State Resources for Seniors in West Virginia

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.
Many seniors struggle to pay for the health care services they need to thrive after retirement. According to the 2021 International Health Policy Survey of Older Adults, one in 12 American seniors postponed or skipped health care services due to cost. Fortunately, in West Virginia, there are many programs that can help seniors pay for the care they need. Some options to consider include Medicaid, Medicare and Medicare Savings Programs.

**Medicaid**

West Virginia's Medicaid program helps low-income people access a long list of medically necessary health care services. Covered services include primary care office visits, inpatient hospital care, outpatient hospital services, prescription drugs and durable medical equipment. Seniors may pay nominal co-payments for some services, but this cost-sharing is capped at 5% of an individual's household income.

**How to Apply**

West Virginians can apply online through the federal Health Insurance Marketplace or the WV Path portal. Seniors can also mail or drop off a completed application form to their local DHHR office. If you prefer to apply over the phone, call (877) 716-1212.

**Eligibility**

In West Virginia, seniors may be eligible for Medicaid if they live in the state and are U.S. citizens or legal aliens. The state verifies citizenship status electronically, and non-citizens must provide documents to verify their status, such as a Green Card.

Medicaid is available to seniors who have very low monthly incomes and limited assets, as outlined in the chart below. Seniors who receive Supplemental Security Income payments are automatically eligible and don’t need to apply for health benefits.
<table>
<thead>
<tr>
<th>Income Limits</th>
<th>Asset Limits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Applicants</td>
<td>$841</td>
</tr>
<tr>
<td>Married Applicants</td>
<td>$1,261</td>
</tr>
</tbody>
</table>

*These limits are current as of 2022. Contact your local Department of Health and Human Resources office for current eligibility requirements.

**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

Medicare Savings Programs, or Medicare Premium Assistance Programs as they’re called in West Virginia, can help eligible seniors pay for their out-of-pocket Medicare expenses. There are two programs administered by the West Virginia Department of Health and Human Resources.

- **Qualified Medicare Beneficiary:** 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.

How to Apply

To apply for a Medicare Savings Program, contact your local DHHR office. Phone numbers, addresses and office hours for each location are listed on the DHHR website.
Eligibility

Medicare-eligible seniors who are interested in an MSP must meet West Virginia’s income and asset requirements. The income limit is expressed as a percentage of the federal poverty level, which may change each year. You can find the 2022 income and asset limits in the chart below.

<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>$1,526</td>
<td>$8,400</td>
<td>$12,600</td>
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<tr>
<td>Specified Low-Income Medicare Beneficiary</td>
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*These limits are current as of 2022. Contact your local Department of Health and Human Resources office for current eligibility requirements.*