

ERIE COUNTY DEPARTMENT OF SENIOR SERVICES / NY CONNECTS

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(2/9/2022)

| 2022 | | BENEFIT CHECKLIST | | 2022 | | | | | | | | | | | | | | | |
|---|--|--|--|-------------------|------------------------|--------------------|--------------------------|----------------|--------------------------|----------------|------------------------|-------------|------------------------|--------------|------------------------------------|----------------|--|--|--|
| PROGRAM | WHO IS ELIGIBLE | INCOME & RESOURCES | BENEFITS | | | | | | | | | | | | | | | | |
| SOCIAL SECURITY Social Security Administration (SSA) 1-800-772-1213 www.ssa.gov/ | Retired workers 66+ or 62+ (reduced benefit) who have worked at least 40 quarters (fewer if born before 1929); disabled workers; surviving spouses and/or children. Full retirement age if born in 1943-1954 is 66 years. | Ages 62-66 years: Benefit is reduced \$1 for each \$2 earned over limit of \$18,240/year. The earnings limit for people turning 66 in 2020 is reduced \$1 for each \$3 earned over limit of \$48,600/year. There is no earning limit after full retirement age. | Monthly benefit is based on prior employment and amount withheld from earnings. There is no resource limit. | | | | | | | | | | | | | | | | |
| VETERANS BENEFITS NYS Division of Veterans' Affairs: 1-888-838-7697 Northern Erie: 632-4190 Southern Erie: 532-0674 Central Erie: 862-8902 Erie County Office of Veterans' Services: 858-6363 | Nonservice-connected wartime veterans' and their dependents' benefit information is to the right. Service-connected veterans should contact the applicable service organization. | Income limits for Supplemental Benefit: <table border="0"> <tr> <td></td> <td align="right">With 1 dependent:</td> </tr> <tr> <td>Disabled Veteran</td> <td align="right">\$1,146 .. \$1,500</td> </tr> <tr> <td>Housebound Veteran</td> <td align="right">1,400 .. 1,755</td> </tr> <tr> <td>Aid and attendance</td> <td align="right">1,911 .. 2,266</td> </tr> <tr> <td>Widow of Veteran</td> <td align="right">768 .. 1006</td> </tr> <tr> <td>Housebound Spouse.....</td> <td align="right">939 .. 1,176</td> </tr> <tr> <td>Aid and attendance for spouse</td> <td align="right">1,228 .. 1,465</td> </tr> </table> www.va.gov | | With 1 dependent: | Disabled Veteran | \$1,146 .. \$1,500 | Housebound Veteran | 1,400 .. 1,755 | Aid and attendance | 1,911 .. 2,266 | Widow of Veteran | 768 .. 1006 | Housebound Spouse..... | 939 .. 1,176 | Aid and attendance for spouse | 1,228 .. 1,465 | | | |
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| Disabled Veteran | \$1,146 .. \$1,500 | | | | | | | | | | | | | | | | | | |
| Housebound Veteran | 1,400 .. 1,755 | | | | | | | | | | | | | | | | | | |
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| Widow of Veteran | 768 .. 1006 | | | | | | | | | | | | | | | | | | |
| Housebound Spouse..... | 939 .. 1,176 | | | | | | | | | | | | | | | | | | |
| Aid and attendance for spouse | 1,228 .. 1,465 | | | | | | | | | | | | | | | | | | |
| SSI: SUPPLEMENTAL SECURITY INCOME Provides a monthly cash benefit, based on financial need, to supplement income of eligible applicants. Call SSA: 1-800-772-1213 | Persons blind, disabled, or 65+, who have low income and resources. | Unearned income / month: Single \$881 Couple \$1,295 (Benefit \$20 less if SSI is only source of income.) Resource limits: Single \$2,000 Couple \$3,000 + burial account. Exemptions: Home; car; some life insurance; personal & household goods. | Monthly cash benefit depends upon amount of other income, amount of rent or mortgage expense, and whether the applicant lives alone or with others. www.ssa.gov/pgm/ssi.htm | | | | | | | | | | | | | | | | |
| MEDICARE Part A: Hospital insurance. No premium (most enrollees), but has deductible & co-pays. Part B: Medical ins. Monthly premium of \$170.10 for most new enrollees; deductibles & co-pays for most recipients. Part D: Prescription coverage. Call SSA: 1-800-772-1213 or 1-800-MEDICARE (1-800-633-4227). www.medicare.gov | Persons 65+ who are eligible for Social Security or Railroad Retirement Benefits, and others 65+ who may purchase coverage although not categorically eligible for it. If a person receives SSD, Medicare coverage will begin in 24 months. Those with chronic renal disease and ALS are eligible in less time. | MC Part A: Unlimited coverage for acute hospital care after \$1,556 deductible per benefit period; limited skilled care in a skilled nursing facility; limited home care and hospice care. MC Part B: Doctors, outpatient service & durable medical equipment; \$233/year deductible. MC Part D: Prescription drug coverage. Plans cost range from \$7.20/month to \$101.00/month; plans provide approximately 75% prescription coverage. There are 23 stand-alone plans available; Medicare Advantage customers must obtain Part D coverage through their provider. "Extra help" available if low income; also, if enrolled in Medicare Savings Program. Income Limits / month: Individual...