At AssistedLiving, we understand that learning about and accessing the assistance you need isn’t easy. We created this guide to help seniors and their families learn about the available financial assistance options for senior living and senior care in your state so you can focus on what matters: finding the right senior care for your loved one. In the following resource guide, learn about the financial assistance options for senior care and senior living in your state, what benefits the different programs offer, who is eligible, and how to apply.
Medicaid

Administered by the Nebraska Department of Health and Human Services, Medicaid provides government-subsidized health care and prescription drug coverage to low-income Nebraska residents, including many seniors. Medicaid provides free or low-cost health insurance and prescription drug coverage to residents with financial hardships and helps defray many of the costs associated with nursing home or assisted living care. Medicaid eligibility is determined based on an applicant’s income, assets, household size and health care needs.

How to Apply

In Nebraska you can apply for Medicaid online, over the phone or in person. To apply online, visit the iServe website. If you need assistance over the phone, call the toll-free, (855) 632-7633 between 8:00 a.m. and 5:00 p.m. Monday through Friday. You can also call to request a paper application to be mailed to your home. If you prefer to apply for Medicaid in person, you can do so at a local DHHS office. You can find locations and opening hours on the Nebraska Department of Health and Human Services website.

Eligibility

To qualify for Medicaid in Nebraska you must meet one or more of the following criteria:
• You are 65 years or older
• You are under 65 but with a disability or visual impairment, as determined by Social Security guidelines
• You are currently pregnant
• You are the parent or caretaker of a disabled individual
• You are a former foster care youth

Medicaid recipients in Nebraska are also subject to income and asset limits:

<table>
<thead>
<tr>
<th></th>
<th>Income Limits</th>
<th>Asset Limits</th>
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</thead>
<tbody>
<tr>
<td>Single Applicants</td>
<td>$1,133</td>
<td>$4,000</td>
</tr>
</tbody>
</table>
Married Applicants (one applicant) $1,133 $4,000 (applicant) $137,400 (non-applicant)
Married Applicants (two applicants) $1,526 $8,000

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**

For Nebraska seniors on Medicare who need help with their deductibles and out-of-pocket costs, the state offers a number of Medicare Savings Plans:

- **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**

You can apply for the QMB, SLMB and QI programs by contacting the Nebraska Department of Health and Human Services at (855) 632-7633. To apply for QDWI, either contact the Department of Health and Human Services at the same number or call the Benefits Coordination and Recovery Center at (855) 797-2627.
Eligibility

These programs share several eligibility requirements, including:

- Eligible for Medicare Parts A and B
- U.S. citizenship
- Nebraska residency at the time of application

In addition, each program has its own 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>
</tr>
</thead>
<tbody>
<tr>
<td>Qualified Medicare Beneficiary</td>
<td>$1,063</td>
<td>$1,437</td>
<td>$4,000</td>
<td>$6,000</td>
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<tr>
<td>Specified Low-Income Medicare Beneficiary</td>
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<td>$1,724</td>
<td>$4,000</td>
<td>$6,000</td>
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<tr>
<td>Qualified Individual</td>
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<td>$1,940</td>
<td>$4,000</td>
<td>$6,000</td>
</tr>
<tr>
<td>Qualified Disabled Working Individual</td>
<td>$1,682 (200% federal poverty level)</td>
<td>$2,522 (200% federal poverty level)</td>
<td>$4,000</td>
<td>$6,000</td>
</tr>
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