

What are the parts of Medicare?



Part A (Hospital Insurance)

Helps cover:

- Inpatient care in hospitals
- Skilled nursing facility care
- Hospice care
- Home health care

See pages 25–28.



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 and supplies)
- Many preventive services (like screenings, shots, and yearly “Wellness” visits)

See pages 29–49.



Part D (Prescription drug coverage)

Helps cover:

- Cost of prescription drugs

Part D plans are run by private insurance companies that follow rules set by Medicare.

See pages 73–82.

Part C (Medicare Advantage)

- Private insurance plans that offer Medicare coverage
- Coverage is generally limited to providers in your local geographic area.

See pages 55–68.

Your Medicare options

When you first enroll in 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

- Original Medicare includes Medicare Part A (Hospital Insurance) and Part B (Medical Insurance). *Covers care from all providers that participate in Medicare nationwide.*
- If you want drug coverage, you can join a separate Part D plan.
- To help pay your out-of-pocket costs in Original Medicare (like your deductible and 20% coinsurance), you can also shop for and buy supplemental coverage.

Part A



Part B



You can add:

Part D



You can also add:

Supplemental coverage to help lower out-of-pocket costs



(Some examples include coverage from a Medicare Supplement Insurance (Medigap) policy, or coverage from a former employer or union.) *or from a Medicare savings program for lower income people.*

Medicare Advantage (also known as Part C)

- Medicare Advantage is an *“all-in-one”* is the name for private plans that are an alternative to Original Medicare *and covers* These *“bundled”* plans include Part A, Part B, and usually Part D. *Coverage is usually limited to providers in your local geographic area.*
- Some plans may have lower out-of-pocket costs than Original Medicare.
- Some plans offer *extra* benefits that Original Medicare doesn't cover— like *some* vision, hearing, or dental.

Part A



Part B



Most plans usually include:

Part D



Some plans also include:

Lower out-of-pocket costs

Extra Some other benefits

Supplemental coverage from a Medicare savings program for lower income people may be available.

AT A GLANCE

Original Medicare vs. Medicare Advantage



Doctor and hospital choice

Original Medicare	Medicare Advantage
You can go to any doctor provider that accepts Medicare nationwide.	In most cases, you'll need to use doctors providers in your local geographical area who are in the plan's network (for non-emergency or non-urgent care). Ask your doctor provider if they participate in any Medicare Advantage Plans.
In most cases you don't need a referral to see a specialist.	You may need to get a referral to see a specialist.



Cost

Original Medicare	Medicare Advantage
For Part B-covered services, you usually pay owe 20% of the Medicare approved amount after you meet your deductible.	Out-of-pocket costs vary —some plans have low or no out-of-pocket costs.
You pay a premium (monthly payment) for Part B . If you choose to buy prescription drug coverage, you'll pay that premium separately.	You may pay a premium for the plan (most include prescription drug coverage) and a premium for Part B . Some plans have a \$0 premium or will help pay all or part of your Part B premium.
There's no yearly limit on what you pay out-of-pocket, <i>but . . .</i> 	Plans have a yearly limit on what you pay out-of-pocket for Medicare Part A and B covered services. Once you reach your plan's limit, you'll pay nothing for Part A- and Part B- covered services for the rest of the year.
You can buy supplemental coverage to help pay your out-of-pocket costs (like your deductible and 20% coinsurance).	You can't buy or use separate supplemental coverage—but some plans have lower out-of-pocket costs than Original Medicare.



Coverage

Original Medicare	Medicare Advantage
Original Medicare covers medical services and supplies in hospitals, doctors' offices, and other health care settings.	Plans must cover all of the services that Original Medicare covers. Some plans offer extra benefits that Original Medicare doesn't cover — like <i>some</i> vision, hearing, or dental.
You can join a separate Medicare Prescription Drug Plan to get drug coverage.	Prescription drug coverage is usually included in most plans.
In most cases, you don't have to get a service or supply approved ahead of time for it to be covered.	In some cases, you have to get a service or supply approved ahead of time for it to be covered by the plan.



Travel

Original Medicare	Medicare Advantage
Original Medicare <i>covers care from all participating providers nationwide</i> , but generally doesn't cover care outside the U.S. You may be able to buy supplemental coverage that covers care outside the U.S.	Plans usually <i>only cover care from providers in your local geographic area</i> and don't cover care outside the U.S. Also, plans usually don't cover non-emergency care you get outside of your plan's network.

These topics are explained in more detail throughout this book.

- **Original Medicare:** See Section 3 (starting on page 51).
- **Medicare Advantage:** See Section 4 (starting on page 55).