State Resources for Seniors in Georgia

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**
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>
<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/Common-Law Couple</td>
<td>$60,552</td>
<td>$3,000</td>
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</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>
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<tbody>
<tr>
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<td>$6,189</td>
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<td>$6,000</td>
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*per month