



State Resources for Seniors in Indiana

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 provides free and low-cost health coverage for eligible beneficiaries who have a medical and financial need for health services. Hoosier Care pays for preventive care, emergency care and medication prescribed by a doctor. Under some circumstances, it can also provide durable medical equipment for people with limited mobility.

How to Apply

You can apply for Hoosier Care from home by filling out the state's online application. Applications can be submitted in person at a local Area Agency for Aging or by phone at (800) 403-0864.

Eligibility

Hoosier Care has enrollment criteria that must be met before your application can be approved. Basic enrollment standards require you to be:

- A U.S. citizen or permanent legal resident
- A resident of Indiana
- Either disabled, currently living in some kind of residential care or a senior age 65 and over

Financial limits also apply, and you may be required to demonstrate financial eligibility before your application can be approved. In Indiana, you may qualify for Hoosier Care if your income and assets fall within these limits:

	Income	Assets
Single Adult	\$2,523	\$2,000
Married (Applying Alone)	\$2,523 (Applicant only)	\$2,000 for applicant and \$137,400 for non-applicant
Married (Applying Together)	\$2,523 per spouse (\$5,046 combined)	\$3,000

As part of the application process, your intake worker may ask you for documentation of your financial status. It is helpful to have your paperwork in order early on, and you can submit any of your documents when you file the application. Documents commonly requested include:

- Pay stubs, bank statements and other proof of income
- Title deeds, insurance and stock certificates and other ownership records
- Transaction records showing major transfers you may have made during the three-year look-back period to determine whether any large amounts of property have recently been transferred out of your control

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

Indiana seniors have access to several Medicare Savings Programs to help manage health costs. These programs help with Medicare deductibles, copays and other out-of-pocket costs.

- **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

To apply for the QMB, SLMB or QI program, download the application from the Indiana Department of Insurance website. After it's done, you can mail it to your county's Area Agency on Aging. You can find this office by calling (800) 986-3505 and giving your county name to get the nearest location. For information and help preparing your application, you can call the state health information program (SHIP) at (800) 452-4800.

Eligibility

To qualify for an authorized Medicare Savings Plan, you must meet the income and asset limits set out in the table below. You must also be:

- Eligible for Medicare Parts A and B
- A resident of Indiana
- A U.S. citizen

Program	Single Income Limits	Married Income Limits	Single Asset Limits	Married Asset Limits
Qualified Medicare Beneficiary	\$1,719	\$2,308	\$8,400	\$12,600
Specified Low-Income Medicare Beneficiary	\$1,946	\$2,614	\$8,400	\$12,600
Qualified Individual	\$2,116	\$2,843	\$8,400	\$12,600
Qualified Disabled Working Individual	\$2,266	\$3,052	\$8,400	\$12,600