

PROGRAM TITLE	BENEFITS	ELIGIBILITY	INCOME LIMITS	RESOURCE LIMIT	GOVERNMENT AGENCY																									
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MEDICARE – Part A Hospital Insurance Program	Coverage for acute hospital care; limited coverage for skilled nursing home, hospice and home care Deductible: \$1,340 per benefit period Copayments: \$335/day for hospital days 61-90; \$670/day for hospital day 91 (up to a max of "lifetime reserve days" over your lifetime) and all costs beyond lifetime reserve days \$167.50/day for skilled nursing home days 21-100	Persons 65+, eligible for Social Security or Railroad Retirement benefits; or who wish to purchase coverage although they are not eligible for Social Security or Railroad Retirement; or who have been disabled for at least 24 months; and people with End Stage Renal Disease (ESRD).	None	None	Enrollment: Contact local Social Security office or call: 1-800-772-1213 or visit www.ssa.gov or www.medicare.gov Part A claims: Empire Medicare Services at 1-800-MEDICARE or visit https://www.empireblue.com/new-york-medicare/	Enrollment: Contact local Social Security office or call 1-800-772-1213 or visit www.ssa.gov or www.medicare.gov Part A claims: Empire Medicare Services at 1-800-MEDICARE or visit https://www.empireblue.com/new-york-medicare/																								
MEDICARE — Part B Medical Insurance	Limited coverage for physicians, outpatient services, diagnostic tests and durable medical equipment Deductible: \$183 per year Premium: \$134 per month for most enrollees	Same as above	Part B Means-Tested Based on your modified adjusted gross income as reported on your 2017 tax return: <table border="1"> <thead> <tr> <th>Ind. Tax Return</th> <th>Joint Tax Return</th> <th>You Pay</th> </tr> </thead> <tbody> <tr> <td>\$85,000 or below</td> <td>\$170,000 or below</td> <td>\$ 134.00</td> </tr> <tr> <td>\$85,001 - \$107,000</td> <td>\$107,001 - \$214,000</td> <td>\$ 187.50</td> </tr> <tr> <td>\$107,001 - \$133,500</td> <td>\$214,001 - \$267,000</td> <td>\$ 267.90</td> </tr> <tr> <td>\$133,501 - \$160,000</td> <td>\$267,001 - \$320,000</td> <td>\$ 348.30</td> </tr> <tr> <td>above \$160,000</td> <td>above \$320,000</td> <td>\$ 428.60</td> </tr> </tbody> </table>	Ind. Tax Return	Joint Tax Return	You Pay	\$85,000 or below	\$170,000 or below	\$ 134.00	\$85,001 - \$107,000	\$107,001 - \$214,000	\$ 187.50	\$107,001 - \$133,500	\$214,001 - \$267,000	\$ 267.90	\$133,501 - \$160,000	\$267,001 - \$320,000	\$ 348.30	above \$160,000	above \$320,000	\$ 428.60	None	Enrollment: Contact local your Social Security office or call: 1-800-772-1213 or visit www.ssa.gov or www.medicare.gov Part B claims: Empire Medicare Services . Call 1-800-MEDICARE or visit https://www.empireblue.com/new-york-medicare/ Emblem Health also provides Part B coverage. Call 1-800-447-9169 or visit http://www.emblemhealth.com/Our-Plans/Medicare.aspx	Enrollment: Contact your local Social Security office or call 1-800-772-1213 or visit www.ssa.gov or www.medicare.gov Part B claims: Empire Medicare Services at 1-800-MEDICARE or visit https://www.empireblue.com/new-york-medicare/						
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MEDICARE — Part D Prescription Drug Coverage	Coverage for prescription drugs: <ul style="list-style-type: none">• Deductible: Maximum of \$405• Premium: Benchmark premium for 2018 is \$38.98 in New York State, but higher income individuals will pay more.• Initial Period: pay 25% of the cost up to \$3,750• Donut Hole: When drug costs exceed \$3,750 and go up to \$5,000, you will pay 35% of the price for the brand name drug and 44% of the price for the generic drug• Catastrophic Coverage: begins after the beneficiary has incurred more than \$5,000 in out-of-pocket expenses. You only pay only a small copayment for each covered drug until the end of the year	Same as above	If your filing status and yearly income in 2017 was: <table border="1"> <thead> <tr> <th>Individual</th> <th>Joint</th> <th>Married & Separate</th> <th>You pay (in 2018)</th> </tr> </thead> <tbody> <tr> <td>\$85,000 or less</td> <td>\$170,000 or less</td> <td>\$85,000 or less</td> <td>Your plan premium</td> </tr> <tr> <td>above \$85,000 up to \$107,000</td> <td>above \$170,000 up to \$214,000</td> <td>not applicable</td> <td>\$13.00 + your