



MEDICARE AND MEDICAID BASICS

Medicare

Federal health care coverage for:

People aged 65 or older



Certain people under 65 with disabilities



People of any age with End-Stage Renal Disease



More than **58.5 million** beneficiaries enrolled in Medicare

More than **6,100** hospitals



15,000 skilled nursing facilities



1.2 million physicians and other health care practitioners and service providers



Medicaid

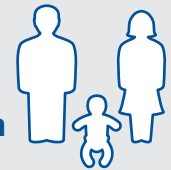
Cooperative Federal and State health care coverage for:

Low-income adults



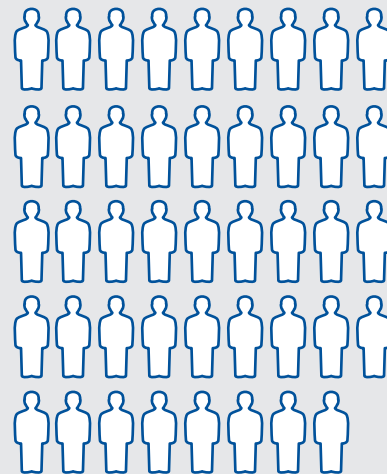
Pregnant women

Children



More than **72 million** beneficiaries enrolled in Medicaid, including more than

28 million children



Target Audience: Medicare and Medicaid Providers

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The Centers for Medicare & Medicaid Services (CMS) administers Medicare and Medicaid along with other Federal health care programs and services. This booklet provides an overview of the Medicare and Medicaid Programs and some brief information on other types of health coverage.

QUICK FACTS

Medicare

Medicare is a national program administered by the Federal government, comprising:

- **Part A – Hospital Insurance**
Inpatient hospital, inpatient skilled nursing facility, hospice, and some home health services
- **Part B – Medical Insurance**
Physician services, outpatient care, durable medical equipment, home health services, and many preventive services
- **Part C – Medicare Advantage (MA)**
Medicare-approved private insurance companies that provide all Part A and Part B services and may provide prescription drug coverage and other supplemental benefits
- **Part D – Prescription Drug Benefit**
Medicare-approved private insurance companies that provide outpatient prescription drug coverage

Health care coverage for:

- People 65 or older
- People with certain disabilities
- People diagnosed with end-stage renal disease (ESRD)

Medicare is the nation's largest payer of inpatient hospital services for the elderly and people with ESRD.

Medicaid

Medicaid is a network of Statewide programs administered by State governments following broad national guidelines established by Federal statutes, regulations, and policies.

Health care coverage for:

- Low-income adults
- Pregnant women
- Children

Eligibility varies from State to State.

Medicaid is the nation's largest payer of mental health services, long-term care services, and births. Medicaid pays for 40 percent of all births.



BENEFICIARIES

Medicare

Health insurance for:

- People 65 and older
- People younger than age 65 with certain disabilities entitled to Social Security disability or Railroad Retirement Board benefits for 24 months (the 24-month waiting period is waived for people with amyotrophic lateral sclerosis [ALS], also known as Lou Gehrig's disease)
- People of any age with ESRD



Medicaid

Individuals must meet eligibility requirements and State rules.

Federal law requires States to cover certain eligibility groups and gives them the flexibility to cover others.

All States cover eligibility groups that serve the following populations:

- Children and adolescents
- Parents or caretaker relative of minor children
- Certain people with disabilities or blindness
- Pregnant women
- Seniors
- Youth "aging out" of foster care

For many eligibility groups, individuals must meet certain resource limits.

In addition, individuals must meet State and Federal requirements for:

- Immigration status
- Residency
- U.S. citizenship

Dual Eligible Beneficiaries

“Dual eligible beneficiaries” generally describes beneficiaries eligible for both Medicare and Medicaid. The term includes beneficiaries enrolled in Medicare Part A, Part B, or both and receiving full Medicaid benefits or assistance with Medicare premiums or cost sharing through one of these Medicare Savings Program (MSP) eligibility groups:

- **Qualified Medicare Beneficiary (QMB) Program:** Helps pay premiums, deductibles, coinsurance, and copayments for Part A, Part B, or both programs
- **Specified Low-Income Medicare Beneficiary (SLMB) Program:** Helps pay Part B premiums
- **Qualifying Individual (QI) Program:** Helps pay Part B premiums
- **Qualified Disabled Working Individual (QDWI) Program:** Pays the Part A premium for certain disabled and working beneficiaries who have disabilities

For more information, refer to the [Dual Eligible Beneficiaries Under Medicare and Medicaid](#) booklet.

