State Resources for Seniors in Wisconsin

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 care and prescription drugs are some of seniors’ largest expenses, but state and federally funded programs can reduce out-of-pocket costs. If your income is below a certain level, you may qualify for very low-cost or free coverage.

**Medicaid**

Wisconsin seniors can get Medicaid health care and prescription drug coverage through the Family Care Partnership programs and Program for All-Inclusive Care for the Elderly. They coordinate long-term care and medical services and include all Medicare- and Medicaid-covered health care options. The Family Care Partnership includes the following organizations:

- **My Choice Wisconsin** (Sauk, Columbia, Dodge, Dane, Washington, Ozaukee, Milwaukee, Jefferson and Waukesha counties)
- **Community Care, Inc.** (Washington, Ozaukee, Milwaukee and Waukesha counties)
- **iCare** (Sauk, Dane, Milwaukee, Racine and Kenosha counties)

PACE is available in Waukesha, Milwaukee, Racine and Kenosha counties. Seniors not living in a covered county may qualify for pay-for-service coverage, subsidizing some of their health care and prescription drug costs.

**How to Apply**

Contact your local ADRC to apply for Family Care Partnership. Apply for PACE through your local PACE organization.

**Eligibility**

To qualify, you must meet Medicaid’s regular requirements and require a nursing home level of care.
**SeniorCare Prescription Drug Assistance Program**

SeniorCare subsidizes prescription drug costs for qualifying Wisconsin seniors, covering most medically necessary drugs with only a $5 copay. For coverage, a drug manufacturer must make a rebate agreement with the SeniorCare program. It may require you to use a generic drug rather than a brand name. If you want to make a special request for a brand-name drug, you may appeal for an exception. More than 95% of Wisconsin’s pharmacies accept the SeniorCare card.

**How to Apply**

Contact your County Aging Office to apply for SeniorCare. You must pay a $30 enrollment fee upon application approval.

**Eligibility**

To qualify, you must be a Wisconsin resident, a U.S. citizen or legal immigrant and at least aged 65 or older.

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**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
Prescription drugs and medical services can still be quite expensive even with Medicare, but you can reduce your financial burden by signing up for one of the following Medicare Savings programs.
• **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

Apply online for a Medicare Savings Program online by using the ACCESS. You can also apply over the telephone, through the mail or in person by contacting your local ForwardHealth program office. Also, you can call member services at (800) 362-3002. Help may also be available from your local State Health Insurance Assistance Program or benefits specialists at regional aging offices.

### Eligibility

To start receiving benefits in a Medicare Savings Program, you must be entitled to Medicare Part A and have income and assets that don’t exceed the limits listed in the following table. For QI and QDWI, you must also not currently have Medicaid enrollment.

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<thead>
<tr>
<th>Program</th>
<th>Single Income Limits</th>
<th>Married Income Limits</th>
<th>Single Asset Limits</th>
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