plan premium</td> </tr> <tr> <td>above \$107,000 up to \$133,500</td> <td>above \$214,000 up to \$267,000</td> <td>not applicable</td> <td>\$33.60 + your plan premium</td> </tr> <tr> <td>above \$133,501 up to \$160,000</td> <td>above \$267,001 up to \$320,000</td> <td>not applicable</td> <td>\$54.20 + your plan premium</td> </tr> <tr> <td>above \$160,000</td> <td>above \$320,000</td> <td>above \$85,000</td> <td>\$74.80 + your plan premium</td> </tr> </tbody> </table>	Individual	Joint	Married & Separate	You pay (in 2018)	\$85,000 or less	\$170,000 or less	\$85,000 or less	Your plan premium	above \$85,000 up to \$107,000	above \$170,000 up to \$214,000	not applicable	\$13.00 + your plan premium	above \$107,000 up to \$133,500	above \$214,000 up to \$267,000	not applicable	\$33.60 + your plan premium	above \$133,501 up to \$160,000	above \$267,001 up to \$320,000	not applicable	\$54.20 + your plan premium	above \$160,000	above \$320,000	above \$85,000	\$74.80 + your plan premium	None Low income subsidy (LIS/"Extra Help") Extra Help is available if the following income and asset limits apply: Income: \$18,090 for an individual \$24,360 for a married couple Resource: \$13,820 for an individual \$27,600 for a married couple	Enrollment: 1-800-MEDICARE Or visit: www.medicare.gov www.ssa.gov	Enrollment: 1-800-MEDICARE Or visit: www.medicare.gov www.ssa.gov
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QUALIFIED MEDICARE BENEFICIARY PROGRAM (QMB)	Pays for Medicare premiums, coinsurance, deductibles and copayments	Persons age 65+. Blind or Disabled who have low income and low resources must have Medicare Part A, Medicare Part B or both in order to apply	Individual \$1,032 Couple \$1,392	Individual..... \$7,560 Couple..... \$11,340 Exemptions: \$1,500 for burial expenses; burial plot, home; one car; furniture; other household and personal items	HRA Infoline, call 1-718-557-1399 or call: 1-800-MEDICARE Or visit: www.ssa.gov or www.medicare.gov	Call local Dept. of Social Services or call: 1-800-MEDICARE Or visit: www.ssa.gov or www.medicare.gov																								
SPECIFIED LOW INCOME MEDICARE BENEFICIARY PROGRAM (SLMB)	Pays for Medicare Part B premium only	Same as above	Individual \$1,234 Couple \$1,666	Individual..... \$7,560 Couple..... \$11,340 Exemptions: \$1,500 for burial expenses; burial plot, home; one car; furniture; other household and personal items	Same as above	Same as above																								
QUALIFYING INDIVIDUALS (QI)	Pays for Medicare Part B premium only	Same as above	Individual \$1,386 Couple \$1,872	Individual..... \$7,560 Couple..... \$11,340 Exemptions: \$1,500 for burial expenses; burial plot, home; one car; furniture; other household and personal items	Same as above	Same as above																								
MEDICAID	Comprehensive health care benefits, including coverage for prescription drugs, physician services, hospitals, nursing homes and home care Community spouse allowances when other spouse is institutionalized: Income: maximum of \$3,090 Resources: maximum of \$123,600	Persons 65+, Blind or Disabled who have low income and low resources; and most persons under 65 who meet Safety Net Assistance Program budget rules	Individual \$ 842 Couple \$1,233	Individual..... \$15,150 Couple..... \$22,200 Exemptions: \$1,500 per person for burial fund or any amount in irrevocable pre-need funeral agreements; home; car; health insurance premiums	New applications are handled through Medical Assistance Program's (MAP's) neighborhood borough - based sites Information Citywide: HRA Infoline: 1-718-557-1399 Or visit: http://www1.nyc.gov/nyc-resources/service/3944/medicaid	Contact local Department of Social Services office or call: 1-800-541-2831 Or visit: https://www.health.ny.gov/health_care/medicaid/																								
MEDICAID SPENDDOWN PROGRAM	Community, hospital or nursing home coverage after eligible individual or couple has "spent down" his or her "surplus income" to Medicaid level	Persons 65+, Blind or Disabled who have incurred medical expenses equal to or greater than their "surplus income" amount or have pre-paid their surplus income	No maximum, provided that medical expenses reduce net income to levels defined in the box above or individuals pre-pay their surplus income amount	Same as Medicaid	Same as Medicaid	Same as Medicaid																								
