



# Understanding Medicare A, B, C, and D



## Medicare

Medicare is a federal health insurance program run by the Centers for Medicare and Medicaid Services (CMS). Medicare serves all Americans age 65 or older and adults 18-64 who meet their disability criteria. Not all people who have “Medicare” have the same benefits. How consumers enroll and which choices they make affect their coverage for doctor visits, preventive care, prescription drugs, and immunizations. See below.

### Medicare Part A

Medicare Part A helps cover in-patient care in hospitals, skilled nursing facilities, hospice, and home health care.

Typically, Part A is free for Medicare enrollees.

### Medicare Part B

Medicare Part B covers doctor visits, lab tests, surgeries, and medically-necessary supplies to treat a disease or condition.

Part B is additional coverage that the patient has to subscribe to and pay a premium. Patients may have to pay a share of cost for certain health care services.

### Medicare Part C/Medicare Advantage

Medicare Advantage Plans include both Part A and Part B. People who elect this coverage surrender original Medicare.

Advantage Plan enrollees usually pay a monthly premium (in addition to Part B premium) and may be responsible for copays or coinsurance for covered services.

Private insurance companies approved by Medicare provide coverage. Typically, patients must use Advantage plan doctors and hospitals or pay more or all costs. Like most HMOs, Medicare Advantage Plans will not reimburse your public health clinic for services their enrollees can get from their own Medicare Advantage Network.

### Medicare Part D

Medicare Part D covers prescription drugs and some immunizations. Rules and coverage are subject to change.

Subscribers will receive a separate Part D Medicare card to use at the pharmacy.