

Prescription Assistance: Extra Help

Medicare Part D Help For Medicare Beneficiaries



Extra Help Pays for:

- Medicare Part D Premiums
- Part D Deductibles
- Prescription Co-pays

Income Limit—Income must be below

\$1,615 monthly for an individual or \$2,175 monthly for a married couple

**Your income may be higher if you or your spouse:*

- Support other family members that live with you (i.e. grandchildren)
- Have earnings from still working

Resources Limit— Bank accounts, stocks, bonds and other investments cannot value more than \$14,610 for an individual or \$29,610 for a married couple.

NOT including your home, car or life/burial insurance

Must re-apply every 2 years. It is estimated to save qualifying persons an average of \$4,000/year.



Prescription & Medicare Premiums Assistance:

Medicare Savings Program

Medicare Part A & B Help for Medicare Beneficiaries

There are 3 levels.

If you qualify for any Medicare Savings Program, you will automatically be enrolled in Extra Help.

1. Qualified Medicare Beneficiary (QMB)

Income limit* - \$1,083 monthly for an individual or \$1,457 for a married couple

QMB Pays for

- Medicare Part A Premiums
- Medicare Part B Premiums
- Part A& B Deductibles, coinsurance and co-pays

2. Specified Low-Income Medicare Beneficiary (SLMB)

Income limit* - \$1,296 monthly for an individual or \$1,744 for a married couple

SLMB Pays for—Medicare Part B Premiums - only

3. Qualifying Individual (QI) - must re-apply for QI every year

Income limit* - \$1,456 monthly for an individual or \$1,960 for a married couple

QI Pays for—Medicare Part B Premiums

Resource limit for QMB, SLMB, and QI— Bank accounts, stocks, bonds and other investments cannot value more than \$7,860 for an individual or \$11,800 for a married couple. NOT including your home/car.

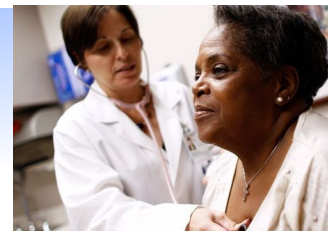
*Income may be higher if supporting other family members in your home or income from still working.

**To Apply or for Information call, the Area Agency on Aging:
713-627-3200 or 1-800-437-7396**



Medicare Wellness & Preventives—Medicare Part B

“An ounce of prevention is worth a pound of cure.” - Ben Franklin



For 2020

Prevention/Wellness Visit	Frequency	Cost	Notes
Annual Wellness Visit	1x every 12 months	No cost (unless other services delivered during same visit)	Weight/Height/BMI Blood pressure, Cognitive impairment, Depression, Hearing, and Vision Screens; Ability to do activities of daily living; Fall risk; Discuss personal and family history
Abdominal Aortic Aneurysm Screening	1x a year	No cost	If determined at-risk by doctor
Alcohol Misuse Screening & Counseling	Screen: 1x a year Counseling: 4 sessions w/ doctor or qualified provider	No cost	Questionnaire
Bone Mass Measurement	Every 2 years if at-risk for osteoporosis	No cost	Test detects osteoporosis before bones break
Mammogram	1x a year	No cost	Breast cancer screening
Cardiovascular Screen	Blood test: 1x every 5 years Screening: 1x a year	Test and screening are no cost	Blood test: Cholesterol and Lipids Test Risk Screening: History
Pap Test & Pelvic Exam	Every 2 years or 1x a year for women w/ abnormal pap tests	No cost	Cervical and Vaginal Cancer Screenings
Colon Cancer Screening	Fecal blood test: 1x year <i>If at risk:</i> Flexible sigmoidoscopy every 4 yrs; Colonoscopy every 2 yrs; Barium Enema every 2 yrs	No cost for fecal blood test, flexible sigmoidoscopy and colonoscopy; 20% for barium enema	If during colonoscopy, the doctor finds and removes polyps, co-pays will apply since the screening becomes diagnostic and treatment.
Depression Screening	1x a year by primary doctor	No cost	Questionnaire
Diabetes Screening	2xs a year if at-risk	No cost	Fasting plasma glucose test
Glaucoma Test	1x a year if at-risk	20% and Part B deductible	Tests pressure & angle of eye
HIV Screening	1x a year	No cost	Blood test
Obesity Screening and Counseling	Screen: 1x a year Counseling: If BMI >30, Month 1: 1 counseling session every week Mos 2-6: 1 session per 2 weeks Mos 7-12: 1 session a month if continued weight loss	No cost	Screen: Body-mass index (BMI) is calculated using your height and weight
Prostate Cancer Screening	1x every 12 months	Blood test (PSA): No Cost Rectal Exam: 20% and Part B deductible	Prostate Specific Antigen (PSA) Blood Test and Digital Rectal Exam
Shots	Flu—1x a year Hepatitis B—for at risk Pneumococcal —1x lifetime	No cost	Flu—in Fall or late winter Hep B— risks: hemophilia, ESRD or low resistance to infection
Smoking Cessation	8 counseling sessions	No cost	For any smoker
Medical Nutrition Therapy	Doctor refers to registered dietician. 1st year: 3 hrs of counseling; other years 2 hrs	No cost	For those with diabetes, renal disease or had a kidney transplant within 3 years

Part B covers Diabetes Self Management Class and Diabetes Supplies (strips, monitor, lancets and solution) for 20% and deductible.