State Resources for Seniors in Georgia

At PayingforSeniorCare, we understand that learning about and accessing the assistance you need isn’t easy. We created this guide to help seniors and their families learn about the available financial assistance options for senior living and senior care in your state so you can focus on what matters: finding the right senior care for your loved one. In the following resource guide, learn about the financial assistance options for senior care and senior living in your state, what benefits the different programs offer, who is eligible, and how to apply.
Long-term care is a necessary health care service for more than two-thirds of U.S. seniors aged 65 and older. Those who need full-time medical supervision may require nursing home care, while those who are mostly independent but need help with activities of daily living, such as grooming, dressing and eating, may require in-home care, adult day care or the help of a residential assisted living facility. While these senior care options can be expensive, financial assistance is available through Medicaid and Medicare.

**Medicaid**

Georgia Medicaid works in partnership with the federal government to provide seniors and other Georgia residents with funding for nursing home care or in-home care. It also operates waiver programs that help cover the costs of assisted living or adult day care for those who need it.

**How to Apply**

To apply for Medicaid in Georgia, seniors can visit the Georgia Gateway Customer Portal and complete an online application.

For help with the application process, seniors can contact Georgia Medicaid by calling (877) 423-4746 or visiting their nearest Medicaid office in person.

**Eligibility**

Seniors hoping to obtain Medicaid coverage need to meet the following eligibility requirements:

- Aged 65 or older, legally blind or disabled
- Require nursing home care
- U.S. citizen or legal permanent resident
- Full-time Georgia resident

In addition to meeting the requirements above, Medicaid requires beneficiaries to meet strict financial limitations.
Single applicants must not have income exceeding $30,276 a year or assets exceeding $2,000. For married couples where both spouses are applying, their joint income must not be more than $60,552 a year, and their assets must not exceed $3,000. If only one spouse is applying, the asset limit is $2,000 for the applicant and $137,400 for the non-applicant.

<table>
<thead>
<tr>
<th></th>
<th>Income Limit*</th>
<th>Asset Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Applicant</td>
<td>$30,276</td>
<td>$2,000</td>
</tr>
<tr>
<td>Married Couple (both applicants)</td>
<td>$60,552</td>
<td>$3,000</td>
</tr>
<tr>
<td>Married Couple (one applicant)</td>
<td>$60,552</td>
<td>Applicant: $2,000</td>
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<tr>
<td></td>
<td></td>
<td>Non-applicant: $137,400</td>
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*per year

**Medicare**

Medicare is the federal health insurance program for older adults (65+) and some younger people with disabilities. Part A, which covers inpatient care, may also cover medically necessary care delivered in a skilled nursing facility.

**How to Apply**

To apply for Medicare online, visit the Social Security Administration website, agree to the terms of service and fill out the application. To apply by telephone, call (800) 772-1213. If you prefer to apply in person, use the SSA office locator to find a nearby Social Security office.

**Eligibility**

You may qualify for Medicare coverage if any of the following apply:
- You’re at least 65 years old.
- You have end-stage renal disease.
- You’re under age 65 and have a disability.

If you or your spouse worked and paid Medicare taxes for at least 10 years, you qualify for premium-free Part A coverage. You may also qualify for premium-free coverage if you’ve been receiving disability benefits for at least 24 months, you’re on kidney dialysis or you need a kidney transplant.
Community Care Services Program
The Community Care Services Program (CCSP) is a home and community-based waiver program available to seniors who would otherwise be placed in nursing homes. It’s provided in partnership with the state’s Area Agencies on Aging and covers community-based long-term care, such as in-home care and adult day health care, as well as emergency response systems, home-delivered meals and family caregiver assistance.

How to Apply
Seniors who wish to apply for this waiver program can call their nearest Area Agency on Aging at (866) 552-4464 to request an assessment.

Eligibility
To qualify for this waiver, seniors must pass a needs assessment to determine whether they require a nursing home level of care. They must also meet all eligibility requirements for Medicaid.

New Options Waiver/Comprehensive Supports Waiver Program
The New Options Waiver (NOW) and the Comprehensive Supports Waiver Program (COMP) are available to Georgia residents living with intellectual or developmental disabilities. These waiver programs may help seniors pay for a variety of health care costs, including adult day care, nursing care, in-home care and assisted living. They may also cover the cost of special medical equipment, respite care, transportation and home modifications, as needed.

How to Apply
Seniors applying for either of these waivers should gather documents, such as proof of citizenship, their Medicaid or Social Security card and any psychological reports from care facilities or primary caregivers that detail their disability. These documents should be provided, along with a completed application form, and mailed or delivered in person to any Department of Behavioral Health and Developmental Disabilities Office. Those who need help with the process can contact the department’s primary office at (404) 657-2252.

Eligibility
To qualify for this waiver, applicants must have a long-term disability that was diagnosed prior to turning 18 and have difficulties with adaptive functioning and daily tasks. Applicants must also be eligible for Medicaid.
Health Insurance & Prescription Drug Coverage for Seniors

**Medicaid**

Georgia Medicaid provides free health insurance for low-income families, children and seniors across the state. This program is funded jointly by the state and the federal government, and it provides coverage for health care services, such as primary care, prescription medications, dental care, eye care and mental health services. Medicaid may also cover transportation, home modifications and other services that are deemed medically necessary.

