Medicare

Federal health care coverage for:

- People of any age with End-Stage Renal Disease
- Certain people under 65 with disabilities
- People aged 65 or older

More than 55 million beneficiaries enrolled in Medicare

More than 6,000 hospitals

15,000 nursing facilities

1 million physicians and other health care practitioners

Medicaid

Cooperative Federal and State health care coverage for:

- Low-income adults
- Pregnant women
- Children

More than 68 million beneficiaries enrolled in Medicaid, including almost 30 million children
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This educational product provides an overview of the Medicare and Medicaid Programs and some brief information on other types of health coverage.

Please note: The information in this publication applies to the Medicare and Medicaid Programs.

The Hyperlink Table, at the end of this document, provides the complete URL for each hyperlink.

Quick Facts

Medicare

Medicare is a national program administered by the Federal government that consists of:

- **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 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 provide outpatient prescription drug coverage

Health insurance for:

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

Medicare is the nation’s primary 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 coverage for:

- Low-income adults
- Pregnant women
- Children

Eligibility varies from State to State—under the Affordable Care Act, many States recently expanded Medicaid coverage.

Medicaid is the nation’s primary public payer of mental health services, long-term care services, and 40 percent of all births.
**Beneficiaries**

**Medicare**

Health insurance for:

- People aged 65 and older
- People younger than age 65 with certain disabilities who have been 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] or Lou Gehrig’s disease)
- People of any age with ESRD

**Medicaid**

Eligibility depends on income, household size, and State rules.

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

Population groups include:

- Children and teens up to age 19
- Parents or caretaker relative of minor children
- Certain people with disabilities
- Pregnant women
- Seniors
- Youth “aging out” of foster care

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

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

- Immigration status
- Residency
- U.S. citizenship

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**Dual Eligible Beneficiaries**

Dual eligible beneficiaries are individuals enrolled in both Medicare and Medicaid, including individuals enrolled in Part A and/or Part B who receive full Medicaid benefits and/or assistance with Medicare premiums or cost sharing.

For more information, refer to the “Dual Eligible Beneficiaries Under the Medicare and Medicaid Programs” educational product.
Covered Services

Medicare

Beneficiaries may choose coverage as follows:

- Part A and Part B services through the Original Medicare Program
  - Part D coverage through a stand-alone Prescription Drug Plan
  - Medicare supplement plan (also called Medigap) for expanded coverage
- Part A and Part B services from an MA Plan if they reside in its service area
  - Most MA Plans include prescription drug coverage
  - Medigap policies can’t work with MA Plans

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

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

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 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 and Product Ordering System (LM/POS) FAQs” educational product.

Resources

General Information

**Medicare**

Find additional resources about the Medicare Program on the [Medicare.gov](https://www.medicare.gov) website.

The Social Security Administration processes Medicare enrollment applications.

The searchable [Medicare Coverage Database](https://www.cms.gov/Medicare/Coverage/CoverageIndex.aspx) allows you to learn about any national and local determinations regarding coverage for specific medical services.

See if your patient qualifies for [extra help with Medicare Prescription Drug Plan costs](https://www.medicare.gov/extras).  

**Medicaid**

Find additional resources about the Medicaid Program on the [Medicaid.gov](https://www.medicaid.gov) website.

Contact your State Medicaid office with questions.

See if your patient qualifies for Medicaid in your State based on income alone using the [find out if you qualify for Medicaid](https://www.medicaid.gov/eligibility/).  

Share [easy-to-read infographics on common Medicaid questions](https://www.medicaid.gov/medicaid-and-chips-program-administration/medicaid-program-integrity/medicaid-program-integrity-education).  

Provider Enrollment

**Medicare**

Find health care professional-specific information about enrolling in Medicare through [MLN provider-supplier enrollment educational products](https://mln.nhhc.gov/).  

**Medicaid**

Find more information about your State's Medicaid Program on the [State Medicaid Profiles](https://www.medicaid.gov/medicaid-and-chips-program-administration/medicaid-program-integrity/medicaid-program-integrity-education).
## Billing and Claims Submission

### Medicare

### Medicaid
While each State Medicaid Program varies, general rules for all State Medicaid Programs require that you:

- 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

Find more information about your State's Medicaid Program on the [State Medicaid Profiles](#) webpage.

## Payment

### Medicare
Find information about payment for your provider type on the [MLN Publications](#) webpage. Enter “Medicare Payment Policy” in the Filter field.

### Medicaid
Find more information about your State's Medicaid Program on the [State Medicaid Profiles](#) webpage.

## Appeals

### Medicare
Find information about Medicare appeals in the "**Medicare Parts A & B Appeals Process**" educational product and the two web-based trainings: “Part C Appeals: Organization Determinations, Appeals & Grievances” and “Part D Coverage Determinations, Appeals & Grievances” on the [MLN LM/POS](#).

### Medicaid
Find more information about your State's Medicaid Program on the [State Medicaid Profiles](#) webpage.
Program Integrity

Medicare
Find information about compliance and fraud, waste, and abuse on the MLN Provider Compliance webpage.

Medicaid
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 Medicaid Profiles webpage.

Program Guidance

Medicare
Visit the Centers for Medicare & Medicaid Services (CMS) Regulations & Guidance webpage for information on rulings, transmittals, manuals, and other guidance.

MLN Matters® Articles are national articles that inform health care professionals about the latest changes to CMS programs.

Sign up for Medicare Program updates by following the instructions in the “CMS Electronic Mailing Lists: Keeping Health Care Professionals Informed” educational product.

Medicaid
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 sub-regulatory guidance. Search these documents on the Medicaid Federal Policy Guidance webpage.

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