



State Resources for Seniors in Nevada

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

Seniors who qualify for Nevada Medicaid can receive health care services that are fully covered or at a reduced cost. This coverage can help with the expense of prescription drugs, routine maintenance, in and outpatient care, dental care and vision care.

How to Apply

You can submit Nevada Medicaid applications online through the Nevada Medicaid Portal or through your local Medicaid office. When applying through the online portal, seniors should select Health Plan of Nevada as their chosen supplier. You can deliver your completed paper application to the nearest Division of Welfare and Supportive Services (DWSS) office in person or by mail. Once seniors submit the application, they must wait for their determination letter to see if Medicaid accepts them.

Eligibility

Medicaid is available to seniors who are at least 65 years old, have a qualifying disability or demonstrate a need for long-term care. Beyond this, applicants must meet specific income and asset limits depending on the type of Medicaid coverage they are seeking. Medicaid only counts the income and assets of the applicant in the case of a married couple where only one spouse is applying. When calculating asset value, it is important to note that some assets are not countable, such as the primary home, primary vehicle, irrevocable burial trusts, household items and personal belongings. The table below offers the current limits that Medicaid has set based on the federal poverty guidelines.

	Regular Medicaid Income Limits	Regular Medicaid Asset Limits	Nursing Home Medicaid Income Limits	Nursing Home Medicaid Asset Limits
Single	\$841	\$2,000	\$2,523	\$2,000
Married (single applicant)	\$1,261	\$3,000	\$2,523	\$2,000 for applicant \$137,400 for non-applicant
Married (both applicants)	\$1,261	\$3,000	\$5,046	\$4,000

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

Nevada seniors needing help paying their Medicare deductibles may get some relief from one of the four Medicare Savings Programs. These programs can also mitigate any copays or coinsurance charges.

- **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

In Nevada, Medicare Savings Programs are called Medicare Beneficiaries Programs. You must submit your Medicare Savings Program application through Nevada's Department of Health and Human Services Division of Welfare and Supportive Services (DWSS). You can download the application online and direct any questions to your DWSS case manager.

Eligibility

Nevada seniors who meet income and asset limits featured in the table below may qualify for enrollment in a Medicare Savings Program. In addition, applicants also:

- Must be at least 65 years old
- Must be a U.S. citizen or legal permanent resident
- Must be a Nevada resident
- Must be eligible for Medicare Plan A
- Not be enrolled in Medicaid (only for QI)
- Have a disability (only for QDWI)
- Be employed (only for QDWI)
- Have lost SSD benefits and premium-free Part A due to resumed employment (only for QDWI)

Program	Single Income Limits	Married Income Limits	Single Asset Limits	Married Asset Limits
Qualified Medicare Beneficiary	\$1,153	\$1,546	\$8,400	\$12,600
Specified Low-Income Medicare Beneficiary	\$1,379	\$1,851	\$8,400	\$12,600
Qualified Individual	\$1,549	\$2,080	\$8,400	\$12,600
Qualified Disabled Working Individual	\$4,615	\$6,189	\$4,000	\$6,000