COVERED SERVICES

Medicare

Beneficiaries may choose coverage as follows:

- Part A and Part B services through the Original Medicare Program with optional Part D coverage through a stand-alone Prescription Drug Plan
- Part A and Part B services through an MA Plan if they reside in its service area, with Part D coverage included in some MA Plans

Note: Some beneficiaries get a Medicare supplement plan (also called Medigap) for expanded coverage in the Original Medicare Program

Medicaid

Some Medicaid Programs pay for care directly. Others use private insurance companies to provide Medicaid coverage.

States **must** cover certain services through their Medicaid Program, including:

- Doctor visits
- Inpatient and outpatient hospital services
- Mental health services
- Needed medications
- Prenatal care and maternity care
- Preventive care, such as immunizations, mammograms, and colonoscopies

COVERED SERVICES (CONT.)

Medicare

Part A helps cover:

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

Part B helps cover:

- Services from doctors and other health care providers
- Outpatient care
- Home health care
- Durable medical equipment
- Many preventive services

Part C includes all benefits and services covered under Part A and Part B and may include extra benefits and services for an extra cost.

Part D helps cover the cost of prescription drugs.

Medicaid

States **may choose** to cover added services. Some of these include:

- Dental services
- Home and community-based services
- Physical therapy
- Prosthetic devices
- Vision and eyeglasses
 - Children and adolescents get vision, dental, hearing, and other services through the [Medicaid Early and Periodic Screening, Diagnostic, and Treatment \(EPSDT\)](#) benefit



OTHER COMMON TYPES OF COVERAGE

You may encounter patients with health care coverage other than Medicare or Medicaid. These programs include:

- Private insurance coverage (such as group health plan or retiree coverage)
- TRICARE
- COBRA
- Workers' Compensation
- Liability insurance coverage

For more information on these types of coverage, take the [Medicare Secondary Payer Provisions](#) web-based training course. Need help accessing the course? Find information in [The Medicare Learning Network® \(MLN\) Learning Management System \(LMS\) FAQs](#) booklet.

RESOURCES

General Information

Medicare	Medicaid
<p>Find additional resources about the Medicare Program on the Medicare.gov website.</p> <p>The Social Security Administration processes Medicare enrollment applications.</p> <p>The searchable Medicare Coverage Database allows you to learn about any national and local determinations regarding coverage for specific medical services.</p> <p>See if your patient qualifies for Extra Help With Medicare Prescription Drug Plan Costs.</p>	<p>Find additional resources about the Medicaid Program on the Medicaid.gov website.</p> <p>Contact your State Medicaid office with questions.</p> <p>See if your patient qualifies for Medicaid in your State based on income alone using the Medicaid & CHIP Coverage tool.</p> <p>Share easy-to-read infographics on common Medicaid questions or find key messages and tips from the Medicaid Program Integrity Education webpage.</p>

Provider Enrollment

Medicare	Medicaid
<p>Find health care professional-specific information about enrolling in Medicare through MLN provider-supplier enrollment educational products.</p>	<p>Find more information about your State's Medicaid Program on the State Overviews webpage.</p>

Billing and Claims Submission

Medicare	Medicaid
<p>Find information about submitting Medicare claims in the Medicare Billing: 837I and Form CMS-1450 and the Medicare Billing: 837P and Form CMS-1500 publications.</p>	<p>While each State Medicaid Program varies, general rules require that you:</p> <ul style="list-style-type: none"> • Bill only for covered services • Ensure beneficiaries are eligible for services where they are furnished • Ensure medical records are accurate, legible, signed, and dated • Return any overpayments within 60 days <p>Find more information about your State's Medicaid Program on the State Overviews webpage.</p>

Payment

Medicare	Medicaid
Find information about payment for your provider type on the MLN Publications webpage. Enter “Medicare Payment Policy” in the Filter field.	Find more information about your State’s Medicaid Program on the State Overviews webpage.

