

Understanding Medicare Coverage

Medicare can be a complicated subject. But if you qualify for this government healthcare program, it could help you pay for the quality care you need. Typically, senior living isn't covered by Medicare, but you may be able to use it for other health care services like skilled nursing or hospice. We've got some helpful information and advice to help you make the most of the federal assistance available.

Understanding government-funded programs like Medicare can feel a little overwhelming, but this resource might be invaluable if you find yourself in need of quality care. Millions of Americans over 65, as well as some disabled individuals under the age of 65, are eligible to receive Medicare benefits—and sometimes that coverage is crucial to receiving the medical attention you need. But how do you know if Medicare covers what you need?

What is Medicare?

Medicare is a federal healthcare insurance program available to all Americans once they turn 65. Those who are disabled and under 65 may also be eligible to enroll for Medicare. Medicare coverage can cover inpatient hospital stays, care in a skilled nursing center, hospice care, and some home health care.

While this can be a wonderful resource for seniors in need of short-term care solutions, it might not be the best option if you have long-term care needs. The best way to know how Medicare can work for your individual circumstances is to speak to a specialized representative who can give you the most reliable advice possible.

What Will Medicare Pay For?

Medicare does not cover independent living and usually doesn't pay for assisted living expenses. However, it can cover certain expenses like short-term care in a skilled nursing facility, depending on your eligibility.

Medicare's different parts help cover specific services:

- **Medicare Part A (Hospital Insurance)**

Part A covers inpatient hospital stays, care in a skilled nursing center, hospice care, and some home health care.

- **Medicare Part B (Medical Insurance)**

Part B covers certain doctors' services, outpatient care, medical supplies, and preventive services.

- **Medicare Part C (Medicare Advantage Plans)**

This is a type of Medicare health plan offered by a private company that contracts with Medicare to provide you with all your Part A and Part B benefits. Most Medicare Advantage Plans offer prescription drug coverage too.

- **Medicare Part D (Prescription Drug Coverage)**

Part D adds prescription drug coverage to Original Medicare, some Medicare Cost Plans, some Medicare Private-Fee-for-Service Plans, and Medicare Medical Savings Account Plans.

Source: Medicare.gov

How can I figure out what kind of coverage I have?

1. Check your red, white, and blue Medicare card.
2. Check all other insurance cards that you use. Call the phone number on the cards to get more information about the coverage.
3. Check your Medicare health or drug plan enrollment.
4. Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048

Learn More About Medicare Coverage

You can learn more by visiting [medicare.gov](https://www.medicare.gov) or calling 1-800-MEDICARE.

Tips for Annual Medicare Enrollment

Because healthcare needs can change so quickly, you want to make sure you have the right kind of Medicare coverage so you'll be covered in the event of an emergency or unexpected medical event. That's why it's more important than ever for seniors to keep their Medicare coverage up to date.

Medicare includes an annual enrollment period, which gives you the opportunity to make changes to your coverage. To ensure maximum coverage, you should explore and research the advantages of each type of coverage.

A Few Helpful Tips

Keep in mind that even if your short or long-term care needs haven't changed, there's a chance that your Medicare benefits have. To make sure all your needs are being met, here are a few more things you want to do leading up to and during the enrollment period:

- Make sure your physicians and medications are still covered. It's not uncommon for Medicare policy changes to impact these areas of your current coverage.
- Recalculate the cost of your medications and make any necessary changes to your coverage if the numbers no longer work for your budget.
- Look into your long-term care plans. If there is a chance that you may require the services of a long-term medical care facility, like a skilled nursing center, you want to be sure you have adequate coverage. You may also want to explore supplemental insurance options to cover all your bases.
- Examine all your benefits. Your insurance policy may include access to preventive health programs and counseling. Look for benefits that offer services like free wellness programs and smoking cessation programs.

* Information on this page is for general purposes only and is not intended to be a substitute for financial, legal, tax, accounting or other professional advice.

