



2019 Benefits Quick Guide Rev. October 2019 (rev)

Medicare Part A 2019 Premium, Deductibles & Co-pays			2019 Medicare Part B Premiums & Deductibles	
Part A Premium	(30-39 quarters) (< 30 quarters)	\$240 per month \$437 per month	PART B	\$135.50 per month
Hospital Deductible	(per benefit period deductible)	\$1,364	Those with annual incomes: \$85,001-\$107,000 (single) or \$170,001-\$214,000 (married)	\$189.60 per month (2019) Part D (+ \$12.40 to premium 2019)
Hospital Co-pays	Days 61-90 Days 91-150	\$341 per day \$682 per day	\$107,001-\$133,500 (single) or \$214,001 - \$267,00 (married)	\$270.90 per month (2019) Part D (+ \$31.90 to premium 2019)
Skilled Nursing facility Co-Pay	Days 21-100	\$ 170.50 per day	For those over these amounts...	Visit www.ssa.gov
			Part B Deductible	\$185 per year (2019)

Medicare Savings Program (MSP) effective 3/19			SSA COLA (1/19) 2.8 %		2019 SSI \$771 (one) or \$1157 (couple)
Program	Status	Income Limit	Status	Income Limit	NO ASSET LIMITS FOR MSP No Estate Recovery after 1/1/10 DSS Benefits Line: 1-855-626-6632 Income(143% TFA) listed includes Husky C unearned income disregard of \$339/single & \$678/couple if each has unearned income Assets: \$1600 single; \$2,400 couple
QMB (Q01) 211% FPL	Single	\$2,196.51 / mo	Couple	\$2972.99 / mo	
SLMB (Q03) 231% FPL	Single	\$2,404.71/ mo	Couple	\$3,254.79/ mo	
ALMB (Q04) 246% FPL	Single	\$2,560.86/mo	Couple	\$3,466.14/ mo	
Medicaid (Husky C) (for those 65+, blind or with a disability)	Single	\$972.49 (region A) \$862.38(reg. B & C)	Couple	\$1483.09 (reg. A) \$1374.41 (reg. B & C)	
Husky A (160% FPL)	Caretakers w/ children < 19 years		For two	Magi: \$2,256/mo	Husky A eff 10/19

If you qualify for MSP, you will automatically qualify for Extra Help and the lower co-pays for Part D

Medicare Part D Low Income Subsidy (LIS) for 2019			Medicaid Expanded Benefits (3/19) HUSKY D		CT Health Insurance Exchange Access Health CT Benefits Center- 1-855-805-4325 www.accesshealthct.com Open enrollment Nov 1, 2019 – Jan 31, 2020							
LIS level 1 CO-PAYS FOR MEDICATIONS: \$3.40 - FORMULARY GENERIC DRUGS \$8.50 - FORMULARY BRAND NAME DRUGS LIS Level 2: Medicaid recipients up < 100% FPL: \$1.25/3.80 Max \$17 per month Medicaid Waiver/perm. SNF-no co-pays (LIS Level 3) 2019 CT LIS Benchmark Premium- \$36.20 2019 \$33.19 base premium to calculate penalty Max Income (1/11/19)/Assets for Partial Subsidy (2019)			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Household size</th> <th>MAGI Monthly Income (138%)</th> </tr> <tr> <td>1 person</td> <td>\$1436.58</td> </tr> <tr> <td>Couple</td> <td>\$1945.80</td> </tr> </table>	Household size		MAGI Monthly Income (138%)	1 person	\$1436.58	Couple	\$1945.80	Supplemental Nutrition Assistance Program (SNAP)-eff 10/19 Information below is for 60 years old or older or persons with a disability Single person income - \$1926/ mo (max benefit \$194; min benefit \$16) Couple income - \$2,607/ mo (max benefit \$355; min benefit \$16) There is no asset limit EXCEPT for members whose gross income is more than 185% of the FPL. Updated annually in October (asset limit over 185%: \$3,500)	
Household size	MAGI Monthly Income (138%)											
1 person	\$1436.58											
Couple	\$1945.80											
LIS Single (150%FPL)	\$1,581*- *Includes \$20 disregard	Assets under \$14,390* (1/19) *includes \$1500 burial	DSS applications mailed to: DSS Connect Scanning Center P.O.Box 1320 Manchester, CT 06045-1320 New W-1LTC Medicaid LTSS - send to LTSS Application Ctrs Or apply online: www.connect.ct.gov Questions only DSS Benefits Line: 1-855-626-6632									
LIS Couples	\$2,134*-	Assets under \$28,720* (1/19)										
Partial dual eligible pay deductible of \$85 then 15% copayment up to \$5,100 in 2019 then \$3.40/\$8.50			CT Energy Assistance Program (CEAP) 10/19 Began accepting applications August 1, 2019 Deadline: May 1, 2020									
FPL	Eff 1/11/19											
100% FPL	Single	Couple	*Vulnerable households receive a higher basic benefit: Vulnerable Households include a household member who is age 60+ or a person with a disability, or child under age 6. (basis benefit \$725 up to 100% FPG; \$190 for renters) Crisis Assistance for those unable to secure primary deliverable fuel may be eligible for additional \$710. Asset Limits apply: www.ct.gov/staywarm ; DSS Office of Community Services Homeowners - \$15,000 First date of delivery: 11/13/19 1-800-842-1132 Renters - \$12,000 Eligible for winter protection shutoff: 11/1/19-5/1/20 Households (including renters) with up to 60% of median income can qualify if rent is more than 30% of gross income. Households with liquid assets that exceed these amounts may qualify if gross income, when added to excess liquid assets, is within guidelines.									
150% FPL	\$1041	\$1,409										
	\$1561	\$2,114										

