A Quick Guide to Medicare & Medicaid

Medicare

What's Medicare?

Medicare is health insurance for people:

- 65 or older
- Under 65 with certain disabilities
- Of any age with End-Stage Renal Disease (ESRD) (permanent kidney failure requiring dialysis or a kidney transplant)
- Of any age with ALS (amyotrophic lateral sclerosis, also called Lou Gehrig's disease)

What are the parts of Medicare?

Original Medicare includes Medicare Part A (Hospital Insurance) and Part B (Medical Insurance).

Medicare Advantage Plans (also called "Part C" or "MA Plans") are Medicare-approved plans from private companies that offer an alternative to Original Medicare. These plans bundle together your Part A, Part B, and usually Part D.

Part A – Hospital Insurance

Helps cover:

- Inpatient hospital care
- Skilled nursing facility care
- Hospice care
- Home health care

Part B – Medical Insurance

Helps cover:

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

Part D – Drug coverage

Helps cover the cost of prescription drugs.

Plans that offer Medicare drug coverage (Part D) are run by private insurance companies that follow rules set by Medicare.

Your Medicare options

When you first sign up for Medicare, and during certain times of the year, you can choose how you get your Medicare coverage. **There are 2 main ways to get Medicare:**

Original Medicare

- Includes Medicare Part A (Hospital Insurance) and Part B (Medical Insurance).
- You can join a separate Medicare drug plan to get Medicare drug coverage (Part D).
- You can use any doctor or hospital in the U.S. that accepts Medicare.
- You can also buy supplemental coverage that helps pay your out-of-pocket costs (like your 20% coinsurance).

☑ **Part A** 

☑ **Part B** 

You can add:

☐ **Part D** 

You may be able to add:

☐ **Supplemental coverage** 

This includes Medicare Supplement Insurance (Medigap). It can help pay some costs that Original Medicare doesn't. Or you can use coverage from a current or former employer or union, or Medicaid (if you qualify).

Medicare Advantage (Part C)

- A Medicare-approved plan from a private company that offers an alternative to Original Medicare for your health and drug coverage. These plans bundle together your Part A, Part B, and usually Part D.
- You may need to use doctors in its network and get approval (prior authorization) for certain drugs or services.
- Usually have different out-of-pocket costs than Original Medicare, including a yearly limit on out-of-pocket costs.
- Most plans offer extra benefits that Original Medicare doesn't cover—like vision, hearing, dental, and more.

☑ **Part A** 

☑ **Part B** 

Most plans include:

☑ **Part D** 

☑ **Extra benefits**

What's Medicaid?

Medicaid is a joint federal and state program that helps pay health care costs if you have limited income and (in some cases) resources and meet other requirements.

Medicaid offers benefits that Medicare doesn't normally cover, like nursing home care and personal care. The rules around who's eligible for Medicaid are different in each state. If you qualify for Medicaid in your state, you automatically qualify for Extra Help (a program that helps people with limited income and resources pay Medicare drug coverage (Part D) out-of-pocket costs).

How do I qualify for Medicaid?

Medicaid programs vary from state to state. They may also have different names, like "Medical Assistance" or "Medi-Cal."

- Each state has different income and resource requirements.
- Call your State Medical Assistance (Medicaid) office to find out if you qualify. Visit Medicaid.gov/about-us/where-can-people-get-help-medicaid-chip.

You might be able to get Medicaid if you meet your state's resource limit, but your income is too high to qualify. Some states let you "spend down" the amount of your income that's above the state's Medicaid limit. You do this by paying non-covered medical expenses and cost sharing (like Medicare premiums and deductibles) until your income is lowered to a level that qualifies you for Medicaid.

Note: Starting January 1, 2027 (or earlier in some states), certain adults must complete at least 80 hours per month of work or other approved activities to qualify for Medicaid and keep their coverage. **This requirement doesn't apply to people with Medicare**.

Can I have both Medicare & Medicaid?

Yes, it's possible to have both Medicare and Medicaid if you qualify. People who have both Medicare and full Medicaid coverage are "dually eligible." Medicare pays first when you're dually eligible and you get Medicare-covered services. Medicaid pays after Medicare and any other health insurance you have.

If you're dually eligible, Medicare covers your prescription drugs. You'll automatically be enrolled in a Medicare drug plan that will cover your drug costs instead of Medicaid. Medicaid may still cover some drugs that Medicare doesn't cover. Medicaid may also help pay your Medicare premiums and other out-of-pocket costs through a Medicare Savings Program (if you qualify). Visit Medicare.gov/medicare-savings-programs for more information.

Note: Medicare Savings Programs are available through your state. The names of these programs and how they work may vary by state. Medicare Savings Programs aren't available in U.S. territories (Puerto Rico, the U.S. Virgin Islands, Guam, the Northern Mariana Islands, and American Samoa).

For more information on how Medicare and full Medicaid coverage work together, visit Medicare.gov/basics/costs/help/medicaid.

Where can I get more information?

Find general information:

- Visit Medicare.gov to get more information about the Medicare health and drug plans in your area, find participating health care providers and suppliers, and more.
- Review the most recent "Medicare & You" handbook to learn about what's new, find your Medicare costs, and get information about what Medicare covers.

Get personalized help:

- Connect with a real person, 24 hours a day, 7 days a week (except some federal holidays):
  - Call us at 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048. If you need free help in a language other than English or Spanish, say "Agent" to talk to a customer service representative.
  - Live chat with us at Medicare.gov/talk-to-someone.
- Visit shiphelp.org to find your local State Health Insurance Assistance Program (SHIP) and get health insurance counseling.
- Visit the Eldercare Locator at eldercare.acl.gov to find local resources, check for benefits, and plan for long-term care.
- Visit Medicaid.gov/about-us/where-can-people-get-help-medicaid-chip to find contact information for your state's Medicaid office and get information about your eligibility, applying or checking on an application, checking on claims, replacing your Medicaid card, or finding a provider.

Notes

Notes

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.

This product was produced at U.S. taxpayer expense.

CMS Product No. 12207 • September 2026