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Medicare vs. Medicaid: What's the Difference?

	MEDICARE	MEDICAID
What is it?	A federal health insurance for people 65 and older with two exceptions: People under 65 with certain disabilities or people of any age with end-stage kidney disease or ALS (Lou Gehrig's disease)	A joint federal and state program that helps pay health-care costs for certain people with limited income. Several kinds of Medicaid programs help specific populations.
Who governs it?	Federal	State
What does it cover?	<p>It depends on the coverage you choose.</p> <ul style="list-style-type: none"> • Part A: Care and services received as an inpatient at a hospital or skilled nursing facility. • Part B: Doctor visits, care and services received as an outpatient, some preventive care • Part C: Medicare Advantage plans combine parts A and B and often include Part D drug coverage – all in one plan. • Part D: Prescription drugs 	<p>Each state creates its own programs under federal guidelines, with mandatory and optional benefits.</p> <p>Mandatory benefits include care and services received:</p> <ul style="list-style-type: none"> • In a hospital, skilled nursing facility, federally-qualified health center or rural health clinic. • From a doctor, nurse midwife or nurse practitioner
What does it cost?	It depends on the coverage you choose. Costs may include premiums, deductibles, co-pays and co-insurance.	It depends your income and the rules in your state. Costs may include premiums, deductibles, co-pays and co-insurance. Certain groups are exempt from most out-of-pocket costs.
How do I sign up for coverage?	For many people, enrollment is automatic on turning 65. You can also contact your local Social Security office about eligibility. The number for the Louisville is 800-772-1213.	Eligibility depends on the rules in your state. The number for the local office in Louisville is 855-306-8959.

Source: <https://www.medicaremadeclear.com/basics/medicare-vs-medicaid>