Veterans Benefits

There are millions of veterans in the United States, but few of them take advantage of the government-funded benefit programs available to supplement the cost of senior care. If you or a loved one are a veteran and are looking for ways to pay for senior living, you may be eligible for a few more veteran assistance programs than you realized.

You may think paying for senior living could be a challenge, but there may be more financial aid options available than you realize. If you're a veteran, for example, you may qualify for thousands of dollars in government assistance.

There are millions of veterans throughout the country, but few know about the benefits available to them through the Veterans Aid and Attendance program. This government-funded pension benefit was designed to help senior veterans and their spouses pay for senior living, and it can be used to cover things like in-home care, assisted living, skilled nursing, and more.

VA Pension

One of the more widely known benefit programs is the VA Pension, which provides supplemental income to United States veterans and their families through the Veterans Pension and Survivors Pension benefit programs.

In order to qualify, the government says a veteran must have a minimum of 90 days of active duty service, with at least one day during a wartime period. If you entered active duty after September 7, 1980, generally you must have served at least 24 months or the full period for which you were called or ordered to active duty (with some exceptions), with at least one day during a wartime period.

In addition to meeting these service requirements, you must be:

- 65 or older, OR
- Totally and permanently disabled, OR
- A patient in a nursing home receiving skilled nursing care, OR
- Receiving social security disability insurance, OR
- Receiving supplemental security income

Finally, your yearly family income must be less than the amount set by Congress.

For more specific details and a free eligibility screening, you can contact Patriot Angels at 844-757-3047.

(Source: U.S. Department of Veterans Affairs)

Aid and Attendance (A&A) and Housebound

If you don't qualify for the VA Pension, you might still be eligible for a monthly stipend through the Aid and Assistance (A&A) or Housebound benefit programs. These programs were designed to help veterans cover the cost of health-related care they might receive in a nursing home or an assisted living community.

You can qualify for the Aid & Attendance allowance if you meet one of the following conditions:

- You require the aid of another person in order to perform personal functions required in everyday life, such as bathing, feeding, dressing, adjusting prosthetic devices, or protecting yourself from the hazards of your daily environment
- You are bedridden, in that your disability or disabilities requires that you remain in bed apart from any prescribed course of convalescence or treatment
- You are a patient in a nursing home because of a mental or physical incapacity
- Your eyesight is limited to a corrected 5/200 visual acuity or less in both eyes; or concentric contraction of the visual field to 5 degrees or less

Similar to the A&A benefit, Housebound provides an increased monthly amount on top of your regular pension. This resource is available to people who are substantially confined to their immediate premises due to a permanent disability, and the money can be used to cover some of the costs of in-home care.

According to the VA's website, a veteran or surviving spouse may not receive A&A benefits and Housebound benefits simultaneously. Because these allowances increase your pension amount, those who are not eligible for a basic pension due to excessive income could be eligible for a pension at these rates.

(Source: U.S. Department of Veterans Affairs)

Survivors Pension

The Survivors Pension benefit, also known as the Death Pension, provides a tax-free benefit to low-income, unremarried surviving spouses (and/or unmarried children) of a deceased veteran with wartime service. The pension amount is based on your annual family income, which must be less than the amount set by Congress.

Eligibility for this benefit requires the deceased veteran to meet the same requirements of the VA Pension. The spouse can access this benefit at any age, as long as he/she remains unmarried and meets the low-income requirements. But in order for children of a deceased veteran with wartime service to qualify for this benefit, they must be:

- Underage 18, OR
- Underage 23 if attending a VA-approved school, OR
- Permanently incapable of self-support due to a disability before age 18

(Source: U.S. Department of Veterans Affairs)

Applying for Financial Assistance

Depending on your individual circumstances and the benefit you want to apply for, you may need a variety of documents and forms. You can find the most current information you need to apply at the [VA website](#).

You can also visit your local regional benefit office to speak to a representative and receive advice on what you might qualify for and how to apply. If you aren't sure where your local regional office is, you can check out the [VA Facility Locator](#).