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Programs For Senior Care: Medicaid, Medicare, Long-Term Care Insurance, and VA Benefits

There are a number of **public programs that assist seniors** in paying for long-term care services. Each program has specific rules pertaining to the types of services it covers, how long one can receive services, and eligibility for coverage.

Medicaid: Medicaid is a health insurance program jointly administered and funded by the federal and state government. It provides health care services for eligible, low-income individuals. People qualify for Medicaid by meeting set financial standards and by fitting into a specific covered group such as children, pregnant women, or individuals who are elderly (age 65 or older) or who have disabilities.

Medicaid eligibility is determined on an individual, case-by-case basis. Financial requirements include an evaluation of income and resources (assets). Non-financial requirements include state residency, proof of citizenship, and meeting the required level of care for long-term care services.

Medicaid provides a full range of benefits to eligible individuals, including, but not limited to:

- Inpatient and outpatient hospital and clinic services
- Emergency hospital services
- Laboratory and x-ray services
- Physician services
- Home health services
- Prescription drugs,
- Home- and community-based **long-term care services**

- Nursing facility care
- Non-emergency transportation
- Payment of Medicare premiums

Medicare: Medicare is health insurance for people age 65 or older, under age 65 with certain disabilities, and any age with End-Stage Renal Disease (ESRD) (permanent kidney failure requiring dialysis or a kidney transplant).

Medicare was not designed to cover long-term care. It is generally available **for people with disabilities** and for people over age 65. Medicare pays limited amounts for skilled care following a hospital stay, and it is not intended to cover care that assists people with activities of daily living for long periods of time (long-term care).

Medicare covers the first 100 days of skilled **care in a nursing home** after a hospital stay of at least 3 days and as long as you enter a nursing home within 30 days of leaving the hospital. Medicare covers some home health care for the treatment of an illness or injury.

Long-Term Care Insurance: Long-term care refers to the many services beyond **medical care and nursing care** used by people who have disabilities or chronic (long-lasting) illnesses. Long-term care insurance helps you pay for these services, which can be very expensive. A policy also ensures that you can make your own choices about what long-term care services you receive and where you receive them.

Long-term care insurance typically covers the cost of:

- Help in your home with daily activities like bathing, dressing, eating and cleaning.
- Community programs, such as adult day care.
- **Assisted living services** that are provided in a special residential setting other than your own home. These services may include meals, health monitoring, and help with daily activities.
- Visiting nurses.

- Care in a nursing home.

Long-term care insurance can protect your assets, minimize your dependence on other family members, and control where and how you receive long-term care services. On the other hand, it is difficult to get coverage once health begins to decline and can be quite costly.

VA Health Care Benefits: The Department of Veterans Affairs (VA) may provide long-term care for service-related disabilities or for certain eligible veterans. The VA will provide long-term care to veterans who meet established disability criteria, or to those who need care because of service-connected disabilities. The VA also expands access to nursing home care and other extended care services to veterans who do not have service-related disabilities, but who are unable to pay for the expenses of necessary care.

For those who qualify, VA benefits can provide financial assistance for some long-term care costs. Co-pays may apply depending on the veteran's income level. Middle-class **veterans who need long-term care** for non-service-related conditions may find it difficult to access VA benefits for long-term care.

It can be overwhelming to sort through the different programs available to seniors and determine not only the kind of coverage you need now but also predict the kind you might need in the future. This task is made even harder when you take into account that these programs can overlap as well. One thing that is clear, however, is that at some point in your long-term care, you will be required to pay out of pocket. Knowing this makes planning for your future a challenge. What you are able to afford now may or may not be what you'll be able to afford in the years ahead.