State Resources for Seniors in Missouri

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.
The Administration for Community Living predicts that nearly 70% of people who turned 65 in 2020 will need long-term care at some point, with 20% needing it for more than 5 years. Extended stays in assisted living or nursing care homes impose financial costs that some seniors struggle to cover themselves.

Seniors in Missouri don’t have to face these challenges alone. Government and private sector resources exist to help older adults in the state find and pay for the care they need.

**Medicaid**

MO HealthNet, Missouri’s Medicaid program, is a joint federal-state program that provides assistance with medical care for low-income individuals and families in the state. If you meet the program’s eligibility guidelines, MO HealthNet benefits may help you pay for some or all of the cost of senior medical services, including residential care.

**How to Apply**

You can apply for MO HealthNet online, at the state’s online Medicaid portal. You will be asked to set up an account on your first visit in order to submit an application. The Missouri Department of Social Services has a number of offices located throughout the state. The department can also be reached by phone at (855) 373-9994.

**Eligibility**

New applicants for MO HealthNet are evaluated for program eligibility according to income, age and medical need. If you meet the program’s income guidelines, you may be eligible for enrollment if you are:

- Aged 65 and older.
- A woman aged 18-55 with no health insurance.
- An adult age 19-64 without disabilities, but with a valid medical need for health coverage.
- A woman under 65 with breast or cervical cancer.
- A person with disabilities.
In addition to the program's basic eligibility restrictions, MO HealthNet has fairly strict income and countable asset limits. Countable assets can be any combination of investments, annuities and cash on hand. Countable assets do not include the equity in your house, a single personal-use car and some personal belongings.

MO HealthNet income and asset limits for 2022 are:

<table>
<thead>
<tr>
<th></th>
<th>Income Limit</th>
<th>Asset Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Single Adult</strong></td>
<td>All available income must go toward care expenses.</td>
<td>$5,035</td>
</tr>
<tr>
<td><strong>Married with One Spouse Applying</strong></td>
<td>All available income must go toward care expenses.</td>
<td>$5,035 for applicants and $137,400 for non-applicants</td>
</tr>
<tr>
<td><strong>Married with Both Spouses Applying</strong></td>
<td>All available income must go toward care expenses.</td>
<td>$10,070</td>
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**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.
Supplemental Nursing Care

MO HealthNet does not directly pay for nonmedical expenses, such as an assisted living community’s board and service fees. If you have MO HealthNet coverage and need help paying for assisted living, you may be eligible for a Supplemental Nursing Care waiver.

This waiver helps nursing home-eligible seniors stay out of more intensive levels of senior care by paying for assisted living expenses, including the monthly fee and caregiver help. The program provides a monthly cash allowance that can be paid directly to the assisted living provider to cover common costs of assisted living.

How to Apply

You can apply for the Supplemental Nursing Care waiver by calling the state’s Family Services Division at (855) 373-4636. Applications can also be submitted through your local Family Services Division office, which you can search for in the state’s online search tool.

Eligibility

Supplemental Nursing Care waivers are available to MO HealthNet participants who have a doctor’s recommendation for placement in a skilled nursing home, but whose needs can all be met at the lower level of care provided by an assisted living facility. In order to qualify, you must be:

- A permanent Missouri resident.
- At least 21 years old.
- Living in an assisted living facility; it is not necessary that the skilled nursing home accept Medicaid payments.

In addition to your care needs and living situation, you may have to prove you meet the waiver program’s income and asset limitations. These limits are different from the state’s Medicaid restrictions. From 2020, the waiver’s financial eligibility standards are:

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<td><strong>Single Adult</strong></td>
<td>$885 a month</td>
<td>$4,000</td>
</tr>
<tr>
<td><strong>Married with One Spouse Applying</strong></td>
<td>$885 for the applicant’s spouse. non-applicant spouses may earn up to $3,216 a month.</td>
<td>$4,000 for applicant and $128,640 for non-applicant</td>
</tr>
<tr>
<td><strong>Married with Both Spouses Applying</strong></td>
<td>$1,198 a month</td>
<td>$8,000</td>
</tr>
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Health Insurance & Prescription Drug Coverage for Seniors

MO HealthNet provides financial assistance with medical expenses for people who meet the program's eligibility guidelines. Prescription drugs and medical treatments that have been approved by your doctor are generally covered, though some restrictions apply to certain medications and procedures. Seniors who are trying to manage mounting medical debts may get the help they need through the state's Medicaid program.

How to Apply

You can file a paper application for Medicaid at any of Missouri’s Department of Social Services locations. You can also apply over the phone by calling (855) 373-9994 or at the MO HealthNet online portal.

Eligibility

When you apply for coverage through MO HealthNet, your intake worker will review your age, income, assets and medical needs to determine your eligibility. Adults with disabilities and seniors aged 65 and over are medically eligible for Medicaid coverage, as are children and other adults with qualifying medical conditions.

Because Medicaid is intended to help people with limited resources, you may be asked to provide documents to establish your financial needs. These can be bank statements and records of deposits, deeds to the property you own, insurance documents and other proof of income and assets.

MO HealthNet’s income and asset limits are somewhat more generous than other states, with higher limits than the average nationwide, but you are still expected to meet relatively tight financial constraints to establish eligibility. MO HealthNet income and asset limits for 2022 are:

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---|---|---
Married with Both Spouses Applying | All available income must go toward care expenses. | $10,070

**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
Missouri has several Medicare savings programs that can help you pay for the out-of-pocket costs of hospitalization, outpatient care and prescription drugs.

- **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

You can sign up for any of these savings plans by picking up an application packet from any Family Support Division Resource Center in the state or calling (855) 373-4636 to speak with an intake worker. You can also apply online, check the status of your application or register a comment at the Family Support Division web portal.

Eligibility

In order to qualify for a Medicare savings program, you have to be a Missouri resident, a U.S. citizen and eligible for participation in Medicare Parts A or B. You also have to meet the programs’ income and asset limits, which are shown in this table:

<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>$8,400</td>
<td>$12,600</td>
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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>
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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>