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## 2024 Medicare and Medicaid Low Income Subsidy Amounts

**Sales Audience:** Medicare

### Summary

Florida has a large population of Medicare beneficiaries who receive help from the government to pay for their health and prescription costs. This article includes a chart that shows premiums and copays members will pay based on the level of financial help they receive.

### Details

Florida has a large population of Medicare beneficiaries that receive assistance from the government to pay for their health and prescription costs. Beneficiaries qualify by contacting the Social Security Administration (SSA). SSA then contacts Medicare which notifies each beneficiary of their awarded level of assistance.

Beneficiaries may be awarded full dual eligible status which means they qualify for both Medicare assistance and Medicaid. Most beneficiaries under this scenario keep their Original Medicare Part A and B and then are assigned a Part D plan. They can also be given one of four lesser assistance levels which entitle them to reduced Rx copays and premiums and allow them to choose a Medicare Advantage (MA) or Part D plan.

#### **2024 Part D and Medicare Advantage Reduced Premiums**

Beneficiaries who are awarded any assistance from Medicare receive a reduction in their MA or Part D premium. The premiums are reduced by applying the assigned subsidy premium to the benchmark less the full plan premium (i.e. BlueMedicare Premier Rx: \$76.70 - \$37.74 (rounded to \$37.70) = \$39.00). See the chart for Florida Blue's 2024 Part D and MA reduced premiums.

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Extra Help Premium Levels	
	Institutionalized Members in a Nursing or Skilled Nursing Facility (100% assistance)
Premier Rx	\$39.00
Complete Rx	\$143.90
Classic, Classic Plus, Premier, Preferred HMOs  Complete and Total D-SNP QMB/SLMB, QI, QDWI qualifiers	\$0.00
Choice PPO	\$29.70
Select PPO	\$60.00
Value PPO	\$0.00

**Part D Plans and Rx Copays**

Some Part D plans are automatically assigned dual eligible beneficiaries if their plan premiums are under the annual benchmark in each Medicare region (\$37.74 for FL). The benchmark is the average monthly bid amount comprised in part of the weighted average of the standardized bid amounts for each prescription drug plan and for each MA plan with an Rx benefit. Florida Blue’s Part D plans, priced at \$76.70 and \$181.60, obviously did not qualify for this auto assignment of dual eligible beneficiaries.

Dual eligible beneficiaries can choose to opt out of their assigned plan and choose a Part D plan of their liking. They pay the difference of the Florida benchmark and their desired plan’s premium each month. Completing a Part D application will override the auto-assigned plan and place them into their desired plan.

Any beneficiary receiving assistance from Medicare to pay for their prescriptions, will also see a reduction in their copays. The amount the copays are reduced is based upon the level of assistance they receive. Below are the copay reductions for all Part D and Medicare Advantage plans with prescription drug coverage.

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Extra Help Part D Copay Levels				
	Members enrolled in a Florida Blue DSNP or institutionalized in a Nursing Facility	Member's income is above 100% of the current poverty level	Member's income is less than 135% of the current poverty level	Member's income is less than 150% of the current poverty level
Initial Coverage: member's copays + drug plan's contribution less or equal to \$5,030				
Preferred Generics	\$0 copay	\$1.55 copay	\$4.50 copay	\$4.50 copay
Generics	\$0 copay	\$1.55 copay	\$4.50 copay	\$4.50 copay
Preferred Brands	\$0 copay	\$4.60 copay	\$11.20 copay	\$11.20 copay
Non-Preferred Brands	\$0 copay	\$4.60 copay	\$11.20 copay	\$11.20 copay
Specialty Drugs	\$0 copay	\$4.60 copay	\$11.20 copay	\$11.20 copay
Coverage Gap: after member & drug plans costs are greater than \$5,030 but member/manufacturer paid less than \$8,000				
Preferred Generics	\$0 copay	\$1.55 copay	\$4.50 copay	\$4.50 copay
Generics	\$0 copay	\$1.55 copay	\$4.50 copay	\$4.50 copay
Preferred Brands	\$0 copay	\$4.60 copay	\$11.20 copay	\$11.20 copay
Non-Preferred Brands	\$0 copay	\$4.60 copay	\$11.20 copay	\$11.20 copay
Specialty Drugs	\$0 copay	\$4.60 copay	\$11.20 copay	\$11.20 copay
Catastrophic: member's out-of-pocket & drug manufacturer discounts reach \$8,000				
Preferred Generics	\$0 copay	\$0 copay	\$0 copay	\$0 copay
Generics	\$0 copay	\$0 copay	\$0 copay	\$0 copay
Preferred Brands	\$0 copay	\$0 copay	\$0 copay	\$0 copay
Non-Preferred Brands	\$0 copay	\$0 copay	\$0 copay	\$0 copay
Specialty Drugs	\$0 copay	\$0 copay	\$0 copay	\$0 copay

**Note:** The Health Care Reform Coverage Gap discount program (25% for generics; 25% for Brands) does not apply to members receiving any level of subsidy.

### Next Steps

Review the information in this article so that you are prepared to answer questions from members and groups.