Household Size	60% median income	
1 person	\$36,171	
2 people	\$47,300	
3 people	\$58,430	
4 people	\$69,599	
5 people	\$80,688	
6 people	\$91,818	

CT Home Care Program for Elders	Functional Criteria	Income Guidelines	Asset Guidelines
State Funded - Level 1 Closed 7/17	One critical need	No income ceiling	Individual: \$37,926; Couple: \$50,568 (eff 1/19)
State Funded –Level 2	Skilled nursing home level of care*	No income ceiling- 9% cost share	Individual: \$37,926 Couple: \$50,568 (eff 1/19) 150% & 200% of CSPA
Medicaid Waiver – Level 3 300% of SSI (\$771) (updated 1/1/19) Applied Income starts at \$2,082-200%FPL (3/1/19)	Skilled nursing home level of care**	\$2,313/month (1/19) Only the individual's income is counted toward eligibility	Individual -\$1600 Couple - \$3200 (both receiving services) \$26,884(one receiving services)1/19 A higher asset amount may be allowed when a spousal assessment is done (Excess home equity limit: \$858,000)
Medicaid – Level 5 (3/19)	1 or 2 critical needs	\$1562 month (150% FPL)	Individual: \$1,600 Medicaid groups: S01 – S04
State-CHCPED-Level 4	Skilled nursing home LOC*	No income ceiling	Individual: \$37,926 Couple: \$50,568 Limit 100 slots
*Supervision or cueing ≥ 3 ADLs + need factor; hands-on≥3 ADLs; hands-on≥2 ADLs + need factor. Need factors: Behavioral or cognitive impairment requiring daily supervision to prevent harm or assist with prescribed medications beyond setting up of pills.			
Call 1-800-445-5394 to make referrals or refer online https://www.ascendami.com/CThomecareforelders/default Eff 7/1/16 max irrevocable funeral service account \$8,000. Eff 1/1/2020 10,000; life insurance of face value \$1500; 5 year look back. Community Spousal Protected Amount (CSPA): Minimum \$25,284 and max \$126,420 (1/19) Home equity limit max: \$878,000. Maximum Monthly Maintenance Needs Allowance: \$3,160.50 (1/19). Minimum: \$2113.78 (7/19) Federal Poverty Levels are usually announced in March of each year			

Information for Persons with Disabilities			
Medicaid Category	Eligibility	Income	Assets
MedConnect (Medicaid for the Employed Disabled)	Persons with disability who have earned income. Proof of disability: Receiving SSD; Medicare after SSD stops or fill out W-300MED & W-300T19 for medical review	Earned income up to \$6,250/mo or \$75,000/yearly. Premium could apply if income is above 200% FPL (questions on premium: 1-800-656-6684)	\$10,000 (\$15,000 couple) Excluding: car used for work/medical appts, home, approved retirement accts (i.e. IRA,401K) & approved DSS account for special employment expenses Apply W-1E or www.connect.ct.gov
Bureau of Rehabilitation Services (BRS)	Assist persons with disabilities wanting to return to work		1-800-537-2549
BRS Benefits Counselor	Benefits Specialist will explain how work can affect benefits etc.	1-800-773-4636 to find out your local contact www.ct.gov/brs	
Ticket to Work	9-month trial test period to return to work. Individuals get full benefits regardless of money earned.		1-866-968-7842
Centers for Independent Living	Provide peer support, I&R, advocacy, independent skills training to persons with disabilities		www.cacil.net for contact information

Other Long Term Services and Supports Options			
Program	Eligibility	Benefits	How to Apply?
Community First Choice Provision from the Affordable Care Act (ACA)	Anyone functioning at skilled nursing home level of care and on any type of Medicaid (i.e. Husky A, D, C, Med-Connect) No age restriction	Self-directed care; PCA (including family/friends, not spouse); Home delivered services; home modifications; assistive technology; Support Broker	Call 2-1-1 or www.ctmfp.com

Long-Term Care Medicaid Application Centers (for new W-1LTC Medicaid applications):

- 1) Waterbury Office, 279 Thomaston Ave., Waterbury, CT 06702
- 2) Bridgeport Office, 925 Housatonic Avenue, Bridgeport, CT 06606
- 3) New Haven Office, 50 Humphrey St., New Haven, CT 06513
- 4) Greater Hartford Office, 20 Meadow Rd., Windsor, CT 06095—only for Statewide Medicaid Waiver HCBS Applications