

# CHOICES Benefits Quick Guide (Rev 04.04.2025)

2025 Part A Premium, Deductible, Copay			2025 Part B Premium, Deductible, Copay	
Part A Premium	40+ Quarters 30-39 Quarters < 30 Quarters	\$0 \$285/month \$518/month	Part B standard premium <b>Higher Annual Incomes: \$106,000 - \$133,000 (single) or \$212,000 - \$266,000 (married)</b>  <b>\$133,000 - \$167,000 (single) or \$266,000 - \$334,000 (married)</b> for higher incomes, visit <a href="http://www.medicare.gov">www.medicare.gov</a>	\$185/month
Hospital Deductible	Per benefit period	\$1,676		\$259/month
Hospital Copays Lifetime Reserve	Days 0- 60 Days 61-90 Days 91-150	\$0 \$419/per day \$838/per day		\$370/month
SNF Copay	Days 21-100	\$209.50/per day	Part B Deductible	\$257/year
Medicaid Coverage Groups in Connecticut				
Medicare Savings Program (MSP) Limits <b>Effective 3/2025</b>				
Program	Marital Status	Income Limit	Status	Income Limit
QMB	Single	\$2,752	Married	\$3,719
SLMB	Single	\$3,013	Married	\$4,072
ALMB	Single	\$3,209	Married	\$4,336
Medicaid HUSKY C (for those 65+, blind or disabled)	Single	*\$1,370 (effective 3/2025) <b>Asset Test: \$1,600</b>	Married	*\$2,198 (effective 3/2025) <b>Asset Test: \$2,400</b>
HUSKY A	Caretakers with children <19 yrs.		For two	Magi: \$2,433
HUSKY D	Adults with no minor children		Single: Couple:	MAGI: \$<1,800 MAGI: \$<2,433
Med-Connect (Medicaid for employed disabled)	Persons with a disability who have earned income. Proof of disability: Receiving SSDI; Medicare Part A after SSDI stops; or fill out W-300MED or W-300T19 for DSS medical review		Earned income up to \$6,250/month or \$75,000 year.	<b>Assets:</b> Single \$10,000 Couple \$15,000 <b>Premium will apply if income is above 200% FPL.</b> Apply through DSS
You will be enrolled in LIS “Extra Help” for help with Medicare Part D if you qualify for any level MSP (at LIS level 1) or HUSKY C (depending on program, your client will have LIS Level 1 or 2)				
LIS Level 1: Copays for covered drugs: \$4.90 generic/\$12.15 brand LIS Level 2: Copays for covered drugs: \$1.60 generic/\$4.80 brand. Max out-of-pocket cost-sharing is \$17 per month LIS Level 3: \$0 cost shares on all covered medications (please review next page – CHCPE)		2025 CT LIS Benchmark Premium: \$ 52.50 Please note: Some plans' premiums under the benchmark rate with enhanced features may not be covered at 100%, so your client must pay a partial premium. If there are any plans over the Benchmark rate, your client will pay a partial premium 2025 National Base Beneficiary Premium to calculate Late enrollment penalty: \$36.78		LINET – a Medicare program that provides immediate drug coverage for a beneficiary who qualifies for LIS/Extra Help and does NOT have a drug plan. Enrollment is automatically done on Medicare’s side. It is temporary; Medicare will automatically enroll the beneficiary into a Benchmark Plan after 2 months.
DSS Applications are mailed to the DSS Scanning Center, PO Box 1320, Manchester, CT 06045; you can also apply online at <a href="http://www.connect.ct.gov">www.connect.ct.gov</a> for all applications except for Long Term Services and Supports.				

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Screen Beneficiaries for other State/Federal Programs using the National Council on Aging Benefits Checkup tool:  
<https://seniorresourcesec.benefitscheckup.org/>

Medicare Enrollment Periods						
Period	Date	Part A	Part B	Part C	Part D	Explanation
<b>Initial Enrollment (IEP)</b>	3 months before age 65, month of 65 <sup>th</sup> birthday & 3 months following.	X	X	X	X	No penalty for delaying enrollment for those eligible for premium free Part A
<b>Open Enrollment</b>	<b>October 15 – December 7</b> Changes effective Jan 1			X	X	Beneficiaries can enroll or change any Medicare benefits
<b>Special Enrollment (SEP) for Medicare Part B</b>	While working & 8 months after large group health employment ends or loss of employer health coverage (whichever comes first).	X	X	X	X	For people still working (or their spouses) who are covered by a large group employer health plan (Medicare ESRD do not have SEP).  SEP is 63 days for Med D.
<b>General Enrollment</b>	<b>Jan 1 – March 31</b> For premium Part A or Part B	X	X			For those who missed their IEP. Part B is effective first of following month. Penalties may apply.
<b>Medicare Advantage Open Enrollment Period</b>	<b>Jan 1 – March 31</b>			X	X	Can change from one MA/MA-PD plan to another. Can also return to traditional Medicare & can elect to enroll in a Medicare D plan &/or Medigap policy. Coverage begins first of following month.
<b>Dual Eligible/Low Income Subsidy SEP</b>	One time change each month	X	X	X	X	Leave MA-PD for Original Medicare and a standalone PDP or switch between PDPs. Active the month following the change.
<b>Other SEPs</b>	Following significant changes: in/out SNF or hospital, geographic move, loss of Medicaid, MSP, or LIS, release from incarceration			X	X	Contact CHOICES to explore other potential SEPs.

Review Medicare Rights Center – Special Enrollment Periods for MAPDs and Part D by clicking [here](#)

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