<\$1,615 Couple...<\$2,175 Resource Limits: Individual...<\$14,610 Couple...<\$29,160 | | | | | | | | | | | | | | | | | |
| MEDICARE SAVINGS PROGRAMS (MSP) QMB, SLMB, QI QMB: Qualified Medicare Beneficiary SLMB: Specified Low-Income Medicare Beneficiary QI: Qualified Individual | Persons on Medicare whose income is slightly above the Medicaid levels or persons on Medicare who are also eligible for Medicaid. Gross monthly income levels (including Medicare premium, but minus one Medigap premium): | QMB: Single \$1,153 Couple \$1,546 SLMB: Single \$1,379 Couple \$1,851 QI: Single \$1,549 Couple \$2,080 Resource limits: No resource test for the MSP. www.health.ny.gov/health_care/medicaid/program/update/savingsprogram/medicaresavingsprogram.htm | In the QMB, SLMB & QI programs, Medicaid will pay the monthly Medicare premium of \$104.90 - \$170.10, which will be added to the person's Social Security check. For those eligible for QMB only, Medicaid will also pay all Medicare co-pays and deductibles. | | | | | | | | | | | | | | | | |
| AFFORDABLE CARE ACT The Official Health Plan Marketplace for NY 1-855-355-5777 nystateofhealth.ny.gov/ | Anyone who needs health coverage can apply: Must live in New York; Must be a US citizen, national or lawfully present immigrant. Medicare recipients are not eligible. | Subsidized premiums for enrollees with income less than 400% of the federal poverty level. | The Marketplace provides a way to compare insurance plans which include comprehensive benefits & coverage. Plans are available to individuals/families, regardless of pre-existing conditions (NOT on Medicare). | | | | | | | | | | | | | | | | |
| MEDICAID: Comprehensive Health Care Coverage General questions: 858-6244 General applications: 1-888-401-6582 Home Care and Nursing Home applications: 858-1903 Provider overbilling: 853-8500 | Persons blind, disabled, or 65+, who have low income and resources; or persons under 65 who meet social services' home relief rules. ** If income exceeds limits, persons may be eligible for Medicaid with a spenddown or relief repayment. | Monthly income limits: ** Single \$904 Couple \$1,320 Resource limits: ** Single \$15,900 Couple \$23,400 + burial account. Exemptions: Home, car, health premiums & support payments. | Comprehensive coverage for medical care, including most prescription drugs; medical equipment; Medicaid-participating MD services; hospital; nursing home; home care and transportation for approved med services. www.health.ny.gov/health_care/medicaid/ | | | | | | | | | | | | | | | | |

| PROGRAM DESCRIPTION | WHO IS ELIGIBLE | INCOME & RESOURCES | BENEFITS |
|---|--|--|--|
| HEAP: Home Energy Assistance Program Financial help for winter heating costs. HEAP Hot Line: 858-7644 HEAP App Line: 858-1969 WAP: Weatherization Assist Program: 858-8526 | Low-income households (owners and renters). Regular HEAP: No resource limits. Emergency HEAP: Must have shut-off notice. Resource limits apply. | Regular HEAP gross monthly income limits (do not include Medicare premium): Single \$2,729 Couple \$3,549 **Please check w/ HEAP during season as guidelines & benefits may change. www.erie.gov/depts/socialservices/heap.asp | Once a season grant or credit to supplier. Possible emergency grant if faced with shut-off. Furnace repair / replacement may be available for homeowners; resource limits apply. |
| SNAP / FOOD STAMPS: Supplemental Nutrition Assistance Program Benefit card can be used to purchase food items. Food Stamps: 858-7239 otda.ny.gov/programs/snap/ | Low-income households; the following information pertains to people 60 years of age and older and disabled individuals. **This information is subject to change and is only to be used as a guideline. Please submit an application for consideration. | **Approximate gross monthly income limits for those 60 years+ or disabled: Single \$2,147 Couple \$2,903 Eligibility is NOT guaranteed as housing and medical expenses are used to determine eligibility & benefit amount. Resource limits: No limits. | Monthly benefit value depends on size, income, housing and medical expenses of household. Minimum benefit: \$20 Maximum benefit: Single \$250 Couple \$459 |
