State Resources for Seniors in Ohio

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.
By 2040, it’s expected that more than 21% of the United States’ population will be aged 65 and older. Today, individuals in that age group represent an estimated 16% of Americans. Although many are able to live independently, plenty of seniors require help with activities of daily living, personal care or nursing home care.

Long-term care such as adult day care, assisted living, home care and nursing care can be expensive. According to the Genworth 2021 Cost of Care Survey, average long-term care costs range from $1,690 to $9,034 per month in the U.S., with those prices rising beyond $9,034 in some geographic regions for nursing home care. To alleviate financial stress for seniors, programs such as Medicare, Medicaid and Supplemental Security Income help cover some of these costs.

**Medicaid**

Ohio Medicaid is a federal and state government-funded program that helps low-income seniors and other families access health care services that they’d otherwise be unable to afford. The program pays for some long-term care costs, such as in-home medical care and nursing home services. It also operates waivers that help seniors access services that aren’t typically covered by the state’s Medicaid program, including assisted living, homemaker services, transportation and personal care.

**How to Apply**

Seniors can apply for Medicaid online at the Ohio Benefits website. Those who prefer can call the Medicaid Consumer Hotline at (800) 324-8680 to submit their application by phone, or download the application and submit it in-person or by mail to their county’s Job and Family Services office.

**Eligibility**

There are specific eligibility requirements for Ohio Medicaid. To obtain coverage, seniors must be:

- At least 65 years old.
- A United States citizen or legal permanent resident.
• A full-time Ohio resident.
• In need of help with activities of daily living.

There are also financial limits that applicants need to meet to qualify for coverage. These are as follows:

<table>
<thead>
<tr>
<th></th>
<th>Income Limit*</th>
<th>Asset Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Single Applicant</strong></td>
<td>$10,092</td>
<td>$2,000</td>
</tr>
<tr>
<td><strong>Married/Common-Law Couple</strong></td>
<td>$15,132</td>
<td>$3,000</td>
</tr>
</tbody>
</table>

*per year

**Medicare**

Medicare is the federal health insurance program for older adults (65+) and some younger people with disabilities. Part A, which covers inpatient care, may also cover medically necessary care delivered in a skilled nursing facility.

**How to Apply**

To apply for Medicare online, visit the Social Security Administration website, agree to the terms of service and fill out the application. To apply by telephone, call (800) 772-1213. If you prefer to apply in person, use the SSA office locator to find a nearby Social Security office.

**Eligibility**

You may qualify for Medicare coverage if any of the following apply:
• You’re at least 65 years old.
• You have end-stage renal disease.
• You’re under age 65 and have a disability.

If you or your spouse worked and paid Medicare taxes for at least 10 years, you qualify for premium-free Part A coverage. You may also qualify for premium-free coverage if you’ve been receiving disability benefits for at least 24 months, you’re on kidney dialysis or you need a kidney transplant.
MyCare Ohio
MyCare Ohio is a managed care waiver that provides services such as assisted living, community integration, home modifications and personal care aides. All care is provided within a managed care network and accessed as required under the supervision of a case manager.

How to Apply
Seniors can apply by contacting their local Medicaid office.

Eligibility
This program is open to Medicare-eligible seniors who require at least one service provided by the waiver each month.

Home Care Waiver
The Home Care Waiver helps seniors living at home access necessary support and services such as personal care, home maintenance, home-delivered meals and transportation services.

How to Apply
To apply for the Home Care Waiver, seniors should contact Ohio Benefits Long Term Services and Supports by calling (844) 644-6582 or request more information by calling their local Medicaid office.

Eligibility
This program is open to those aged 59 or older who require a nursing level of care but are able to safely reside within their own communities.

PASSPORT Waiver
The PASSPORT Waiver gives seniors the opportunity to choose where and how they receive long-term care by providing services in their communities. Covered services include social work, nonmedical transportation, home-delivered meals and personal care.

How to Apply
To apply, seniors should contact the PASSPORT Administrative Agency in their local area.
Eligibility

This program is open to those aged 60 and older who require a nursing level of care but are able to remain safely in their own homes with the services provided by the waiver. Physician consent to participate is also required.

Assisted Living Waiver

The Assisted Living Waiver provides personal care for seniors and disabled persons. It also pays for remote support, money management assistance, transportation, specialized medical equipment and meals.

How to Apply

Seniors who wish to apply for the Assisted Living Waiver should contact the Department of Aging by calling (800) 266-4346.

