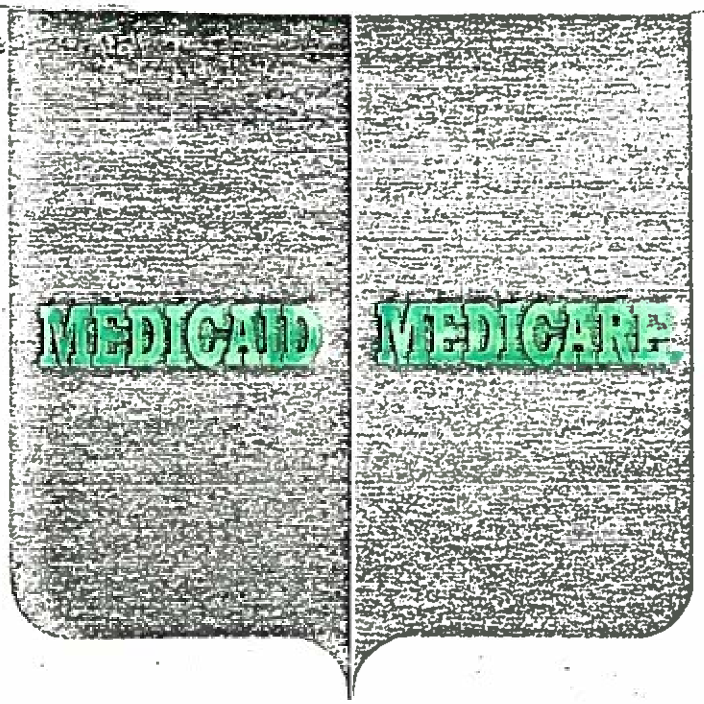
MEDICAID, MEDICARE WHICH
IS WHICH?



which is which?

MEDICAID
MEDICARE

which is which?

Caution

This is not a rule book for either program.

MEDICAID details are available from your Welfare Office.

MEDICARE details are available from your Social Security Office.

but MEDICARE and MEDICAID are not the same.

This booklet tells the differences between MEDICARE and MEDICAID.

both MEDICARE and MEDICAID help pay medical bills.

both MEDICARE and MEDICAID are part of the Social Security Act.

MEDICARE—often called Title 18

MEDICAID—often called Title 19

MEDICARE and MEDICAID can work together.

MEDICARE is for almost everybody 65 or older regardless of income.

MEDICARE also protects disabled people under 65 who have been entitled to Social Security disability payments for at least two years, and certain others with permanent kidney failure.

Some people can have both MEDICARE and MEDICAID.

MEDICAID
is a Federal-State partnership.

States design their own **MEDICAID** programs within Federal guidelines.

MEDICAID
varies somewhat from State to State.

MEDICAID
is available in all states.

MEDICAID States are listed on pages 26 and 27.

MEDICARE
is available in all states, including the District of Columbia, Guam, Puerto Rico, the Marianas, and the Virgin Islands.

MEDICARE HOSPITAL INSURANCE
provides basic protection against costs of
- inpatient hospital care
- post-hospital skilled nursing facility care
- home health care

MEDICARE MEDICAL INSURANCE
provides supplemental protection against costs of physicians' services, medical services and supplies, home health care services, outpatient hospital services, and therapy, and other services.

MEDICAID
is for *certain groups* of needy and low-income people:

- the aged (65 or older)
- the blind
- the disabled
- members of families with dependent children
- some other children

MEDICAID
is an assistance program.

Money from Federal, State, and local taxes pays medical bills for eligible people.

MEDICARE
is an insurance program.

Money from trust funds pays hospital and medical bills for entitled people.

MEDICARE
is a Federal program.

MEDICARE
is the same all over the United States.

MEDICAID, in all participating states, pays for at least these services:

- inpatient hospital care
- outpatient hospital services
- other laboratory and X-ray services
- skilled nursing facility services
- physicians' services
- screening, diagnosis, and treatment of children under 21
- home health care services
- family planning services
- rural health clinic services

In many states **MEDICAID** pays for such additional services as dental care, prescribed drugs, eye glasses, clinic services, intermediate care facility services, and other diagnostic, screening, preventive, and rehabilitative services.

MEDICAID can pay what **MEDICARE** does not pay for people who are eligible for both programs.

