national council on aging

| Low-Income Subsidy (LIS)/Extra Help (2026) - 48 STATES + DC | | | | | | | |
|---|---|---|---|---|---|---|---|
| **Beneficiary Group** | **Annual Income Eligibility Requirement** | **Monthly Income Eligibility Requirement** | **Asset Eligibility Requirement** | **Need to apply for LIS?** | **Monthly Premium** | **Annual Deductible** | **Copay/Coinsurance Plan's Formulary Drugs** |
| Full-Benefits Duals: Institutionalized or receiving Home and Community-based Services | Meet State Medicaid financial eligibility | Meet State Medicaid financial eligibility | Meet State Medicaid financial eligibility | No, receive it automatically | Check your state-specific benchmark amount | No | None |
| Full-Benefit Duals: income ≤ 100% FPL | Meet State Medicaid/MSP financial eligibility | Meet State Medicaid/MSP financial eligibility | Meet State Medicaid/MSP financial eligibility | No, receive it automatically | Check your state-specific benchmark amount | No | *Copay:* $1.60 generic /$4.90 brand<br><br>*Catastrophic Copay:* $0 |
| Full-Benefit Duals: income > 100% FPL | Meet State Medicaid/MSP financial eligibility | Meet State Medicaid/MSP financial eligibility | Meet State Medicaid/MSP financial eligibility | No, receive it automatically | Check your state-specific benchmark amount | No | *Copay:* $5.10 generic /$12.65 brand<br><br>*Catastrophic Copay:* $0 |
| Non duals with income between ≤ 150% FPL | **Single:** $24,180*<br><br>**Couple:** $32,700* | **Single:** $2,015*<br><br>**Couple:** $2,725* | **Single:** $16,590 / $18,090**<br><br>**Couple:** $33,100 / $36,100** | Yes | Check your state-specific benchmark amount | No | *Coinsurance: 0%*<br><br>*Copay: $5.10 generic /$12.65 brand*<br><br>*Catastrophic Copay: $0* |

* Income amounts reflect threshold with the $20 monthly income disregard (annually = $240); income is rounded to the nearest whole dollar.
** Asset limits include amount with $1,500/person burial allowance.

**Income Levels Source:** https://aspe.hhs.gov/poverty-guidelines

**Asset/Resource Levels:** https://www.cms.gov/about-cms/contact/newsroom

**Part D Cost-Sharing Source:** https://www.cms.gov/files/document/2026-announcement.pdf

| Low-Income Subsidy (LIS)/Extra Help (2026) - ALASKA | | | | | | | |
|---|---|---|---|---|---|---|---|
| **Beneficiary Group** | **Income Eligibility Requirement*** | **Monthly Income Eligibility Requirement*** | **Asset Eligibility Requirement**** | **Need to apply for LIS?** | **Monthly Premium** | **Annual Deductible** | **Copay/Coinsurance Plan's Formulary Drugs** |
| Full-Benefits Duals: Institutionalized or receiving Home and Community-based Services | Meet State Medicaid financial eligibility | Meet State Medicaid financial eligibility | Meet State Medicaid financial eligibility | No, receive it automatically | Check your state-specific benchmark amount | No | None |
| Full-Benefit Duals: income ≤ 100% FPL | Meet State Medicaid/MSP financial eligibility | Meet State Medicaid/MSP financial eligibility | Meet State Medicaid/MSP financial eligibility | No, receive it automatically | Check your state-specific benchmark amount | No | *Copay:* $1.60 generic /$4.90 brand<br><br>*Catastrophic Copay:* $0 |
| Full-Benefit Duals: income > 100% FPL | Meet State Medicaid/MSP financial eligibility | Meet State Medicaid/MSP financial eligibility | Meet State Medicaid/MSP financial eligibility | No, receive it automatically | Check your state-specific benchmark amount | No | *Copay:* $5.10 generic /$12.65 brand<br><br>*Catastrophic Copay:* $0 |
| Non duals with income between ≤ 150% PL | **Single:** $30,165*<br><br>**Couple:** $40,815* | **Single:** $2,514*<br><br>**Couple:** $3,401* | **Single:** $18,090**<br><br>**Couple:** $36,100** | Yes | Check your state-specific benchmark amount | No | *Coinsurance: 0%*<br><br>*Copay: $5.10 generic /$12.65 brand*<br><br>*Catastrophic Copay: $0* |

** Asset limits include amount /with $1,500/person burial allowance.
**Income Levels Source:** https://aspe.hhs.gov/poverty-guidelines