**How to Apply**

Seniors who wish to apply for Georgia Medicaid can visit the Georgia Gateway Customer Portal and complete an application online. Those who need help with the application process can visit a Medicaid office in person or call the state’s Medicaid agency at (877) 423-4746.

**Eligibility**

Medicaid is only available to those who are in dire need of health insurance and meet the program’s eligibility requirements. To participate in the program and receive coverage, seniors must be:

- At least 65 years old, blind or disabled
- A full-time resident of Georgia
- A U.S. citizen, legal alien or permanent resident

In addition to the criteria listed above, there are financial requirements that seniors must meet to be eligible for Medicaid coverage. Those seeking help with the cost of long-term care must fall within these income and asset limits:

<table>
<thead>
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</thead>
<tbody>
<tr>
<td><strong>Single Applicant</strong></td>
<td>$30,276</td>
<td>$2,000</td>
</tr>
<tr>
<td><strong>Married/Common-Law Couple</strong></td>
<td>$60,552</td>
<td>$3,000</td>
</tr>
</tbody>
</table>

*per year
It's important to note that the asset limits listed above only apply to countable assets, which include cash, stocks, bonds and real estate. Exempt assets include the applicant’s household furnishings and personal belongings. In most cases, the primary home is also exempt, as long as its equity interest is valued at $636,000 or less and the applicant either lives in it or plans to return to it after receiving care.

**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
Georgia offers several Medicare Savings Programs to help seniors who are unable to pay deductibles, copays or other costs associated with their Medicare policies.

• **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.

• **Qualified Disabled Working Individual:** This MSP pays Medicare Part A premiums for participants who lost their Medicare and Social Security disability benefits because they returned to work and earned more than the allowable limit.
How to Apply
Seniors can download and complete an application for the QMB, SLMB or QI program online or obtain a paper application by visiting their nearest Department of Family and Child Services office. These forms can be submitted in person or by mail.

Alternatively, applications can be completed and submitted online through the Georgia Gateway Customer Portal.

Eligibility
To qualify for an MSP, beneficiaries must:
• Be a U.S. citizen or legal resident
• Be a full-time resident of Georgia
• Be enrolled in or eligible to be enrolled in Medicare Part A
• Meet the program’s income and asset limits

<table>
<thead>
<tr>
<th>Program</th>
<th>Single Income Limits*</th>
<th>Married Income Limits*</th>
<th>Single Asset Limits</th>
<th>Married Asset Limits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Qualified Medicare Beneficiary</td>
<td>$1,153</td>
<td>$1,546</td>
<td>$8,400</td>
<td>$12,600</td>
</tr>
<tr>
<td>Specified Low-Income Medicare Beneficiary</td>
<td>$1,379</td>
<td>$1,851</td>
<td>$8,400</td>
<td>$12,600</td>
</tr>
<tr>
<td>Qualified Individual</td>
<td>$1,549</td>
<td>$2,080</td>
<td>$8,400</td>
<td>$12,600</td>
</tr>
<tr>
<td>Qualified Disabled Working Individual</td>
<td>$4,615</td>
<td>$6,189</td>
<td>$4,000</td>
<td>$6,000</td>
</tr>
</tbody>
</table>

*per month
Cash Assistance Programs for Seniors

Cash assistance programs help pay for expenses not covered by health insurance, senior living programs and other forms of aid. These benefits can be used to pay for toiletries, public transportation, utilities and other necessities.

**Social Security**
Social Security is a source of income available to retirees and people who can no longer work because of a disability. The money for Social Security comes from a payroll tax levied on employers, employees and self-employed individuals. When you retire, you’ll receive monthly payments based on how much you earned when you were working.

**How to Apply**
To apply online, visit the Social Security website and fill out the application. You can also call (800) 772-1213.

**Eligibility**
To qualify for Social Security, you must earn at least 40 Social Security credits in your lifetime. Working and paying your portion of the Social Security payroll tax helps you earn these credits.

**Supplemental Security Income**
Supplemental Security Income is a tax-funded program that provides monthly payments to help aged, blind and disabled people meet their basic needs.

**How to Apply**
To apply for SSI, fill out the online application, call (800) 772-1213 or visit your local Social Security office.
Eligibility

SSI has the following eligibility requirements:

<table>
<thead>
<tr>
<th>Basic Requirements</th>
<th>Aged 65, blind or disabled.</th>
</tr>
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<tbody>
<tr>
<td>Citizenship</td>
<td>U.S. citizen, U.S. national or resident alien.</td>
</tr>
<tr>
<td>Countable Resources</td>
<td>$2,000 for individuals/$3,000 for married couples.</td>
</tr>
<tr>
<td>Income</td>
<td>Countable income can’t exceed the federal benefit rate.</td>
</tr>
</tbody>
</table>