

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 1,719 YES / NO

Or (if married)

IS OUR MONTHLY INCOME LESS THAN 2,309 YES / NO

IF YOU CHECKED YES CONTINUE

ARE MY ASSETS (EXCLUDING HOME AND CAR) LESS THAN 15,510 YES / NO

OR (IF MARRIED)

ARE OUR ASSETS (EXCLUDING HOME AND CAR) LESS THAN 30,950 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 1,549 YES / NO

OR (IF MARRIED)

IS OUR MONTHLY INCOME LESS THAN 2,080 YES / NO

IF YOU CHECKED YES CONTINUE

ARE MY ASSETS (EXCLUDING HOME AND 1 CAR) LESS THAN 8,400 YES / NO

OR (IF MARRIED)

ARE OUR ASSETS (EXCLUDING HOME AND 1 CAR) LESS THAN 12,600 YES / NO

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