State Resources for Seniors in Michigan

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.
According to estimates from The Administration for Community Living, 69% of people who turned 65 in 2020 would need some form of long-term care services throughout their remaining years. While such care is vital for the health and well-being of seniors, many individuals are concerned about how to pay for long-term care.

Luckily, Michigan programs can help seniors cover full or partial costs of care. Several programs can assist older adults in accessing the care and services they need, even if they can’t afford to fund the full price on their own.

**Medicaid**

In Michigan, Medicaid may cover the costs of nursing home care and some home health care services. To be eligible, a doctor must evaluate you as needing a nursing home level of care.

**How to Apply**

You can apply for Michigan Medicaid online via the MI Bridges portal, which is available in English and Spanish. Alternatively, you can download an application form and return it to your local Michigan Department of Health and Human Services office. You can also visit your nearest MDHHS office to apply in person or call the Michigan Health Care Helpline at (855) 789-5610 for telephone assistance.

**Eligibility**

You might qualify for Michigan Medicaid if:

- You’re aged 65 or above.
- You’re disabled or blind.
- You already live in a nursing facility.

There are also fairly stringent financial requirements. Single applicants can have up to $2,000 in assets. For married couples, the asset limit increases to $3,000.
Monthly income limits are dependent on family size. Additionally, income limits for Michigan Medicaid are based on federal poverty guidelines, which are subject to updates. As of May 2022, income limits are:

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Monthly Income Limit*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$1,506.25</td>
</tr>
<tr>
<td>2</td>
<td>$2,029.42</td>
</tr>
<tr>
<td>3</td>
<td>$2,552.50</td>
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<tr>
<td>4</td>
<td>$3,075.50</td>
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<tr>
<td>5</td>
<td>$3,598.83</td>
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</tbody>
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*For larger household sizes, add $523 for each additional family member.

**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.
Medicaid MI Choice Waiver Program
Michigan’s MI Choice Waiver Program allows qualifying seniors to receive care at home or in an assisted living community rather than a nursing home. The program aims to delay or prevent admission into an institutional care setting.

How to Apply
The MI Choice Waiver Program has limited placement, and you may be wait-listed for services. To apply for the program, contact your regional Waiver Agent.

Eligibility
In addition to meeting financial, citizenship and residency criteria, you must require a nursing home level of care. You must be able to live safely at home or in an assisted living community with the provision of support services, and you must need at least two waiver services each month.

Michigan Medicaid Home Help Program
Administered by MDHHS, Michigan Medicaid Home Help Program provides assistance with personal care and activities of daily living to help seniors remain at home rather than being admitted to a nursing home. Services may also include domestic chores, laundry, meal preparation and grocery shopping.

How to Apply
To apply for the Michigan Medicaid Home Help Program and arrange a medical needs assessment, contact your local DHSS office in person or by telephone.

Eligibility
To receive support through Michigan Medicaid Home Help Program, you must:
• Be a Michigan resident
• Satisfy citizenship criteria
• Satisfy financial criteria
• Live in your own home
• Need assistance with at least one activity of daily living, as determined by an assessment
Michigan Health Link Program

The Michigan Health Link Program is a managed care program for qualifying seniors who are eligible for both Medicaid and Medicare. Services may be provided at home or in an assisted living facility and may include medical care, help with daily activities, accessibility adaptations, medical equipment and supplies, meal delivery, adult day care and transportation.

How to Apply

You can obtain further information and apply for the Health Link Program by contacting your local MDHHS office.

Eligibility

Seniors must be enrolled in both full Medicaid and Medicare to qualify for assistance. Services are only available in counties in Michigan’s Upper Peninsula and 10 other counties.
Several Michigan programs can help older adults access health care services and prescription medications. Although Medicare and Medicaid are the main options, other programs may assist seniors in specific circumstances.

**Medicaid**

Michigan Medicaid is a public health insurance program that provides access to free or affordable medical services for eligible individuals. It covers various services, including physician, mental health and dental visits, prescription drugs and transportation to medical appointments.

**How to Apply**

There are several ways to apply for Michigan Medicaid. You can apply online through the MI Bridges website, by calling (855) 789-5610 or by visiting your local MDHHS office. Alternatively, you can download and print a paper application form and return it to your area MDHHS office.

**Eligibility**

Medicaid eligibility depends on your financial situation, age and disability status. You might qualify for aid if:
- You’re 65 or older
- You’re disabled or blind
- You live in a nursing home

Individual applicants cannot exceed $2,000 in assets; for couples, the asset cap is $3,000.

Applicants must also satisfy income criteria. Based on federal poverty guidelines, income limits also depend on how many people live in a household. Those who exceed income limits may be able to receive shared-cost services.
<table>
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<th>Family Size</th>
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**Michigan RX Card**

The Michigan RX Card is the state’s prescription assistance program. Available to all residents and free to obtain, the card entitles holders to significant discounts on prescription medications at participating pharmacies.

**How to Apply**

Individuals may create a membership card online and receive it by email or text message. You may also print the card or save it to a device.

**Eligibility**

The only eligibility requirement for the Michigan RX Card is in-state residency.

**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**

Michigan has several Medicare Savings Programs to help beneficiaries pay for their Medicare premiums, copays, deductibles and other medical expenses. These plans are outlined below.

- **Qualified Medicare Beneficiary:** 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**

To apply for Medicare Savings Programs, complete the application online through the MI Bridges portal or call your local MDHHS office to request a paper application form be sent to your home address. You can return completed forms by post or in person to your nearest MDHHS office. If you require application assistance, you can contact an advisor at Michigan Medicare/Medicaid Assistance Program.

**Eligibility**

To qualify for the following programs, you must satisfy the asset and monthly income limits as provided in the table below. You must also be:

- Eligible for Medicare Part A
- Eligible for Medicare Part B
- A U.S. citizen
- A Michigan resident

<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>
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>
</thead>
<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>