



State Resources for Seniors in Louisiana

At Caring, 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

It's estimated that 70% of adults aged 65 and older will require some form of long-term care to remain healthy and safe. Whether that care is received in their own home, an assisted living facility or a nursing home, many adults worry about how they'll cover the costs of the services they will need.

To help ease the financial burden, seniors in Louisiana have access to a number of programs, such as the Medicaid Long-Term Care Services Program and the Community Choices Waiver, to help them pay for long-term care. If you're eligible, these programs cover some or all of the costs so you still receive the care you need even if you can't afford it.

Medicaid

Louisiana Medicaid helps low-income residents pay for health care. Under the Medicaid Long-Term Care Services program, Medicaid also covers the costs of nursing home care and certain home- and community-based services for seniors and disabled individuals requiring that level of care.

How to Apply

Applications for Medicaid and Medicaid Long-Term Care Services can be made online via the LA Medicaid Self-Service Portal. Alternatively, you may download an application form and mail it to:

Medicaid Application Office
P.O. Box 91278
Baton Rouge, LA 70821-9893

Seniors applying for Medicaid Long-Term Services should download the BHSF Form 1-L. To apply by phone, call Medicaid Customer Service at (888) 342-6207 or visit your local Medicaid office to complete an application in person.

Eligibility

To qualify for Louisiana Medicaid, residents must meet certain personal and financial criteria:

- Be a U.S. citizen or lawful resident
- Reside in Louisiana
- Be aged 65 or older, blind or disabled, or
- Be aged below 65 and have a household income at less than 138% of the federal poverty level

	Monthly Income Limits for Medicaid	Monthly Income Limits for Medicaid Long-Term Care Services	Asset Limits
Single Applicants	\$841	\$2,523	\$2,000
Married Applicants	\$1,261	\$5,046	\$3,000

*These limits are current as of 2022, but often change yearly. Contact your local Medicaid office for the latest information.

In addition, seniors wanting coverage for long-term care need to be assessed as requiring the level of care provided by a nursing facility.

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.

Community Choices Waiver

Louisiana seniors who require nursing home level care but can live safely in their own home or an assisted living community can apply for the Community Choices Waiver. The waiver covers a range of services, including case management, personal assistance, adult day health care, therapy, meal delivery and nursing.

How to Apply

Seniors interested in applying for the Community Choices Waiver should contact Louisiana Options in Long-Term Care at (877) 456-1146. Slots on the waiver are limited so those requesting coverage are placed on the Request for Services Registry until it becomes available.

Eligibility

Applicants for the Community Choices Waiver need to prove they meet the following criteria:

- Are eligible for Medicaid
- Assessed as requiring skilled nursing care
- Do not hold assets and receive monthly income exceeding the limits detailed below:

	Income Limits for Community Choices Waiver	Asset Limits
Single Applicants	\$2,523	\$2,000
Married Applicants	\$5,046	\$3,000

*These limits are current as of 2022, but often change yearly. Contact your local Medicaid office for the latest information.

Adult Day Health Care Waiver

The Adult Day Health Care Waiver is aimed at adults who don't require 24/7 care. Services are provided in adult day care settings and ensure eligible seniors receive personal care, medical care, dietary services and social services in a supportive environment during the daytime. The waiver also helps cover the costs of transitional services for those moving in and out of nursing homes.

How to Apply

Space is limited so you may be placed on a waiting list until the waiver becomes available. For further information or to be added to the Request for Services Registry, call the Louisiana Options in Long-Term Care at (877) 456-1146.

Eligibility

Seniors need to meet the eligibility criteria for the Adult Day Health Care Waiver:

- Be eligible for Medicaid
- Be assessed as requiring skilled nursing care

Meet the following monthly income and asset limits:

	Income Limits for Adult Day Health Care Waiver	Asset Limits
Single Applicants	\$2,523	\$2,000
Married Applicants	\$5,046	\$3,000

*These limits are current as of 2022, but often change yearly. Contact your local Medicaid office for the latest information.

Health Insurance & Prescription Drug Coverage for Seniors

Seniors living in Louisiana can access help paying for health care and prescription drug services from a number of state-run programs. In addition to Medicare and Medicaid, Louisiana residents may be eligible for financial assistance through the Long-Term Care Personal Care Services or the Program of All-Inclusive Care for the Elderly.

Medicaid

Louisiana Medicaid assists low-income seniors by helping to cover the costs of a variety of health and medical care, such as physical therapy, prescription drugs, dental care and non-emergency transportation services.

How to Apply

Applicants can apply for Louisiana Medicaid online through the LA Medicaid Self-Service Portal or by downloading an application and mailing the completed form to the Medicaid Application office in Baton Rouge. For help with the application process or to apply in person, visit your local Medicaid office or call (888) 342-6207.

Eligibility

- Applicants for Louisiana Medicaid must:
- Be a resident or citizen of the U.S. and live in Louisiana
- Hold assets of less than \$2,000 for a single applicant or \$3,000 for a married couple
- Be aged 65 or older, blind or disabled, or
- Be below 65 years and not exceed the following household income levels:

Family Size	Monthly Income Limits
1	\$1,563
2	\$2,106
3	\$2,649
4	\$3,192

5	\$3,735
6	\$4,277
7	\$4,820
8	\$5,363

*These limits are current as of 2022, but often change yearly. Contact your local Medicaid office for the latest information.

Program of All-Inclusive Care for the Elderly (PACE)

The Program of All-Inclusive Care for the Elderly (PACE) provides Louisiana seniors aged 55 and older with the health, primary, long-term and acute care they require to help them live healthily within the community. PACE covers all Medicaid and Medicare services, including nutritional counseling, prescription medication, adult day care, inpatient hospital care, essential medical supplies and restorative therapy.

How to Apply

For more information, contact your local PACE center:

- Baton Rouge: (225) 490-0604
- Greater New Orleans: (504) 945-1531
- Lafayette: (337) 470-4500

Eligibility

Applicants need to meet the following criteria:

- Aged 55 years or older
- Certified as requiring nursing home level of care
- Financially eligible for Medicaid Long-Term Care Services
- Live in one of the PACE provider service areas of Baton Rouge, Greater New Orleans or Lafayette

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

Seniors with limited income can apply for one of four Medicare Savings Programs to help them cover Medicare expenses, such as premiums, deductibles and coinsurance. There are four plans for which seniors may be eligible:

- **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.
- **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

Applications can be made online at the Medicaid Self-Service Portal, by calling Medicaid Customer Service at (888) 342-6207 or by printing an application and faxing it to (877) 523-2987. Visit your local Medicaid office to apply in person. For more information on the Medicare Savings Programs, visit [medicare.gov](https://www.medicare.gov).

Eligibility

To qualify for any of the Medicare Savings Programs you must be eligible or already receiving Medicare Hospital Insurance (Part A). In addition, seniors must meet certain financial criteria which are different for each program as detailed in the table below.

Program	Single Income Limits	Married Income Limits
Qualified Medicare Beneficiary	\$1,133	\$1,526
Specified Low-Income Medicare Beneficiary	\$1,359	\$1,831
Qualified Individual	\$1,529	\$2,060
Qualified Disabled Working Individual	\$2,265	\$3,052

*These limits are current as of 2022, but often change yearly. Contact your local Medicaid office for the latest information.

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.