090		150% 135%	MAR	"Extra Help" or Low-Income Subsidy (LIS) is a Federal program that helps pay for all or some of the premiums, deductibles, and co-payments related to the Medicare Prescription Drug Program; annual income limit may be higher if some earnings are from work. Apply through the SS office or online. If you have Maine Care, MSP or SSI you get Extra Help automatically and do not have to apply. FMI see www.medicarerights.org
MAINECARE										
COMMUNITY-BASED MAINECARE	\$1,087	\$13,044	\$1,472	\$17,664	\$10,000	\$15,000	65 + / 18 + if blind/dis ab.	100% + dis re gards	MAR	Income Includes \$75/1/\$100/2 disregard 1) Applicants over income limits may qualify through "spend-down" process if they have high medical expenses; 2) Estate recovery program applies; 2) Maine Care asset caps = \$2,000/single and \$3,000/couple and disregards of \$8,000/single and \$12,000/couple.
MAINECARE HOME CARE WAIVER	\$2,250	\$27,000	NA	NA	\$10,000	NA		300% of SSI	MAR	1) For nursing home level of care in home only - facility guidelines differ; 2) Estate recovery program applies; 3) Asset transfer penalties apply
OTHER										
GENERAL ASSISTANCE (GA) Cumberland York Portland Metro York/Kittery/So.Berwick Metro	\$638 \$695 \$803 \$958	\$7,656 \$8,340 \$9,636 \$11,496	\$773 \$796 \$956 \$964	\$9,276 \$9,552 \$11,472 \$11,568				NA	OCT	Note there is a GA Metro Area for Biddeford, Saco, Sanford; towns in the Portland GA Metro Area include: Portland: Buxton, Cape Eliz, Casco, Chebeague Is., Cumberland, Falmouth, Freeport, Frye Is., Gorham, Gray, Hollis, Limington, Long Is., N. Yarmouth, OOB, Portland, Raymond, Scarborough, So. Port., Standish, Westbrook, Windham, Yarmouth. Effective 10/1/15-9/30/16.
SUPPLEMENTAL SECURITY INCOME (SSI)	\$750	\$8,831	\$1,125	\$13,245	\$2,000	\$3,000	65+		JAN	Apply at the Social Security Office
FOOD STAMPS: ELDERLY/DISABLED*	\$1,872	\$22,464	\$2,530	\$30,360	\$5,000	NA	60+	185%	OCT	Asset Caps: \$3500 60+/disabled. \$5000 if eligible for broad-based categorical eligibility
HOME ENERGY ASSIST. PRG (HEAP)	\$1,720	\$20,640	\$2,332	\$27,984			60+	170%	OCT	Application period 10/1 - April Allowances for medical expenses; if under age 60 income = or < 150% FPL
SENIOR DENT	\$1,771	\$21,252	\$2,401	\$28,812	NA	NA		175%	MAR	Same income as LCD/DEL, AAAs send letter of eligibility to ct, ct shows letter to Dr.
FARMSHARE	\$1,832	\$21,978	\$2,470	\$29,637	NA	NA	60+/55+ if Nat. Amer.	185%	Jul-18	First-come, first-served; consumer must contact farmer to get share. Guidelines will be updated to 2018 FPL for 7/1/18 - 6/30/19

Federal Poverty Levels:		100%	110%	120%	125%	130%	135%	150%	165%	170%	185%	200%	225%	250%	300%	350%	Base (100%, Annual)
<u>2018</u>	1 PERSON	\$1,012	\$1,113	\$1,214	\$1,265	\$1,315	\$1,366	\$1,518	\$1,669	\$1,720	\$1,872	\$2,023	\$2,276	\$2,529	\$3,035	\$3,541	\$12,140
	2 PERSONS	\$1,372	\$1,509	\$1,646	\$1,715	\$1,783	\$1,852	\$2,058	\$2,263	\$2,332	\$2,538	\$2,743	\$3,086	\$3,429	\$4,115	\$4,801	\$16,460
EACHAI	DDITIONAL PERSON	\$360	\$396	\$432	\$450	\$468	\$486	\$540	\$594	\$612	\$666	\$720	\$810	\$900	\$1,080	\$1,260	\$4,320
		·		·										•			
		100%	110%	120%	125%	130%	135%	150%	165%	170%	185%	200%	225%	250%	300%	350%	Base (100%, Annual)
<u>2017</u>	1 PERSON	\$1,005	\$1,106	\$1,206	\$1,256	\$1,307	\$1,357	\$1,508	\$1,658	\$1,709	\$1,859	\$2,010	\$2,261	\$2,513	\$3,015	\$3,518	\$12,060
	2 PERSONS	\$1,353	\$1,489	\$1,624	\$1,692	\$1,759	\$1,827	\$2,030	\$2,233	\$2,301	\$2,504	\$2,707	\$3,045	\$3,383	\$4,060	\$4,737	\$16,240
EACHAI	2 PERSONS DDITIONAL PERSON	\$1,353 \$360	\$1,489 \$383	\$1,624 \$418	\$1,692 \$435	\$1,759 \$453	\$1,827 \$470	\$2,030 \$523	\$2,233 \$575	\$2,301 \$592	\$2,504 \$644	\$2,707 \$697	\$3,045 \$784	\$3,383 \$871	\$4,060 \$1,045	\$4,737 \$1,219	\$16,240 \$4,180

Note: These figures are based on the HHS Federal Poverty Guidelines, published yearly in the Federal Register. They differ slightly from the Census Bureau's Poverty Threshold numbers, used primarily for statistical purposes. The figures are for the 48 Contiguous States and D.C. The monthly amounts listed have been achieved by multiplying the base value by the desired precentage, dividing by 12, then rounding to the nearest dollar. For clients close to the cut-off for a desired program, it's best to advise them to apply or at least talk w/ the program, as there are different methods to arrive at the monthly totals which may yield slightly different numbers.