MEDICAID can pay the $304 and other costs that **MEDICARE** does not pay for people who are eligible.

MEDICAID can pay the first $75 a year of medical care expenses and can pay what **MEDICARE** does not pay of the remaining approved charges for eligible people.

MEDICARE

pays part—but not all—of hospital and other health care expenses for people who are insured.

HOSPITAL INSURANCE

pays covered inpatient hospital costs, for example, except for the first $304 in each benefit period.*

MEDICAL INSURANCE

generally pays $4 out of each $5 of approved medical charges except for the first $75 a year (1983 amount). It does not pay any of the first $75.

*Additional patient costs are applied for hospital stays beyond 60 days in a benefit period and for long stays in a skilled nursing facility.

MEDICARE HOSPITAL INSURANCE

is financed by payroll contributions from people presently working.

MEDICARE MEDICAL INSURANCE

is financed by monthly premiums paid by the entitled person and the Federal Government. The Government pays about 75% of the costs. The monthly premium now is: $12.20 for each entitled person, through December 31, 1983.

MEDICAID can pay this $12.20* for eligible people

*monthly premium amount is increased every January 1.

MEDICAID
is financed by Federal and State governments.

The Federal Government contributes from 50% (to the States with the highest per-capita income)

to 78% (to the State with the lowest per-capita income) of medical care costs for needy and low-income people who are aged, blind, disabled, under 21, or members of families with dependent children.

States pay the remainder, often with help from local governments.

MEDICAID
paid medical bills last year for almost 22 million people who were aged, blind, disabled, under 21, or members of families with dependent children.

MEDICARE
will pay medical bills for nearly 18½ million people this year.

HOSPITAL INSURANCE
protects almost 29 million people.

About 28 million people are also signed up for
MEDICAL INSURANCE.

This means that more than 11% of all the people in the United States have the protection of MEDICARE.

MEDICARE
is operated by the Federal Government.

The Health Care Financing Administration
States Department of Health, and Human Services is responsible for MEDICARE.

MEDICAID
is operated by State governments within Federal guidelines.

The Health Care Financing Administration of the United States Department of Health, and Human Services is responsible for Federal aspects of MEDICAID.

thus MEDICARE and MEDICAID benefit everybody by improving the quality, the quantity, the efficiency, the availability, and the effectiveness of hospital and medical services in the United States.

both MEDICARE and MEDICAID
- insist on high standards
- support development of needed services
- encourage innovation in medical care delivery
- require review of care
- promote cost containment

and, in addition, MEDICAID
- requires that medical services be available to all eligible people in a State
- trains and employs neighborhood people as community health workers

MEDICARE has existed in all states since 1966.

MEDICAID now exists in all states.

These 34 MEDICAID programs cover people who are eligible for Aid to Families with Dependent Children and Supplemental Security Income, as well as some other low-income people.

Arkansas
California
*Connecticut
District of Columbia
*Guam
*Hawaii
*Illinois
Kansas
Kentucky
Louisiana
Maine
Maryland
Massachusetts
Michigan
*Minnesota
Montana
*Nebraska
*New Hampshire
*New York
*North Carolina
*North Dakota

Northern Mariana Islands
*Oklahoma
Pennsylvania
Puerto Rico
Rhode Island
Tennessee
*Utah
Vermont
*Virgin Islands
*Virginia
Washington
West Virginia
Wisconsin

These 21 MEDICAID programs cover only people who are eligible for Aid to Families with Dependent Children and Supplemental Security Income.

Alabama
Alaska
Arizona
Colorado
Delaware
Florida
Georgia
Idaho
*Indiana
Iowa
*Mississippi
*Missouri
Nevada
New Jersey
New Mexico
*Ohio
Oregon
South Carolina
South Dakota
Texas
Wyoming

*These States do not use national SSI standards for age, disability, income and resources to determine Medicaid eligibility. Instead they use their own standards that are usually stricter.

Discrimination Prohibited

Title VI of the Civil Rights Act of 1964 states: "No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefit of, or be subjected to discrimination under any program or activity receiving Federal financial assistance."

MEDICARE and MEDICAID must be operated in compliance with this law.

to apply for MEDICARE go to your nearest Social Security Office.

to find out where to apply for MEDICAID call your state or local Welfare Office.

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