



## MEDICARE

### **What is Medicare and who qualifies?**

Medicare covers people aged 65 and older, people with disabilities, and people with end-stage renal disease.

Medicare is a federal health insurance administered by CMS (Centers for Medicare and Medicaid Services).

### **What are some of Medicare programs?**

- **Part A – Hospital Insurance that covers in-patient hospital stays, short-term care in skilled nursing facilities, hospice care, and some home health care. Part A is free if a person has paid into the Social Security trust fund for forty (40) quarter, or ten years;**
- **Part B – Medical Insurance that covers out-patient hospital care, doctors' visits, laboratory fees; durable medical equipment, and some preventive care like mammograms. There is a monthly fee for Part B, call a premium;**
- **Part C – Medicare Managed Care or Medicare Advantage plans – allows beneficiaries to get more complete health insurance coverage through private plans. These programs replace the standard Part A and Part B coverage, and may include Part D coverage, usually by expanding the types of services that are covered. Most Medicare Advantage plans charge a monthly premium in addition to t he Medicare Part B premium. Most plans require patients to use a limited network of providers;**
- **Part D– Prescription Drug Coverage is provided by private insurance companies, which are subsidized by Medicare. Coverage ranges from basic to extensive and from low-cost to more expensive;**

- **QMB – Qualified Medicare Benefits** assists with your co-payments, annual deductibles, prescription drug costs, and Medicare premiums.

A co-payment is the amount left for the patient to pay after Medicare pays for a service.

A deductible is the amount the patient pays at the start of each year, before Medicare provides coverage.

### **What is Supplemental Medicare Insurance?**

- **Medigap (Supplemental Medicare Insurance)** – fills some of the gaps in Medicare coverage, paying for some health care costs that Medicare does not pay. The more gaps that a Medigap plan covers; the more expensive the policy is to buy. Eligibility for Medigap policies can vary. Plans must offer “guaranteed issue” for new Medicare beneficiaries who are turning sixty-five (65) years of age: the plan cannot refuse to enroll a beneficiary, even if he or she is injured or sick.

### **Who do I contact for assistance in applying for Medicare benefits?**

George Washington University Law  
Health Insurance Counseling Project (HICP)  
(202) 739-0668 (OFFICE)  
(202) 973-1079 (TTY)