Appeals

Medicare	Medicaid
Find information about Medicare appeals in the Medicare Parts A & B Appeals Process booklet and the two web-based trainings “Part C Organization Determinations, Appeals, & Grievances” and “Part D Coverage Determinations, Appeals, & Grievances” on the MLN LMS .	Find more information about your State’s Medicaid Program on the State Overviews webpage.

Program Integrity

Medicare	Medicaid
Find information about compliance and fraud, waste, and abuse on the MLN Provider Compliance webpage.	Find information about program integrity in the Medicaid Program on the Medicaid Program Integrity Education webpage. Find more information about your State’s Medicaid Program on the State Overviews webpage.

Program Guidance

Medicare	Medicaid
<p>Visit the CMS Regulations & Guidance webpage for information on rulings, transmittals, manuals, and other guidance.</p> <p>MLN Matters® Articles are national articles that inform health care professionals about the latest changes to CMS programs.</p> <p>Sign up for MLN electronic mailing lists and access MLN Connects® newsletters on the MLN News & Updates website.</p>	<p>CMS issues guidance to State Medicaid directors, State health officials, and other stakeholders regarding Medicaid operational issues. This guidance comes through letters, informational bulletins, and frequently asked questions. CMS also issues Federal regulations that codify statutory provisions and policies that have been previously outlined in subregulatory guidance. Search these documents on the Medicaid Federal Policy Guidance webpage.</p>

Hyperlink Table

Embedded Hyperlink	Complete URL
CMS Regulations & Guidance	https://www.cms.gov/Regulations-and-Guidance/Regulations-and-Guidance.html
Contact Your State Medicaid Office With Questions	https://www.medicaid.gov/about-us/contact-us/contact-state-page.html
Dual Eligible Beneficiaries Under Medicare and Medicaid	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/CMS1244469.html
Easy-To-Read Infographics on Common Medicaid Questions	https://www.cms.gov/Medicare-Medicaid-Coordination/Fraud-Prevention/Medicaid-Integrity-Education/infographics.html
Extra Help With Medicare Prescription Drug Plan Costs	https://secure.ssa.gov/i1020/start
Key Messages and Tips	https://www.cms.gov/Medicare-Medicaid-Coordination/Fraud-Prevention/Medicaid-Integrity-Education/key-messages-and-tips.html
Medicaid & CHIP Coverage Tool	https://www.healthcare.gov/medicaid-chip
Medicaid Early and Periodic Screening, Diagnostic, and Treatment (EPSDT)	https://www.cms.gov/Medicare-Medicaid-Coordination/Fraud-Prevention/Medicaid-Integrity-Education/Downloads/infograph-Medicaid-EPSDT-[August-2015].pdf
Medicaid Federal Policy Guidance	https://www.medicaid.gov/federal-policy-Guidance
Medicaid Program Integrity Education	https://www.cms.gov/Medicare-Medicaid-Coordination/Fraud-Prevention/Medicaid-Integrity-Education/edmic-landing.html
Medicare Billing: 837I and Form CMS-1450	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/ICN006926.html
Medicare Billing: 837P and Form CMS-1500	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/ICN006976.html

Hyperlink Table (cont.)

Embedded Hyperlink	Complete URL
Medicare Coverage Database	https://www.cms.gov/medicare-coverage-database
Medicare Parts A & B Appeals Process	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/CMS1243294.html
Medicare Secondary Payer Provisions	https://learner.mlnlms.com
MLN LMS	https://learner.mlnlms.com
MLN Matters® Articles	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles
MLN News & Updates	https://www.cms.gov/Outreach-and-Education/Outreach/FFSPProvPartProg/Index.html
MLN Provider Compliance	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/ProviderCompliance.html
MLN Provider-Supplier Enrollment Educational Products	https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/Downloads/Medicare_Provider-Supplier_Enrollment_National_Education_Products.pdf
MLN Publications	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications.html
Social Security Administration	https://www.ssa.gov/benefits/medicare
State Overviews	https://www.medicaid.gov/state-overviews
The Medicare Learning Network® (MLN) Learning Management System (LMS) FAQs	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/ICN909182.html

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