

# Medicare Savings Program for Qualified Beneficiaries

**The state of Illinois could help you save up to \$1,608/year in Medicare expenses!**

Many Illinoisans with Medicare can save up to \$1,608 in Medicare Part B premiums each year by participating in a cost-sharing program called the **Medicare Savings Program**. This state program may pay for certain Medicare premiums, deductibles and co-insurance. Many people who qualify for these programs never apply. *Are you one of them?*

## Who qualifies for the Illinois Medicare Savings Program?

1. You must have Medicare Part A (Hospital Insurance).
2. Your income is below certain limits (see table).
3. Your financial resources are less than \$7,560 for an individual or \$11,340 for a couple.

<b>Your Monthly Income Limits*</b>	<b>Program May Pay*</b>	<b>Cost Sharing Program Name</b>
\$1,032 Individual or \$1,392 Couple	Premiums, deductibles, coinsurance	Qualified Medicare Beneficiary (QMB)
\$1,234 Individual or \$1,666 Couple	Medicare Part B premiums	Specified Low-Income Medicare Beneficiary (SLIB/SLMB)
\$1,386 Individual or \$1,872 Couple	Medicare Part B premiums	Qualified Individual-1 (QI-1) <i>(limited spots each year)</i>

*\*2018 levels, these limits usually increase slightly each year.*

Financial resources are things like bank accounts, stocks, bonds, annuities, IRAs, burial funds/plans over \$1,500, and cash values of life insurance policies.

Some things are not counted, including the home you live in, one car, burial plots, and furniture. *The State of Illinois will not place a claim on your estate for the amount of Medicare cost-sharing expenses paid by the state.*

## How do I apply for the Illinois Medicare Savings Program?

**CCHCC Community Health Workers can assist you in completing an application. Please call us to schedule an appointment at (217) 352-6533.**

Applications are submitted online at [abe.illinois.gov](http://abe.illinois.gov) or by mail using the "Mail-In Application For Payment of Medicare Premiums, Deductibles and Coinsurance (HFS 2378M)." A face-to-face interview with DHS is not required.

On the application, you will be asked questions about your current health insurance coverage,

your assets (including life insurance policies), and your income. You will be asked to submit supporting documentation. After you apply, DHS will send you a notice to tell you if you can get help with your Medicare cost sharing expenses.

If you are approved, you will receive a paper “medical card” to show to your providers so that they can bill the state for certain charges. Cases are reviewed annually. The Illinois DHS office will send you re-determination papers to complete each year to verify that you still qualify.

DHS will also notify the Social Security Administration (SSA) regarding your approval and SSA will let you know when they will stop deducting the Part B premium from your monthly check. This process can take several months from submitting the application to getting your first adjusted Social Security check.

## **2018 Medicare Deductible, Coinsurance & Premium Amounts**

### **Medicare Part B Premium and Deductible**

- Premium: Varies; usually between \$109/month to \$134/month on average
- Deductible: \$183.00/year

### **Medicare Part A Hospital Care**

- Deductible: \$1,340/year
- Coinsurance:
  - 1st through 60th day: \$0
  - 61st through 90th day: \$335.00/day
  - 91st through 150th day: \$670.00/day

### **Medicare Part A Skilled Nursing Facility (SNF) Care**

- Co-insurance:
  - 1st through 20th day: \$0
  - 21st through 100th day: \$167.50/day

Most people qualify for premium-free (\$0) Part A. You should not have to pay for Part A if you, or your spouse, worked more than 10 years (40 quarters) and paid FICA taxes during that time.

If you are unsure if you qualify for premium-free Part A, you should speak with a representative at the Social Security Administration (1-800-772-1213) or look at your “My Social Security” account at <https://www.ssa.gov/myaccount>.



**For more information, or to get assistance in applying, please contact:**

Champaign County Health Care Consumers (CCHCC)

44 E. Main St. #208, Champaign, IL 61820

**(217) 352-6533**



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