

**ITU** Indian Health Service facilities, tribally operated 638 health programs, and Urban Indian Health Programs. ITU facilities may be referred to as American Indian Health Facilities.

**Coinsurance** Your share of the costs of a covered health care service, calculated as a percent (for example, 20%) of the allowed amount for the service. You pay coinsurance plus any deductibles you owe. American Indians and Alaska Natives (AI/ANs) who are eligible to receive services from an ITU are exempt from coinsurance in Medicaid and the Children's Health Insurance Program (CHIP).

**Copayment (Copay)** A fixed amount (for example, \$15) you pay for a covered health care service, usually when you get the service. The amount can vary by the type of covered health care service. AI/ANs who are eligible to receive services from an ITU are exempt from copayments in Medicaid and CHIP.

**Deductible** The amount you owe for health care services your health insurance plan covers before your health insurance or plan begins to pay. AI/ANs who are eligible to receive services from an ITU are exempt from deductibles in Medicaid and CHIP.

**Extra Help** A Medicare program to help eligible people pay Medicare prescription drug costs.

**Income** How much money you have coming to you each month.

**Premium** The amount that must be paid for your health insurance or plan. You or your employer usually pays it monthly, quarterly, or yearly.

**Resources** Money or other items of value you have saved or have available, like stocks, bonds, or a savings account. Countable resources that affect your eligibility for the Medicare Savings Programs do not include your home, one car, your burial plot, burial costs (up to \$1,500 if you have put that money aside), furniture, or other household or personal items.

## Apply now, even if you're not sure you qualify.

Talk to your local Indian health care provider, or contact your state Medicaid Office. Visit [go.cms.gov/mspresources](https://www.go.cms.gov/mspresources) to find someone to talk to in your state.



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# Medicare Savings Programs Information for American Indians and Alaska Natives:

Get help paying for Medicare costs if  
you have limited income and assets



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## What is the Medicare Savings Programs (MSP)?

It is a **Medicaid** program designed to help pay your Medicare costs if you have limited finances. To qualify for an MSP, you must have or be eligible for Medicare Part A and meet income and asset guidelines (see charts).

### Can I use an MSP to help pay for my Medicare and still receive services from my Indian Health Service, my Tribal Health Program, or my Urban Indian Health Program (ITU)?

Yes, you can always receive services from your ITU. But by enrolling in Medicare with help from an MSP, you benefit by having greater access to services that may not be provided by your ITU and your tribal community benefits through increased resources to your ITU program. In addition, the MSP may help pay for costs, such as premiums, deductibles and co-payments, for services that you receive from a non-ITU provider.

There are three main MSPs that can help you save money on **premiums** and other **costs for 2022**. These amounts may increase each year. If your income and resources are slightly higher, you should still apply. For the most up to date information for each year go to: <https://www.medicare.gov/your-medicare-costs/get-help-paying-costs/medicare-savings-programs>

1. Qualified Medicare Beneficiary (QMB) Program
2. Specified Low-Income Medicare Beneficiary (SLMB) Program
3. Qualifying Individual (QI) Program

### Three key questions

If you answer “**yes**” to these three questions, call your local or state Medicaid office to see if you qualify for an MSP in your state.

1. Do you have or are you eligible for **Medicare Part A** (also known as hospital insurance)?
2. Is your **income** at or below the income limits listed below?
3. Do you have **limited** resources? Countable resources include money in a checking or savings account, stocks, and bonds.

Medicare Saving Programs	Individual Monthly Income Limit *	Married Couple Monthly Income Limit *	Helps Pay For
QMB	\$1,153	\$1,546	<ul style="list-style-type: none"> <li>• Part A premiums</li> <li>• Part B premiums</li> <li>• Deductibles, coinsurance, and copayments</li> </ul>
SLMB	\$1,379	\$1,851	
QI	\$1,549	\$2,080	

(\*These monthly income limits are for 2022)

If you have income from working, you may qualify for these benefits even if your income is higher than these limits. Many states determine your income and resources, so you may qualify in your state even if you think you're above these limits. Limits are slightly higher in Alaska and Hawaii. Some states have higher resource levels or don't count resources. Check with your state to find out more.

When you count your resources, don't include your home, one car, burial plots, burial costs (up to \$1,500), life insurance with a cash value of less than \$1,500, furniture, or other household and personal items. Also, when you count your resources don't include Indian-specific property, such as Individual Indian Money accounts, real property or natural resource interests within reservation boundaries (or former reservation boundaries), or items of traditional or cultural relevance.

Medicare Saving Programs	Individual Resource Limit	Married Couple Resource Limit
QMB	\$8,400	\$12,600
SLMB	\$8,400	\$12,600
QI	\$8,400	\$12,600

If you qualify for a QMB, SLMB, or QI program, you will also automatically qualify to get **Extra Help**, the federal program that helps pay your Medicare prescription drug (Part D) plan costs.

## Glossary

**Medicare** A federal program that helps care for the elderly and disabled. People over the age of 65, people younger than 65 who are disabled, and people with end-stage kidney disease all qualify for Medicare—including AI/ANs.

**Medicare Part A (Hospital Insurance)** In general, Part A covers hospital care, limited skilled nursing facility (SNF) care, and hospice and home health services.

**Medicare Part B** covers two types of services: medically necessary services and preventive services. In general, Part B covers things like clinical laboratory services, ambulance service, durable medical equipment, mental health care, getting a second opinion before surgery, and limited outpatient prescription drugs.

**Medicare Part D** is a plan through Medicare that helps cover the cost of prescription drugs.

**Medicaid** is a joint federal and state program that helps with medical costs for some people with limited income and resources. Medicaid also offers benefits not normally covered by Medicare, like nursing home care and personal care services.