What's Medicare?

Medicare is health insurance for:

- People 65 or older
- Certain people under 65 with disabilities
- People of any age with End-Stage Renal Disease (ESRD) (permanent kidney failure requiring dialysis or a kidney transplant)

What are the parts of Medicare?

Original Medicare is a fee-for-service health plan that has two parts: Part A (Hospital Insurance) and Part B (Medical Insurance).

Part A helps cover:

- Inpatient care in hospitals
- Skilled nursing facility care
- Hospice care
- Home health care

You usually don't pay a monthly premium for Part A coverage if you or your spouse paid Medicare taxes while working for a certain amount of time. This is sometimes called premium-free Part A. If you aren't eligible for premium-free Part A, you may be able to buy Part A.

Part B helps cover:

- Services from doctors and other health care providers
- Outpatient care
- Home health care
- Durable medical equipment (DME) (like wheelchairs, walkers, hospital beds, and other equipment)
- Many preventive services (like screenings, shots or vaccines, and yearly "Wellness" visits)

Most people pay the standard Part B premium amount.

Note: Original Medicare pays for much, but not all of the cost for health care services and supplies. Medicare Supplement Insurance (Medigap) policies, sold by private companies, can help pay some of the remaining health care costs, like copayments, coinsurance, and deductibles.

What are the parts of Medicare? (continued)

Medicare Advantage (also known as Part C):

- An "all in one" alternative to Original Medicare. These "bundled" plans include Part A, Part B, and usually Part D.

- Plans may have lower out-of-pocket costs than Original Medicare.

- Most plans offer extra benefits that Original Medicare doesn't cover— like vision, hearing, and dental services.

Part D (prescription drug coverage):

- Helps cover the cost of prescription drugs (including many recommended shots or vaccines)

- Run by private insurance companies that follow rules set by Medicare

- May help lower your drug costs and help protect against higher costs in the future

Note: If you have limited income and resources, you may qualify for help to pay for some health care and prescription drug costs. For more information on programs that can help pay for your health care costs, visit Medicare.gov, or call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

What's Medicaid?

Medicaid is a joint federal and state program that helps pay medical costs if you have limited income and/or resources and meet other requirements. People with Medicaid may get coverage for services that Medicare doesn't cover or only partially covers, like nursing home care, personal care, transportation to medical services, home- and community-based services, and dental, vision, and hearing services.

In order to qualify for Medicaid in a state, you must be resident of that state and a U.S. citizen (or have qualified immigration status). Each state has different rules about eligibility and applying for Medicaid. If you qualify for Medicaid in your state, you automatically qualify for Extra Help paying your Medicare prescription drug coverage (Part D).

You may be eligible for Medicaid if you have limited income and are:

- 65 or older
- A child under 19
- Pregnant
- Living with a disability
- A parent or adult caring for a child
- An adult without dependent children (in certain states)

In many states, more parents and other adults can get coverage now. If you were turned down in the past, you can try again and may qualify.

When you enroll, you may be able to get health care benefits like:

- Doctor visits
- Hospital stays
- Long-term services and supports
- Preventive care, including immunizations, mammograms, colonoscopies, and other needed care
- Prenatal and maternity care
- Mental health care
- Necessary medications
- Vision and dental care (for children)

You should apply for Medicaid if you or someone in your family needs health care. If you aren't sure whether you qualify, a qualified caseworker in your state can look at your situation. Contact your State Medical Assistance (Medicaid) office to see if you qualify and to apply.

Dual eligibility

Some people qualify for both Medicare and Medicaid and are called **"dual eligibles."** If you have Medicare and full Medicaid coverage, most of your health care costs are likely covered.

You can get your Medicare coverage through Original Medicare or a Medicare Advantage Plan. If you have Medicare and/or full Medicaid, Medicare covers your Part D prescription drugs. Medicaid may still cover some drugs and other care that Medicare doesn't cover.

For more information

- Visit HealthCare.gov/medicaid-chip/getting-medicaid-chip to learn more about Medicaid.
- Visit Medicare.gov/contacts, or call 1-800-MEDICARE to get the phone number for your State Medical Assistance (Medicaid) office.
- Visit Medicare.gov, or call 1-800-MEDICARE (1-800-633-4227) to get more information about Medicare.

You have the right to get Medicare information in an accessible format, like large print, Braille, or audio. You also have the right to file a complaint if you feel you've been discriminated against. Visit Medicare.gov/about-us/accessibility-nondiscrimination-notice, or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

Paid for by the Department of Health & Human Services.

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

CMS Product No. 11306