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Greater Boston Legal Services 197 Friend Street, Boston, MA 02114 (617) 371-1234, or toll-free (800) 323-3205 FAX (617) 371-1222 www.gbls.org

MEDICARE PART D COST SHARING FOR 2011

Standard Benefit D	lesign			
Deductible		\$ 3	310.00	
Initial Coverage Limit			340.00	
Out-of-pocket Threshold			\$4,550.00	
Total Covered Part D Drugs to Get to Catastrophic Limit		\$6,4	\$6,447.50	
Catastrophic Cost Sl	haring:			
	Generic/Preferred Drugs	\$	2.50	
	Other	\$	6.30	

LIS Resource Levels¹

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Full Subsidy	\$ 8,180/single; \$13,020/married
Partial subsidy	\$12,640/single; \$25,260/married

Low-Income Subsidy (LIS) Copayments

Low-income Subsidy (L18) Copayments					
Full Subsidy Eligible Beneficiaries					
Institutionalized Dual Eligible Beneficiaries	\$	0.00			
Non- Institutionalized Dual Eligible Beneficiaries with Incomes ≤100% Federal Poverty					
Level		-			
Generic/Preferred Drugs		1.10			
Other		3.30			
Above Catastrophic Limit		0.00			
Non- Institutionalized Dual Eligible Beneficiaries with Incomes >100% Federal Poverty					
Level and Non-Dual Full Subsidy Eligible Beneficiaries with Resources \leq \$8,180					
(individuals) or \leq \$13,020 (couples)					
Generic/Preferred Drugs	\$	2.50			
Other	\$	6.30			
Above Catastrophic Limit	\$	0.00			
Non-Dual Full Subsidy Eligible Beneficiaries with Resources between \$8,180 and					
\$12,640 (individuals) or \$13,020 and \$25,260 (couples) and Partial Subsidy Eligible					
Beneficiaries					
Deductible	\$	63.00			
Co-Insurance to Initial Coverage Limit		15%			
Generics above Catastrophic Limit	\$	2.50			
Others above Catastrophic Limit	\$	6.30			
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Massachusetts Low Income Premium Subsidy Amount		33.66			

¹ Resource amounts include \$1,500 per person for burial expenses.