ELDERLY PHARMACEUTICAL INSURANCE COVERAGE (EPIC)	Assistance in paying for prescription drugs. Only people who have Part D may enroll in EPIC. EPIC will pay your Part D premium up to \$39/month. EPIC will provide secondary coverage after any required deductibles are met.	Residents age 65+ who are enrolled in a Part D program	EPIC Fee Plan: Individual \$20,000 Couple..... \$26,000 EPIC Deductible Plan: Individual \$20,001 - \$75,000 Couple \$26,001 - \$100,000	None	New York State Dept. of Health New York State Office for the Aging 1-800-332-3742 Or visit: https://www.health.ny.gov/health_care/epic/	New York State Dept. of Health New York State Office for the Aging 1-800-332-3742 Or visit: https://www.health.ny.gov/health_care/epic/																								

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SOCIAL SECURITY Old Age, Survivors and Disability Insurance (OASDI)	Monthly cash benefits, based on prior employment and amount withheld from earnings during employment years	Retired wage earners age 65+ (age 66 if born in 1943 and up to age 67 if born in 1960 or later); or 62+ for reduced benefits; surviving spouses and/or children; and disabled workers	Age 62 to full retirement age (66 for those born from 1943 to 1954); \$17,040; benefit reduced by \$1 for every \$2 earned <u>over</u> limit Year of full retirement age (months prior to full retirement age): \$45,360; benefit reduced \$1 for every \$3 <u>over</u> the limit Full retirement age and older : no limit	None	Social Security Administration: 1-800-772-1213 Or visit: www.ssa.gov	Call local Social Security Administration office, or call 1-800-772-1213 Or visit: www.ssa.gov
SUPPLEMENTAL SECURITY INCOME (SSI)	Provides monthly cash benefits to meet food, clothing and shelter needs. The amount of the benefits depends on beneficiary's income and whether the person lives "alone," "with others," in "the household of another" or in a residential care facility Maximum Benefit Amounts (monthly): Living Alone Individual \$ 837 + \$20* Couple \$1,229 + \$20* Living with Others Individual \$ 773 + \$20* Couple \$1,171 + \$20* Living in the Household of Another Individual \$ 523 + \$20* Couple \$ 796 + \$20* *first \$20 income is exempt	Persons 65+, Blind or Disabled (any age) who have low income and low resources	SSI is intended for those with low or no income. To find out if you qualify, please use the benefits screening tool available at www.ssa.gov .	Individual: \$2,000 Couple: \$3,000 Exemptions: \$1,500 per person for burial fund or any amount in irrevocable pre-need funeral agreements; burial plots or spaces for oneself or immediate family; life insurance policies owned with a face value of \$1,500 or less per person; house the person lives in; one vehicle, if is used for transportation for oneself or a member of their household; household goods and personal effects; property used in a trade or business; if disabled or blind, money or property set aside under a Plan to Achieve Self-Support (PASS)	Same as above	Same as above
SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) <i>[Formerly known as The "Food Stamps" Program]</i>	Monthly allotment of benefits through a debit card system for the purchase of food items; dollar value depends on household size and income	Low income households	Monthly Gross Income Limits for Households with an Elderly or Disabled Member or with Dependent Care Expenses: Individual \$2,010 Couple \$2,707 * If your household's gross income is below these amounts, it does not ensure eligibility. A SNAP budget must be calculated by completing an application	There is no resource test for households with elderly/disabled members whose income falls at or below the amount listed, unless a member of the household has been sanctioned or disqualified from participation in SNAP. Households with members age 60+ or disabled members whose gross income exceeds these amounts may still be eligible for SNAP if their countable resources do not exceed \$3,500.	Call 311 or call HRA Infoline, 1-718-557-1399 Or visit : http://www1.nyc.gov/nyc-resources/service/1113/snap-food-stamps	Call local Department of Social Services office, or call: 1-800-342-3009 Or visit: http://www.ny.gov/services/apply-snap
