

AM I ELIGIBLE FOR Medicare Discount PROGRAMS?

800-803-7174



DO I QUALIFY FOR EXTRA HELP WITH MY PRESCRIPTION DRUG PLAN?

(Low Income Subsidy or Extra Help)

IS MY GROSS MONTHLY INCOME LESS THAN 1,615 YES / NO

Or (if married)

IS OUR MONTHLY INCOME LESS THAN 2,175 YES / NO

IF YOU CHECKED YES CONTINUE

ARE MY ASSETS (EXCLUDING HOME AND CAR) LESS THAN 14,790 YES / NO

OR (IF MARRIED)

ARE OUR ASSETS (EXCLUDING HOME AND CAR) LESS THAN 29,520 YES / NO

IF YOU CHECKED YES, YOU MIGHT QUALIFY FOR EXTRA HELP!

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DO I QUALIFY FOR MI TO HELP PAY MY FEDERAL MEDICARE B PREMIUM?

(Medicare Savings Program/ MSP)

IS MY GROSS MONTHLY INCOME LESS THAN 1,456 YES / NO

OR (IF MARRIED)

IS OUR MONTHLY INCOME LESS THAN 1,960 YES / NO

IF YOU CHECKED YES CONTINUE

ARE MY ASSETS (EXCLUDING HOME AND 1 CAR) LESS THAN 7,970 YES / NO

OR (IF MARRIED)

ARE OUR ASSETS (EXCLUDING HOME AND 1 CAR) LESS THAN 11,960 YES / NO

IF YOU CHECKED YES, YOU MIGHT QUALIFY FOR THE MEDICARE SAVINGS PROGRAM!