**Asset/Resource Levels:** https://www.cms.gov/about-cms/contact/newsroom

**Part D Cost-Sharing Source:** https://www.cms.gov/files/document/2026-announcement.pdf

| Low-Income Subsidy (LIS)/Extra Help (2026) - HAWAII | | | | | | | |
|---|---|---|---|---|---|---|---|
| **Beneficiary Group** | **Income Eligibility Requirement** | **Monthly Income Eligibility Requirement** | **Asset Eligibility Requirement** | **Need to apply for LIS?** | **Monthly Premium** | **Annual Deductible** | **Monthly Income Eligibility Requirement*** |
| Full-Benefits Duals: Institutionalized or receiving Home and Community-based Services | Meet State Medicaid financial eligibility | Meet State Medicaid financial eligibility | Meet State Medicaid financial eligibility | No, receive it automatically | Check your state-specific benchmark amount | No | None |
| Full-Benefit Duals: income ≤ 100% FPL | Meet State Medicaid/MSP financial eligibility | Meet State Medicaid/MSP financial eligibility | Meet State Medicaid/MSP financial eligibility | No, receive it automatically | Check your state-specific benchmark amount | No | *Copay:* $1.60 generic /$4.90 brand<br><br>*Catastrophic Copay:* $0 |
| Full-Benefit Duals: income > 100% FPL | Meet State Medicaid/MSP financial eligibility | Meet State Medicaid/MSP financial eligibility | Meet State Medicaid/MSP financial eligibility | No, receive it automatically | Check your state-specific benchmark amount | No | *Copay:* $5.10 generic /$12.65 brand<br><br>*Catastrophic Copay:* $0 |
| Non duals with income between ≤ 150% FPL | **Single:** $27,780*<br><br>**Couple**: $37,575* | **Single:** $2,315*<br><br>**Couple:** $3,131* | **Single:** $18,090**<br><br>**Couple:** $36,100** | Yes | Check your state-specific benchmark amount | No | *Coinsurance: 0%*<br><br>*Copay: $5.10 generic /$12.65 brand*<br><br>*Catastrophic Copay: $0* |

*This publication was supported by the Administration for Community Living (ACL), U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling $14,707,650.00 with 100 percent funding by ACL/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by ACL/HHS or the U.S. Government.*

** Asset limits include amount /with $1,500/person burial allowance.

**Income Levels Source:** https://aspe.hhs.gov/poverty-guidelines

**Asset/Resource Levels:** https://www.cms.gov/about-cms/contact/newsroom

**Part D Cost-Sharing Source:** https://www.cms.gov/files/document/2026-announcement.pdf

# 2026 State Benchmark Premium Amounts

The Low-Income Subsidy (LIS)/Extra Help program pays for your Part D premium up to a state-specific benchmark amount. **Extra Help will pay the full cost of your Part D premium** when you enroll in a Part D plan with a premium at or below the specified benchmark amount for your state.

Listed below is each state-specific benchmark. If you choose to enroll in a plan that has a monthly premium above your state's benchmark amount or a plan that offers enhanced coverage (coverage that provides additional benefits not required of Part D plans by law), you will have to pay the difference. **Paying a higher premium for a plan may be necessary to ensure that plan covers the drugs you need to be covered by Extra Help.**

| State | Benchmark Amount |
|---|---|
| **Alabama** | $ 27.74 |
| **Alaska** | $ 0 |
| **Arizona** | $ 16.95 |
| **Arkansas** | $ 8.93 |
| **California** | $ 12.00 |
| **Colorado** | $ 35.24 |
| **Connecticut** | $ 35.76 |
| **Delaware** | $ 31.21 |
| **District of Columbia** | $ 31.21 |
| **Florida** | $ 4.82 |
| **Georgia** | $ 25.42 |
| **Hawaii** | $ 45.60 |
| **Idaho** | $ 37.60 |
| **Illinois** | $ 15.20 |
| **Indiana** | $ 38.44 |
| **Iowa** | $ 41.47 |
| **Kansas** | $ 55.20 |
| **Kentucky** | $ 38.44 |
| **Louisiana** | $ 32.89 |
| **Maine** | $ 21.72 |
| **Maryland** | $ 31.21 |
| **Massachusetts** | $ 35.76 |

| | |
|---|---|
| **Michigan** | $ 8.75 |
| **Minnesota** | $ 41.47 |
| **Mississippi** | $ 23.84 |
| **Missouri** | $ 43.03 |
| **Montana** | $ 41.47 |
| **Nebraska** | $ 41.47 |
| **Nevada** | $ 9.48 |
| **New Hampshire** | $ 21.72 |
| **New Jersey** | $ 54.17 |
| **New Mexico** | $ 0 |
| **New York** | $ 58.82 |
| **North Carolina** | $ 36.17 |
| **North Dakota** | $ 41.47 |
| **Ohio** | $ 31.38 |
| **Oklahoma** | $ 28.24 |
| **Oregon** | $ 10.46 |
| **Pennsylvania** | $ 32.71 |
| **Rhode Island** | $ 35.76 |
| **South Carolina** | $ 35.66 |
| **South Dakota** | $ 41.47 |
| **Tennessee** | $ 27.74 |
| **Texas** | $ 4.82 |
| **Utah** | $ 37.60 |
| **Vermont** | $ 35.76 |
| **Virginia** | $ 24.56 |
| **Washington** | $ 10.46 |
| **West Virginia** | $ 32.71 |
| **Wisconsin** | $ 21.12 |
| **Wyoming** | $ 41.47 |

***Source:*** *https://www.cms.gov/files/document/regional-rates-and-benchmarks-2026.pdf*