HOME ENERGY ASSISTANCE PROGRAM (HEAP)	Cash payment or credit to energy supplier; depends on household composition, energy bills Benefit amounts vary by household size, ages and type of energy	Low income <u>homeowners</u> or <u>renters</u>	Monthly Gross Income Limits: Individual \$2,318 Couple \$3,031	No resource limit for regular benefits For emergency benefit: \$3,000 resource limit if any member of the household is 60 or older NOTE: Heating equipment repair and replacement is available to help low income home owners repair or replace direct heating components.	Call 311 or call HRA Infoline, 1-718-557-1399 Or visit: https://www1.nyc.gov/site/hra/help/energy-assistance.page	Call local district contacts (see http://otda.ny.gov/programs/heap/contacts/) Or visit: http://www.ny.gov/services/apply-heap
SENIOR CITIZEN RENT INCREASE EXEMPTION (SCRIE in NYC)	Relief from the obligation to pay rent increases; landlord is compensated by reduction in real estate taxes	Persons 62+ who live in rent controlled or rent stabilized apartments; hotel rooms; or Mitchell-Lama housing; and whose rent is more than one-third of their income; or elderly persons, receiving public assistance, whose rent exceeds the maximum shelter allowance. SCRIE is for those living in NYC and is administered through the NYC Dept. of Finance. Those outside of NYC can apply for similar support through the Division of Housing & Community Renewal (DHCR).	Yearly household income: \$50,000 in NYC. Outside NYC, varies by county	None	New York City Dept. of Finance. Call 311 . Or visit: http://www1.nyc.gov/nyc-resources/service/2424/senior-citizen-rent-increase-exemption-scrie	Division of Housing & Community Renewal (DHCR), call 1-914-948-4434 . Or visit : http://www.nyshcr.org/rent/about.htm
NEW YORK STATE SCHOOL TAX RELIEF PROGRAM (STAR)	Basic STAR: exempts the first \$30,000 of the full value of the home from school taxes Enhanced STAR: exempts the first \$66,800 from the full value of the home	Enhanced program: individuals 65 and older who meet income limits Basic program: any age Both programs: persons must own and live in one, two or three family home, farm, mobile home, condominium or cooperative apartment APPLICATION DATES: January - March (<i>varies by locality</i>)	Enhanced Program: Individual/couple with income up to \$86,000 Basic Program: Income limit of \$500,000. The income limit applies to the combined income of only the owners and owners' spouses who reside at the property.	None for both Enhanced and Basic programs	New York State Department of Taxation and Finance: 1-518-457-2036 Or visit: https://www.tax.ny.gov/pit/property/star/	New York State Department of Taxation and Finance: 1-518-457-2036 Or visit: https://www.tax.ny.gov/pit/property/star/
REAL PROPERTY TAX CREDIT (IT-214)	Tax credit or payment of up to \$375 for homeowners and renters	Individual has paid real property taxes or rent and occupied the same New York residence for six months or more; value of property is \$85,000 or less or monthly rent, not counting heat, gas, electricity, furnishing or board, is \$450 or less APPLICATION DATE: submit with New York State tax return or, if not filing a State tax return, any time during the year	Up to \$18,000/year	None	New York State Department of Taxation and Finance: 1-518-457-5181 Or visit: https://www.tax.ny.gov/pit/credits/real_property_tax_credit.htm	New York State Department of Taxation and Finance: 1-518-457-5181 Or visit: https://www.tax.ny.gov/pit/credits/real_property_tax_credit.htm
SENIOR CITIZENS HOMEOWNERS EXEMPTION (SCHE)	Sliding-scale real estate tax exemption of up to 50%; renewable annually	Real estate owners 65+ who use property exclusively as their <u>legal residence</u> APPLICATION DATES: July 15—March 15	Yearly income (combined): * ** up to \$50,000: 50% Exemption \$50,001 - \$58,399: 45% - 5% Exemption * Individuals can deduct unreimbursed medical and prescription drug expenses from income. ** Program was changed on July 1, 2017; if eligible, can apply the benefit retroactively to July 1, 2017 in 2018	None	New York State Department of Taxation and Finance: 1-518-457-5181 Or visit: http://www1.nyc.gov/site/finance/benefits/landlords-sche.page	New York State Department of Taxation and Finance: 1-518-457-5181 Or visit: https://www.tax.ny.gov/pit/property/exemption/seniorexempt.htm