State Resources for Seniors in Texas

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**

Older adults who can’t get private health insurance for any reason might be able to get coverage through Texas MEPD.

Texas Medicaid covers a wide range of necessary health care services that can help older Texans. These services include:
- Checkups
- Vaccines and prescription medication
- Hospital services and care
- Lab tests and x-rays
- Hearing and vision care
- Access to mental health care
- Access to medical specialists
- Treatment of pre-existing conditions and special health needs

**How To Apply**

Services are usually offered through the STAR+PLUS health plan. You’ll be made aware of the options available to you during the application process. To apply, you can:
- Dial 2-1-1 and follow the phone prompts.
- Visit yourtexasbenefits.com and fill out the necessary application.
- Locate your local HHS office and either call, mail or visit them in person.

There’s plenty of support available to older adults who have questions or need help completing a health insurance application in Texas. Options include:
- Calling or visiting your local Aging and Disability Resource Center.
- Contact your local Area Agency on Aging.
- Medicare-eligible applicants can use the Texas Health Information, Counseling and Advocacy Program by calling 800-252-9240.

**Eligibility**

There are financial and circumstantial criteria you need to meet to access Medicaid if you’re over 65. If you’re under 65, you can still get support from Medicaid if you’re blind or have a disability. Other qualifying criteria include:
• Having Texas residency.
• Being a U.S. citizen or legal non-citizen.
• Have no more than $2,000 in assets as a single person and no more than $3,000 in assets as a married couple.
• Income limits cannot exceed those listed below:

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Annual Income Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$26,909</td>
</tr>
<tr>
<td>2</td>
<td>$36,254</td>
</tr>
<tr>
<td>3</td>
<td>$45,600</td>
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<tr>
<td>4</td>
<td>$54,945</td>
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<tr>
<td>5</td>
<td>$64,291</td>
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</table>

**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
If you’re a Texan senior who needs help covering the costs of Medicare out-of-pocket expenses, you might be able to use one of the following Medicare Savings Programs:

- **Qualified Medicare Beneficiary Program**: This program 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 one of the programs listed above, call 2-1-1 or visit yourtexasbenefits.com. Alternatively, find the contact details for your local HHS office and print and mail it directly, take it in person or email a completed copy of the MSP application form.

**Eligibility**

There are slightly different qualifying criteria for each MSP, as outlined below:

- **QMB:** Beneficiaries must be entitled to Medicare A or 65, have a disability as verified by the SSA, or have chronic renal disease.
- **SLMB:** You must meet QMB eligibility criteria, plus meet income requirements.
- **QI:** You must meet QMB eligibility criteria, plus meet income requirements.
- **QDWI:** You must be under 65, be entitled to Medicare A, not be enrolled in Medicaid and meet income requirements.

In addition to the above, you must meet the income requirements listed in the following 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>
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<tbody>
<tr>
<td>Qualified Medicare Beneficiary</td>
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<td>$1,452</td>
<td>$4,000</td>
<td>$6,000</td>
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<td>$12,600</td>
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<tr>
<td>Qualified Disabled Working Individual</td>
<td>$2,147</td>
<td>$2,904</td>
<td>$8,400</td>
<td>$12,600</td>
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