



Low Income Subsidy Groups and Costs

Extra Help Group	Group 1	Group 2	Group 3
----- Prescription Drug Program Costs	Income below 100% FPL Resources below \$6,000/\$9,000	Income between 100% and 135% FPL Resources below \$6,000/\$9,000	Income below 150% FPL Resources between \$6,000/\$9,000 and \$10,000/\$20,000
Premium \$35/month	\$0	\$0	Sliding scale based on income
Deductible \$250 per year	\$0	\$0	\$50
Coinsurance up to \$3600 out-of- pocket	\$1/\$3 co-pay	\$2/\$5 co-pay	15% coinsurance
Catastrophic Coverage 5% or \$2/\$5 co-pay	\$0	\$0	\$2/\$5 co-pay