Eligibility

Applicants must be 65 or older, or permanently disabled.
Ohio Medicaid ensures all seniors have access to necessary health care services, regardless of income. Those who meet the program's eligibility requirements receive coverage for most necessary medical expenses. Some of these vital medical expenses include primary and emergency care, inpatient hospital care, medical transportation and prescription medications. Other services, including eye care, dental care, mental health care and some therapies are also covered in some circumstances. Regardless of specific needs, Ohio ensures all seniors get prescription drug coverage.

How to Apply
Seniors who wish to apply for Medicaid may do so by completing an online application. Alternatively, an application can be obtained from local Job and Family Services offices and submitted by mail or in-person, or seniors may apply by phone by calling the Medicaid Consumer Hotline at (800) 324-8680.

Eligibility
To qualify for Ohio Medicaid, seniors must meet the program’s eligibility requirements. As a senior, that means applicants must:
• Be at least 65 years old, blind or legally disabled.
• Be a U.S. citizen or legal resident.
• A permanent Ohio resident.
• Have a Social Security number or be willing to apply for one.
• Require help with activities of daily living.

Applicants cannot have more than $2,000 in countable assets if they live alone, or $3,000 if they live with their spouse. Countable assets don’t include the applicant’s primary home, provided its value is less than $636,000 but it does include savings accounts, bonds, stocks and burial plots.

Income limits are based on Social Security Income benefit rates. They vary depending on household size and as of 2022, are as follows:
<table>
<thead>
<tr>
<th>Family Size</th>
<th>Monthly Income Limit*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$841</td>
</tr>
<tr>
<td>2</td>
<td>$1,261</td>
</tr>
<tr>
<td>3</td>
<td>$1,830</td>
</tr>
<tr>
<td>4</td>
<td>$2,208</td>
</tr>
<tr>
<td>5</td>
<td>$2,587</td>
</tr>
</tbody>
</table>

*Income limits in Ohio can change annually.

**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
Ohio has several Medicare Savings Programs in place that help seniors pay their out-of-pocket Medicare costs, including deductibles, coinsurance and premiums.

• **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 program 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

Those who receive Medicare can apply for all Medicare Savings Programs by completing a Medicaid application, which can be obtained from their local county’s Department of Job and Family Services office. The process may require applicants to attend an in-person interview, which they may send an authorized caregiver or representative to attend in their place.

Eligibility

Ohio’s Medicare Savings Programs are only open to those who meet the state’s eligibility guidelines. To qualify for any of these programs, seniors must:

• Be eligible for Medicare Part A and B
• Be a full-time resident of Ohio
• Be a U.S. citizen or legal resident

Furthermore, all applicants need to meet the following income requirements:

<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>$1,153</td>
<td>$1,546</td>
<td>$8,400</td>
<td>$12,600</td>
</tr>
<tr>
<td>Specified Low-Income Medicare Beneficiary</td>
<td>$1,379</td>
<td>$1,851</td>
<td>$8,400</td>
<td>$12,600</td>
</tr>
<tr>
<td>Qualified Individual</td>
<td>$1,549</td>
<td>$2,080</td>
<td>$8,400</td>
<td>$12,600</td>
</tr>
</tbody>
</table>
Cash assistance programs help pay for expenses not covered by health insurance, senior living programs and other forms of aid. These benefits can be used to pay for toiletries, public transportation, utilities and other necessities.

**Social Security**

Social Security is a source of income available to retirees and people who can no longer work because of a disability. The money for Social Security comes from a payroll tax levied on employers, employees and self-employed individuals. When you retire, you’ll receive monthly payments based on how much you earned when you were working.

**How to Apply**

To apply online, visit the Social Security website and fill out the application. You can also call (800) 772-1213.

**Eligibility**

To qualify for Social Security, you must earn at least 40 Social Security credits in your lifetime. Working and paying your portion of the Social Security payroll tax helps you earn these credits.

**Supplemental Security Income**

Supplemental Security Income is a tax-funded program that provides monthly payments to help aged, blind and disabled people meet their basic needs.

**How to Apply**

To apply for SSI, fill out the online application, call (800) 772-1213 or visit your local Social Security office.
Eligibility
SSI has the following eligibility requirements:

<table>
<thead>
<tr>
<th>Basic Requirements</th>
<th>Aged 65, blind or disabled.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Citizenship</td>
<td>U.S. citizen, U.S. national or resident alien.</td>
</tr>
<tr>
<td>Countable Resources</td>
<td>$2,000 for individuals/$3,000 for married couples.</td>
</tr>
<tr>
<td>Income</td>
<td>Countable income can’t exceed the federal benefit rate.</td>
</tr>
</tbody>
</table>