

STATE OF ALABAMA DEPARTMENT OF HUMAN RESOURCES
FOOD ASSISTANCE DIVISION
Alabama Elderly Simplified Application Program (AESAP)

ALLOWABLE MEDICAL EXPENSES

Below is a list of most allowable medical expenses. If you have any of these expenses, please check the ones that you have and send proof of the amount and how often you pay the expense.

- ___ Prescription drugs (a printout from the Pharmacy for the past two full months or longer)
- ___ Hospital bill(s) (any current outstanding bills)
- ___ Doctor, dentist, or other health care professional visit(s) and doctor's statement of how often you are expected to see him/her and how much you pay each for each visit.
- ___ Over the counter medications prescribed by a doctor (statement from doctor, 2 months of receipts and how often paid)
- ___ Medicare premium – statement from SSA stating amount withheld from monthly benefit.

- ___ Hospital insurance premium (current statement/coupon from provider with your name on the info)
- ___ Insurance for Prescription drug coverage (current statement/coupon from provider with your name on the info)

- ___ Transportation expenses for travel to doctors, hospitals, drug stores (number of trips each month verified by your doctor and statement from the person you pay verifying the amount charged for transportation. If you drive, the number of miles you travel one way)

- ___ Medical appliances or equipment (hearing aids, wheelchairs, artificial limbs, eye glasses, contact lens, dentures, etc.)

- ___ Attendant care or homemaker services (verification from the doctor regarding the need for these services and a statement from the person providing the service to verify cost)

- ___ Service animal (includes food, veterinary care and other related costs)

List below any other expenses you pay related to medical care (and send proof) and we will determine if they can also be used.