| PHONE DISCOUNT Provides reductions on phone service. Verizon LifeLine: 1-800-417-3849 Spectrum LifeLine: 1-855-243-8892 | Anyone who receives one or more of the following: Food Stamps, Medicaid, Public Assistance, SSI, Vet's. Disability Pension (nonservice-connected), Vet's. Surviving Spouse Pension (nonservice-connected). | Income-based criteria (see link below) or enrolled in one or more programs listed at left. The guidelines used for program eligibility changed as of 12/02/16; check with your phone provider if you have questions. www.lifelinesupport.org/ls/does-i-qualify/default.aspx | Reduction on monthly phone bill; may also give discount on installation charges. www.verizonwireless.com/b2c/landingpages/lifeline.jsp www.spectrum.net/support/voice/new-york-lifeline-phone-credit |
| IT-214 NYS TAX REBATE Tax credit or check to homeowners & renters who pay a high % of income on rent or property taxes. For forms: 1-518-457-5431 Tax Dept. information: 1-518-457-5181 | Resided in NYS for all of 2019 and in the same residence for 6 mos. or more. Homeowners & renters who meet financial eligibility criteria; based on income, and either property taxes or amount of rent paid. www.tax.ny.gov/pit/credits/real_property_tax_credit.htm | Maximum yearly household gross income \$18,000 Homeowners: Market value of home cannot exceed \$85,000. Renters: Adjusted average rent (see form) must not exceed \$450. No resource limit. | Amount of refund depends on percentage of income spent on property tax or rent. Maximum rebate \$75 if under 65, \$375 if 65+. Applications may be submitted for 3 prior years with an April 15th deadline. |
| PROPERTY TAX EXEMPTION Can be as high as 50% of property taxes on homestead. Contact city or town where taxes are paid to apply. Buffalo: 851-4374 | Real estate owners 65+ or persons with physical disabilities who use their property exclusively as their legal residence are eligible. Benefit for Veterans may differ. Veterans of any age should call for additional information. | Maximum yearly household gross income: \$88,050. * The gross income limit for the senior exemption is \$37,399. Application dates: Buffalo residents July 1 - Dec. 1.* *All others contact local city or township for dates & rates. | Up to 50% tax exemption on real estate property taxes. www.tax.ny.gov/pit/property/exemption/seniorexempt.htm For STAR information: www.tax.ny.gov/pit/property/star/default.htm |
| EPIC: Elderly Pharmaceutical Insurance Coverage. NYS program provides co-pay assist for MC D covered RXs and some MC D excluded RXs. To apply, call: 1-800-332-3742 | Persons 65+, must be enrolled in Medicare Part D. Medicaid recipients are generally not eligible. www.health.ny.gov/health_care/epic/ | Yearly income limits: Single..... \$75,000 Couple \$100,000 No resource limits. Premiums and deductibles are based on income. | Beneficiary co-pays range from \$3 to \$20 per prescription. EPIC will pay basic plan MC D premiums for single members with annual income of \$23,000 or \$29,000 if married. |
| SUBSIDIZED HOUSING For an Independent Senior Citizens Housing list, call Senior Services: 858-8526 | 62+ or handicapped / disabled, with total annual income low enough to qualify. | Call individual complex, or: Bflo. Mun. Hsg. Auth.: 855-6774 Kenmore Mun. Hsg: 874-6000 Lacka. Mun. Hsg: 823-2551 Tona. Hsg. Auth: 692-3555 | Generally, 30% of their average monthly income (earned & unearned). |
| Emergency Broadband Benefit Affordable Connectivity Program | Low-income families, eligibility criteria can be found at www.fcc.gov/broadbandbenefit | Has income that is at or below 135% of the Federal Poverty Guidelines. | Receive up to \$50 off your first month. \$30 a month for internet. More details visit www.fcc.gov/broadbandbenefit |
| AARP SAFE DRIVING PROGRAM AARP: 1-888-687-2277 or www.aarp.org/applications/VMISLocator/searchDspLocation.s.action | NYS residents 50+ who have a valid NYS driver's license. | No limits. | 10% reduction in base rate of liability, personal injury, & collision insurance premium; active pt. total will be reduced up to 4 pts. on violations incurred w/in last 18 mos. |