<u>Medicare Costs rev 3/18:</u>	<u>2018</u>	<u>2017</u>	Social Secu	rity - Full R	etirement Age	s (Medicare	e age remains	65 for non-a	lisabled):						
1) Part A Premium:			DOB <= 193	7:65	DOB = 1939: 0	65 & 4mo	DOB = 1941	:65 &8mo	DOB = 1943	8-1954:66	DOB = 1956.	:66 &4mo	DOB = 195	8:66 & 8mo	DOB = 1960 & later: 6
a. 40+ quarters (10yrs)	\$0.00	\$0.00	DOB = 1938	:65 &2mo	<i>DOB</i> = 1940: 0	65 & 6m o	DOB = 1942	:65 &10mo	DOB = 1955	5:66 & 2mo	DOB = 1957.	:66 &6m0	DOB = 195	9:66 &10mo	
b. 30-39 quarters (7.5 - 9.75 yrs.)	\$232.00	\$227.00													
c. under 30 quarters (< 7.5 yrs.)	\$422.00	\$413.00	<u>Delayed Re</u>	tirement Cr	edits (use tabl	e above to d	etermine FRA	first)							
2) Part B Premium:*	\$134.00	\$134.00	DOB	<u>Cre dit /Y r</u>	DOB	<u>Cre dit /Yr</u>	DOB	<u>Credit/Yr</u>	DOB	<u>Cre dit /Yr</u>	DOB	<u>Credit /Yr</u>	DOB	<u>Credit / Yr</u>	-
3) Part B deductible:	\$183.00	\$183.00	1924	3.00%	1927-28	4.00%	1931-32	5.00%	1935-36	6.00%	1939-40	7.00%	1943+	8.00%	
4) Part A hosp. deductible (1-60 days):	\$1,340.00	\$1,316.00	1925-26	3.50%	1929-30	4.50%	1933-34	5.50%	1937-38	6.50%	1941-42	7.50%	*No credit giv	ven for years after	age 69
5) Part A Co-insurance per day (days 61-90):	\$335.00	\$329.00		Persons born	on Jan. 1 of any ye	ar should refer	to the credit perc	entage for the p	previous year.		•				
6) Lifetime reserve days per day (91-150)	\$670.00	\$658.00													
7) SNF Coinsurance per day (days 21-100)	\$167.50	\$164.50	Earning Lim	its :			<u>2018</u>	<u>2017</u>		<u>Social Secur</u>	ity Cost-of-Liv	ving Adjustm	ents (COLA)	<u>:</u>	
* Part B Premium-2016 higher income beneficiarie	es may pay more	2	1) Before FR	A: deduct \$	l per \$2 earned	d after	\$17,040	\$16,920		2018	2.00%	2016	0.00%	2014	1.50%
			2) For year c	of FRA: ded	uct \$1 per \$3 af	îte r	\$45,360	\$44,880		2017	0.30%	2015	1.70%	2013	1.70%
			3) Starting w	ith month F	RA reached		no limit	no limit							
Since eligibility for any benefit can be a	uffected by a	variety								<u>Maximum Ma</u>	onthly Soc. Se	ecurity Benef	<u>fit</u>	<u>(If retiring a</u>	t Full Retirement Age)
of complex factors, it is worth submitting an application		<u>SS Disability Monthly Thresholds:</u>				<u>2018</u>	<u>2017</u>		2018	\$2,788	2017	\$2,687	2016	\$2,639	
even if income and/or assets are some	what above t	he limit,		Substantial	Gainful Activity	(SGA)									
since deductions, expenses and disregards may lower		Non-Blind			\$1,180	\$1,170		<u>Earnings Re</u>	quired for a Q	age:					
them to the eligibility level.					Blind		\$1,970	\$1,950		2018	\$1,320	2017	\$1,300	2016	\$1,280
- •				Trial Work	Period (TWP)		\$850	\$840							

DHHS Offices

York County: 208 Graham St, Biddeford, ME 04005 Phone: 286-2400 / 800-322-1919

890 Main St, Suite 208, Sanford, ME 04073 Phone: 490-5418 / 800-482-0790

Cumberland County: 151 Jetport Blvd, Portland, ME 04102 Phone: 822-2000 / 800-482-7520

Social Security Offices

Portland 1-877-319-3076 Saco 1-877-253-4715 press 2, listen to menu options Portsmouth, NH 1-888-397-9796

Other Useful Contacts

State Medicare HELP Desk: 866-796-2463 Legal Services for the Elderly: 800-750-5353 Department of Veteran's Affairs: 800-827-1000 Maine Bureau of Insurance: 800-300-5000 State Employee Health Benefits: 207-287-6780 Nationwide Medicare Call Line: 1-800-MEDICARE