There are four parts to Medicare. It is important to understand what they cover so you can make informed choices to support your health care needs.

**Part A** covers certain inpatient hospitalization, hospice care and home care services. When you become eligible for Medicare, Part A is typically available with no monthly cost if you have a professional work history and have paid income taxes.

**Part B** covers outpatient services like doctor’s visits, screenings and some medical equipment and supplies. You will pay monthly fees for Part B coverage that are called premiums. There are additional costs for services after paying a certain amount of money towards your health care each year. These are called copayments and deductibles.

**Part C**, also known as Medicare Advantage, is a different coverage plan that offers all of your Medicare benefits through one private health plan. Although these plans must offer at least the same benefits as Medicare Part A and B, and in most cases Part D, these plans may have different rules, costs and coverage restrictions.

**Part D**, also known as Medicare Prescription Drug Plan, covers outpatient prescription drugs.

For more information on coverage and deductibles for each part of Medicare, visit [www.medicare.gov](http://www.medicare.gov) or call 800-633-4227.

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Even with Medicare A and B, there are still “gaps” in coverage. For example, there are fees associated with Part B services, and neither A nor B offers prescription drug coverage. Some individuals choose to supplement their coverage with a “retiree plan” that are health care benefits sometimes offered by former employers or unions.

Others may supplement their Medicare coverage with private Medigap policies. According to the Kaiser Family Foundation, Medigap enrollment and consumer protections vary across states. In all but four states, insurance companies can deny private Medigap insurance policies to seniors after their initial enrollment in Medicare because of a pre-existing medical condition, such as a cancer diagnosis, except under limited, qualifying circumstances. Learn more by visiting [www.kff.org](http://www.kff.org).
When deciding on a Medicare plan, know which part or parts can work best for you. Part A and Part B can cover chemotherapy but there may still be costs to you. Cancer screenings, such as colonoscopies, are also covered by Part B.

Clinical trials are research studies that work toward new cancer treatments. Clinical trials give patients a chance to help identify new therapies for people with cancer. If you are interested in participating in a clinical trial, Part A and Part B may cover some of the costs. Before enrolling in a clinical trial, make sure you understand what your Medicare plan will cover. Your doctor should be able to help.

Before seeing a doctor, call ahead to make sure the doctor accepts Medicare. You can learn more about Medicare coverage options and find plans in your area by visiting the Medicare website, www.medicare.gov. Call 800-813-HOPE (4673) and speak with a CancerCare professional oncology social worker who can help you locate additional information and supportive resources.

Medicare and Medicaid

Medicare and Medicaid have similar names but are very different. While both are health insurance programs, Medicaid coverage is for low-income people and can change state by state. Medicare is federally run for individuals over 65 years of age.

CancerCare® Can Help

Founded in 1944, CancerCare is the leading national organization providing free support services and information to help people manage the emotional, practical and financial challenges of cancer. Our comprehensive services include resource navigation, counseling and support groups over the phone, online and in-person, educational workshops, publications and financial and co-payment assistance. All CancerCare services are provided by master’s-prepared oncology social workers and world-leading cancer experts.

To learn more, visit www.cancercare.org or call 800-813-HOPE (4673).

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