

Understanding Medicaid and Medicare

The Basics

What is Medicaid?

Medicaid is a network of statewide health care programs cooperatively funded by federal and state governments. Each state administers its own program. In Washington state, the Medicaid program is called Apple Health. Washington follows broad federal guidelines, statutes, regulations, and policies when administering Apple Health (Medicaid).

Apple Health includes:

- **Classic Medicaid:** For individuals age 65 and older, with blindness or a disability, or in need of long-term services and supports.
- **Modified Adjusted Gross Income (MAGI):** For individual adults, children, parents or caretakers applying with children, and pregnant people.

What is Medicare?

Medicare is federal health care coverage for people 65 or older or under 65 and on Medicare due to a disability. Medicare coverage for people of any age with End-Stage Renal Disease (ESRD) and amyotrophic lateral sclerosis (ALS).

Medicare is a national program the federal government administers and includes Part A (hospital insurance), Part B (medical insurance), Part C (Medicare Advantage), and Part D (prescription drug benefit).

Clients may choose:

- Part A and Part B services through Original Medicare with optional Part D coverage through an approved stand-alone Medicare drug plan
- Part A and Part B services through Part C (Medicare Advantage) if they live in its service area, with a drug plan included in most plans (not all Medicare Advantage plans offer prescription drug coverage, confirm with MA plan)

Who are dual-eligible clients?

Dual-eligible clients are eligible for both Medicare and Apple Health. They include clients enrolled in Medicare Part A, Part B, or both, and getting full Apple Health benefits or help with Medicare premiums or cost-sharing through one of these Medicare Savings Programs (MSP) eligibility groups:

- **Qualified Medicare Beneficiary (QMB) Program:** Helps pay Part A, Part B (or both premiums), deductibles, coinsurance, and copayments.
- **Specified Low-Income Medicare Beneficiary (SLMB) Program:** Helps pay only Part B premiums.
- **Qualifying Individual (QI) Program:** Helps pay only Part B premiums. Funding is limited to a certain amount each year per state. An individual can't be eligible for another Medicaid eligibility group.
- **Qualified Disabled Working Individual (QDWI) Program:** Pays only Part A premiums for disabled and working clients.

**Cost sharing, coinsurance, and deductibles are dependent on Medicaid level of eligibility.*

Partial-Benefit Dual-Eligible Individuals

Note: This table is for internal use only.

Dual-eligibility category	Eligibility criteria	Medicaid coverage
Qualified Medicare Beneficiary (QMB)	< 110% Federal Poverty Limit (FPL)	Part A and b premiums and Medicare co-pays and deductibles
Specific Low-Income Medicare Beneficiary (SLMB-only)	111-120% FPL	Part B premiums
Qualifying Individual (QI-1)	121-138% FPL	Part B premiums
Qualifying Disabled and Working Individuals (QDWI)	< 200% FPL	Part A premiums

Full-Benefit Dual-Eligible Individuals

Dual-eligibility category	Eligibility criteria	Medicaid coverage
Qualified Medicare Beneficiary Plus (QMB+)	Same as QMB only plus meets requirements for full Medicaid	All Medicare and Medicaid benefits, premiums, and cost-sharing (deductibles and co-pays)
Specified Low-Income Medicare Beneficiary (SLMB+)	Same as SLMB plus meets the requirements for full Medicaid	
Other Full-Benefit Dual-Eligible (FBDE)		