



# 2020 Oregon Medicare Fact Sheet

## Medicare Subsidy Programs

Extra Help and Medicare Savings Program Income/Resource Limits <sup>1</sup>						
Subsidy Level	Program/ Federal Poverty Level %	Monthly Income Limits One/Couple	Resources* One/Couple	Rx Premium	Rx Deductible	Rx Co-pay
Level 3 Institutional or receiving in-home services	Full Dual	Varies <sup>3</sup>	Varies <sup>3</sup>	\$0	\$0	\$0
Level 2 Non-institutional	Full Dual/ SSI	\$783/ \$1,175**	\$2,000/ \$3,000	\$0	\$0	\$1.30/\$3.90 NO GAP
Levels 2 & 3 above qualify for the full OHP+ or OSIPM package through Senior Services						
Level 1	QMB/ 100%	\$1,084/ \$1,457	NA <sup>2</sup>	\$0	\$0	\$3.60/\$8.95 NO GAP
	QMB – Part B premium, deductibles, and co-pays paid by the state					
	SMB/ 120%	\$1,296/ \$1,744	NA <sup>2</sup>	\$0	\$0	\$3.60/\$8.95 NO GAP
	SMF(QI)/ 135%	\$1,456/ \$1,960	NA <sup>2</sup>	\$0	\$0	\$3.60/\$8.95 NO GAP
	SMB / SMF – Part B premium only paid by the state					
Level 4	136% - 150%	\$1,615/ \$2,175	\$14,610/ \$29,160	25-100%	\$89	Up to 15%

\*Your residence and car do not count as assets. Must meet both the income and asset limits to qualify. Medicaid is a state program that helps to pay for Medicare Part B premiums. Resources are evaluated differently. Contact your Aging Services/SPD local branch with questions and to apply. Oregon state Medicaid resource limits allow for an additional \$1,500 per person for burial expenses. However, the \$1,500 must be in a separate, dedicated account.

\*\*Must meet the individual OSIPM income standard AND the couple income standard (if applicable) to qualify.

<sup>1</sup> Income limits for LIS are effective January 2020 and include a "\$20 disregard" amount. MSP limits effective March 2020.

<sup>2</sup> QMB/SMB/SMF resource limits eliminated as of 1/1/16.

<sup>3</sup> Each case must be evaluated by the Medicaid branch to calculate eligibility.

## 2020 Part A, Part B, Part D Information DRAFT

### Part A

#### Premium

<30 quarters Social Security work credits \$458

30-39 quarters Social Security work credits \$252

**Hospital deductible** – up to 60 days in a benefit period \$1,408

#### **Skilled nursing facility**

\$0 days 0-20, \$176 per day days 21-100, All costs after day 100

### Part B

**Deductible** \$198

Premium (≤\$87,000 per year single, ≤\$170,000 couple) \$144.60

### Part D

#### **Standard Benefit Design Parameters**

Deductible \$435

Initial coverage limit \$4,020

Out-of-pocket threshold (OOP) \$6,350

Total covered Part D drug spend @ OOP threshold \$9,038.75

LIS benchmark \$32.57

#### **Part D IRMAA**

Filing individual tax return	Filing joint tax returns	Add:
≤ \$87,000	≤ to \$174,000	NA
> \$87,000 and ≤ \$109,000	> \$174,000 and ≤ \$218,000	\$12.20
> \$109,000 and ≤ \$136,000	> \$218,000 and ≤ \$272,000	\$31.50
> \$136,000 and ≤ \$163,000	> \$272,000 and ≤ \$326,000	\$50.70
> \$163,000 and < \$500,000	> \$326,000 and < \$750,000	\$70.00
> \$500,000	> \$750,000	\$76.40
Married filing separately		
≤ \$87,000		\$0
> \$87,000 and < \$413,000		\$70.00
≥ \$413,000		\$76.40