



State Resources for Seniors in Florida

Many seniors face high costs for their medical care and prescription drug coverage, and finding the funds to pay for these health care expenses can be stressful. We created this guide covering all of the available health insurance and prescription drug coverage programs in your state so you can take care of your health without worrying about the cost. Included in the guide are the benefits details, eligibility requirements, and application processes for available health insurance and prescription drug coverage programs for seniors in your state.

Health Insurance & Prescription Drug Coverage for Seniors

Medicaid

Florida's Medicaid program delivers reliable and affordable medical and non-medical care services to seniors who may otherwise struggle to pay for the support they need. Depending on the medical assessments conducted by the Department of Elder Affairs, seniors may be eligible for a wide range of supports, such as nursing home care, dental care, prescription drugs, transportation and homemaker services.

How to Apply

First, determine the services available in your area, then apply via the ACCESS Florida website if nursing home care is a viable option. Alternatively, if you think home-care services are more suitable to your needs, contact your Area Agency on Aging or call the Elder Helpline at (850) 414-2000 to arrange a medical screening. If you live in an area served by a PACE provider, contact the organization directly and it will assess your suitability.

Eligibility

Florida's Medicaid program strictly controls who benefits from its support, as its priority is to make health care available to the state's most vulnerable elders. Common eligibility criteria include being:

- Aged 65 or older (or 55+ if eligible for PACE)
- A U.S. citizen or legal alien
- A Florida resident
- Assessed as in need of nursing home levels of care
- Blind or have a qualifying disability

The applicant's income and assets greatly determine who can claim Medicaid support. The following table provides common examples, showing the income and asset limits for three Medicaid supports.

Medicaid Type	Individual Income*	Assets	Married Couple Income*	Assets
Nursing Home	\$2,523**	\$2,000	\$2,523 per spouse**	\$3,000

Home and Community-Based Services	\$2,523	\$2,000	\$2,523 per spouse	\$3,000
Aged and Disabled	\$997	\$5,000	\$1,343 per spouse	\$6,000

*Per month

**Applicant retains a monthly personal needs allowance of \$130

Medicare

Original Medicare consists of Part A, which covers services provided on an inpatient basis, and Part B, which covers outpatient services. For example, Part A covers nursing care provided during a hospital stay, while Part B covers things like doctor visits and durable medical equipment.

How to Apply

To apply for Medicare online, visit the Social Security Administration website and fill out the form. You can also apply by telephone or in person. Call (800) 772-1213 to speak with a representative or use the online locator to find a Social Security office near you.

Eligibility

To receive Medicare benefits, you must be at least 65 years old or have a qualifying disability or end-stage renal disease. Everyone pays a premium for Part B, but you may qualify for premium-free Part A coverage if you or your spouse worked and paid Medicare taxes for at least 10 years.

Medicare Advantage

Original Medicare is managed by the federal government, but Medicare Advantage Plans are sold by private insurance companies. Each plan must offer at least the same amount of coverage as Original Medicare, but many insurers offer extra benefits to make their plans more attractive to consumers.

How to Apply

Use the Find a Medicare Plan tool on Medicare.gov to compare Medicare Advantage Plans in your state. When you're ready to enroll, call (800) 633-4227 or contact the plan provider directly.

Eligibility

If you're eligible for Original Medicare, you are likely eligible for Medicare Advantage; however, confirm eligibility requirements with the plan provider.

Medicare Part D

Original Medicare doesn't cover most prescription drugs, so you may want to enroll in Medicare Part D, a supplemental plan that pays for a wide range of medications. Each plan has a formulary that explains how much coverage is provided for each type of drug. Most Medicare Advantage Plans include prescription drug coverage, and you can't enroll in Medicare Part D if you have a Medicare Advantage Plan that pays for prescription medications.

How to Apply

Use the Find a Medicare Plan tool on Medicare.gov to find a plan that meets your needs. When you're ready to enroll, contact the plan directly for instructions on applying for coverage.

Eligibility

To qualify for Medicare Part D, you must be enrolled in Medicare Part A and Medicare Part B (Original Medicare) or one of the few Medicare Advantage Plans that doesn't cover prescription drugs.

Medicare Savings Programs

Florida has three Medicare Savings Programs designed to make paying for out-of-pocket costs, deductibles and copays easier for the state's elders.

- **Qualified Medicare Beneficiary Program:** This MSP helps pay for Medicare Part A/Part B premiums, Part A/Part B deductibles and Part A/Part B coinsurance.
- **Specified Low-Income Medicare Beneficiary:** The SLMB program helps pay Medicare Part B premiums.
- **Qualified Individual:** The QI program also helps participants pay their Medicare Part B premiums, but it has higher income limits than the QMB and SLMB programs.

How to Apply

There are several ways to apply for QMB, SLMB and QI. They are:

- Make an appointment with your local Department of Children and Family Services office
- Download an application form and mail it to your local DCF office
- Alternatively, fax the form to (866) 886-4342
- Visit your nearest Aging Resource Center
- Call the Elder Helpline at (800) 963-5337

Eligibility

To be eligible for one of Florida's Medicare Savings Programs, you must be:

- A Florida resident
- A U.S. citizen or qualified non-resident
- Enrolled in Medicare Part A
- Enrolled in Medicare Part B
- Satisfy the program's financial guidelines

Program	Single Income Limits*	Married Income Limits*	Single Asset Limits*	Married Asset Limits*
Qualified Medicare Beneficiary Program	\$1,137	\$1,538	\$7,970	\$11,960
Special Low-Income Medicare Beneficiary	\$1,364	\$1,845	\$7,970	\$11,960
Qualified Individual	\$1,534	\$2,076	\$7,970	\$11,960

* As of January 2022