TABLE 1: LIS Income Limits

Family Size	0 thru 135% FPL Full Subsidy	136 thru 140% FPL 75% Subsidy	141 thru 145% FPL 50% Subsidy	146 thru 149% FPL 25% Subsidy
1	0 - 1170	1170.01- 1214	1214.01 - 1257	1257.01 – 1299.99
2	0 - 1575	1575.01 - 1634	1634.01- 1692	1692.01 – 1749.99
3	0 - 1980	1980.01- 2054	2054.01 - 2127	2127.01 – 2199.99
4	0 - 2385	2385.01 - 2474	2474.01- 2562	2562.01 – 2649.99
5	0 - 2790	2790.01 - 2894	2894.01 - 2997	2997.01 – 3099.99
6	0 - 3195	3195.01 - 3314	3314.01 - 3432	3432.01 – 3549.99
7	0 - 3600	3600.01 - 3734	3734.01 - 3867	3867.01 – 3999.99
8	0 - 4005	4005.01 - 4154	4154.01 - 4302	4302.01 – 4449.99
For Each Additional Member	$405	$405 - $420	$420 – $435	$435 - $450

TABLE 2: LIS Eligibility Calculation

Subsidy Calculation for One Person

Countable Resources in $	≤135%FPL	136% thru 140% FPL	141% thru 145% FPL	146% thru 149% FPL	≥150%
≤ $6,600	A	C	D	E	F
> $6,600 to ≤ 11,010	B	C	D	E	F
> $11,010	F	F	F	F	F

Subsidy Calculation for a Couple

Countable Resources	≤ 135% FPL	136% thru 140% FPL	141% thru 145% FPL	146% thru 149%	≥ 150%
≤ $9,910	A	C	D	E	F
>$9,910 to ≤ 22,010	B	C	D	E	F
> $22,010	F	F	F	F	F

***These resource limits do not include $1,500 per person burial expense.**

TABLE 3: LIS Benefit Determination

Subsidy	Subsidized Monthly Premium	Yearly Deductible	Pre- Catastrophic Co-pay per Prescription	Coverage Gap? Y/N	Catastrophic Co-pay per Prescription
A	100%	$0	$2.40/$6.00	N	$0
B	100%	$60	15%	N	$2.40/$6.00
C	75%	$60	15%	N	$2.40/$6.00
D	50%	$60	15%	N	$2.40/$6.00
E	25%	$60	15%	N	$2.40/$6.00
F (No subsidy)	0%	$295	25%	Y	@5%