



STATE RESOURCES FOR SENIORS IN NEBRASKA

Seniors can benefit from a variety of programs and services offered by their state governments, but they may not know where to access these resources. This guide covers the benefits, eligibility requirements, and application processes for financial assistance resources for healthcare and prescriptions, medical equipment, senior living and senior care, home-related expenses, and food and nutrition available to seniors in your state. Find the type of assistance you need and read about the options for seniors in your state.

Financial Assistance for Senior Living
& Senior Care

Health Insurance & Prescription Drug
Coverage for Seniors

Cash Assistance Programs for Seniors

Assistance at Home

Free Used Medical Equipment

Food Assistance Programs for Seniors



STATE RESOURCES FOR SENIORS IN NEBRASKA

At MemoryCare, 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.



FINANCIAL ASSISTANCE FOR SENIOR LIVING & SENIOR CARE

The U.S. Census estimates that 16.2 percent of the nearly 2 million people living in Nebraska are 65 years or older. Many of these senior residents currently require nursing home care or a level of assisted living, and more will in the future. Many Nebraskans have come to discover the cost of senior living and senior care can be prohibitive, even for families with quality insurance and ample savings.

To help defray the high costs of senior living and senior care, the state of Nebraska offers several benefit programs. These programs can help you and your loved ones cover the costs of elder care.

MEDICAID

Medicaid is a federal benefit program that provides health coverage to low-income Americans. In Nebraska, Medicaid covers many of the costs associated with nursing home care and a select number of home health services for eligible individuals.

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:

	Income Limits	Asset Limits
Single Applicants	\$1,133	\$4,000
Married Applicants	\$1,526	\$8,000

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.

AGED AND DISABLED MEDICAID WAIVER

Nebraska's Aged and Disabled Medicaid Waiver provides funding for seniors who require a nursing home level of care. This funding can be used to pay for nursing home or assisted living costs. If the recipient prefers to live independently, the Aged and Disabled Medicaid Waiver can cover the costs of home or vehicle modifications to enable them to age in place.

How to Apply

You can apply for the Aged and Disabled Medicaid Waiver by contacting the Nebraska Department of Health and Human Services at (800) 358-8802. You can also apply through your local Area Agency on Aging.

Eligibility

To qualify for the Nebraska Aged and Disabled Medical Waiver, you must meet all of the following criteria:

- Full eligibility for Nebraska Medicaid
- Aged 65 or older, or have a qualifying disability
- Require a nursing home level of care
- Have financial hardship

TRAUMATIC BRAIN INJURY MEDICAL WAIVER

The Traumatic Brain Injury Medical Waiver provides financial assistance to Nebraska residents who require nursing home or assisted living care because of a traumatic brain injury that was caused by an external mechanical force.

How to Apply

The best way to apply for the Traumatic Brain Injury Medical Waiver is to call, or have a loved one call, the Nebraska Department of Health and Human Services at (800) 358-8802.

Eligibility

Eligibility for the Traumatic Brain Injury Medical Waiver requires that the following criteria be met:

- Full eligibility for Nebraska Medicaid
- Be older than 18 but younger than 65
- Diagnosed with traumatic brain injury:
 - Must be from an external mechanical force and not a stroke, tumor or other non-traumatic cause
 - Must be expected to cause long-term cognitive, physical or psychosocial impairment
- Require a nursing home facility level of care
- Have care needs that meet the definitions outlined in the definition of Specialized Assisted Living (SAL).

HEALTH INSURANCE & PRESCRIPTION DRUG COVERAGE FOR SENIORS

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:

	Income Limits	Asset Limits
Single Applicants	\$1,133	\$4,000

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:

Program	Single Income Limits	Married Income Limits	Single Asset Limits	Married Asset Limits
Qualified Medicare Beneficiary	\$1,063	\$1,437	\$4,000	\$6,000
Specified Low-Income Medicare Beneficiary	\$1,276	\$1,724	\$4,000	\$6,000
Qualified Individual	\$1,436	\$1,940	\$4,000	\$6,000
Qualified Disabled Working Individual	\$1,682 (200% federal poverty level)	\$2,522 (200% federal poverty level)	\$4,000	\$6,000



CASH ASSISTANCE PROGRAMS FOR SENIORS

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:

Basic Requirements	Aged 65, blind or disabled.
Citizenship	U.S. citizen, U.S. national or resident alien.
Countable Resources	\$2,000 for individuals/\$3,000 for married couples.
Income	Countable income can't exceed the federal benefit rate.