What is Medicare?*

How does it work?

How you get Medicare: Most people sign up at age 65 for basic coverage (Part A and B). Some people with disabilities also qualify. You have to pick a Part D plan to get drug coverage or an Advantage Plan (Part C) that covers Parts A, B and D, but can limit your choices of care.

2.

How much does Medicare cost?

Most people pay a standard premium (about \$140/mo) for Part B and extra for Part D. High earners pay more, depending on income. Those with low income can get help paying premiums or may get Medicaid and pay no premiums.

3.

What does Medicare
cover? Hospitalization,
outpatient care, drugs and
very limited home and
nursing care.

4.

my costs? No. There are deductibles you have to pay before Medicare pays anything (about \$1400 for hospital and \$140 for outpatient).

Are there other out-of-pocket costs? Yes, usually 20% of your costs, except the first 60 days in the hospital. Drug costs vary depending on the plan you pick. There is no limit to out-of-pocket expenses.**

6.

What are Medigap policies? They are private plans that you can pay for that can limit your out-of-pocket costs. They are strictly regulated and cannot cover drugs.

How is Medicare administered?
Medicare pays 20 private insurance companies (local carriers) to manage its claims. They each interpret Medicare rules but they can be appealed to Medicare or the courts.

8.

How is Medicare financed? The money for Medicare comes from a mixture of general revenues (41%), payroll taxes (38%), premiums (13%) and a few other sources.

MEDICARE FOR ALL includes many improvements to Medicare in addition to providing it to everyone.

*This fact sheet describes the most common situations. For more details see More Details About Medicare at https://www.acamfausa.org or

https://www.kff.org/medicare/report/a-primer-on-medicare-key-facts-about-the-medicare-program-and-the-people-it-covers/



For more details go to: https://www.acamfausa.org