

Questions and Answers About Medicare for Caregivers

Who is eligible for Medicare? Generally, Medicare is available to people who are 65 or older, people younger than 65 with certain disabilities, and people with End Stage Renal Disease (permanent kidney failure requiring dialysis or a transplant).

How do people apply for Medicare? Apply for Medicare online at www.medicare.gov, or make an appointment to apply in person by calling 1-800-772-1213. TTY users should call 1-800-325-0778. People who are already receiving Social Security benefits will automatically be enrolled in Medicare Parts A and B, but can decide not to take Part B, which requires paying the Part B premium each month.

How are Medicare claims submitted? Providers (e.g., hospitals, skilled nursing facilities, home health agencies, physicians, pharmacies, and suppliers) are required by law to file Medicare claims for covered services for people with Medicare.

Does Medicare cover home health services? People with Medicare are covered for home health care services if they meet all of the following conditions:

1. A doctor has both determined the need for medical care at home and outlined a plan for that care.
2. They require skilled nursing care, physical therapy, speech-language therapy, or continued occupational therapy.
3. They are being cared for by a Medicare-certified home health agency.
4. They must be homebound. This means that leaving home is a major effort.

Does Medicare pay for home health aides?

Medicare Parts A and B will cover home health services such as nursing care or other therapy on a part-time or intermittent basis for people who are eligible for home health

services. Home health aides typically provide help with basic tasks such as bathing, using the bathroom, and dressing and are not usually covered by Medicare. For more information, visit www.medicare.gov and search “Medicare and Home Health Care.”

Does Medicare cover long-term care and skilled nursing care? Generally, Medicare does not pay for long-term care—a term used to describe non-skilled personal care such as help with activities such as bathing, dressing, eating, getting in or out of bed, and using the bathroom. It does pay for medically-necessary skilled care, which is usually available for a short time after hospitalization. Skilled care refers to a level of care that includes service that can only be performed safely and correctly by a licensed nurse (either a registered nurse or a licensed practical nurse).

Does Medicare cover care in a nursing home? Medicare Part A only covers skilled care given in a certified nursing facility for individuals who meet certain conditions. To learn more, visit www.medicare.gov and search “Medicare Coverage of Skilled Nursing Care” or visit *Ask Medicare* at www.medicare.gov/caregivers and select “Caregiver Topics” and then “Paying for care” and “Paying for nursing home care.” To learn about extra help that may be available for paying for nursing home care, contact your State Health Insurance Program (SHIP). Contact information is available at the “Helpful Contacts” link on www.medicare.gov.

Does Medicare cover hospice care? Medicare pays for hospice care.

What medical supplies does Medicare cover? Medicare Part B helps pay for oxygen, catheters, and diabetic supplies (Part D pays for insulin). It also helps pay for equipment such as oxygen machines, wheelchairs, walkers, and other medically necessary equipment a doctor prescribes for use in the home. Some equipment must be

rented and some must be purchased. Visit www.medicare.gov and select “Your Medicare Coverage” or call 1-800-MEDICARE (1-800-633-4227) to learn more. TTY users should call 1-877-486-2048.

Is help in paying for care available? Help with Medicare premiums and other expenses is available through numerous sources, including State Medical Assistance and SHIP Offices, and from Federal sources such as Social Security and Medicaid. To learn more go to www.medicare.gov/caregivers and select “Caregiver Topics” and “Paying for Care.”

Will the new health care law have an impact on Medicare coverage or benefits? The new health care law expands access to health insurance and offers

additional improvements to protect people with Medicare. People with Medicare do not need to make any changes to their plans as a result of the law. For details on the new law, please visit www.medicare.gov and search “Medicare and the New Health Law—What it Means to You.” Information is also available at the “Seniors” link at www.healthcare.gov.

Where can people with Medicare get answers to billing questions? Questions about billing should first be directed to the health care providers who delivered the care or services. If the question isn’t resolved, call 1-800-MEDICARE (1-800-633-4227).

Ask Medicare (www.medicare.gov/caregivers) also offers information on enrolling in Medicare, choosing a prescription drug plan, finding state and local resources to support caregiving tasks, accessing in-home services, and a free e-newsletter with the latest Medicare updates.